

Appendix C - SoonerSelect Medical Rate Build-up: Select

Delivery Date: December 22, 2022

Disclaimer: This deliverable was prepared by Guidehouse Inc. for the sole use and benefit of, and pursuant to a client relationship exclusively with the Oklahoma Health Care Authority ("Client").

The work presented in this deliverable represents Guidehouse's professional judgement based on the information available at the time this report was prepared. The information in this deliverable may not be relied upon by anyone other than Client. Accordingly, Guidehouse disclaims any contractual or other responsibility to others based on their access to or use of the deliverable. This deliverable must be disclosed and shared in its entirety.

A -0.1057% adjustment has been applied for recoveries outside of the claims system.

Capitated NEMT claims are included for CY2021 only.

TANF/CHIP Child, Newborn < 1, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	45,582
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	44,115

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	4,364	\$ 1,189.47	\$ 432.55	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 424.72
Outpatient Hospital - ER	924	\$ 240.99	\$ 18.56	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 18.11
Outpatient Hospital - Non-ER	689	\$ 205.40	\$ 11.79	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 12.58
Physician/Professional	13,464	\$ 152.87	\$ 171.52	1.00%	3.50%	0.31%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 199.16
Clinics (w/FQHC/RHC)	1,953	\$ 197.47	\$ 32.13	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 36.65
Laboratory/Radiology/Pathology	5,711	\$ 16.89	\$ 8.04	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 8.93
Dental - Medical	1	\$ 144.01	\$ 0.02	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.02
DME and Supplies	11,649	\$ 8.40	\$ 8.15	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 9.03
Home Health/Hospice	1,167	\$ 8.81	\$ 0.86	1.00%	2.00%	20.91%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 1.14
Physical/Occupational Therapy	385	\$ 109.64	\$ 3.51	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 4.04
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,498	\$ 63.15	\$ 23.67	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 27.56
Non-Emergency Transportation	12,045	\$ 0.64	\$ 0.64	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 0.69
Behavioral Health	8	\$ 43.34	\$ 0.03	0.00%	3.50%	0.27%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ 0.03
Indian Health Referrals	0	\$ 63.49	\$ 0.00	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.00
Family Planning	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
All Other	6,915	\$ 25.41	\$ 14.64	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 15.96
Gross Benefit Total			\$ 726.12	1.29%	3.45%	0.31%	2.65%					\$ 758.63

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.00%	\$ 58.04
Underwriting Gain	1.50%	\$ 12.44
Total Benefit and Non-Benefit PMPM		\$ 829.10

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 829.10
Premium Based Taxes	2.25%	\$ 19.08
Final Capitation PMPM		\$ 848.18

TANF/CHIP Child, Newborn < 1, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	50,435
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	48,245

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	4,734	\$ 1,183.84	\$ 467.04	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 458.58
Outpatient Hospital - ER	1,018	\$ 198.55	\$ 16.84	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 16.43
Outpatient Hospital - Non-ER	567	\$ 267.95	\$ 12.65	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 13.50
Physician/Professional	9,665	\$ 192.87	\$ 155.34	1.00%	3.50%	0.37%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 180.48
Clinics (w/FQHC/RHC)	2,313	\$ 214.65	\$ 41.38	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 47.19
Laboratory/Radiology/Pathology	5,746	\$ 14.47	\$ 6.93	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 7.70
Dental - Medical	2	\$ 183.09	\$ 0.03	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
DME and Supplies	5,641	\$ 9.66	\$ 4.54	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 5.03
Home Health/Hospice	276	\$ 16.26	\$ 0.37	1.00%	2.00%	10.07%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.45
Physical/Occupational Therapy	417	\$ 90.98	\$ 3.16	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 3.63
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	2,776	\$ 66.61	\$ 15.41	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 17.94
Non-Emergency Transportation	9,331	\$ 0.61	\$ 0.47	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 0.51
Behavioral Health	8	\$ 125.53	\$ 0.09	0.00%	3.50%	0.27%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ 0.10
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	1	\$ 251.77	\$ 0.02	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.02
All Other	1,182	\$ 31.31	\$ 3.09	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 3.36
Gross Benefit Total			\$ 727.35	1.33%	3.47%	0.30%	2.67%					\$ 754.96

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.00%	\$ 57.76
Underwriting Gain	1.50%	\$ 12.38
Total Benefit and Non-Benefit PMPM		\$ 825.09

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 825.09
Premium Based Taxes	2.25%	\$ 18.99
Final Capitation PMPM		\$ 844.08

TANF/CHIP Child, Newborn < 1, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	39,888
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	38,262

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	4,826	\$ 1,038.66	\$ 417.70	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 410.13
Outpatient Hospital - ER	767	\$ 224.06	\$ 14.32	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 13.97
Outpatient Hospital - Non-ER	339	\$ 304.54	\$ 8.61	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 9.19
Physician/Professional	9,889	\$ 215.57	\$ 177.64	1.00%	3.50%	0.32%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 206.29
Clinics (w/FQHC/RHC)	527	\$ 224.45	\$ 9.86	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 11.25
Laboratory/Radiology/Pathology	7,005	\$ 16.56	\$ 9.67	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 10.75
Dental - Medical	1	\$ 671.05	\$ 0.03	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
DME and Supplies	9,624	\$ 8.89	\$ 7.13	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 7.89
Home Health/Hospice	1,089	\$ 8.22	\$ 0.75	1.00%	2.00%	22.59%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 1.01
Physical/Occupational Therapy	539	\$ 86.02	\$ 3.86	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 4.43
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	2,781	\$ 166.10	\$ 38.49	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 44.82
Non-Emergency Transportation	7,152	\$ 0.80	\$ 0.47	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 0.51
Behavioral Health	6	\$ 60.99	\$ 0.03	0.00%	3.50%	0.27%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
All Other	2,086	\$ 30.49	\$ 5.30	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 5.78
Gross Benefit Total			\$ 693.86	1.27%	3.51%	0.31%	2.65%					\$ 726.09

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.00%	\$ 55.55
Underwriting Gain	1.50%	\$ 11.90
Total Benefit and Non-Benefit PMPM		\$ 793.54

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 793.54
Premium Based Taxes	2.25%	\$ 18.27
Final Capitation PMPM		\$ 811.81

TANF/CHIP Child, Newborn < 1, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	66,947
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	63,948

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	3,935	\$ 1,189.37	\$ 390.02	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 382.95
Outpatient Hospital - ER	1,006	\$ 225.46	\$ 18.89	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 18.43
Outpatient Hospital - Non-ER	1,005	\$ 173.87	\$ 14.56	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 15.54
Physician/Professional	9,926	\$ 183.68	\$ 151.93	1.00%	3.50%	0.31%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 176.42
Clinics (w/FQHC/RHC)	2,233	\$ 184.56	\$ 34.35	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 39.17
Laboratory/Radiology/Pathology	5,018	\$ 16.08	\$ 6.73	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 7.47
Dental - Medical	2	\$ 364.36	\$ 0.05	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.06
DME and Supplies	6,115	\$ 9.07	\$ 4.62	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 5.12
Home Health/Hospice	810	\$ 11.00	\$ 0.74	1.00%	2.00%	16.18%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.95
Physical/Occupational Therapy	298	\$ 95.26	\$ 2.37	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 2.72
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,857	\$ 94.41	\$ 30.34	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 35.33
Non-Emergency Transportation	12,278	\$ 0.57	\$ 0.58	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 0.63
Behavioral Health	28	\$ 76.74	\$ 0.18	0.00%	3.50%	0.27%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ 0.20
Indian Health Referrals	1	\$ 92.37	\$ 0.00	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.00
Family Planning	1	\$ 6,612.56	\$ 0.30	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.33
All Other	5,401	\$ 27.44	\$ 12.35	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 13.47
Gross Benefit Total			\$ 668.02	1.29%	3.47%	0.30%	2.65%					\$ 698.80

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 57.59
Underwriting Gain	1.50%	\$ 11.52
Total Benefit and Non-Benefit PMPM		\$ 767.92

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 767.92
Premium Based Taxes	2.25%	\$ 17.68
Final Capitation PMPM		\$ 785.59

TANF/CHIP Child, Newborn < 1, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	11,267
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	2,732

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	2,915	\$ 1,247.74	\$ 303.14	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 297.65
Outpatient Hospital - ER	935	\$ 239.91	\$ 18.69	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 18.23
Outpatient Hospital - Non-ER	420	\$ 347.49	\$ 12.16	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 12.98
Physician/Professional	8,592	\$ 158.83	\$ 113.72	1.00%	3.50%	0.28%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 132.01
Clinics (w/FQHC/RHC)	1,161	\$ 184.16	\$ 17.82	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 20.33
Laboratory/Radiology/Pathology	4,846	\$ 15.51	\$ 6.27	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 6.96
Dental - Medical	-	\$ -	\$ -	1.00%	3.50%	0.00%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	10,125	\$ 8.83	\$ 7.45	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 8.25
Home Health/Hospice	6,023	\$ 8.24	\$ 4.14	1.00%	2.00%	22.44%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 5.59
Physical/Occupational Therapy	437	\$ 78.12	\$ 2.85	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 3.27
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,739	\$ 203.33	\$ 80.30	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 93.51
Non-Emergency Transportation	9,374	\$ 1.25	\$ 0.98	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 1.06
Behavioral Health	6	\$ 900.95	\$ 0.48	0.00%	3.50%	0.27%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ 0.53
Indian Health Referrals	60	\$ 79.05	\$ 0.39	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.43
Family Planning	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
All Other	10,614	\$ 26.41	\$ 23.36	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 25.47
Gross Benefit Total			\$ 591.74	1.16%	3.56%	0.43%	2.69%					\$ 626.27

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 51.62
Underwriting Gain	1.50%	\$ 10.32
Total Benefit and Non-Benefit PMPM		\$ 688.20

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 688.20
Premium Based Taxes	2.25%	\$ 15.84
Final Capitation PMPM		\$ 704.04

TANF/CHIP Child, Newborn < 1, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	789
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	203

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	3,208	\$ 1,131.34	\$ 302.46	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 296.98
Outpatient Hospital - ER	1,190	\$ 164.06	\$ 16.27	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 15.87
Outpatient Hospital - Non-ER	168	\$ 839.38	\$ 11.74	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 12.53
Physician/Professional	5,707	\$ 283.96	\$ 135.04	1.00%	3.50%	0.42%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 156.98
Clinics (w/FQHC/RHC)	459	\$ 207.17	\$ 7.93	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 9.04
Laboratory/Radiology/Pathology	3,791	\$ 16.26	\$ 5.14	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 5.71
Dental - Medical	-	\$ -	\$ -	1.00%	3.50%	0.00%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	278	\$ 377.45	\$ 8.75	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 9.69
Home Health/Hospice	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Physical/Occupational Therapy	1,619	\$ 94.54	\$ 12.76	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 14.65
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	2,469	\$ 214.58	\$ 44.15	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 51.42
Non-Emergency Transportation	518	\$ 11.65	\$ 0.50	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 0.54
Behavioral Health	-	\$ -	\$ -	0.00%	3.50%	0.00%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ -
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	46	\$ 102.40	\$ 0.39	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.43
All Other	2,351	\$ 47.14	\$ 9.23	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 10.07
Gross Benefit Total			\$ 554.36	1.23%	3.52%	0.31%	2.66%					\$ 583.91

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 48.12
Underwriting Gain	1.50%	\$ 9.62
Total Benefit and Non-Benefit PMPM		\$ 641.65

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 641.65
Premium Based Taxes	2.25%	\$ 14.77
Final Capitation PMPM		\$ 656.42

TANF/CHIP Child, Newborn < 1, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	1,066
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	256

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	2,663	\$ 985.94	\$ 218.79	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 214.83
Outpatient Hospital - ER	723	\$ 243.74	\$ 14.69	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 14.33
Outpatient Hospital - Non-ER	203	\$ 227.71	\$ 3.86	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 4.12
Physician/Professional Clinics (w/FQHC/RHC)	5,475	\$ 187.49	\$ 85.54	1.00%	3.50%	0.29%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 99.31
Laboratory/Radiology/Pathology	102	\$ 225.51	\$ 1.91	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 2.18
Dental - Medical	4,951	\$ 14.77	\$ 6.09	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 6.77
DME and Supplies	11	\$ 186.84	\$ 0.18	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.20
Home Health/Hospice	549	\$ 48.86	\$ 2.24	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 2.48
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
ICF/MR Services	543	\$ 96.86	\$ 4.38	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 5.03
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	2,979	\$ 231.93	\$ 57.57	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 67.04
Non-Emergency Transportation	3,754	\$ 1.39	\$ 0.43	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 0.47
Behavioral Health	283	\$ 58.10	\$ 1.37	0.00%	3.50%	0.27%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ 1.51
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
All Other	2,951	\$ 38.64	\$ 9.50	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 10.36
Gross Benefit Total			\$ 406.55	1.13%	3.64%	0.28%	2.70%					\$ 428.62

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 37.89
Underwriting Gain	1.50%	\$ 7.10
Total Benefit and Non-Benefit PMPM		\$ 473.61

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 473.61
Premium Based Taxes	2.25%	\$ 10.90
Final Capitation PMPM		\$ 484.52

TANF/CHIP Child, Newborn < 1, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	5,156
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	1,192

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	2,323	\$ 1,094.80	\$ 211.90	1.50%	3.50%	0.27%	2.98%	5.00%	-25.00%	75.00%	-15.94%	\$ 208.06
Outpatient Hospital - ER	857	\$ 214.96	\$ 15.35	0.50%	4.00%	0.27%	3.61%	5.00%	-25.00%	75.00%	-15.94%	\$ 14.97
Outpatient Hospital - Non-ER	544	\$ 322.65	\$ 14.62	3.50%	1.00%	0.27%	3.61%	5.00%	-15.00%	75.00%	-8.06%	\$ 15.61
Physician/Professional	4,696	\$ 195.10	\$ 76.36	1.00%	3.50%	0.29%	1.80%	-2.50%	5.00%	75.00%	1.78%	\$ 88.64
Clinics (w/FQHC/RHC)	501	\$ 183.32	\$ 7.65	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 8.72
Laboratory/Radiology/Pathology	3,557	\$ 19.55	\$ 5.80	1.00%	2.00%	0.27%	2.51%	-0.50%	1.00%	75.00%	0.37%	\$ 6.44
Dental - Medical	-	\$ -	\$ -	1.00%	3.50%	0.00%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	7,307	\$ 7.28	\$ 4.44	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 4.91
Home Health/Hospice	142	\$ 183.45	\$ 2.18	1.00%	2.00%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 2.41
Physical/Occupational Therapy	308	\$ 83.54	\$ 2.15	1.00%	3.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 2.47
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,673	\$ 264.30	\$ 80.89	0.00%	5.00%	0.27%	2.84%	-2.50%	2.50%	75.00%	-0.05%	\$ 94.19
Non-Emergency Transportation	36,994	\$ 0.21	\$ 0.66	1.00%	2.00%	0.27%	0.27%	-2.50%	2.50%	75.00%	-0.05%	\$ 0.71
Behavioral Health	2	\$ 64.22	\$ 0.01	0.00%	3.50%	0.27%	0.78%	0.00%	0.00%	75.00%	0.00%	\$ 0.01
Indian Health Referrals	26	\$ 106.84	\$ 0.23	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.25
Family Planning	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
All Other	4,379	\$ 29.99	\$ 10.95	1.00%	2.00%	0.27%	2.51%	0.50%	-2.50%	75.00%	-1.51%	\$ 11.94
Gross Benefit Total			\$ 433.17	1.12%	3.63%	0.28%	2.74%					\$ 459.34

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 40.60
Underwriting Gain	1.50%	\$ 7.61
Total Benefit and Non-Benefit PMPM		\$ 507.56

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 507.56
Premium Based Taxes	2.25%	\$ 11.68
Final Capitation PMPM		\$ 519.24

TANF/CHIP Child, Newborn < 1, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	10,050
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	9,947

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	3,223	\$ 970.54	\$ 260.65	1.50%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 271.83
Outpatient Hospital - ER	279	\$ 190.41	\$ 4.43	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 5.21
Outpatient Hospital - Non-ER	323	\$ 162.80	\$ 4.39	3.50%	1.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 5.16
Physician/Professional	5,108	\$ 147.85	\$ 62.93	1.00%	3.50%	0.42%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 72.03
Clinics (w/FQHC/RHC)	579	\$ 172.76	\$ 8.34	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 9.53
Laboratory/Radiology/Pathology	3,859	\$ 13.45	\$ 4.32	1.00%	2.00%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 4.79
Dental - Medical	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ -
DME and Supplies	4,369	\$ 6.54	\$ 2.38	1.00%	2.00%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.63
Home Health/Hospice	4,766	\$ 8.53	\$ 3.39	1.00%	2.00%	21.67%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 4.55
Physical/Occupational Therapy	335	\$ 64.00	\$ 1.78	1.00%	3.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.05
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	2,667	\$ 57.32	\$ 12.74	0.00%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 14.92
Non-Emergency Transportation	21,327	\$ 0.29	\$ 0.52	1.00%	2.00%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.57
Behavioral Health	1	\$ 60.78	\$ 0.01	0.00%	3.50%	0.27%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 0.01
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	1	\$ 16.73	\$ 0.00	1.00%	2.00%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.00
All Other	1,802	\$ 27.00	\$ 4.05	1.00%	2.00%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 4.49
Gross Benefit Total			\$ 369.94	1.34%	3.47%	0.49%	-4.94%					\$ 397.77

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.50%	\$ 37.57
Underwriting Gain	1.50%	\$ 6.63
Total Benefit and Non-Benefit PMPM		\$ 441.97

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 441.97
Premium Based Taxes	2.25%	\$ 10.17
Final Capitation PMPM		\$ 452.14

TANF/CHIP Child, Newborn < 1, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	767
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	177

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	2,407	\$ 1,239.08	\$ 248.57	1.50%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 259.23
Outpatient Hospital - ER	172	\$ 156.39	\$ 2.24	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 2.64
Outpatient Hospital - Non-ER	172	\$ 346.46	\$ 4.97	3.50%	1.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 5.84
Physician/Professional	2,403	\$ 205.67	\$ 41.18	1.00%	3.50%	0.43%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 47.14
Clinics (w/FQHC/RHC)	392	\$ 158.21	\$ 5.17	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 5.91
Laboratory/Radiology/Pathology	3,568	\$ 14.68	\$ 4.36	1.00%	2.00%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 4.83
Dental - Medical	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ -
DME and Supplies	158	\$ 32.93	\$ 0.43	1.00%	2.00%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.48
Home Health/Hospice	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Physical/Occupational Therapy	141	\$ 151.11	\$ 1.77	1.00%	3.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.04
ICF/MR Services	-	\$ -	\$ -	1.50%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.50%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	2,265	\$ 204.18	\$ 38.53	0.00%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 45.14
Non-Emergency Transportation	34,455	\$ 0.26	\$ 0.74	1.00%	2.00%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.81
Behavioral Health	16	\$ 70.28	\$ 0.09	0.00%	3.50%	0.27%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 0.10
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	1.00%	2.00%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
All Other	1,659	\$ 62.93	\$ 8.70	1.00%	2.00%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 9.63
Gross Benefit Total			\$ 356.77	1.27%	3.57%	0.29%	-4.77%					\$ 383.79

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.50%	\$ 36.25
Underwriting Gain	1.50%	\$ 6.40
Total Benefit and Non-Benefit PMPM		\$ 426.44

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 426.44
Premium Based Taxes	2.25%	\$ 9.82
Final Capitation PMPM		\$ 436.25

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	681,495
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	574,838

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	57	\$ 1,862.88	\$ 8.89	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.52
Outpatient Hospital - ER	374	\$ 277.61	\$ 8.64	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.36
Outpatient Hospital - Non-ER	284	\$ 493.87	\$ 11.69	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 11.32
Physician/Professional	3,668	\$ 109.31	\$ 33.41	1.00%	3.50%	0.64%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 39.53
Clinics (w/FQHC/RHC)	761	\$ 189.10	\$ 11.99	1.00%	3.50%	1.95%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 13.91
Laboratory/Radiology/Pathology	1,018	\$ 25.16	\$ 2.13	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 2.44
Dental - Medical	11	\$ 355.77	\$ 0.32	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.37
DME and Supplies	10,924	\$ 3.03	\$ 2.76	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.85
Home Health/Hospice	627	\$ 8.30	\$ 0.43	1.50%	2.50%	22.37%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.60
Physical/Occupational Therapy	1,133	\$ 92.22	\$ 8.70	1.00%	3.50%	2.18%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 9.88
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,286	\$ 90.39	\$ 32.29	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 37.08
Non-Emergency Transportation	16,255	\$ 0.41	\$ 0.55	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.61
Behavioral Health	2,936	\$ 178.93	\$ 43.77	0.00%	3.50%	2.23%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 43.25
Indian Health Referrals	0	\$ 111.26	\$ 0.00	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.00
Family Planning	107	\$ 23.44	\$ 0.21	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.24
All Other	1,922	\$ 21.53	\$ 3.45	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 3.67
Gross Benefit Total			\$ 169.26	0.46%	3.69%	1.12%	2.08%					\$ 180.63

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 19.28
Underwriting Gain	1.50%	\$ 3.04
Total Benefit and Non-Benefit PMPM		\$ 202.96

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 202.96
Premium Based Taxes	2.25%	\$ 4.67
Final Capitation PMPM		\$ 207.63

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	839,099
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	695,967

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	67	\$ 1,598.02	\$ 8.96	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.59
Outpatient Hospital - ER	407	\$ 243.69	\$ 8.26	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.03
Outpatient Hospital - Non-ER	260	\$ 405.79	\$ 8.78	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 8.51
Physician/Professional	3,017	\$ 126.07	\$ 31.69	1.00%	3.50%	1.42%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 37.79
Clinics (w/FQHC/RHC)	915	\$ 212.95	\$ 16.24	1.00%	3.50%	14.63%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 21.17
Laboratory/Radiology/Pathology	740	\$ 26.85	\$ 1.66	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 1.89
Dental - Medical	4	\$ 202.16	\$ 0.06	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.07
DME and Supplies	10,441	\$ 2.51	\$ 2.19	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.26
Home Health/Hospice	932	\$ 8.41	\$ 0.65	1.50%	2.50%	22.02%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.90
Physical/Occupational Therapy	1,327	\$ 89.63	\$ 9.91	1.00%	3.50%	3.06%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 11.34
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,106	\$ 113.79	\$ 29.45	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 33.82
Non-Emergency Transportation	7,677	\$ 0.77	\$ 0.50	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.55
Behavioral Health	2,523	\$ 101.07	\$ 21.25	0.00%	3.50%	4.07%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 21.37
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	83	\$ 20.23	\$ 0.14	1.50%	2.50%	9.81%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.17
All Other	1,033	\$ 21.41	\$ 1.84	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 1.96
Gross Benefit Total			\$ 141.59	0.53%	3.73%	3.05%	2.23%					\$ 156.44

