

UPDATED 11.19.2021

Row # / Column Letter B C D E F G H I J K L M N

**Renewal Waiver
Estimated Member Month Calculations**

State:

5 Actual Enrollment for the Time Period - R1 = 7/1/18 through 6/30/19 R2 = 7/1/18 through 6/30/19 **R1 and R2 include actual data and dates used in conversion - no estimates
 6 Enrollment Projections for the Time Period - P1 = 1/1/22 through 12/31/22 P2 = 1/1/23 through 12/31/23 *Projections start on Quarter and include data for requested waiver period
 7 Enrollment Projections for the Time Period - P3 = 1/1/24 through 12/31/24 P4 = 1/1/25 through 12/31/25 P5 = 1/1/26 through 12/31/26

Medicaid Eligibility Group (MEG)	Retrospective Year 1 (R1) 6/30/19	Retrospective Year 2 (R2) 6/30/19	Projected Quarter 1 1/1/22	Projected Quarter 2 4/2/22	Projected Quarter 3 7/2/22	Projected Quarter 4 10/2/22	Projected Year 1 (P1)	Projected Quarter 5 1/1/23	Projected Quarter 6 4/1/23	Projected Quarter 7 7/1/23	Projected Quarter 8 10/1/23	Projected Year 2 (P2)
SPD - Duals	17,026,788	17,026,788	4,440,586	4,440,586	4,440,586	4,440,586	17,762,344	3,964,999	3,964,999	3,964,999	3,964,999	15,859,996
SPD	10,544,648	10,544,648	2,750,044	2,750,044	2,750,044	2,750,044	11,000,176	2,455,514	2,455,514	2,455,514	2,455,514	9,822,056
Family	59,783,518	59,783,518	15,591,541	15,591,541	15,591,541	15,591,541	62,366,164	13,921,686	13,921,686	13,921,686	13,921,686	55,686,744
Foster Care	1,095,957	1,095,957	285,826	285,826	285,826	285,826	1,143,304	255,214	255,214	255,214	255,214	1,020,856
MCHIP	15,706,224	15,706,224	4,096,183	4,096,183	4,096,183	4,096,183	16,384,732	3,657,481	3,657,481	3,657,481	3,657,481	14,629,924
Medicaid Expansion	11,687,700	11,687,700	3,048,152	3,048,152	3,048,152	3,048,152	12,192,608	2,721,694	2,721,694	2,721,694	2,721,694	10,886,776
Other	40,565,478	40,565,478	10,579,477	10,579,477	10,579,477	10,579,477	42,317,908	9,446,415	9,446,415	9,446,415	9,446,415	37,785,660
Total Member Months	156,410,313	156,410,313	40,791,809	40,791,809	40,791,809	40,791,809	163,167,236	36,423,003	36,423,003	36,423,003	36,423,003	145,692,012
Quarterly % Increase				0.0%	0.0%	0.0%		-10.7%	0.0%	0.0%	0.0%	

NUMBER OF DAYS OF DATA	
R2	364.00
Gap (end of R2 to P1)	-916.00
P1	364.00
P2	364.00
P3	365.00
P4	364.00
P5	364.00
TOTAL R2 to P2	176.00
(Days-365)	-189
TOTAL R2 to P1	-188
(Days-364)	-553
TOTAL R2 to P3	541.00
(Days-365)	176
TOTAL R2 to P4	905
(Days-364)	540
TOTAL R2 to P5	1269.00
(Days-364)	904

Modify Line items as necessary to fit the MEGs of the program.

State Completion Sections

To modify the formulas as necessary to fit the length of the program complete this section.

The formulas will automatically update given this data.

Use Quarter Starting Dates on Appendix D1. Appendix D6 will automatically become Quarter Ending Dates to sync with CMS-64.

	Total Projected 2 Year	Total Projected 5 Year
SPD - Duals	33,622,340	81,211,832
SPD	20,822,232	50,294,292
Family	118,052,908	285,146,548
Foster Care	2,164,160	5,227,340
MCHIP	31,014,656	74,913,200
Medicaid Expansion	23,079,384	55,746,240
Other	80,103,568	193,483,216
Total	308,859,248	746,022,668

Medicaid Eligibility Group (MEG)	Projected Quarter 9 1/1/24	Projected Quarter 10 4/1/24	Projected Quarter 11 7/1/24	Projected Quarter 12 10/1/24	Projected Year 3 (P3)	Projected Quarter 13 1/1/25	Projected Quarter 14 4/1/25	Projected Quarter 15 7/1/25	Projected Quarter 16 10/1/25	Projected Year 4 (P4)	Projected Quarter 17 1/1/26	Projected Quarter 18 4/1/26	Projected Quarter 19 7/1/26	Projected Quarter 20 10/1/26	Projected Year 5 (P5)
SPD - Duals	3,965,791	3,965,791	3,965,791	3,965,791	15,863,164	3,965,791	3,965,791	3,965,791	3,965,791	15,863,164	3,965,791	3,965,791	3,965,791	3,965,791	15,863,164
SPD	2,456,005	2,456,005	2,456,005	2,456,005	9,824,020	2,456,005	2,456,005	2,456,005	2,456,005	9,824,020	2,456,005	2,456,005	2,456,005	2,456,005	9,824,020
Family	13,924,470	13,924,470	13,924,470	13,924,470	55,697,880	13,924,470	13,924,470	13,924,470	13,924,470	55,697,880	13,924,470	13,924,470	13,924,470	13,924,470	55,697,880
Foster Care	255,265	255,265	255,265	255,265	1,021,060	255,265	255,265	255,265	255,265	1,021,060	255,265	255,265	255,265	255,265	1,021,060
MCHIP	3,658,212	3,658,212	3,658,212	3,658,212	14,632,848	3,658,212	3,658,212	3,658,212	3,658,212	14,632,848	3,658,212	3,658,212	3,658,212	3,658,212	14,632,848
Medicaid Expansion	2,722,238	2,722,238	2,722,238	2,722,238	10,888,952	2,722,238	2,722,238	2,722,238	2,722,238	10,888,952	2,722,238	2,722,238	2,722,238	2,722,238	10,888,952
Other	9,448,304	9,448,304	9,448,304	9,448,304	37,793,216	9,448,304	9,448,304	9,448,304	9,448,304	37,793,216	9,448,304	9,448,304	9,448,304	9,448,304	37,793,216
Total Member Months	36,430,285	36,430,285	36,430,285	36,430,285	145,721,140	36,430,285	36,430,285	36,430,285	36,430,285	145,721,140	36,430,285	36,430,285	36,430,285	36,430,285	145,721,140
Quarterly % Increase		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%	0.0%		0.0%	0.0%	0.0%	0.0%	

	R1 to R2	R2 to P1	P1 to P2	P2 to P3	P3 to P4	P4 to P5	R2 to P2	R2 to P5
Annualized % Increase	0.00%	1.22%	see below*	see below*	see below*	see below*	-1.57%	-1.56%
% Increase	0.00%	4.32%	-0.1071001	0.00019993	0	0	-6.85%	-6.83%

*Annualize and Regular Increase is the same over a normal 1 year period.

State of

Appendix D2.S Services in Waiver Cost

Row # /
Column
Letter

B C D E F G H I

Services in Actual Waiver Cost (Comprehensive and Expedited)

State: 0

Renewal Waiver

Instructions: Modify columns as applicable to the waiver entity type and structure to note services in different MEGs.
* Please note with a * if there are any proposed changes.

State Plan Services	State Plan Approved Services	1915(b)(3) Services	MCO Capitated Reimbursement	FFS services Impacted by MCO	PCCM Fee-for Service Reimbursement	PIHP Reimbursement*	PIHP Fee-for Service Reimbursement*	PAHP Capitated Reimbursement	PAHP Fee-for Service Reimbursement
Inpatient Hospital (includes psych)	X					X	X		
IHS Inpatient									
Mental Health Facility	X					X			
Skilled Nursing Home									
ICF-MR Public									
ICF-MR Private									
ICF-Other									
Physician Services (includes psych)	X					X	X		
Outpatient Hospital (includes psych)	X								
IHS Outpatient									
Prescribed Drugs	X					X	X		
Dental Services									
Other Practitioners (includes psych)	X	X							
Clinic Services	X					X	X		
Lab or Radiology (includes psych)	X					X	X		
Home Health Services									
Sterilizations									
EPSDT Screening									
Rural Health Clinic									
FQHC	X					X	X		
Tribal 638	X					X			
HCBS Waivers									
Personal Care									
Other Care Services									
Family Planning									
Targeted Case Mgmt - MR Waiver									
Individualized Alternative or Enhanced Services									
PCCM Case Management Fees									
Managed Care Capitated Services									
Targeted Case Mgmt - MH/SA	X								

Modify Line items as necessary to fit the services of the program.

