

Joint Fiscal Office

1 Baldwin Street • Montpelier, VT 05633-5701 • 802) 828-2295 • Fax: 802) 828-2483

MEMORANDUM

To: Representative Martha Heath, Chair; Senator Susan Bartlett, Vice Chair;
and Members of the Joint Fiscal Committee

From: Stephen A. Klein, Fiscal Officer

Date: December 6, 2005

Subject: Fiscal Committee Meeting, 11 AM on the 13th of December

As you are aware the final review of the conditions for the Global Commitment waiver was postponed until December 13th at 11 AM. The Committee will meet in Room 11 in order that we can provide lunch. For House Appropriation Committee members this meeting is sandwiched in between a full day of meetings. The meeting is to make a final determination on the remaining conditions on the Global Commitment approval. We have also been asked to approve an Environmental Contingency Fund Allocation at that time.

The postponement of the Global Commitment condition review was due to a delay in getting sufficient materials to develop an understanding of the premium range. The initial submission by the actuary required revisions as the Actuary, OVHA and the Fiscal Office have had to work through the technical elements of Vermont's programs and the uniqueness of this waiver proposal. At this point we still do not have a final actuarial determination. Subsequent changes are expected to result in little or positive change to the maximum allowable premium. We expect further information to be available prior to the meeting with the final actuarial premium resolution to occur subsequent to Fiscal Committee action. As indicated above, the levels in the enclosed materials represent what we see as a floor to the premium level. We are providing in this mailing the following:

- A brief agenda for the meeting
- A general description of the rate setting methodology
- A memorandum on the most recent actuarial estimate and what it means for Vermont's proposal
- Premium related back up materials
 - Bill Russell's Memorandum on the Committee Jurisdiction
 - The September 30th and October 17th 2005 motions
 - Premium data
- The Environmental Contingency Fund Request
- A Memo/update on the LIHEAP fuel assistance situation will be sent separately as it has not yet come in!



STATE OF VERMONT
JOINT FISCAL OFFICE

DRAFT

Fiscal Committee Agenda
Tuesday, December 13, 2005
11 AM, Room 11

11:00 Global Commitment Condition Review

- a) The FY 2006 & FY 2007 premium ranges and the implications for out years
 - Presentation of Actuary Determination - Administration: Consultants, OVHA and AHS
 - Comments by the Fiscal Office
- b) Final review of the letter proposed letter -Administration staff
- c) Committee Discussion, questions and votes

12:45 Consideration of Environmental Contingency Fund Expenditures
Joint Fiscal Committee Responsibility per 10 V.S.A. §1283 (b)
(Administration Request)

Adjournment

--Lunch will be provided --

Global Commitment – Development of the Premium Rate

Prepared by Don Dickey, Vermont Legislative Fiscal Office

Under contract with the Agency of Human Services (AHS), the actuarial firm Milliman developed premium rates for the Global Commitment waiver for State Fiscal Years 2006 and 2007. This document provides a general explanation of the rate development model.

Under Global Commitment, AHS pays a monthly premium to a public managed care organization (MCO) administered by the Office of Vermont Health Access (OVHA). Federal regulations require that premium rates paid to Medicaid MCOs be developed on an actuarially sound basis in accordance with generally accepted actuarial principles and practices, and American Academy of Actuaries guidelines. Accordingly, to calculate the premium rate (or range), Milliman developed a baseline derived from the most recent health care utilization and cost data for Vermont's Medicaid and VHAP populations, and then projected forward to waiver years 2006 and 2007 (beginning October 1) using a combination of historical trend data and actuarial assumptions. The following general steps were performed by the actuary in developing the premium rate:

Summarize the Fee-for-Service Claims and Eligibility Data. The actuary received summarized fee-for-service claims and eligibility data for the beneficiaries (including the VHAP waiver groups) and services to be covered under the managed care plan. Three years of data were made available – for State Fiscal Years 2002, 2003, and 2004. Data for 2002 and 2003 were adjusted to account for benefit and program changes. Categories such as pharmacy rebates, which are not associated with specific eligibility groups, were allocated.

Project the Fee-for-Service Base Data Forward. FY 2004 data were then projected forward to the time period for which the premium rates are to be paid. Based on historical trend data for SFY 2002-2004, trend factors were developed to estimate the future costs of the services that the covered population would generate in the fee-for-service program. The trend factors varied by service and population group – for example, the actuary developed separate trend assumptions for hospital inpatient care for Medicare and non-Medicare enrollment groups. Historical rates were compared with other information to determine final projection rates. Policy changes subsequent to the base data year, such as the FY06 reduction in provider reimbursement, were incorporated into final projections.

11/17/05 Fiscal Committee Motion

Joint Fiscal Committee finds that the following conditions of the September 30th motion of contingent approval of the Global Commitment to Health Demonstration Waiver Program have been met:

Condition:

- (1) Complete demonstration provisions furnished
- (4) MCO Savings Identified
- (5) Attorney General Review

Based upon an Administration request, the Committee hereby postpones until November 30th consideration of two remaining conditions (2) "Final premium amounts determined to be sufficient" and (3) "Agreement regarding future years' premiums." At that meeting the committee will also complete final review of the letter of acceptance, and carry out a final approval vote.

Joint Fiscal Committee

Motion to approve with amendments the recommendation of the Health Access Oversight Committee to grant contingent approval of the Global Commitment to Health Demonstration Waiver Program.

Approved: September 30, 2005, unanimously.

Senator Bartlett, seconded by Representative Westman, moved:

That the recommendation of the Health Access Oversight Committee to the Joint Fiscal Committee to grant contingent approval of the Global Commitment to Health Demonstration Waiver Program is accepted and approved by the Joint Fiscal Committee with amendments, and that as amended, the Joint Fiscal Committee moves:

(a) That the Joint Fiscal Committee, pursuant to its authority under Section 250(c) of Act 71 of 2005, grant contingent approval to the Global Commitment to Health Demonstration Waiver Program negotiated by the Administration and the Centers for Medicare and Medicaid Services (CMS) as delineated in Special Terms and Conditions, Number 11-W-00914/1, dated September 27, 2005, and that pursuant to this contingent grant of approval the Administration may begin implementation of the Demonstration Waiver Program on October 1, 2005 for the five year period, from October 1, 2005 through September 30, 2010.

(b) That the Joint Fiscal Committee's full approval to the Global Commitment to Health Demonstration Waiver Program be granted on or before November 17, 2005, if, on or before that time, the Joint Fiscal Committee finds that the following conditions have been met:

(1) *Complete demonstration provisions furnished.* That a complete and comprehensive listing and description of all the provisions of the Demonstration Waiver

agreement be prepared and included in the letter of acceptance to CMS by the Office of Vermont Health Access (OVHA) and provided to the Joint Fiscal Committee, comparing the original proposal for the Demonstration Waiver Program with the outcome of the negotiations with CMS; and that the Joint Fiscal Committee finds that these final provisions are in accord with the terms and conditions presented to the Joint Fiscal Committee as the basis for its contingent approval.

(2) *Final premium amounts determined to be sufficient.* That OVHA present to the Joint Fiscal Committee the final premium amounts adopted by the Agency of Human Services (AHS) upon actuarial certification, and that the Joint Fiscal Committee finds that such amounts are sufficient to support the Demonstration Waiver Program including the state's current Medicaid and expansion programs.

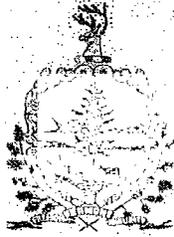
(3) *Agreement regarding future years' premiums.* That AHS work with CMS regarding the criteria utilized in future waiver years in order to ensure that future premiums will not be negatively affected by successful cost savings efforts achieved by the state, and that OVHA report to the Joint Fiscal Committee and the Health Access Oversight Committee on the status and provisions of any agreement reached.

(4) *MCO Savings Identified.* That OVHA present to the Joint Fiscal Committee a list of criteria and an updated list of MCO targeted health care investments which support the administration's recommendation that the financial value of the Demonstration Waiver program to the state is within the range of \$135 million to \$165 million.

(5) *Attorney General Review.* That the Attorney General review as to form the Special Terms and Conditions (STC), the Intergovernmental Agreement (IGA), and other legal documents regarding the demonstration waiver program.

(c) That by granting contingent approval of the Demonstration Waiver program, the Joint Fiscal Committee cedes none of the authority of the General Assembly to determine policy, eligibility and benefits for the Medicaid program (including expansion programs), through legislative enactments, administrative rules review, the state budget and appropriations process, or any other means of legislative oversight. Further, the Joint Fiscal Committee affirm the legislature's commitment to providing health care benefits to low-income Vermonters through the Medicaid program.

(d) That pursuant to #40 of the Special Terms and Conditions, revenue from capitation payments will be used to reduce the rates of uninsured or underinsured and improve the access and quality of services to that group; that the approval letter from the Department of Health & Human Services also indicate that Department's understanding that "Vermont will demonstrate its ability to promote universal access to health care"; and therefore, to the extent that there is unused spending capacity as measured by the difference between the amount necessary to maintain the current Medicaid program and the Demonstration Waiver program's maximum certified premium, that unused spending capacity shall be used to fund health care initiatives authorized by the legislature to improve the access to and quality of health care services received by the uninsured and underinsured.



STATE OF VERMONT
LEGISLATIVE COUNCIL

MEMORANDUM

To: Representative Martha Heath
Chair, Joint Fiscal Committee

From: William P. Russell, Chief Legislative Counsel

Date: November 29, 2005

Subject: Duration of JFC's Authority to Approve the Global Commitment

Question

Is the authority of the Joint Fiscal Committee to approve the Global Commitment to Health Demonstration Waiver Program divested if it meets in order to ascertain the fulfillment of conditions to its approval within 30 days of the legislative session?

Answer

The FY 2006 General Appropriations Act granted to the Joint Fiscal Committee the authority to approve the "Global Commitment to Health" with this language:

Any agreement, waiver ...or commitment..., such as global funding commitments..., is conditional upon approval by act of the general assembly, or, if the general assembly is not in session and the speaker and the president pro tempore determine that it will not reconvene within the next 30-day period, by a majority vote of the joint fiscal committee upon recommendation of the health access oversight committee." [Section 250(c)]

On September 30, 2005 the Joint Fiscal Committee unanimously granted contingent approval of the Global Commitment program. Notably, in its motion of approval the JFC explicitly allowed for the agreement to be implemented beginning October 1, 2005.

The committee's approval was contingent on five conditions. Those conditions were established to provide the committee with information, not available on September 30, on several key provisions of the agreement. The information was to be provided to the

committee at a future date (since extended) to provide assurance that significant features and details of the agreement were in accord with all representations made to the committee which formed the basis of the committee's approval.

In my opinion, September 30, 2005 is the operative date for the purposes of determining the Joint Fiscal Committee's authority to act. Its actions at meetings since September 30 (including those proposed for meetings in December) have been (or will be) for the purpose of ascertaining whether the conditions upon which the committee granted its approval have been met. Their purpose is more in the nature of oversight, and not for the purpose of revising or amending the approval previously granted on September 30.

Failure to meet the conditions, or any changes made to the conditions, or the addition of new conditions, may void the approval granted on September 30. In this case, and at this date, authority to approve a revised agreement would revert to the General Assembly under the provisions of Section 250(c) of the Appropriations Act.

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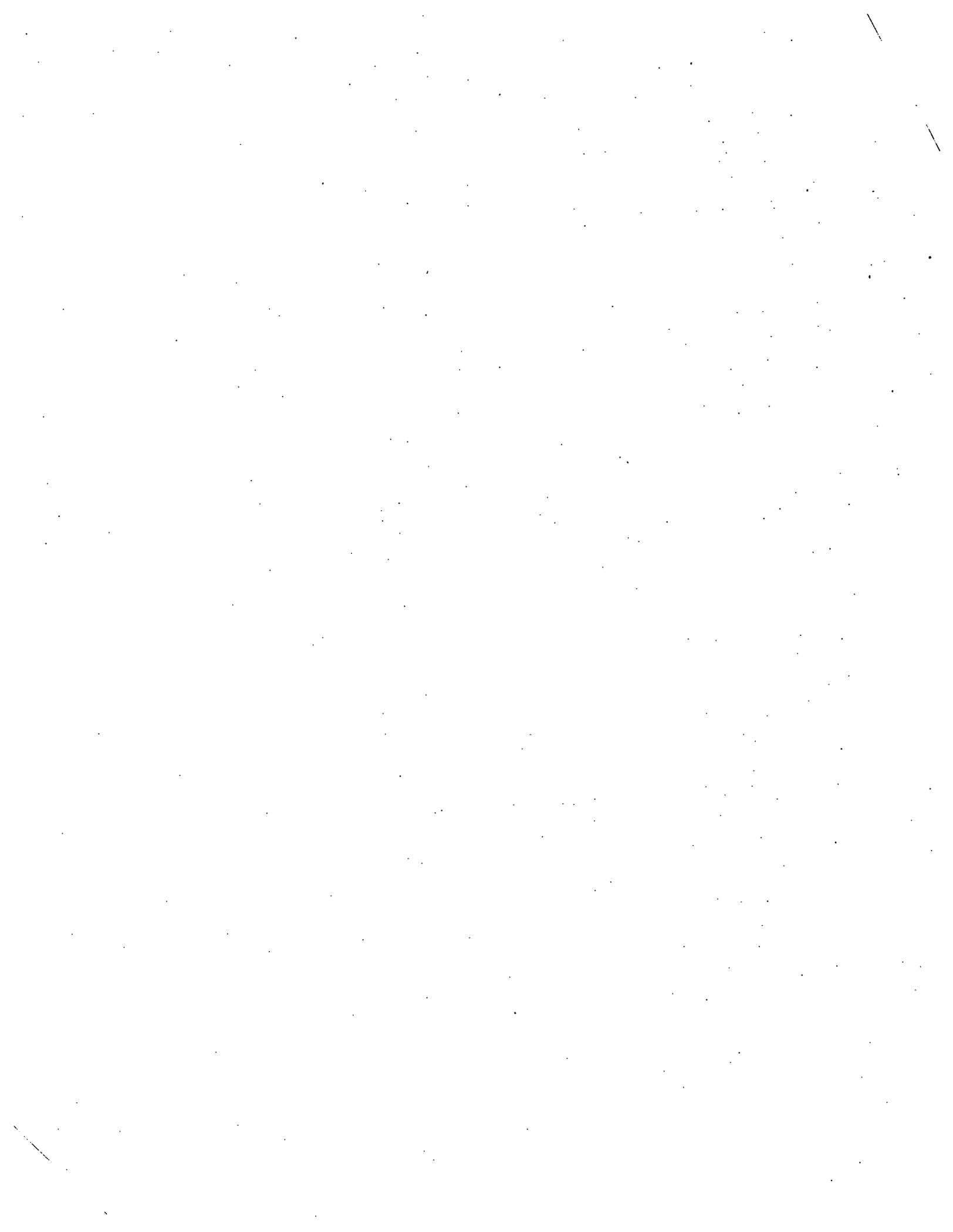
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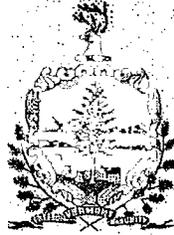
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Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,281	\$947.98	\$101.21	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	1,320	\$1,038.17	\$114.16
2. NH	1	\$1,593.18	\$0.13	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,672.84	\$0.14
3. Outpatient	4,582	\$232.73	\$88.86	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	4,818	\$251.34	\$100.91
4. Physician & Other	25,028	\$47.94	\$99.98	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,600	\$50.33	\$107.37
5. Home Health	948	\$227.06	\$17.94	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,080	\$252.03	\$22.68
6. Nursing	52	\$850.05	\$3.65	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	54	\$892.55	\$3.99
7. Dental	2,258	\$50.87	\$9.57	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,348	\$53.41	\$10.45
8. Transportation	5,899	\$17.22	\$8.47	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,121	\$18.08	\$9.22
9. DME/Supplies	1,616	\$98.70	\$13.29	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	1,755	\$104.62	\$15.30
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	259	\$592.73	\$12.78	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	264	\$616.44	\$13.56
12. OADAP	2,275	\$36.67	\$6.95	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,750	\$40.71	\$9.33
13. Ambulance	902	\$41.42	\$3.11	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	978	\$43.50	\$3.54
14. Prescribed Drugs	1,336,703	\$1.30	\$145.11	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,382,782	\$1.41	\$162.12
15. Behavioral Health - IP	334	\$325.26	\$9.06	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	344	\$341.53	\$9.80
16. Behavioral Health - OP/Phy	9,198	\$142.95	\$109.57	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	9,912	\$150.09	\$123.98
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	7,213	\$386.82	\$232.52	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	7,502	\$406.16	\$253.91
19. HCBS TBI	381	\$166.04	\$5.27	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	392	\$174.34	\$5.69
20. Buy-In			\$0.00									\$0.00
Total			\$867.46									\$966.18

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,320	\$1,038.17	\$114.16	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	1,420	\$853.07	\$100.97
2. NH	1	\$1,672.84	\$0.14	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,756.48	\$0.15
3. Outpatient	4,818	\$251.34	\$100.91	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	5,294	\$271.45	\$119.77
4. Physician & Other	25,600	\$50.33	\$107.37	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	26,185	\$52.85	\$115.32
5. Home Health	1,080	\$252.03	\$22.68	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,230	\$279.76	\$28.69
6. Nursing	54	\$892.55	\$3.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	56	\$937.18	\$4.36
7. Dental	2,348	\$53.41	\$10.45	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,442	\$56.08	\$11.41
8. Transportation	6,121	\$18.08	\$9.22	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,350	\$18.99	\$10.05
9. DME/Supplies	1,755	\$104.62	\$15.30	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	1,907	\$110.90	\$17.62
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
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12. OADAP	2,750	\$40.71	\$9.33	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,326	\$45.18	\$12.52
13. Ambulance	978	\$43.50	\$3.54	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	1,060	\$45.67	\$4.03
14. Prescribed Drugs	1,382,782	\$1.41	\$162.12	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,430,450	\$1.52	\$181.12
15. Behavioral Health - IP	344	\$341.53	\$9.80	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	355	\$358.60	\$10.60
16. Behavioral Health - OP/Phy	9,912	\$150.09	\$123.98	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	10,682	\$157.60	\$140.29
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	7,502	\$406.16	\$253.91	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	7,802	\$426.47	\$277.27
19. HCBS TBI	392	\$174.34	\$5.69	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	404	\$183.06	\$6.16
20. Buy-In			\$0.00									\$0.00
Total			\$966.18									\$1,054.71

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,420	\$853.07	\$100.97	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	1,463	\$887.20	\$108.16
2. NH	1	\$1,756.48	\$0.15	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,844.31	\$0.17
3. Outpatient	5,294	\$271.45	\$119.77	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	5,568	\$293.17	\$136.02
4. Physician & Other	26,185	\$52.85	\$115.32	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	26,784	\$55.49	\$123.85
5. Home Health	1,230	\$279.76	\$28.69	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,402	\$310.53	\$36.27
6. Nursing	56	\$937.18	\$4.36	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	58	\$984.04	\$4.76
7. Dental	2,442	\$56.08	\$11.41	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,540	\$58.89	\$12.46
8. Transportation	6,350	\$18.99	\$10.05	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,588	\$19.94	\$10.95
9. DME/Supplies	1,907	\$110.90	\$17.62	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	2,071	\$117.55	\$20.29
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	269	\$641.10	\$14.38	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	275	\$666.74	\$15.26
12. OADAP	3,326	\$45.18	\$12.52	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	4,021	\$50.15	\$16.81
13. Ambulance	1,060	\$45.67	\$4.03	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	1,149	\$47.95	\$4.59
14. Prescribed Drugs	1,430,450	\$1.52	\$181.12	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,479,762	\$1.64	\$202.36
15. Behavioral Health - IP	355	\$358.60	\$10.60	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	365	\$376.53	\$11.46
16. Behavioral Health - OP/Phy	10,682	\$157.60	\$140.29	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	11,511	\$165.48	\$158.74
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	7,802	\$426.47	\$277.27	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	8,114	\$447.79	\$302.77
19. HCBS TBI	404	\$183.06	\$6.16	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	416	\$192.21	\$6.66
20. Buy-In			\$0.00									\$0.00
Total			\$1,054.71									\$1,171.58

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	847	\$676.57	\$47.73	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	872	\$740.94	\$53.84
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,309	\$184.67	\$35.53	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	2,428	\$199.45	\$40.35
4. Physician & Other	13,700	\$38.34	\$43.77	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,013	\$40.25	\$47.01
5. Home Health	15,313	\$153.72	\$196.16	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	17,445	\$170.63	\$248.06
6. Nursing	1,373	\$576.90	\$66.01	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,428	\$605.75	\$72.09
7. Dental	3,015	\$49.96	\$12.55	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,135	\$52.45	\$13.71
8. Transportation	3,000	\$17.09	\$4.27	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,112	\$17.95	\$4.65
9. DME/Supplies	2,782	\$126.47	\$29.32	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,022	\$134.06	\$33.76
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,451	\$528.75	\$328.29	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,600	\$549.90	\$348.25
12. OADAP	1,095	\$36.88	\$3.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,323	\$40.94	\$4.52
13. Ambulance	217	\$49.30	\$0.89	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	235	\$51.76	\$1.02
14. Prescribed Drugs	751,750	\$1.33	\$83.21	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	777,665	\$1.43	\$92.97
15. Behavioral Health - IP	706	\$736.19	\$43.30	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	727	\$773.00	\$46.83
16. Behavioral Health - OP/Phy	79,357	\$38.33	\$253.50	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	85,518	\$40.25	\$286.85
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	8,886	\$234.41	\$173.58	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,241	\$246.13	\$189.55
19. HCBS TBI	300	\$84.55	\$2.11	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	309	\$88.78	\$2.29
20. Buy-In			\$0.00									\$0.00
Total			\$1,323.61									\$1,485.73

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	872	\$740.94	\$53.84	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	939	\$608.84	\$47.62
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,428	\$199.45	\$40.35	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	2,668	\$215.40	\$47.89
4. Physician & Other	14,013	\$40.25	\$47.01	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,333	\$42.27	\$50.48
5. Home Health	17,445	\$170.63	\$248.06	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	19,874	\$189.40	\$313.68
6. Nursing	1,428	\$605.75	\$72.09	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,485	\$636.04	\$78.72
7. Dental	3,135	\$52.45	\$13.71	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,261	\$55.08	\$14.97
8. Transportation	3,112	\$17.95	\$4.65	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,229	\$18.84	\$5.07
9. DME/Supplies	3,022	\$134.06	\$33.76	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,282	\$142.10	\$38.87
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,600	\$549.90	\$348.25	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,752	\$571.90	\$369.43
12. OADAP	1,323	\$40.94	\$4.52	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,600	\$45.44	\$6.06
13. Ambulance	235	\$51.76	\$1.02	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	255	\$54.35	\$1.16
14. Prescribed Drugs	777,665	\$1.43	\$92.97	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	804,473	\$1.55	\$103.87
15. Behavioral Health - IP	727	\$773.00	\$46.83	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	749	\$811.65	\$50.65
16. Behavioral Health - OP/Phy	85,518	\$40.25	\$286.85	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	92,158	\$42.26	\$324.58
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,241	\$246.13	\$189.55	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,611	\$258.44	\$206.99
19. HCBS TBI	309	\$88.78	\$2.29	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	318	\$93.22	\$2.47
20. Buy-In			\$0.00									\$0.00
Total			\$1,485.73									\$1,662.49

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	939	\$608.84	\$47.62	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	967	\$633.19	\$51.01
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,668	\$215.40	\$47.89	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	2,806	\$232.64	\$54.39
4. Physician & Other	14,333	\$42.27	\$50.48	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,661	\$44.38	\$54.22
5. Home Health	19,874	\$189.40	\$313.68	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	22,641	\$210.24	\$396.66
6. Nursing	1,485	\$636.04	\$78.72	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,545	\$667.84	\$85.96
7. Dental	3,261	\$55.08	\$14.97	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,391	\$57.83	\$16.34
8. Transportation	3,229	\$18.84	\$5.07	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,350	\$19.79	\$5.52
9. DME/Supplies	3,282	\$142.10	\$38.87	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,566	\$150.63	\$44.76
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,752	\$571.90	\$369.43	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,907	\$594.77	\$391.89
12. OADAP	1,600	\$45.44	\$6.06	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,935	\$50.44	\$8.13
13. Ambulance	255	\$54.35	\$1.16	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	276	\$57.07	\$1.31
14. Prescribed Drugs	804,473	\$1.55	\$103.87	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	832,205	\$1.67	\$116.04
15. Behavioral Health - IP	749	\$811.65	\$50.65	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	771	\$852.24	\$54.78
16. Behavioral Health - OP/Phy	92,158	\$42.26	\$324.58	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	99,314	\$44.38	\$367.27
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,611	\$258.44	\$206.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,995	\$271.36	\$226.03
19. HCBS TBI	318	\$93.22	\$2.47	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	328	\$97.88	\$2.67
20. Buy-In			\$0.00									\$0.00
Total			\$1,662.49									\$1,876.99

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	249	\$896.09	\$18.59	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	254	\$931.94	\$19.72
2. NH	84	\$1,699.55	\$11.84	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	91	\$1,784.53	\$13.60
3. Outpatient	3,388	\$113.64	\$32.08	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,422	\$117.24	\$33.43
4. Physician & Other	19,150	\$27.59	\$44.03	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	20,299	\$28.97	\$49.01
5. Home Health	472	\$329.74	\$12.96	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	465	\$342.93	\$13.29
6. Nursing	27	\$759.43	\$1.74	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	28	\$789.81	\$1.85
7. Dental	1,592	\$44.40	\$5.89	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,656	\$46.62	\$6.43
8. Transportation	10,924	\$16.39	\$14.92	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,924	\$17.21	\$15.67
9. DME/Supplies	2,234	\$51.72	\$9.63	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	2,480	\$54.83	\$11.33
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	46	\$376.59	\$1.44	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	48	\$391.65	\$1.56
12. OADAP	629	\$45.73	\$2.40	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	757	\$50.76	\$3.20
13. Ambulance	473	\$69.12	\$2.73	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	492	\$72.58	\$2.98
14. Prescribed Drugs	2,073,270	\$1.28	\$221.82	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,139,902	\$1.39	\$247.26
15. Behavioral Health - IP	811	\$563.76	\$38.11	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	836	\$591.95	\$41.22
16. Behavioral Health - OP/Phy	8,609	\$218.61	\$156.83	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	9,169	\$229.54	\$175.39
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,531	\$418.10	\$332.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,912	\$439.00	\$362.62
19. HCBS TBI	959	\$157.24	\$12.57	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	988	\$165.10	\$13.59
20. Buy-In			\$57.55	15.6%	0.0%	15.6%	0.0%	0.0%	0.0%			\$66.53
Total			\$977.20									\$1,078.67

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	254	\$931.94	\$19.72	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	259	\$969.21	\$20.92
2. NH	91	\$1,784.53	\$13.60	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	100	\$1,873.76	\$15.61
3. Outpatient	3,422	\$117.24	\$33.43	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,456	\$120.96	\$34.84
4. Physician & Other	20,299	\$28.97	\$49.01	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	21,517	\$30.42	\$54.54
5. Home Health	465	\$342.93	\$13.29	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	458	\$356.65	\$13.63
6. Nursing	28	\$789.81	\$1.85	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	29	\$821.40	\$1.98
7. Dental	1,656	\$46.62	\$6.43	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,722	\$48.95	\$7.02
8. Transportation	10,924	\$17.21	\$15.67	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,925	\$18.07	\$16.46
9. DME/Supplies	2,480	\$54.83	\$11.33	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	2,753	\$58.11	\$13.33
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	48	\$391.65	\$1.56	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	50	\$407.31	\$1.68
12. OADAP	757	\$50.76	\$3.20	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	911	\$56.34	\$4.27
13. Ambulance	492	\$72.58	\$2.98	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	512	\$76.21	\$3.25
14. Prescribed Drugs	2,139,902	\$1.39	\$247.26	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,208,675	\$1.50	\$275.63
15. Behavioral Health - IP	836	\$591.95	\$41.22	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	861	\$621.54	\$44.58
16. Behavioral Health - OP/Phy	9,169	\$229.54	\$175.39	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	9,765	\$241.02	\$196.14
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,912	\$439.00	\$362.62	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	10,309	\$460.95	\$395.98
19. HCBS TBI	988	\$165.10	\$13.59	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	1,018	\$173.35	\$14.70
20. Buy-In			\$66.53	15.1%	0.0%	15.1%	0.0%	0.0%	0.0%			\$76.57
Total			\$1,078.67									\$1,191.14