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 16.70
Underwriting Gain	1.50%	\$ 2.64
Total Benefit and Non-Benefit PMPM		\$ 175.77

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 175.77
Premium Based Taxes	2.25%	\$ 4.05
Final Capitation PMPM		\$ 179.82

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	648,121
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	543,502

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	66	\$ 1,923.99	\$ 10.55	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 8.93
Outpatient Hospital - ER	253	\$ 273.62	\$ 5.77	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 4.91
Outpatient Hospital - Non-ER	115	\$ 750.74	\$ 7.19	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 6.97
Physician/Professional	3,018	\$ 140.17	\$ 35.25	1.00%	3.50%	0.82%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 41.79
Clinics (w/FQHC/RHC)	170	\$ 263.96	\$ 3.73	1.00%	3.50%	24.73%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 5.30
Laboratory/Radiology/Pathology	1,309	\$ 25.74	\$ 2.81	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 3.21
Dental - Medical	18	\$ 347.65	\$ 0.52	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.60
DME and Supplies	9,398	\$ 2.74	\$ 2.15	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.22
Home Health/Hospice	636	\$ 9.18	\$ 0.49	1.50%	2.50%	20.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.66
Physical/Occupational Therapy	1,784	\$ 86.04	\$ 12.79	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 14.25
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,006	\$ 91.52	\$ 22.93	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 26.33
Non-Emergency Transportation	12,477	\$ 0.49	\$ 0.51	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.56
Behavioral Health	3,024	\$ 111.47	\$ 28.09	0.00%	3.50%	3.44%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 28.08
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	126	\$ 8.21	\$ 0.09	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.10
All Other	1,325	\$ 23.68	\$ 2.61	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 2.78
Gross Benefit Total			\$ 135.48	0.55%	3.66%	1.82%	2.13%					\$ 146.68

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 15.66
Underwriting Gain	1.50%	\$ 2.47
Total Benefit and Non-Benefit PMPM		\$ 164.80

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 164.80
Premium Based Taxes	2.25%	\$ 3.79
Final Capitation PMPM		\$ 168.60

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	1,053,575
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	880,082

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	46	\$ 1,971.44	\$ 7.50	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 6.35
Outpatient Hospital - ER	396	\$ 268.58	\$ 8.86	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.54
Outpatient Hospital - Non-ER	419	\$ 317.86	\$ 11.10	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 10.75
Physician/Professional	3,499	\$ 126.20	\$ 36.80	1.00%	3.50%	2.31%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 44.26
Clinics (w/FQHC/RHC)	718	\$ 192.43	\$ 11.51	1.00%	3.50%	8.44%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 14.19
Laboratory/Radiology/Pathology	618	\$ 28.16	\$ 1.45	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 1.66
Dental - Medical	6	\$ 293.58	\$ 0.14	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.16
DME and Supplies	10,176	\$ 2.87	\$ 2.44	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.52
Home Health/Hospice	1,341	\$ 8.35	\$ 0.93	1.50%	2.50%	22.23%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 1.29
Physical/Occupational Therapy	839	\$ 97.38	\$ 6.81	1.00%	3.50%	4.66%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 7.91
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,148	\$ 92.02	\$ 31.80	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 36.52
Non-Emergency Transportation	15,086	\$ 0.48	\$ 0.60	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.66
Behavioral Health	2,215	\$ 137.86	\$ 25.44	0.00%	3.50%	3.15%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 25.36
Indian Health Referrals	0	\$ 166.07	\$ 0.00	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.00
Family Planning	129	\$ 16.79	\$ 0.18	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.20
All Other	1,598	\$ 20.66	\$ 2.75	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 2.93
Gross Benefit Total			\$ 148.31	0.51%	3.72%	2.24%	2.21%					\$ 162.32

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 17.33
Underwriting Gain	1.50%	\$ 2.74
Total Benefit and Non-Benefit PMPM		\$ 182.38

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 182.38
Premium Based Taxes	2.25%	\$ 4.20
Final Capitation PMPM		\$ 186.58

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	321,131
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	67,769

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	61	\$ 2,156.45	\$ 10.90	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 9.23
Outpatient Hospital - ER	360	\$ 269.93	\$ 8.10	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 6.89
Outpatient Hospital - Non-ER	243	\$ 492.00	\$ 9.95	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 9.64
Physician/Professional	2,771	\$ 113.64	\$ 26.24	1.00%	3.50%	0.51%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 31.01
Clinics (w/FQHC/RHC)	727	\$ 191.05	\$ 11.58	1.00%	3.50%	2.60%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 13.51
Laboratory/Radiology/Pathology	710	\$ 25.20	\$ 1.49	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 1.70
Dental - Medical	14	\$ 347.66	\$ 0.42	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.48
DME and Supplies	6,864	\$ 3.63	\$ 2.08	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.14
Home Health/Hospice	835	\$ 8.29	\$ 0.58	1.50%	2.50%	22.39%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.80
Physical/Occupational Therapy	840	\$ 92.35	\$ 6.46	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 7.20
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,389	\$ 179.18	\$ 65.54	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 75.26
Non-Emergency Transportation	13,321	\$ 0.54	\$ 0.59	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.66
Behavioral Health	2,527	\$ 181.13	\$ 38.15	0.00%	3.50%	2.24%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 37.70
Indian Health Referrals	6	\$ 76.51	\$ 0.04	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
Family Planning	134	\$ 36.61	\$ 0.41	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.46
All Other	1,969	\$ 21.11	\$ 3.46	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 3.69
Gross Benefit Total			\$ 185.98	0.27%	3.95%	0.92%	2.25%					\$ 200.40

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 20.15
Underwriting Gain	1.50%	\$ 3.36
Total Benefit and Non-Benefit PMPM		\$ 223.91

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 223.91
Premium Based Taxes	2.25%	\$ 5.15
Final Capitation PMPM		\$ 229.07

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	28,718
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	5,912

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	47	\$ 3,085.08	\$ 12.20	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 10.33
Outpatient Hospital - ER	407	\$ 247.58	\$ 8.39	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.15
Outpatient Hospital - Non-ER	203	\$ 633.70	\$ 10.74	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 10.40
Physician/Professional	2,333	\$ 130.47	\$ 25.36	1.00%	3.50%	0.32%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 29.92
Clinics (w/FQHC/RHC)	145	\$ 200.07	\$ 2.42	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 2.76
Laboratory/Radiology/Pathology	426	\$ 26.77	\$ 0.95	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 1.09
Dental - Medical	1	\$ 297.12	\$ 0.03	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
DME and Supplies	8,649	\$ 1.82	\$ 1.31	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 1.35
Home Health/Hospice	1	\$ 66.96	\$ 0.00	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.01
Physical/Occupational Therapy	1,078	\$ 93.56	\$ 8.41	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 9.36
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	2,985	\$ 174.33	\$ 43.36	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 49.80
Non-Emergency Transportation	733	\$ 14.30	\$ 0.87	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.97
Behavioral Health	2,204	\$ 109.40	\$ 20.09	0.00%	3.50%	3.23%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 20.05
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	143	\$ 42.38	\$ 0.50	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.57
All Other	1,083	\$ 21.57	\$ 1.95	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 2.07
Gross Benefit Total			\$ 136.61	0.37%	3.89%	0.72%	2.40%					\$ 145.85

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 15.57
Underwriting Gain	1.50%	\$ 2.46
Total Benefit and Non-Benefit PMPM		\$ 163.88

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 163.88
Premium Based Taxes	2.25%	\$ 3.77
Final Capitation PMPM		\$ 167.65

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	40,707
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	8,611

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	66	\$ 1,659.14	\$ 9.13	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.73
Outpatient Hospital - ER	311	\$ 307.22	\$ 7.97	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 6.78
Outpatient Hospital - Non-ER	114	\$ 869.16	\$ 8.28	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 8.02
Physician/Professional	2,837	\$ 148.05	\$ 35.00	1.00%	3.50%	6.10%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 43.66
Clinics (w/FQHC/RHC)	132	\$ 321.80	\$ 3.54	1.00%	3.50%	51.99%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 6.13
Laboratory/Radiology/Pathology	1,155	\$ 26.17	\$ 2.52	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 2.88
Dental - Medical	12	\$ 346.92	\$ 0.36	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.41
DME and Supplies	10,788	\$ 2.94	\$ 2.65	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.73
Home Health/Hospice	1	\$ 68.60	\$ 0.01	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.01
Physical/Occupational Therapy	1,406	\$ 92.37	\$ 10.82	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 12.05
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,850	\$ 170.37	\$ 54.66	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 62.77
Non-Emergency Transportation	8,886	\$ 0.67	\$ 0.50	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.55
Behavioral Health	4,117	\$ 128.12	\$ 43.95	0.00%	3.50%	3.08%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 43.79
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	223	\$ 30.88	\$ 0.57	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.65
All Other	1,462	\$ 23.05	\$ 2.81	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 2.99
Gross Benefit Total			\$ 182.78	0.31%	3.88%	3.07%	2.16%					\$ 201.16

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 20.23
Underwriting Gain	1.50%	\$ 3.37
Total Benefit and Non-Benefit PMPM		\$ 224.75

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 224.75
Premium Based Taxes	2.25%	\$ 5.17
Final Capitation PMPM		\$ 229.93

TANF/CHIP Child, 1-14 Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	147,854
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	31,206

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	49	\$ 1,827.59	\$ 7.51	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 6.35
Outpatient Hospital - ER	370	\$ 279.71	\$ 8.62	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 7.34
Outpatient Hospital - Non-ER	302	\$ 342.02	\$ 8.61	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 8.34
Physician/Professional	2,576	\$ 130.01	\$ 27.91	1.00%	3.50%	1.73%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 33.38
Clinics (w/FQHC/RHC)	329	\$ 199.99	\$ 5.48	1.00%	3.50%	8.80%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 6.78
Laboratory/Radiology/Pathology	478	\$ 28.21	\$ 1.12	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 1.29
Dental - Medical	9	\$ 355.35	\$ 0.26	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.29
DME and Supplies	9,577	\$ 2.54	\$ 2.03	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.10
Home Health/Hospice	3	\$ 68.59	\$ 0.02	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.02
Physical/Occupational Therapy	576	\$ 97.06	\$ 4.66	1.00%	3.50%	3.20%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 5.34
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,893	\$ 205.68	\$ 66.73	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 76.63
Non-Emergency Transportation	16,162	\$ 0.38	\$ 0.52	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.57
Behavioral Health	1,938	\$ 135.67	\$ 21.91	0.00%	3.50%	2.91%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 21.79
Indian Health Referrals	9	\$ 112.04	\$ 0.09	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.09
Family Planning	113	\$ 48.96	\$ 0.46	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.52
All Other	1,714	\$ 18.04	\$ 2.58	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 2.74
Gross Benefit Total			\$ 158.48	0.22%	4.06%	1.28%	2.39%					\$ 173.57

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 18.53
Underwriting Gain	1.50%	\$ 2.93
Total Benefit and Non-Benefit PMPM		\$ 195.02

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 195.02
Premium Based Taxes	2.25%	\$ 4.49
Final Capitation PMPM		\$ 199.51

TANF/CHIP Child, 1-14 Years, Male and Female, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	337,434
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	298,743

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	28	\$ 527.90	\$ 1.23	1.00%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 1.26
Outpatient Hospital - ER	102	\$ 231.55	\$ 1.96	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 2.30
Outpatient Hospital - Non-ER	95	\$ 351.52	\$ 2.78	1.00%	2.50%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 3.19
Physician/Professional	1,612	\$ 82.36	\$ 11.06	1.00%	3.50%	1.57%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 12.81
Clinics (w/FQHC/RHC)	239	\$ 165.95	\$ 3.31	1.00%	3.50%	10.43%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 4.16
Laboratory/Radiology/Pathology	204	\$ 22.64	\$ 0.39	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.44
Dental - Medical	4	\$ 308.73	\$ 0.10	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 0.11
DME and Supplies	12,886	\$ 1.37	\$ 1.47	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.66
Home Health/Hospice	2,296	\$ 8.25	\$ 1.58	1.50%	2.50%	22.63%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.19
Physical/Occupational Therapy	779	\$ 74.15	\$ 4.81	1.00%	3.50%	1.04%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 5.57
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	2,768	\$ 69.06	\$ 15.93	-0.50%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 18.44
Non-Emergency Transportation	22,392	\$ 0.29	\$ 0.55	1.50%	2.50%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.62
Behavioral Health	2,123	\$ 130.09	\$ 23.01	0.00%	3.50%	3.09%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 26.26
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	37	\$ 31.38	\$ 0.10	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.11
All Other	529	\$ 20.29	\$ 0.89	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.01
Gross Benefit Total			\$ 69.16	0.34%	3.75%	2.47%	2.27%					\$ 80.14

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	10.00%	\$ 9.05
Underwriting Gain	1.50%	\$ 1.36
Total Benefit and Non-Benefit PMPM		\$ 90.55

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 90.55
Premium Based Taxes	2.25%	\$ 2.08
Final Capitation PMPM		\$ 92.63

TANF/CHIP Child, 1-14 Years, Male and Female, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	58,425
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	13,056

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	26	\$ 671.85	\$ 1.43	1.00%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 1.47
Outpatient Hospital - ER	110	\$ 216.58	\$ 1.99	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 2.34
Outpatient Hospital - Non-ER	79	\$ 425.68	\$ 2.81	1.00%	2.50%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 3.23
Physician/Professional	1,111	\$ 92.58	\$ 8.57	1.00%	3.50%	0.86%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 9.86
Clinics (w/FQHC/RHC)	271	\$ 141.44	\$ 3.19	1.00%	3.50%	2.22%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 3.72
Laboratory/Radiology/Pathology	171	\$ 25.74	\$ 0.37	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.42
Dental - Medical	4	\$ 294.18	\$ 0.10	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 0.11
DME and Supplies	10,444	\$ 1.64	\$ 1.42	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.61
Home Health/Hospice	1,431	\$ 7.97	\$ 0.95	1.50%	2.50%	26.47%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.36
Physical/Occupational Therapy	608	\$ 97.83	\$ 4.96	1.00%	3.50%	14.98%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 6.53
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	2,673	\$ 168.11	\$ 37.45	-0.50%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 43.33
Non-Emergency Transportation	28,558	\$ 0.22	\$ 0.52	1.50%	2.50%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.58
Behavioral Health	1,883	\$ 159.86	\$ 25.08	0.00%	3.50%	2.54%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 28.46
Indian Health Referrals	2	\$ 224.95	\$ 0.04	1.00%	1.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.04
Family Planning	77	\$ 21.29	\$ 0.14	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.15
All Other	477	\$ 18.19	\$ 0.72	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.82
Gross Benefit Total			\$ 89.73	0.11%	4.06%	2.12%	2.52%					\$ 104.03

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 11.10
Underwriting Gain	1.50%	\$ 1.75
Total Benefit and Non-Benefit PMPM		\$ 116.89

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 116.89
Premium Based Taxes	2.25%	\$ 2.69
Final Capitation PMPM		\$ 119.58

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	67,088
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	61,257

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	163	\$ 1,674.29	\$ 22.75	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 19.26
Outpatient Hospital - ER	473	\$ 383.39	\$ 15.11	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 12.86
Outpatient Hospital - Non-ER	558	\$ 290.07	\$ 13.50	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 13.07
Physician/Professional Clinics (w/FQHC/RHC)	4,240	\$ 122.51	\$ 43.29	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 51.04
Laboratory/Radiology/Pathology	985	\$ 184.93	\$ 15.18	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 17.31
Dental - Medical	3,170	\$ 23.62	\$ 6.24	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 7.14
DME and Supplies	4	\$ 249.47	\$ 0.09	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.10
Home Health/Hospice	7,159	\$ 4.11	\$ 2.45	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.53
Physical/Occupational Therapy	53	\$ 4.41	\$ 0.02	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.02
ICF/MR Services	248	\$ 100.82	\$ 2.08	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.32
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Non-Emergency Transportation	6,763	\$ 65.71	\$ 37.03	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 42.52
Behavioral Health	11,605	\$ 0.59	\$ 0.57	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.63
Indian Health Referrals	5,105	\$ 172.85	\$ 73.53	0.00%	3.50%	2.39%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 72.77
Family Planning	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
All Other	6,033	\$ 18.19	\$ 9.15	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 10.36
Gross Benefit Total	2,612	\$ 22.92	\$ 4.99	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 5.31
			\$ 245.98	0.49%	3.61%	0.91%	2.04%					\$ 257.25

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 25.87
Underwriting Gain	1.50%	\$ 4.31
Total Benefit and Non-Benefit PMPM		\$ 287.43

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 287.43
Premium Based Taxes	2.25%	\$ 6.62
Final Capitation PMPM		\$ 294.05

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	83,254
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	76,926

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	242	\$ 1,008.88	\$ 20.36	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 17.24
Outpatient Hospital - ER	525	\$ 348.82	\$ 15.27	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 13.01
Outpatient Hospital - Non-ER	473	\$ 289.79	\$ 11.43	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 11.06
Physician/Professional	3,436	\$ 142.38	\$ 40.77	1.00%	3.50%	0.33%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 48.09
Clinics (w/FQHC/RHC)	1,026	\$ 194.31	\$ 16.61	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 18.94
Laboratory/Radiology/Pathology	2,293	\$ 24.77	\$ 4.73	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 5.41
Dental - Medical	25	\$ 283.59	\$ 0.58	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.66
DME and Supplies	9,914	\$ 3.13	\$ 2.58	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.67
Home Health/Hospice	393	\$ 8.63	\$ 0.28	1.50%	2.50%	21.39%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.39
Physical/Occupational Therapy	263	\$ 103.29	\$ 2.26	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.52
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	5,392	\$ 99.51	\$ 44.71	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 51.34
Non-Emergency Transportation	735	\$ 7.92	\$ 0.49	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.54
Behavioral Health	4,436	\$ 117.13	\$ 43.30	0.00%	3.50%	3.78%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 43.43
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	4,894	\$ 15.03	\$ 6.13	1.50%	2.50%	14.80%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 7.95
All Other	1,744	\$ 23.61	\$ 3.43	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 3.65
Gross Benefit Total			\$ 212.95	0.49%	3.71%	1.44%	2.21%					\$ 226.91

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 22.82
Underwriting Gain	1.50%	\$ 3.80
Total Benefit and Non-Benefit PMPM		\$ 253.53

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 253.53
Premium Based Taxes	2.25%	\$ 5.84
Final Capitation PMPM		\$ 259.37

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	60,501
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	56,076

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	169	\$ 1,259.27	\$ 17.76	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 15.04
Outpatient Hospital - ER	323	\$ 428.62	\$ 11.54	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 9.83
Outpatient Hospital - Non-ER	235	\$ 439.86	\$ 8.62	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 8.35
Physician/Professional	3,585	\$ 153.40	\$ 45.83	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 54.04
Clinics (w/FQHC/RHC)	263	\$ 212.55	\$ 4.65	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 5.31
Laboratory/Radiology/Pathology	3,798	\$ 21.76	\$ 6.89	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 7.87
Dental - Medical	10	\$ 325.97	\$ 0.27	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.31
DME and Supplies	12,345	\$ 2.56	\$ 2.63	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.71
Home Health/Hospice	1,066	\$ 8.23	\$ 0.73	1.50%	2.50%	22.59%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 1.01
Physical/Occupational Therapy	286	\$ 93.04	\$ 2.22	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.47
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	5,071	\$ 83.98	\$ 35.49	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 40.76
Non-Emergency Transportation	10,482	\$ 0.60	\$ 0.52	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.58
Behavioral Health	4,989	\$ 121.54	\$ 50.53	0.00%	3.50%	3.44%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 50.51
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	9,268	\$ 8.80	\$ 6.79	1.50%	2.50%	1.68%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 7.80
All Other	1,901	\$ 23.16	\$ 3.67	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 3.91
Gross Benefit Total			\$ 198.16	0.50%	3.65%	1.21%	2.09%					\$ 210.50

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 21.17
Underwriting Gain	1.50%	\$ 3.53
Total Benefit and Non-Benefit PMPM		\$ 235.19

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 235.19
Premium Based Taxes	2.25%	\$ 5.41
Final Capitation PMPM		\$ 240.61

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	106,044
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	97,189

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	173	\$ 917.14	\$ 13.24	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 11.21
Outpatient Hospital - ER	578	\$ 388.74	\$ 18.74	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 15.95
Outpatient Hospital - Non-ER	859	\$ 232.82	\$ 16.66	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 16.13
Physician/Professional Clinics (w/FQHC/RHC)	4,129	\$ 139.04	\$ 47.84	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 56.41
Laboratory/Radiology/Pathology	943	\$ 185.75	\$ 14.60	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 16.65
Dental - Medical	2,085	\$ 26.93	\$ 4.68	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 5.35
DME and Supplies	17	\$ 252.67	\$ 0.36	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.41
Home Health/Hospice	9,437	\$ 3.27	\$ 2.57	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.66
Physical/Occupational Therapy	774	\$ 8.41	\$ 0.54	1.50%	2.50%	22.40%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.75
ICF/MR Services	369	\$ 105.49	\$ 3.24	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 3.61
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Non-Emergency Transportation	6,895	\$ 89.08	\$ 51.19	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 58.78
Behavioral Health	13,408	\$ 0.57	\$ 0.64	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.71
Indian Health Referrals	3,927	\$ 158.22	\$ 51.78	0.00%	3.50%	2.95%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 51.52
Family Planning	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
All Other	4,028	\$ 25.08	\$ 8.42	1.50%	2.50%	2.10%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 9.71
Gross Benefit Total	2,481	\$ 25.53	\$ 5.28	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 5.62
			\$ 239.76	0.47%	3.70%	0.97%	2.20%					\$ 255.45

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 25.69
Underwriting Gain	1.50%	\$ 4.28
Total Benefit and Non-Benefit PMPM		\$ 285.42