State Completion Sections

* Service categories that have checkmarks in both Columns H and I reflect certain services in this category are responsibility of the PIHP (either in the SMHS or DMC-ODS delivery system) as well as certain services in this category that are impacted by the PIHP (either in the SMHS or DMC-ODS delivery system)

Row # /
Column
Letter

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Administration in Actual Waiver Cost (Comprehensive and Expedited)

State: 0

Renewal Waiver

Instructions: Modify columns as applicable to the waiver entity type and structure to note administration in different MEGs, etc.

CMS 64.10 line Item	CMS 64.10 Explanation	Contract	Match Rate	BY Expenses
1	FAMILY PLANNING		90% FFP	384,474,506
2	DESIGN DEVELOPMENT OR INSTALLATION OF MMIS*		90% FFP	
A.	COSTS OF IN-HOUSE ACTIVITIES PLUS OTHER STATE AGENCIES AND INSTITUTIONS		90% FFP	
B.	COST OF PRIVATE SECTOR CONTRACTORS		90% FFP	
C.	DRUG CLAIMS SYSTEM		90% FFP	
3	SKILLED PROFESSIONAL MEDICAL PERSONNEL		75% FFP	
4	OPERATION OF AN APPROVED MMIS*:		75% FFP	
A.	COSTS OF IN-HOUSE ACTIVITIES PLUS OTHER STATE AGENCIES AND INSTITUTIONS		75% FFP	
B.	COST OF PRIVATE SECTOR CONTRACTORS		75% FFP	
5	MECHANIZED SYSTEMS, NOT APPROVED UNDER MMIS PROCEDURES:		50% FFP	
A.	COSTS OF IN-HOUSE ACTIVITIES PLUS OTHER STATE AGENCIES AND INSTITUTIONS		50% FFP	
B.	COST OF PRIVATE SECTOR CONTRACTORS		50% FFP	
6	PEER REVIEW ORGANIZATIONS (PRO)		75% FFP	
7. A.	THIRD PARTY LIABILITY RECOVERY PROCEDURE - BILLING OFFSET		50% FFP	
B.	ASSIGNMENT OF RIGHTS - BILLING OFFSET		50% FFP	
8	IMMIGRATION STATUS VERIFICATION SYSTEM COSTS		100% FFP	
9	NURSE AIDE TRAINING COSTS		50% FFP	
10	PREADMISSION SCREENING COSTS		75% FFP	
11	RESIDENT REVIEW ACTIVITIES COSTS		75% FFP	
12	DRUG USE REVIEW PROGRAM		75% FFP	
13	OUTSTATIONED ELIGIBILITY WORKERS		50% FFP	
14.	TANF BASE		90% FFP	
15.	TANF SECONDARY 90%		90% FFP	
16.	TANF SECONDARY 75%		75% FFP	
17.	EXTERNAL REVIEW		75% FFP	5,494,507.45
18.	ENROLLMENT BROKERS		50% FFP	
19.	OTHER FINANCIAL PARTICIPATION		50% FFP	43,073,024
20	Total			\$ 433,042,037

*Allocation basis is ___% of Medicaid costs OR ___ % of Medicaid eligibles OR ___ other, please explain:

Add multiple line items as necessary to fit the administration of the program (i.e. if you have more than one contract on line 19, detail the contracts separately).

State Completion Sections

Appendix D3. Actual Waiver Cost

Row # / Column Letter

		Actual Waiver Cost Renewal Comprehensive Version State: 0							Actual Waiver Cost Renewal Comprehensive Version State: 0				
Medicaid Eligibility Group (MEG)	R1 Member Months	Retrospective Year 1 (R1) Aggregate Costs					R1 Per Member Per Month (PMPM) Costs						
		MCO/PIHP Capitated Costs (Including incentives and risksharing payouts/withholds) or PCCM Case Management Fees	Fee-for-Service Costs	State Plan Service Costs (D+E)	FFS Incentive Costs (not included in capitation rates, provide documentation)	1915(b)(3) service costs (provide documentation)	Administration Costs	Total Actual Waiver Costs (F+G+H+I)	State Plan Service Costs (F/C)	Incentive Costs (G/C)	1915(b)(3) Service Costs (H/C)	Administration Costs (I/C)	Total Actual Waiver Costs (J/C)
SPD - Duals	17,026,788	\$ 405,011,367	\$ 405,011,367	\$ 405,011,367		\$ 42,448,465	\$ 447,459,832	\$ 23.79	\$ -	\$ -	\$ 2.49	\$ 26.28	
SPD	10,544,648	\$ 1,034,402,640	\$ 1,034,402,640	\$ 1,034,402,640		\$ 108,413,758	\$ 1,142,816,398	\$ 98.10	\$ -	\$ -	\$ 10.28	\$ 108.38	
Family	59,783,518	\$ 1,075,077,961	\$ 1,075,077,961	\$ 1,075,077,961		\$ 112,676,860	\$ 1,187,754,821	\$ 17.98	\$ -	\$ -	\$ 1.88	\$ 19.87	
Foster Care	1,095,957	\$ 399,885,987	\$ 399,885,987	\$ 399,885,987		\$ 41,911,284	\$ 441,797,271	\$ 364.87	\$ -	\$ -	\$ 38.24	\$ 403.12	
MCHIP	15,706,224	\$ 390,708,498	\$ 390,708,498	\$ 390,708,498		\$ 40,949,409	\$ 431,657,907	\$ 24.88	\$ -	\$ -	\$ 2.61	\$ 27.48	
Medicaid Expansion	11,687,700	\$ 31,212,100	\$ 31,212,100	\$ 31,212,100		\$ 3,271,280	\$ 34,483,381	\$ 2.67	\$ -	\$ -	\$ 0.28	\$ 2.95	
Other	40,565,478	\$ 795,463,271	\$ 795,463,271	\$ 795,463,271		\$ 83,370,981	\$ 878,834,251	\$ 19.61	\$ -	\$ -	\$ 2.06	\$ 21.66	
Total	156,410,313	\$ 4,131,761,824	\$ 4,131,761,824	\$ 4,131,761,824	\$ -	\$ 433,042,037	\$ 4,564,803,861	\$ 26.42	\$ -	\$ -	\$ 2.77	\$ 29.18	
R1 Overall PMPM Casemix for R1 (R1 MMs)								\$ 26.42	\$ -	\$ -	\$ 2.77	\$ 29.18	

		Retrospective Year 2 (R2) Aggregate Costs							R2 Per Member Per Month (PMPM) Costs				
Medicaid Eligibility Group (MEG)	R2 Member Months	MCO/PIHP Capitated Costs (Including incentives and risksharing payouts/withholds) or PCCM Case Management Fees	Fee-for-Service Costs	State Plan Service Costs (D+E)	FFS Incentive Costs (not included in capitation rates, provide documentation)	1915(b)(3) service costs (provide documentation)	Administration Costs (Attach list using CMS 64.10 Waiver schedule categories)	Total Actual Waiver Costs (F+G+H+I)	State Plan Service Costs (F/C)	Incentive Costs (G/C)	1915(b)(3) Service Costs (H/C)	Administration Costs (I/C)	Total Actual Waiver Costs (J/C)
		SPD - Duals	17,026,788	\$ 405,011,367	\$ 405,011,367	\$ 405,011,367		\$ 42,448,465	\$ 447,459,832	\$ 23.79	\$ -	\$ -	\$ 2.49
SPD	10,544,648	\$ 1,034,402,640	\$ 1,034,402,640	\$ 1,034,402,640		\$ 108,413,758	\$ 1,142,816,398	\$ 98.10	\$ -	\$ -	\$ 10.28	\$ 108.38	
Family	59,783,518	\$ 1,075,077,961	\$ 1,075,077,961	\$ 1,075,077,961		\$ 112,676,860	\$ 1,187,754,821	\$ 17.98	\$ -	\$ -	\$ 1.88	\$ 19.87	
Foster Care	1,095,957	\$ 399,885,987	\$ 399,885,987	\$ 399,885,987		\$ 41,911,284	\$ 441,797,271	\$ 364.87	\$ -	\$ -	\$ 38.24	\$ 403.12	
MCHIP	15,706,224	\$ 390,708,498	\$ 390,708,498	\$ 390,708,498		\$ 40,949,409	\$ 431,657,907	\$ 24.88	\$ -	\$ -	\$ 2.61	\$ 27.48	
Medicaid Expansion	11,687,700	\$ 31,212,100	\$ 31,212,100	\$ 31,212,100		\$ 3,271,280	\$ 34,483,381	\$ 2.67	\$ -	\$ -	\$ 0.28	\$ 2.95	
Other	40,565,478	\$ 795,463,271	\$ 795,463,271	\$ 795,463,271		\$ 83,370,981	\$ 878,834,251	\$ 19.61	\$ -	\$ -	\$ 2.06	\$ 21.66	
Total	156,410,313	\$ 4,131,761,824	\$ 4,131,761,824	\$ 4,131,761,824	\$ -	\$ 433,042,037	\$ 4,564,803,861	\$ 26.42	\$ -	\$ -	\$ 2.77	\$ 29.18	
R2 Overall PMPM Casemix for R2 (R2 MMs)								\$ 26.42	\$ -	\$ -	\$ 2.77	\$ 29.18	