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	259	\$969.21	\$20.92	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	264	\$1,007.98	\$22.19
2. NH	100	\$1,873.76	\$15.61	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	109	\$1,967.44	\$17.93
3. Outpatient	3,456	\$120.96	\$34.84	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,491	\$124.79	\$36.30
4. Physician & Other	21,517	\$30.42	\$54.54	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	22,808	\$31.94	\$60.71
5. Home Health	458	\$356.65	\$13.63	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	452	\$370.91	\$13.97
6. Nursing	29	\$821.40	\$1.98	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	30	\$854.26	\$2.11
7. Dental	1,722	\$48.95	\$7.02	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,791	\$51.40	\$7.67
8. Transportation	10,925	\$18.07	\$16.46	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,925	\$18.98	\$17.28
9. DME/Supplies	2,753	\$58.11	\$13.33	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	3,056	\$61.60	\$15.69
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	50	\$407.31	\$1.68	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	52	\$423.61	\$1.82
12. OADAP	911	\$56.34	\$4.27	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	1,095	\$62.54	\$5.71
13. Ambulance	512	\$76.21	\$3.25	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	532	\$80.02	\$3.55
14. Prescribed Drugs	2,208,675	\$1.50	\$275.63	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,279,659	\$1.62	\$307.24
15. Behavioral Health - IP	861	\$621.54	\$44.58	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	887	\$652.62	\$48.21
16. Behavioral Health - OP/Phy	9,765	\$241.02	\$196.14	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	10,401	\$253.07	\$219.35
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	10,309	\$460.95	\$395.98	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	10,721	\$484.00	\$432.41
19. HCBS TBI	1,018	\$173.35	\$14.70	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	1,048	\$182.02	\$15.90
20. Buy-In			\$76.57	10.0%	0.0%	10.0%	0.0%	0.0%	0.0%			\$84.23
Total			\$1,191.14									\$1,312.27

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,010	\$1,123.76	\$94.56	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	1,040	\$1,230.67	\$106.66
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,048	\$183.23	\$77.08	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	5,308	\$197.89	\$87.54
4. Physician & Other	24,158	\$56.34	\$113.42	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	24,710	\$59.16	\$121.82
5. Home Health	80	\$239.20	\$1.59	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	91	\$265.52	\$2.01
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,476	\$53.11	\$10.96	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,575	\$55.77	\$11.97
8. Transportation	2,384	\$19.48	\$3.87	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,473	\$20.45	\$4.22
9. DME/Supplies	239	\$103.23	\$2.05	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	259	\$109.42	\$2.37
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	869	\$146.93	\$10.64	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	886	\$152.81	\$11.29
12. OADAP	3,040	\$37.38	\$9.47	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,676	\$41.50	\$12.71
13. Ambulance	387	\$40.23	\$1.30	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	420	\$42.24	\$1.48
14. Prescribed Drugs	513,035	\$1.13	\$48.46	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	530,720	\$1.22	\$54.14
15. Behavioral Health - IP	114	\$31.56	\$0.30	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	118	\$33.13	\$0.32
16. Behavioral Health - OP/Phy	4,345	\$40.44	\$14.64	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	4,682	\$42.46	\$16.57
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	42	\$441.67	\$1.56	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	44	\$463.76	\$1.70
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$389.90									\$434.78

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,040	\$1,230.67	\$106.66	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	1,119	\$1,011.25	\$94.34
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,308	\$197.89	\$87.54	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	5,833	\$213.72	\$103.89
4. Physician & Other	24,710	\$59.16	\$121.82	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,275	\$62.12	\$130.83
5. Home Health	91	\$265.52	\$2.01	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	104	\$294.72	\$2.54
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,575	\$55.77	\$11.97	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,678	\$58.55	\$13.07
8. Transportation	2,473	\$20.45	\$4.22	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,566	\$21.47	\$4.59
9. DME/Supplies	259	\$109.42	\$2.37	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	282	\$115.99	\$2.72
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	886	\$152.81	\$11.29	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	904	\$158.92	\$11.97
12. OADAP	3,676	\$41.50	\$12.71	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	4,445	\$46.06	\$17.06
13. Ambulance	420	\$42.24	\$1.48	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	455	\$44.35	\$1.68
14. Prescribed Drugs	530,720	\$1.22	\$54.14	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	549,016	\$1.32	\$60.49
15. Behavioral Health - IP	118	\$33.13	\$0.32	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	121	\$34.79	\$0.35
16. Behavioral Health - OP/Phy	4,682	\$42.46	\$16.57	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	5,045	\$44.58	\$18.74
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	44	\$463.76	\$1.70	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	46	\$486.94	\$1.86
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$434.78									\$464.14

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,119	\$1,011.25	\$94.34	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	1,153	\$1,051.70	\$101.05
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,833	\$213.72	\$103.89	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	6,134	\$230.82	\$117.99
4. Physician & Other	25,275	\$62.12	\$130.83	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,852	\$65.22	\$140.51
5. Home Health	104	\$294.72	\$2.54	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	118	\$327.14	\$3.22
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,678	\$58.55	\$13.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,785	\$61.48	\$14.27
8. Transportation	2,566	\$21.47	\$4.59	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,662	\$22.55	\$5.00
9. DME/Supplies	282	\$115.99	\$2.72	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	306	\$122.95	\$3.14
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	904	\$158.92	\$11.97	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	922	\$165.28	\$12.70
12. OADAP	4,445	\$46.06	\$17.06	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	5,374	\$51.13	\$22.90
13. Ambulance	455	\$44.35	\$1.68	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	493	\$46.57	\$1.91
14. Prescribed Drugs	549,016	\$1.32	\$60.49	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	567,941	\$1.43	\$67.58
15. Behavioral Health - IP	121	\$34.79	\$0.35	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	125	\$36.53	\$0.38
16. Behavioral Health - OP/Phy	5,045	\$44.58	\$18.74	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	5,437	\$46.81	\$21.21
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	46	\$486.94	\$1.86	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	48	\$511.29	\$2.03
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$464.14									\$513.89

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	189	\$1,058.44	\$16.67	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	195	\$1,159.14	\$18.80
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,030	\$180.12	\$15.46	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	1,083	\$194.53	\$17.55
4. Physician & Other	11,421	\$35.72	\$33.99	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	11,682	\$37.50	\$36.51
5. Home Health	408	\$166.12	\$5.64	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	464	\$184.40	\$7.14
6. Nursing	20	\$594.23	\$0.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	21	\$623.94	\$1.08
7. Dental	3,959	\$42.47	\$14.01	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,117	\$44.60	\$15.30
8. Transportation	698	\$13.89	\$0.81	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	724	\$14.58	\$0.88
9. DME/Supplies	165	\$88.70	\$1.22	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	179	\$94.02	\$1.40
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,200	\$281.70	\$51.65	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,244	\$292.97	\$54.79
12. OADAP	400	\$72.65	\$2.42	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	484	\$80.65	\$3.25
13. Ambulance	90	\$48.47	\$0.36	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	98	\$50.89	\$0.41
14. Prescribed Drugs	253,145	\$0.85	\$17.92	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	261,871	\$0.92	\$20.02
15. Behavioral Health - IP	156	\$1,206.64	\$15.64	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	160	\$1,266.97	\$16.92
16. Behavioral Health - OP/Phy	20,650	\$28.55	\$49.13	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	22,253	\$29.98	\$55.59
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	322	\$309.21	\$8.29	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	335	\$324.67	\$9.06
19. HCBS TBI	4	\$29.47	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$30.95	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$234.23									\$258.72

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	195	\$1,159.14	\$18.80	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	209	\$952.48	\$16.63
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,083	\$194.53	\$17.55	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	1,190	\$210.09	\$20.83
4. Physician & Other	11,682	\$37.50	\$36.51	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	11,949	\$39.38	\$39.21
5. Home Health	464	\$184.40	\$7.14	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	529	\$204.68	\$9.02
6. Nursing	21	\$623.94	\$1.08	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	22	\$655.13	\$1.18
7. Dental	4,117	\$44.60	\$15.30	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,282	\$46.83	\$16.71
8. Transportation	724	\$14.58	\$0.88	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	751	\$15.31	\$0.96
9. DME/Supplies	179	\$94.02	\$1.40	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	194	\$99.67	\$1.61
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,244	\$292.97	\$54.79	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,289	\$304.69	\$58.12
12. OADAP	484	\$80.65	\$3.25	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	585	\$89.52	\$4.36
13. Ambulance	98	\$50.89	\$0.41	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	106	\$53.44	\$0.47
14. Prescribed Drugs	261,871	\$0.92	\$20.02	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	270,899	\$0.99	\$22.37
15. Behavioral Health - IP	160	\$1,266.97	\$16.92	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	165	\$1,330.32	\$18.29
16. Behavioral Health - OP/Phy	22,253	\$29.98	\$55.59	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	23,981	\$31.48	\$62.91
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	335	\$324.67	\$9.06	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	348	\$340.90	\$9.89
19. HCBS TBI	4	\$30.95	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$32.49	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$258.72									\$282.59

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	209	\$952.48	\$16.63	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	216	\$990.57	\$17.81
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,190	\$210.09	\$20.83	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	1,251	\$226.90	\$23.66
4. Physician & Other	11,949	\$39.38	\$39.21	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	12,222	\$41.35	\$42.11
5. Home Health	529	\$204.68	\$9.02	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	603	\$227.19	\$11.41
6. Nursing	22	\$655.13	\$1.18	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$687.89	\$1.29
7. Dental	4,282	\$46.83	\$16.71	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,453	\$49.17	\$18.25
8. Transportation	751	\$15.31	\$0.96	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	779	\$16.08	\$1.04
9. DME/Supplies	194	\$99.67	\$1.61	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	211	\$105.64	\$1.86
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,289	\$304.69	\$58.12	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,335	\$316.87	\$61.66
12. OADAP	585	\$89.52	\$4.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	707	\$99.36	\$5.86
13. Ambulance	106	\$53.44	\$0.47	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	115	\$56.11	\$0.54
14. Prescribed Drugs	270,899	\$0.99	\$22.37	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	280,237	\$1.07	\$25.00
15. Behavioral Health - IP	165	\$1,330.32	\$18.29	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	170	\$1,396.84	\$19.79
16. Behavioral Health - OP/Phy	23,981	\$31.48	\$62.91	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	25,843	\$33.05	\$71.18
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	348	\$340.90	\$9.89	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	362	\$357.95	\$10.80
19. HCBS TBI	4	\$32.49	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$34.12	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$282.59									\$312.26

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	451	\$1,018.13	\$38.27	3.0%	4.0%	7.1%	0.0%	5.7%	5.7%	465	\$1,119.04	\$43.32
2. NH	0	\$312.13	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$327.73	\$0.00
3. Outpatient	2,838	\$239.57	\$56.66	5.2%	8.0%	13.6%	6.1%	2.0%	8.2%	3,167	\$263.80	\$69.62
4. Physician & Other	17,211	\$43.06	\$61.75	2.3%	5.0%	7.4%	2.0%	3.9%	6.0%	17,950	\$46.99	\$70.28
5. Home Health	44	\$527.95	\$1.92	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	50	\$586.02	\$2.43
6. Nursing	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	23	\$92.15	\$0.18	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$96.76	\$0.19
8. Transportation	19	\$25.23	\$0.04	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	19	\$26.50	\$0.04
9. DME/Supplies	239	\$113.92	\$2.27	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	259	\$120.75	\$2.61
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	16	\$330.59	\$0.45	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$343.82	\$0.47
12. OADAP	1,968	\$57.09	\$9.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,380	\$63.37	\$12.57
13. Ambulance	291	\$42.10	\$1.02	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	315	\$44.20	\$1.16
14. Prescribed Drugs	485,305	\$1.11	\$44.98	3.4%	8.0%	11.7%	15.9%	26.6%	46.7%	581,837	\$1.52	\$73.73
15. Behavioral Health - IP	81	\$22.26	\$0.15	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	84	\$23.38	\$0.16
16. Behavioral Health - OP/Phy	2,527	\$62.88	\$13.24	7.8%	5.0%	13.2%	0.0%	1.2%	1.2%	2,723	\$66.81	\$15.16
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	22	\$63.51	\$0.11	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	22	\$66.69	\$0.12
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$230.41									\$291.88

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	465	\$1,119.04	\$43.32	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	500	\$919.52	\$38.32
2. NH	0	\$327.73	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$344.12	\$0.00
3. Outpatient	3,167	\$263.80	\$69.62	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	3,480	\$284.91	\$82.62
4. Physician & Other	17,950	\$46.99	\$70.28	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	18,360	\$49.33	\$75.48
5. Home Health	50	\$586.02	\$2.43	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	57	\$650.48	\$3.07
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	24	\$96.76	\$0.19	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	25	\$101.60	\$0.21
8. Transportation	19	\$26.50	\$0.04	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	20	\$27.82	\$0.05
9. DME/Supplies	259	\$120.75	\$2.61	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	282	\$128.00	\$3.01
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	17	\$343.82	\$0.47	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$357.57	\$0.50
12. OADAP	2,380	\$63.37	\$12.57	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,877	\$70.34	\$16.87
13. Ambulance	315	\$44.20	\$1.16	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	342	\$46.41	\$1.32
14. Prescribed Drugs	581,837	\$1.52	\$73.73	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	601,894	\$1.64	\$82.38
15. Behavioral Health - IP	84	\$23.38	\$0.16	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	86	\$24.55	\$0.18
16. Behavioral Health - OP/Phy	2,723	\$66.81	\$15.16	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	2,934	\$70.15	\$17.15
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	22	\$66.69	\$0.12	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$70.02	\$0.14
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$291.88									\$321.29

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	500	\$919.52	\$38.32	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	515	\$956.30	\$41.04
2. NH	0	\$344.12	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$361.33	\$0.00
3. Outpatient	3,480	\$284.91	\$82.62	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	3,660	\$307.70	\$93.84
4. Physician & Other	18,360	\$49.33	\$75.48	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	18,780	\$51.80	\$81.07
5. Home Health	57	\$650.48	\$3.07	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	65	\$722.04	\$3.89
6. Nursing	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	25	\$101.60	\$0.21	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	26	\$106.68	\$0.23
8. Transportation	20	\$27.82	\$0.05	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	21	\$29.21	\$0.05
9. DME/Supplies	282	\$128.00	\$3.01	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	306	\$135.68	\$3.46
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	17	\$357.57	\$0.50	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$371.87	\$0.53
12. OADAP	2,877	\$70.34	\$16.87	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,479	\$78.08	\$22.64
13. Ambulance	342	\$46.41	\$1.32	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	370	\$48.73	\$1.50
14. Prescribed Drugs	601,894	\$1.64	\$82.38	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	622,643	\$1.77	\$92.03
15. Behavioral Health - IP	86	\$24.55	\$0.18	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	89	\$25.77	\$0.19
16. Behavioral Health - OP/Phy	2,934	\$70.15	\$17.15	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	3,162	\$73.66	\$19.41
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	23	\$70.02	\$0.14	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$73.52	\$0.15
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$321.29									\$360.03

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$816.88	\$0.66	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$849.56	\$0.70
2. NH	0	\$1,374.00	\$0.02	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,442.70	\$0.02
3. Outpatient	123	\$134.27	\$1.37	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	124	\$138.53	\$1.43
4. Physician & Other	1,543	\$25.97	\$3.34	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,636	\$27.27	\$3.72
5. Home Health	0		\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0		\$0.00
6. Nursing	0		\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	1	\$735.13	\$0.05	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$771.88	\$0.05
8. Transportation	0		\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
9. DME/Supplies	301	\$24.70	\$0.62	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	335	\$26.19	\$0.73
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	0	\$273.17	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$284.10	\$0.00
12. OADAP	0		\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0		\$0.00
13. Ambulance	16	\$76.52	\$0.10	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	16	\$80.34	\$0.11
14. Prescribed Drugs	1,614,291	\$1.19	\$159.51	3.2%	8.0%	11.5%	2.7%	3.7%	6.5%	1,711,158	\$1.33	\$189.36
15. Behavioral Health - IP	9	\$24.56	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	9	\$25.79	\$0.02
16. Behavioral Health - OP/Phy	6	\$66.17	\$0.03	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$69.48	\$0.04
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00	15.6%	0.0%	15.6%	0.0%	0.0%	0.0%			\$0.00
Total			\$165.72									\$196.18

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$849.56	\$0.70	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$883.54	\$0.74
2. NH	0	\$1,442.70	\$0.02	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,514.84	\$0.03
3. Outpatient	124	\$138.53	\$1.43	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	125	\$142.92	\$1.49
4. Physician & Other	1,636	\$27.27	\$3.72	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,734	\$28.63	\$4.14
5. Home Health	0		\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0		\$0.00
6. Nursing	0		\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	1	\$771.88	\$0.05	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$810.48	\$0.06
8. Transportation	0		\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
9. DME/Supplies	335	\$26.19	\$0.73	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	371	\$27.76	\$0.86
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	0	\$284.10	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$295.46	\$0.00
12. OADAP	0		\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0		\$0.00
13. Ambulance	16	\$80.34	\$0.11	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	17	\$84.36	\$0.12
14. Prescribed Drugs	1,711,158	\$1.33	\$189.36	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	1,766,152	\$1.43	\$211.08
15. Behavioral Health - IP	9	\$25.79	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	10	\$27.08	\$0.02
16. Behavioral Health - OP/Phy	7	\$69.48	\$0.04	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$72.95	\$0.04
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00	15.1%	0.0%	15.1%	0.0%	0.0%	0.0%			\$0.00
Total			\$196.18									\$218.58

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$883.54	\$0.74	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$918.88	\$0.79
2. NH	0	\$1,514.84	\$0.03	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,590.58	\$0.03
3. Outpatient	125	\$142.92	\$1.49	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	126	\$147.45	\$1.55
4. Physician & Other	1,734	\$28.63	\$4.14	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,838	\$30.06	\$4.61
5. Home Health	0	\$0.00	\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
6. Nursing	0	\$0.00	\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	1	\$810.48	\$0.06	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$851.00	\$0.06
8. Transportation	0	\$0.00	\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
9. DME/Supplies	371	\$27.76	\$0.86	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	412	\$29.42	\$1.01
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	0	\$295.46	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$307.28	\$0.00
12. OADAP	0	\$0.00	\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
13. Ambulance	17	\$84.36	\$0.12	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	18	\$88.58	\$0.13
14. Prescribed Drugs	1,766,152	\$1.43	\$211.08	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	1,822,914	\$1.55	\$235.30
15. Behavioral Health - IP	10	\$27.08	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	10	\$28.43	\$0.02
16. Behavioral Health - OP/Phy	7	\$72.95	\$0.04	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$76.60	\$0.05
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In	0	\$0.00	\$0.00	10.0%	0.0%	10.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
Total			\$218.58									\$243.55

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	8	\$1,111.47	\$0.74	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	8	\$1,217.21	\$0.83
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	310	\$110.13	\$2.85	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	326	\$118.94	\$3.24
4. Physician & Other	4,613	\$22.19	\$8.53	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,718	\$23.30	\$9.16
5. Home Health	387	\$281.29	\$9.08	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	441	\$312.23	\$11.48
6. Nursing	22	\$1,674.34	\$3.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$1,758.05	\$3.35
7. Dental	2,816	\$41.89	\$9.83	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,929	\$43.98	\$10.74
8. Transportation	487	\$26.96	\$1.09	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	506	\$28.31	\$1.19
9. DME/Supplies	91	\$95.09	\$0.72	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	99	\$100.79	\$0.83
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,632	\$264.98	\$36.04	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,665	\$275.58	\$38.24
12. OADAP	29	\$374.03	\$0.89	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	34	\$415.17	\$1.19
13. Ambulance	30	\$35.67	\$0.09	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	32	\$37.45	\$0.10
14. Prescribed Drugs	237,015	\$0.61	\$12.13	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	245,185	\$0.66	\$13.55
15. Behavioral Health - IP	2	\$6,081.90	\$1.13	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$6,386.00	\$1.23
16. Behavioral Health - OP/Phy	9,221	\$34.05	\$26.16	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	9,937	\$35.75	\$29.61
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	160	\$188.87	\$2.52	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	166	\$198.32	\$2.75
19. HCBS TBI	21	\$117.73	\$0.20	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	21	\$123.62	\$0.22
20. Buy-In			\$0.00									\$0.00
Total			\$115.08									\$127.70

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	8	\$1,217.21	\$0.83	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	9	\$1,000.19	\$0.74
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	326	\$118.94	\$3.24	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	359	\$128.45	\$3.84
4. Physician & Other	4,718	\$23.30	\$9.16	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,826	\$24.47	\$9.84
5. Home Health	441	\$312.23	\$11.48	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	503	\$346.58	\$14.52
6. Nursing	23	\$1,758.05	\$3.35	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$1,845.96	\$3.66
7. Dental	2,929	\$43.98	\$10.74	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,046	\$46.18	\$11.72
8. Transportation	506	\$28.31	\$1.19	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	525	\$29.72	\$1.30
9. DME/Supplies	99	\$100.79	\$0.83	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	107	\$106.84	\$0.95
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,665	\$275.58	\$38.24	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,698	\$286.61	\$40.56
12. OADAP	34	\$415.17	\$1.19	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	42	\$460.84	\$1.60
13. Ambulance	32	\$37.45	\$0.10	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	35	\$39.32	\$0.11
14. Prescribed Drugs	245,185	\$0.66	\$13.55	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	253,638	\$0.72	\$15.14
15. Behavioral Health - IP	2	\$6,386.00	\$1.23	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$6,705.30	\$1.33
16. Behavioral Health - OP/Phy	9,937	\$35.75	\$29.61	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	10,708	\$37.54	\$33.50
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	166	\$198.32	\$2.75	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	173	\$208.23	\$3.00
19. HCBS TBI	21	\$123.62	\$0.22	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	22	\$129.80	\$0.24
20. Buy-In			\$0.00									\$0.00
Total			\$127.70									\$142.05

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	9	\$1,000.19	\$0.74	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	9	\$1,040.20	\$0.79
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	359	\$128.45	\$3.84	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	377	\$138.73	\$4.36
4. Physician & Other	4,826	\$24.47	\$9.84	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,936	\$25.69	\$10.57
5. Home Health	503	\$346.58	\$14.52	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	573	\$384.70	\$18.36
6. Nursing	24	\$1,845.96	\$3.66	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	25	\$1,938.25	\$4.00
7. Dental	3,046	\$46.18	\$11.72	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,168	\$48.49	\$12.80
8. Transportation	525	\$29.72	\$1.30	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	544	\$31.21	\$1.42
9. DME/Supplies	107	\$106.84	\$0.95	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	116	\$113.25	\$1.10
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,698	\$286.61	\$40.56	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,732	\$298.07	\$43.03
12. OADAP	42	\$460.84	\$1.60	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	50	\$511.53	\$2.15
13. Ambulance	35	\$39.32	\$0.11	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	38	\$41.29	\$0.13
14. Prescribed Drugs	253,638	\$0.72	\$15.14	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	262,381	\$0.77	\$16.91
15. Behavioral Health - IP	2	\$6,705.30	\$1.33	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$7,040.56	\$1.44
16. Behavioral Health - OP/Phy	10,708	\$37.54	\$33.50	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	11,540	\$39.42	\$37.91
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	173	\$208.23	\$3.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	180	\$218.65	\$3.28
19. HCBS TBI	22	\$129.80	\$0.24	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	23	\$136.29	\$0.26
20. Buy-In			\$0.00									\$0.00
Total			\$142.05									\$158.48

% of Prescription Drugs still covered 3.0%

MEG	SFY06			Rate Period Trend Adjusted				Rate Period Medical Cost ⁽¹⁾			Member Months
	Low	Best	High	Trends			Months of Trend	Low	Best	High	
				Low	Best	High					
ABD - Non-Medicare - Adult	\$937.43	\$1,015.22	\$1,054.71	6.7%	8.7%	10.8%	1.5	\$945.02	\$1,025.92	\$1,068.36	109,379
ABD - Non-Medicare - Child	\$1,486.81	\$1,600.69	\$1,662.49	8.2%	10.3%	12.4%	1.5	\$1,501.60	\$1,620.48	\$1,687.03	32,635
ABD - Dual											
Non-Rx	\$821.20	\$883.92	\$915.51	6.3%	8.2%	10.1%	1.5	\$827.52	\$892.68	\$926.60	
Rx	\$247.45	\$265.33	\$275.63	7.3%	9.4%	11.5%	-1.5	\$245.29	\$262.38	\$271.91	
10/05 - 12/05 Rate								\$1,072.81	\$1,155.06	\$1,198.51	37,588
1/06 - 6/06 Rate								\$834.88	\$900.55	\$934.76	75,847
ANFC - Non-Medicare - Adult	\$416.84	\$446.73	\$464.14	6.1%	8.2%	10.3%	1.5	\$419.96	\$451.16	\$469.86	78,302
ANFC - Non-Medicare - Child	\$252.20	\$271.98	\$282.59	6.1%	8.1%	10.2%	1.5	\$254.06	\$274.66	\$286.06	479,131
GlobalExp	\$287.76	\$309.31	\$321.29	7.4%	9.5%	11.6%	1.5	\$290.36	\$312.85	\$325.74	208,491
GlobalRx											
Non-Rx	\$6.94	\$7.22	\$7.50	5.8%	7.8%	9.9%	1.5	\$6.99	\$7.29	\$7.59	
Rx:											
10/05 - 12/05	\$189.51	\$203.20	\$211.08	7.3%	9.4%	11.5%	1.5	\$191.18	\$205.48	\$213.97	
1/06 - 6/06	\$5.69	\$6.10	\$6.33	0.0%	0.0%	0.0%	1.5	\$5.69	\$6.10	\$6.33	
10/05 - 12/05 Rate								\$198.17	\$212.77	\$221.56	31,980
1/06 - 6/06 Rate								\$12.68	\$13.38	\$13.92	63,420
OptionalExp	\$127.39	\$136.74	\$142.05	7.1%	9.1%	11.2%	1.5	\$128.48	\$138.24	\$143.95	15,983

Notes:

(1) Rate include drugs not covered by Part D.