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 285.42
Premium Based Taxes	2.25%	\$ 6.57
Final Capitation PMPM		\$ 291.99

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	41,927
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	9,573

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	205	\$ 1,904.16	\$ 32.54	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 27.55
Outpatient Hospital - ER	523	\$ 409.87	\$ 17.87	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 15.21
Outpatient Hospital - Non-ER	500	\$ 376.63	\$ 15.71	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 15.21
Physician/Professional	3,605	\$ 130.75	\$ 39.28	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 46.31
Clinics (w/FQHC/RHC)	886	\$ 185.32	\$ 13.69	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 15.61
Laboratory/Radiology/Pathology	2,457	\$ 25.11	\$ 5.14	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 5.88
Dental - Medical	12	\$ 251.36	\$ 0.24	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.28
DME and Supplies	12,076	\$ 2.78	\$ 2.80	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.89
Home Health/Hospice	10	\$ 68.59	\$ 0.06	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.06
Physical/Occupational Therapy	180	\$ 107.65	\$ 1.62	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 1.80
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	6,700	\$ 166.32	\$ 92.86	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 106.63
Non-Emergency Transportation	15,356	\$ 0.50	\$ 0.65	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.72
Behavioral Health	3,669	\$ 211.38	\$ 64.63	0.00%	3.50%	2.04%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 63.74
Indian Health Referrals	10	\$ 75.35	\$ 0.06	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.07
Family Planning	4,791	\$ 43.29	\$ 17.28	1.50%	2.50%	1.86%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 19.89
All Other	3,109	\$ 22.21	\$ 5.75	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 6.13
Gross Benefit Total			\$ 310.18	0.36%	3.82%	0.73%	2.29%					\$ 327.98

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.50%	\$ 30.98
Underwriting Gain	1.50%	\$ 5.47
Total Benefit and Non-Benefit PMPM		\$ 364.42

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 364.42
Premium Based Taxes	2.25%	\$ 8.39
Final Capitation PMPM		\$ 372.81

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	4,671
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	1,034

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	128	\$ 722.54	\$ 7.72	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 6.53
Outpatient Hospital - ER	632	\$ 366.68	\$ 19.31	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 16.44
Outpatient Hospital - Non-ER	501	\$ 241.09	\$ 10.06	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 9.74
Physician/Professional	3,166	\$ 151.45	\$ 39.96	1.00%	3.50%	0.32%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 47.13
Clinics (w/FQHC/RHC)	206	\$ 197.81	\$ 3.40	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 3.88
Laboratory/Radiology/Pathology	1,943	\$ 28.96	\$ 4.69	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 5.36
Dental - Medical	13	\$ 229.04	\$ 0.24	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.28
DME and Supplies	2,112	\$ 2.65	\$ 0.47	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 0.48
Home Health/Hospice	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Physical/Occupational Therapy	581	\$ 107.38	\$ 5.20	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 5.79
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	5,352	\$ 132.26	\$ 58.99	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 67.74
Non-Emergency Transportation	21,614	\$ 0.27	\$ 0.49	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.54
Behavioral Health	2,862	\$ 104.15	\$ 24.84	0.00%	3.50%	4.15%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 25.00
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	2,666	\$ 57.74	\$ 12.83	1.50%	2.50%	9.61%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 15.88
All Other	1,685	\$ 28.47	\$ 4.00	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.26
Gross Benefit Total			\$ 192.19	0.42%	3.84%	1.41%	2.41%					\$ 209.07

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 21.02
Underwriting Gain	1.50%	\$ 3.50
Total Benefit and Non-Benefit PMPM		\$ 233.59

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 233.59
Premium Based Taxes	2.25%	\$ 5.38
Final Capitation PMPM		\$ 238.97

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	6,811
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	1,566

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	202	\$ 961.38	\$ 16.18	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 13.70
Outpatient Hospital - ER	497	\$ 395.37	\$ 16.37	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 13.93
Outpatient Hospital - Non-ER	241	\$ 530.16	\$ 10.66	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 10.32
Physician/Professional	3,367	\$ 158.89	\$ 44.58	1.00%	3.50%	0.27%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 52.56
Clinics (w/FQHC/RHC)	194	\$ 210.68	\$ 3.41	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 3.89
Laboratory/Radiology/Pathology	3,460	\$ 21.57	\$ 6.22	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 7.11
Dental - Medical	2	\$ 197.70	\$ 0.03	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.03
DME and Supplies	11,075	\$ 4.80	\$ 4.43	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 4.57
Home Health/Hospice	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Physical/Occupational Therapy	222	\$ 106.40	\$ 1.97	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.19
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	5,542	\$ 157.06	\$ 72.54	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 83.30
Non-Emergency Transportation	313	\$ 21.01	\$ 0.55	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.61
Behavioral Health	5,917	\$ 152.04	\$ 74.97	0.00%	3.50%	2.56%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 74.31
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	8,610	\$ 19.51	\$ 14.00	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 15.85
All Other	1,886	\$ 28.35	\$ 4.46	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.74
Gross Benefit Total			\$ 270.36	0.34%	3.78%	0.91%	2.13%					\$ 287.14

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 28.87
Underwriting Gain	1.50%	\$ 4.81
Total Benefit and Non-Benefit PMPM		\$ 320.82

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 320.82
Premium Based Taxes	2.25%	\$ 7.38
Final Capitation PMPM		\$ 328.21

TANF/CHIP Child, 15+ Years, Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	20,442
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	4,827

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	181	\$ 944.15	\$ 14.27	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 12.08
Outpatient Hospital - ER	522	\$ 398.49	\$ 17.33	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 14.75
Outpatient Hospital - Non-ER	605	\$ 267.77	\$ 13.50	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 13.07
Physician/Professional	3,174	\$ 149.74	\$ 39.61	1.00%	3.50%	0.27%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 46.69
Clinics (w/FQHC/RHC)	447	\$ 193.65	\$ 7.22	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 8.23
Laboratory/Radiology/Pathology	1,821	\$ 27.06	\$ 4.11	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 4.69
Dental - Medical	20	\$ 204.93	\$ 0.35	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.40
DME and Supplies	17,041	\$ 1.75	\$ 2.48	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.56
Home Health/Hospice	3	\$ 68.59	\$ 0.02	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.02
Physical/Occupational Therapy	282	\$ 98.10	\$ 2.31	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.57
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	6,166	\$ 178.23	\$ 91.58	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 105.17
Non-Emergency Transportation	13,311	\$ 0.45	\$ 0.50	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.56
Behavioral Health	2,902	\$ 172.18	\$ 41.64	0.00%	3.50%	2.75%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 41.35
Indian Health Referrals	4	\$ 114.28	\$ 0.03	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
Family Planning	4,895	\$ 48.97	\$ 19.97	1.50%	2.50%	0.38%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 22.65
All Other	2,550	\$ 25.10	\$ 5.33	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 5.68
Gross Benefit Total			\$ 260.25	0.34%	3.88%	0.68%	2.37%					\$ 280.52

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 28.21
Underwriting Gain	1.50%	\$ 4.70
Total Benefit and Non-Benefit PMPM		\$ 313.43

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 313.43
Premium Based Taxes	2.25%	\$ 7.21
Final Capitation PMPM		\$ 320.64

TANF/CHIP Child, 15+ Years, Female, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	46,418
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	44,668

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	107	\$ 488.37	\$ 4.37	1.00%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 4.50
Outpatient Hospital - ER	155	\$ 313.24	\$ 4.05	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 4.77
Outpatient Hospital - Non-ER	202	\$ 195.68	\$ 3.29	1.00%	2.50%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 3.78
Physician/Professional	1,874	\$ 100.63	\$ 15.72	1.00%	3.50%	0.31%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 17.97
Clinics (w/FQHC/RHC)	306	\$ 149.33	\$ 3.81	1.00%	3.50%	0.28%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 4.36
Laboratory/Radiology/Pathology	678	\$ 24.25	\$ 1.37	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.55
Dental - Medical	6	\$ 271.70	\$ 0.13	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 0.15
DME and Supplies	9,888	\$ 1.75	\$ 1.44	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.63
Home Health/Hospice	3,856	\$ 8.17	\$ 2.63	1.50%	2.50%	22.79%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 3.65
Physical/Occupational Therapy	155	\$ 72.29	\$ 0.94	1.00%	3.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.08
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	4,297	\$ 54.35	\$ 19.46	-0.50%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 22.52
Non-Emergency Transportation	22,147	\$ 0.29	\$ 0.54	1.50%	2.50%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.61
Behavioral Health	3,043	\$ 138.33	\$ 35.08	0.00%	3.50%	3.20%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 40.06
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	2,452	\$ 17.85	\$ 3.65	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 4.14
All Other	790	\$ 25.19	\$ 1.66	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.88
Gross Benefit Total			\$ 98.13	0.38%	3.67%	1.93%	1.96%					\$ 112.64

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 12.02
Underwriting Gain	1.50%	\$ 1.90
Total Benefit and Non-Benefit PMPM		\$ 126.57

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 126.57
Premium Based Taxes	2.25%	\$ 2.91
Final Capitation PMPM		\$ 129.48

TANF/CHIP Child, 15+ Years, Female, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	9,966
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	2,425

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	77	\$ 397.47	\$ 2.54	1.00%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 2.62
Outpatient Hospital - ER	147	\$ 322.69	\$ 3.95	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 4.64
Outpatient Hospital - Non-ER	185	\$ 317.65	\$ 4.91	1.00%	2.50%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 5.63
Physician/Professional	1,520	\$ 105.50	\$ 13.36	1.00%	3.50%	0.30%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 15.27
Clinics (w/FQHC/RHC)	333	\$ 151.85	\$ 4.22	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 4.82
Laboratory/Radiology/Pathology	571	\$ 25.99	\$ 1.24	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.40
Dental - Medical	7	\$ 370.18	\$ 0.22	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 0.25
DME and Supplies	10,871	\$ 1.50	\$ 1.35	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.54
Home Health/Hospice	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Physical/Occupational Therapy	169	\$ 51.87	\$ 0.73	1.00%	3.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.84
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	3,972	\$ 112.10	\$ 37.11	-0.50%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 42.94
Non-Emergency Transportation	26,942	\$ 0.23	\$ 0.52	1.50%	2.50%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.59
Behavioral Health	2,073	\$ 227.65	\$ 39.33	0.00%	3.50%	2.25%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 44.52
Indian Health Referrals	31	\$ 16.46	\$ 0.04	1.00%	1.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.05
Family Planning	494	\$ 175.43	\$ 7.23	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 8.20
All Other	712	\$ 27.04	\$ 1.61	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.82
Gross Benefit Total			\$ 118.36	0.23%	3.84%	0.93%	2.36%					\$ 135.12

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 14.42
Underwriting Gain	1.50%	\$ 2.28
Total Benefit and Non-Benefit PMPM		\$ 151.82

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 151.82
Premium Based Taxes	2.25%	\$ 3.49
Final Capitation PMPM		\$ 155.32

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	69,389
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	63,561

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	75	\$ 1,708.87	\$ 10.69	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 9.05
Outpatient Hospital - ER	314	\$ 385.37	\$ 10.07	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 8.57
Outpatient Hospital - Non-ER	311	\$ 435.25	\$ 11.29	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 10.93
Physician/Professional	2,707	\$ 115.53	\$ 26.06	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 30.73
Clinics (w/FQHC/RHC)	610	\$ 185.86	\$ 9.45	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 10.78
Laboratory/Radiology/Pathology	1,313	\$ 27.46	\$ 3.01	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 3.44
Dental - Medical	4	\$ 304.21	\$ 0.10	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.12
DME and Supplies	8,196	\$ 6.96	\$ 4.76	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 4.91
Home Health/Hospice	2	\$ 68.58	\$ 0.01	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.01
Physical/Occupational Therapy	150	\$ 106.31	\$ 1.32	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 1.48
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,048	\$ 166.53	\$ 56.17	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 64.51
Non-Emergency Transportation	17,914	\$ 0.35	\$ 0.53	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.59
Behavioral Health	3,571	\$ 165.30	\$ 49.19	0.00%	3.50%	2.46%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 48.71
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	1	\$ 40.90	\$ 0.00	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.00
All Other	1,756	\$ 30.59	\$ 4.48	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.77
Gross Benefit Total			\$ 187.14	0.29%	3.85%	0.85%	2.17%					\$ 198.60

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 21.20
Underwriting Gain	1.50%	\$ 3.35
Total Benefit and Non-Benefit PMPM		\$ 223.14

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 223.14
Premium Based Taxes	2.25%	\$ 5.14
Final Capitation PMPM		\$ 228.28

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	83,968
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	76,133

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	61	\$ 1,997.51	\$ 10.18	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 8.61
Outpatient Hospital - ER	362	\$ 341.85	\$ 10.30	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 8.77
Outpatient Hospital - Non-ER	292	\$ 383.07	\$ 9.34	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 9.04
Physician/Professional	2,558	\$ 124.86	\$ 26.62	1.00%	3.50%	0.32%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 31.39
Clinics (w/FQHC/RHC)	675	\$ 202.80	\$ 11.41	1.00%	3.50%	7.34%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 13.93
Laboratory/Radiology/Pathology	1,165	\$ 25.90	\$ 2.51	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 2.87
Dental - Medical	15	\$ 256.05	\$ 0.32	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.36
DME and Supplies	11,959	\$ 2.37	\$ 2.37	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.44
Home Health/Hospice	159	\$ 14.70	\$ 0.19	1.50%	2.50%	12.62%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.25
Physical/Occupational Therapy	225	\$ 104.17	\$ 1.96	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.18
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,564	\$ 96.37	\$ 28.62	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 32.87
Non-Emergency Transportation	3,594	\$ 1.64	\$ 0.49	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.54
Behavioral Health	2,764	\$ 108.65	\$ 25.03	0.00%	3.50%	3.86%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 25.13
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	0	\$ 2,830.58	\$ 0.10	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.11
All Other	1,173	\$ 27.21	\$ 2.66	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 2.83
Gross Benefit Total			\$ 132.09	0.48%	3.73%	1.59%	2.24%					\$ 141.34

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 15.09
Underwriting Gain	1.50%	\$ 2.38
Total Benefit and Non-Benefit PMPM		\$ 158.81

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 158.81
Premium Based Taxes	2.25%	\$ 3.66
Final Capitation PMPM		\$ 162.46

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	59,500
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	56,129

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	97	\$ 2,193.08	\$ 17.68	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 14.97
Outpatient Hospital - ER	202	\$ 428.83	\$ 7.23	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 6.15
Outpatient Hospital - Non-ER	146	\$ 761.03	\$ 9.27	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 8.98
Physician/Professional	2,615	\$ 144.11	\$ 31.41	1.00%	3.50%	2.20%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 37.74
Clinics (w/FQHC/RHC)	167	\$ 187.57	\$ 2.61	1.00%	3.50%	12.06%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 3.33
Laboratory/Radiology/Pathology	1,801	\$ 23.33	\$ 3.50	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 4.00
Dental - Medical	10	\$ 297.18	\$ 0.24	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.27
DME and Supplies	7,101	\$ 3.35	\$ 1.98	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.04
Home Health/Hospice	44	\$ 15.73	\$ 0.06	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.07
Physical/Occupational Therapy	260	\$ 100.93	\$ 2.19	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.44
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	3,329	\$ 193.69	\$ 53.74	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 61.71
Non-Emergency Transportation	9,139	\$ 0.65	\$ 0.49	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.55
Behavioral Health	3,037	\$ 119.43	\$ 30.23	0.00%	3.50%	3.43%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 30.22
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	1	\$ 30.28	\$ 0.00	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.00
All Other	1,269	\$ 24.72	\$ 2.62	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 2.79
Gross Benefit Total			\$ 163.24	0.33%	3.91%	1.42%	2.30%					\$ 175.25

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 18.71
Underwriting Gain	1.50%	\$ 2.95
Total Benefit and Non-Benefit PMPM		\$ 196.91

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 196.91
Premium Based Taxes	2.25%	\$ 4.53
Final Capitation PMPM		\$ 201.44

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	105,660
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	97,267

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	67	\$ 2,463.96	\$ 13.76	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 11.65
Outpatient Hospital - ER	353	\$ 375.49	\$ 11.04	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 9.40
Outpatient Hospital - Non-ER	481	\$ 316.50	\$ 12.69	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 12.29
Physician/Professional	2,831	\$ 132.63	\$ 31.29	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 36.89
Clinics (w/FQHC/RHC)	548	\$ 180.53	\$ 8.24	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 9.40
Laboratory/Radiology/Pathology	925	\$ 28.77	\$ 2.22	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 2.54
Dental - Medical	9	\$ 230.52	\$ 0.17	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.20
DME and Supplies	16,259	\$ 3.33	\$ 4.52	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 4.66
Home Health/Hospice	1,670	\$ 8.48	\$ 1.18	1.50%	2.50%	21.94%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 1.63
Physical/Occupational Therapy	279	\$ 105.31	\$ 2.45	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.73
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,792	\$ 94.85	\$ 37.88	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 43.49
Non-Emergency Transportation	10,130	\$ 0.75	\$ 0.63	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.70
Behavioral Health	2,629	\$ 160.64	\$ 35.19	0.00%	3.50%	2.93%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 35.01
Indian Health Referrals	0	\$ 161.44	\$ 0.01	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.01
Family Planning	1	\$ 107.04	\$ 0.01	1.50%	2.50%	0.27%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.01
All Other	1,730	\$ 34.37	\$ 4.96	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 5.28
Gross Benefit Total			\$ 166.23	0.45%	3.72%	0.99%	2.24%					\$ 175.87

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 18.77
Underwriting Gain	1.50%	\$ 2.96
Total Benefit and Non-Benefit PMPM		\$ 197.61

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 197.61
Premium Based Taxes	2.25%	\$ 4.55
Final Capitation PMPM		\$ 202.16

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	40,530
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	9,579

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	197	\$ 1,827.40	\$ 30.01	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 25.40
Outpatient Hospital - ER	326	\$ 371.38	\$ 10.09	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 8.59
Outpatient Hospital - Non-ER	271	\$ 558.54	\$ 12.59	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 12.19
Physician/Professional	2,430	\$ 120.79	\$ 24.46	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 28.84
Clinics (w/FQHC/RHC)	509	\$ 186.86	\$ 7.92	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 9.03
Laboratory/Radiology/Pathology	1,012	\$ 28.09	\$ 2.37	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 2.71
Dental - Medical	5	\$ 243.01	\$ 0.10	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.11
DME and Supplies	10,798	\$ 3.60	\$ 3.24	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 3.34
Home Health/Hospice	18	\$ 36.78	\$ 0.06	1.50%	2.50%	2.81%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.06
Physical/Occupational Therapy	185	\$ 109.72	\$ 1.69	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 1.89
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	8	\$ 191.13	\$ 0.13	1.00%	3.50%	0.27%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ 0.15
Pharmacy	4,057	\$ 151.59	\$ 51.25	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 58.86
Non-Emergency Transportation	7,991	\$ 0.89	\$ 0.59	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.65
Behavioral Health	2,416	\$ 182.01	\$ 36.65	0.00%	3.50%	2.23%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 36.21
Indian Health Referrals	1	\$ 103.05	\$ 0.01	1.00%	1.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.01
Family Planning	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ -
All Other	1,993	\$ 27.77	\$ 4.61	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.91
Gross Benefit Total			\$ 185.76	0.39%	3.81%	0.66%	2.34%					\$ 192.96

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 20.60
Underwriting Gain	1.50%	\$ 3.25
Total Benefit and Non-Benefit PMPM		\$ 216.81

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 216.81
Premium Based Taxes	2.25%	\$ 4.99
Final Capitation PMPM		\$ 221.80

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	4,473
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	1,010

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	159	\$ 1,998.35	\$ 26.56	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 22.48
Outpatient Hospital - ER	451	\$ 382.16	\$ 14.35	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 12.22
Outpatient Hospital - Non-ER	274	\$ 634.04	\$ 14.45	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 14.00
Physician/Professional	2,585	\$ 147.62	\$ 31.79	1.00%	3.50%	0.33%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 37.50
Clinics (w/FQHC/RHC)	143	\$ 199.85	\$ 2.37	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 2.71
Laboratory/Radiology/Pathology	1,219	\$ 25.51	\$ 2.59	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 2.96
Dental - Medical	8	\$ 284.10	\$ 0.19	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.22
DME and Supplies	13,197	\$ 5.36	\$ 5.89	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 6.08
Home Health/Hospice	27	\$ 68.58	\$ 0.15	1.50%	2.50%	0.27%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 0.17
Physical/Occupational Therapy	486	\$ 109.28	\$ 4.43	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 4.93
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,027	\$ 257.92	\$ 86.54	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 99.38
Non-Emergency Transportation	28,836	\$ 0.20	\$ 0.48	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.53
Behavioral Health	2,689	\$ 163.69	\$ 36.69	0.00%	3.50%	2.43%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 36.32
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ -
All Other	1,151	\$ 42.11	\$ 4.04	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.30
Gross Benefit Total			\$ 230.53	0.28%	3.97%	0.62%	2.44%					\$ 243.80

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 24.52
Underwriting Gain	1.50%	\$ 4.09
Total Benefit and Non-Benefit PMPM		\$ 272.41

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 272.41
Premium Based Taxes	2.25%	\$ 6.27
Final Capitation PMPM		\$ 278.68

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	6,264
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	1,437

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	146	\$ 1,265.52	\$ 15.44	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 13.07
Outpatient Hospital - ER	299	\$ 380.41	\$ 9.47	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 8.06
Outpatient Hospital - Non-ER	165	\$ 715.54	\$ 9.82	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 9.51
Physician/Professional	2,506	\$ 144.74	\$ 30.22	1.00%	3.50%	0.27%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 35.63
Clinics (w/FQHC/RHC)	71	\$ 201.03	\$ 1.19	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 1.36
Laboratory/Radiology/Pathology	1,727	\$ 24.66	\$ 3.55	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 4.06
Dental - Medical	2	\$ 187.18	\$ 0.03	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.03
DME and Supplies	10,394	\$ 5.44	\$ 4.71	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 4.87
Home Health/Hospice	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Physical/Occupational Therapy	280	\$ 90.07	\$ 2.10	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 2.34
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,640	\$ 190.69	\$ 73.74	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 84.68
Non-Emergency Transportation	1,585	\$ 3.61	\$ 0.48	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.53
Behavioral Health	4,076	\$ 152.00	\$ 51.63	0.00%	3.50%	2.51%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 51.16
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ -
All Other	1,168	\$ 37.29	\$ 3.63	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 3.87
Gross Benefit Total			\$ 206.01	0.22%	3.95%	0.83%	2.22%					\$ 219.15