Modify Line items as necessary to fit the MEGs of the program.
State Completion Sections

Note: The States completing the Expedited Test will only attach the most recent waiver Schedule D, and the corresponding quarters of waiver forms from the CMS-64.9 Waiver and CMS-64.21U Waiver and CMS 64.10 Waiver. Completion of this Appendix is not necessary for expedited waivers.

Note: The States completing the Comprehensive Test will attach the most recent waiver Schedule D, and the corresponding quarters of waiver forms from the CMS-64.9 Waiver and CMS-64.21U Waiver and CMS 64.10 Waiver. Completion of this Appendix is required for Comprehensive Waivers.

Row # /
Column
Letter

B

C

D

Adjustments and Services in Waiver Cost Projection (Comprehensive and Expedited)

State:

0

Prospective Years 1 through 5 (P1 - P5) or Years 1 through 2 (P1 -P2)

Renewal Waiver

*** If a change please note**

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Adjustments to the Waiver Cost Projection	Adjustments Made	Location of Adjustment
State Plan Trend	X	DHCS entered State Plan Inflation Adjustments for Prospective Years 1 through 5 in Column J of Tab D5. The State Plan Inflation Adjustments are based upon the percentage change in the Home Health Agency Market Basket Index and are detailed in the Trend Data Tab.
State Plan Programmatic/policy/pricing changes	X	California entered two program adjustments. The first was to remove the cost of services provided to beneficiaries with unsatisfactory immigration status contained in the Retrospective Year expenditure data. California included a program adjustment to remove the proportion of those expenditures that are for non-pregnancy services from the PMPM in Prospective Year 1. The adjustment is noted in cells L13 through L19. The second program adjustment was to add costs for ten counties not currently providing DMC ODS services that DHCS anticipates will start providing DMC ODS services in Prospective Year 2. The adjustment is noted in cells L33 through L39 in Worksheet D5: Waiver Cost Projection.
Administrative Cost Adjustment	X	DHCS entered in Column Y an inflation adjustment for administrative costs. The inflation adjustments are based upon the percentage change in the Home Health Agency Market Basket Index and are detailed in the Trend Data Tab.
1915(b)(3) service Trend		
Incentives (not in cap payment) Adjustments		
Other		
State Completion Sections		

State of

Appendix D5. Waiver Cost Projection

Row # / Column Letter

B C D E F G H I J K L M N O P Q R S T U V W X Y Z AA AB

Waiver Cost Projection Renewal Comprehensive Version

Actual Waiver Cost Conversion Renewal Comprehensive Version

Modify Line Items as necessary to fit the MECs of the program.
State Completion Sections

Note: Complete this Appendix for all Prospective Years
Waiver Cost Projection

Medicaid Eligibility Group (MEG)	Retrospective Year 2 (R2) Member Months	R2 Per Member Per Month (PMPM) Costs					Prospective Year 1 (P1) Projection for State Plan Services**							P1 Projection for Incentive Costs not included in Capitation Rates**				P1 Projection for 1915(b)(3) Service Costs**				P1 Projection for Administration Costs**				Total P1 PMPM Projected Waiver Costs (H+S+W+AA)
		State Plan Service Costs*	Incentive Costs*	1915(b)(3) Service Costs*	Administration Service Costs*	Total Actual Waiver Costs*	R2 PMPM State Plan Service Costs* (Same as D13-D18)	Inflation Adjustment (Annual Year 1) (Preprint Explains)	PMPM Effect of Inflation Adjustment (N,J)	Program Adjustment Removal of claims associated with (Preprint Explains)	PMPM Effect of Program Adjustment ((H+K)/L)	Aggregate PMPM Effect of State Plan Service Adj. (K+M)	Total P1 PMPM State Plan Service Cost Projection (H+N)	R2 PMPM Incentive Costs* (Same as E13-E18)	Incentive Cost Inflation Adjustment (Annual Year 1) (Preprint Explains)	PMPM Effect of Inflation Adjustment (P,Q)	Total P1 PMPM Incentive Cost Projection (P+R)	R2 PMPM 1915(b)(3) Service Costs* (Same as F13-F18)	1915(b)(3) Service Costs Inflation Adjustment (Annual Year 1) (Preprint Explains)	PMPM Effect of Inflation Adjustment (T,U)	Total P1 PMPM 1915(b)(3) Service Cost Projection (T+V)	R2 PMPM Administration Service Costs* (Same as G13-G18)	Inflation Adjustment (Annual Year 1) (Preprint Explains)	PMPM Effect of Inflation Adjustment (X,Y)	Total P1 PMPM Administration Cost Projection (X+Z)	
SPD - Duals	17,026,788	\$ 23.79	\$ -	\$ -	\$ 2.49	\$ 26.28	\$ 23.79	6.32%	\$ 1.50	-0.59%	\$ (0.15)	\$ 1.35	\$ 25.14	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.49	6.3%	\$ 0.16	\$ 2.65	\$ 27.79	
SPD	10,544,648	\$ 98.10	\$ -	\$ -	\$ 10.28	\$ 108.38	\$ 98.10	6.32%	\$ 6.20	-0.69%	\$ (0.72)	\$ 5.48	\$ 103.58	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10.28	6.3%	\$ 0.65	\$ 110.93	\$ 114.51	
Family	59,783,518	\$ 17.98	\$ -	\$ -	\$ 1.88	\$ 19.87	\$ 17.98	6.32%	\$ 1.14	-3.83%	\$ (0.73)	\$ 0.40	\$ 18.38	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.88	6.3%	\$ 0.12	\$ 2.00	\$ 20.39	
Foster Care	1,095,957	\$ 364.87	\$ -	\$ -	\$ 38.24	\$ 403.12	\$ 364.87	6.32%	\$ 23.06	-0.53%	\$ (2.00)	\$ 21.06	\$ 385.88	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 38.24	6.3%	\$ 2.42	\$ 406.60	\$ 426.64	
MCHP	15,706,224	\$ 24.88	\$ -	\$ -	\$ 2.61	\$ 27.48	\$ 24.88	6.32%	\$ 1.57	-2.60%	\$ (0.69)	\$ 0.88	\$ 25.76	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.61	6.3%	\$ 0.16	\$ 2.77	\$ 28.53	
Medicaid Expansion	11,687,700	\$ 2.67	\$ -	\$ -	\$ 0.28	\$ 2.95	\$ 2.67	6.32%	\$ 0.17	-2.79%	\$ (0.08)	\$ 0.09	\$ 2.76	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.28	6.3%	\$ 0.02	\$ 0.30	\$ 3.06	
Other	40,565,478	\$ 19.61	\$ -	\$ -	\$ 2.06	\$ 21.66	\$ 19.61	6.32%	\$ 1.24	-2.44%	\$ (0.51)	\$ 0.73	\$ 20.34	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.06	6.3%	\$ 0.13	\$ 2.19	\$ 22.53	
Total	156,410,313																									
P1 PMPM Casemix for R2 (R2 MMs)		\$ 26.42	\$ -	\$ -	\$ 2.77	\$ 29.19	\$ 26.42	6.3%	\$ 1.67	-2.0%	\$ (0.87)	\$ 1.10	\$ 27.62	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.77	6.3%	\$ 0.17	\$ 2.94	\$ 30.46	

* For comprehensive waivers, Columns D, E, F, G and H are columns K, L, M, N, and O from the Actual Waiver Cost Spreadsheet D3. For expedited waivers, sum the CMS-649 WAV and 6421WAV forms and divide by the member months for column D.
Sum the CMS 64.10 WAV forms and divide by the member months for Column G. Sum D+G for Column H.
** If additional columns are needed in order to identify all of the adjustments being made, please insert the appropriate number of columns and label them accordingly.