MEG	Rate Period Medical Cost			Admin/Contingency Margin			Total Rate			Member Months
	Low	Best	High	Low	Best	High	Low	Best	High	
Admin/Contingency Margin %				10.5%	9.01%	9.01%				
PMPM										
ABD - Non-Medicare - Adult	\$945.02	\$1,025.92	\$1,068.36	\$110.87	\$101.59	\$105.79	\$1,055.89	\$1,127.50	\$1,174.15	109,379
ABD - Non-Medicare - Child	\$1,501.60	\$1,620.48	\$1,687.03	\$176.17	\$160.46	\$167.05	\$1,677.77	\$1,780.95	\$1,854.08	32,635
ABD - Dual - 10/05 - 12/05	\$1,072.81	\$1,155.06	\$1,198.51	\$125.86	\$114.38	\$118.68	\$1,198.67	\$1,269.44	\$1,317.19	37,588
ABD - Dual - 1/06 - 6/06	\$834.88	\$900.55	\$934.76	\$97.95	\$89.17	\$92.56	\$932.83	\$989.73	\$1,027.32	75,847
ANFC - Non-Medicare - Adult	\$419.96	\$451.16	\$469.86	\$49.27	\$44.67	\$46.53	\$469.23	\$495.84	\$516.39	78,302
ANFC - Non-Medicare - Child	\$254.06	\$274.66	\$286.06	\$29.81	\$27.20	\$28.33	\$283.87	\$301.86	\$314.38	479,131
GlobalExp	\$290.36	\$312.85	\$325.74	\$34.06	\$30.98	\$32.26	\$324.42	\$343.83	\$358.00	208,491
GlobalRx - Non-Medicare - 10/05 - 6/06	\$198.17	\$212.77	\$221.56	\$23.25	\$21.07	\$21.94	\$221.42	\$233.84	\$243.50	993
GlobalRx - Dual - 10/05 - 12/05	\$198.17	\$212.77	\$221.56	\$23.25	\$21.07	\$21.94	\$221.42	\$233.84	\$243.50	31,647
GlobalRx - Dual - 1/06 - 6/06	\$12.68	\$13.38	\$13.92	\$1.49	\$1.33	\$1.38	\$14.16	\$14.71	\$15.30	62,760
OptionalExp	\$128.48	\$138.24	\$143.95	\$15.07	\$13.69	\$14.25	\$143.55	\$151.93	\$158.21	15,983
Total - All MEG's	\$424.17	\$458.14	\$476.74	\$49.76	\$45.37	\$47.21	\$473.94	\$503.51	\$523.95	1,132,757
	-7.4%	0.0%	4.1%	9.7%	0.0%	4.1%	-5.9%	0.0%	4.1%	
Total \$										
ABD - Non-Medicare - Adult	\$103,365,306	\$112,213,378	\$116,856,158	\$12,126,656	\$11,111,579	\$11,571,315	\$115,491,962	\$123,324,956	\$128,427,473	
ABD - Non-Medicare - Child	\$49,004,967	\$52,884,713	\$55,056,431	\$5,749,186	\$5,236,743	\$5,451,791	\$54,754,154	\$58,121,456	\$60,508,222	
ABD - Dual - 10/05 - 12/05	\$40,324,548	\$43,416,004	\$45,049,323	\$4,730,813	\$4,299,134	\$4,460,868	\$45,055,361	\$47,715,138	\$49,510,192	
ABD - Dual - 1/06 - 6/06	\$63,323,104	\$68,304,134	\$70,898,433	\$7,428,967	\$6,763,603	\$7,020,495	\$70,752,071	\$75,067,737	\$77,918,928	
ANFC - Non-Medicare - Adult	\$32,883,903	\$35,326,965	\$36,791,552	\$3,857,888	\$3,498,142	\$3,643,168	\$36,741,791	\$38,825,107	\$40,434,720	
ANFC - Non-Medicare - Child	\$121,730,238	\$131,597,437	\$137,057,897	\$14,281,201	\$13,031,024	\$13,571,729	\$136,011,439	\$144,628,461	\$150,629,626	
GlobalExp	\$60,536,590	\$65,226,357	\$67,914,360	\$7,102,058	\$6,458,836	\$6,725,007	\$67,638,648	\$71,685,192	\$74,639,367	
GlobalRx - Non-Medicare - 10/05 - 6/06	\$196,807	\$211,305	\$220,031	\$23,089	\$20,924	\$21,788	\$219,896	\$232,229	\$241,819	
GlobalRx - 10/05 - 12/05	\$6,271,581	\$6,733,586	\$7,011,652	\$735,772	\$666,772	\$694,307	\$7,007,353	\$7,400,358	\$7,705,959	
GlobalRx - 1/06 - 6/06	\$795,551	\$839,896	\$873,754	\$93,333	\$83,168	\$86,521	\$888,884	\$923,064	\$960,275	
OptionalExp	\$2,053,439	\$2,209,550	\$2,300,813	\$240,906	\$218,794	\$227,831	\$2,294,346	\$2,428,344	\$2,528,644	
Total - All MEG's	\$480,486,035	\$518,963,325	\$540,030,404	\$56,369,870	\$51,388,719	\$53,474,821	\$536,855,905	\$570,352,045	\$593,505,225	

MEG	Rate Period Medical Cost			Admin/Contingency Margin			Total Rate			Member Months
	Low	Best	High	Low	Best	High	Low	Best	High	
Admin/Contingency Margin %				10.5%	9.01%	9.01%				
PMPM										
ABD - Non-Medicare - Adult	\$1,002.19	\$1,106.45	\$1,171.58	\$117.58	\$109.56	\$116.01	\$1,119.77	\$1,216.02	\$1,287.59	148,859
ABD - Non-Medicare - Child	\$1,617.06	\$1,773.51	\$1,876.99	\$189.71	\$175.62	\$185.86	\$1,806.77	\$1,949.13	\$2,062.86	44,415
ABD - Dual	\$878.44	\$962.24	\$1,014.24	\$103.06	\$95.28	\$100.43	\$981.50	\$1,057.52	\$1,114.67	154,379
ANFC - Non-Medicare - Adult	\$443.99	\$485.28	\$513.89	\$52.09	\$48.05	\$50.89	\$496.08	\$533.33	\$564.77	104,423
ANFC - Non-Medicare - Child	\$268.13	\$294.86	\$312.26	\$31.46	\$29.20	\$30.92	\$299.59	\$324.05	\$343.18	638,961
GlobalExp	\$310.29	\$340.11	\$360.03	\$36.40	\$33.68	\$35.65	\$346.69	\$373.79	\$395.69	276,574
GlobalRx	\$7.35	\$7.79	\$8.25	\$0.86	\$0.77	\$0.82	\$8.21	\$8.57	\$9.07	124,682
OptionalExp	\$136.80	\$149.70	\$158.48	\$16.05	\$14.82	\$15.69	\$152.85	\$164.52	\$174.18	23,109
Total - All MEG's	\$438.30	\$481.45	\$509.30	\$51.42	\$47.67	\$50.43	\$489.72	\$529.13	\$559.73	1,515,402
	-9.0%	0.0%	5.8%	7.9%	0.0%	5.8%	-7.4%	0.0%	5.8%	
Total \$										
ABD - Non-Medicare - Adult	\$149,185,270	\$164,705,905	\$174,400,864	\$17,502,182	\$16,309,487	\$17,269,500	\$166,687,452	\$181,015,392	\$191,670,363	
ABD - Non-Medicare - Child	\$71,821,632	\$78,770,292	\$83,366,424	\$8,426,001	\$7,799,982	\$8,255,099	\$80,247,633	\$86,570,273	\$91,621,524	
ABD - Dual	\$135,613,316	\$148,549,219	\$156,577,146	\$15,909,942	\$14,709,622	\$15,504,562	\$151,523,258	\$163,258,841	\$172,081,708	
ANFC - Non-Medicare - Adult	\$46,362,689	\$50,673,906	\$53,661,469	\$5,439,198	\$5,017,825	\$5,313,659	\$51,801,887	\$55,691,731	\$58,975,128	
ANFC - Non-Medicare - Child	\$171,325,308	\$188,401,589	\$199,520,651	\$20,099,617	\$18,655,878	\$19,756,908	\$191,424,926	\$207,057,467	\$219,277,559	
GlobalExp	\$85,817,067	\$94,064,799	\$99,576,105	\$10,067,924	\$9,314,472	\$9,860,212	\$95,884,992	\$103,379,272	\$109,436,317	
GlobalRx	\$916,665	\$971,751	\$1,029,224	\$107,542	\$96,225	\$101,916	\$1,024,207	\$1,067,976	\$1,131,140	
OptionalExp	\$3,161,441	\$3,459,325	\$3,662,443	\$370,895	\$342,549	\$362,662	\$3,532,337	\$3,801,874	\$4,025,105	
Total - All MEG's	\$664,203,388	\$729,596,787	\$771,794,325	\$77,923,303	\$72,246,039	\$76,424,518	\$742,126,691	\$801,842,826	\$848,218,843	

Vermont Medicaid
Development of Rates for 10/2005 to 9/2006

DRAFT - Work In Progress

MEG	Projected Member Months			Total Rate - LOW END OF RANGE				Total Rate - BEST ESTIMATE				Total Rate - HIGH END OF RANGE			
	10/05-12/05	1/06-6/06	7/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06
PMPM				Rates		Rates		Rates		Rates		Rates		Rates	
ABD - Non-Medicare - Adult	36,244	73,135	36,891	\$1,055.89	\$1,055.89	\$1,119.77	\$1,077.31	\$1,127.50	\$1,127.50	\$1,216.02	\$1,157.18	\$1,174.15	\$1,174.15	\$1,287.59	\$1,212.19
ABD - Non-Medicare - Child	10,814	21,821	11,007	\$1,677.77	\$1,677.77	\$1,806.77	\$1,721.02	\$1,780.95	\$1,780.95	\$1,949.13	\$1,837.34	\$1,854.08	\$1,854.08	\$2,062.86	\$1,924.08
ABD - Dual	37,588	75,847	38,259	\$1,198.67	\$932.83	\$981.50	\$949.15	\$1,269.44	\$989.73	\$1,057.52	\$1,012.46	\$1,317.19	\$1,027.32	\$1,114.67	\$1,056.61
ANFC - Non-Medicare - Adult	26,099	52,204	26,104	\$469.23	\$469.23	\$496.08	\$478.18	\$495.84	\$495.84	\$533.33	\$508.33	\$516.39	\$516.39	\$564.77	\$532.52
ANFC - Non-Medicare - Child	159,698	319,433	159,727	\$283.87	\$283.87	\$299.59	\$289.11	\$301.86	\$301.86	\$324.05	\$309.26	\$314.38	\$314.38	\$343.18	\$323.98
GlobalExp	69,598	138,893	69,295	\$324.42	\$324.42	\$346.69	\$331.83	\$343.83	\$343.83	\$373.79	\$353.80	\$358.00	\$358.00	\$395.69	\$370.54
GlobalRx - Non-Medicare	333	660	327	\$221.42	\$221.42	\$8.21	\$150.78	\$233.84	\$233.84	\$8.57	\$159.20	\$243.50	\$243.50	\$9.07	\$165.83
GlobalRx - Dual	31,647	62,760	31,113	\$221.42	\$14.16	\$8.21	\$12.19	\$233.84	\$14.71	\$8.57	\$12.67	\$243.50	\$15.30	\$9.07	\$13.24
OptionalExp	5,137	10,845	5,547	\$143.55	\$143.55	\$152.85	\$146.70	\$151.93	\$151.93	\$164.52	\$156.19	\$158.21	\$158.21	\$174.18	\$163.61
Total - All MEG's	377,158	755,598	378,270	\$502.30	\$459.78	\$488.22	\$469.27	\$533.40	\$488.59	\$527.50	\$501.57	\$554.98	\$508.46	\$558.02	\$524.99
Total \$															
ABD - Non-Medicare - Adult				\$38,269,698	\$77,222,558	\$41,309,258	\$118,531,816	\$40,865,258	\$82,460,012	\$44,860,074	\$127,320,086	\$42,556,041	\$85,871,760	\$47,500,639	\$133,372,398
ABD - Non-Medicare - Child				\$18,143,368	\$36,610,546	\$19,887,151	\$56,497,697	\$19,259,160	\$38,862,042	\$21,454,042	\$60,316,085	\$20,050,040	\$40,457,917	\$22,705,855	\$63,163,772
ABD - Dual				\$45,055,731	\$70,752,312	\$37,551,294	\$108,303,605	\$47,715,530	\$75,067,992	\$40,459,668	\$115,527,660	\$49,510,599	\$77,919,193	\$42,646,197	\$120,565,390
ANFC - Non-Medicare - Adult				\$12,246,410	\$24,495,635	\$12,949,623	\$37,445,258	\$12,940,800	\$25,884,575	\$13,922,020	\$39,806,595	\$13,477,301	\$26,957,699	\$14,742,815	\$41,700,515
ANFC - Non-Medicare - Child				\$45,333,640	\$90,677,783	\$47,852,251	\$138,530,033	\$48,205,758	\$96,422,685	\$51,760,061	\$148,182,746	\$50,205,992	\$100,423,616	\$54,814,830	\$155,238,446
GlobalExp				\$22,578,956	\$45,059,613	\$24,023,786	\$69,083,399	\$23,929,763	\$47,755,345	\$25,901,463	\$73,656,808	\$24,915,917	\$49,723,362	\$27,419,043	\$77,142,404
GlobalRx - Non-Medicare				\$73,733	\$146,138	\$2,686	\$148,824	\$77,868	\$154,334	\$2,801	\$157,135	\$81,084	\$160,707	\$2,967	\$163,674
GlobalRx - Dual				\$7,007,307	\$888,881	\$255,580	\$1,144,461	\$7,400,310	\$923,061	\$266,502	\$1,189,564	\$7,705,909	\$960,271	\$282,264	\$1,242,536
OptionalExp				\$737,416	\$1,556,799	\$847,884	\$2,404,683	\$780,484	\$1,647,722	\$912,583	\$2,560,304	\$812,721	\$1,715,779	\$966,166	\$2,681,945
Total - All MEG's				\$189,446,260	\$347,410,264	\$184,679,513	\$532,089,777	\$201,174,932	\$369,177,769	\$199,539,214	\$568,716,983	\$209,315,603	\$384,190,304	\$211,080,775	\$595,271,079
FFY 2006 Total (10/05-9/06)							\$721,536,037				\$769,891,915				\$804,586,682
							3/4 yr \$541,152,028				3/4 yr \$577,418,937				3/4 yr \$603,440,012

Vermont Medicaid
Development of Rates for 10/2006 to 9/2007

DRAFT - Work In Progress

MEG	Projected Member Months		Total Rate - LOW END OF RANGE			Total Rate - BEST ESTIMATE			Total Rate - HIGH END OF RANGE		
	10/06-6/07	7/07-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07
				Rates			Rates			Rates	
PMPM											
ABD - Non-Medicare - Adult	111,968	37,755	\$1,119.77	\$1,197.12	\$1,139.27	\$1,216.02	\$1,325.29	\$1,243.57	\$1,287.59	\$1,430.27	\$1,323.57
ABD - Non-Medicare - Child	33,408	11,265	\$1,806.77	\$1,965.06	\$1,846.69	\$1,949.13	\$2,159.56	\$2,002.19	\$2,062.86	\$2,329.01	\$2,129.97
ABD - Dual	116,120	39,155	\$981.50	\$1,040.51	\$996.38	\$1,057.52	\$1,140.94	\$1,078.56	\$1,114.67	\$1,223.83	\$1,142.20
ANFC - Non-Medicare - Adult	78,319	26,109	\$496.08	\$528.39	\$504.16	\$533.33	\$579.35	\$544.83	\$564.77	\$625.31	\$579.91
ANFC - Non-Medicare - Child	479,234	159,762	\$299.59	\$318.52	\$304.32	\$324.05	\$351.31	\$330.87	\$343.18	\$379.20	\$352.19
GlobalExp	207,279	68,891	\$346.69	\$373.83	\$353.46	\$373.79	\$411.00	\$383.07	\$395.69	\$443.40	\$407.59
GlobalRx - Non-Medicare	971	320	\$8.21	\$8.70	\$8.33	\$8.57	\$9.25	\$8.73	\$9.07	\$9.98	\$9.30
GlobalRx - Dual	92,271	30,401	\$8.21	\$8.70	\$8.33	\$8.57	\$9.25	\$8.73	\$9.07	\$9.98	\$9.30
OptionalExp	17,562	6,125	\$152.85	\$164.16	\$155.78	\$164.52	\$180.10	\$168.55	\$174.18	\$194.33	\$179.39
Total - All MEG's	1,137,132	379,783	\$490.22	\$526.05	\$499.19	\$529.67	\$579.25	\$542.08	\$560.30	\$624.32	\$576.33
Total \$											
ABD - Non-Medicare - Adult			\$125,377,869	\$45,197,413	\$170,575,282	\$136,154,964	\$50,036,277	\$186,191,241	\$144,169,351	\$53,999,832	\$198,169,183
ABD - Non-Medicare - Child			\$60,360,675	\$22,136,408	\$82,497,083	\$65,116,439	\$24,327,478	\$89,443,917	\$68,915,889	\$26,236,331	\$95,152,221
ABD - Dual			\$113,972,039	\$40,741,258	\$154,713,297	\$122,799,253	\$44,673,522	\$167,472,775	\$129,435,595	\$47,918,922	\$177,354,517
ANFC - Non-Medicare - Adult			\$38,852,340	\$13,795,728	\$52,648,068	\$41,769,793	\$15,126,209	\$56,896,002	\$44,232,399	\$16,326,091	\$60,558,490
ANFC - Non-Medicare - Child			\$143,572,630	\$50,886,743	\$194,459,373	\$155,297,357	\$56,125,357	\$211,422,714	\$164,462,678	\$60,582,478	\$225,045,156
GlobalExp			\$71,861,266	\$25,753,402	\$97,614,668	\$77,477,874	\$28,314,359	\$105,792,233	\$82,017,343	\$30,546,072	\$112,563,414
GlobalRx - Non-Medicare			\$7,976	\$2,784	\$10,760	\$8,317	\$2,960	\$11,277	\$8,809	\$3,195	\$12,004
GlobalRx - Dual			\$757,967	\$264,481	\$1,022,448	\$790,359	\$281,163	\$1,071,522	\$837,103	\$303,542	\$1,140,646
OptionalExp			\$2,684,432	\$1,005,456	\$3,689,889	\$2,889,270	\$1,103,127	\$3,992,397	\$3,058,916	\$1,190,254	\$4,249,171
Total - All MEG's			\$557,447,195	\$199,783,674	\$757,230,868	\$602,303,627	\$219,990,450	\$822,294,077	\$637,138,083	\$237,106,719	\$874,244,802

High

Low
Best
High

Scenario: Non-Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%		5.3%
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%		
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%	4.5%	-21.0%
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%	4.5%	
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%		
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%		
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Scenario: Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.6%			

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.1%			

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	10.0%			

Scenario: Non-Medicare - Low

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	1.0%	2.0%		5.3%
2. NH	2.0%	3.0%		
3. Outpatient	3.2%	6.0%		
4. Physician & Other	0.3%	3.0%		
5. Home Health	11.9%	9.0%		
6. Nursing	2.0%	3.0%		
7. Dental	2.0%	3.0%		
8. Transportation	1.8%	3.0%		
9. DME/Supplies	6.6%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	0.0%	2.0%		
12. OADAP	18.9%	9.0%		
13. Ambulance	6.4%	3.0%		
14. Prescribed Drugs	1.4%	6.0%		
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	5.8%	3.0%		
17. HCBS - Aged/Disabled	-1.0%	-1.0%		
18. HCBS - MH/MR	2.0%	3.0%		
19. HCBS TBI	1.0%	3.0%		
20. Buy-In				

FY06				
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	1.0%	2.0%	0.0%	-19.1%
	2.0%	3.0%	8.4%	0.8%
	3.2%	6.0%	-0.7%	1.0%
	0.3%	3.0%	-3.2%	0.7%
	11.9%	9.0%	-0.4%	-0.8%
	2.0%	3.0%	-3.2%	0.7%
	2.0%	3.0%		
	1.8%	3.0%	-5.2%	0.7%
	6.6%	4.0%	-3.2%	0.7%
	1.0%	3.0%		
	0.0%	2.0%	-3.2%	0.7%
	18.9%	9.0%	-5.7%	-0.1%
	6.4%	3.0%	-3.2%	0.7%
	1.4%	6.0%	-2.3%	-0.8%
	1.0%	3.0%	-7.1%	0.4%
	5.8%	3.0%	-5.7%	-0.1%
	-1.0%	-1.0%		
	2.0%	3.0%	-5.7%	-0.1%
	1.0%	3.0%		

FY07				
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	1.0%	2.0%		
	2.0%	3.0%		
	3.2%	6.0%		
	0.3%	3.0%		
	11.9%	9.0%		
	2.0%	3.0%		
	2.0%	3.0%		
	1.8%	3.0%		
	6.6%	4.0%		
	1.0%	3.0%		
	0.0%	2.0%		
	18.9%	9.0%		
	6.4%	3.0%		
	1.4%	6.0%		
	1.0%	3.0%		
	5.8%	3.0%		
	-1.0%	-1.0%		
	2.0%	3.0%		
	1.0%	3.0%		

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	3.0%		5.3%
2. NH	3.0%	4.0%		
3. Outpatient	4.2%	7.0%		
4. Physician & Other	1.3%	4.0%		
5. Home Health	12.9%	10.0%		
6. Nursing	3.0%	4.0%		
7. Dental	3.0%	4.0%		
8. Transportation	2.8%	4.0%		
9. DME/Supplies	7.6%	5.0%		
10. Enhanced Residential Care	2.0%	4.0%		
11. D&P	1.0%	3.0%		
12. OADAP	19.9%	10.0%		
13. Ambulance	7.4%	4.0%		
14. Prescribed Drugs	2.4%	7.0%		
15. Behavioral Health - IP	2.0%	4.0%		
16. Behavioral Health - OP/Phy	6.8%	4.0%		
17. HCBS - Aged/Disabled	0.0%	0.0%		
18. HCBS - MH/MR	3.0%	4.0%		
19. HCBS TBI	2.0%	4.0%		
20. Buy-In				

FY06				
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	2.0%	3.0%	4.5%	-21.0%
	3.0%	4.0%		
	4.2%	7.0%	4.5%	
	1.3%	4.0%		
	12.9%	10.0%		
	3.0%	4.0%		
	3.0%	4.0%		
	2.8%	4.0%		
	7.6%	5.0%		
	2.0%	4.0%		
	1.0%	3.0%		
	19.9%	10.0%		
	7.4%	4.0%		
	2.4%	7.0%		
	2.0%	4.0%		
	6.8%	4.0%		
	0.0%	0.0%		
	3.0%	4.0%		
	2.0%	4.0%		

FY07				
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	2.0%	3.0%		
	3.0%	4.0%		
	4.2%	7.0%		
	1.3%	4.0%		
	12.9%	10.0%		
	3.0%	4.0%		
	3.0%	4.0%		
	2.8%	4.0%		
	7.6%	5.0%		
	2.0%	4.0%		
	1.0%	3.0%		
	19.9%	10.0%		
	7.4%	4.0%		
	2.4%	7.0%		
	2.0%	4.0%		
	6.8%	4.0%		
	0.0%	0.0%		
	3.0%	4.0%		
	2.0%	4.0%		

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%		5.3%
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%		
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%	4.5%	-21.0%
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%	4.5%	
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%		
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%		
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Scenario: Medicare - Low

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	0.0%	2.0%		
2. NH	7.4%	3.0%		
3. Outpatient	-1.0%	1.2%		
4. Physician & Other	4.0%	3.0%		
5. Home Health	-3.4%	2.0%		
6. Nursing	0.5%	2.0%		
7. Dental	2.0%	3.0%		
8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%		
12. OADAP	18.3%	9.0%		
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%		
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%		
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%		
19. HCBS TBI	1.0%	3.0%		
20. Buy-In	15.6%			

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	0.0%	2.0%		
2. NH	7.4%	3.0%		
3. Outpatient	-1.0%	1.2%		
4. Physician & Other	4.0%	3.0%		
5. Home Health	-3.4%	2.0%		
6. Nursing	0.5%	2.0%		
7. Dental	2.0%	3.0%		
8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%	-3.2%	0.7%
12. OADAP	18.3%	9.0%	-5.7%	-0.1%
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%	-2.3%	-0.8%
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%	-5.7%	-0.1%
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%	-5.7%	-0.1%
19. HCBS TBI	1.0%	3.0%		
20. Buy-In	15.1%			

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	0.0%	2.0%		
2. NH	7.4%	3.0%		
3. Outpatient	-1.0%	1.2%		
4. Physician & Other	4.0%	3.0%		
5. Home Health	-3.4%	2.0%		
6. Nursing	0.5%	2.0%		
7. Dental	2.0%	3.0%		
8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%		
12. OADAP	18.3%	9.0%		
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%		
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%		
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%		
19. HCBS TBI	1.0%	3.0%		
20. Buy-In	10.0%			

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	1.0%	3.0%		
2. NH	8.4%	4.0%		
3. Outpatient	0.0%	2.2%		
4. Physician & Other	5.0%	4.0%		
5. Home Health	-2.4%	3.0%		
6. Nursing	1.5%	3.0%		
7. Dental	3.0%	4.0%		
8. Transportation	-1.0%	4.0%		
9. DME/Supplies	10.0%	5.0%		
10. Enhanced Residential Care	2.0%	4.0%		
11. D&P	3.0%	3.0%		
12. OADAP	19.3%	10.0%		
13. Ambulance	3.0%	4.0%		
14. Prescribed Drugs	2.2%	7.0%		
15. Behavioral Health - IP	2.0%	4.0%		
16. Behavioral Health - OP/Phy	5.5%	4.0%		
17. HCBS - Aged/Disabled	0.0%	3.0%		
18. HCBS - MH/MR	3.0%	4.0%		
19. HCBS TBI	2.0%	4.0%		
20. Buy-In	15.6%			

FY06			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
1.0%	3.0%		
8.4%	4.0%		
0.0%	2.2%		
5.0%	4.0%		
-2.4%	3.0%		
1.5%	3.0%		
3.0%	4.0%		
-1.0%	4.0%		
10.0%	5.0%		
2.0%	4.0%		
3.0%	3.0%		
19.3%	10.0%		
3.0%	4.0%		
2.2%	7.0%		
2.0%	4.0%		
5.5%	4.0%		
0.0%	3.0%		
3.0%	4.0%		
2.0%	4.0%		
15.1%			

FY07			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
1.0%	3.0%		
8.4%	4.0%		
0.0%	2.2%		
5.0%	4.0%		
-2.4%	3.0%		
1.5%	3.0%		
3.0%	4.0%		
-1.0%	4.0%		
10.0%	5.0%		
2.0%	4.0%		
3.0%	3.0%		
19.3%	10.0%		
3.0%	4.0%		
2.2%	7.0%		
2.0%	4.0%		
5.5%	4.0%		
0.0%	3.0%		
3.0%	4.0%		
2.0%	4.0%		
10.0%			

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.6%			

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.1%			

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	10.0%			



CHARLES P. SMITH, SECRETARY

STATE OF VERMONT

AGENCY OF ADMINISTRATION

MEMORANDUM

TO: Joint Fiscal Committee

FROM: Charles P. Smith, Secretary of Administration *Charles P. Smith /hj*

DATE: December 5, 2005

RE: Approval for Environmental Contingency Fund (ECF) expenditures

Pursuant to 10 VSA Sec. 1283(b), the Secretary of the Agency of Natural Resources must receive Joint Fiscal Committee approval for Environmental Contingency Fund (ECF) disbursements on a site to exceed \$100,000 under each of the subdivisions under subsection (b).

The attached request for Joint Fiscal Committee approval relates to expenditures for investigation and remediation of contamination at the 9 Depot Square site in Barre, which had at one time been a drycleaning facility. The Agency of Natural Resources has used ECF funds since 2000 to address these contamination problems, and is now facing cumulative expenditures over \$100,000 in two of the expenditure categories under 10 VSA Sec 1283(b). Further details are provided on the attached request from the Agency.

The balance in the ECF will not drop below \$100,000, and the Fund is projected to have a \$481,000 balance at the end of FY 2006. The Administration is reviewing the long-range condition of the ECF in the course of developing the FY 2007 Executive Budget.

There is some urgency to this request. Litigation is pending and additional investigation is required to support the State's case, and the remedial treatment system requires on-going maintenance.

I have been assured that the Agency has improved its procedures for monitoring expenditures from the Fund so that retroactive requests will not arise in the future.

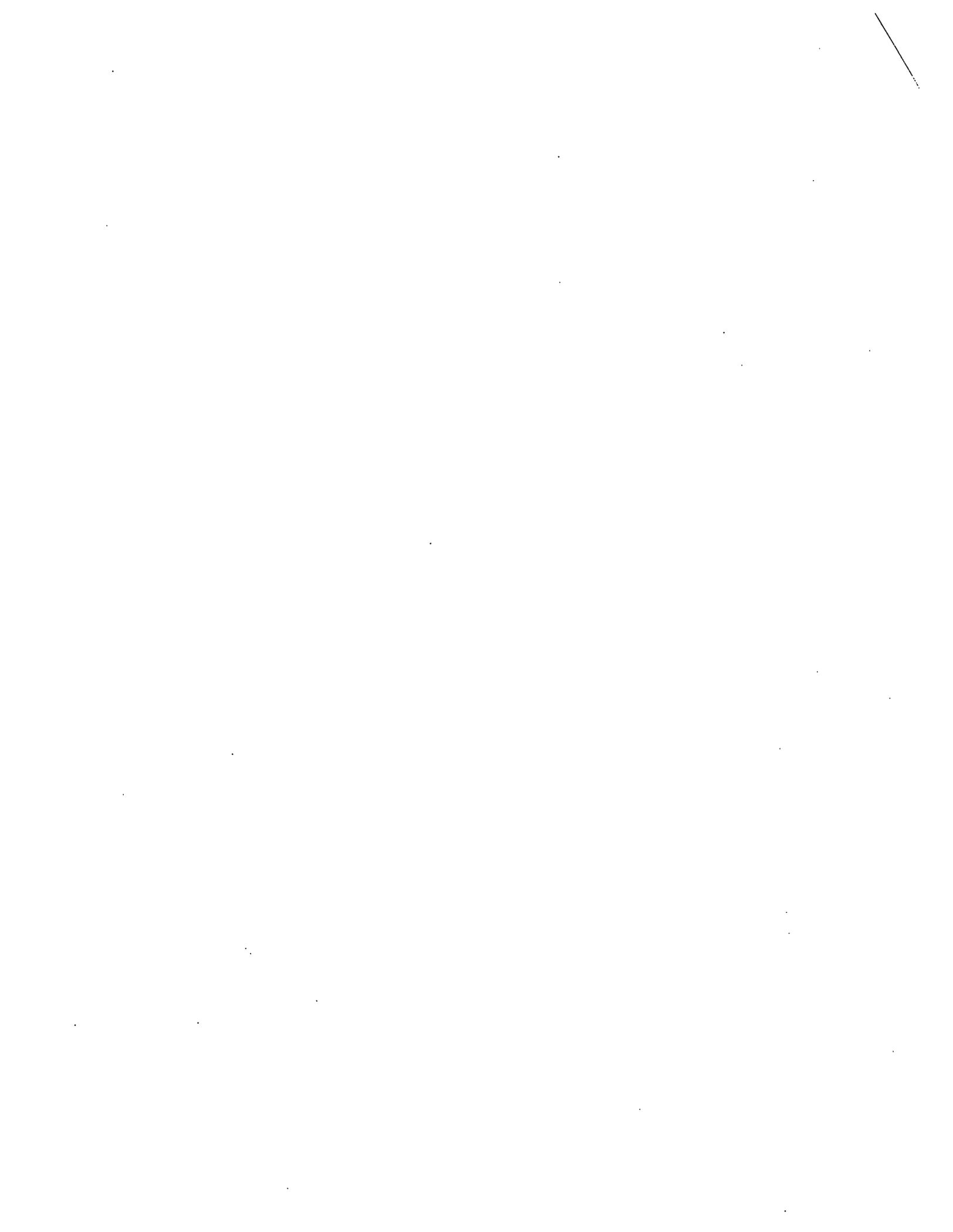
A draft motion is attached. Thank you for your consideration.

Attachment



PROPOSED MOTION

Pursuant to 10 VSA Sec. 1283(b), The Joint Fiscal Committee approves Environmental Contingency Fund expenditures of \$50,335 in excess of \$100,000 under subdivision (b)(2), and \$20,000 in excess of \$100,000 under subdivision (b)(4), for investigation and remediation at the contaminated 9 Depot Square site in Barre, Vermont.