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 22.04
Underwriting Gain	1.50%	\$ 3.67
Total Benefit and Non-Benefit PMPM		\$ 244.86

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 244.86
Premium Based Taxes	2.25%	\$ 5.64
Final Capitation PMPM		\$ 250.50

TANF/CHIP Child, 15+ Years, Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	19,943
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	4,735

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	142	\$ 1,410.28	\$ 16.66	1.00%	3.50%	0.27%	2.98%	7.50%	-40.00%	75.00%	-26.63%	\$ 14.11
Outpatient Hospital - ER	371	\$ 356.56	\$ 11.01	0.50%	4.00%	0.27%	3.61%	7.50%	-40.00%	75.00%	-26.63%	\$ 9.37
Outpatient Hospital - Non-ER	396	\$ 452.57	\$ 14.95	1.00%	2.50%	0.27%	3.61%	7.50%	-25.00%	75.00%	-14.53%	\$ 14.48
Physician/Professional	2,434	\$ 138.19	\$ 28.03	1.00%	3.50%	0.28%	1.80%	-5.00%	10.00%	75.00%	3.37%	\$ 33.05
Clinics (w/FQHC/RHC)	294	\$ 192.05	\$ 4.71	1.00%	3.50%	1.02%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 5.41
Laboratory/Radiology/Pathology	776	\$ 35.05	\$ 2.27	1.50%	2.50%	0.27%	2.51%	-1.00%	2.00%	75.00%	0.74%	\$ 2.59
Dental - Medical	10	\$ 256.29	\$ 0.20	1.00%	3.50%	0.27%	1.80%	0.00%	0.00%	75.00%	0.00%	\$ 0.23
DME and Supplies	26,497	\$ 1.74	\$ 3.84	1.50%	2.50%	0.27%	2.51%	3.50%	-15.00%	75.00%	-9.02%	\$ 3.97
Home Health/Hospice	2,640	\$ 8.36	\$ 1.84	1.50%	2.50%	24.54%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ 2.59
Physical/Occupational Therapy	350	\$ 99.13	\$ 2.90	1.00%	3.50%	0.27%	2.51%	1.00%	-5.00%	75.00%	-3.04%	\$ 3.22
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	2.98%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,387	\$ 173.53	\$ 63.44	-0.50%	5.00%	0.27%	2.84%	-5.00%	5.00%	75.00%	-0.19%	\$ 72.85
Non-Emergency Transportation	17,031	\$ 0.36	\$ 0.51	1.50%	2.50%	0.27%	0.27%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.56
Behavioral Health	2,210	\$ 146.68	\$ 27.01	0.00%	3.50%	2.89%	0.78%	5.00%	-20.00%	75.00%	-12.00%	\$ 26.86
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.51%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.51%	-5.00%	5.00%	75.00%	-0.19%	\$ -
All Other	2,335	\$ 29.21	\$ 5.68	1.50%	2.50%	0.27%	2.51%	2.00%	-10.00%	75.00%	-6.15%	\$ 6.05
Gross Benefit Total			\$ 183.06	0.34%	3.89%	0.92%	2.43%					\$ 195.35

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 20.85
Underwriting Gain	1.50%	\$ 3.29
Total Benefit and Non-Benefit PMPM		\$ 219.50

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 219.50
Premium Based Taxes	2.25%	\$ 5.05
Final Capitation PMPM		\$ 224.55

TANF/CHIP Child, 15+ Years, Male, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	43,939
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	41,686

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	77	\$ 1,767.27	\$ 11.36	1.00%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 11.70
Outpatient Hospital - ER	106	\$ 304.75	\$ 2.69	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 3.16
Outpatient Hospital - Non-ER	100	\$ 349.78	\$ 2.91	1.00%	2.50%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 3.34
Physician/Professional	1,401	\$ 87.03	\$ 10.16	1.00%	3.50%	0.55%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 11.64
Clinics (w/FQHC/RHC)	205	\$ 143.24	\$ 2.45	1.00%	3.50%	0.62%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 2.81
Laboratory/Radiology/Pathology	296	\$ 27.97	\$ 0.69	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.78
Dental - Medical	4	\$ 81.79	\$ 0.02	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 0.03
DME and Supplies	13,695	\$ 1.72	\$ 1.96	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.22
Home Health/Hospice	2,692	\$ 8.18	\$ 1.83	1.50%	2.50%	22.74%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.55
Physical/Occupational Therapy	191	\$ 61.98	\$ 0.99	1.00%	3.50%	4.33%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.18
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	25	\$ 184.56	\$ 0.38	1.00%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 0.39
Pharmacy	3,151	\$ 61.54	\$ 16.16	-0.50%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 18.70
Non-Emergency Transportation	18,102	\$ 0.35	\$ 0.53	1.50%	2.50%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.60
Behavioral Health	2,161	\$ 126.66	\$ 22.81	0.00%	3.50%	3.49%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 26.13
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	0	\$ 69.09	\$ 0.00	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.00
All Other	611	\$ 35.64	\$ 1.81	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.06
Gross Benefit Total			\$ 76.76	0.41%	3.71%	1.87%	0.90%					\$ 87.29

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	10.00%	\$ 9.86
Underwriting Gain	1.50%	\$ 1.48
Total Benefit and Non-Benefit PMPM		\$ 98.64

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 98.64
Premium Based Taxes	2.25%	\$ 2.27
Final Capitation PMPM		\$ 100.91

TANF/CHIP Child, 15+ Years, Male, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	9,338
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	2,350

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	20	\$ 842.28	\$ 1.44	1.00%	3.50%	0.27%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ 1.48
Outpatient Hospital - ER	91	\$ 283.13	\$ 2.15	0.50%	4.00%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 2.53
Outpatient Hospital - Non-ER	85	\$ 419.26	\$ 2.96	1.00%	2.50%	0.27%	4.99%	0.00%	0.00%	0.00%	0.00%	\$ 3.40
Physician/Professional	926	\$ 93.39	\$ 7.21	1.00%	3.50%	0.30%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 8.24
Clinics (w/FQHC/RHC)	240	\$ 140.67	\$ 2.81	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 3.21
Laboratory/Radiology/Pathology	206	\$ 24.31	\$ 0.42	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.47
Dental - Medical	1	\$ 33.04	\$ 0.00	1.00%	3.50%	0.27%	2.01%	0.00%	0.00%	0.00%	0.00%	\$ 0.00
DME and Supplies	21,667	\$ 1.22	\$ 2.20	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 2.50
Home Health/Hospice	-	\$ -	\$ -	1.50%	2.50%	0.00%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ -
Physical/Occupational Therapy	185	\$ 55.02	\$ 0.85	1.00%	3.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.97
ICF/MR Services	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	1.00%	3.50%	0.00%	-8.05%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	2,700	\$ 124.17	\$ 27.93	-0.50%	5.00%	0.27%	3.42%	0.00%	0.00%	0.00%	0.00%	\$ 32.32
Non-Emergency Transportation	7,270	\$ 0.82	\$ 0.50	1.50%	2.50%	0.27%	1.87%	0.00%	0.00%	0.00%	0.00%	\$ 0.56
Behavioral Health	1,739	\$ 150.35	\$ 21.79	0.00%	3.50%	4.30%	1.56%	0.00%	0.00%	0.00%	0.00%	\$ 25.15
Indian Health Referrals	4	\$ 28.87	\$ 0.01	1.00%	1.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.01
Family Planning	5	\$ 234.50	\$ 0.10	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 0.11
All Other	328	\$ 61.98	\$ 1.69	1.50%	2.50%	0.27%	2.48%	0.00%	0.00%	0.00%	0.00%	\$ 1.92
Gross Benefit Total			\$ 72.06	0.14%	3.99%	1.49%	2.47%					\$ 82.88

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	10.00%	\$ 9.37
Underwriting Gain	1.50%	\$ 1.40
Total Benefit and Non-Benefit PMPM		\$ 93.65

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 93.65
Premium Based Taxes	2.25%	\$ 2.16
Final Capitation PMPM		\$ 95.81

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	111,729
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	109,339

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	676	\$ 1,156.36	\$ 65.14	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 50.14
Outpatient Hospital - ER	869	\$ 450.85	\$ 32.66	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 26.38
Outpatient Hospital - Non-ER	1,262	\$ 366.89	\$ 38.59	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 35.87
Physician/Professional	6,053	\$ 188.26	\$ 94.96	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 108.63
Clinics (w/FQHC/RHC)	1,247	\$ 187.10	\$ 19.44	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 21.51
Laboratory/Radiology/Pathology	6,584	\$ 25.27	\$ 13.87	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 14.75
Dental - Medical	3	\$ 205.34	\$ 0.05	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.05
DME and Supplies	15,004	\$ 2.06	\$ 2.57	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.47
Home Health/Hospice	21	\$ 67.17	\$ 0.12	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.13
Physical/Occupational Therapy	1	\$ 82.49	\$ 0.01	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.01
ICF/MR Services	39	\$ 129.40	\$ 0.42	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 0.44
Nursing Facility	3	\$ 164.43	\$ 0.05	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 0.05
Pharmacy	11,402	\$ 93.80	\$ 89.13	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 101.13
Non-Emergency Transportation	5,913	\$ 1.59	\$ 0.78	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.85
Behavioral Health	3,577	\$ 165.47	\$ 49.33	0.00%	3.50%	5.10%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 49.69
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	3,423	\$ 56.97	\$ 16.25	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 17.13
All Other	2,536	\$ 24.67	\$ 5.21	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 5.17
Gross Benefit Total			\$ 428.58	0.21%	3.43%	0.83%	-0.09%					\$ 434.41

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 38.40
Underwriting Gain	1.50%	\$ 7.20
Total Benefit and Non-Benefit PMPM		\$ 480.01

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 480.01
Premium Based Taxes	2.25%	\$ 11.05
Final Capitation PMPM		\$ 491.06

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	110,013
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	103,333

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	757	\$ 1,030.57	\$ 64.99	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 50.02
Outpatient Hospital - ER	1,312	\$ 416.46	\$ 45.54	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 36.78
Outpatient Hospital - Non-ER	1,266	\$ 328.45	\$ 34.64	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 32.20
Physician/Professional	5,482	\$ 223.20	\$ 101.97	1.00%	3.00%	0.33%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 116.71
Clinics (w/FQHC/RHC)	719	\$ 199.94	\$ 11.99	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 13.26
Laboratory/Radiology/Pathology	5,363	\$ 27.09	\$ 12.10	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 12.88
Dental - Medical	1	\$ 354.17	\$ 0.04	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
DME and Supplies	22,340	\$ 1.34	\$ 2.49	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.40
Home Health/Hospice	48	\$ 27.41	\$ 0.11	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.12
Physical/Occupational Therapy	7	\$ 120.67	\$ 0.07	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.08
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	10,103	\$ 93.84	\$ 79.00	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 89.64
Non-Emergency Transportation	1,278	\$ 5.54	\$ 0.59	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.64
Behavioral Health	3,264	\$ 127.72	\$ 34.75	0.00%	3.50%	14.20%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 38.03
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	4,039	\$ 48.92	\$ 16.47	0.50%	2.00%	3.92%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 17.99
All Other	1,341	\$ 47.52	\$ 5.31	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 5.26
Gross Benefit Total			\$ 410.05	0.23%	3.41%	1.61%	-0.14%					\$ 416.05

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 36.78
Underwriting Gain	1.50%	\$ 6.90
Total Benefit and Non-Benefit PMPM		\$ 459.72

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 459.72
Premium Based Taxes	2.25%	\$ 10.58
Final Capitation PMPM		\$ 470.31

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	85,683
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	81,173

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	836	\$ 1,102.65	\$ 76.79	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 59.11
Outpatient Hospital - ER	763	\$ 526.46	\$ 33.45	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 27.02
Outpatient Hospital - Non-ER	732	\$ 498.22	\$ 30.38	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 28.24
Physician/Professional	5,443	\$ 236.36	\$ 107.20	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 122.63
Clinics (w/FQHC/RHC)	277	\$ 205.77	\$ 4.75	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 5.26
Laboratory/Radiology/Pathology	8,452	\$ 22.55	\$ 15.88	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 16.90
Dental - Medical	4	\$ 157.31	\$ 0.06	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.06
DME and Supplies	19,099	\$ 1.87	\$ 2.97	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.86
Home Health/Hospice	27	\$ 67.35	\$ 0.15	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.16
Physical/Occupational Therapy	4	\$ 99.23	\$ 0.03	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.03
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	9,414	\$ 89.17	\$ 69.96	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 79.38
Non-Emergency Transportation	1,174	\$ 6.20	\$ 0.61	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.66
Behavioral Health	4,221	\$ 103.35	\$ 36.35	0.00%	3.50%	10.08%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 38.35
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	6,738	\$ 30.51	\$ 17.13	0.50%	2.00%	0.38%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 18.08
All Other	1,975	\$ 49.26	\$ 8.11	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 8.04
Gross Benefit Total			\$ 403.83	0.25%	3.31%	1.16%	-0.23%					\$ 406.77

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 35.96
Underwriting Gain	1.50%	\$ 6.74
Total Benefit and Non-Benefit PMPM		\$ 449.47

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 449.47
Premium Based Taxes	2.25%	\$ 10.35
Final Capitation PMPM		\$ 459.82

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	164,416
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	157,820

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	580	\$ 1,133.15	\$ 54.77	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 42.16
Outpatient Hospital - ER	1,026	\$ 442.59	\$ 37.85	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 30.57
Outpatient Hospital - Non-ER	1,835	\$ 272.34	\$ 41.64	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 38.71
Physician/Professional	5,433	\$ 212.49	\$ 96.20	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 110.05
Clinics (w/FQHC/RHC)	1,325	\$ 198.41	\$ 21.91	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 24.24
Laboratory/Radiology/Pathology	4,795	\$ 28.03	\$ 11.20	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 11.92
Dental - Medical	2	\$ 272.07	\$ 0.04	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.04
DME and Supplies	16,790	\$ 1.45	\$ 2.03	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 1.95
Home Health/Hospice	77	\$ 52.62	\$ 0.34	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.36
Physical/Occupational Therapy	10	\$ 112.73	\$ 0.09	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.10
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	22	\$ 165.26	\$ 0.31	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 0.32
Pharmacy	11,532	\$ 96.18	\$ 92.43	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 104.87
Non-Emergency Transportation	9,130	\$ 0.96	\$ 0.73	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.79
Behavioral Health	2,783	\$ 147.58	\$ 34.23	0.00%	3.50%	9.46%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 35.91
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	3,044	\$ 65.96	\$ 16.73	0.50%	2.00%	1.63%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 17.88
All Other	2,064	\$ 26.75	\$ 4.60	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.56
Gross Benefit Total			\$ 415.10	0.22%	3.48%	1.09%	-0.04%					\$ 424.43

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 37.52
Underwriting Gain	1.50%	\$ 7.03
Total Benefit and Non-Benefit PMPM		\$ 468.98

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 468.98
Premium Based Taxes	2.25%	\$ 10.79
Final Capitation PMPM		\$ 479.78

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	66,452
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	15,539

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	573	\$ 1,292.41	\$ 61.69	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 47.49
Outpatient Hospital - ER	795	\$ 447.43	\$ 29.63	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 23.94
Outpatient Hospital - Non-ER	899	\$ 360.40	\$ 26.99	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 25.09
Physician/Professional	4,640	\$ 200.09	\$ 77.38	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 88.51
Clinics (w/FQHC/RHC)	975	\$ 183.45	\$ 14.90	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 16.49
Laboratory/Radiology/Pathology	4,578	\$ 25.57	\$ 9.76	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 10.38
Dental - Medical	3	\$ 185.03	\$ 0.04	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.05
DME and Supplies	12,167	\$ 2.33	\$ 2.36	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.27
Home Health/Hospice	105	\$ 25.44	\$ 0.22	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.24
Physical/Occupational Therapy	5	\$ 119.91	\$ 0.05	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.06
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	10,085	\$ 177.72	\$ 149.36	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 169.47
Non-Emergency Transportation	10,552	\$ 1.04	\$ 0.92	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.99
Behavioral Health	2,667	\$ 172.57	\$ 38.36	0.00%	3.50%	5.95%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 38.95
Indian Health Referrals	12	\$ 62.45	\$ 0.06	1.00%	1.50%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.07
Family Planning	2,819	\$ 84.35	\$ 19.82	0.50%	2.00%	0.31%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 20.90
All Other	3,945	\$ 21.97	\$ 7.22	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 7.16
Gross Benefit Total			\$ 438.77	0.09%	3.66%	0.77%	0.16%					\$ 452.05

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 39.96
Underwriting Gain	1.50%	\$ 7.49
Total Benefit and Non-Benefit PMPM		\$ 499.50

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 499.50
Premium Based Taxes	2.25%	\$ 11.50
Final Capitation PMPM		\$ 511.00

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	10,257
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	2,325

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	886	\$ 1,022.17	\$ 75.51	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 58.12
Outpatient Hospital - ER	1,465	\$ 417.25	\$ 50.93	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 41.14
Outpatient Hospital - Non-ER	1,167	\$ 302.43	\$ 29.41	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 27.34
Physician/Professional	4,939	\$ 231.71	\$ 95.36	1.00%	3.00%	0.35%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 109.16
Clinics (w/FQHC/RHC)	365	\$ 205.22	\$ 6.24	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 6.91
Laboratory/Radiology/Pathology	4,514	\$ 28.30	\$ 10.65	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 11.33
Dental - Medical	6	\$ 333.29	\$ 0.16	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.18
DME and Supplies	16,628	\$ 1.87	\$ 2.58	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.48
Home Health/Hospice	87	\$ 68.53	\$ 0.50	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.52
Physical/Occupational Therapy	5	\$ 101.86	\$ 0.04	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.04
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	10,310	\$ 179.83	\$ 154.51	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 175.32
Non-Emergency Transportation	849	\$ 8.44	\$ 0.60	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.65
Behavioral Health	3,407	\$ 146.19	\$ 41.50	0.00%	3.50%	12.99%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 44.94
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	3,995	\$ 65.96	\$ 21.96	0.50%	2.00%	2.98%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 23.78
All Other	2,049	\$ 43.01	\$ 7.34	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 7.28
Gross Benefit Total			\$ 497.29	0.09%	3.63%	1.47%	0.08%					\$ 509.19

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 41.97
Underwriting Gain	1.50%	\$ 8.39
Total Benefit and Non-Benefit PMPM		\$ 559.54

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 559.54
Premium Based Taxes	2.25%	\$ 12.88
Final Capitation PMPM		\$ 572.42

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	14,857
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	3,477

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	760	\$ 1,188.77	\$ 75.34	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 57.99
Outpatient Hospital - ER	928	\$ 452.49	\$ 34.99	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 28.26
Outpatient Hospital - Non-ER	677	\$ 463.78	\$ 26.15	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 24.31
Physician/Professional	5,098	\$ 233.10	\$ 99.04	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 113.29
Clinics (w/FQHC/RHC)	156	\$ 200.23	\$ 2.61	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 2.89
Laboratory/Radiology/Pathology	8,423	\$ 22.89	\$ 16.06	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 17.09
Dental - Medical	2	\$ 192.51	\$ 0.03	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.03
DME and Supplies	17,427	\$ 1.76	\$ 2.56	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.46
Home Health/Hospice	10	\$ 68.61	\$ 0.06	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.06
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	10,483	\$ 127.88	\$ 111.72	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 126.76
Non-Emergency Transportation	748	\$ 9.65	\$ 0.60	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.65
Behavioral Health	4,403	\$ 129.23	\$ 47.41	0.00%	3.50%	8.71%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 49.40
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	6,022	\$ 38.24	\$ 19.19	0.50%	2.00%	0.43%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 20.26
All Other	2,740	\$ 37.55	\$ 8.58	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 8.50
Gross Benefit Total			\$ 444.32	0.16%	3.47%	1.18%	-0.05%					\$ 451.95

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 39.95
Underwriting Gain	1.50%	\$ 7.49
Total Benefit and Non-Benefit PMPM		\$ 499.39

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 499.39
Premium Based Taxes	2.25%	\$ 11.49
Final Capitation PMPM		\$ 510.89

TANF Parent/Caretaker, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	35,070
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	8,139

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	652	\$ 1,135.58	\$ 61.69	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 47.49
Outpatient Hospital - ER	999	\$ 449.61	\$ 37.45	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 30.25
Outpatient Hospital - Non-ER	1,369	\$ 225.59	\$ 25.73	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 23.92
Physician/Professional	4,316	\$ 227.49	\$ 81.82	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 93.59
Clinics (w/FQHC/RHC)	738	\$ 203.08	\$ 12.49	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 13.82
Laboratory/Radiology/Pathology	3,632	\$ 29.99	\$ 9.08	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 9.66
Dental - Medical	2	\$ 366.30	\$ 0.06	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.07
DME and Supplies	16,026	\$ 1.56	\$ 2.09	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.01
Home Health/Hospice	41	\$ 58.27	\$ 0.20	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.21
Physical/Occupational Therapy	3	\$ 118.93	\$ 0.03	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.03
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	31	\$ 172.95	\$ 0.45	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 0.47
Pharmacy	10,128	\$ 200.84	\$ 169.50	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 192.33
Non-Emergency Transportation	4,593	\$ 2.02	\$ 0.77	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.84
Behavioral Health	2,351	\$ 147.21	\$ 28.84	0.00%	3.50%	10.84%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 30.64
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	2,681	\$ 88.87	\$ 19.86	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 20.94
All Other	3,356	\$ 23.44	\$ 6.56	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 6.50
Gross Benefit Total			\$ 456.61	0.06%	3.73%	0.94%	0.22%					\$ 472.74

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.00%	\$ 41.79
Underwriting Gain	1.50%	\$ 7.84
Total Benefit and Non-Benefit PMPM		\$ 522.37

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 522.37
Premium Based Taxes	2.25%	\$ 12.02
Final Capitation PMPM		\$ 534.39

TANF Parent/Caretaker, < 45 Years, Adult Female, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	16,515
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	3,960