Medicaid Eligibility Group (MEG)	Retrospective Year 2 (R2) Member Months	P1 Per Member Per Month (PMPM) Costs					Prospective Year 2 (P2) Projection for State Plan Services**							P2 Projection for Incentive Costs not included in Capitation Rates**				P2 Projection for 1915(b)(3) Service Costs**				P2 Projection for Administration Costs**				Total P2 PMPM Projected Waiver Costs (H+S+W+AA)
		P1 PMPM State Plan Service Costs (Same as O13-O18)	P1 PMPM Incentive Service Costs (Same as S13-S18)	P1 PMPM 1915(b)(3) Service Costs (Same as W13-W18)	P1 PMPM Administration Service Costs (Same as AA13-AA18)	P1 PMPM Total Actual Waiver Costs (Same as AB13-AB18)	P1 PMPM State Plan Service Cost Projection (Same as D30-D35)	Inflation Adjustment (Annual Year 2) (Preprint Explains)	PMPM Effect of Inflation Adjustment (N,J)	Program Adjustment Removal of claims associated with (Preprint Explains)	PMPM Effect of Program Adjustment ((H+K)/L)	Aggregate PMPM Effect of State Plan Service Adj. (K+M)	Total P2 PMPM State Plan Service Cost Projection (H+N)	P1 PMPM Incentive Cost Projection (Same as E30-E35)	Incentive Cost Inflation Adjustment (Annual Year 2) (Preprint Explains)	PMPM Effect of Inflation Adjustment (P,Q)	Total P2 PMPM Incentive Cost Projection (P+R)	P1 PMPM 1915(b)(3) Service Cost Projection (Same as F30-F35)	1915(b)(3) Service Costs Inflation Adjustment (Annual Year 2) (Preprint Explains)	PMPM Effect of Inflation Adjustment (T,U)	Total P2 PMPM 1915(b)(3) Service Cost Projection (T+V)	P1 PMPM Administration Service Projection (Same as G30-G35)	Inflation Adjustment (Annual Year 2) (Preprint Explains)	PMPM Effect of Inflation Adjustment (X,Y)	Total P2 PMPM Administration Cost Projection (X+Z)	
SPD - Duals	17,026,788	\$ 25.14	\$ -	\$ -	\$ 2.65	\$ 27.79	\$ 25.14	2.6%	\$ 0.66	0.29%	\$ 0.07	\$ 0.73	\$ 25.87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.65	2.6%	\$ 0.07	\$ 2.72	\$ 28.59	
SPD	10,544,648	\$ 103.58	\$ -	\$ -	\$ 10.93	\$ 114.51	\$ 103.58	2.6%	\$ 2.72	0.29%	\$ 0.30	\$ 3.01	\$ 106.59	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10.93	2.6%	\$ 0.29	\$ 112.22	\$ 117.81	
Family	59,783,518	\$ 18.39	\$ -	\$ -	\$ 2.00	\$ 20.39	\$ 18.39	2.6%	\$ 0.48	0.29%	\$ 0.05	\$ 0.54	\$ 18.97	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.00	2.6%	\$ 0.05	\$ 2.06	\$ 21.60	
Foster Care	1,095,957	\$ 385.88	\$ -	\$ -	\$ 40.66	\$ 426.54	\$ 385.88	2.6%	\$ 10.12	0.29%	\$ 1.11	\$ 11.23	\$ 397.10	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 40.66	2.6%	\$ 1.07	\$ 417.2	\$ 438.83	
MCHP	15,706,224	\$ 25.76	\$ -	\$ -	\$ 2.77	\$ 28.53	\$ 25.76	2.6%	\$ 0.66	0.29%	\$ 0.07	\$ 0.73	\$ 26.51	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.77	2.6%	\$ 0.07	\$ 2.84	\$ 29.35	
Medicaid Expansion	11,687,700	\$ 2.76	\$ -	\$ -	\$ 0.30	\$ 3.06	\$ 2.76	2.6%	\$ 0.07	0.29%	\$ 0.01	\$ 0.08	\$ 2.84	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.30	2.6%	\$ 0.01	\$ 0.31	\$ 3.15	
Other	40,565,478	\$ 20.34	\$ -	\$ -	\$ 2.19	\$ 22.53	\$ 20.34	2.6%	\$ 0.53	0.29%	\$ 0.06	\$ 0.59	\$ 20.93	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.19	2.6%	\$ 0.06	\$ 2.24	\$ 23.17	
Total	156,410,313																									
P2 PMPM Casemix for R2 (R2 MMs)		\$ 27.52	\$ -	\$ -	\$ 2.94	\$ 30.46	\$ 27.52	2.6%	\$ 0.72	0.3%	\$ 0.08	\$ 0.80	\$ 28.32	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.94	2.6%	\$ 0.08	\$ 3.02	\$ 31.34	

Medicaid Eligibility Group (MEG)	Retrospective Year 2 (R2) Member Months	P2 Per Member Per Month (PMPM) Costs					Prospective Year 3 (P3) Projection for State Plan Services**							P3 Projection for Incentive Costs not included in Capitation Rates**				P3 Projection for 1915(b)(3) Service Costs**				P3 Projection for Administration Costs**				Total P3 PMPM Projected Waiver Costs
		P2 PMPM State Plan Service Costs	P2 PMPM Incentive Service Costs	P2 PMPM 1915(b)(3) Service Costs	P2 PMPM Administration Service Costs	P2 PMPM Total Actual Waiver Costs	P2 PMPM State Plan Service Cost Projection	Inflation Adjustment (Annual Year 3)	PMPM Effect of Inflation Adjustment	Program Adjustment [Enter Description Here]	PMPM Effect of Program Adjustment	Aggregate PMPM Effect of State Plan Service Adj.	Total P3 PMPM State Plan Service Cost Projection	P2 PMPM Incentive Cost Projection	Incentive Cost Inflation Adjustment (Annual Year 3)	PMPM Effect of Inflation Adjustment	Total P3 PMPM Incentive Cost Projection	P2 PMPM 1915(b)(3) Service Cost Projection	1915(b)(3) Service Costs Inflation Adjustment (Annual Year 3)	PMPM Effect of Inflation Adjustment	Total P3 PMPM 1915(b)(3) Service Cost Projection	P2 PMPM Administration Cost Projection	Inflation Adjustment (Annual Year 3)	PMPM Effect of Inflation Adjustment	Total P3 PMPM Administration Cost Projection	
SPD - Duals	17,026,788	\$ 25.87	\$ -	\$ -	\$ 2.72	\$ 28.59	\$ 25.87	2.7%	\$ 0.71		\$ -	\$ 0.71	\$ 26.58	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.72	2.7%	\$ 0.07	\$ 2.79	\$ 29.37	
SPD	10,544,648	\$ 106.59	\$ -	\$ -	\$ 11.22	\$ 117.81	\$ 106.59	2.7%	\$ 2.91		\$ -	\$ 2.91	\$ 109.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11.22	2.7%	\$ 0.31	\$ 115.02	\$ 121.02	
Family	59,783,518	\$ 18.92	\$ -	\$ -	\$ 2.06	\$ 20.98	\$ 18.92	2.7%	\$ 0.52		\$ -	\$ 0.52	\$ 19.44	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.06	2.7%	\$ 0.06	\$ 2.11	\$ 21.60	
Foster Care	1,095,957	\$ 397.10	\$ -	\$ -	\$ 41.72	\$ 438.83	\$ 397.10	2.7%	\$ 10.82		\$ -	\$ 10.82	\$ 407.93	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 41.72	2.7%	\$ 1.14	\$ 429.6	\$ 450.79	
MCHP	15,706,224	\$ 26.51	\$ -	\$ -	\$ 2.84	\$ 29.35	\$ 26.51	2.7%	\$ 0.72		\$ -	\$ 0.72	\$ 27.23	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.84	2.7%	\$ 0.08	\$ 2.92	\$ 30.15	
Medicaid Expansion	11,687,700	\$ 2.84	\$ -	\$ -	\$ 0.31	\$ 3.15	\$ 2.84	2.7%	\$ 0.08		\$ -	\$ 0.08	\$ 2.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.31	2.7%	\$ 0.01	\$ 0.31	\$ 3.23	
Other	40,565,478	\$ 20.93	\$ -	\$ -	\$ 2.24	\$ 23.17	\$ 20.93	2.7%	\$ 0.57		\$ -	\$ 0.57	\$ 21.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.24	2.7%	\$ 0.06	\$ 2.30	\$ 23.81	
Total	156,410,313																									
P3 PMPM Casemix for R2 (R2 MMs)		\$ 26.51	\$ -	\$ -	\$ 2.84	\$ 29.35	\$ 26.51	2.9%	\$ 0.77	0.0%	\$ -	\$ 0.77	\$ 27.28	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.84	2.9%	\$ 0.08	\$ 2.93	\$ 30.21	