**Agency of Natural Resources
Department of Environmental Conservation**

**Waste Management Division
West Building
802-241-3888**

MEMORANDUM

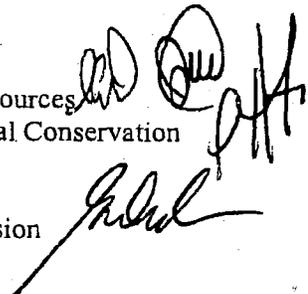
To: Charles P. Smith, Secretary, Agency of Administration

Through: Canute Dalmasse, Deputy Secretary, Agency of Natural Resources
 Jeff Wennberg, Commissioner, Department of Environmental Conservation
 P. Howard Flanders, Director, Waste Management Division

From: George Desch, Program Manager, Waste Management Division

Date: December 5, 2005

Subject: Expenditures from the Environmental Contingency Fund for the 9 Depot Square site in Barre (Site #99-2631)



The Agency of Natural Resources (Agency) requests to appear before the Joint Fiscal Committee of the General Assembly to discuss expenditures from the Environmental Contingency Fund (ECF) on the 9 Depot Square site in Barre. In this appearance the Agency requests:

- (1) Retroactive approval for the expenditure of \$10,334.71 in excess of the cap established under 10 V.S.A. § 1283(b); and
- (2) Approval of an additional \$40,000.00 to be spent under subdivision (b)(2) (investigations) and \$20,000.00 to be spent under subdivision (b)(3) (remedial actions). The details of this request are more fully explained below.

Site Background

The Agency determined that the site was contaminated in 1999 as a result of an assessment conducted at the neighboring property. Contaminants typically associated with drycleaning activities were detected in a sample taken from a sump in the basement as a part of that assessment. The source of the contamination was traced to the neighboring 9 Depot Square building, which had been a drycleaning facility from approximately 1947 to 1992. The 9 Depot Square building is currently a pizza restaurant. The Agency initially requested the current owner to conduct an investigation of the site to determine the extent of contamination. The current owner declined to voluntarily initiate this site investigation work. In 2000 the Agency began to investigate the extent of contamination at the site using ECF funds. Significant levels of dry cleaning compounds such as perchloroethylene (PCE) in groundwater, soil, and indoor air were found in the course of this investigation. The Agency requested the EPA to use federal funds to remove the sources of contamination.

Potentially responsible parties have been identified at this site, and the Attorney General's Office is currently assisting the Agency in having future work performed by these parties and to recover ECF funds spent at this site.



Request for Joint Fiscal Committee Approval.

The funds spent at this site have been allocated to the following categories, as indicated in 10 V.S.A. § 1283, as follows:

- **10 V.S.A. § 1283(b)(2). *Investigation of an actual or threatened release to the environment:***

The Agency has currently spent \$110,334.71 to investigate the releases from this site. These funds were used to examine the contamination's impacts on indoor air at the restaurant, determine the contaminant impacts on groundwater, the contaminant impact on the nearby Stevens Branch, and the contaminant impact on subsurface soils. The results of this investigation show a property that is significantly contaminated.

Investigation of source contaminants that took place in October 2005, and invoiced in November 2005, caused the Agency to exceed the statutory cap of \$100,000.00. This overrun was an oversight on the part of the Agency and procedures have been put in place to ensure that such oversights do not occur in the future.

The Agency is requesting Joint Fiscal Committee approval for the \$10,334.71 over the cap and approval to expend an additional \$40,000.00 for additional investigatory work at the site. These funds will be used to continue contaminant monitoring at the site, and further delineate the contaminant plume.

- **10 V.S.A. § 1283(b)(4). *Take appropriate remedial action to prevent or minimize the immediate impact of such release to the public health or the environment:***

The Agency has currently spent \$86,091.54 to remediate the impacts that have resulted from contamination at the site. The indoor air quality at the site has been impacted by the contamination at the site. The Agency has installed an indoor air treatment system to reduce contaminant levels in this structure.

The Agency is requesting Joint Fiscal Committee approval to spend \$20,000.00 in ECF funds in excess of the \$100,000.00 cap to maintain the indoor air treatment system (e.g. replacement of filters and disposal of wastes) and monitor indoor air quality.

- **10 V.S.A. § 1283(b)(3). *To take appropriate removal action:***

The Agency has currently spent \$60,452.70 under this subdivision. At this time, the Agency does not request an approval to increase the allowable \$100,000.00 under this subdivision. The Agency has installed a soil vapor extraction system to treat soil vapor underneath the building in an effort to prevent these vapors from entering the building.



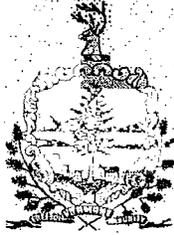
12/13/05 Fiscal Committee Motion

Joint Fiscal Committee finds that the two remaining conditions of the September 30th motion of contingent approval of the Global Commitment to Health Demonstration Waiver Program have been met:

Condition:

- (1) Final premium amounts determined to be sufficient
- (2) Agreement regarding future years' premiums

The Committee also approves the letter of acceptance.



STATE OF VERMONT
LEGISLATIVE COUNCIL

MEMORANDUM

To: Representative Martha Heath
Chair, Joint Fiscal Committee

From: William P. Russell, Chief Legislative Counsel

Date: November 29, 2005

Subject: Duration of JFC's Authority to Approve the Global Commitment

Question

Is the authority of the Joint Fiscal Committee to approve the Global Commitment to Health Demonstration Waiver Program divested if it meets in order to ascertain the fulfillment of conditions to its approval within 30 days of the legislative session?

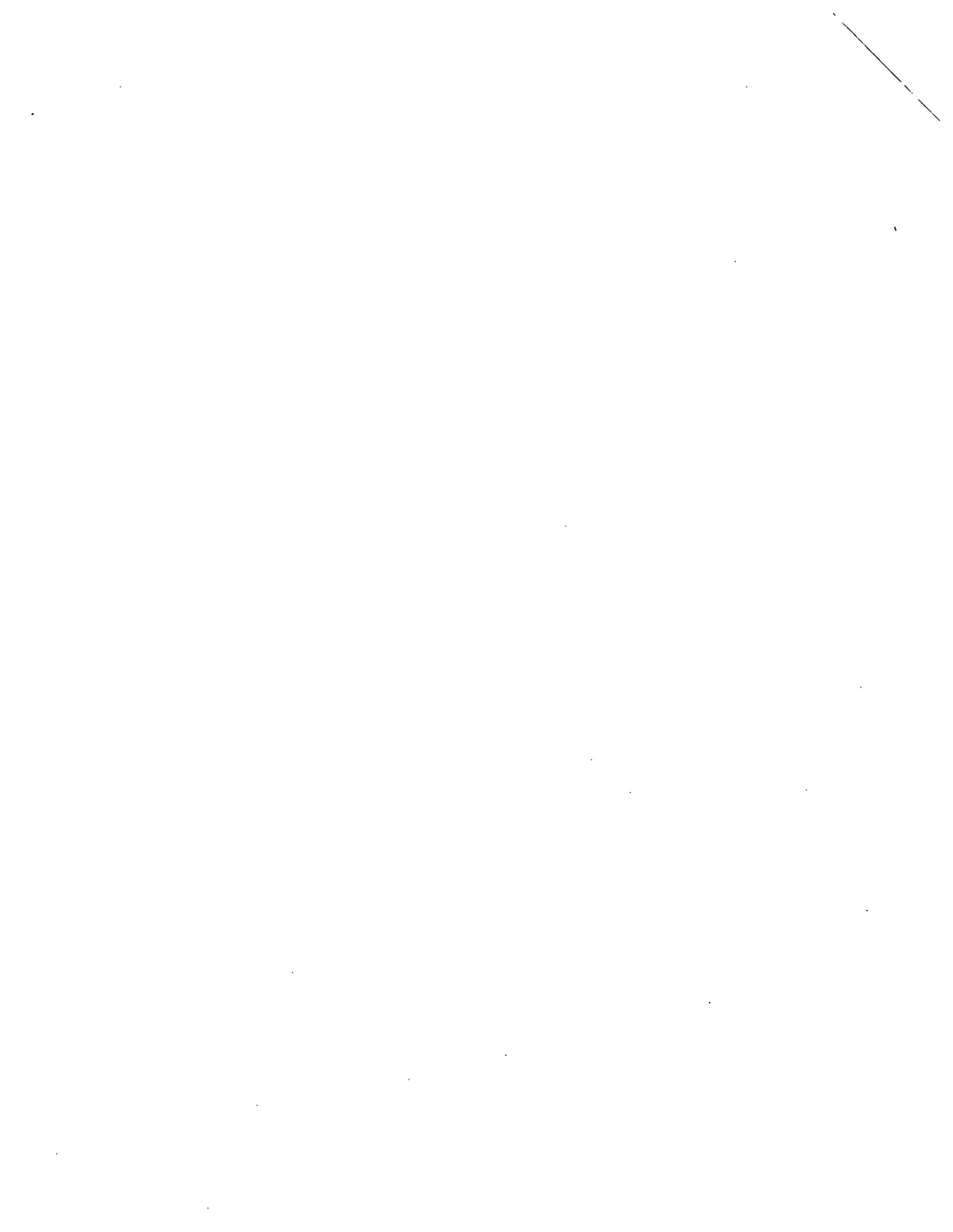
Answer

The FY 2006 General Appropriations Act granted to the Joint Fiscal Committee the authority to approve the "Global Commitment to Health" with this language:

Any agreement, waiver ...or commitment..., such as global funding commitments..., is conditional upon approval by act of the general assembly, or, if the general assembly is not in session and the speaker and the president pro tempore determine that it will not reconvene within the next 30-day period, by a majority vote of the joint fiscal committee upon recommendation of the health access oversight committee." [Section 250(c)]

On September 30, 2005 the Joint Fiscal Committee unanimously granted contingent approval of the Global Commitment program. Notably, in its motion of approval the JFC explicitly allowed for the agreement to be implemented beginning October 1, 2005.

The committee's approval was contingent on five conditions. Those conditions were established to provide the committee with information, not available on September 30, on several key provisions of the agreement. The information was to be provided to the



committee at a future date (since extended) to provide assurance that significant features and details of the agreement were in accord with all representations made to the committee which formed the basis of the committee's approval.

In my opinion, September 30, 2005 is the operative date for the purposes of determining the Joint Fiscal Committee's authority to act. Its actions at meetings since September 30 (including those proposed for meetings in December) have been (or will be) for the purpose of ascertaining whether the conditions upon which the committee granted its approval have been met. Their purpose is more in the nature of oversight, and not for the purpose of revising or amending the approval previously granted on September 30.

Failure to meet the conditions, or any changes made to the conditions, or the addition of new conditions, may void the approval granted on September 30. In this case, and at this date, authority to approve a revised agreement would revert to the General Assembly under the provisions of Section 250(c) of the Appropriations Act.



Joint Fiscal Office

1 Baldwin Street • Montpelier, VT 05633-5701 • 802) 828-2295 • Fax: 802) 828-2483

MEMORANDUM

To: Representative Martha Heath, Chair; Senator Susan Bartlett, Vice Chair;
and Members of the Joint Fiscal Committee

From: Stephen A. Klein, Fiscal Officer

Date: December 6, 2005

Subject: Fiscal Committee Meeting, 11 AM on the 13th of December

As you are aware the final review of the conditions for the Global Commitment waiver was postponed until December 13th at 11 AM. The Committee will meet in Room 11 in order that we can provide lunch. For House Appropriation Committee members this meeting is sandwiched in between a full day of meetings. The meeting is to make a final determination on the remaining conditions on the Global Commitment approval. We have also been asked to approve an Environmental Contingency Fund Allocation at that time.

The postponement of the Global Commitment condition review was due to a delay in getting sufficient materials to develop an understanding of the premium range. The initial submission by the actuary required revisions as the Actuary, OVHA and the Fiscal Office have had to work through the technical elements of Vermont's programs and the uniqueness of this waiver proposal. At this point we still do not have a final actuarial determination. Subsequent changes are expected to result in little or positive change to the maximum allowable premium. We expect further information to be available prior to the meeting with the final actuarial premium resolution to occur subsequent to Fiscal Committee action. As indicated above, the levels in the enclosed materials represent what we see as a floor to the premium level. We are providing in this mailing the following:

- A brief agenda for the meeting
- A general description of the rate setting methodology
- A memorandum on the most recent actuarial estimate and what it means for Vermont's proposal
- Premium related back up materials
 - Bill Russell's Memorandum on the Committee Jurisdiction
 - The September 30th and October 17th 2005 motions
 - Premium data
- The Environmental Contingency Fund Request
- A Memo/update on the LIHEAP fuel assistance situation will be sent separately as it has not yet come in!



STATE OF VERMONT
JOINT FISCAL OFFICE

DRAFT

Fiscal Committee Agenda
Tuesday, December 13, 2005
11 AM, Room 11

11:00 Global Commitment Condition Review

- a) The FY 2006 & FY 2007 premium ranges and the implications for out years
 - Presentation of Actuary Determination - Administration: Consultants, OVHA and AHS
 - Comments by the Fiscal Office
- b) Final review of the letter proposed letter -Administration staff
- c) Committee Discussion, questions and votes

12:45 Consideration of Environmental Contingency Fund Expenditures
Joint Fiscal Committee Responsibility per 10 V.S.A. §1283 (b)
(Administration Request)

Adjournment

--Lunch will be provided --

Global Commitment – Development of the Premium Rate

Prepared by Don Dickey, Vermont Legislative Fiscal Office

Under contract with the Agency of Human Services (AHS), the actuarial firm Milliman developed premium rates for the Global Commitment waiver for State Fiscal Years 2006 and 2007. This document provides a general explanation of the rate development model.

Under Global Commitment, AHS pays a monthly premium to a public managed care organization (MCO) administered by the Office of Vermont Health Access (OVHA). Federal regulations require that premium rates paid to Medicaid MCOs be developed on an actuarially sound basis in accordance with generally accepted actuarial principles and practices, and American Academy of Actuaries guidelines. Accordingly, to calculate the premium rate (or range), Milliman developed a baseline derived from the most recent health care utilization and cost data for Vermont's Medicaid and VHAP populations, and then projected forward to waiver years 2006 and 2007 (beginning October 1) using a combination of historical trend data and actuarial assumptions. The following general steps were performed by the actuary in developing the premium rate:

Summarize the Fee-for-Service Claims and Eligibility Data. The actuary received summarized fee-for-service claims and eligibility data for the beneficiaries (including the VHAP waiver groups) and services to be covered under the managed care plan. Three years of data were made available – for State Fiscal Years 2002, 2003, and 2004. Data for 2002 and 2003 were adjusted to account for benefit and program changes. Categories such as pharmacy rebates, which are not associated with specific eligibility groups, were allocated.

Project the Fee-for-Service Base Data Forward. FY 2004 data were then projected forward to the time period for which the premium rates are to be paid. Based on historical trend data for SFY 2002-2004, trend factors were developed to estimate the future costs of the services that the covered population would generate in the fee-for-service program. The trend factors varied by service and population group – for example, the actuary developed separate trend assumptions for hospital inpatient care for Medicare and non-Medicare enrollment groups. Historical rates were compared with other information to determine final projection rates. Policy changes subsequent to the base data year, such as the FY06 reduction in provider reimbursement, were incorporated into final projections.

11/17/05 Fiscal Committee Motion

Joint Fiscal Committee finds that the following conditions of the September 30th motion of contingent approval of the Global Commitment to Health Demonstration Waiver Program have been met:

Condition:

- (1) Complete demonstration provisions furnished
- (4) MCO Savings Identified
- (5) Attorney General Review

Based upon an Administration request, the Committee hereby postpones until November 30th consideration of two remaining conditions (2) "Final premium amounts determined to be sufficient" and (3) "Agreement regarding future years' premiums." At that meeting the committee will also complete final review of the letter of acceptance, and carry out a final approval vote.

Joint Fiscal Committee

Motion to approve with amendments the recommendation of the Health Access Oversight Committee to grant contingent approval of the Global Commitment to Health Demonstration Waiver Program.

Approved: September 30, 2005, unanimously.

Senator Bartlett, seconded by Representative Westman, moved:

That the recommendation of the Health Access Oversight Committee to the Joint Fiscal Committee to grant contingent approval of the Global Commitment to Health Demonstration Waiver Program is accepted and approved by the Joint Fiscal Committee with amendments, and that as amended, the Joint Fiscal Committee moves:

(a) That the Joint Fiscal Committee, pursuant to its authority under Section 250(c) of Act 71 of 2005, grant contingent approval to the Global Commitment to Health Demonstration Waiver Program negotiated by the Administration and the Centers for Medicare and Medicaid Services (CMS) as delineated in Special Terms and Conditions, Number 11-W-00914/1, dated September 27, 2005, and that pursuant to this contingent grant of approval the Administration may begin implementation of the Demonstration Waiver Program on October 1, 2005 for the five year period, from October 1, 2005 through September 30, 2010.

(b) That the Joint Fiscal Committee's full approval to the Global Commitment to Health Demonstration Waiver Program be granted on or before November 17, 2005, if, on or before that time, the Joint Fiscal Committee finds that the following conditions have been met:

(1) *Complete demonstration provisions furnished.* That a complete and comprehensive listing and description of all the provisions of the Demonstration Waiver

agreement be prepared and included in the letter of acceptance to CMS by the Office of Vermont Health Access (OVHA) and provided to the Joint Fiscal Committee, comparing the original proposal for the Demonstration Waiver Program with the outcome of the negotiations with CMS; and that the Joint Fiscal Committee finds that these final provisions are in accord with the terms and conditions presented to the Joint Fiscal Committee as the basis for its contingent approval.

(2) *Final premium amounts determined to be sufficient.* That OVHA present to the Joint Fiscal Committee the final premium amounts adopted by the Agency of Human Services (AHS) upon actuarial certification, and that the Joint Fiscal Committee finds that such amounts are sufficient to support the Demonstration Waiver Program including the state's current Medicaid and expansion programs.

(3) *Agreement regarding future years' premiums.* That AHS work with CMS regarding the criteria utilized in future waiver years in order to ensure that future premiums will not be negatively affected by successful cost savings efforts achieved by the state, and that OVHA report to the Joint Fiscal Committee and the Health Access Oversight Committee on the status and provisions of any agreement reached.

(4) *MCO Savings Identified.* That OVHA present to the Joint Fiscal Committee a list of criteria and an updated list of MCO targeted health care investments which support the administration's recommendation that the financial value of the Demonstration Waiver program to the state is within the range of \$135 million to \$165 million.

(5) *Attorney General Review.* That the Attorney General review as to form the Special Terms and Conditions (STC), the Intergovernmental Agreement (IGA), and other legal documents regarding the demonstration waiver program.

(c) That by granting contingent approval of the Demonstration Waiver program, the Joint Fiscal Committee cedes none of the authority of the General Assembly to determine policy, eligibility and benefits for the Medicaid program (including expansion programs), through legislative enactments, administrative rules review, the state budget and appropriations process, or any other means of legislative oversight. Further, the Joint Fiscal Committee affirm the legislature's commitment to providing health care benefits to low-income Vermonters through the Medicaid program.

(d) That pursuant to #40 of the Special Terms and Conditions, revenue from capitation payments will be used to reduce the rates of uninsured or underinsured and improve the access and quality of services to that group; that the approval letter from the Department of Health & Human Services also indicate that Department's understanding that "Vermont will demonstrate its ability to promote universal access to health care"; and therefore, to the extent that there is unused spending capacity as measured by the difference between the amount necessary to maintain the current Medicaid program and the Demonstration Waiver program's maximum certified premium, that unused spending capacity shall be used to fund health care initiatives authorized by the legislature to improve the access to and quality of health care services received by the uninsured and underinsured.



Questions raised by Committee members relative to Global Commitment
materials for 12/13 meeting.
12/12/2005 update

As questions come in on the Global Commitment I will include them in this Q/A response. Here are questions, submitted to date and responses prepared by Joint Fiscal Staff:

1. Is there a final actuarial determination?

As explained in the materials, the "final determination" and certification by the actuary will not be made by the meeting. The Motion calls for "final premium amounts adopted by the Agency of Human Services, upon actuarial certification." We mailed to the committee the projected range. We will ask the agency to submit a formal final premium amount for 2006 at the meeting that is within the actuarial range. You should be aware that:

- This amount may change with the governor's budget adjustment submission and legislative action. It will have to remain within the premium range.
- Given that the actual premium from within the range is set by the legislature through the appropriation of the state match in the budget and budget adjustment, the September 30th motion could have been worded better!

2. Define "room." What expenditures could room be used for?

The "room" as the memorandum suggests is the amount under the premium cap which is available for increases in expenses, additional MCO investments we identify, or other health care reform initiatives. It is the top end of the range less the current estimated amount of expenditure in the Medicaid program included in the waiver plus the current estimated MCO investments. Room during the first nine months of the waiver is limited (3.5% of the projected Medicaid spending. For FY 2007 we have a little more (3.9% to 5.4%, or \$33-\$46 million).

3. Are you concerned about tracking at the high end of scale?

Yes. It would be good to have more room at that top. But that said the good news is as follows:

- We are within the cap with a cushion of \$21 million in FY 2006
- The second year we are not as high on the scale resulting in a larger cushion and that trend may continue.

If the current premium range is trended forward, we are likely to see the total room within the premium consistent with the \$4.7



billion cap.

4. What assumptions used to determine room sufficient for FY06 and FY07?

The FY2006 and FY2007 "room" is based on the space between our projected program expenditures with MCO investments and the high end of the premium range. We have a five year expenditure model created for the July Emergency Board forecast. We have adjusted it for federal Medicaid match changes this fall but basically we are tracking very consistently with that model. We will update it this January, and again based on session action in July and at each subsequent E-Board meeting. The FY 2007 premium range will also be updated based on session action. We can go over the base sheet of assumptions at the meeting. Stephanie has distributed it at previous fiscal committee meetings and we will have it for discussion on Tuesday.

5. Subsequent years analysis is weak; what are the analysis using reasonable worst case assumptions? Is there enough room?

The subsequent years' analysis is limited. Our understanding is that the actuary will revise FY 2007 and beyond each year based on changing conditions and actual experience factors. Each year this revision will adjust to changing program conditions. In addition the base year will change as final data for years beyond FY 2004 become available. Like the revenue estimating process generally, we can model out years but deviation is likely.

The two protections against changing program or economic conditions leading to increased costs are:

- There is room available under this premium range to meet changing conditions
- Each year, as those conditions change, the actuary will be incorporating the program changes into the premium modeling.

Even with these protections this is a capped waiver with a total federal program cap of \$4.7 billion. Similarly we as a state will need to come up with the state match to meet these expenditure needs which in itself will be a challenge.

6. Is GC sufficient in the out years (post FY'07) or not? Is there enough room to cover all Medicaid eligible Vermonters? What unemployment rate is assumed in the analysis?

Currently the out year projections for Medicaid assume enrollment increases which reflect recent years' experience which have been very modest. There



are Vermonters eligible for Medicaid not enrolled. A significant increase in enrollment due to increased targeted outreach aimed at enrolling these currently eligible Vermonters is not included in our five year forecast. Should such an outreach program be initiated, we understand that the increased enrollment would be included in both our projections and in the actuaries' rate setting in future years.

The question of room instead then becomes not room under the actuary premium but room under the global cap. At this point it is generally considered that those Vermonters who are currently eligible but not enrolled have lower healthcare needs and would not add cost at the same per member level of current enrollees.

You raise an important point in that the Medicaid program is, in part countercyclical. Medicaid rolls expand when the economy contracts so unemployment rates can be an important factor. The model assumes no major recession and no major change in unemployment which is consistent with our revenue models used by Tom Kavet and Jeff Carr. We will revisit that again in January.



WATERBURY OFFICE COMPLEX
103 SOUTH MAIN STREET
WATERBURY, VERMONT 05671-0204



OFFICE OF THE SECRETARY
TEL: (802) 241-2220
FAX: (802) 241-2979

MICHAEL K. SMITH, SECRETARY

STATE OF VERMONT
AGENCY OF HUMAN SERVICES

December 13, 2005

Dr. Mark B. McClellan, M.D., Ph.D
Administrator
Centers for Medicare and Medicaid Services
Mail Stop C5-11-24 – Central Building – Room C5-25-25
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Dr. McClellan:

I am writing to formally accept the Special Terms and Conditions (STCs) of the recently approved Global Commitment Section 1115 Demonstration, with an effective start date of October 1, 2005. We sincerely appreciate the time and dedication of the Centers for Medicare & Medicaid (CMS) staff in the development of this innovative program. We believe that the Demonstration will enable us to better serve Vermonters through more effective use of state and federal resources.

Under the Global Commitment to Health Waiver, Vermont will demonstrate its ability to promote universal access to health care. Subject to the availability of state funds, authorization of the Vermont legislature and compliance with the Demonstration's STCs, the Demonstration will enable the State to develop health care initiatives to improve the access to and quality of health care services received by uninsured and underinsured Vermonters.

Vermont's Demonstration Proposal, submitted April 15, 2005, identified the State's goals and objectives; described examples of innovative programs that might be implemented in order to more effectively and efficiently meet Vermonters' health needs; and provided assumptions regarding program design.

During the course of extensive collaboration and negotiation with CMS, Vermont's goals and objectives for the Demonstration continued without change. Through collaboration with CMS, we refined the program design and operational parameters to better meet both state and federal policy and fiscal objectives. Therefore, the final parameters under which the State will operate are defined by the Special Terms and Conditions approved by CMS on September 27, 2005.

In short of rewriting the April 15, 2005 application to reflect the approved and accepted STCs, the following points serve as clarification:

Vermont Global Commitment Demonstration Acceptance Letter

December 13, 2005

Page 2 of 3

- The Vermont Legislature must approve changes to eligibility requirements and benefits for enrollees in the Global Commitment to Health Section 1115(a) Demonstration and they also may be subject to CMS approval as specified in the STCs.
- Per the STCs, should the State of Vermont elect to implement any of the innovative features outlined in its waiver proposal in accordance with any directive of the state legislature, the state will seek approval from CMS to do so through an amendment to the demonstration.
- The Office of Vermont Health Access (through the Agency of Human Services) will be serving as the public MCO for the demonstration program. OVHA will provide services in accordance with the managed care provisions set forth at 42 CFR part 438 and part 447 with respect to timely claims payment. The MCO premium rate will be based on covered benefits and eligibility, will be actuarially certified, and approved by CMS. The MCO will have broad operational authority, subject only to the limitations specified in section 40 of the Special Terms and Conditions, MCO payment restrictions identified in 42 CFR 438, and approval of the Vermont Legislature.
- Changes in eligibility criteria and the scope of benefits provided under the Vermont Medicaid program, including this demonstration, will be determined by the Vermont Legislature. Vermont does not plan to change mandatory services for mandatory populations or EPSDT services. Changes also must be approved by CMS if required by the Special Terms and Conditions. However, further health care initiatives for the purposes defined under section 40 of the STCs may be implemented without CMS approval.
- The payment rate in the Intergovernmental Agreement (IGA) between the AHS and MCO can be altered during the agreement year, as long as the revised rate is compliant with 42 CFR part 438 and is prior approved by CMS.
- As is consistent with the CMS capitation rate setting checklist for risk contracts and the actuary practice guidelines for Medicaid rate-setting, it is permissible for the actuary to make adjustments based on plan specific encounter and financial data to ensure that an efficiently run managed care plan is not penalized for its efficiencies.
- The budget neutrality terms rely on historical expenditures and current federal projections of program growth. The State may seek re-negotiation of the budget neutrality terms if an unforeseen event occurs during the course of the Waiver term, such as a major economic downturn or catastrophic event (e.g., epidemic, natural disaster or terrorist action).
- The specific details regarding “normal close-out costs” in Special Terms and Conditions #10 is determined on a case-by-case basis. However, at a minimum, this clause indicates that, in the event that the waiver is prematurely suspended or terminated, CMS will provide federal match for the administrative and service costs associated with transitioning the care of people enrolled in the demonstration, including non-state plan populations.