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	476	\$ 506.75	\$ 20.08	0.00%	2.50%	0.27%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ 21.17
Outpatient Hospital - ER	286	\$ 413.20	\$ 9.85	0.00%	4.00%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 11.19
Outpatient Hospital - Non-ER	339	\$ 235.55	\$ 6.66	0.00%	3.50%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 7.48
Physician/Professional	1,633	\$ 201.65	\$ 27.45	1.00%	3.00%	0.33%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 30.89
Clinics (w/FQHC/RHC)	273	\$ 167.79	\$ 3.82	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 4.30
Laboratory/Radiology/Pathology	1,284	\$ 22.56	\$ 2.41	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 2.61
Dental - Medical	1	\$ 60.30	\$ 0.01	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 0.01
DME and Supplies	5,049	\$ 1.78	\$ 0.75	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.81
Home Health/Hospice	7	\$ 63.41	\$ 0.04	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.04
Physical/Occupational Therapy	1	\$ 13.21	\$ 0.00	1.00%	3.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.00
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	4,101	\$ 146.99	\$ 50.23	-0.50%	5.00%	0.27%	3.72%	0.00%	0.00%	0.00%	0.00%	\$ 58.29
Non-Emergency Transportation	2,077	\$ 3.09	\$ 0.54	0.50%	2.00%	0.27%	3.10%	0.00%	0.00%	0.00%	0.00%	\$ 0.59
Behavioral Health	891	\$ 174.13	\$ 12.93	0.00%	3.50%	14.75%	2.05%	0.00%	0.00%	0.00%	0.00%	\$ 16.50
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	586	\$ 116.50	\$ 5.69	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 6.15
All Other	1,230	\$ 16.66	\$ 1.71	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 1.85
Gross Benefit Total			\$ 142.16	0.08%	3.70%	1.60%	2.12%					\$ 161.87

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 17.28
Underwriting Gain	1.50%	\$ 2.73
Total Benefit and Non-Benefit PMPM		\$ 181.87

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 181.87
Premium Based Taxes	2.25%	\$ 4.19
Final Capitation PMPM		\$ 186.06

TANF Parent/Caretaker, < 45 Years, Adult Female, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	84,267
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	80,960

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	540	\$ 316.11	\$ 14.21	0.00%	2.50%	0.27%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ 14.98
Outpatient Hospital - ER	294	\$ 369.09	\$ 9.06	0.00%	4.00%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 10.29
Outpatient Hospital - Non-ER	515	\$ 185.10	\$ 7.95	0.00%	3.50%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 8.92
Physician/Professional	2,046	\$ 206.74	\$ 35.25	1.00%	3.00%	0.33%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 39.66
Clinics (w/FQHC/RHC)	334	\$ 165.70	\$ 4.62	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 5.19
Laboratory/Radiology/Pathology	1,691	\$ 22.47	\$ 3.17	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 3.42
Dental - Medical	0	\$ 374.69	\$ 0.00	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 0.00
DME and Supplies	7,207	\$ 1.22	\$ 0.73	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.79
Home Health/Hospice	631	\$ 6.60	\$ 0.35	0.50%	2.00%	12.28%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.42
Physical/Occupational Therapy	7	\$ 91.51	\$ 0.06	1.00%	3.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.06
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	4,451	\$ 73.28	\$ 27.18	-0.50%	5.00%	0.27%	3.72%	0.00%	0.00%	0.00%	0.00%	\$ 31.54
Non-Emergency Transportation	6,580	\$ 0.98	\$ 0.54	0.50%	2.00%	0.27%	3.10%	0.00%	0.00%	0.00%	0.00%	\$ 0.59
Behavioral Health	1,258	\$ 138.07	\$ 14.47	0.00%	3.50%	13.94%	2.05%	0.00%	0.00%	0.00%	0.00%	\$ 18.34
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	1,122	\$ 49.94	\$ 4.67	0.50%	2.00%	0.51%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 5.06
All Other	380	\$ 32.93	\$ 1.04	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 1.13
Gross Benefit Total			\$ 123.29	0.26%	3.46%	1.93%	1.95%					\$ 140.41

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 14.99
Underwriting Gain	1.50%	\$ 2.37
Total Benefit and Non-Benefit PMPM		\$ 157.77

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 157.77
Premium Based Taxes	2.25%	\$ 3.63
Final Capitation PMPM		\$ 161.40

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	37,647
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	36,070

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	227	\$ 1,957.44	\$ 37.07	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 28.54
Outpatient Hospital - ER	511	\$ 463.28	\$ 19.74	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 15.95
Outpatient Hospital - Non-ER	454	\$ 882.04	\$ 33.36	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 31.01
Physician/Professional	2,967	\$ 137.59	\$ 34.01	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 38.91
Clinics (w/FQHC/RHC)	662	\$ 180.62	\$ 9.97	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 11.03
Laboratory/Radiology/Pathology	2,078	\$ 28.58	\$ 4.95	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 5.27
Dental - Medical	2	\$ 286.63	\$ 0.05	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.05
DME and Supplies	7,592	\$ 3.16	\$ 2.00	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 1.92
Home Health/Hospice	642	\$ 9.43	\$ 0.50	0.50%	2.00%	19.25%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.63
Physical/Occupational Therapy	2	\$ 56.14	\$ 0.01	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.01
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	4	\$ 164.80	\$ 0.05	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 0.06
Pharmacy	6,327	\$ 92.40	\$ 48.72	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 55.28
Non-Emergency Transportation	14,948	\$ 0.51	\$ 0.63	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.68
Behavioral Health	1,775	\$ 156.51	\$ 23.15	0.00%	3.50%	8.33%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 24.03
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	3	\$ 1,278.17	\$ 0.34	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.36
All Other	1,942	\$ 28.51	\$ 4.61	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.57
Gross Benefit Total			\$ 219.18	0.12%	3.52%	1.17%	-0.10%					\$ 218.30

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 21.95
Underwriting Gain	1.50%	\$ 3.66
Total Benefit and Non-Benefit PMPM		\$ 243.91

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 243.91
Premium Based Taxes	2.25%	\$ 5.61
Final Capitation PMPM		\$ 249.53

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	24,172
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	21,264

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	279	\$ 1,592.62	\$ 37.06	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 28.53
Outpatient Hospital - ER	673	\$ 395.66	\$ 22.18	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 17.91
Outpatient Hospital - Non-ER	399	\$ 423.57	\$ 14.09	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 13.10
Physician/Professional	2,970	\$ 134.63	\$ 33.32	1.00%	3.00%	0.30%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 38.12
Clinics (w/FQHC/RHC)	191	\$ 182.92	\$ 2.91	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 3.23
Laboratory/Radiology/Pathology	1,926	\$ 25.42	\$ 4.08	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 4.34
Dental - Medical	1	\$ 237.18	\$ 0.03	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.03
DME and Supplies	15,210	\$ 3.15	\$ 3.99	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 3.83
Home Health/Hospice	59	\$ 68.15	\$ 0.34	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.36
Physical/Occupational Therapy	17	\$ 117.97	\$ 0.17	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.18
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	5,329	\$ 117.23	\$ 52.06	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 59.07
Non-Emergency Transportation	518	\$ 12.17	\$ 0.53	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.57
Behavioral Health	1,801	\$ 122.82	\$ 18.43	0.00%	3.50%	20.64%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 21.31
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	8	\$ 769.65	\$ 0.52	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.55
All Other	888	\$ 41.04	\$ 3.04	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 3.01
Gross Benefit Total			\$ 192.74	0.09%	3.58%	2.23%	-0.04%					\$ 194.14

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 20.72
Underwriting Gain	1.50%	\$ 3.27
Total Benefit and Non-Benefit PMPM		\$ 218.14

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 218.14
Premium Based Taxes	2.25%	\$ 5.02
Final Capitation PMPM		\$ 223.16

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	21,455
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	18,839

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	377	\$ 1,924.31	\$ 60.51	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 46.58
Outpatient Hospital - ER	424	\$ 477.88	\$ 16.88	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 13.64
Outpatient Hospital - Non-ER	283	\$ 814.43	\$ 19.17	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 17.82
Physician/Professional	3,284	\$ 150.40	\$ 41.15	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 47.07
Clinics (w/FQHC/RHC)	77	\$ 182.28	\$ 1.18	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 1.30
Laboratory/Radiology/Pathology	2,867	\$ 24.38	\$ 5.83	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 6.20
Dental - Medical	1	\$ 190.40	\$ 0.02	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.02
DME and Supplies	17,960	\$ 2.62	\$ 3.92	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 3.77
Home Health/Hospice	2,847	\$ 8.56	\$ 2.03	0.50%	2.00%	20.61%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 2.58
Physical/Occupational Therapy	8	\$ 129.49	\$ 0.08	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.09
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	5,337	\$ 132.78	\$ 59.05	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 67.00
Non-Emergency Transportation	1,402	\$ 4.37	\$ 0.51	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.55
Behavioral Health	1,852	\$ 107.16	\$ 16.54	0.00%	3.50%	16.04%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 18.39
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	6	\$ 292.68	\$ 0.14	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.15
All Other	1,533	\$ 40.51	\$ 5.17	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 5.13
Gross Benefit Total			\$ 232.20	0.09%	3.45%	1.57%	-0.17%					\$ 230.30

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 23.16
Underwriting Gain	1.50%	\$ 3.86
Total Benefit and Non-Benefit PMPM		\$ 257.32

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 257.32
Premium Based Taxes	2.25%	\$ 5.92
Final Capitation PMPM		\$ 263.24

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	45,791
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	40,873

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	217	\$ 1,563.96	\$ 28.22	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 21.72
Outpatient Hospital - ER	603	\$ 428.41	\$ 21.53	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 17.39
Outpatient Hospital - Non-ER	611	\$ 474.47	\$ 24.15	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 22.45
Physician/Professional	3,002	\$ 146.34	\$ 36.61	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 41.88
Clinics (w/FQHC/RHC)	555	\$ 180.99	\$ 8.37	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 9.26
Laboratory/Radiology/Pathology	1,847	\$ 27.09	\$ 4.17	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 4.44
Dental - Medical	3	\$ 697.74	\$ 0.20	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.22
DME and Supplies	9,965	\$ 2.71	\$ 2.25	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 2.17
Home Health/Hospice	69	\$ 19.20	\$ 0.11	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.12
Physical/Occupational Therapy	18	\$ 110.29	\$ 0.17	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.18
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	6,556	\$ 105.89	\$ 57.85	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 65.64
Non-Emergency Transportation	5,450	\$ 1.45	\$ 0.66	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.71
Behavioral Health	1,273	\$ 155.45	\$ 16.49	0.00%	3.50%	15.12%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 18.19
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	14	\$ 219.43	\$ 0.25	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.26
All Other	1,686	\$ 27.29	\$ 3.83	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 3.80
Gross Benefit Total			\$ 204.85	0.11%	3.65%	1.47%	0.07%					\$ 208.42

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 20.96
Underwriting Gain	1.50%	\$ 3.49
Total Benefit and Non-Benefit PMPM		\$ 232.87

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 232.87
Premium Based Taxes	2.25%	\$ 5.36
Final Capitation PMPM		\$ 238.23

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	12,432
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	2,301

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	353	\$ 1,590.60	\$ 46.81	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 36.03
Outpatient Hospital - ER	447	\$ 451.20	\$ 16.80	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 13.57
Outpatient Hospital - Non-ER	299	\$ 614.26	\$ 15.29	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 14.21
Physician/Professional	2,622	\$ 143.13	\$ 31.27	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 35.77
Clinics (w/FQHC/RHC)	411	\$ 184.82	\$ 6.32	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 7.00
Laboratory/Radiology/Pathology	1,775	\$ 28.78	\$ 4.26	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 4.53
Dental - Medical	2	\$ 93.99	\$ 0.02	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.02
DME and Supplies	8,477	\$ 5.09	\$ 3.59	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 3.45
Home Health/Hospice	1,143	\$ 10.89	\$ 1.04	0.50%	2.00%	15.97%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 1.27
Physical/Occupational Therapy	5	\$ 100.28	\$ 0.04	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.04
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	6,192	\$ 222.13	\$ 114.62	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 130.05
Non-Emergency Transportation	12,104	\$ 0.70	\$ 0.71	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.77
Behavioral Health	1,480	\$ 204.41	\$ 25.21	0.00%	3.50%	7.36%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 25.94
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	15	\$ 92.61	\$ 0.11	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.12
All Other	3,352	\$ 22.47	\$ 6.28	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 6.22
Gross Benefit Total			\$ 272.37	-0.04%	3.83%	0.99%	0.28%					\$ 279.00

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 28.06
Underwriting Gain	1.50%	\$ 4.68
Total Benefit and Non-Benefit PMPM		\$ 311.73

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 311.73
Premium Based Taxes	2.25%	\$ 7.18
Final Capitation PMPM		\$ 318.91

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	1,154
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	208

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	421	\$ 1,230.49	\$ 43.12	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 33.19
Outpatient Hospital - ER	719	\$ 441.76	\$ 26.48	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 21.39
Outpatient Hospital - Non-ER	314	\$ 856.29	\$ 22.38	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 20.80
Physician/Professional	2,519	\$ 178.01	\$ 37.36	1.00%	3.00%	0.28%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 42.74
Clinics (w/FQHC/RHC)	125	\$ 196.79	\$ 2.05	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 2.27
Laboratory/Radiology/Pathology	1,531	\$ 30.74	\$ 3.92	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 4.17
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	4,816	\$ 2.07	\$ 0.83	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 0.80
Home Health/Hospice	52	\$ 68.77	\$ 0.30	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.32
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	4,443	\$ 290.55	\$ 107.57	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 122.05
Non-Emergency Transportation	4,158	\$ 1.39	\$ 0.48	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.52
Behavioral Health	3,291	\$ 99.95	\$ 27.41	0.00%	3.50%	10.12%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 28.93
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	11	\$ 520.45	\$ 0.46	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.48
All Other	961	\$ 54.80	\$ 4.39	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 4.35
Gross Benefit Total			\$ 276.74	-0.03%	3.85%	1.25%	0.25%					\$ 282.01

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 28.36
Underwriting Gain	1.50%	\$ 4.73
Total Benefit and Non-Benefit PMPM		\$ 315.10

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 315.10
Premium Based Taxes	2.25%	\$ 7.25
Final Capitation PMPM		\$ 322.35

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	1,917
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	325

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	949	\$ 1,957.54	\$ 154.83	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 119.17
Outpatient Hospital - ER	659	\$ 536.79	\$ 29.47	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 23.80
Outpatient Hospital - Non-ER	315	\$ 467.86	\$ 12.26	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 11.40
Physician/Professional	4,694	\$ 151.04	\$ 59.09	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 67.59
Clinics (w/FQHC/RHC)	107	\$ 220.86	\$ 1.97	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 2.18
Laboratory/Radiology/Pathology	4,638	\$ 26.30	\$ 10.17	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 10.82
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	17,104	\$ 3.98	\$ 5.67	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 5.45
Home Health/Hospice	50	\$ 67.48	\$ 0.28	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.30
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	7,483	\$ 169.43	\$ 105.66	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 119.88
Non-Emergency Transportation	497	\$ 18.50	\$ 0.77	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.83
Behavioral Health	2,145	\$ 118.85	\$ 21.24	0.00%	3.50%	12.63%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 22.93
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	0.50%	2.00%	0.00%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ -
All Other	2,407	\$ 46.49	\$ 9.33	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 9.24
Gross Benefit Total			\$ 410.72	0.05%	3.37%	0.91%	-0.32%					\$ 393.59

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	8.50%	\$ 37.17
Underwriting Gain	1.50%	\$ 6.56
Total Benefit and Non-Benefit PMPM		\$ 437.33

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 437.33
Premium Based Taxes	2.25%	\$ 10.07
Final Capitation PMPM		\$ 447.39

TANF Parent/Caretaker, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	6,453
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	1,270

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	201	\$ 2,008.39	\$ 33.66	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 25.91
Outpatient Hospital - ER	690	\$ 473.30	\$ 27.19	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 21.97
Outpatient Hospital - Non-ER	452	\$ 556.21	\$ 20.96	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 19.48
Physician/Professional	2,535	\$ 139.40	\$ 29.45	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 33.69
Clinics (w/FQHC/RHC)	271	\$ 202.49	\$ 4.57	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 5.05
Laboratory/Radiology/Pathology	1,265	\$ 32.60	\$ 3.44	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 3.66
Dental - Medical	9	\$ 332.06	\$ 0.26	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.28
DME and Supplies	8,926	\$ 5.82	\$ 4.33	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 4.16
Home Health/Hospice	67	\$ 68.77	\$ 0.39	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.41
Physical/Occupational Therapy	28	\$ 116.79	\$ 0.27	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.29
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	5,891	\$ 239.54	\$ 117.59	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 133.42
Non-Emergency Transportation	4,356	\$ 1.63	\$ 0.59	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.64
Behavioral Health	1,032	\$ 170.64	\$ 14.68	0.00%	3.50%	15.15%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 16.20
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	4	\$ 247.93	\$ 0.08	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.08
All Other	2,624	\$ 30.55	\$ 6.68	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 6.62
Gross Benefit Total			\$ 264.13	-0.06%	3.94%	1.10%	0.36%					\$ 271.87

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 27.34
Underwriting Gain	1.50%	\$ 4.56
Total Benefit and Non-Benefit PMPM		\$ 303.76

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 303.76
Premium Based Taxes	2.25%	\$ 6.99
Final Capitation PMPM		\$ 310.75

TANF Parent/Caretaker, < 45 Years, Adult Male, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	2,506
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	454

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	5	\$ 3,953.40	\$ 1.59	0.00%	2.50%	0.27%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ 1.68
Outpatient Hospital - ER	168	\$ 391.39	\$ 5.47	0.00%	4.00%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 6.22
Outpatient Hospital - Non-ER	43	\$ 321.90	\$ 1.16	0.00%	3.50%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 1.30
Physician/Professional	529	\$ 121.84	\$ 5.37	1.00%	3.00%	0.34%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 6.04
Clinics (w/FQHC/RHC)	125	\$ 112.20	\$ 1.17	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 1.31
Laboratory/Radiology/Pathology	285	\$ 34.62	\$ 0.82	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.89
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ -
DME and Supplies	2,226	\$ 3.04	\$ 0.56	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.61
Home Health/Hospice	-	\$ -	\$ -	0.50%	2.00%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	1,790	\$ 206.06	\$ 30.74	-0.50%	5.00%	0.27%	3.72%	0.00%	0.00%	0.00%	0.00%	\$ 35.67
Non-Emergency Transportation	2,893	\$ 2.17	\$ 0.52	0.50%	2.00%	0.27%	3.10%	0.00%	0.00%	0.00%	0.00%	\$ 0.58
Behavioral Health	767	\$ 158.66	\$ 10.14	0.00%	3.50%	16.96%	2.05%	0.00%	0.00%	0.00%	0.00%	\$ 13.19
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	5	\$ 311.76	\$ 0.13	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.14
All Other	573	\$ 21.18	\$ 1.01	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 1.09
Gross Benefit Total			\$ 58.69	-0.12%	4.17%	3.16%	2.84%					\$ 68.72

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	10.00%	\$ 7.77
Underwriting Gain	1.50%	\$ 1.16
Total Benefit and Non-Benefit PMPM		\$ 77.65

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 77.65
Premium Based Taxes	2.25%	\$ 1.79
Final Capitation PMPM		\$ 79.44

TANF Parent/Caretaker, < 45 Years, Adult Male, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	18,890
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	17,166

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	98	\$ 1,127.64	\$ 9.22	0.00%	2.50%	0.27%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ 9.73
Outpatient Hospital - ER	162	\$ 349.92	\$ 4.73	0.00%	4.00%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 5.37
Outpatient Hospital - Non-ER	140	\$ 356.60	\$ 4.17	0.00%	3.50%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 4.68
Physician/Professional	1,117	\$ 103.51	\$ 9.63	1.00%	3.00%	0.29%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 10.83
Clinics (w/FQHC/RHC)	157	\$ 165.45	\$ 2.17	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 2.44
Laboratory/Radiology/Pathology	520	\$ 31.25	\$ 1.35	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 1.46
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ -
DME and Supplies	2,951	\$ 2.12	\$ 0.52	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.56
Home Health/Hospice	2	\$ 68.58	\$ 0.01	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.01
Physical/Occupational Therapy	13	\$ 50.60	\$ 0.06	1.00%	3.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.06
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	2,401	\$ 100.28	\$ 20.07	-0.50%	5.00%	0.27%	3.72%	0.00%	0.00%	0.00%	0.00%	\$ 23.29
Non-Emergency Transportation	17,758	\$ 0.34	\$ 0.51	0.50%	2.00%	0.27%	3.10%	0.00%	0.00%	0.00%	0.00%	\$ 0.56
Behavioral Health	1,166	\$ 133.24	\$ 12.95	0.00%	3.50%	14.39%	2.05%	0.00%	0.00%	0.00%	0.00%	\$ 16.47
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	3	\$ 198.23	\$ 0.05	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.06
All Other	538	\$ 34.34	\$ 1.54	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 1.67
Gross Benefit Total			\$ 66.98	0.06%	3.67%	3.00%	2.09%					\$ 77.19

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	10.00%	\$ 8.72
Underwriting Gain	1.50%	\$ 1.31
Total Benefit and Non-Benefit PMPM		\$ 87.22

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 87.22
Premium Based Taxes	2.25%	\$ 2.01
Final Capitation PMPM		\$ 89.23

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	21,245
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	24,383

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	533	\$ 1,881.38	\$ 83.63	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 64.37
Outpatient Hospital - ER	609	\$ 547.49	\$ 27.77	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 22.43
Outpatient Hospital - Non-ER	1,472	\$ 483.12	\$ 59.26	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 55.08
Physician/Professional	7,511	\$ 164.69	\$ 103.09	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 117.92
Clinics (w/FQHC/RHC)	1,636	\$ 181.79	\$ 24.79	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 27.43
Laboratory/Radiology/Pathology	6,565	\$ 24.87	\$ 13.60	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 14.47
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	34,452	\$ 3.27	\$ 9.40	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 9.03
Home Health/Hospice	471	\$ 18.88	\$ 0.74	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.78
Physical/Occupational Therapy	2	\$ 47.71	\$ 0.01	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.01
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	126	\$ 370.43	\$ 3.90	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 4.09
Pharmacy	18,891	\$ 114.34	\$ 180.00	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 204.24
Non-Emergency Transportation	27,306	\$ 0.68	\$ 1.54	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 1.67
Behavioral Health	3,478	\$ 145.42	\$ 42.14	0.00%	3.50%	5.90%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 42.77
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	59	\$ 199.07	\$ 0.98	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 1.03
All Other	3,722	\$ 27.43	\$ 8.51	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 8.43
Gross Benefit Total			\$ 559.34	0.10%	3.64%	0.70%	0.12%					\$ 573.76