State of

Appendix D5. Waiver Cost Projection

Row # /
Column
Letter

B C D E F G H I J K L M N O P Q R S T U V W X Y Z AA AB

Waiver Cost Projection Renewal Comprehensive Version
State: D

Actual Waiver Cost Conversion Renewal Comprehensive Version
State: D

Medicaid Eligibility Group (MEG)	Retrospective Year 2 (R2) Member Months	P3 Per Member Per Month (PMPM) Costs					Prospective Year 4 (P4) Projection for State Plan Services**							P4 Projection for Incentive Costs not Included in Capitation Rates**				P4 Projection for 1915(b)(3) Service Costs**				P4 Projection for Administration Costs**				Total P4 PMPM Projected Waiver Costs
		P3 PMPM State Plan Service Costs	P3 PMPM Incentive Service Costs	P3 PMPM 1915(b)(3) Service Costs	P3 PMPM Administration Service Costs	P3 PMPM Total Actual Waiver Costs	P3 PMPM State Plan Service Cost Projection	State Plan Inflation Adjustment (Annual Year 4)	PMPM Effect of Inflation Adjustment	Program Adjustment [Enter Description Here]	PMPM Effect of Program Adjustment	Aggregate PMPM Effect of State Plan Service Adj.	Total P4 PMPM State Plan Service Cost Projection	P4 PMPM Incentive Cost Projection	Incentive Cost Inflation Adjustment (Annual Year 4)	PMPM Effect of Inflation Adjustment	Total P4 PMPM Incentive Cost Projection	P4 PMPM 1915(b)(3) Service Cost Projection	1915(b)(3) Service Costs Inflation Adjustment (Annual Year 4)	PMPM Effect of Inflation Adjustment	Total P4 PMPM 1915(b)(3) Service Cost Projection	P4 PMPM Administration Cost Projection	Administration Costs Inflation Adjustment (Annual Year 4)	PMPM Effect of Inflation Adjustment	Total P4 PMPM Administration Cost Projection	
SPD - Duals	17,026,788	\$ 26.58	\$ -	\$ -	\$ 2.79	\$ 29.37	\$ 26.58	2.9%	\$ 0.77	\$ -	\$ 0.77	\$ 27.35	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.79	2.9%	\$ 0.08	\$ 2.88	\$ 30.22	
SPD	10,544,648	\$ 109.50	\$ -	\$ -	\$ 11.52	\$ 121.02	\$ 109.50	2.9%	\$ 3.18	\$ -	\$ 3.18	\$ 112.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11.52	2.9%	\$ 0.33	\$ 11.85	\$ 124.43	
Family	59,783,518	\$ 19.44	\$ -	\$ -	\$ 2.11	\$ 21.55	\$ 19.44	2.9%	\$ 0.56	\$ -	\$ 0.56	\$ 20.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.11	2.9%	\$ 0.06	\$ 2.17	\$ 22.18	
Foster Care	1,095,957	\$ 407.93	\$ -	\$ -	\$ 42.85	\$ 450.79	\$ 407.93	2.9%	\$ 11.84	\$ -	\$ 11.84	\$ 419.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 42.85	2.9%	\$ 1.24	\$ 44.11	\$ 463.87	
MCHP	15,706,224	\$ 27.23	\$ -	\$ -	\$ 2.92	\$ 30.15	\$ 27.23	2.9%	\$ 0.79	\$ -	\$ 0.79	\$ 28.02	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.92	2.9%	\$ 0.08	\$ 3.01	\$ 31.03	
Medicaid Expansion	11,687,700	\$ 2.92	\$ -	\$ -	\$ 0.31	\$ 3.23	\$ 2.92	2.9%	\$ 0.08	\$ -	\$ 0.08	\$ 3.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.31	2.9%	\$ 0.01	\$ 0.32	\$ 3.33	
Other	43,565,478	\$ 21.50	\$ -	\$ -	\$ 2.30	\$ 23.81	\$ 21.50	2.9%	\$ 0.62	\$ -	\$ 0.62	\$ 22.13	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.30	2.9%	\$ 0.07	\$ 2.37	\$ 24.60	
Total	156,416,313																									
P4 PMPM Casemix for R2 (R2 MM)		\$ 2.92	\$ -	\$ -	\$ 0.31	\$ 3.23	\$ 2.92	28.9%	\$ 0.84	0.0%	\$ -	\$ 0.84	\$ 3.78	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ 0.31	28.7%	\$ 0.09	\$ 0.40	\$ 4.17	

Medicaid Eligibility Group (MEG)	Retrospective Year 2 (R2) Member Months	P4 Per Member Per Month (PMPM) Costs					Prospective Year 5 (P5) Projection for State Plan Services**							P5 Projection for Incentive Costs not Included in Capitation Rates**				P5 Projection for 1915(b)(3) Service Costs**				P5 Projection for Administration Costs**				Total P5 PMPM Projected Waiver Costs
		P4 PMPM State Plan Service Costs	P4 PMPM Incentive Service Costs	P4 PMPM 1915(b)(3) Service Costs	P4 PMPM Administration Service Costs	P4 PMPM Total Actual Waiver Costs	P4 PMPM State Plan Service Cost Projection	State Plan Inflation Adjustment (Annual Year 5)	PMPM Effect of Inflation Adjustment	Program Adjustment [Enter Description Here]	PMPM Effect of Program Adjustment	Aggregate PMPM Effect of State Plan Service Adj.	Total P5 PMPM State Plan Service Cost Projection	P4 PMPM Incentive Cost Projection	Incentive Cost Inflation Adjustment (Annual Year 2)	PMPM Effect of Inflation Adjustment	Total P5 PMPM Incentive Cost Projection	P4 PMPM 1915(b)(3) Service Cost Projection	1915(b)(3) Service Costs Inflation Adjustment (Annual Year 2)	PMPM Effect of Inflation Adjustment	Total P5 PMPM 1915(b)(3) Service Cost Projection	P4 PMPM Administration Cost Projection	Administration Costs Inflation Adjustment (Annual Year 5)	PMPM Effect of Inflation Adjustment	Total P5 PMPM Administration Cost Projection	
SPD - Duals	17,026,788	\$ 27.35	\$ -	\$ -	\$ 2.88	\$ 30.22	\$ 27.35	2.9%	\$ 0.79	\$ -	\$ 0.79	\$ 28.14	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.88	2.9%	\$ 0.08	\$ 2.96	\$ 31.10	
SPD	10,544,648	\$ 112.67	\$ -	\$ -	\$ 11.86	\$ 124.53	\$ 112.67	2.9%	\$ 3.27	\$ -	\$ 3.27	\$ 115.94	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11.86	2.9%	\$ 0.34	\$ 12.20	\$ 126.14	
Family	59,783,518	\$ 20.00	\$ -	\$ -	\$ 2.17	\$ 22.18	\$ 20.00	2.9%	\$ 0.56	\$ -	\$ 0.56	\$ 20.56	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.17	2.9%	\$ 0.06	\$ 2.24	\$ 22.62	
Foster Care	1,095,957	\$ 419.77	\$ -	\$ -	\$ 44.11	\$ 463.87	\$ 419.77	2.9%	\$ 12.16	\$ -	\$ 12.16	\$ 431.61	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 44.11	2.9%	\$ 1.28	\$ 45.39	\$ 477.33	
MCHP	15,706,224	\$ 28.02	\$ -	\$ -	\$ 3.01	\$ 31.03	\$ 28.02	2.9%	\$ 0.81	\$ -	\$ 0.81	\$ 28.84	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3.01	2.9%	\$ 0.09	\$ 3.09	\$ 31.83	
Medicaid Expansion	11,687,700	\$ 3.00	\$ -	\$ -	\$ 0.32	\$ 3.33	\$ 3.00	2.9%	\$ 0.09	\$ -	\$ 0.09	\$ 3.09	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.32	2.9%	\$ 0.01	\$ 0.33	\$ 3.42	
Other	43,565,478	\$ 22.13	\$ -	\$ -	\$ 2.37	\$ 24.60	\$ 22.13	2.9%	\$ 0.64	\$ -	\$ 0.64	\$ 22.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.37	2.9%	\$ 0.07	\$ 2.44	\$ 25.21	
Total	156,416,313																									
P5 PMPM Casemix for R2 (R2 MM)		\$ 112.67	\$ -	\$ -	\$ 11.86	\$ 124.53	\$ 112.67	0.8%	\$ 0.87	0.0%	\$ -	\$ 0.87	\$ 313.84	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ 11.86	0.8%	\$ 0.09	\$ 11.96	\$ 125.49	

Row # /
Column
Letter

B C D E F G H I J K L M N

Cost Effectiveness Summary Sheet Renewal Waiver
State: 0

Costs to be input below are from the prior waiver submission. Compare the prospective years from the prior waiver submission to the retrospective years of the current waiver submission.