Vermont Global Commitment Demonstration Acceptance Letter

December 13, 2005

Page 3 of 3

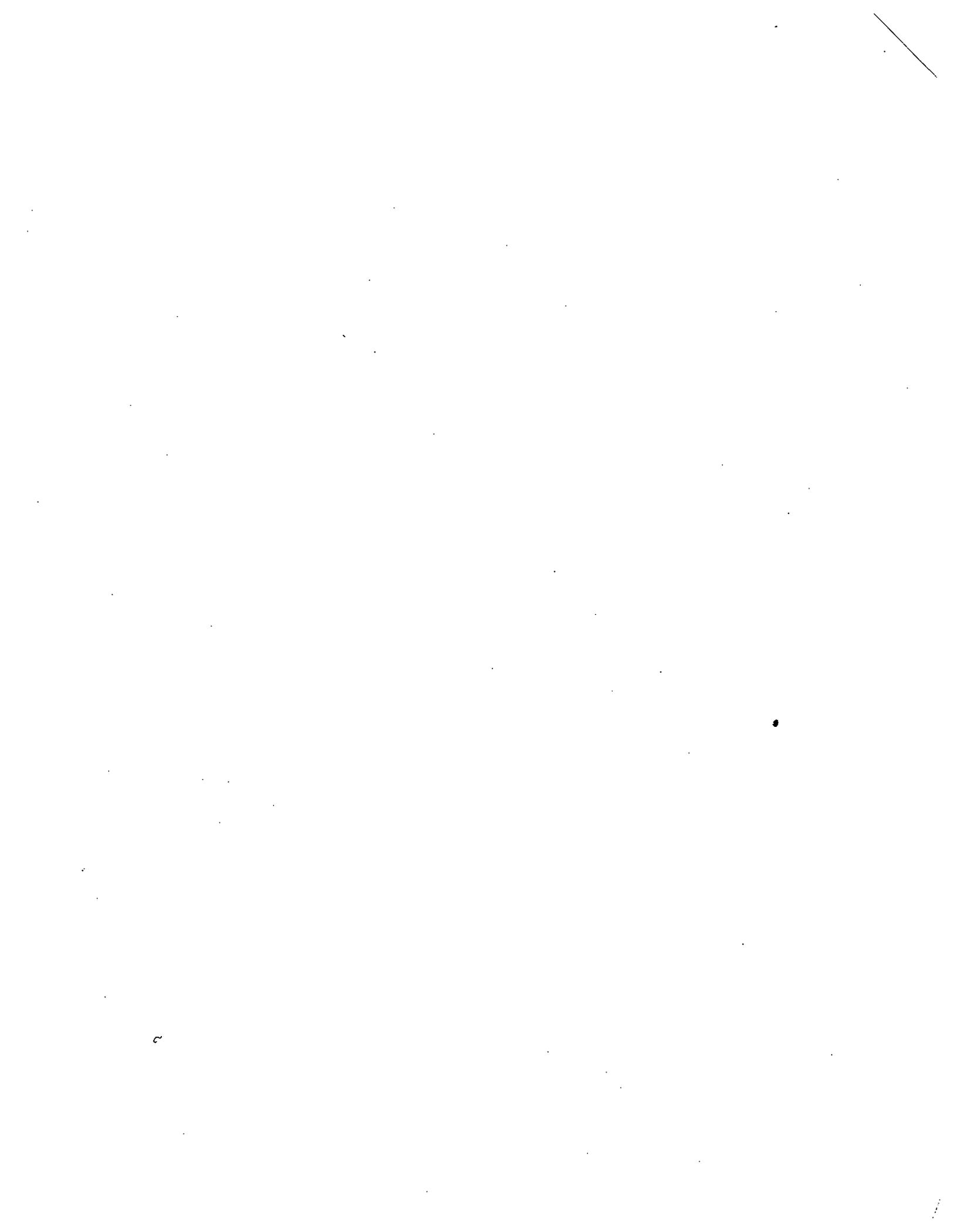
- Consistent with the Global Commitment Special Terms and Conditions, Vermont intends to continue to operate the Vermont Health Access Program (VHAP) through the MCO, including VHAP-Uninsured, VHAP Pharmacy, VScript and PCPlus Programs. However, such services will be provided under the authority of the Section 1115a Global Commitment waiver rather than the authority of the former Section 1115a VHAP waiver. Program eligibility criteria and benefits will remain unchanged unless directed by the Vermont Legislature and by CMS, as required by the Special Terms and Conditions.
- Existing federal authority and state administrative rules associated with all programs included under the 1115a Global Commitment waiver will remain in effect unless they are changed through the state's formal rule-making process.
- Vermont intends to continue to offer the following home and community based (HCBS) services under the Global Commitment Waiver for the following populations: people with developmental disabilities, children and adolescents with severe emotional disturbances, and people with traumatic brain injuries. However, such services will be provided under the authority of the 1115a Global Commitment waiver rather than the authority of Section 1915c waivers. HCBS program parameters, including eligibility criteria, under the former developmental services, severe emotional disturbance and traumatic brain injury waivers will remain unchanged unless modified through established state procedures associated with these programs. The operational parameters for these 1915c waiver programs will be defined in the Intergovernmental Agreements between the MCO and the departments that administer these programs. The State does not need to submit any additional reports to CMS for these 1915c waivers for services paid after September 30, 2005.

The Vermont Legislature has given final approval for entering into the waiver program, in accordance with its September 30th contingent approval, and subsequent review and approval of the completion of these contingencies on December 13, 2005.

If you have any concerns with the above clarifications, please inform us within thirty days of receipt of this letter.

Sincerely,

Michael K. Smith, Secretary
Agency of Human Services





STATE OF VERMONT

AGENCY OF HUMAN SERVICES

MEMORANDUM

TO: Representative Martha Heath, Chair
Joint Fiscal Committee

FROM: Michael K. Smith, Secretary *MKS*

DATE: December 13, 2005

SUBJECT: Waiver Year 1 Global Commitment to Health Premium Model

The monthly premium amount paid to the Office of Vermont Health Access during State Fiscal Year 2006 will be established at \$65,371,811. This Premium is within the actuarially certified rate range of \$60,115,350 - \$66,747,894 for the nine months of Waiver Year 1 that fall in SFY 2006.

This Premium rate is subject to modification, within the certified rate range, based on the Legislative Budget Adjustment Process.

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JFC mtg file



STATE OF VERMONT

MEMORANDUM

To: Martha Heath, Chair; Members of the Joint Fiscal Committee
From: Stephanie Barrett, Steve Kappel; Joint Fiscal Office
Date: December 6, 2005
Subject: Global Commitment – Preliminary Premium Evaluation

Overview

This memorandum presents the results of the Joint Fiscal Office's preliminary evaluation of the premiums developed by the Agency of Human Services' consulting actuary. This evaluation is being conducted to determine compliance with condition #2 and to the extent possible condition #3 of the Committee's contingent approval of the Global Commitment waiver.

For state fiscal year 2006, there is approximately \$21.8 million in room (3.5% of total spending) between spending obligations (including the Medicaid program and managed care investments) and the high end of the premium range. Note that this is for three quarters of the year. For SFY 2007, there is between \$33.2 million (3.9%) and \$46.2 million (5.4%). This room can be used in case of unforeseen expenditures or for new program initiatives.

Background

Joint Fiscal Office staff are reviewing the actuarial analysis. JFO will follow up on several outstanding issues that may have the impact of increasing the upper limit of the range. These include the administration percentage included in the estimates, and the treatment of the reduction in hospital reimbursement that went into effect on October 1st. Once the premium range is finalized, the actuary will produce a certification letter, as required by CMS. Final premiums will have to be approved by the CMS however they indicated via a conference call that such approval is likely to be routine.

The actuary has developed three specific premium estimates: "Best," which represents the firm's estimate of costs, "High" which increases assumptions about utilization and price trends by 1% each over "Best" trends, and "Low," which assumes a tighter managed care model, 1% reductions in trends, managed care savings, and increased administrative costs.

SFY 2006

Current SFY06 Global Commitment premium projection (three quarters of a year due to the start date of October 1, 2005 of the waiver)

<u>Low</u>	<u>Best</u>	<u>High</u>
\$541.2m	\$577.4m	\$603.4m

Consensus estimates for SFY06 expenditures under Global Commitment, including an estimate for budget adjustment, are:

Medicaid expenditures	\$545.9m
MCO Investments	\$ 35.7m
Total	\$581.6m

There is \$21.8 million of "room" in the current SFY06 "High" premium above the total needed (\$581.6m). JFO feels this should be sufficient room to accommodate unanticipated increases in Medicaid GC expenditures or additional MCO investments.

SFY 2007

The actuary provided a FY2007 premium range estimate (this is full year estimate). This estimate will change as the legislature makes changes which impact global commitment during the upcoming session. Based on current data, the FY2007 Global Commitment premium projection is as follows:

FY07 Global Commitment premium projection

<u>Low</u>	<u>Best</u>	<u>High</u>
\$742.1	\$801.8	\$848.2

JFO estimate of SFY07 Global Commitment expenditures

Medicaid GC expenditures	\$755.1m	to	\$765.0m
MCO Investments	\$ 46.9m	to	\$ 50.0m
Total	\$802.0m	to	\$815.0m

The preliminary estimate of "room" under the premium is between \$33.2m and \$46.2m. This estimate will be revised once consensus estimates are developed by JFO and the administration.

Subsequent Years

The "High" premium trend used by the actuary in developing the FY 2006 and FY 2007 estimates should lead to increasing room in the subsequent years of the waiver. This trend could bring us close to the \$4.7 million maximum waiver amount if sufficient state funds were available.

The process and events that would impact FY 2008 and beyond are not established and risk will remain as the methodology and actual experience is evaluated. Similarly, in that even with Global Commitment, our Medicaid program is facing FY 2008 and FY 2009 state fund deficits in the range of \$42m and \$62m respectively, it is difficult to project expenditure need in those years as well.



STATE OF VERMONT

MEMORANDUM

To: Martha Heath, Chair; Members of the Joint Fiscal Committee
From: Stephanie Barrett, Steve Kappel; Joint Fiscal Office
Date: December 6, 2005
Subject: Global Commitment – Preliminary Premium Evaluation

Overview

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For state fiscal year 2006, there is approximately \$21.8 million in room (3.5% of total spending) between spending obligations (including the Medicaid program and managed care investments) and the high end of the premium range. Note that this is for three quarters of the year. For SFY 2007, there is between \$33.2 million (3.9%) and \$46.2 million (5.4%). This room can be used in case of unforeseen expenditures or for new program initiatives.

Background

Joint Fiscal Office staff are reviewing the actuarial analysis. JFO will follow up on several outstanding issues that may have the impact of increasing the upper limit of the range. These include the administration percentage included in the estimates, and the treatment of the reduction in hospital reimbursement that went into effect on October 1st. Once the premium range is finalized, the actuary will produce a certification letter, as required by CMS. Final premiums will have to be approved by the CMS however they indicated via a conference call that such approval is likely to be routine.

The actuary has developed three specific premium estimates: "Best," which represents the firm's estimate of costs, "High" which increases assumptions about utilization and price trends by 1% each over "Best" trends, and "Low," which assumes a tighter managed care model, 1% reductions in trends, managed care savings, and increased administrative costs.

SFY 2006

Current SFY06 Global Commitment premium projection (three quarters of a year due to the start date of October 1, 2005 of the waiver)

<u>Low</u>	<u>Best</u>	<u>High</u>
\$541.2m	\$577.4m	\$603.4m

Consensus estimates for SFY06 expenditures under Global Commitment, including an estimate for budget adjustment, are:

Medicaid expenditures	\$545.9m
MCO Investments	\$ 35.7m
Total	\$581.6m

There is \$21.8 million of "room" in the current SFY06 "High" premium above the total needed (\$581.6m). JFO feels this should be sufficient room to accommodate unanticipated increases in Medicaid GC expenditures or additional MCO investments.

SFY 2007

The actuary provided a FY2007 premium range estimate (this is full year estimate). This estimate will change as the legislature makes changes which impact global commitment during the upcoming session. Based on current data, the FY2007 Global Commitment premium projection is as follows:

FY07 Global Commitment premium projection

<u>Low</u>	<u>Best</u>	<u>High</u>
\$742.1	\$801.8	\$848.2

JFO estimate of SFY07 Global Commitment expenditures

Medicaid GC expenditures	\$755.1m	to	\$765.0m
MCO Investments	\$ 46.9m	to	\$ 50.0m
Total	\$802.0m	to	\$815.0m

The preliminary estimate of "room" under the premium is between \$33.2m and \$46.2m. This estimate will be revised once consensus estimates are developed by JFO and the administration.

Subsequent Years

The "High" premium trend used by the actuary in developing the FY 2006 and FY 2007 estimates should lead to increasing room in the subsequent years of the waiver. This trend could bring us close to the \$4.7 million maximum waiver amount if sufficient state funds were available.

The process and events that would impact FY 2008 and beyond are not established and risk will remain as the methodology and actual experience is evaluated. Similarly, in that even with Global Commitment, our Medicaid program is facing FY 2008 and FY 2009 state fund deficits in the range of \$42m and \$62m respectively, it is difficult to project expenditure need in those years as well.

Excerpt of Joshua Slen testimony at Joint Fiscal Committee meeting of December 13, 2005:

Joshua Slen, Director of the Office of Vermont Health Access: . . . These final numbers are in fact slightly different than the numbers that were in that rate range [set forth in information packet sent to Committee members by JFO prior to the meeting]. . . it establishes the top of our rate range for the nine months of this fiscal year at just over \$600,000,000 – it is \$600,700,000. The previous number that you had was \$600,300,000....

12/13/05 Fiscal Committee Motion

Joint Fiscal Committee finds that the two remaining conditions of the September 30th motion of contingent approval of the Global Commitment to Health Demonstration Waiver Program have been met:

Condition:

- (1) Final premium amount for the current fiscal year determined to be sufficient
- (2) Agreement regarding the process for determining the premium in future years (i.e., to confirm CMS agreement that future premium amounts should not be negatively affected by successful cost saving efforts achieved by the state).

The Committee also approves the letter of acceptance from the Agency of Human Services Secretary Michael Smith to the Centers for Medicare and Medicaid Services (CMS), dated December 13, 2005, with the addition of the phrase "through its Joint Fiscal Committee" after "Vermont Legislature" in the second to last paragraph.

Medicaid Current Law 5yr Projection
25-Aug-05

	FY06 update Dec-05		FY06 3 Qtrs Based on Dec 05 Update		Forecast and E-Board Adopted SFY 2007		Projected SFY 2008		Projected SFY 2009		Projected SFY 2010		
	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	
Revenue	\$ 403,124,647		\$ 33,043,406	MCO Invests	\$ 44,093,426	11.97%	\$ 388,449,998		\$ 401,672,361		\$ 415,582,246		\$ 430,216,425
HATF			\$ 2,681,008	BAA+'s to MCO	\$ 2,815,058		\$ -		\$ -		\$ -		\$ -
End Yr Fund Balance	\$ 5,394,231		\$ 35,724,414		\$ 46,908,484		\$ -		\$ -		\$ -		\$ -
GF Onetime	\$ 22,135,000				\$ -		\$ -		\$ -		\$ -		\$ -
GF Base	\$ 95,104,989				\$ 98,909,189	4.0%	\$ 102,865,556	4.0%	\$ 106,980,178	4.0%	\$ 111,259,385	4.0%	\$ 117,250,000
Tob Settlement	\$ 17,250,000		\$ 581,620,821		\$ 17,250,000	0.0%	\$ 17,250,000	0.0%	\$ 17,250,000	0.0%	\$ 17,250,000	0.0%	\$ 17,250,000
Tob Taxes	\$ 47,400,000				\$ 46,600,000	-1.7%	\$ 45,800,000	-1.7%	\$ 45,000,000	-1.7%	\$ 44,200,000	-1.8%	\$ 43,400,000
Rx \$0.10 per script	\$ 1,234,132				\$ 1,271,156	3.0%	\$ 1,309,291	3.0%	\$ 1,348,569	3.0%	\$ 1,389,026	3.0%	\$ 1,430,504
NH/HH/ICF-MR Provider Tax	\$ 17,682,595				\$ 17,859,421	1.0%	\$ 18,038,015	1.0%	\$ 18,218,395	1.0%	\$ 18,400,579	1.0%	\$ 18,584,963
VSH/Retreat Provider tax	\$ 982,632				\$ 992,458	1.0%	\$ 1,002,383	1.0%	\$ 1,012,407	1.0%	\$ 1,022,531	1.0%	\$ 1,032,655
Hosp Provider Taxes (Base)	\$ 45,890,572				\$ 49,102,912	7.0%	\$ 52,540,116	7.0%	\$ 56,217,924	7.0%	\$ 60,153,179	7.0%	\$ 64,288,434
Bump to 6% on Hospitals	\$ 9,622,217				\$ 10,295,772	7.0%	\$ 11,016,476	7.0%	\$ 11,787,630	7.0%	\$ 12,612,764	7.0%	\$ 13,518,918
State Share premiums	\$ 6,132,883				\$ 6,255,541	2.0%	\$ 6,380,651	2.0%	\$ 6,508,265	2.0%	\$ 6,638,430	2.0%	\$ 6,770,064
Other	\$ 150,000				\$ 150,000	0.0%	\$ 150,000	0.0%	\$ 150,000	0.0%	\$ 150,000	0.0%	\$ 150,000
NON OVHA													
GF Base	\$ 97,156,621				\$ 101,042,886	4.0%	\$ 105,084,601	4.0%	\$ 109,287,985	4.0%	\$ 113,659,505	4.0%	\$ 118,200,000
Tobacco Settlement	\$ 1,600,277				\$ 1,600,277	0.0%	\$ 1,600,277	0.0%	\$ 1,600,277	0.0%	\$ 1,600,277	0.0%	\$ 1,600,277
DOE - LEAs Special Ed Services	\$ 14,590,500				\$ 15,715,318	3.5%	\$ 16,265,354	3.5%	\$ 16,834,641	3.5%	\$ 17,423,853	3.5%	\$ 18,033,065
VDH - UVM VCHIP - LEAs EPSDT	\$ 2,959,900				\$ 3,063,497	3.5%	\$ 3,170,719	3.5%	\$ 3,281,694	3.5%	\$ 3,396,553	3.5%	\$ 3,515,462
MH -Valley Vista ITs/ LEAs SBSix / MH ITs	\$ 14,497,916				\$ 15,309,799	5.6%	\$ 16,167,148	5.6%	\$ 17,072,508	5.6%	\$ 18,028,569	5.6%	\$ 19,035,330
SF Early Childhood - Spec Ed Med Admin SF	\$ 975,015				\$ 975,015	0.0%	\$ 975,015	0.0%	\$ 975,015	0.0%	\$ 975,015	0.0%	\$ 975,015
DAIL Other IT/SF	\$ 1,706,758				\$ 1,706,758	0.0%	\$ 1,706,758	0.0%	\$ 1,706,758	0.0%	\$ 1,706,758	0.0%	\$ 1,706,758
VDH Admin -RWJ Oral/ LEAs EPSDT/Misc	\$ 658,409				\$ 350,000	0.0%	\$ 350,000	0.0%	\$ 350,000	0.0%	\$ 350,000	0.0%	\$ 350,000
DEFICIT /SURPLUS	\$ (4,908,168)				\$ (62,704,342)		\$ (71,945,422)		\$ (93,356,654)		\$ (116,833,529)		\$ (140,321,617)
	\$ (4,908,168)				\$ (73,921,129)		\$ (145,866,551)		\$ (239,223,205)		\$ (356,056,734)		\$ (486,378,352)

MCO Investments	base \$ 31,079,607		\$ 44,093,426		\$ 46,298,097		\$ 48,613,002		\$ 51,043,652
	onetime \$ 1,963,799		0		0		0		0
	\$ 33,043,406		\$ 44,093,426		\$ 46,298,097		\$ 48,613,002		\$ 51,043,652
<i>Saving due to MCO Investments</i>	\$ 19,462,566				\$ 25,935,753		\$ 27,232,541		\$ 28,594,168
Surplus/(deficit) after MCO Savings	\$ 14,554,398				\$ (36,768,589)		\$ (44,712,881)		\$ (64,762,486)
Cummulative after MCO Savings	\$ 14,554,398				\$ (22,214,191)		\$ (66,927,072)		\$ (131,689,558)

Medicaid Current Law 5yr Projection
25-Aug-05

		FY06 update Dec-05		FY06 3 Qtrs Based on Dec 05 Update		Forecast and E-Board Adopted SFY 2007				Projected SFY 2008				Projected SFY 2009				Projected SFY 2010				
		Gross Funds		State Funds		Gross Funds		State Funds		Gross Funds		State Funds		Gross Funds		State Funds		Gross Funds		State Funds		
Administration Expenses																						
OVHA	GC	OVHA	\$ 27,581,664	\$ 10,867,677	\$ 20,686,248	\$ 8,150,758	\$ 28,597,953	5.0%	\$ 11,601,528	6.8%	\$ 30,027,851	5.0%	\$ 12,181,604	5.0%	\$ 31,529,243	5.0%	\$ 12,790,684	5.0%	\$ 33,105,706	5.0%	\$ 13,430,219	5.0%
Non OVHA	GC	DCF - Medicaid	\$ 8,416,372	\$ 4,208,186	\$ 6,312,279	\$ 3,156,140	\$ 7,926,635	5.0%	\$ 3,963,317	-5.8%	\$ 8,322,966	5.0%	\$ 4,161,483	5.0%	\$ 8,739,115	5.0%	\$ 4,369,557	5.0%	\$ 9,176,070	5.0%	\$ 4,588,035	5.0%
	GC	DAIL-Other Medicaid	\$ 3,645,480	\$ 1,943,655	\$ 2,734,110	\$ 1,457,741	\$ 2,811,354	5.0%	\$ 1,405,677	-27.7%	\$ 2,951,922	5.0%	\$ 1,475,961	5.0%	\$ 3,099,518	5.0%	\$ 1,549,759	5.0%	\$ 3,254,494	5.0%	\$ 1,627,247	5.0%
	GC	VDH-Other Medicaid	\$ 21,743,584	\$ 9,607,920	\$ 16,307,688	\$ 7,205,940	\$ 22,830,763	5.0%	\$ 10,479,320	9.1%	\$ 23,972,301	5.0%	\$ 11,986,151	14.4%	\$ 25,170,916	5.0%	\$ 12,585,458	5.0%	\$ 26,429,462	5.0%	\$ 13,214,731	5.0%
	GC	DOE	\$ 599,286	\$ 299,643	\$ 449,465	\$ 224,732	\$ 629,250	5.0%	\$ 314,625	5.0%	\$ 660,713	5.0%	\$ 330,356	5.0%	\$ 693,748	5.0%	\$ 346,874	5.0%	\$ 728,436	5.0%	\$ 364,218	5.0%
		Sub-Total Admin	\$ 61,986,386	\$ 26,927,081	\$ 46,489,790	\$ 20,195,311	\$ 62,795,955	5.6%	\$ 27,764,467	8.8%	\$ 65,935,753	5.0%	\$ 30,135,555	8.5%	\$ 69,232,540	5.0%	\$ 31,642,333	5.0%	\$ 72,694,167	5.0%	\$ 33,224,449	5.0%
Program Expenditures																						
		Regular FMAP		0.411		0.412		0.412		0.412		0.412		0.412		0.412		0.412		0.412		
		Enhanced FMAP		0.288		0.288		0.288		0.288		0.288		0.288		0.288		0.288		0.288		
Non OVHA	GC	DCF	\$ 30,352,958	\$ 12,410,534	\$ 22,764,719	\$ 9,307,901	\$ 32,629,430	7.5%	\$ 12,456,284	0.4%	\$ 35,076,637	7.5%	\$ 14,444,559	16.0%	\$ 37,707,385	7.5%	\$ 15,527,901	7.5%	\$ 40,535,439	7.5%	\$ 16,692,494	7.5%
	GC	DAIL-DS	\$ 102,521,960	\$ 42,144,316	\$ 76,891,470	\$ 31,608,237	\$ 110,211,107	7.5%	\$ 45,000,607	6.8%	\$ 118,476,940	7.5%	\$ 48,788,804	8.4%	\$ 127,362,711	7.5%	\$ 52,447,964	7.5%	\$ 136,914,914	7.5%	\$ 56,381,562	7.5%
	GC	DAIL-OTH	\$ 10,165,930	\$ 4,178,414	\$ 7,624,448	\$ 3,133,811	\$ 10,928,375	7.5%	\$ 3,736,435	-10.6%	\$ 11,748,003	7.5%	\$ 4,837,828	29.5%	\$ 12,629,103	7.5%	\$ 5,200,665	7.5%	\$ 13,576,286	7.5%	\$ 5,590,714	7.5%
	GC	VDH-MH	\$ 89,083,926	\$ 36,613,494	\$ 66,812,945	\$ 27,460,121	\$ 95,765,220	7.5%	\$ 40,009,699	9.3%	\$ 102,947,612	7.5%	\$ 42,393,827	6.0%	\$ 110,668,683	7.5%	\$ 45,573,364	7.5%	\$ 118,968,834	7.5%	\$ 48,991,366	7.5%
	GC	VDH-OTH	\$ 19,423,033	\$ 8,159,981	\$ 14,567,275	\$ 6,119,986	\$ 20,879,760	7.5%	\$ 9,954,369	22.0%	\$ 22,445,743	7.5%	\$ 9,243,157	-7.1%	\$ 24,129,173	7.5%	\$ 9,936,394	7.5%	\$ 25,938,861	7.5%	\$ 10,681,623	7.5%
	GC	DOE	\$ 35,500,000	\$ 14,590,500	\$ 26,625,000	\$ 10,942,875	\$ 38,162,500	7.5%	\$ 15,715,318	7.7%	\$ 39,498,188	3.5%	\$ 16,265,354	3.5%	\$ 40,880,624	3.5%	\$ 16,834,641	3.5%	\$ 42,311,446	3.5%	\$ 17,423,853	3.5%
		Sub-Total Non OVHA	\$ 287,197,807	\$ 118,247,239	\$ 215,398,355	\$ 88,685,429	\$ 308,726,393	7.5%	\$ 127,022,712	12.1%	\$ 330,343,122	7.0%	\$ 136,123,528	7.2%	\$ 353,527,679	7.0%	\$ 145,670,928	7.0%	\$ 378,395,780	7.0%	\$ 155,911,612	7.0%
OVHA	ABD		\$ 177,566,989	\$ 72,980,032	\$ 133,175,242	\$ 54,735,024	\$ 193,725,585	9.1%	\$ 79,776,196	9.3%	\$ 214,229,691	9.1%	\$ 86,269,129	6.1%	\$ 234,783,702	6.1%	\$ 91,269,129	6.1%	\$ 257,859,508	6.1%	\$ 98,952,443	6.1%
		MMA Impact	\$ (24,913,788)	\$ (10,239,567)	\$ (24,913,788)	\$ (10,239,567)	\$ (55,507,919)	11.4%	\$ (22,858,161)	-	\$ (55,507,919)	11.4%	\$ (22,858,161)	-	\$ (55,507,919)	11.4%	\$ (22,858,161)	-	\$ (55,507,919)	11.4%	\$ (22,858,161)	-
		SLMB/QMB	\$ 962,723	\$ 395,679	\$ 962,723	\$ 395,679	\$ 2,012,026	4.5%	\$ 828,552	-	\$ 2,012,026	4.5%	\$ 828,552	-	\$ 2,012,026	4.5%	\$ 828,552	-	\$ 2,012,026	4.5%	\$ 828,552	-
		ABD Adjusted	\$ 153,615,924	\$ 63,136,145	\$ 109,224,177	\$ 44,891,137	\$ 140,229,691	-8.7%	\$ 57,746,587	-8.5%	\$ 148,783,702	6.1%	\$ 61,269,129	6.1%	\$ 157,859,508	6.1%	\$ 65,006,546	6.1%	\$ 167,441,580	6.1%	\$ 68,952,443	6.1%
OVHA	GC	ABD - GC remainder	\$ 135,325,669	\$ 55,618,850	\$ 95,506,486	\$ 39,253,166	\$ 121,407,699	-10.3%	\$ 49,995,691	-10.1%	\$ 128,813,569	6.1%	\$ 53,045,428	6.1%	\$ 136,671,197	6.1%	\$ 56,281,199	6.1%	\$ 145,008,140	6.1%	\$ 59,714,352	6.1%
	GC	Families - Reg	\$ 146,389,285	\$ 60,165,996	\$ 109,791,963	\$ 45,124,497	\$ 157,000,824	7.2%	\$ 64,652,939	7.5%	\$ 165,478,869	5.4%	\$ 68,144,198	5.4%	\$ 174,414,728	5.4%	\$ 71,823,985	5.4%	\$ 183,833,123	5.4%	\$ 75,702,480	5.4%
	GC	Families- HlthyBaby/FamInfntTod	\$ 2,234,724	\$ 918,472	\$ 1,676,043	\$ 688,854	\$ 2,324,113	4.0%	\$ 957,070	4.2%	\$ 2,417,078	4.0%	\$ 995,353	4.0%	\$ 2,513,761	4.0%	\$ 1,035,167	4.0%	\$ 2,614,311	4.0%	\$ 1,076,573	4.0%
	GC	Ladies First	\$ 1,317,335	\$ 541,425	\$ 988,001	\$ 406,068	\$ 1,580,802	20.0%	\$ 650,974	20.2%	\$ 1,724,655	9.1%	\$ 496,269	-23.8%	\$ 1,881,598	9.1%	\$ 541,430	9%	\$ 2,052,824	9.1%	\$ 549,644	2%
	GC	Underinsured Children	\$ 1,627,859	\$ 669,500	\$ 1,220,894	\$ 501,788	\$ 2,021,801	24.2%	\$ 832,578	24.4%	\$ 2,426,161	20.0%	\$ 999,093	20.0%	\$ 2,911,393	20.0%	\$ 1,198,912	20.0%	\$ 3,493,672	20.0%	\$ 1,438,694	20.0%
	GC	Caretakers	\$ 5,699,850	\$ 2,342,638	\$ 4,274,888	\$ 1,756,979	\$ 6,349,633	11.4%	\$ 2,614,779	11.6%	\$ 6,984,596	10.0%	\$ 2,876,257	10.0%	\$ 7,683,056	10.0%	\$ 3,163,883	10.0%	\$ 8,451,362	10.0%	\$ 3,480,271	10.0%
	GC	VHAP	\$ 67,546,837	\$ 27,761,750	\$ 50,660,128	\$ 20,821,312	\$ 79,299,987	17.4%	\$ 32,655,734	17.6%	\$ 90,005,485	13.5%	\$ 37,064,259	13.5%	\$ 102,156,225	13.5%	\$ 42,067,934	13.5%	\$ 115,947,316	13.5%	\$ 47,747,105	13.5%
	GC	Buy In - remaining in GC	\$ 10,972,993	\$ 4,921,584	\$ 8,229,745	\$ 3,691,188	\$ 11,705,908	7.3%	\$ 4,820,493	-2.1%	\$ 13,830,879	7.3%	\$ 5,695,556	-5.1%	\$ 14,840,533	7.3%	\$ 6,111,331	7.3%	\$ 15,923,892	7.3%	\$ 6,557,459	7.3%
	GC	SLMB/QMB	\$ 1,492,321	\$ 613,344	\$ 1,492,321	\$ 613,344	\$ 1,851,374	24.1%	\$ 762,396	24.3%	\$ 2,113,770	24.1%	\$ 854,752	24.3%	\$ 2,113,770	24.1%	\$ 854,752	24.3%	\$ 2,113,770	24.1%	\$ 854,752	24.3%
	GC	Legal Aid	\$ 384,375	\$ 192,188	\$ 288,281	\$ 144,141	\$ 420,506	9.4%	\$ 210,253	9.4%	\$ 460,034	9.4%	\$ 230,017	9.4%	\$ 503,277	9.4%	\$ 251,639	9.4%	\$ 550,585	9.4%	\$ 275,293	9.4%
	GC	Rate Setting	\$ 620,468	\$ 310,234	\$ 465,351	\$ 232,676	\$ 651,491	5.0%	\$ 325,746	5.0%	\$ 684,066	5.0%	\$ 342,033	5.0%	\$ 718,269	5.0%	\$ 359,135	5.0%	\$ 754,183	5.0%	\$ 377,091	5.0%
	GC	Lund Center	\$ 625,000	\$ 256,875	\$ 468,750	\$ 192,656	\$ 656,250	5.0%	\$ 270,244	5.2%	\$ 689,063	5.0%	\$ 283,756	5.0%	\$ 723,516	5.0%	\$ 297,944	5.0%	\$ 759,691	5.0%	\$ 312,841	5.0%
	GC	VHAP Rx - in GC 1 Qtr	\$ 10,857,410	\$ 4,462,396	\$ 5,428,705	\$ 2,231,198	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	GC	Vscript - in GC 1 Qtr	\$ 3,205,599	\$ 1,317,501	\$ 1,602,799	\$ 658,751	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	GC	VPharm- PartD Wrap-matched	\$ 1,441,965	\$ 592,648	\$ 1,441,965	\$ 592,648	\$ 3,212,698	11.4%	\$ 1,322,989	11.4%	\$ 3,578,946	11.4%	\$ 1,473,810	11.4%	\$ 3,986,945	11.4%	\$ 1,641,824	11.4%	\$ 4,441,457	11.4%	\$ 1,828,992	11.4%
	GC	VT Rx	\$ 471,942	\$ 193,968	\$ 471,942	\$ 193,968	\$ 1,051,486	11.4%	\$ 433,002	n/a	\$ 1,171,355	11.4%	\$ 482,364	11.4%	\$ 1,304,890	11.4%	\$ 537,354	11.4%	\$ 1,453,647	11.4%	\$ 598,612	11.4%
		Sub-Total OVHA	\$ 390,213,632	\$ 160,878,918	\$ 284,008,262	\$ 117,103,232	\$ 389,534,573	-0.2%	\$ 160,504,887	-0.2%	\$ 418,264,754	7.4%	\$ 172,128,392	7.2%	\$ 450,309,388	7.7%	\$ 185,311,734	7.7%	\$ 485,284,202	7.8%	\$ 199,659,406	7.7%
		Total Global Commitment - w/in Actuary Premium	\$ 739,397,825	\$ 306,053,238	\$ 545,896,407	\$ 225,983,972	\$ 761,056,920		\$ 315,292,066		\$ 814,543,629		\$ 338,387,475		\$ 873,069,607		\$ 362,624,995		\$ 936,374,149		\$ 388,795,467	
Admin	GC	DAIL - LTC Admin	\$ 1,016,400	\$ 421,080	\$ 1,016,400	\$ 421,080	\$ 1,067,220	5.0%	\$ 533,610	26.7%	\$ 1,120,581	5.0%	\$ 560,291	5.0%	\$ 1,176,610	5.0%	\$ 588,305	5.0%	\$ 1,232,639	5.0%	\$ 606,319	5.0%
Admin	GC	DCF - LTC Admin	\$ 910,556	\$ 455,278	\$ 910,556	\$ 455,278	\$ 956,084	5.0%	\$ 478,042	5.0%	\$ 1,003,888	5.0%	\$ 501,944	5.0%	\$ 1,054,082	5.0%	\$ 527,041	5.0%	\$ 1,104,276	5.0%	\$ 552,082	5.0%
Admin	GC	OVHA - LTC Admin	\$ 362,794	\$ 181,397	\$ 362,794	\$ 181,397	\$ 380,934	5.0%	\$ 190,467	5.0%	\$ 399,980	5.0%	\$ 199,990	5.0%	\$ 419,979	5.0%	\$ 209,990	5.0%	\$ 439,968	5.0%	\$ 219,989	5.0%
Admin	GC	AHS CO	\$ 1,641,026	\$ 820,513	\$ 1,641,026	\$ 820,513	\$ 1,723,077	5.0%	\$ 861,539	5.0%	\$ 1,809,231	5.0%	\$ 904,616	5.0%	\$ 1,899,693	5.0%	\$ 949,846	5.0%	\$ 2,000,539	5.0%	\$ 999,339	5.0%
Admin	GC	DCF - HATF (not on map hist)	\$ 862,030	\$ 431,015	\$ 862,030	\$ 431,015	\$ 905,132	5.0%	\$ 452,566	5.0%	\$ 950,389	5.0%	\$ 475,194	5.0%	\$ 997,908	5.0%	\$ 498,954	5.0%	\$ 1,047,803	5.0%	\$ 523,902	5.0%
Admin	GC	DCF/OCS-																				