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 47.29
Underwriting Gain	1.50%	\$ 9.46
Total Benefit and Non-Benefit PMPM		\$ 630.51

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 630.51
Premium Based Taxes	2.25%	\$ 14.51
Final Capitation PMPM		\$ 645.02

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	15,163
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	16,851

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	866	\$ 1,574.89	\$ 113.71	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 87.52
Outpatient Hospital - ER	858	\$ 480.81	\$ 34.39	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 27.78
Outpatient Hospital - Non-ER	1,790	\$ 478.05	\$ 71.33	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 66.30
Physician/Professional	8,136	\$ 189.53	\$ 128.50	1.00%	3.00%	0.30%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 147.03
Clinics (w/FQHC/RHC)	770	\$ 190.80	\$ 12.24	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 13.55
Laboratory/Radiology/Pathology	6,341	\$ 24.93	\$ 13.17	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 14.01
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	43,736	\$ 1.62	\$ 5.92	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 5.69
Home Health/Hospice	180	\$ 67.71	\$ 1.02	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 1.07
Physical/Occupational Therapy	14	\$ 127.02	\$ 0.15	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.16
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	25	\$ 184.56	\$ 0.38	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 0.40
Pharmacy	19,091	\$ 135.80	\$ 216.04	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 245.13
Non-Emergency Transportation	4,859	\$ 2.23	\$ 0.90	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.98
Behavioral Health	2,749	\$ 120.23	\$ 27.54	0.00%	3.50%	18.14%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 31.19
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	1,133	\$ 30.39	\$ 2.87	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 3.03
All Other	1,387	\$ 55.90	\$ 6.46	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 6.40
Gross Benefit Total			\$ 634.61	0.08%	3.68%	1.05%	0.12%					\$ 650.23

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 53.59
Underwriting Gain	1.50%	\$ 10.72
Total Benefit and Non-Benefit PMPM		\$ 714.54

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 714.54
Premium Based Taxes	2.25%	\$ 16.45
Final Capitation PMPM		\$ 730.99

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	13,557
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	14,698

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	780	\$ 1,691.56	\$ 110.02	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 84.68
Outpatient Hospital - ER	508	\$ 560.59	\$ 23.73	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 19.17
Outpatient Hospital - Non-ER	1,221	\$ 765.14	\$ 77.87	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 72.39
Physician/Professional	8,119	\$ 160.91	\$ 108.88	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 124.55
Clinics (w/FQHC/RHC)	364	\$ 188.31	\$ 5.71	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 6.32
Laboratory/Radiology/Pathology	9,101	\$ 24.45	\$ 18.54	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 19.73
Dental - Medical	4	\$ 196.88	\$ 0.06	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 0.06
DME and Supplies	39,418	\$ 2.31	\$ 7.59	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 7.30
Home Health/Hospice	59	\$ 67.21	\$ 0.33	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.35
Physical/Occupational Therapy	1	\$ 81.68	\$ 0.01	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.01
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	20	\$ 96.50	\$ 0.16	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 0.17
Pharmacy	18,162	\$ 126.63	\$ 191.65	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 217.45
Non-Emergency Transportation	1,460	\$ 6.29	\$ 0.77	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.83
Behavioral Health	2,706	\$ 97.85	\$ 22.06	0.00%	3.50%	14.37%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 24.18
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	1,146	\$ 8.24	\$ 0.79	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.83
All Other	2,200	\$ 50.95	\$ 9.34	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 9.26
Gross Benefit Total			\$ 577.50	0.06%	3.63%	0.81%	0.07%					\$ 587.27

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 48.40
Underwriting Gain	1.50%	\$ 9.68
Total Benefit and Non-Benefit PMPM		\$ 645.36

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 645.36
Premium Based Taxes	2.25%	\$ 14.85
Final Capitation PMPM		\$ 660.21

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	24,658
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	27,207

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	613	\$ 1,735.17	\$ 88.63	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 68.22
Outpatient Hospital - ER	722	\$ 503.43	\$ 30.30	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 24.47
Outpatient Hospital - Non-ER	2,130	\$ 451.68	\$ 80.18	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 74.53
Physician/Professional	6,953	\$ 165.90	\$ 96.13	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 109.96
Clinics (w/FQHC/RHC)	1,363	\$ 182.02	\$ 20.67	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 22.87
Laboratory/Radiology/Pathology	5,583	\$ 27.65	\$ 12.86	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 13.69
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	37,059	\$ 2.82	\$ 8.71	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 8.37
Home Health/Hospice	198	\$ 58.70	\$ 0.97	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 1.02
Physical/Occupational Therapy	6	\$ 158.61	\$ 0.08	1.00%	3.00%	0.27%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ 0.09
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	152	\$ 162.84	\$ 2.06	0.00%	2.50%	0.27%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ 2.17
Pharmacy	20,603	\$ 119.66	\$ 205.46	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 233.12
Non-Emergency Transportation	14,411	\$ 0.89	\$ 1.07	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 1.16
Behavioral Health	2,485	\$ 130.03	\$ 26.93	0.00%	3.50%	11.53%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 28.78
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	360	\$ 39.32	\$ 1.18	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 1.24
All Other	2,636	\$ 28.61	\$ 6.28	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 6.23
Gross Benefit Total			\$ 581.51	0.05%	3.72%	0.79%	0.17%					\$ 595.93

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.50%	\$ 49.12
Underwriting Gain	1.50%	\$ 9.82
Total Benefit and Non-Benefit PMPM		\$ 654.87

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 654.87
Premium Based Taxes	2.25%	\$ 15.07
Final Capitation PMPM		\$ 669.95

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	6,880
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	1,707

EAST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	983	\$ 1,492.75	\$ 122.27	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 94.12
Outpatient Hospital - ER	725	\$ 514.51	\$ 31.08	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 25.10
Outpatient Hospital - Non-ER	1,205	\$ 518.17	\$ 52.03	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 48.37
Physician/Professional	7,005	\$ 162.72	\$ 94.99	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 108.66
Clinics (w/FQHC/RHC)	1,174	\$ 163.04	\$ 15.95	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 17.65
Laboratory/Radiology/Pathology	4,987	\$ 30.15	\$ 12.53	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 13.33
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	38,462	\$ 3.23	\$ 10.34	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 9.94
Home Health/Hospice	1,852	\$ 9.12	\$ 1.41	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 1.49
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	20,451	\$ 236.92	\$ 403.76	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 458.13
Non-Emergency Transportation	5,760	\$ 4.00	\$ 1.92	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 2.08
Behavioral Health	2,397	\$ 150.68	\$ 30.10	0.00%	3.50%	2.83%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 29.66
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	1,130	\$ 12.40	\$ 1.17	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 1.23
All Other	7,649	\$ 22.18	\$ 14.14	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 14.01
Gross Benefit Total			\$ 791.68	-0.09%	3.98%	0.37%	0.47%					\$ 823.77

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.00%	\$ 63.02
Underwriting Gain	1.50%	\$ 13.50
Total Benefit and Non-Benefit PMPM		\$ 900.29

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 900.29
Premium Based Taxes	2.25%	\$ 20.72
Final Capitation PMPM		\$ 921.01

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	1,144
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	287

OKC Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment PMPM %	Seasonality PMPM %	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			Unit Cost %	Util/1000 %	Adjustment	Total	
Inpatient Hospital	1,727	\$ 1,652.66	\$ 237.91	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 183.12
Outpatient Hospital - ER	1,177	\$ 548.88	\$ 53.83	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 43.48
Outpatient Hospital - Non-ER	1,201	\$ 849.15	\$ 85.00	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 79.02
Physician/Professional	7,706	\$ 531.91	\$ 341.59	1.00%	3.00%	0.28%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 390.77
Clinics (w/FQHC/RHC)	284	\$ 197.71	\$ 4.68	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 5.18
Laboratory/Radiology/Pathology	4,259	\$ 41.54	\$ 14.74	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 15.69
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	28,563	\$ 1.80	\$ 4.29	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 4.12
Home Health/Hospice	21	\$ 68.58	\$ 0.12	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.13
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	17,704	\$ 268.50	\$ 396.12	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 449.46
Non-Emergency Transportation	1,497	\$ 5.02	\$ 0.63	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.68
Behavioral Health	4,522	\$ 88.80	\$ 33.47	0.00%	3.50%	15.98%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 37.20
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	160	\$ 455.00	\$ 6.06	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 6.39
All Other	2,301	\$ 107.79	\$ 20.67	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 20.49
Gross Benefit Total			\$ 1,199.11	0.14%	3.62%	0.71%	0.11%					\$ 1,235.73

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.00%	\$ 94.54
Underwriting Gain	1.50%	\$ 20.26
Total Benefit and Non-Benefit PMPM		\$ 1,350.52

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 1,350.52
Premium Based Taxes	2.25%	\$ 31.09
Final Capitation PMPM		\$ 1,381.61

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	1,304
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	336

TULSA Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	1,812	\$ 1,907.27	\$ 287.96	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 221.64
Outpatient Hospital - ER	1,023	\$ 541.68	\$ 46.16	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 37.28
Outpatient Hospital - Non-ER	951	\$ 717.63	\$ 56.90	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 52.89
Physician/Professional	10,843	\$ 321.78	\$ 290.77	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 332.61
Clinics (w/FQHC/RHC)	74	\$ 175.68	\$ 1.08	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 1.20
Laboratory/Radiology/Pathology	6,569	\$ 31.52	\$ 17.26	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 18.36
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	18,365	\$ 2.35	\$ 3.60	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 3.46
Home Health/Hospice	120	\$ 68.58	\$ 0.69	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 0.72
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	19,263	\$ 226.00	\$ 362.79	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 411.64
Non-Emergency Transportation	1,582	\$ 5.14	\$ 0.68	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 0.73
Behavioral Health	2,269	\$ 201.90	\$ 38.18	0.00%	3.50%	9.24%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 39.98
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	93	\$ 519.00	\$ 4.04	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 4.26
All Other	4,119	\$ 54.92	\$ 18.85	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 18.69
Gross Benefit Total			\$ 1,128.94	0.12%	3.56%	0.58%	0.01%					\$ 1,143.47

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.00%	\$ 87.48
Underwriting Gain	1.50%	\$ 18.75
Total Benefit and Non-Benefit PMPM		\$ 1,249.69

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 1,249.69
Premium Based Taxes	2.25%	\$ 28.77
Final Capitation PMPM		\$ 1,278.46

TANF Parent/Caretaker, Adult Male/Female Years 45+, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	3,745
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	939

WEST Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	1,120	\$ 1,148.44	\$ 107.15	0.00%	2.50%	0.27%	-1.65%	7.50%	-40.00%	75.00%	-26.63%	\$ 82.47
Outpatient Hospital - ER	776	\$ 536.87	\$ 34.74	0.00%	4.00%	0.27%	-0.47%	7.50%	-40.00%	75.00%	-26.63%	\$ 28.06
Outpatient Hospital - Non-ER	1,477	\$ 438.71	\$ 53.99	0.00%	3.50%	0.27%	-0.47%	7.50%	-25.00%	75.00%	-14.53%	\$ 50.19
Physician/Professional	6,419	\$ 161.23	\$ 86.25	1.00%	3.00%	0.27%	-0.02%	-5.00%	10.00%	75.00%	3.37%	\$ 98.66
Clinics (w/FQHC/RHC)	855	\$ 192.24	\$ 13.69	1.00%	3.00%	0.27%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ 15.15
Laboratory/Radiology/Pathology	4,172	\$ 28.86	\$ 10.03	0.50%	2.00%	0.27%	-0.99%	-1.00%	2.00%	75.00%	0.74%	\$ 10.68
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.02%	0.00%	0.00%	75.00%	0.00%	\$ -
DME and Supplies	26,417	\$ 2.75	\$ 6.06	0.50%	2.00%	0.27%	-0.99%	3.50%	-15.00%	75.00%	-9.02%	\$ 5.82
Home Health/Hospice	942	\$ 21.04	\$ 1.65	0.50%	2.00%	0.27%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ 1.74
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	-0.99%	1.00%	-5.00%	75.00%	-3.04%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.65%	0.00%	0.00%	75.00%	0.00%	\$ -
Pharmacy	19,403	\$ 297.36	\$ 480.81	-0.50%	5.00%	0.27%	1.62%	-5.00%	5.00%	75.00%	-0.19%	\$ 545.55
Non-Emergency Transportation	14,850	\$ 0.75	\$ 0.93	0.50%	2.00%	0.27%	1.74%	-5.00%	5.00%	75.00%	-0.19%	\$ 1.01
Behavioral Health	2,387	\$ 141.32	\$ 28.11	0.00%	3.50%	11.21%	-0.07%	5.00%	-20.00%	75.00%	-12.00%	\$ 29.97
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	-0.99%	0.00%	0.00%	75.00%	0.00%	\$ -
Family Planning	65	\$ 363.23	\$ 1.97	0.50%	2.00%	0.27%	-0.99%	-5.00%	5.00%	75.00%	-0.19%	\$ 2.08
All Other	4,862	\$ 21.68	\$ 8.78	0.50%	2.00%	0.27%	-0.99%	2.00%	-10.00%	75.00%	-6.15%	\$ 8.71
Gross Benefit Total			\$ 834.17	-0.15%	4.14%	0.64%	0.63%					\$ 880.08

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	7.00%	\$ 67.33
Underwriting Gain	1.50%	\$ 14.43
Total Benefit and Non-Benefit PMPM		\$ 961.84

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 961.84
Premium Based Taxes	2.25%	\$ 22.14
Final Capitation PMPM		\$ 983.98

TANF Parent/Caretaker, Adult Male/Female Years 45+, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	1,062
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	265

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses PMPM
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	23	\$ 1,440.85	\$ 2.74	0.00%	2.50%	0.27%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ 2.89
Outpatient Hospital - ER	113	\$ 384.65	\$ 3.63	0.00%	4.00%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 4.12
Outpatient Hospital - Non-ER	216	\$ 213.38	\$ 3.83	0.00%	3.50%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 4.30
Physician/Professional	1,330	\$ 91.49	\$ 10.14	1.00%	3.00%	0.28%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 11.41
Clinics (w/FQHC/RHC)	317	\$ 146.16	\$ 3.87	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 4.35
Laboratory/Radiology/Pathology	2,322	\$ 19.62	\$ 3.80	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 4.10
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ -
DME and Supplies	5,161	\$ 4.76	\$ 2.05	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 2.21
Home Health/Hospice	-	\$ -	\$ -	0.50%	2.00%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	8,088	\$ 241.94	\$ 163.07	-0.50%	5.00%	0.27%	3.72%	0.00%	0.00%	0.00%	0.00%	\$ 189.21
Non-Emergency Transportation	17,564	\$ 0.35	\$ 0.52	0.50%	2.00%	0.27%	3.10%	0.00%	0.00%	0.00%	0.00%	\$ 0.57
Behavioral Health	444	\$ 482.75	\$ 17.85	0.00%	3.50%	3.04%	2.05%	0.00%	0.00%	0.00%	0.00%	\$ 20.46
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	-	\$ -	\$ -	0.50%	2.00%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
All Other	435	\$ 14.70	\$ 0.53	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.58
Gross Benefit Total			\$ 212.03	-0.30%	4.57%	0.51%	3.27%					\$ 244.21

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.00%	\$ 24.56
Underwriting Gain	1.50%	\$ 4.09
Total Benefit and Non-Benefit PMPM		\$ 272.86

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 272.86
Premium Based Taxes	2.25%	\$ 6.28
Final Capitation PMPM		\$ 279.14

TANF Parent/Caretaker, Adult Male/Female Years 45+, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021
Base Member Months:	6,959
Trend Months (No Seasonality):	30

Contract Period:	October 1, 2023 to June 30, 2024
Projected Member Months:	8,783

Statewide Category of Service	Adjusted Base Data			Annual Medical Trends		Program Change Adjustment	Seasonality	Managed Care Savings				Projected Medical Expenses
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %			PMPM %	PMPM %	Unit Cost %	Util/1000 %	
Inpatient Hospital	526	\$ 787.58	\$ 34.52	0.00%	2.50%	0.27%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ 36.39
Outpatient Hospital - ER	188	\$ 470.53	\$ 7.38	0.00%	4.00%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 8.38
Outpatient Hospital - Non-ER	552	\$ 367.81	\$ 16.93	0.00%	3.50%	0.27%	2.72%	0.00%	0.00%	0.00%	0.00%	\$ 19.00
Physician/Professional	2,714	\$ 122.99	\$ 27.81	1.00%	3.00%	0.30%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 31.28
Clinics (w/FQHC/RHC)	548	\$ 140.27	\$ 6.41	1.00%	3.00%	0.27%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ 7.21
Laboratory/Radiology/Pathology	2,046	\$ 20.15	\$ 3.44	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 3.72
Dental - Medical	-	\$ -	\$ -	1.00%	3.00%	0.00%	1.60%	0.00%	0.00%	0.00%	0.00%	\$ -
DME and Supplies	11,230	\$ 1.97	\$ 1.84	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 1.99
Home Health/Hospice	31	\$ 67.63	\$ 0.18	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.19
Physical/Occupational Therapy	-	\$ -	\$ -	1.00%	3.00%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
ICF/MR Services	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Nursing Facility	-	\$ -	\$ -	0.00%	2.50%	0.00%	-1.15%	0.00%	0.00%	0.00%	0.00%	\$ -
Pharmacy	8,050	\$ 78.61	\$ 52.74	-0.50%	5.00%	0.27%	3.72%	0.00%	0.00%	0.00%	0.00%	\$ 61.19
Non-Emergency Transportation	5,040	\$ 1.41	\$ 0.59	0.50%	2.00%	0.27%	3.10%	0.00%	0.00%	0.00%	0.00%	\$ 0.65
Behavioral Health	1,075	\$ 111.06	\$ 9.95	0.00%	3.50%	7.85%	2.05%	0.00%	0.00%	0.00%	0.00%	\$ 11.93
Indian Health Referrals	-	\$ -	\$ -	1.00%	1.50%	0.00%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ -
Family Planning	4	\$ 258.69	\$ 0.08	0.50%	2.00%	98.36%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 0.16
All Other	793	\$ 24.25	\$ 1.60	0.50%	2.00%	0.27%	1.36%	0.00%	0.00%	0.00%	0.00%	\$ 1.73
Gross Benefit Total			\$ 163.46	0.07%	3.62%	0.78%	1.89%					\$ 183.84

Notes:

- Totals may differ due to rounding.
- Trend months reflect the 30 months from the mid-point of CY2021 (June 30, 2021) to the mid-point of SFY2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 19.62
Underwriting Gain	1.50%	\$ 3.10
Total Benefit and Non-Benefit PMPM		\$ 206.56

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 206.56
Premium Based Taxes	2.25%	\$ 4.75
Final Capitation PMPM		\$ 211.32

Expansion, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	43,874	Projected Member Months:	170,807
Trend Months (No Seasonality):			

EAST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 50.14	-25.00%	\$ 37.61
Outpatient Hospital - ER	\$ 26.38	-10.00%	\$ 23.74
Outpatient Hospital - Non-ER	\$ 35.87	-10.00%	\$ 32.28
Physician/Professional	\$ 108.63	-10.00%	\$ 97.77
Clinics (w/FQHC/RHC)	\$ 21.51	-10.00%	\$ 19.36
Laboratory/Radiology/Pathology	\$ 14.75	-25.00%	\$ 11.07
Dental - Medical	\$ 0.05	-10.00%	\$ 0.05
DME and Supplies	\$ 2.47	-25.00%	\$ 1.86
Home Health/Hospice	\$ 0.13	-25.00%	\$ 0.09
Physical/Occupational Therapy	\$ 0.01	-25.00%	\$ 0.01
ICF/MR Services	\$ 0.44	-25.00%	\$ 0.33
Nursing Facility	\$ 0.05	-25.00%	\$ 0.04
Pharmacy	\$ 101.13	-10.00%	\$ 91.02
Non-Emergency Transportation	\$ 0.85	-35.00%	\$ 0.55
Behavioral Health	\$ 49.69	-20.00%	\$ 39.75
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 17.13	-25.00%	\$ 12.85
All Other	\$ 5.17	-25.00%	\$ 3.88
Gross Benefit Total	\$ 434.41	-14.31%	\$ 372.24

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 35.16
	Underwriting Gain	1.50%	\$ 6.20
	Total Benefit and Non-Benefit PMPM		\$ 413.60
	Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 413.60	
Premium Based Taxes	2.25%	\$ 9.52	
Final Capitation PMPM		\$ 423.12	

Expansion, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	41,462	Projected Member Months:	164,933
Trend Months (No Seasonality):			

OKC	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 50.02	-25.00%	\$ 37.52
Outpatient Hospital - ER	\$ 36.78	-10.00%	\$ 33.11
Outpatient Hospital - Non-ER	\$ 32.20	-10.00%	\$ 28.98
Physician/Professional	\$ 116.71	-10.00%	\$ 105.04
Clinics (w/FQHC/RHC)	\$ 13.26	-10.00%	\$ 11.94
Laboratory/Radiology/Pathology	\$ 12.88	-25.00%	\$ 9.66
Dental - Medical	\$ 0.04	-10.00%	\$ 0.04
DME and Supplies	\$ 2.40	-25.00%	\$ 1.80
Home Health/Hospice	\$ 0.12	-25.00%	\$ 0.09
Physical/Occupational Therapy	\$ 0.08	-25.00%	\$ 0.06
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ -	-25.00%	\$ -
Pharmacy	\$ 89.64	-10.00%	\$ 80.68
Non-Emergency Transportation	\$ 0.64	-35.00%	\$ 0.42
Behavioral Health	\$ 38.03	-20.00%	\$ 30.42
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 17.99	-25.00%	\$ 13.49
All Other	\$ 5.26	-25.00%	\$ 3.95
Gross Benefit Total	\$ 416.05	-14.15%	\$ 357.17

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 33.73
	Underwriting Gain	1.50%	\$ 5.95
	Total Benefit and Non-Benefit PMPM		\$ 396.86
	Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 396.86	
Premium Based Taxes	2.25%	\$ 9.13	
Final Capitation PMPM		\$ 405.99	

Expansion, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	32,918	Projected Member Months:	131,328
Trend Months (No Seasonality):			