Retrospective Period

Medicaid Eligibility Group (MEG)	R1 Member Months	R1 Per Member Per Month (PMPM) Costs				
		R1 PMPM State Plan Service Costs	R1 PMPM Incentive Costs	R1 PMPM 1915(b)(3) Service Costs	R1 PMPM Administration Costs	R1 PMPM Total Actual Waiver Costs
		SPD - Duals	17,026,788	\$ 23.79	\$ -	\$ -
SPD	10,544,648	\$ 98.10	\$ -	\$ -	\$ 10.28	\$ 108.38
Family	59,783,518	\$ 17.98	\$ -	\$ -	\$ 1.88	\$ 19.87
Foster Care	1,095,957	\$ 364.87	\$ -	\$ -	\$ 38.24	\$ 403.12
MCHIP	15,706,224	\$ 24.88	\$ -	\$ -	\$ 2.61	\$ 27.48
Medicaid Expansion	11,687,700	\$ 2.67	\$ -	\$ -	\$ 0.28	\$ 2.95
Other	40,565,478	\$ 19.61	\$ -	\$ -	\$ 2.06	\$ 21.66
Total	156,410,313					
R1 Overall PMPM Casemix for R1 (R1 MM)		\$ 26.42	\$ -	\$ -	\$ 2.77	\$ 29.18
Total R1 Expenditures						\$4,564,803,861

P1 Per Member Per Month (PMPM) Costs from the prior waiver submission				
P1 PMPM State Plan Service Costs	P1 PMPM Incentive Costs	P1 PMPM 1915(b)(3) Service Costs	P1 PMPM Administration Costs	P1 PMPM Total Actual Waiver Costs
\$ -	\$ -	\$ -	\$ -	\$ -
Total Previous P1 Projection using R1 member months				\$0

Medicaid Eligibility Group (MEG)	R2 Member Months	R2 Per Member Per Month (PMPM) Costs (Totals weighted on Retrospective Year 2 Member Months)					Overall R1 to R2 Change (annual)
		R2 PMPM State Plan Service Costs	R2 PMPM Incentive Costs	R2 PMPM 1915(b)(3) Service Costs	R2 PMPM Administration Costs	R2 PMPM Total Actual Waiver Costs	
		SPD - Duals	17,026,788	\$ 23.79	\$ -	\$ -	
SPD	10,544,648	\$ 98.10	\$ -	\$ -	\$ 10.28	\$ 108.38	
Family	59,783,518	\$ 17.98	\$ -	\$ -	\$ 1.88	\$ 19.87	
Foster Care	1,095,957	\$ 364.87	\$ -	\$ -	\$ 38.24	\$ 403.12	
MCHIP	15,706,224	\$ 24.88	\$ -	\$ -	\$ 2.61	\$ 27.48	
Medicaid Expansion	11,687,700	\$ 2.67	\$ -	\$ -	\$ 0.28	\$ 2.95	
Other	40,565,478	\$ 19.61	\$ -	\$ -	\$ 2.06	\$ 21.66	
Total	156,410,313						
R2 Weighted Average PMPM Casemix for R1 (R1 MM)							
R2 Overall PMPM Casemix for R2 (R2 MM)		\$ 26.42	\$ -	\$ -	\$ 2.77	\$ 29.18	
Total R2 Expenditures						\$4,564,803,861	

P2 Per Member Per Month (PMPM) Costs from the prior waiver submission				
P2 PMPM State Plan Service Costs	P2 PMPM Incentive Costs	P2 PMPM 1915(b)(3) Service Costs	P2 PMPM Administration Costs	P2 PMPM Total Actual Waiver Costs
\$ -	\$ -	\$ -	\$ -	\$ -
Total Previous P2 Projection using R2 member months				\$0

Total Previous Waiver Period Expenditures (Casemix for R1 and R2)						\$9,129,607,721
Total Difference between Projections and Actual Waiver Cost for Previous Waiver Period						-\$9,129,607,721

					\$0
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Prospective Period

Medicaid Eligibility Group (MEG)	Projected Year 1 Member Months (P1)	P1 Projected PMPM Costs (Totals weighted on Projected Year 1 Member Months)					Overall R2 to P1 Change (annual)
		P1 PMPM State Plan Service Cost Projection	P1 PMPM Incentive Cost Projection	P1 PMPM 1915(b)(3) Service Cost Projection	P1 PMPM Administration Cost Projection	P1 PMPM Projected Waiver Costs	
		SPD - Duals	17,762,344	\$ 25.14	\$ -	\$ -	
SPD	11,000,176	\$ 103.58	\$ -	\$ -	\$ 10.93	\$ 114.51	5.7%
Family	62,366,164	\$ 18.39	\$ -	\$ -	\$ 2.00	\$ 20.39	2.6%
Foster Care	1,143,304	\$ 385.88	\$ -	\$ -	\$ 40.66	\$ 426.54	5.8%
MCHIP	16,384,732	\$ 25.76	\$ -	\$ -	\$ 2.77	\$ 28.53	3.8%
Medicaid Expansion	12,192,608	\$ 2.76	\$ -	\$ -	\$ 0.30	\$ 3.06	3.6%
Other	42,317,908	\$ 20.34	\$ -	\$ -	\$ 2.19	\$ 22.53	4.0%
Total	163,167,236						
P1 Weighted Average PMPM Casemix for R2 (P1 MM)		\$ 27.52	\$ -	\$ -	\$ 2.94	\$ 30.46	4.4%
P1 Weighted Average PMPM Casemix for P1 (P1 MM)		\$ 27.52	\$ -	\$ -	\$ 2.94	\$ 30.46	4.4%
Total Projected Waiver Expenditures P1(P1 MM)						\$4,970,602,049	

Medicaid Eligibility Group (MEG)	Projected Year 2 Member Months (P2)	P2 Projected PMPM Costs (Totals weighted on Projected Year 2 Member Months)					Overall P1 to P2 Change (annual)
		P2 PMPM State Plan Service Cost Projection	P2 PMPM Incentive Cost Projection	P2 PMPM 1915(b)(3) Service Cost Projection	P2 PMPM Administration Cost Projection	P2 PMPM Projected Waiver Costs	
		SPD - Duals	15,859,996	\$ 25.87	\$ -	\$ -	
SPD	9,822,056	\$ 106.59	\$ -	\$ -	\$ 11.22	\$ 117.81	2.9%
Family	55,686,744	\$ 18.92	\$ -	\$ -	\$ 2.06	\$ 20.98	2.9%
Foster Care	1,020,856	\$ 397.10	\$ -	\$ -	\$ 41.72	\$ 438.83	2.9%
MCHIP	14,629,924	\$ 26.51	\$ -	\$ -	\$ 2.84	\$ 29.35	2.9%
Medicaid Expansion	10,886,776	\$ 2.84	\$ -	\$ -	\$ 0.31	\$ 3.15	2.9%
Other	37,785,660	\$ 20.93	\$ -	\$ -	\$ 2.24	\$ 23.17	2.9%
Total	145,692,012						
P2 Weighted Average PMPM Casemix for P1 (P1 MM)		\$ 28.32	\$ -	\$ -	\$ 3.02	\$ 31.34	2.9%
P2 Weighted Average PMPM Casemix for P2 (P2 MM)		\$ 28.32	\$ -	\$ -	\$ 3.02	\$ 31.34	2.9%
Total Projected Waiver Expenditures P2 (P2 MM)						\$4,566,158,540	