Medicaid Current Law 5yr Projection 25-Aug-05		FY06 update Dec-05		FY06 3 Qtrs Based on Dec 05 Update		Forecast and E-Board Adopted SFY 2007				Projected SFY 2008		Projected SFY 2009		Projected SFY 2010								
		Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds							
Administration Expenses																						
OVHA	GC	OVHA	\$ 27,581,664	\$ 10,867,677	\$ 20,686,248	\$ 8,150,758	\$ 28,597,953	5.0%	\$ 11,601,528	6.8%	\$ 30,027,851	5.0%	\$ 12,181,604	5.0%	\$ 31,529,243	5.0%	\$ 12,790,684	5.0%	\$ 33,105,706	5.0%	\$ 13,430,219	5.0%
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	GC	DAIL-Other Medicaid	\$ 3,645,480	\$ 1,943,655	\$ 2,734,110	\$ 1,457,741	\$ 2,811,354	5.0%	\$ 1,405,677	-27.7%	\$ 2,951,922	5.0%	\$ 1,475,961	5.0%	\$ 3,099,518	5.0%	\$ 1,549,759	5.0%	\$ 3,254,494	5.0%	\$ 1,627,247	5.0%
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	GC	DOE	\$ 599,286	\$ 299,643	\$ 449,465	\$ 224,732	\$ 629,250	5.0%	\$ 314,625	5.0%	\$ 660,713	5.0%	\$ 330,356	5.0%	\$ 693,748	5.0%	\$ 346,874	5.0%	\$ 728,436	5.0%	\$ 364,218	5.0%
		Sub-Total Admin	\$ 61,986,386	\$ 26,927,081	\$ 46,489,790	\$ 20,195,311	\$ 62,795,955	5.6%	\$ 27,764,467	8.8%	\$ 65,935,753	5.0%	\$ 30,135,555	8.5%	\$ 69,232,540	5.0%	\$ 31,642,333	5.0%	\$ 72,694,167	5.0%	\$ 33,224,449	5.0%
Program Expenditures																						
		Regular FMAP		0.411					0.412				0.412				0.412				0.412	
		Enhanced FMAP		0.288					0.288				0.288				0.288				0.288	
Non OVHA	GC	DCF	\$ 30,352,958	\$ 12,410,534	\$ 22,764,719	\$ 9,307,901	\$ 32,629,430	7.5%	\$ 12,456,284	0.4%	\$ 35,076,637	7.5%	\$ 14,444,559	16.0%	\$ 37,707,385	7.5%	\$ 15,527,901	7.5%	\$ 40,535,439	7.5%	\$ 16,692,494	7.5%
	GC	DAIL-DS	\$ 102,521,960	\$ 42,144,316	\$ 76,891,470	\$ 31,608,237	\$ 110,211,107	7.5%	\$ 45,000,607	6.8%	\$ 118,476,940	7.5%	\$ 48,788,804	8.4%	\$ 127,362,711	7.5%	\$ 52,447,964	7.5%	\$ 136,914,914	7.5%	\$ 56,381,562	7.5%
	GC	DAIL-OTH	\$ 10,165,930	\$ 4,178,414	\$ 7,624,448	\$ 3,133,811	\$ 10,928,375	7.5%	\$ 3,736,435	-10.6%	\$ 11,748,003	7.5%	\$ 4,837,828	29.5%	\$ 12,629,103	7.5%	\$ 5,200,665	7.5%	\$ 13,576,286	7.5%	\$ 5,590,714	7.5%
	GC	VDH-MH	\$ 89,083,926	\$ 36,613,494	\$ 66,812,945	\$ 27,460,121	\$ 95,765,220	7.5%	\$ 40,009,699	9.3%	\$ 102,947,612	7.5%	\$ 42,393,827	6.0%	\$ 110,668,683	7.5%	\$ 45,573,364	7.5%	\$ 118,968,834	7.5%	\$ 48,991,366	7.5%
	GC	VDH-OTH	\$ 19,423,033	\$ 8,159,981	\$ 14,567,275	\$ 6,119,986	\$ 20,879,760	7.5%	\$ 9,954,369	22.0%	\$ 22,445,743	7.5%	\$ 9,243,157	-7.1%	\$ 24,129,173	7.5%	\$ 9,936,394	7.5%	\$ 25,938,861	7.5%	\$ 10,681,623	7.5%
	GC	DOE	\$ 35,500,000	\$ 14,590,500	\$ 26,625,000	\$ 10,942,875	\$ 38,162,500	7.5%	\$ 15,715,318	7.2%	\$ 39,498,188	3.5%	\$ 16,265,354	3.5%	\$ 40,880,624	3.5%	\$ 16,834,641	3.5%	\$ 42,311,446	3.5%	\$ 17,423,853	3.5%
		Sub-Total Non OVHA	\$ 287,197,807	\$ 118,247,239	\$ 215,398,355	\$ 88,685,429	\$ 308,726,393	7.5%	\$ 127,022,712	12.1%	\$ 330,343,122	7.0%	\$ 136,123,528	7.2%	\$ 353,527,679	7.0%	\$ 145,670,928	7.0%	\$ 378,395,780	7.0%	\$ 155,911,612	7.0%
OVHA		ABD	\$ 177,566,989	\$ 72,980,032	\$ 133,175,242	\$ 54,735,024	\$ 193,725,585	9.1%	\$ 79,776,196	9.3%	\$ 148,783,702	6.1%	\$ 61,269,129	6.1%	\$ 157,859,508	6.1%	\$ 65,006,546	6.1%	\$ 167,441,580	6.1%	\$ 68,952,443	6.1%
		MMA Impact	\$ (24,913,788)	\$ (10,239,567)	\$ (24,913,788)	\$ (10,239,567)	\$ (55,507,919)	11.4%	\$ (22,858,161)		\$ (55,507,919)	11.4%	\$ (22,858,161)		\$ (55,507,919)	11.4%	\$ (22,858,161)		\$ (55,507,919)	11.4%	\$ (22,858,161)	
		SLMB/QMB	\$ 962,723	\$ 395,679	\$ 962,723	\$ 395,679	\$ 2,012,026	4.5%	\$ 828,552		\$ 2,012,026	4.5%	\$ 828,552		\$ 2,012,026	4.5%	\$ 828,552		\$ 2,012,026	4.5%	\$ 828,552	
		ABD Adjusted	\$ 153,615,924	\$ 63,136,145	\$ 109,224,177	\$ 44,891,137	\$ 140,229,691	-8.7%	\$ 57,746,587	-8.5%	\$ 148,783,702	6.1%	\$ 61,269,129	6.1%	\$ 157,859,508	6.1%	\$ 65,006,546	6.1%	\$ 167,441,580	6.1%	\$ 68,952,443	6.1%
OVHA	GC	ABD - GC remainder	\$ 135,325,669	\$ 55,618,850	\$ 95,506,486	\$ 39,253,166	\$ 121,407,699	-10.3%	\$ 49,995,691	-10.1%	\$ 128,813,569	6.1%	\$ 53,045,428	6.1%	\$ 136,671,197	6.1%	\$ 56,281,199	6.1%	\$ 145,008,140	6.1%	\$ 59,714,352	6.1%
	GC	Families - Reg	\$ 146,389,285	\$ 60,165,996	\$ 109,791,963	\$ 45,124,497	\$ 157,000,824	7.2%	\$ 64,652,939	7.5%	\$ 165,478,869	5.4%	\$ 68,144,198	5.4%	\$ 174,414,728	5.4%	\$ 71,823,985	5.4%	\$ 183,833,123	5.4%	\$ 75,702,480	5.4%
	GC	Families - HlthyBaby/FamInfntTod	\$ 2,234,724	\$ 918,472	\$ 1,676,043	\$ 688,854	\$ 2,324,113	4.0%	\$ 957,070	4.2%	\$ 2,417,078	4.0%	\$ 995,353	4.0%	\$ 2,513,761	4.0%	\$ 1,035,167	4.0%	\$ 2,614,311	4.0%	\$ 1,076,573	4.0%
	GC	Ladies First	\$ 1,317,335	\$ 541,425	\$ 988,001	\$ 406,068	\$ 1,580,802	20.0%	\$ 650,974	20.2%	\$ 1,724,655	9.1%	\$ 496,269	-23.8%	\$ 1,881,598	9.1%	\$ 541,430	9%	\$ 2,052,824	9.1%	\$ 549,644	2%
	GC	Underinsured Children	\$ 1,627,859	\$ 669,050	\$ 1,220,894	\$ 501,788	\$ 2,021,801	24.2%	\$ 832,578	24.4%	\$ 2,426,161	20.0%	\$ 999,093	20.0%	\$ 2,911,393	20.0%	\$ 1,198,912	20.0%	\$ 3,493,672	20.0%	\$ 1,438,694	20.0%
	GC	Caretakers	\$ 5,699,850	\$ 2,342,638	\$ 4,274,888	\$ 1,756,979	\$ 6,349,633	11.4%	\$ 2,614,779	11.6%	\$ 6,984,596	10.0%	\$ 2,876,257	10.0%	\$ 7,683,056	10.0%	\$ 3,163,883	10.0%	\$ 8,451,362	10.0%	\$ 3,480,271	10.0%
	GC	VHAP	\$ 67,546,837	\$ 27,761,750	\$ 50,660,128	\$ 20,821,312	\$ 79,299,987	17.4%	\$ 32,655,734	17.6%	\$ 90,005,485	13.5%	\$ 37,064,259	13.5%	\$ 102,156,225	13.5%	\$ 42,067,934	13.5%	\$ 115,947,316	13.5%	\$ 47,747,105	13.5%
	GC	Buy In - remaining in GC	\$ 10,972,993	\$ 4,921,584	\$ 8,229,745	\$ 3,691,188	\$ 11,705,908	7.3%	\$ 4,820,493	-2.1%	\$ 13,830,879	7.3%	\$ 5,695,556	-5.1%	\$ 14,840,533	7.3%	\$ 6,111,331	7.3%	\$ 15,923,892	7.3%	\$ 6,557,459	7.3%
	GC	SLMB/QMB	\$ 1,492,321	\$ 613,344	\$ 1,492,321	\$ 613,344	\$ 1,851,374	24.1%	\$ 762,396	24.3%												
	GC	Legal Aid	\$ 384,375	\$ 192,188	\$ 288,281	\$ 144,141	\$ 420,506	9.4%	\$ 210,253	9.4%	\$ 460,034	9.4%	\$ 230,017	9.4%	\$ 503,277	9.4%	\$ 251,639	9.4%	\$ 550,585	9.4%	\$ 275,293	9.4%
	GC	Rate Setting	\$ 620,468	\$ 310,234	\$ 465,351	\$ 232,676	\$ 651,491	5.0%	\$ 325,746	5.0%	\$ 684,066	5.0%	\$ 342,033	5.0%	\$ 718,269	5.0%	\$ 359,135	5.0%	\$ 754,183	5.0%	\$ 377,091	5.0%
	GC	Lund Center	\$ 625,000	\$ 256,875	\$ 468,750	\$ 192,656	\$ 656,250	5.0%	\$ 270,244	5.2%	\$ 689,063	5.0%	\$ 283,756	5.0%	\$ 723,516	5.0%	\$ 297,944	5.0%	\$ 759,691	5.0%	\$ 312,841	5.0%
	GC	VHAP Rx - in GC 1 Qtr	\$ 10,857,410	\$ 4,462,396	\$ 5,428,705	\$ 2,231,198	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	GC	Vscript - in GC 1 Qtr	\$ 3,205,599	\$ 1,317,501	\$ 1,602,799	\$ 658,751	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	GC	VPharm- PartD Wrap-matched	\$ 1,441,965	\$ 592,648	\$ 1,441,965	\$ 592,648	\$ 3,212,698	11.4%	\$ 1,322,989		\$ 3,578,946	11.4%	\$ 1,473,810	11.4%	\$ 3,986,945	11.4%	\$ 1,641,824	11.4%	\$ 4,441,457	11.4%	\$ 1,828,992	11.4%
	GC	VT Rx	\$ 471,942	\$ 193,968	\$ 471,942	\$ 193,968	\$ 1,051,486	11.4%	\$ 433,002	n/a	\$ 1,171,355	11.4%	\$ 482,364	11.4%	\$ 1,304,890	11.4%	\$ 537,354	11.4%	\$ 1,453,647	11.4%	\$ 598,612	11.4%
		Sub-Total OVHA	\$ 390,213,632	\$ 160,878,918	\$ 284,008,262	\$ 117,103,232	\$ 389,534,573	-0.2%	\$ 160,504,887	-0.2%	\$ 418,264,754	7.4%	\$ 172,128,392	7.2%	\$ 450,309,388	7.7%	\$ 185,311,734	7.7%	\$ 485,284,202	7.8%	\$ 199,659,406	7.7%
		Total Global Commitment - w/in Actuary Premium	\$ 739,397,825	\$ 306,053,238	\$ 545,896,407	\$ 225,983,972	\$ 761,056,920		\$ 315,292,066		\$ 814,543,629		\$ 338,387,475		\$ 873,069,607		\$ 362,624,995		\$ 936,374,149		\$ 388,795,467	
Admin	GC	DAIL- LTC Admin	\$ 1,016,400	\$ 421,080	\$ -	\$ -	\$ 1,016,400	\$ 421,080	\$ -	\$ 1,067,220	5.0%	\$ 533,610	26.7%	\$ 1,120,581	5.0%	\$ 560,291	5.0%	\$ 1,176,610	5.0%	\$ 588,305	5.0%	
Admin	GC	DCF - LTC Admin	\$ 910,556	\$ 455,278	\$ -	\$ -	\$ 910,556	\$ 455,278	\$ -	\$ 956,084	5.0%	\$ 478,042	5.0%	\$ 1,003,888	5.0%	\$ 501,944	5.0%	\$ 1,054,082	5.0%	\$ 527,041	5.0%	
Admin	GC	OVHA - LTC Admin	\$ 362,794	\$ 181,397	\$ -	\$ -	\$ 362,794	\$ 181,397	\$ -	\$ 380,934	5.0%	\$ 190,467	5.0%	\$ 399,980	5.0%	\$ 199,990	5.0%	\$ 419,979	5.0%	\$ 209,990	5.0%	
Admin	GC	AHS CO	\$ 1,641,026	\$ 820,513	\$ -	\$ -	\$ 1,723,077	5.0%	\$ 861,539	5.0%	\$ 1,809,231	5.0%	\$ 904,616	5.0%	\$ 1,899,693	5.0%	\$ 949,846	5.0%	\$ 1,994,677	5.0%	\$ 997,339	5.0%
Admin	GC	DCF - HATF (not on map hist)	\$ 862,030	\$ 431,015	\$ -	\$ -	\$ 905,132	5.0%	\$ 452,566	5.0%	\$ 950,389	5.0%	\$ 475,194	5.0%	\$ 997,908	5.0%	\$ 498,954	5.0%	\$ 1,047,803	5.0%	\$ 523,902	5.0%
Admin	GC	DCF/OCS- HATF (not on map hist)	\$ 367,778	\$ 183,889	\$ -	\$ -	\$ 421,515	5.0%	\$ 210,758	14.6%	\$ 442,591	5.0%	\$ 221,295	5.0%	\$ 464,720	5.0%	\$ 232,360	5.0%	\$ 487,956	5.0%	\$ 243,978	5.

Medicaid Current Law 5yr Projection
25-Aug-05

	FY06 update Dec-05		FY06 3 Qtrs Based on Dec 05 Update		Forecast and E-Board Adopted SFY 2007		Projected SFY 2008		Projected SFY 2009		Projected SFY 2010		
	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	Gross Funds	State Funds	
Revenue	\$ 403,124,647		\$ 33,043,406	MCO Invests	\$ 44,093,426	11.97%	\$ 388,449,998		\$ 401,672,361		\$ 415,582,246		\$ 430,216,425
HATF			\$ 2,681,008	BAA+'s to MCO	\$ 2,815,058		\$ -		\$ -		\$ -		\$ -
End Yr Fund Balance	\$ 5,394,231		\$ 35,724,414		\$ 46,908,484		\$ -		\$ -		\$ -		\$ -
GF Onetime	\$ 22,135,000				\$ 46,600,000	-1.7%	\$ 45,800,000	-1.7%	\$ 45,000,000	-1.7%	\$ 44,200,000	-1.8%	\$ 44,200,000
GF Base	\$ 95,104,989				\$ 98,909,189	4.0%	\$ 102,865,556	4.0%	\$ 106,980,178	4.0%	\$ 111,259,385	4.0%	\$ 111,259,385
Tob Settlement	\$ 17,250,000		\$ 581,620,821		\$ 17,250,000	0.0%	\$ 17,250,000	0.0%	\$ 17,250,000	0.0%	\$ 17,250,000	0.0%	\$ 17,250,000
Tob Taxes	\$ 47,400,000				\$ 46,600,000	-1.7%	\$ 45,800,000	-1.7%	\$ 45,000,000	-1.7%	\$ 44,200,000	-1.8%	\$ 44,200,000
Rx \$0.10 per script	\$ 1,234,132				\$ 1,271,156	3.0%	\$ 1,309,291	3.0%	\$ 1,348,569	3.0%	\$ 1,389,026	3.0%	\$ 1,389,026
NH/HH/ICF-MR Provider Tax	\$ 17,682,595				\$ 17,859,421	1.0%	\$ 18,038,015	1.0%	\$ 18,218,395	1.0%	\$ 18,400,579	1.0%	\$ 18,400,579
VSH/Retreat Provider tax	\$ 982,632				\$ 992,458	1.0%	\$ 1,002,383	1.0%	\$ 1,012,407	1.0%	\$ 1,022,531	1.0%	\$ 1,022,531
Hosp Provider Taxes (Base)	\$ 45,890,572				\$ 49,102,912	7.0%	\$ 52,540,116	7.0%	\$ 56,217,924	7.0%	\$ 60,153,179	7.0%	\$ 60,153,179
Bump to 6% on Hospitals	\$ 9,622,217				\$ 10,295,772	7.0%	\$ 11,016,476	7.0%	\$ 11,787,630	7.0%	\$ 12,612,764	7.0%	\$ 12,612,764
State Share premiums	\$ 6,132,883				\$ 6,255,541	2.0%	\$ 6,380,651	2.0%	\$ 6,508,265	2.0%	\$ 6,638,430	2.0%	\$ 6,638,430
Other	\$ 150,000				\$ 150,000	0.0%	\$ 150,000	0.0%	\$ 150,000	0.0%	\$ 150,000	0.0%	\$ 150,000
NON OVHA													
GF Base	\$ 97,156,621				\$ 101,042,886	4.0%	\$ 105,084,601	4.0%	\$ 109,287,985	4.0%	\$ 113,659,505	4.0%	\$ 113,659,505
Tobacco Settlement	\$ 1,600,277				\$ 1,600,277	0.0%	\$ 1,600,277	0.0%	\$ 1,600,277	0.0%	\$ 1,600,277	0.0%	\$ 1,600,277
DOE - LEAs Special Ed Services	\$ 14,590,500				\$ 15,715,318	3.5%	\$ 16,265,354	3.5%	\$ 16,834,641	3.5%	\$ 17,423,853	3.5%	\$ 17,423,853
VDH - UVM VCHIP - LEAs EPSDT	\$ 2,959,900				\$ 3,063,497	3.5%	\$ 3,170,719	3.5%	\$ 3,281,694	3.5%	\$ 3,396,553	3.5%	\$ 3,396,553
MH -Valley Vista ITs/ LEAs SBSix / MH ITs	\$ 14,497,916				\$ 15,309,799	5.6%	\$ 16,167,148	5.6%	\$ 17,072,508	5.6%	\$ 18,028,569	5.6%	\$ 18,028,569
SF Early Childhood - Spec Ed Med Admin SF	\$ 975,015				\$ 975,015	0.0%	\$ 975,015	0.0%	\$ 975,015	0.0%	\$ 975,015	0.0%	\$ 975,015
DAIL Other IT/SF	\$ 1,706,758				\$ 1,706,758	0.0%	\$ 1,706,758	0.0%	\$ 1,706,758	0.0%	\$ 1,706,758	0.0%	\$ 1,706,758
VDH Admin -RWJ Oral/ LEAs EPSDT/Misc	\$ 658,409				\$ 350,000	0.0%	\$ 350,000	0.0%	\$ 350,000	0.0%	\$ 350,000	0.0%	\$ 350,000
DEFICIT /SURPLUS	\$ (4,908,168)				\$ (62,704,342)		\$ (71,945,422)		\$ (93,356,654)		\$ (116,833,529)		\$ (116,833,529)
	\$ (4,908,168)				\$ (73,921,129)		\$ (145,866,551)		\$ (239,223,205)		\$ (356,056,734)		\$ (356,056,734)

MCO Investments													
base	\$ 31,079,607				\$ 44,093,426		\$ 46,298,097		\$ 48,613,002		\$ 51,043,652		\$ 51,043,652
onetime	\$ 1,963,799				0		0		0		0		0
	\$ 33,043,406				\$ 44,093,426		\$ 46,298,097		\$ 48,613,002		\$ 51,043,652		\$ 51,043,652
Saving due to MCO Investments	\$ 19,462,566				\$ 25,935,753		\$ 27,232,541		\$ 28,594,168		\$ 30,023,876		\$ 30,023,876
Surplus/(deficit) after MCO Savings	\$ 14,554,398				\$ (36,768,589)		\$ (44,712,881)		\$ (64,762,486)		\$ (86,809,653)		\$ (86,809,653)
Cummulative after MCO Savings	\$ 14,554,398				\$ (22,214,191)		\$ (66,927,072)		\$ (131,689,558)		\$ (218,499,211)		\$ (218,499,211)

10 V.S.A. § 1283. Contingency fund

§ 1283. Contingency fund

(a) An environmental contingency fund is established within the control of the secretary. Subject to the limitations contained in subsection (b) of this section, disbursements from the fund may be made by the secretary to undertake actions that the secretary considers necessary to investigate or mitigate, or both, the effects of hazardous material releases to the environment.

(b) Disbursements under this subsection may be made for emergency purposes or to respond to other than emergency situations; provided, however, that disbursements in response to an individual situation which is not an emergency situation shall not exceed \$100,000.00 for costs attributable to each of the subdivisions of this subsection, unless the secretary has received the approval of the general assembly, or the joint fiscal committee, in case the general assembly is not in session. Furthermore, the balance in the fund shall not be drawn below the amount of \$100,000.00, except in emergency situations. If the balance of the fund becomes insufficient to allow a proper response to one or more emergencies that have occurred, the secretary shall appear before the emergency board, as soon as possible, and shall request that necessary funds be provided. Within these limitations, disbursements from the fund may be made:

Joint Fiscal Committee
Roll call votes
2005-06

Meeting date: 12/13

Issue: GC Final Conclusion Approval

MEMBER	YES	NO	ABSTAIN	ABSENT
Sen. Bartlett	✓			
Sen. Cummings	✓			
Rep. Obuchowski		✓		
Rep. Perry	✓			
Sen. Sears				✓
Rep. Severance	✓			
Sen. Snelling	✓			
Sen. Welch				✓
Rep. Westman	✓			
Rep. Heath, Chair	✓			



STATE OF VERMONT
LEGISLATIVE COUNCIL

MEMORANDUM

To: Representative Martha Heath
Chair, Joint Fiscal Committee

From: William P. Russell, Chief Legislative Counsel

Date: November 29, 2005

Subject: Duration of JFC's Authority to Approve the Global Commitment

Question

Is the authority of the Joint Fiscal Committee to approve the Global Commitment to Health Demonstration Waiver Program divested if it meets in order to ascertain the fulfillment of conditions to its approval within 30 days of the legislative session?