TULSA	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 59.11	-25.00%	\$ 44.33
Outpatient Hospital - ER	\$ 27.02	-10.00%	\$ 24.32
Outpatient Hospital - Non-ER	\$ 28.24	-10.00%	\$ 25.42
Physician/Professional	\$ 122.63	-10.00%	\$ 110.37
Clinics (w/FQHC/RHC)	\$ 5.26	-10.00%	\$ 4.73
Laboratory/Radiology/Pathology	\$ 16.90	-25.00%	\$ 12.68
Dental - Medical	\$ 0.06	-10.00%	\$ 0.05
DME and Supplies	\$ 2.86	-25.00%	\$ 2.14
Home Health/Hospice	\$ 0.16	-25.00%	\$ 0.12
Physical/Occupational Therapy	\$ 0.03	-25.00%	\$ 0.02
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ -	-25.00%	\$ -
Pharmacy	\$ 79.38	-10.00%	\$ 71.44
Non-Emergency Transportation	\$ 0.66	-35.00%	\$ 0.43
Behavioral Health	\$ 38.35	-20.00%	\$ 30.68
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 18.08	-25.00%	\$ 13.56
All Other	\$ 8.04	-25.00%	\$ 6.03
Gross Benefit Total	\$ 406.77	-14.86%	\$ 346.32

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 32.71
	Underwriting Gain	1.50%	\$ 5.77
	Total Benefit and Non-Benefit PMPM		\$ 384.80
	Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 384.80	
Premium Based Taxes	2.25%	\$ 8.66	
Final Capitation PMPM		\$ 393.66	

Expansion, < 45 Years, Adult Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	32,918	Projected Member Months:	131,328
Trend Months (No Seasonality):			

WEST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 42.16	-25.00%	\$ 31.62
Outpatient Hospital - ER	\$ 30.57	-10.00%	\$ 27.52
Outpatient Hospital - Non-ER	\$ 38.71	-10.00%	\$ 34.84
Physician/Professional	\$ 110.05	-10.00%	\$ 99.04
Clinics (w/FQHC/RHC)	\$ 24.24	-10.00%	\$ 21.82
Laboratory/Radiology/Pathology	\$ 11.92	-25.00%	\$ 8.94
Dental - Medical	\$ 0.04	-10.00%	\$ 0.04
DME and Supplies	\$ 1.95	-25.00%	\$ 1.46
Home Health/Hospice	\$ 0.36	-25.00%	\$ 0.27
Physical/Occupational Therapy	\$ 0.10	-25.00%	\$ 0.08
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ 0.32	-25.00%	\$ 0.24
Pharmacy	\$ 104.87	-10.00%	\$ 94.38
Non-Emergency Transportation	\$ 0.79	-35.00%	\$ 0.51
Behavioral Health	\$ 35.91	-20.00%	\$ 28.73
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 17.88	-25.00%	\$ 13.41
All Other	\$ 4.56	-25.00%	\$ 3.42
Gross Benefit Total	\$ 424.43	-13.69%	\$ 366.31

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 34.60
	Underwriting Gain	1.50%	\$ 6.11
	Total Benefit and Non-Benefit PMPM		\$ 407.01
	Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 407.01	
Premium Based Taxes	2.25%	\$ 9.37	
Final Capitation PMPM		\$ 416.38	

Expansion, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	23,193	Projected Member Months:	22,020
Trend Months (No Seasonality):			

EAST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 47.49	-25.00%	\$ 35.62
Outpatient Hospital - ER	\$ 23.94	-10.00%	\$ 21.54
Outpatient Hospital - Non-ER	\$ 25.09	-10.00%	\$ 22.58
Physician/Professional	\$ 88.51	-10.00%	\$ 79.66
Clinics (w/FQHC/RHC)	\$ 16.49	-10.00%	\$ 14.84
Laboratory/Radiology/Pathology	\$ 10.38	-25.00%	\$ 7.79
Dental - Medical	\$ 0.05	-10.00%	\$ 0.04
DME and Supplies	\$ 2.27	-25.00%	\$ 1.70
Home Health/Hospice	\$ 0.24	-25.00%	\$ 0.18
Physical/Occupational Therapy	\$ 0.06	-25.00%	\$ 0.04
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ -	-25.00%	\$ -
Pharmacy	\$ 169.47	-10.00%	\$ 152.53
Non-Emergency Transportation	\$ 0.99	-35.00%	\$ 0.64
Behavioral Health	\$ 38.95	-20.00%	\$ 31.16
Indian Health Referrals	\$ 0.07	-25.00%	\$ 0.05
Family Planning	\$ 20.90	-25.00%	\$ 15.67
All Other	\$ 7.16	-25.00%	\$ 5.37
Gross Benefit Total	\$ 452.05	-13.85%	\$ 389.42

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 36.78
	Underwriting Gain	1.50%	\$ 6.49
	Total Benefit and Non-Benefit PMPM		\$ 432.68
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 432.68
	Premium Based Taxes	2.25%	\$ 9.96
	Final Capitation PMPM		\$ 442.64

Expansion, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	3,807	Projected Member Months:	3,563
Trend Months (No Seasonality):			

OKC	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 58.12	-25.00%	\$ 43.59
Outpatient Hospital - ER	\$ 41.14	-10.00%	\$ 37.03
Outpatient Hospital - Non-ER	\$ 27.34	-10.00%	\$ 24.60
Physician/Professional	\$ 109.16	-10.00%	\$ 98.25
Clinics (w/FQHC/RHC)	\$ 6.91	-10.00%	\$ 6.22
Laboratory/Radiology/Pathology	\$ 11.33	-25.00%	\$ 8.50
Dental - Medical	\$ 0.18	-10.00%	\$ 0.16
DME and Supplies	\$ 2.48	-25.00%	\$ 1.86
Home Health/Hospice	\$ 0.52	-25.00%	\$ 0.39
Physical/Occupational Therapy	\$ 0.04	-25.00%	\$ 0.03
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ -	-25.00%	\$ -
Pharmacy	\$ 175.32	-10.00%	\$ 157.79
Non-Emergency Transportation	\$ 0.65	-35.00%	\$ 0.42
Behavioral Health	\$ 44.94	-20.00%	\$ 35.95
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 23.78	-25.00%	\$ 17.83
All Other	\$ 7.28	-25.00%	\$ 5.46
Gross Benefit Total	\$ 509.19	-13.96%	\$ 438.08

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.00%	\$ 38.73
	Underwriting Gain	1.50%	\$ 7.26
	Total Benefit and Non-Benefit PMPM		\$ 484.06
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 484.06
	Premium Based Taxes	2.25%	\$ 11.14
	Final Capitation PMPM		\$ 495.21

Expansion, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	4,493	Projected Member Months:	4,350
Trend Months (No Seasonality):			

TULSA	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 57.99	-25.00%	\$ 43.49
Outpatient Hospital - ER	\$ 28.26	-10.00%	\$ 25.44
Outpatient Hospital - Non-ER	\$ 24.31	-10.00%	\$ 21.88
Physician/Professional	\$ 113.29	-10.00%	\$ 101.96
Clinics (w/FQHC/RHC)	\$ 2.89	-10.00%	\$ 2.60
Laboratory/Radiology/Pathology	\$ 17.09	-25.00%	\$ 12.82
Dental - Medical	\$ 0.03	-10.00%	\$ 0.03
DME and Supplies	\$ 2.46	-25.00%	\$ 1.85
Home Health/Hospice	\$ 0.06	-25.00%	\$ 0.04
Physical/Occupational Therapy	\$ -	-25.00%	\$ -
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ -	-25.00%	\$ -
Pharmacy	\$ 126.76	-10.00%	\$ 114.08
Non-Emergency Transportation	\$ 0.65	-35.00%	\$ 0.42
Behavioral Health	\$ 49.40	-20.00%	\$ 39.52
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 20.26	-25.00%	\$ 15.20
All Other	\$ 8.50	-25.00%	\$ 6.38
Gross Benefit Total	\$ 451.95	-14.66%	\$ 385.70

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 36.43
	Underwriting Gain	1.50%	\$ 6.43
	Total Benefit and Non-Benefit PMPM		\$ 428.55
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 428.55
	Premium Based Taxes	2.25%	\$ 9.86
	Final Capitation PMPM		\$ 438.42

Expansion, < 45 Years, Adult Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	4,493	Projected Member Months:	4,350
Trend Months (No Seasonality):			

WEST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 47.49	-25.00%	\$ 35.61
Outpatient Hospital - ER	\$ 30.25	-10.00%	\$ 27.22
Outpatient Hospital - Non-ER	\$ 23.92	-10.00%	\$ 21.52
Physician/Professional	\$ 93.59	-10.00%	\$ 84.23
Clinics (w/FQHC/RHC)	\$ 13.82	-10.00%	\$ 12.44
Laboratory/Radiology/Pathology	\$ 9.66	-25.00%	\$ 7.24
Dental - Medical	\$ 0.07	-10.00%	\$ 0.06
DME and Supplies	\$ 2.01	-25.00%	\$ 1.51
Home Health/Hospice	\$ 0.21	-25.00%	\$ 0.16
Physical/Occupational Therapy	\$ 0.03	-25.00%	\$ 0.02
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ 0.47	-25.00%	\$ 0.35
Pharmacy	\$ 192.33	-10.00%	\$ 173.10
Non-Emergency Transportation	\$ 0.84	-35.00%	\$ 0.54
Behavioral Health	\$ 30.64	-20.00%	\$ 24.51
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 20.94	-25.00%	\$ 15.70
All Other	\$ 6.50	-25.00%	\$ 4.87
Gross Benefit Total	\$ 472.74	-13.46%	\$ 409.10

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.00%	\$ 36.16
	Underwriting Gain	1.50%	\$ 6.78
	Total Benefit and Non-Benefit PMPM		\$ 452.04
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 452.04
	Premium Based Taxes	2.25%	\$ 10.41
	Final Capitation PMPM		\$ 462.45

Expansion, < 45 Years, Adult Female, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	9,785	Projected Member Months:	8,892
Trend Months (No Seasonality):			

STATEWIDE	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 21.17	-25.00%	\$ 15.88
Outpatient Hospital - ER	\$ 11.19	-10.00%	\$ 10.07
Outpatient Hospital - Non-ER	\$ 7.48	-10.00%	\$ 6.73
Physician/Professional	\$ 30.89	-10.00%	\$ 27.80
Clinics (w/FQHC/RHC)	\$ 4.30	-10.00%	\$ 3.87
Laboratory/Radiology/Pathology	\$ 2.61	-25.00%	\$ 1.96
Dental - Medical	\$ 0.01	-10.00%	\$ 0.01
DME and Supplies	\$ 0.81	-25.00%	\$ 0.61
Home Health/Hospice	\$ 0.04	-25.00%	\$ 0.03
Physical/Occupational Therapy	\$ 0.00	-25.00%	\$ 0.00
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ -	-25.00%	\$ -
Pharmacy	\$ 58.29	-10.00%	\$ 52.46
Non-Emergency Transportation	\$ 0.59	-35.00%	\$ 0.38
Behavioral Health	\$ 16.50	-20.00%	\$ 13.20
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 6.15	-25.00%	\$ 4.61
All Other	\$ 1.85	-25.00%	\$ 1.38
Gross Benefit Total	\$ 161.87	-14.13%	\$ 138.99

Notes:	Rate Calculation Summary		
	Non-Benefit Expenses	%	PMPM
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Administrative Expenses	9.50%	\$ 14.84
	Underwriting Gain	1.50%	\$ 2.34
	Total Benefit and Non-Benefit PMPM		\$ 156.17
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 156.17
	Premium Based Taxes	2.25%	\$ 3.59
	Final Capitation PMPM		\$ 159.76

Expansion, < 45 Years, Adult Female, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	48,865	Projected Member Months:	182,106
Trend Months (No Seasonality):			

STATEWIDE	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 14.98	-25.00%	\$ 11.24
Outpatient Hospital - ER	\$ 10.29	-10.00%	\$ 9.26
Outpatient Hospital - Non-ER	\$ 8.92	-10.00%	\$ 8.03
Physician/Professional	\$ 39.66	-10.00%	\$ 35.69
Clinics (w/FQHC/RHC)	\$ 5.19	-10.00%	\$ 4.67
Laboratory/Radiology/Pathology	\$ 3.42	-25.00%	\$ 2.57
Dental - Medical	\$ 0.00	-10.00%	\$ 0.00
DME and Supplies	\$ 0.79	-25.00%	\$ 0.59
Home Health/Hospice	\$ 0.42	-25.00%	\$ 0.32
Physical/Occupational Therapy	\$ 0.06	-25.00%	\$ 0.05
ICF/MR Services	\$ -	-25.00%	\$ -
Nursing Facility	\$ -	-25.00%	\$ -
Pharmacy	\$ 31.54	-10.00%	\$ 28.39
Non-Emergency Transportation	\$ 0.59	-35.00%	\$ 0.38
Behavioral Health	\$ 18.34	-20.00%	\$ 14.67
Indian Health Referrals	\$ -	-25.00%	\$ -
Family Planning	\$ 5.06	-25.00%	\$ 3.80
All Other	\$ 1.13	-25.00%	\$ 0.85
Gross Benefit Total	\$ 140.41	-14.18%	\$ 120.51

Notes:	Rate Calculation Summary		
	Non-Benefit Expenses	%	PMPM
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Administrative Expenses	9.50%	\$ 12.86
	Underwriting Gain	1.50%	\$ 2.03
	Total Benefit and Non-Benefit PMPM		\$ 135.40
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 135.40
	Premium Based Taxes	2.25%	\$ 3.12
	Final Capitation PMPM		\$ 138.52

Expansion, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	34,032	Projected Member Months:	153,377
Trend Months (No Seasonality):			

EAST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 28.54	50.00%	\$ 42.80
Outpatient Hospital - ER	\$ 15.95	15.00%	\$ 18.34
Outpatient Hospital - Non-ER	\$ 31.01	15.00%	\$ 35.66
Physician/Professional	\$ 38.91	10.00%	\$ 42.80
Clinics (w/FQHC/RHC)	\$ 11.03	10.00%	\$ 12.14
Laboratory/Radiology/Pathology	\$ 5.27	-10.00%	\$ 4.74
Dental - Medical	\$ 0.05	10.00%	\$ 0.06
DME and Supplies	\$ 1.92	-10.00%	\$ 1.73
Home Health/Hospice	\$ 0.63	-10.00%	\$ 0.57
Physical/Occupational Therapy	\$ 0.01	-10.00%	\$ 0.01
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ 0.06	50.00%	\$ 0.08
Pharmacy	\$ 55.28	30.00%	\$ 71.86
Non-Emergency Transportation	\$ 0.68	-10.00%	\$ 0.62
Behavioral Health	\$ 24.03	50.00%	\$ 36.04
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.36	-10.00%	\$ 0.33
All Other	\$ 4.57	-10.00%	\$ 4.12
Gross Benefit Total	\$ 218.30	24.55%	\$ 271.89

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	9.00%	\$ 27.34
	Underwriting Gain	1.50%	\$ 4.56
	Total Benefit and Non-Benefit PMPM		\$ 303.79
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 303.79
	Premium Based Taxes	2.25%	\$ 6.99
	Final Capitation PMPM		\$ 310.78

Expansion, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	26,717	Projected Member Months:	124,456
Trend Months (No Seasonality):			

OKC	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 28.53	50.00%	\$ 42.79
Outpatient Hospital - ER	\$ 17.91	15.00%	\$ 20.60
Outpatient Hospital - Non-ER	\$ 13.10	15.00%	\$ 15.07
Physician/Professional	\$ 38.12	10.00%	\$ 41.94
Clinics (w/FQHC/RHC)	\$ 3.23	10.00%	\$ 3.55
Laboratory/Radiology/Pathology	\$ 4.34	-10.00%	\$ 3.91
Dental - Medical	\$ 0.03	10.00%	\$ 0.04
DME and Supplies	\$ 3.83	-10.00%	\$ 3.45
Home Health/Hospice	\$ 0.36	-10.00%	\$ 0.32
Physical/Occupational Therapy	\$ 0.18	-10.00%	\$ 0.16
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 59.07	30.00%	\$ 76.79
Non-Emergency Transportation	\$ 0.57	-10.00%	\$ 0.51
Behavioral Health	\$ 21.31	50.00%	\$ 31.97
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.55	-10.00%	\$ 0.49
All Other	\$ 3.01	-10.00%	\$ 2.71
Gross Benefit Total	\$ 194.14	25.83%	\$ 244.29

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	9.00%	\$ 24.57
	Underwriting Gain	1.50%	\$ 4.09
	Total Benefit and Non-Benefit PMPM		\$ 272.95
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 272.95
	Premium Based Taxes	2.25%	\$ 6.28
	Final Capitation PMPM		\$ 279.23

Expansion, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	21,822	Projected Member Months:	101,324
Trend Months (No Seasonality):			

TULSA	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 46.58	50.00%	\$ 69.87
Outpatient Hospital - ER	\$ 13.64	15.00%	\$ 15.68
Outpatient Hospital - Non-ER	\$ 17.82	15.00%	\$ 20.50
Physician/Professional	\$ 47.07	10.00%	\$ 51.78
Clinics (w/FQHC/RHC)	\$ 1.30	10.00%	\$ 1.43
Laboratory/Radiology/Pathology	\$ 6.20	-10.00%	\$ 5.58
Dental - Medical	\$ 0.02	10.00%	\$ 0.02
DME and Supplies	\$ 3.77	-10.00%	\$ 3.39
Home Health/Hospice	\$ 2.58	-10.00%	\$ 2.32
Physical/Occupational Therapy	\$ 0.09	-10.00%	\$ 0.08
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 67.00	30.00%	\$ 87.11
Non-Emergency Transportation	\$ 0.55	-10.00%	\$ 0.50
Behavioral Health	\$ 18.39	50.00%	\$ 27.59
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.15	-10.00%	\$ 0.13
All Other	\$ 5.13	-10.00%	\$ 4.62
Gross Benefit Total	\$ 230.30	26.18%	\$ 290.60

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	9.00%	\$ 29.22
	Underwriting Gain	1.50%	\$ 4.87
	Total Benefit and Non-Benefit PMPM		\$ 324.69
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 324.69
	Premium Based Taxes	2.25%	\$ 7.47
	Final Capitation PMPM		\$ 332.16

Expansion, < 45 Years, Adult Male, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	21,822	Projected Member Months:	101,324
Trend Months (No Seasonality):			

WEST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 21.72	50.00%	\$ 32.58
Outpatient Hospital - ER	\$ 17.39	15.00%	\$ 20.00
Outpatient Hospital - Non-ER	\$ 22.45	15.00%	\$ 25.82
Physician/Professional	\$ 41.88	10.00%	\$ 46.06
Clinics (w/FQHC/RHC)	\$ 9.26	10.00%	\$ 10.19
Laboratory/Radiology/Pathology	\$ 4.44	-10.00%	\$ 3.99
Dental - Medical	\$ 0.22	10.00%	\$ 0.24
DME and Supplies	\$ 2.17	-10.00%	\$ 1.95
Home Health/Hospice	\$ 0.12	-10.00%	\$ 0.11
Physical/Occupational Therapy	\$ 0.18	-10.00%	\$ 0.16
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 65.64	30.00%	\$ 85.33
Non-Emergency Transportation	\$ 0.71	-10.00%	\$ 0.64
Behavioral Health	\$ 18.19	50.00%	\$ 27.29
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.26	-10.00%	\$ 0.24
All Other	\$ 3.80	-10.00%	\$ 3.42
Gross Benefit Total	\$ 208.42	23.79%	\$ 258.01

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	9.00%	\$ 25.95
	Underwriting Gain	1.50%	\$ 4.32
	Total Benefit and Non-Benefit PMPM		\$ 288.28
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 288.28
	Premium Based Taxes	2.25%	\$ 6.64
	Final Capitation PMPM		\$ 294.92

Expansion, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	9,618	Projected Member Months:	10,571
Trend Months (No Seasonality):			

EAST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 36.03	50.00%	\$ 54.04
Outpatient Hospital - ER	\$ 13.57	15.00%	\$ 15.61
Outpatient Hospital - Non-ER	\$ 14.21	15.00%	\$ 16.35
Physician/Professional	\$ 35.77	10.00%	\$ 39.35
Clinics (w/FQHC/RHC)	\$ 7.00	10.00%	\$ 7.70
Laboratory/Radiology/Pathology	\$ 4.53	-10.00%	\$ 4.08
Dental - Medical	\$ 0.02	10.00%	\$ 0.02
DME and Supplies	\$ 3.45	-10.00%	\$ 3.11
Home Health/Hospice	\$ 1.27	-10.00%	\$ 1.14
Physical/Occupational Therapy	\$ 0.04	-10.00%	\$ 0.04
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 130.05	30.00%	\$ 169.07
Non-Emergency Transportation	\$ 0.77	-10.00%	\$ 0.69
Behavioral Health	\$ 25.94	50.00%	\$ 38.92
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.12	-10.00%	\$ 0.11
All Other	\$ 6.22	-10.00%	\$ 5.60
Gross Benefit Total	\$ 279.00	27.53%	\$ 355.81

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 33.60
	Underwriting Gain	1.50%	\$ 5.93
	Total Benefit and Non-Benefit PMPM		\$ 395.34
	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 395.34
	Premium Based Taxes	2.25%	\$ 9.10
	Final Capitation PMPM		\$ 404.44

Expansion, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	1,709	Projected Member Months:	1,744
Trend Months (No Seasonality):			

OKC	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 33.19	50.00%	\$ 49.79
Outpatient Hospital - ER	\$ 21.39	15.00%	\$ 24.59
Outpatient Hospital - Non-ER	\$ 20.80	15.00%	\$ 23.92
Physician/Professional	\$ 42.74	10.00%	\$ 47.02
Clinics (w/FQHC/RHC)	\$ 2.27	10.00%	\$ 2.50
Laboratory/Radiology/Pathology	\$ 4.17	-10.00%	\$ 3.75
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 0.80	-10.00%	\$ 0.72
Home Health/Hospice	\$ 0.32	-10.00%	\$ 0.28
Physical/Occupational Therapy	\$ -	-10.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 122.05	30.00%	\$ 158.66
Non-Emergency Transportation	\$ 0.52	-10.00%	\$ 0.47
Behavioral Health	\$ 28.93	50.00%	\$ 43.40
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.48	-10.00%	\$ 0.44
All Other	\$ 4.35	-10.00%	\$ 3.91
Gross Benefit Total	\$ 282.01	27.46%	\$ 359.45