Medicaid Eligibility Group (MEG)	Projected Year 3 Member Months (P3)	P3 Projected PMPM Costs (Totals weighted on Projected Year 3 Member Months)					Overall P2 to P3 Change (annual)
		P3 PMPM State Plan Service Cost Projection	P3 PMPM Incentive Cost Projection	P3 PMPM 1915(b)(3) Service Cost Projection	P3 PMPM Administration Cost Projection	P3 PMPM Projected Waiver Costs	
		SPD - Duals	15,863,164	\$ 26.58	\$ -	\$ -	
SPD	9,824,020	\$ 109.50	\$ -	\$ -	\$ 11.52	\$ 121.02	2.7%
Family	55,697,880	\$ 19.44	\$ -	\$ -	\$ 2.11	\$ 21.55	2.7%
Foster Care	1,021,060	\$ 407.93	\$ -	\$ -	\$ 42.86	\$ 450.79	2.7%
MCHIP	14,632,848	\$ 27.23	\$ -	\$ -	\$ 2.92	\$ 30.15	2.7%
Medicaid Expansion	10,888,952	\$ 2.92	\$ -	\$ -	\$ 0.31	\$ 3.23	2.7%
Other	37,793,216	\$ 21.50	\$ -	\$ -	\$ 2.30	\$ 23.81	2.7%
Total	145,721,140						
P3 Weighted Average PMPM Casemix for P2 (P2 MM)		\$ 32.58	\$ -	\$ -	\$ 3.48	\$ 36.06	15.0%
P3 Weighted Average PMPM Casemix for P3 (P3 MM)		\$ 29.09	\$ -	\$ -	\$ 3.10	\$ 32.19	2.7%
Total Projected Waiver Expenditures P3 (P3 MM)						\$4,690,619,420	

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Letter

B C D E F G H I J K L M N

Cost Effectiveness Summary Sheet Renewal Waiver
State: 0

Medicaid Eligibility Group (MEG)	Projected Year 4 Member Months (P4)	P4 Projected PMPM Costs (Totals weighted on Projected Year 4 Member Months)					Overall P3 to P4 Change (annual)
		P4 PMPM State Plan Service Cost Projection	P4 PMPM Incentive Cost Projection	P4 PMPM 1915(b)(3) Service Cost Projection	P4 PMPM Administration Cost Projection	P4 PMPM Projected Waiver Costs	
SPD - Duals	15,863,164	\$ 27.35	\$ -	\$ -	\$ 2.88	\$ 30.22	2.9%
SPD	9,824,020	\$ 112.67	\$ -	\$ -	\$ 11.86	\$ 124.53	2.9%
Family	55,697,880	\$ 20.00	\$ -	\$ -	\$ 2.17	\$ 22.18	2.9%
Foster Care	1,021,060	\$ 419.77	\$ -	\$ -	\$ 44.11	\$ 463.87	2.9%
MCHIP	14,632,848	\$ 28.02	\$ -	\$ -	\$ 3.01	\$ 31.03	2.9%
Medicaid Expansion	10,888,952	\$ 3.00	\$ -	\$ -	\$ 0.32	\$ 3.33	2.9%
Other	37,793,216	\$ 22.13	\$ -	\$ -	\$ 2.37	\$ 24.50	2.9%
Total	145,721,140						
P4 Weighted Average PMPM Casemix for P3 (P3 MM)		\$ 33.52	\$ -	\$ -	\$ 3.58	\$ 37.10	15.2%
P4 Weighted Average PMPM Casemix for P4 (P4 MM)		\$ 29.93	\$ -	\$ -	\$ 3.19	\$ 33.12	2.9%
Total Projected Waiver Expenditures P4 (P4 MM)						\$4,826,748,508	

Medicaid Eligibility Group (MEG)	Projected Year 5 Member Months (P5)	P5 Projected PMPM Costs (Totals weighted on Projected Year 5 Member Months)					Overall P4 to P5 Change (annual)
		P5 PMPM State Plan Service Cost Projection	P5 PMPM Incentive Cost Projection	P5 PMPM 1915(b)(3) Service Cost Projection	P5 PMPM Administration Cost Projection	P5 PMPM Projected Waiver Costs	
SPD - Duals	15,863,164	\$ 28.14	\$ -	\$ -	\$ 2.96	\$ 31.10	2.9%
SPD	9,824,020	\$ 115.94	\$ -	\$ -	\$ 12.20	\$ 128.14	2.9%
Family	55,697,880	\$ 20.58	\$ -	\$ -	\$ 2.24	\$ 22.82	2.9%
Foster Care	1,021,060	\$ 431.94	\$ -	\$ -	\$ 45.39	\$ 477.33	2.9%
MCHIP	14,632,848	\$ 28.84	\$ -	\$ -	\$ 3.09	\$ 31.93	2.9%
Medicaid Expansion	10,888,952	\$ 3.09	\$ -	\$ -	\$ 0.33	\$ 3.42	2.9%
Other	37,793,216	\$ 22.77	\$ -	\$ -	\$ 2.44	\$ 25.21	2.9%
Total	145,721,140						
P5 Weighted Average PMPM Casemix for P4 (P4 MM)		\$ 34.49	\$ -	\$ -	\$ 3.68	\$ 38.17	15.2%
P5 Weighted Average PMPM Casemix for P5 (P5 MM)		\$ 30.80	\$ -	\$ -	\$ 3.29	\$ 34.08	2.9%
Total Projected Waiver Expenditures P5 (P5 MM)						\$4,966,766,998	

Medicaid Eligibility Group (MEG)	Projected Year 1 and 2 Member Months (P1 +P2)	Projected Year 1 - 5 Member Months (SUM of P1:P5)
SPD - Duals	33,622,340	81,211,832
SPD	20,822,232	50,294,292
Family	118,052,908	285,146,548
Foster Care	2,164,160	5,227,340
MCHIP	31,014,656	74,913,200
Medicaid Expansion	23,079,384	55,746,240
Other	80,103,568	193,483,216
Total	308,859,248	746,022,668

Overall R1 to P2 Change (monthly)	Overall R1 to P5 Change (monthly)	Overall R1 to P2 Change (annualized)	Overall R1 to P5 Change (annualized)
0.0%	0.0%	-0.5%	0.2%
0.0%	0.0%	-0.5%	0.2%
0.0%	0.0%	-0.3%	0.2%
0.0%	0.0%	-0.5%	0.2%
0.0%	0.0%	-0.4%	0.2%
0.0%	0.0%	-0.4%	0.2%
0.0%	0.0%	-0.5%	0.2%

P2 Weighted Average PMPM Casemix for R1 (R1 MM)							
P2 Weighted Average PMPM Casemix for P2 (P2 MM)							
Total Projected Waiver Expenditures P2 + P1 (Casemix for P1 and P2)						\$9,536,760,589	
Total Projected Waiver Expenditures P1:P5 (Casemix for P1 through P5)						\$24,020,895,516	

Modify Line items as necessary to fit the MEGs of the program.

State Completion Sections

To modify the formulas as necessary to fit the length of the program complete this section. The formulas will automatically update given this data.

PMPM from previously approved waiver.

Row / Column	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH	AI
1	Mainly line items as necessary to fill the MEOs of the program.																																		
2	State																State																		
3	Projection for Upcoming Waiver Period																Projection for Upcoming Waiver Period																		
4	Projection for Upcoming Waiver Period																Projection for Upcoming Waiver Period																		
5	Projection for Upcoming Waiver Period																Projection for Upcoming Waiver Period																		
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Row / Column 3 Modify line items as necessary to fit the MCOs of the program. Quarterly CMS Targets for RO CMS-64 Review Renewal Quarterly CMS Targets for RO Cost-Effectiveness Monitoring

Table for Projected Year 2: Total Projected, Year 2 Member Months, Total PMPM, P2 Projected PMPM Costs, Total PMPM, P2 Projected PMPM Costs. Includes rows for SPT, Family, Foster Care, Medicaid Expansion, and Total.

Table for Projected Year 3: Q1-Q4 Quarterly Projected Cores, Member Months Projections, Total P2 Projected, Water Form, Medicaid Eligibility Group (MEG), Q1-Q4 Quarterly Projected Cores. Includes rows for SPT, Family, Foster Care, Medicaid Expansion, and Total.

Table for Projected Year 4: Total Projected, Year 2 Member Months, Total PMPM, P2 Projected PMPM Costs, Total PMPM, P2 Projected PMPM Costs. Includes rows for SPT, Family, Foster Care, Medicaid Expansion, and Total.

Table for Projected Year 4: Q1-Q4 Quarterly Projected Cores, Member Months Projections, Total P2 Projected, Water Form, Medicaid Eligibility Group (MEG), Q1-Q4 Quarterly Projected Cores. Includes rows for SPT, Family, Foster Care, Medicaid Expansion, and Total.