Answer

The FY 2006 General Appropriations Act granted to the Joint Fiscal Committee the authority to approve the "Global Commitment to Health" with this language:

Any agreement, waiver ...or commitment..., such as global funding commitments..., is conditional upon approval by act of the general assembly, or, if the general assembly is not in session and the speaker and the president pro tempore determine that it will not reconvene within the next 30-day period, by a majority vote of the joint fiscal committee upon recommendation of the health access oversight committee." [Section 250(c)]

On September 30, 2005 the Joint Fiscal Committee unanimously granted contingent approval of the Global Commitment program. Notably, in its motion of approval the JFC explicitly allowed for the agreement to be implemented beginning October 1, 2005.

The committee's approval was contingent on five conditions. Those conditions were established to provide the committee with information, not available on September 30, on several key provisions of the agreement. The information was to be provided to the



committee at a future date (since extended) to provide assurance that significant features and details of the agreement were in accord with all representations made to the committee which formed the basis of the committee's approval.

In my opinion, September 30, 2005 is the operative date for the purposes of determining the Joint Fiscal Committee's authority to act. Its actions at meetings since September 30 (including those proposed for meetings in December) have been (or will be) for the purpose of ascertaining whether the conditions upon which the committee granted its approval have been met. Their purpose is more in the nature of oversight, and not for the purpose of revising or amending the approval previously granted on September 30.

Failure to meet the conditions, or any changes made to the conditions, or the addition of new conditions, may void the approval granted on September 30. In this case, and at this date, authority to approve a revised agreement would revert to the General Assembly under the provisions of Section 250(c) of the Appropriations Act.



CHARLES P. SMITH, SECRETARY

STATE OF VERMONT
AGENCY OF ADMINISTRATION

MEMORANDUM

TO: Joint Fiscal Committee

FROM: Charles P. Smith, Secretary of Administration *Charles P. Smith /hj*

DATE: December 5, 2005

RE: Approval for Environmental Contingency Fund (ECF) expenditures

Pursuant to 10 VSA Sec. 1283(b), the Secretary of the Agency of Natural Resources must receive Joint Fiscal Committee approval for Environmental Contingency Fund (ECF) disbursements on a site to exceed \$100,000 under each of the subdivisions under subsection (b).

The attached request for Joint Fiscal Committee approval relates to expenditures for investigation and remediation of contamination at the 9 Depot Square site in Barre, which had at one time been a drycleaning facility. The Agency of Natural Resources has used ECF funds since 2000 to address these contamination problems, and is now facing cumulative expenditures over \$100,000 in two of the expenditure categories under 10 VSA Sec 1283(b). Further details are provided on the attached request from the Agency.

The balance in the ECF will not drop below \$100,000, and the Fund is projected to have a \$481,000 balance at the end of FY 2006. The Administration is reviewing the long-range condition of the ECF in the course of developing the FY 2007 Executive Budget.

There is some urgency to this request. Litigation is pending and additional investigation is required to support the State's case, and the remedial treatment system requires on-going maintenance.

I have been assured that the Agency has improved its procedures for monitoring expenditures from the Fund so that retroactive requests will not arise in the future.

A draft motion is attached. Thank you for your consideration.

Attachment

PROPOSED MOTION

Pursuant to 10 VSA Sec. 1283(b), The Joint Fiscal Committee approves Environmental Contingency Fund expenditures of \$50,335 in excess of \$100,000 under subdivision (b)(2), and \$20,000 in excess of \$100,000 under subdivision (b)(4), for investigation and remediation at the contaminated 9 Depot Square site in Barre, Vermont.

Agency of Natural Resources
Department of Environmental Conservation

Waste Management Division
West Building
802-241-3888

MEMORANDUM

To: Charles P. Smith, Secretary, Agency of Administration

Through: Canute Dalmasse, Deputy Secretary, Agency of Natural Resources
 Jeff Wennberg, Commissioner, Department of Environmental Conservation
 P. Howard Flanders, Director, Waste Management Division

From: George Desch, Program Manager, Waste Management Division

Date: December 5, 2005

Subject: Expenditures from the Environmental Contingency Fund for the 9 Depot Square site in Barre (Site #99-2631)

The Agency of Natural Resources (Agency) requests to appear before the Joint Fiscal Committee of the General Assembly to discuss expenditures from the Environmental Contingency Fund (ECF) on the 9 Depot Square site in Barre. In this appearance the Agency requests:

- (1) Retroactive approval for the expenditure of \$10,334.71 in excess of the cap established under 10 V.S.A. § 1283(b); and
- (2) Approval of an additional \$40,000.00 to be spent under subdivision (b)(2) (investigations) and \$20,000.00 to be spent under subdivision (b)(3) (remedial actions). The details of this request are more fully explained below.

Site Background

The Agency determined that the site was contaminated in 1999 as a result of an assessment conducted at the neighboring property. Contaminants typically associated with drycleaning activities were detected in a sample taken from a sump in the basement as a part of that assessment. The source of the contamination was traced to the neighboring 9 Depot Square building, which had been a drycleaning facility from approximately 1947 to 1992. The 9 Depot Square building is currently a pizza restaurant. The Agency initially requested the current owner to conduct an investigation of the site to determine the extent of contamination. The current owner declined to voluntarily initiate this site investigation work. In 2000 the Agency began to investigate the extent of contamination at the site using ECF funds. Significant levels of dry cleaning compounds such as perchloroethylene (PCE) in groundwater, soil, and indoor air were found in the course of this investigation. The Agency requested the EPA to use federal funds to remove the sources of contamination.

Potentially responsible parties have been identified at this site, and the Attorney General's Office is currently assisting the Agency in having future work performed by these parties and to recover ECF funds spent at this site.

Request for Joint Fiscal Committee Approval.

The funds spent at this site have been allocated to the following categories, as indicated in 10 V.S.A. § 1283, as follows:

- **10 V.S.A. § 1283(b)(2). *Investigation of an actual or threatened release to the environment:***

The Agency has currently spent \$110,334.71 to investigate the releases from this site. These funds were used to examine the contamination's impacts on indoor air at the restaurant, determine the contaminant impacts on groundwater, the contaminant impact on the nearby Stevens Branch, and the contaminant impact on subsurface soils. The results of this investigation show a property that is significantly contaminated.

Investigation of source contaminants that took place in October 2005, and invoiced in November 2005, caused the Agency to exceed the statutory cap of \$100,000.00. This overrun was an oversight on the part of the Agency and procedures have been put in place to ensure that such oversights do not occur in the future.

The Agency is requesting Joint Fiscal Committee approval for the \$10,334.71 over the cap and approval to expend an additional \$40,000.00 for additional investigatory work at the site. These funds will be used to continue contaminant monitoring at the site, and further delineate the contaminant plume.

- **10 V.S.A. § 1283(b)(4). *Take appropriate remedial action to prevent or minimize the immediate impact of such release to the public health or the environment:***

The Agency has currently spent \$86,091.54 to remediate the impacts that have resulted from contamination at the site. The indoor air quality at the site has been impacted by the contamination at the site. The Agency has installed an indoor air treatment system to reduce contaminant levels in this structure.

The Agency is requesting Joint Fiscal Committee approval to spend \$20,000.00 in ECF funds in excess of the \$100,000.00 cap to maintain the indoor air treatment system (e.g. replacement of filters and disposal of wastes) and monitor indoor air quality.

- **10 V.S.A. § 1283(b)(3). *To take appropriate removal action:***

The Agency has currently spent \$60,452.70 under this subdivision. At this time, the Agency does not request an approval to increase the allowable \$100,000.00 under this subdivision. The Agency has installed a soil vapor extraction system to treat soil vapor underneath the building in an effort to prevent these vapors from entering the building.

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,281	\$947.98	\$101.21	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	1,320	\$1,038.17	\$114.16
2. NH	1	\$1,593.18	\$0.13	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,672.84	\$0.14
3. Outpatient	4,582	\$232.73	\$88.86	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	4,818	\$251.34	\$100.91
4. Physician & Other	25,028	\$47.94	\$99.98	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,600	\$50.33	\$107.37
5. Home Health	948	\$227.06	\$17.94	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,080	\$252.03	\$22.68
6. Nursing	52	\$850.05	\$3.65	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	54	\$892.55	\$3.99
7. Dental	2,258	\$50.87	\$9.57	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,348	\$53.41	\$10.45
8. Transportation	5,899	\$17.22	\$8.47	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,121	\$18.08	\$9.22
9. DME/Supplies	1,616	\$98.70	\$13.29	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	1,755	\$104.62	\$15.30
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	259	\$592.73	\$12.78	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	264	\$616.44	\$13.56
12. OADAP	2,275	\$36.67	\$6.95	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,750	\$40.71	\$9.33
13. Ambulance	902	\$41.42	\$3.11	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	978	\$43.50	\$3.54
14. Prescribed Drugs	1,336,703	\$1.30	\$145.11	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,382,782	\$1.41	\$162.12
15. Behavioral Health - IP	334	\$325.26	\$9.06	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	344	\$341.53	\$9.80
16. Behavioral Health - OP/Phy	9,198	\$142.95	\$109.57	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	9,912	\$150.09	\$123.98
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	7,213	\$386.82	\$232.52	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	7,502	\$406.16	\$253.91
19. HCBS TBI	381	\$166.04	\$5.27	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	392	\$174.34	\$5.69
20. Buy-In			\$0.00									\$0.00
Total			\$867.46									\$966.18

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,320	\$1,038.17	\$114.16	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	1,420	\$853.07	\$100.97
2. NH	1	\$1,672.84	\$0.14	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,756.48	\$0.15
3. Outpatient	4,818	\$251.34	\$100.91	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	5,294	\$271.45	\$119.77
4. Physician & Other	25,600	\$50.33	\$107.37	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	26,185	\$52.85	\$115.32
5. Home Health	1,080	\$252.03	\$22.68	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,230	\$279.76	\$28.69
6. Nursing	54	\$892.55	\$3.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	56	\$937.18	\$4.36
7. Dental	2,348	\$53.41	\$10.45	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,442	\$56.08	\$11.41
8. Transportation	6,121	\$18.08	\$9.22	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,350	\$18.99	\$10.05
9. DME/Supplies	1,755	\$104.62	\$15.30	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	1,907	\$110.90	\$17.62
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	264	\$616.44	\$13.56	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	269	\$641.10	\$14.38
12. OADAP	2,750	\$40.71	\$9.33	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,326	\$45.18	\$12.52
13. Ambulance	978	\$43.50	\$3.54	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	1,060	\$45.67	\$4.03
14. Prescribed Drugs	1,382,782	\$1.41	\$162.12	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,430,450	\$1.52	\$181.12
15. Behavioral Health - IP	344	\$341.53	\$9.80	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	355	\$358.60	\$10.60
16. Behavioral Health - OP/Phy	9,912	\$150.09	\$123.98	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	10,682	\$157.60	\$140.29
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	7,502	\$406.16	\$253.91	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	7,802	\$426.47	\$277.27
19. HCBS TBI	392	\$174.34	\$5.69	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	404	\$183.06	\$6.16
20. Buy-In			\$0.00									\$0.00
Total			\$966.18									\$1,054.71

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,420	\$853.07	\$100.97	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	1,463	\$887.20	\$108.16
2. NH	1	\$1,756.48	\$0.15	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,844.31	\$0.17
3. Outpatient	5,294	\$271.45	\$119.77	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	5,568	\$293.17	\$136.02
4. Physician & Other	26,185	\$52.85	\$115.32	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	26,784	\$55.49	\$123.85
5. Home Health	1,230	\$279.76	\$28.69	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,402	\$310.53	\$36.27
6. Nursing	56	\$937.18	\$4.36	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	58	\$984.04	\$4.76
7. Dental	2,442	\$56.08	\$11.41	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,540	\$58.89	\$12.46
8. Transportation	6,350	\$18.99	\$10.05	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,588	\$19.94	\$10.95
9. DME/Supplies	1,907	\$110.90	\$17.62	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	2,071	\$117.55	\$20.29
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	269	\$641.10	\$14.38	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	275	\$666.74	\$15.26
12. OADAP	3,326	\$45.18	\$12.52	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	4,021	\$50.15	\$16.81
13. Ambulance	1,060	\$45.67	\$4.03	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	1,149	\$47.95	\$4.59
14. Prescribed Drugs	1,430,450	\$1.52	\$181.12	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,479,762	\$1.64	\$202.36
15. Behavioral Health - IP	355	\$358.60	\$10.60	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	365	\$376.53	\$11.46
16. Behavioral Health - OP/Phy	10,682	\$157.60	\$140.29	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	11,511	\$165.48	\$158.74
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	7,802	\$426.47	\$277.27	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	8,114	\$447.79	\$302.77
19. HCBS TBI	404	\$183.06	\$6.16	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	416	\$192.21	\$6.66
20. Buy-In			\$0.00									\$0.00
Total			\$1,054.71									\$1,171.58

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	847	\$676.57	\$47.73	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	872	\$740.94	\$53.84
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,309	\$184.67	\$35.53	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	2,428	\$199.45	\$40.35
4. Physician & Other	13,700	\$38.34	\$43.77	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,013	\$40.25	\$47.01
5. Home Health	15,313	\$153.72	\$196.16	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	17,445	\$170.63	\$248.06
6. Nursing	1,373	\$576.90	\$66.01	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,428	\$605.75	\$72.09
7. Dental	3,015	\$49.96	\$12.55	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,135	\$52.45	\$13.71
8. Transportation	3,000	\$17.09	\$4.27	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,112	\$17.95	\$4.65
9. DME/Supplies	2,782	\$126.47	\$29.32	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,022	\$134.06	\$33.76
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,451	\$528.75	\$328.29	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,600	\$549.90	\$348.25
12. OADAP	1,095	\$36.88	\$3.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,323	\$40.94	\$4.52
13. Ambulance	217	\$49.30	\$0.89	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	235	\$51.76	\$1.02
14. Prescribed Drugs	751,750	\$1.33	\$83.21	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	777,665	\$1.43	\$92.97
15. Behavioral Health - IP	706	\$736.19	\$43.30	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	727	\$773.00	\$46.83
16. Behavioral Health - OP/Phy	79,357	\$38.33	\$253.50	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	85,518	\$40.25	\$286.85
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	8,886	\$234.41	\$173.58	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,241	\$246.13	\$189.55
19. HCBS TBI	300	\$84.55	\$2.11	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	309	\$88.78	\$2.29
20. Buy-In			\$0.00									\$0.00
Total			\$1,323.61									\$1,485.73

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	872	\$740.94	\$53.84	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	939	\$608.84	\$47.62
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,428	\$199.45	\$40.35	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	2,668	\$215.40	\$47.89
4. Physician & Other	14,013	\$40.25	\$47.01	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,333	\$42.27	\$50.48
5. Home Health	17,445	\$170.63	\$248.06	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	19,874	\$189.40	\$313.68
6. Nursing	1,428	\$605.75	\$72.09	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,485	\$636.04	\$78.72
7. Dental	3,135	\$52.45	\$13.71	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,261	\$55.08	\$14.97
8. Transportation	3,112	\$17.95	\$4.65	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,229	\$18.84	\$5.07
9. DME/Supplies	3,022	\$134.06	\$33.76	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,282	\$142.10	\$38.87
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,600	\$549.90	\$348.25	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,752	\$571.90	\$369.43
12. OADAP	1,323	\$40.94	\$4.52	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,600	\$45.44	\$6.06
13. Ambulance	235	\$51.76	\$1.02	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	255	\$54.35	\$1.16
14. Prescribed Drugs	777,665	\$1.43	\$92.97	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	804,473	\$1.55	\$103.87
15. Behavioral Health - IP	727	\$773.00	\$46.83	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	749	\$811.65	\$50.65
16. Behavioral Health - OP/Phy	85,518	\$40.25	\$286.85	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	92,158	\$42.26	\$324.58
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,241	\$246.13	\$189.55	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,611	\$258.44	\$206.99
19. HCBS TBI	309	\$88.78	\$2.29	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	318	\$93.22	\$2.47
20. Buy-In			\$0.00									\$0.00
Total			\$1,485.73									\$1,662.49

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	939	\$608.84	\$47.62	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	967	\$633.19	\$51.01
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,668	\$215.40	\$47.89	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	2,806	\$232.64	\$54.39
4. Physician & Other	14,333	\$42.27	\$50.48	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,661	\$44.38	\$54.22
5. Home Health	19,874	\$189.40	\$313.68	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	22,641	\$210.24	\$396.66
6. Nursing	1,485	\$636.04	\$78.72	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,545	\$667.84	\$85.96
7. Dental	3,261	\$55.08	\$14.97	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,391	\$57.83	\$16.34
8. Transportation	3,229	\$18.84	\$5.07	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,350	\$19.79	\$5.52
9. DME/Supplies	3,282	\$142.10	\$38.87	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,566	\$150.63	\$44.76
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,752	\$571.90	\$369.43	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,907	\$594.77	\$391.89
12. OADAP	1,600	\$45.44	\$6.06	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,935	\$50.44	\$8.13
13. Ambulance	255	\$54.35	\$1.16	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	276	\$57.07	\$1.31
14. Prescribed Drugs	804,473	\$1.55	\$103.87	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	832,205	\$1.67	\$116.04
15. Behavioral Health - IP	749	\$811.65	\$50.65	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	771	\$852.24	\$54.78
16. Behavioral Health - OP/Phy	92,158	\$42.26	\$324.58	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	99,314	\$44.38	\$367.27
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,611	\$258.44	\$206.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,995	\$271.36	\$226.03
19. HCBS TBI	318	\$93.22	\$2.47	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	328	\$97.88	\$2.67
20. Buy-In			\$0.00									\$0.00
Total			\$1,662.49									\$1,876.99

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	249	\$896.09	\$18.59	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	254	\$931.94	\$19.72
2. NH	84	\$1,699.55	\$11.84	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	91	\$1,784.53	\$13.60
3. Outpatient	3,388	\$113.64	\$32.08	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,422	\$117.24	\$33.43
4. Physician & Other	19,150	\$27.59	\$44.03	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	20,299	\$28.97	\$49.01
5. Home Health	472	\$329.74	\$12.96	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	465	\$342.93	\$13.29
6. Nursing	27	\$759.43	\$1.74	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	28	\$789.81	\$1.85
7. Dental	1,592	\$44.40	\$5.89	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,656	\$46.62	\$6.43
8. Transportation	10,924	\$16.39	\$14.92	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,924	\$17.21	\$15.67
9. DME/Supplies	2,234	\$51.72	\$9.63	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	2,480	\$54.83	\$11.33
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	46	\$376.59	\$1.44	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	48	\$391.65	\$1.56
12. OADAP	629	\$45.73	\$2.40	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	757	\$50.76	\$3.20
13. Ambulance	473	\$69.12	\$2.73	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	492	\$72.58	\$2.98
14. Prescribed Drugs	2,073,270	\$1.28	\$221.82	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,139,902	\$1.39	\$247.26
15. Behavioral Health - IP	811	\$563.76	\$38.11	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	836	\$591.95	\$41.22
16. Behavioral Health - OP/Phy	8,609	\$218.61	\$156.83	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	9,169	\$229.54	\$175.39
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	9,531	\$418.10	\$332.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,912	\$439.00	\$362.62
19. HCBS TBI	959	\$157.24	\$12.57	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	988	\$165.10	\$13.59
20. Buy-in			\$57.55	15.6%	0.0%	15.6%	0.0%	0.0%	0.0%			\$66.53
Total			\$977.20									\$1,078.67

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	254	\$931.94	\$19.72	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	259	\$969.21	\$20.92
2. NH	91	\$1,784.53	\$13.60	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	100	\$1,873.76	\$15.61
3. Outpatient	3,422	\$117.24	\$33.43	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,456	\$120.96	\$34.84
4. Physician & Other	20,299	\$28.97	\$49.01	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	21,517	\$30.42	\$54.54
5. Home Health	465	\$342.93	\$13.29	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	458	\$356.65	\$13.63
6. Nursing	28	\$789.81	\$1.85	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	29	\$821.40	\$1.98
7. Dental	1,656	\$46.62	\$6.43	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,722	\$48.95	\$7.02
8. Transportation	10,924	\$17.21	\$15.67	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,925	\$18.07	\$16.46
9. DME/Supplies	2,480	\$54.83	\$11.33	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	2,753	\$58.11	\$13.33
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	48	\$391.65	\$1.56	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	50	\$407.31	\$1.68
12. OADAP	757	\$50.76	\$3.20	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	911	\$56.34	\$4.27
13. Ambulance	492	\$72.58	\$2.98	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	512	\$76.21	\$3.25
14. Prescribed Drugs	2,139,902	\$1.39	\$247.26	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,208,675	\$1.50	\$275.63
15. Behavioral Health - IP	836	\$591.95	\$41.22	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	861	\$621.54	\$44.58
16. Behavioral Health - OP/Phy	9,169	\$229.54	\$175.39	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	9,765	\$241.02	\$196.14
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,912	\$439.00	\$362.62	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	10,309	\$460.95	\$395.98
19. HCBS TBI	988	\$165.10	\$13.59	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	1,018	\$173.35	\$14.70
20. Buy-In			\$66.53	15.1%	0.0%	15.1%	0.0%	0.0%	0.0%			\$76.57
Total			\$1,078.67									\$1,191.14

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	259	\$969.21	\$20.92	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	264	\$1,007.98	\$22.19
2. NH	100	\$1,873.76	\$15.61	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	109	\$1,967.44	\$17.93
3. Outpatient	3,456	\$120.96	\$34.84	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,491	\$124.79	\$36.30
4. Physician & Other	21,517	\$30.42	\$54.54	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	22,808	\$31.94	\$60.71
5. Home Health	458	\$356.65	\$13.63	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	452	\$370.91	\$13.97
6. Nursing	29	\$821.40	\$1.98	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	30	\$854.26	\$2.11
7. Dental	1,722	\$48.95	\$7.02	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,791	\$51.40	\$7.67
8. Transportation	10,925	\$18.07	\$16.46	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,925	\$18.98	\$17.28
9. DME/Supplies	2,753	\$58.11	\$13.33	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	3,056	\$61.60	\$15.69
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	50	\$407.31	\$1.68	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	52	\$423.61	\$1.82
12. OADAP	911	\$56.34	\$4.27	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	1,095	\$62.54	\$5.71
13. Ambulance	512	\$76.21	\$3.25	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	532	\$80.02	\$3.55
14. Prescribed Drugs	2,208,675	\$1.50	\$275.63	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,279,659	\$1.62	\$307.24
15. Behavioral Health - IP	861	\$621.54	\$44.58	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	887	\$652.62	\$48.21
16. Behavioral Health - OP/Phy	9,765	\$241.02	\$196.14	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	10,401	\$253.07	\$219.35
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	10,309	\$460.95	\$395.98	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	10,721	\$484.00	\$432.41
19. HCBS TBI	1,018	\$173.35	\$14.70	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	1,048	\$182.02	\$15.90
20. Buy-In			\$76.57	10.0%	0.0%	10.0%	0.0%	0.0%	0.0%			\$84.23
Total			\$1,191.14									\$1,312.27

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,010	\$1,123.76	\$94.56	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	1,040	\$1,230.67	\$106.66
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,048	\$183.23	\$77.08	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	5,308	\$197.89	\$87.54
4. Physician & Other	24,158	\$56.34	\$113.42	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	24,710	\$59.16	\$121.82
5. Home Health	80	\$239.20	\$1.59	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	91	\$265.52	\$2.01
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,476	\$53.11	\$10.96	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,575	\$55.77	\$11.97
8. Transportation	2,384	\$19.48	\$3.87	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,473	\$20.45	\$4.22
9. DME/Supplies	239	\$103.23	\$2.05	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	259	\$109.42	\$2.37
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	869	\$146.93	\$10.64	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	886	\$152.81	\$11.29
12. OADAP	3,040	\$37.38	\$9.47	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,676	\$41.50	\$12.71
13. Ambulance	387	\$40.23	\$1.30	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	420	\$42.24	\$1.48
14. Prescribed Drugs	513,035	\$1.13	\$48.46	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	530,720	\$1.22	\$54.14
15. Behavioral Health - IP	114	\$31.56	\$0.30	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	118	\$33.13	\$0.32
16. Behavioral Health - OP/Phy	4,345	\$40.44	\$14.64	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	4,682	\$42.46	\$16.57
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	42	\$441.67	\$1.56	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	44	\$463.76	\$1.70
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$389.90									\$434.78

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,040	\$1,230.67	\$106.66	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	1,119	\$1,011.25	\$94.34
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,308	\$197.89	\$87.54	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	5,833	\$213.72	\$103.89
4. Physician & Other	24,710	\$59.16	\$121.82	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,275	\$62.12	\$130.83
5. Home Health	91	\$265.52	\$2.01	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	104	\$294.72	\$2.54
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,575	\$55.77	\$11.97	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,678	\$58.55	\$13.07
8. Transportation	2,473	\$20.45	\$4.22	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,566	\$21.47	\$4.59
9. DME/Supplies	259	\$109.42	\$2.37	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	282	\$115.99	\$2.72
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	886	\$152.81	\$11.29	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	904	\$158.92	\$11.97
12. OADAP	3,676	\$41.50	\$12.71	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	4,445	\$46.06	\$17.06
13. Ambulance	420	\$42.24	\$1.48	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	455	\$44.35	\$1.68
14. Prescribed Drugs	530,720	\$1.22	\$54.14	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	549,016	\$1.32	\$60.49
15. Behavioral Health - IP	118	\$33.13	\$0.32	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	121	\$34.79	\$0.35
16. Behavioral Health - OP/Phy	4,682	\$42.46	\$16.57	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	5,045	\$44.58	\$18.74
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	44	\$463.76	\$1.70	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	46	\$486.94	\$1.86
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$434.78									\$464.14

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,119	\$1,011.25	\$94.34	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	1,153	\$1,051.70	\$101.05
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,833	\$213.72	\$103.89	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	6,134	\$230.82	\$117.99
4. Physician & Other	25,275	\$62.12	\$130.83	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,852	\$65.22	\$140.51
5. Home Health	104	\$294.72	\$2.54	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	118	\$327.14	\$3.22
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,678	\$58.55	\$13.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,785	\$61.48	\$14.27
8. Transportation	2,566	\$21.47	\$4.59	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,662	\$22.55	\$5.00
9. DME/Supplies	282	\$115.99	\$2.72	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	306	\$122.95	\$3.14
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	904	\$158.92	\$11.97	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	922	\$165.28	\$12.70
12. OADAP	4,445	\$46.06	\$17.06	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	5,374	\$51.13	\$22.90
13. Ambulance	455	\$44.35	\$1.68	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	493	\$46.57	\$1.91
14. Prescribed Drugs	549,016	\$1.32	\$60.49	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	567,941	\$1.43	\$67.58
15. Behavioral Health - IP	121	\$34.79	\$0.35	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	125	\$36.53	\$0.38
16. Behavioral Health - OP/Phy	5,045	\$44.58	\$18.74	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	5,437	\$46.81	\$21.21
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	46	\$486.94	\$1.86	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	48	\$511.29	\$2.03
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$464.14									\$513.89

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	189	\$1,058.44	\$16.67	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	195	\$1,159.14	\$18.80
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,030	\$180.12	\$15.46	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	1,083	\$194.53	\$17.55
4. Physician & Other	11,421	\$35.72	\$33.99	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	11,682	\$37.50	\$36.51
5. Home Health	408	\$166.12	\$5.64	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	464	\$184.40	\$7.14
6. Nursing	20	\$594.23	\$0.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	21	\$623.94	\$1.08
7. Dental	3,959	\$42.47	\$14.01	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,117	\$44.60	\$15.30
8. Transportation	698	\$13.89	\$0.81	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	724	\$14.58	\$0.88
9. DME/Supplies	165	\$88.70	\$1.22	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	179	\$94.02	\$1.40
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,200	\$281.70	\$51.65	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,244	\$292.97	\$54.79
12. OADAP	400	\$72.65	\$2.42	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	484	\$80.65	\$3.25
13. Ambulance	90	\$48.47	\$0.36	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	98	\$50.89	\$0.41
14. Prescribed Drugs	253,145	\$0.85	\$17.92	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	261,871	\$0.92	\$20.02
15. Behavioral Health - IP	156	\$1,206.64	\$15.64	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	160	\$1,266.97	\$16.92
16. Behavioral Health - OP/Phy	20,650	\$28.55	\$49.13	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	22,253	\$29.98	\$55.59
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	322	\$309.21	\$8.29	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	335	\$324.67	\$9.06
19. HCBS TBI	4	\$29.47	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$30.95	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$234.23									\$258.72