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 33.95
	Underwriting Gain	1.50%	\$ 5.99
	Total Benefit and Non-Benefit PMPM		\$ 399.39
	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 399.39
	Premium Based Taxes	2.25%	\$ 9.19
	Final Capitation PMPM		\$ 408.58

Expansion, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	1,739	Projected Member Months:	1,976
Trend Months (No Seasonality):			

TULSA	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 119.17	50.00%	\$ 178.76
Outpatient Hospital - ER	\$ 23.80	15.00%	\$ 27.37
Outpatient Hospital - Non-ER	\$ 11.40	15.00%	\$ 13.11
Physician/Professional	\$ 67.59	10.00%	\$ 74.35
Clinics (w/FQHC/RHC)	\$ 2.18	10.00%	\$ 2.39
Laboratory/Radiology/Pathology	\$ 10.82	-10.00%	\$ 9.73
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 5.45	-10.00%	\$ 4.90
Home Health/Hospice	\$ 0.30	-10.00%	\$ 0.27
Physical/Occupational Therapy	\$ -	-10.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 119.88	30.00%	\$ 155.85
Non-Emergency Transportation	\$ 0.83	-10.00%	\$ 0.75
Behavioral Health	\$ 22.93	50.00%	\$ 34.40
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ -	-10.00%	\$ -
All Other	\$ 9.24	-10.00%	\$ 8.32
Gross Benefit Total	\$ 393.59	29.63%	\$ 510.20

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.50%	\$ 42.05
	Underwriting Gain	1.50%	\$ 8.41
	Total Benefit and Non-Benefit PMPM		\$ 560.66
	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 560.66
	Premium Based Taxes	2.25%	\$ 12.91
	Final Capitation PMPM		\$ 573.57

Expansion, < 45 Years, Adult Male, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	1,739	Projected Member Months:	1,976
Trend Months (No Seasonality):			

WEST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 25.91	50.00%	\$ 38.86
Outpatient Hospital - ER	\$ 21.97	15.00%	\$ 25.26
Outpatient Hospital - Non-ER	\$ 19.48	15.00%	\$ 22.41
Physician/Professional	\$ 33.69	10.00%	\$ 37.06
Clinics (w/FQHC/RHC)	\$ 5.05	10.00%	\$ 5.56
Laboratory/Radiology/Pathology	\$ 3.66	-10.00%	\$ 3.29
Dental - Medical	\$ 0.28	10.00%	\$ 0.31
DME and Supplies	\$ 4.16	-10.00%	\$ 3.74
Home Health/Hospice	\$ 0.41	-10.00%	\$ 0.37
Physical/Occupational Therapy	\$ 0.29	-10.00%	\$ 0.26
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 133.42	30.00%	\$ 173.45
Non-Emergency Transportation	\$ 0.64	-10.00%	\$ 0.58
Behavioral Health	\$ 16.20	50.00%	\$ 24.30
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.08	-10.00%	\$ 0.07
All Other	\$ 6.62	-10.00%	\$ 5.96
Gross Benefit Total	\$ 271.87	25.61%	\$ 341.48

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	8.50%	\$ 32.25
	Underwriting Gain	1.50%	\$ 5.69
	Total Benefit and Non-Benefit PMPM		\$ 379.42
	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 379.42
	Premium Based Taxes	2.25%	\$ 8.73
	Final Capitation PMPM		\$ 388.16

Expansion, < 45 Years, Adult Male, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	2,871	Projected Member Months:	3,005
Trend Months (No Seasonality):			

STATEWIDE	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 1.68	50.00%	\$ 2.52
Outpatient Hospital - ER	\$ 6.22	15.00%	\$ 7.15
Outpatient Hospital - Non-ER	\$ 1.30	15.00%	\$ 1.50
Physician/Professional	\$ 6.04	10.00%	\$ 6.65
Clinics (w/FQHC/RHC)	\$ 1.31	10.00%	\$ 1.44
Laboratory/Radiology/Pathology	\$ 0.89	-10.00%	\$ 0.80
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 0.61	-10.00%	\$ 0.55
Home Health/Hospice	\$ -	-10.00%	\$ -
Physical/Occupational Therapy	\$ -	-10.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 35.67	30.00%	\$ 46.37
Non-Emergency Transportation	\$ 0.58	-10.00%	\$ 0.52
Behavioral Health	\$ 13.19	50.00%	\$ 19.78
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.14	-10.00%	\$ 0.12
All Other	\$ 1.09	-10.00%	\$ 0.98
Gross Benefit Total	\$ 68.72	28.62%	\$ 88.39

Notes: 1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Rate Calculation Summary		
	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	10.00%	\$ 9.99
	Underwriting Gain	1.50%	\$ 1.50
	Total Benefit and Non-Benefit PMPM		\$ 99.88
	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 99.88
Premium Based Taxes	2.25%	\$ 2.30	
Final Capitation PMPM		\$ 102.18	

Expansion, < 45 Years, Adult Male, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	22,275	Projected Member Months:	97,015
Trend Months (No Seasonality):			

STATEWIDE	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 9.73	50.00%	\$ 14.59
Outpatient Hospital - ER	\$ 5.37	15.00%	\$ 6.18
Outpatient Hospital - Non-ER	\$ 4.68	15.00%	\$ 5.38
Physician/Professional	\$ 10.83	10.00%	\$ 11.92
Clinics (w/FQHC/RHC)	\$ 2.44	10.00%	\$ 2.68
Laboratory/Radiology/Pathology	\$ 1.46	-10.00%	\$ 1.32
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 0.56	-10.00%	\$ 0.51
Home Health/Hospice	\$ 0.01	-10.00%	\$ 0.01
Physical/Occupational Therapy	\$ 0.06	-10.00%	\$ 0.06
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 23.29	30.00%	\$ 30.27
Non-Emergency Transportation	\$ 0.56	-10.00%	\$ 0.50
Behavioral Health	\$ 16.47	50.00%	\$ 24.71
Indian Health Referrals	\$ -	-10.00%	\$ -
Family Planning	\$ 0.06	-10.00%	\$ 0.05
All Other	\$ 1.67	-10.00%	\$ 1.50
Gross Benefit Total	\$ 77.19	29.13%	\$ 99.68

Notes: 1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs. 3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Rate Calculation Summary		
	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	10.00%	\$ 11.26
	Underwriting Gain	1.50%	\$ 1.69
	Total Benefit and Non-Benefit PMPM		\$ 112.63
	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 112.63
Premium Based Taxes	2.25%	\$ 2.59	
Final Capitation PMPM		\$ 115.22	

Expansion, 45+ Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	35,479	Projected Member Months:	178,692
Trend Months (No Seasonality):			

EAST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 64.37	50.00%	\$ 96.55
Outpatient Hospital - ER	\$ 22.43	15.00%	\$ 25.79
Outpatient Hospital - Non-ER	\$ 55.08	15.00%	\$ 63.35
Physician/Professional	\$ 117.92	10.00%	\$ 129.72
Clinics (w/FQHC/RHC)	\$ 27.43	10.00%	\$ 30.17
Laboratory/Radiology/Pathology	\$ 14.47	5.00%	\$ 15.20
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 9.03	5.00%	\$ 9.48
Home Health/Hospice	\$ 0.78	5.00%	\$ 0.82
Physical/Occupational Therapy	\$ 0.01	5.00%	\$ 0.01
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ 4.09	50.00%	\$ 6.14
Pharmacy	\$ 204.24	20.00%	\$ 245.08
Non-Emergency Transportation	\$ 1.67	0.00%	\$ 1.67
Behavioral Health	\$ 42.77	50.00%	\$ 64.16
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 1.03	5.00%	\$ 1.08
All Other	\$ 8.43	5.00%	\$ 8.85
Gross Benefit Total	\$ 573.76	21.67%	\$ 698.07

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.50%	\$ 57.53
	Underwriting Gain	1.50%	\$ 11.51
	Total Benefit and Non-Benefit PMPM		\$ 767.11
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 767.11
	Premium Based Taxes	2.25%	\$ 17.66
	Final Capitation PMPM		\$ 784.77

Expansion, 45+ Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	24,324	Projected Member Months:	120,404
Trend Months (No Seasonality):			

OKC	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 87.52	50.00%	\$ 131.28
Outpatient Hospital - ER	\$ 27.78	15.00%	\$ 31.94
Outpatient Hospital - Non-ER	\$ 66.30	15.00%	\$ 76.25
Physician/Professional	\$ 147.03	10.00%	\$ 161.73
Clinics (w/FQHC/RHC)	\$ 13.55	10.00%	\$ 14.90
Laboratory/Radiology/Pathology	\$ 14.01	5.00%	\$ 14.71
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 5.69	5.00%	\$ 5.97
Home Health/Hospice	\$ 1.07	5.00%	\$ 1.13
Physical/Occupational Therapy	\$ 0.16	5.00%	\$ 0.17
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ 0.40	50.00%	\$ 0.59
Pharmacy	\$ 245.13	20.00%	\$ 294.15
Non-Emergency Transportation	\$ 0.98	0.00%	\$ 0.98
Behavioral Health	\$ 31.19	50.00%	\$ 46.78
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 3.03	5.00%	\$ 3.18
All Other	\$ 6.40	5.00%	\$ 6.72
Gross Benefit Total	\$ 650.23	21.57%	\$ 790.50

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.00%	\$ 60.48
	Underwriting Gain	1.50%	\$ 12.96
	Total Benefit and Non-Benefit PMPM		\$ 863.93
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 863.93
	Premium Based Taxes	2.25%	\$ 19.89
	Final Capitation PMPM		\$ 883.81

Expansion, 45+ Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	19,693	Projected Member Months:	94,417
Trend Months (No Seasonality):			

TULSA	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 84.68	50.00%	\$ 127.02
Outpatient Hospital - ER	\$ 19.17	15.00%	\$ 22.04
Outpatient Hospital - Non-ER	\$ 72.39	15.00%	\$ 83.25
Physician/Professional	\$ 124.55	10.00%	\$ 137.00
Clinics (w/FQHC/RHC)	\$ 6.32	10.00%	\$ 6.95
Laboratory/Radiology/Pathology	\$ 19.73	5.00%	\$ 20.71
Dental - Medical	\$ 0.06	10.00%	\$ 0.07
DME and Supplies	\$ 7.30	5.00%	\$ 7.66
Home Health/Hospice	\$ 0.35	5.00%	\$ 0.36
Physical/Occupational Therapy	\$ 0.01	5.00%	\$ 0.01
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ 0.17	50.00%	\$ 0.26
Pharmacy	\$ 217.45	20.00%	\$ 260.95
Non-Emergency Transportation	\$ 0.83	0.00%	\$ 0.83
Behavioral Health	\$ 24.18	50.00%	\$ 36.28
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 0.83	5.00%	\$ 0.87
All Other	\$ 9.26	5.00%	\$ 9.73
Gross Benefit Total	\$ 587.27	21.58%	\$ 713.98

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.00%	\$ 54.62
	Underwriting Gain	1.50%	\$ 11.70
	Total Benefit and Non-Benefit PMPM		\$ 780.31
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 780.31
	Premium Based Taxes	2.25%	\$ 17.96
	Final Capitation PMPM		\$ 798.27

Expansion, 45+ Years, Male and Female, Non-TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	19,693	Projected Member Months:	94,417
Trend Months (No Seasonality):			

WEST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 68.22	50.00%	\$ 102.32
Outpatient Hospital - ER	\$ 24.47	15.00%	\$ 28.14
Outpatient Hospital - Non-ER	\$ 74.53	15.00%	\$ 85.71
Physician/Professional	\$ 109.96	10.00%	\$ 120.95
Clinics (w/FQHC/RHC)	\$ 22.87	10.00%	\$ 25.16
Laboratory/Radiology/Pathology	\$ 13.69	5.00%	\$ 14.37
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 8.37	5.00%	\$ 8.79
Home Health/Hospice	\$ 1.02	5.00%	\$ 1.08
Physical/Occupational Therapy	\$ 0.09	5.00%	\$ 0.09
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ 2.17	50.00%	\$ 3.25
Pharmacy	\$ 233.12	20.00%	\$ 279.75
Non-Emergency Transportation	\$ 1.16	0.00%	\$ 1.16
Behavioral Health	\$ 28.78	50.00%	\$ 43.17
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 1.24	5.00%	\$ 1.31
All Other	\$ 6.23	5.00%	\$ 6.54
Gross Benefit Total	\$ 595.93	21.12%	\$ 721.81

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.00%	\$ 55.22
	Underwriting Gain	1.50%	\$ 11.83
	Total Benefit and Non-Benefit PMPM		\$ 788.86
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 788.86
	Premium Based Taxes	2.25%	\$ 18.16
	Final Capitation PMPM		\$ 807.02

Expansion, 45+ Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	5,058	Projected Member Months:	5,511
Trend Months (No Seasonality):			

EAST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 94.12	50.00%	\$ 141.17
Outpatient Hospital - ER	\$ 25.10	15.00%	\$ 28.87
Outpatient Hospital - Non-ER	\$ 48.37	15.00%	\$ 55.62
Physician/Professional	\$ 108.66	10.00%	\$ 119.53
Clinics (w/FQHC/RHC)	\$ 17.65	10.00%	\$ 19.41
Laboratory/Radiology/Pathology	\$ 13.33	5.00%	\$ 14.00
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 9.94	5.00%	\$ 10.43
Home Health/Hospice	\$ 1.49	5.00%	\$ 1.56
Physical/Occupational Therapy	\$ -	5.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 458.13	20.00%	\$ 549.75
Non-Emergency Transportation	\$ 2.08	0.00%	\$ 2.08
Behavioral Health	\$ 29.66	50.00%	\$ 44.50
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 1.23	5.00%	\$ 1.29
All Other	\$ 14.01	5.00%	\$ 14.71
Gross Benefit Total	\$ 823.77	21.75%	\$ 1,002.93

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.00%	\$ 76.73
	Underwriting Gain	1.50%	\$ 16.44
	Total Benefit and Non-Benefit PMPM		\$ 1,096.10
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 1,096.10
	Premium Based Taxes	2.25%	\$ 25.23
	Final Capitation PMPM		\$ 1,121.33

Expansion, 45+ Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	1,211	Projected Member Months:	1,177
Trend Months (No Seasonality):			

OKC	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 183.12	50.00%	\$ 274.68
Outpatient Hospital - ER	\$ 43.48	15.00%	\$ 50.00
Outpatient Hospital - Non-ER	\$ 79.02	15.00%	\$ 90.87
Physician/Professional	\$ 390.77	10.00%	\$ 429.85
Clinics (w/FQHC/RHC)	\$ 5.18	10.00%	\$ 5.70
Laboratory/Radiology/Pathology	\$ 15.69	5.00%	\$ 16.47
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 4.12	5.00%	\$ 4.33
Home Health/Hospice	\$ 0.13	5.00%	\$ 0.13
Physical/Occupational Therapy	\$ -	5.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 449.46	20.00%	\$ 539.36
Non-Emergency Transportation	\$ 0.68	0.00%	\$ 0.68
Behavioral Health	\$ 37.20	50.00%	\$ 55.80
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 6.39	5.00%	\$ 6.71
All Other	\$ 20.49	5.00%	\$ 21.52
Gross Benefit Total	\$ 1,235.73	21.07%	\$ 1,496.09

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.00%	\$ 114.46
	Underwriting Gain	1.50%	\$ 24.53
	Total Benefit and Non-Benefit PMPM		\$ 1,635.07
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 1,635.07
	Premium Based Taxes	2.25%	\$ 37.64
	Final Capitation PMPM		\$ 1,672.71

Expansion, 45+ Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	1,153	Projected Member Months:	1,262
Trend Months (No Seasonality):			

TULSA	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 221.64	50.00%	\$ 332.46
Outpatient Hospital - ER	\$ 37.28	15.00%	\$ 42.87
Outpatient Hospital - Non-ER	\$ 52.89	15.00%	\$ 60.83
Physician/Professional	\$ 332.61	10.00%	\$ 365.87
Clinics (w/FQHC/RHC)	\$ 1.20	10.00%	\$ 1.32
Laboratory/Radiology/Pathology	\$ 18.36	5.00%	\$ 19.28
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 3.46	5.00%	\$ 3.63
Home Health/Hospice	\$ 0.72	5.00%	\$ 0.76
Physical/Occupational Therapy	\$ -	5.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 411.64	20.00%	\$ 493.97
Non-Emergency Transportation	\$ 0.73	0.00%	\$ 0.73
Behavioral Health	\$ 39.98	50.00%	\$ 59.96
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 4.26	5.00%	\$ 4.47
All Other	\$ 18.69	5.00%	\$ 19.62
Gross Benefit Total	\$ 1,143.47	22.94%	\$ 1,405.79

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.00%	\$ 107.55
	Underwriting Gain	1.50%	\$ 23.05
	Total Benefit and Non-Benefit PMPM		\$ 1,536.38
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 1,536.38
	Premium Based Taxes	2.25%	\$ 35.36
	Final Capitation PMPM		\$ 1,571.75

Expansion, 45+ Years, Male and Female, Non-TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	1,153	Projected Member Months:	1,262
Trend Months (No Seasonality):			

WEST	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 82.47	50.00%	\$ 123.71
Outpatient Hospital - ER	\$ 28.06	15.00%	\$ 32.27
Outpatient Hospital - Non-ER	\$ 50.19	15.00%	\$ 57.71
Physician/Professional	\$ 98.66	10.00%	\$ 108.52
Clinics (w/FQHC/RHC)	\$ 15.15	10.00%	\$ 16.67
Laboratory/Radiology/Pathology	\$ 10.68	5.00%	\$ 11.21
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 5.82	5.00%	\$ 6.11
Home Health/Hospice	\$ 1.74	5.00%	\$ 1.83
Physical/Occupational Therapy	\$ -	5.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 545.55	20.00%	\$ 654.66
Non-Emergency Transportation	\$ 1.01	0.00%	\$ 1.01
Behavioral Health	\$ 29.97	50.00%	\$ 44.95
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 2.08	5.00%	\$ 2.18
All Other	\$ 8.71	5.00%	\$ 9.14
Gross Benefit Total	\$ 880.08	21.58%	\$ 1,069.98

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	7.00%	\$ 81.86
	Underwriting Gain	1.50%	\$ 17.54
	Total Benefit and Non-Benefit PMPM		\$ 1,169.38
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 1,169.38
	Premium Based Taxes	2.25%	\$ 26.92
	Final Capitation PMPM		\$ 1,196.30

Expansion, 45+ Years, Male and Female, TPL, Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	1,183	Projected Member Months:	1,195
Trend Months (No Seasonality):			

STATEWIDE	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 2.89	50.00%	\$ 4.34
Outpatient Hospital - ER	\$ 4.12	15.00%	\$ 4.74
Outpatient Hospital - Non-ER	\$ 4.30	15.00%	\$ 4.95
Physician/Professional	\$ 11.41	10.00%	\$ 12.55
Clinics (w/FQHC/RHC)	\$ 4.35	10.00%	\$ 4.78
Laboratory/Radiology/Pathology	\$ 4.10	5.00%	\$ 4.31
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 2.21	5.00%	\$ 2.32
Home Health/Hospice	\$ -	5.00%	\$ -
Physical/Occupational Therapy	\$ -	5.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 189.21	20.00%	\$ 227.06
Non-Emergency Transportation	\$ 0.57	0.00%	\$ 0.57
Behavioral Health	\$ 20.46	50.00%	\$ 30.69
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ -	5.00%	\$ -
All Other	\$ 0.58	5.00%	\$ 0.61
Gross Benefit Total	\$ 244.21	21.58%	\$ 296.91

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	9.00%	\$ 29.86
	Underwriting Gain	1.50%	\$ 4.98
	Total Benefit and Non-Benefit PMPM		\$ 331.75
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 331.75
	Premium Based Taxes	2.25%	\$ 7.64
	Final Capitation PMPM		\$ 339.38

Expansion, 45+ Years, Male and Female, TPL, Non-Voluntary

Base Period:	January 1, 2021 to December 31, 2021	Contract Period:	October 1, 2023 to June 30, 2024
Base Member Months:	13,467	Projected Member Months:	61,127
Trend Months (No Seasonality):			

STATEWIDE	Projected Medical Expense	PMPM Relativity	Projected Medical Expenses
Category of Service	PMPM	PMPM %	PMPM
Inpatient Hospital	\$ 36.39	50.00%	\$ 54.59
Outpatient Hospital - ER	\$ 8.38	15.00%	\$ 9.64
Outpatient Hospital - Non-ER	\$ 19.00	15.00%	\$ 21.86
Physician/Professional	\$ 31.28	10.00%	\$ 34.41
Clinics (w/FQHC/RHC)	\$ 7.21	10.00%	\$ 7.93
Laboratory/Radiology/Pathology	\$ 3.72	5.00%	\$ 3.90
Dental - Medical	\$ -	10.00%	\$ -
DME and Supplies	\$ 1.99	5.00%	\$ 2.09
Home Health/Hospice	\$ 0.19	5.00%	\$ 0.20
Physical/Occupational Therapy	\$ -	5.00%	\$ -
ICF/MR Services	\$ -	50.00%	\$ -
Nursing Facility	\$ -	50.00%	\$ -
Pharmacy	\$ 61.19	20.00%	\$ 73.43
Non-Emergency Transportation	\$ 0.65	0.00%	\$ 0.65
Behavioral Health	\$ 11.93	50.00%	\$ 17.90
Indian Health Referrals	\$ -	5.00%	\$ -
Family Planning	\$ 0.16	5.00%	\$ 0.17
All Other	\$ 1.73	5.00%	\$ 1.82
Gross Benefit Total	\$ 183.84	24.34%	\$ 228.59

Notes:	Rate Calculation Summary		
1. Totals may differ due to rounding. 2. Due to limited Expansion experience in CY2021, the Expansion rates are based on TANF adult project medical PMPMs.	Non-Benefit Expenses	%	PMPM
	Administrative Expenses	9.00%	\$ 22.99
	Underwriting Gain	1.50%	\$ 3.83
	Total Benefit and Non-Benefit PMPM		\$ 255.41
3. All PMPM values contained on this capitation rate calculation sheet are based on CY2021 member months.	Premium Tax	%	PMPM
	Subtotal Prior to Premium Tax		\$ 255.41
	Premium Based Taxes	2.25%	\$ 5.88
	Final Capitation PMPM		\$ 261.29