Table for Projected Year 5: Total Projected, Year 2 Member Months, Total PMPM, P2 Projected PMPM Costs, Total PMPM, P2 Projected PMPM Costs. Includes rows for SPT, Family, Foster Care, Medicaid Expansion, and Total.

Table for Projected Year 5: Q1-Q4 Quarterly Projected Cores, Member Months Projections, Total P2 Projected, Water Form, Medicaid Eligibility Group (MEG), Q1-Q4 Quarterly Projected Cores. Includes rows for SPT, Family, Foster Care, Medicaid Expansion, and Total.

Table for Projected Year 3: Water Form, Medicaid Eligibility Group (MEG), P1 Projected PMPM From Column 1 (Services), P1 Projected PMPM From Column 2 (Administration).

Table for Projected Year 3: RO Completion Section - For ongoing monitoring. Includes columns for Q1-Q4 Quarterly Actual Cores, Member Months Actual, Actual PMPM Costs, and Water Form Codes.

Table for Projected Year 4: Water Form, Medicaid Eligibility Group (MEG), P1 Projected PMPM From Column 1 (Services), P1 Projected PMPM From Column 2 (Administration).

Table for Projected Year 4: RO Completion Section - For ongoing monitoring. Includes columns for Q1-Q4 Quarterly Actual Cores, Member Months Actual, Actual PMPM Costs, and Water Form Codes.

Table for Projected Year 5: Water Form, Medicaid Eligibility Group (MEG), P1 Projected PMPM From Column 1 (Services), P1 Projected PMPM From Column 2 (Administration).

Table for Projected Year 5: RO Completion Section - For ongoing monitoring. Includes columns for Q1-Q4 Quarterly Actual Cores, Member Months Actual, Actual PMPM Costs, and Water Form Codes.

Retrospective Year 1

CMS-64 Expenditures-Medical Assistance-Waiver CA17.R09

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
Disabled	\$434,313,077	\$213,351,628	\$312,132,744	\$240,247,871	\$1,200,045,320
Foster Care	\$118,149,064	\$58,512,145	\$103,401,246	\$94,202,702	\$374,265,157
MCHIP	\$154,201,407	\$64,639,252	\$86,448,746	\$84,476,103	\$389,765,508
Other	\$427,662,439	\$211,694,528	\$341,856,972	\$327,287,871	\$1,308,501,810
Medicaid Expansion	\$259,628,685	\$120,215,291	\$194,665,855	\$150,260,790	\$724,970,621
Total	\$1,394,154,672	\$668,412,844	\$1,038,505,563	\$896,475,337	\$3,997,548,416

CMS-64 Expenditures-Medical Assistance-Waiver CA17.R09 - Less Expenditures for Beneficiaries with Unsatisfactory Immigration Status

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
Disabled	\$434,313,077	\$213,351,628	\$312,132,744	\$240,247,871	\$1,200,045,320
Foster Care	\$118,149,064	\$58,512,145	\$103,401,246	\$94,202,702	\$374,265,157
MCHIP	\$154,201,407	\$64,639,252	\$86,448,746	\$84,476,103	\$389,765,508
Other	\$427,662,439	\$211,694,528	\$341,856,972	\$327,287,871	\$1,308,501,810
Medicaid Expansion	\$259,628,685	\$120,215,291	\$194,665,855	\$150,260,790	\$724,970,621
Total	\$1,394,154,672	\$668,412,844	\$1,038,505,563	\$896,475,337	\$3,997,548,416

CMS-64 Expenditures-Medical Assistance-Waiver CA17.R09 - Allocated to New MEGS

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
SPD - Duals	\$125,659,775	\$61,996,024	\$97,103,552	\$84,840,137	\$369,599,489
SPD	\$350,908,426	\$173,125,627	\$271,164,376	\$236,918,450	\$1,032,116,879
Family	\$357,480,532	\$176,358,201	\$276,227,514	\$241,342,153	\$1,051,388,400
Foster Care	\$135,580,511	\$66,890,559	\$104,769,797	\$91,538,196	\$398,779,063
MCHIP	\$154,201,407	\$64,639,252	\$86,448,746	\$84,476,103	\$389,765,508
Other	\$10,515,336	\$5,187,890	\$8,125,723	\$7,099,508	\$30,928,456
Medicaid Expansion	\$259,628,685	\$120,215,291	\$194,665,855	\$150,260,790	\$724,970,621
Total	\$1,394,154,672	\$668,412,844	\$1,038,505,563	\$896,475,337	\$3,997,548,416

CMS-64 Expenditures-Medical Assistance-Waiver 11W00193/9 - DMC ODS

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
DMC ODS	\$25,620,845	\$52,271,490	\$68,145,132	\$86,219,685	\$232,257,152

CMS-64 Expenditures-Medical Assistance-Waiver 11W00193/9 - DMC ODS - Without IMD

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
DMC ODS	\$17,400,283	\$26,933,342	\$38,389,104	\$51,490,678	\$134,213,408

CMS-64 Expenditures-Medical Assistance-Waiver 11W00193/9 - DMC ODS - Allocated to New MEGS

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals	
SPD - Duals	\$4,200,317	\$6,735,768	\$10,541,833	\$13,933,960	\$35,411,878	26.85%
SPD	\$253,470	\$415,765	\$651,557	\$864,968	\$2,285,761	1.73%
Family	\$3,238,875	\$4,675,032	\$7,401,529	\$8,374,124	\$23,689,561	17.96%
Foster Care	\$170,006	\$358,405	\$296,023	\$282,491	\$1,106,924	
MCHIP	\$110,575	\$202,178	\$296,681	\$333,557	\$942,990	
Other	\$97,391	\$91,537	\$42,293	\$112,433	\$283,644	
Medicaid Expansion	\$9,359,649	\$14,484,657	\$19,159,200	\$27,489,145	\$70,492,650	53.45%
Total	\$17,400,283	\$26,933,342	\$38,389,104	\$51,490,678	\$134,213,408	100.00%

Medi-Cal Beneficiaries

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
SPD - Duals					17,026,788
SPD					10,544,648
Family					59,783,518
Foster Care					1,095,957
MCHIP					15,706,224
Other					11,687,700
Medicaid Expansion					40,565,478
Total					156,410,313

Cost per MM-Medical Assistance (Trends)

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
SPD - Duals					\$21.71
SPD					\$97.88
Family					\$17.59
Foster Care					\$363.86
MCHIP					\$24.82
Other					\$2.65
Medicaid Expansion					\$17.87
Total					\$25.56

CMS-64 Expenditures-Admin-Waiver CA17.R09

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
SPMP	104,191,336	93,534,909	106,812,663	72,076,099	376,615,006
Other FFP	7,329,970	4,992,752	3,042,864	23,812,242	39,177,829
Total	111,521,306	98,527,661	109,855,527	95,888,341	415,792,835

Expenditures-Admin-Waiver 11W00193/9

	9/30/2018	12/31/2018	3/31/2019	6/30/2019	Totals
SPMP	948,175	1,113,750	1,658,539	4,139,036	7,859,500
Other FFP	734,118	515,882	648,150	1,997,045	3,895,195
Total	1,682,294	1,629,631	2,306,689	6,136,081	11,754,695

CMS - Medicare Economic Basket Index by Quarter	9/30/2018	12/31/2018	3/31/2019	6/30/2019	9/30/2019	12/31/2019	3/31/2020	6/30/2020	9/30/2020	12/31/2020	3/31/2021	6/30/2021	9/30/2021	12/31/2021	3/31/2022	6/30/2022	9/30/2022	12/31/2022	3/31/2023	6/30/2023	9/30/2023	12/31/2023	3/31/2024	6/30/2024	9/30/2024	12/31/2024	3/31/2025	6/30/2025	9/30/2025	12/31/2025	3/31/2026	6/30/2026	9/30/2026	12/31/2026
Home Health Agency Market Basket Index	1.055	1.061	1.068	1.076	1.082	1.088	1.096	1.097	1.104	1.110	1.117	1.123	1.130	1.136	1.144	1.152	1.159	1.165	1.174	1.182	1.190	1.196	1.206	1.215	1.224	1.231	1.241	1.251	1.259	1.266	1.277	1.287	1.296	1.303

Home Health Agency Market Basket Index - Percentage Change From 6/30/2019

	2022 Q1	2023 Q1	2024 Q1	2025 Q1	2026 Q1
2022 Q1	6.32%				
2023 Q1	2.62%	2.56%			
2024 Q1	2.73%				
2025 Q1	2.90%				
2026 Q1	2.90%				