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	195	\$1,159.14	\$18.80	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	209	\$952.48	\$16.63
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,083	\$194.53	\$17.55	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	1,190	\$210.09	\$20.83
4. Physician & Other	11,682	\$37.50	\$36.51	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	11,949	\$39.38	\$39.21
5. Home Health	464	\$184.40	\$7.14	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	529	\$204.68	\$9.02
6. Nursing	21	\$623.94	\$1.08	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	22	\$655.13	\$1.18
7. Dental	4,117	\$44.60	\$15.30	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,282	\$46.83	\$16.71
8. Transportation	724	\$14.58	\$0.88	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	751	\$15.31	\$0.96
9. DME/Supplies	179	\$94.02	\$1.40	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	194	\$99.67	\$1.61
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,244	\$292.97	\$54.79	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,289	\$304.69	\$58.12
12. OADAP	484	\$80.65	\$3.25	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	585	\$89.52	\$4.36
13. Ambulance	98	\$50.89	\$0.41	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	106	\$53.44	\$0.47
14. Prescribed Drugs	261,871	\$0.92	\$20.02	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	270,899	\$0.99	\$22.37
15. Behavioral Health - IP	160	\$1,266.97	\$16.92	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	165	\$1,330.32	\$18.29
16. Behavioral Health - OP/Phy	22,253	\$29.98	\$55.59	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	23,981	\$31.48	\$62.91
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	335	\$324.67	\$9.06	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	348	\$340.90	\$9.89
19. HCBS TBI	4	\$30.95	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$32.49	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$258.72									\$282.59

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	209	\$952.48	\$16.63	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	216	\$990.57	\$17.81
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,190	\$210.09	\$20.83	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	1,251	\$226.90	\$23.66
4. Physician & Other	11,949	\$39.38	\$39.21	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	12,222	\$41.35	\$42.11
5. Home Health	529	\$204.68	\$9.02	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	603	\$227.19	\$11.41
6. Nursing	22	\$655.13	\$1.18	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$687.89	\$1.29
7. Dental	4,282	\$46.83	\$16.71	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,453	\$49.17	\$18.25
8. Transportation	751	\$15.31	\$0.96	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	779	\$16.08	\$1.04
9. DME/Supplies	194	\$99.67	\$1.61	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	211	\$105.64	\$1.86
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,289	\$304.69	\$58.12	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,335	\$316.87	\$61.66
12. OADAP	585	\$89.52	\$4.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	707	\$99.36	\$5.86
13. Ambulance	106	\$53.44	\$0.47	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	115	\$56.11	\$0.54
14. Prescribed Drugs	270,899	\$0.99	\$22.37	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	280,237	\$1.07	\$25.00
15. Behavioral Health - IP	165	\$1,330.32	\$18.29	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	170	\$1,396.84	\$19.79
16. Behavioral Health - OP/Phy	23,981	\$31.48	\$62.91	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	25,843	\$33.05	\$71.18
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	348	\$340.90	\$9.89	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	362	\$357.95	\$10.80
19. HCBS TBI	4	\$32.49	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$34.12	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$282.59									\$312.26

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	451	\$1,018.13	\$38.27	3.0%	4.0%	7.1%	0.0%	5.7%	5.7%	465	\$1,119.04	\$43.32
2. NH	0	\$312.13	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$327.73	\$0.00
3. Outpatient	2,838	\$239.57	\$56.66	5.2%	8.0%	13.6%	6.1%	2.0%	8.2%	3,167	\$263.80	\$69.62
4. Physician & Other	17,211	\$43.06	\$61.75	2.3%	5.0%	7.4%	2.0%	3.9%	6.0%	17,950	\$46.99	\$70.28
5. Home Health	44	\$527.95	\$1.92	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	50	\$586.02	\$2.43
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	23	\$92.15	\$0.18	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$96.76	\$0.19
8. Transportation	19	\$25.23	\$0.04	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	19	\$26.50	\$0.04
9. DME/Supplies	239	\$113.92	\$2.27	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	259	\$120.75	\$2.61
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	16	\$330.59	\$0.45	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$343.82	\$0.47
12. OADAP	1,968	\$57.09	\$9.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,380	\$63.37	\$12.57
13. Ambulance	291	\$42.10	\$1.02	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	315	\$44.20	\$1.16
14. Prescribed Drugs	485,305	\$1.11	\$44.98	3.4%	8.0%	11.7%	15.9%	26.6%	46.7%	581,837	\$1.52	\$73.73
15. Behavioral Health - IP	81	\$22.26	\$0.15	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	84	\$23.38	\$0.16
16. Behavioral Health - OP/Phy	2,527	\$62.88	\$13.24	7.8%	5.0%	13.2%	0.0%	1.2%	1.2%	2,723	\$66.81	\$15.16
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	22	\$63.51	\$0.11	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	22	\$66.69	\$0.12
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$230.41									\$291.88

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	465	\$1,119.04	\$43.32	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	500	\$919.52	\$38.32
2. NH	0	\$327.73	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$344.12	\$0.00
3. Outpatient	3,167	\$263.80	\$69.62	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	3,480	\$284.91	\$82.62
4. Physician & Other	17,950	\$46.99	\$70.28	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	18,360	\$49.33	\$75.48
5. Home Health	50	\$586.02	\$2.43	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	57	\$650.48	\$3.07
6. Nursing	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	24	\$96.76	\$0.19	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	25	\$101.60	\$0.21
8. Transportation	19	\$26.50	\$0.04	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	20	\$27.82	\$0.05
9. DME/Supplies	259	\$120.75	\$2.61	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	282	\$128.00	\$3.01
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	17	\$343.82	\$0.47	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$357.57	\$0.50
12. OADAP	2,380	\$63.37	\$12.57	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,877	\$70.34	\$16.87
13. Ambulance	315	\$44.20	\$1.16	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	342	\$46.41	\$1.32
14. Prescribed Drugs	581,837	\$1.52	\$73.73	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	601,894	\$1.64	\$82.38
15. Behavioral Health - IP	84	\$23.38	\$0.16	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	86	\$24.55	\$0.18
16. Behavioral Health - OP/Phy	2,723	\$66.81	\$15.16	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	2,934	\$70.15	\$17.15
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	22	\$66.69	\$0.12	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$70.02	\$0.14
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$291.88									\$321.29

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	500	\$919.52	\$38.32	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	515	\$956.30	\$41.04
2. NH	0	\$344.12	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$361.33	\$0.00
3. Outpatient	3,480	\$284.91	\$82.62	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	3,660	\$307.70	\$93.84
4. Physician & Other	18,360	\$49.33	\$75.48	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	18,780	\$51.80	\$81.07
5. Home Health	57	\$650.48	\$3.07	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	65	\$722.04	\$3.89
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	25	\$101.60	\$0.21	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	26	\$106.68	\$0.23
8. Transportation	20	\$27.82	\$0.05	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	21	\$29.21	\$0.05
9. DME/Supplies	282	\$128.00	\$3.01	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	306	\$135.68	\$3.46
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	17	\$357.57	\$0.50	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$371.87	\$0.53
12. OADAP	2,877	\$70.34	\$16.87	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,479	\$78.08	\$22.64
13. Ambulance	342	\$46.41	\$1.32	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	370	\$48.73	\$1.50
14. Prescribed Drugs	601,894	\$1.64	\$82.38	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	622,643	\$1.77	\$92.03
15. Behavioral Health - IP	86	\$24.55	\$0.18	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	89	\$25.77	\$0.19
16. Behavioral Health - OP/Phy	2,934	\$70.15	\$17.15	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	3,162	\$73.66	\$19.41
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	23	\$70.02	\$0.14	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$73.52	\$0.15
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$321.29									\$360.03

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$816.88	\$0.66	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$849.56	\$0.70
2. NH	0	\$1,374.00	\$0.02	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,442.70	\$0.02
3. Outpatient	123	\$134.27	\$1.37	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	124	\$138.53	\$1.43
4. Physician & Other	1,543	\$25.97	\$3.34	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,636	\$27.27	\$3.72
5. Home Health	0	\$0.00	\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
6. Nursing	0	\$0.00	\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	1	\$735.13	\$0.05	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$771.88	\$0.05
8. Transportation	0	\$0.00	\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
9. DME/Supplies	301	\$24.70	\$0.62	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	335	\$26.19	\$0.73
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	0	\$273.17	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$284.10	\$0.00
12. OADAP	0	\$0.00	\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
13. Ambulance	16	\$76.52	\$0.10	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	16	\$80.34	\$0.11
14. Prescribed Drugs	1,614,291	\$1.19	\$159.51	3.2%	8.0%	11.5%	2.7%	3.7%	6.5%	1,711,158	\$1.33	\$189.36
15. Behavioral Health - IP	9	\$24.56	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	9	\$25.79	\$0.02
16. Behavioral Health - OP/Phy	6	\$66.17	\$0.03	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$69.48	\$0.04
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In	0	\$0.00	\$0.00	15.6%	0.0%	15.6%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
Total			\$165.72									\$196.18

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$849.56	\$0.70	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$883.54	\$0.74
2. NH	0	\$1,442.70	\$0.02	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,514.84	\$0.03
3. Outpatient	124	\$138.53	\$1.43	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	125	\$142.92	\$1.49
4. Physician & Other	1,636	\$27.27	\$3.72	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,734	\$28.63	\$4.14
5. Home Health	0		\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0		\$0.00
6. Nursing	0		\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	1	\$771.88	\$0.05	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$810.48	\$0.06
8. Transportation	0		\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
9. DME/Supplies	335	\$26.19	\$0.73	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	371	\$27.76	\$0.86
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	0	\$284.10	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$295.46	\$0.00
12. OADAP	0		\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0		\$0.00
13. Ambulance	16	\$80.34	\$0.11	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	17	\$84.36	\$0.12
14. Prescribed Drugs	1,711,158	\$1.33	\$189.36	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	1,766,152	\$1.43	\$211.08
15. Behavioral Health - IP	9	\$25.79	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	10	\$27.08	\$0.02
16. Behavioral Health - OP/Phy	7	\$69.48	\$0.04	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$72.95	\$0.04
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00	15.1%	0.0%	15.1%	0.0%	0.0%	0.0%			\$0.00
Total			\$196.18									\$218.58

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$883.54	\$0.74	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$918.88	\$0.79
2. NH	0	\$1,514.84	\$0.03	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,590.58	\$0.03
3. Outpatient	125	\$142.92	\$1.49	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	126	\$147.45	\$1.55
4. Physician & Other	1,734	\$28.63	\$4.14	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,838	\$30.06	\$4.61
5. Home Health	0	\$0.00	\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
6. Nursing	0	\$0.00	\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	1	\$810.48	\$0.06	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$851.00	\$0.06
8. Transportation	0	\$0.00	\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
9. DME/Supplies	371	\$27.76	\$0.86	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	412	\$29.42	\$1.01
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	0	\$295.46	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$307.28	\$0.00
12. OADAP	0	\$0.00	\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
13. Ambulance	17	\$84.36	\$0.12	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	18	\$88.58	\$0.13
14. Prescribed Drugs	1,766,152	\$1.43	\$211.08	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	1,822,914	\$1.55	\$235.30
15. Behavioral Health - IP	10	\$27.08	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	10	\$28.43	\$0.02
16. Behavioral Health - OP/Phy	7	\$72.95	\$0.04	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$76.60	\$0.05
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In	0	\$0.00	\$0.00	10.0%	0.0%	10.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
Total			\$218.58									\$243.55

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	8	\$1,111.47	\$0.74	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	8	\$1,217.21	\$0.83
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	310	\$110.13	\$2.85	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	326	\$118.94	\$3.24
4. Physician & Other	4,613	\$22.19	\$8.53	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,718	\$23.30	\$9.16
5. Home Health	387	\$281.29	\$9.08	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	441	\$312.23	\$11.48
6. Nursing	22	\$1,674.34	\$3.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$1,758.05	\$3.35
7. Dental	2,816	\$41.89	\$9.83	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,929	\$43.98	\$10.74
8. Transportation	487	\$26.96	\$1.09	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	506	\$28.31	\$1.19
9. DME/Supplies	91	\$95.09	\$0.72	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	99	\$100.79	\$0.83
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,632	\$264.98	\$36.04	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,665	\$275.58	\$38.24
12. OADAP	29	\$374.03	\$0.89	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	34	\$415.17	\$1.19
13. Ambulance	30	\$35.67	\$0.09	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	32	\$37.45	\$0.10
14. Prescribed Drugs	237,015	\$0.61	\$12.13	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	245,185	\$0.66	\$13.55
15. Behavioral Health - IP	2	\$6,081.90	\$1.13	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$6,386.00	\$1.23
16. Behavioral Health - OP/Phy	9,221	\$34.05	\$26.16	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	9,937	\$35.75	\$29.61
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	160	\$188.87	\$2.52	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	166	\$198.32	\$2.75
19. HCBS TBI	21	\$117.73	\$0.20	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	21	\$123.62	\$0.22
20. Buy-In			\$0.00									\$0.00
Total			\$115.08									\$127.70

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	8	\$1,217.21	\$0.83	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	9	\$1,000.19	\$0.74
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	326	\$118.94	\$3.24	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	359	\$128.45	\$3.84
4. Physician & Other	4,718	\$23.30	\$9.16	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,826	\$24.47	\$9.84
5. Home Health	441	\$312.23	\$11.48	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	503	\$346.58	\$14.52
6. Nursing	23	\$1,758.05	\$3.35	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$1,845.96	\$3.66
7. Dental	2,929	\$43.98	\$10.74	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,046	\$46.18	\$11.72
8. Transportation	506	\$28.31	\$1.19	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	525	\$29.72	\$1.30
9. DME/Supplies	99	\$100.79	\$0.83	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	107	\$106.84	\$0.95
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,665	\$275.58	\$38.24	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,698	\$286.61	\$40.56
12. OADAP	34	\$415.17	\$1.19	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	42	\$460.84	\$1.60
13. Ambulance	32	\$37.45	\$0.10	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	35	\$39.32	\$0.11
14. Prescribed Drugs	245,185	\$0.66	\$13.55	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	253,638	\$0.72	\$15.14
15. Behavioral Health - IP	2	\$6,386.00	\$1.23	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$6,705.30	\$1.33
16. Behavioral Health - OP/Phy	9,937	\$35.75	\$29.61	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	10,708	\$37.54	\$33.50
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	166	\$198.32	\$2.75	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	173	\$208.23	\$3.00
19. HCBS TBI	21	\$123.62	\$0.22	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	22	\$129.80	\$0.24
20. Buy-In			\$0.00									\$0.00
Total			\$127.70									\$142.05

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	9	\$1,000.19	\$0.74	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	9	\$1,040.20	\$0.79
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	359	\$128.45	\$3.84	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	377	\$138.73	\$4.36
4. Physician & Other	4,826	\$24.47	\$9.84	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,936	\$25.69	\$10.57
5. Home Health	503	\$346.58	\$14.52	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	573	\$384.70	\$18.36
6. Nursing	24	\$1,845.96	\$3.66	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	25	\$1,938.25	\$4.00
7. Dental	3,046	\$46.18	\$11.72	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,168	\$48.49	\$12.80
8. Transportation	525	\$29.72	\$1.30	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	544	\$31.21	\$1.42
9. DME/Supplies	107	\$106.84	\$0.95	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	116	\$113.25	\$1.10
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,698	\$286.61	\$40.56	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,732	\$298.07	\$43.03
12. OADAP	42	\$460.84	\$1.60	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	50	\$511.53	\$2.15
13. Ambulance	35	\$39.32	\$0.11	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	38	\$41.29	\$0.13
14. Prescribed Drugs	253,638	\$0.72	\$15.14	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	262,381	\$0.77	\$16.91
15. Behavioral Health - IP	2	\$6,705.30	\$1.33	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$7,040.56	\$1.44
16. Behavioral Health - OP/Phy	10,708	\$37.54	\$33.50	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	11,540	\$39.42	\$37.91
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	173	\$208.23	\$3.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	180	\$218.65	\$3.28
19. HCBS TBI	22	\$129.80	\$0.24	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	23	\$136.29	\$0.26
20. Buy-In			\$0.00									\$0.00
Total			\$142.05									\$158.48

MEG	SFY06			% of Prescription Drugs still covered <u>3.0%</u>				Rate Period			Member Months
	Low	Best	High	Trend Adjusted			Months of Trend	Medical Cost ⁽¹⁾			
				Trends				Low	Best	High	
				Low	Best	High					
ABD - Non-Medicare - Adult	\$937.43	\$1,015.22	\$1,054.71	6.7%	8.7%	10.8%	1.5	\$945.02	\$1,025.92	\$1,068.36	109,379
ABD - Non-Medicare - Child	\$1,486.81	\$1,600.69	\$1,662.49	8.2%	10.3%	12.4%	1.5	\$1,501.60	\$1,620.48	\$1,687.03	32,635
ABD - Dual											
Non-Rx	\$821.20	\$883.92	\$915.51	6.3%	8.2%	10.1%	1.5	\$827.52	\$892.68	\$926.60	
Rx	\$247.45	\$265.33	\$275.63	7.3%	9.4%	11.5%	-1.5	\$245.29	\$262.38	\$271.91	
10/05 - 12/05 Rate								\$1,072.81	\$1,155.06	\$1,198.51	37,588
1/06 - 6/06 Rate								\$834.88	\$900.55	\$934.76	75,847
ANFC - Non-Medicare - Adult	\$416.84	\$446.73	\$464.14	6.1%	8.2%	10.3%	1.5	\$419.96	\$451.16	\$469.86	78,302
ANFC - Non-Medicare - Child	\$252.20	\$271.98	\$282.59	6.1%	8.1%	10.2%	1.5	\$254.06	\$274.66	\$286.06	479,131
GlobalExp	\$287.76	\$309.31	\$321.29	7.4%	9.5%	11.6%	1.5	\$290.36	\$312.85	\$325.74	208,491
GlobalRx											
Non-Rx	\$6.94	\$7.22	\$7.50	5.8%	7.8%	9.9%	1.5	\$6.99	\$7.29	\$7.59	
Rx:											
10/05 - 12/05	\$189.51	\$203.20	\$211.08	7.3%	9.4%	11.5%	1.5	\$191.18	\$205.48	\$213.97	
1/06 - 6/06	\$5.69	\$6.10	\$6.33	0.0%	0.0%	0.0%	1.5	\$5.69	\$6.10	\$6.33	
10/05 - 12/05 Rate								\$198.17	\$212.77	\$221.56	31,980
1/06 - 6/06 Rate								\$12.68	\$13.38	\$13.92	63,420
OptionalExp	\$127.39	\$136.74	\$142.05	7.1%	9.1%	11.2%	1.5	\$128.48	\$138.24	\$143.95	15,983

Notes:
(1) Rate include drugs not covered by Part D.

MEG	Rate Period Medical Cost			Admin/Contingency Margin			Total Rate			Member Months
	Low	Best	High	Low	Best	High	Low	Best	High	
Admin/Contingency Margin %				10.5%	9.01%	9.01%				
PMPM										
ABD - Non-Medicare - Adult	\$945.02	\$1,025.92	\$1,068.36	\$110.87	\$101.59	\$105.79	\$1,055.89	\$1,127.50	\$1,174.15	109,379
ABD - Non-Medicare - Child	\$1,501.60	\$1,620.48	\$1,687.03	\$176.17	\$160.46	\$167.05	\$1,677.77	\$1,780.95	\$1,854.08	32,635
ABD - Dual - 10/05 - 12/05	\$1,072.81	\$1,155.06	\$1,198.51	\$125.86	\$114.38	\$118.68	\$1,198.67	\$1,269.44	\$1,317.19	37,588
ABD - Dual - 1/06 - 6/06	\$834.88	\$900.55	\$934.76	\$97.95	\$89.17	\$92.56	\$932.83	\$989.73	\$1,027.32	75,847
ANFC - Non-Medicare - Adult	\$419.96	\$451.16	\$469.86	\$49.27	\$44.67	\$46.53	\$469.23	\$495.84	\$516.39	78,302
ANFC - Non-Medicare - Child	\$254.06	\$274.66	\$286.06	\$29.81	\$27.20	\$28.33	\$283.87	\$301.86	\$314.38	479,131
GlobalExp	\$290.36	\$312.85	\$325.74	\$34.06	\$30.98	\$32.26	\$324.42	\$343.83	\$358.00	208,491
GlobalRx - Non-Medicare - 10/05 - 6/06	\$198.17	\$212.77	\$221.56	\$23.25	\$21.07	\$21.94	\$221.42	\$233.84	\$243.50	993
GlobalRx - Dual - 10/05 - 12/05	\$198.17	\$212.77	\$221.56	\$23.25	\$21.07	\$21.94	\$221.42	\$233.84	\$243.50	31,647
GlobalRx - Dual - 1/06 - 6/06	\$12.68	\$13.38	\$13.92	\$1.49	\$1.33	\$1.38	\$14.16	\$14.71	\$15.30	62,760
OptionalExp	\$128.48	\$138.24	\$143.95	\$15.07	\$13.69	\$14.25	\$143.55	\$151.93	\$158.21	15,983
Total - All MEG's	\$424.17	\$458.14	\$476.74	\$49.76	\$45.37	\$47.21	\$473.94	\$503.51	\$523.95	1,132,757
	-7.4%	0.0%	4.1%	9.7%	0.0%	4.1%	-5.9%	0.0%	4.1%	
Total \$										
ABD - Non-Medicare - Adult	\$103,365,306	\$112,213,378	\$116,856,158	\$12,126,656	\$11,111,579	\$11,571,315	\$115,491,962	\$123,324,956	\$128,427,473	
ABD - Non-Medicare - Child	\$49,004,967	\$52,884,713	\$55,056,431	\$5,749,186	\$5,236,743	\$5,451,791	\$54,754,154	\$58,121,456	\$60,508,222	
ABD - Dual - 10/05 - 12/05	\$40,324,548	\$43,416,004	\$45,049,323	\$4,730,813	\$4,299,134	\$4,460,868	\$45,055,361	\$47,715,138	\$49,510,192	
ABD - Dual - 1/06 - 6/06	\$63,323,104	\$68,304,134	\$70,898,433	\$7,428,967	\$6,763,603	\$7,020,495	\$70,752,071	\$75,067,737	\$77,918,928	
ANFC - Non-Medicare - Adult	\$32,883,903	\$35,326,965	\$36,791,552	\$3,857,888	\$3,498,142	\$3,643,168	\$36,741,791	\$38,825,107	\$40,434,720	
ANFC - Non-Medicare - Child	\$121,730,238	\$131,597,437	\$137,057,897	\$14,281,201	\$13,031,024	\$13,571,729	\$136,011,439	\$144,628,461	\$150,629,626	
GlobalExp	\$60,536,590	\$65,226,357	\$67,914,360	\$7,102,058	\$6,458,836	\$6,725,007	\$67,638,648	\$71,685,192	\$74,639,367	
GlobalRx - Non-Medicare - 10/05 - 6/06	\$196,807	\$211,305	\$220,031	\$23,089	\$20,924	\$21,788	\$219,896	\$232,229	\$241,819	
GlobalRx - 10/05 - 12/05	\$6,271,581	\$6,733,586	\$7,011,652	\$735,772	\$666,772	\$694,307	\$7,007,353	\$7,400,358	\$7,705,959	
GlobalRx - 1/06 - 6/06	\$795,551	\$839,896	\$873,754	\$93,333	\$83,168	\$86,521	\$888,884	\$923,064	\$960,275	
OptionalExp	\$2,053,439	\$2,209,550	\$2,300,813	\$240,906	\$218,794	\$227,831	\$2,294,346	\$2,428,344	\$2,528,644	
Total - All MEG's	\$480,486,035	\$518,963,325	\$540,030,404	\$56,369,870	\$51,388,719	\$53,474,821	\$536,855,905	\$570,352,045	\$593,505,225	

MEG	Rate Period Medical Cost			Admin/Contingency Margin			Total Rate			Member Months
	Low	Best	High	Low	Best	High	Low	Best	High	
Admin/Contingency Margin %				10.5%	9.01%	9.01%				
PMPM										
ABD - Non-Medicare - Adult	\$1,002.19	\$1,106.45	\$1,171.58	\$117.58	\$109.56	\$116.01	\$1,119.77	\$1,216.02	\$1,287.59	148,859
ABD - Non-Medicare - Child	\$1,617.06	\$1,773.51	\$1,876.99	\$189.71	\$175.62	\$185.86	\$1,806.77	\$1,949.13	\$2,062.86	44,415
ABD - Dual	\$878.44	\$962.24	\$1,014.24	\$103.06	\$95.28	\$100.43	\$981.50	\$1,057.52	\$1,114.67	154,379
ANFC - Non-Medicare - Adult	\$443.99	\$485.28	\$513.89	\$52.09	\$48.05	\$50.89	\$496.08	\$533.33	\$564.77	104,423
ANFC - Non-Medicare - Child	\$268.13	\$294.86	\$312.26	\$31.46	\$29.20	\$30.92	\$299.59	\$324.05	\$343.18	638,961
GlobalExp	\$310.29	\$340.11	\$360.03	\$36.40	\$33.68	\$35.65	\$346.69	\$373.79	\$395.69	276,574
GlobalRx	\$7.35	\$7.79	\$8.25	\$0.86	\$0.77	\$0.82	\$8.21	\$8.57	\$9.07	124,682
OptionalExp	\$136.80	\$149.70	\$158.48	\$16.05	\$14.82	\$15.69	\$152.85	\$164.52	\$174.18	23,109
Total - All MEG's	\$438.30	\$481.45	\$509.30	\$51.42	\$47.67	\$50.43	\$489.72	\$529.13	\$559.73	1,515,402
	-9.0%	0.0%	5.8%	7.9%	0.0%	5.8%	-7.4%	0.0%	5.8%	
Total \$										
ABD - Non-Medicare - Adult	\$149,185,270	\$164,705,905	\$174,400,864	\$17,502,182	\$16,309,487	\$17,269,500	\$166,687,452	\$181,015,392	\$191,670,363	
ABD - Non-Medicare - Child	\$71,821,632	\$78,770,292	\$83,366,424	\$8,426,001	\$7,799,982	\$8,255,099	\$80,247,633	\$86,570,273	\$91,621,524	
ABD - Dual	\$135,613,316	\$148,549,219	\$156,577,146	\$15,909,942	\$14,709,622	\$15,504,562	\$151,523,258	\$163,258,841	\$172,081,708	
ANFC - Non-Medicare - Adult	\$46,362,689	\$50,673,906	\$53,661,469	\$5,439,198	\$5,017,825	\$5,313,659	\$51,801,887	\$55,691,731	\$58,975,128	
ANFC - Non-Medicare - Child	\$171,325,308	\$188,401,589	\$199,520,651	\$20,099,617	\$18,655,878	\$19,756,908	\$191,424,926	\$207,057,467	\$219,277,559	
GlobalExp	\$85,817,067	\$94,064,799	\$99,576,105	\$10,067,924	\$9,314,472	\$9,860,212	\$95,884,992	\$103,379,272	\$109,436,317	
GlobalRx	\$916,665	\$971,751	\$1,029,224	\$107,542	\$96,225	\$101,916	\$1,024,207	\$1,067,976	\$1,131,140	
OptionalExp	\$3,161,441	\$3,459,325	\$3,662,443	\$370,895	\$342,549	\$362,662	\$3,532,337	\$3,801,874	\$4,025,105	
Total - All MEG's	\$664,203,388	\$729,596,787	\$771,794,325	\$77,923,303	\$72,246,039	\$76,424,518	\$742,126,691	\$801,842,826	\$848,218,843	

Vermont Medicaid
Development of Rates for 10/2005 to 9/2006

DRAFT - Work In Progress

MEG	Projected Member Months			Total Rate - LOW END OF RANGE				Total Rate - BEST ESTIMATE				Total Rate - HIGH END OF RANGE			
	10/05-12/05	1/06-6/06	7/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06
PMPM				Rates			Rates	Rates			Rates	Rates			Rates
ABD - Non-Medicare - Adult	36,244	73,135	36,891	\$1,055.89	\$1,055.89	\$1,119.77	\$1,077.31	\$1,127.50	\$1,127.50	\$1,216.02	\$1,157.18	\$1,174.15	\$1,174.15	\$1,287.59	\$1,212.19
ABD - Non-Medicare - Child	10,814	21,821	11,007	\$1,677.77	\$1,677.77	\$1,806.77	\$1,721.02	\$1,780.95	\$1,780.95	\$1,949.13	\$1,837.34	\$1,854.08	\$1,854.08	\$2,062.86	\$1,924.08
ABD - Dual	37,588	75,847	38,259	\$1,198.67	\$932.83	\$981.50	\$949.15	\$1,269.44	\$989.73	\$1,057.52	\$1,012.46	\$1,317.19	\$1,027.32	\$1,114.67	\$1,056.61
ANFC - Non-Medicare - Adult	26,099	52,204	26,104	\$469.23	\$469.23	\$496.08	\$478.18	\$495.84	\$495.84	\$533.33	\$508.33	\$516.39	\$516.39	\$564.77	\$532.52
ANFC - Non-Medicare - Child	159,698	319,433	159,727	\$283.87	\$283.87	\$299.59	\$289.11	\$301.86	\$301.86	\$324.05	\$309.26	\$314.38	\$314.38	\$343.18	\$323.98
GlobalExp	69,598	138,893	69,295	\$324.42	\$324.42	\$346.69	\$331.83	\$343.83	\$343.83	\$373.79	\$353.80	\$358.00	\$358.00	\$395.69	\$370.54
GlobalRx - Non-Medicare	333	660	327	\$221.42	\$221.42	\$233.84	\$150.78	\$233.84	\$233.84	\$233.84	\$159.20	\$243.50	\$243.50	\$243.50	\$165.83
GlobalRx - Dual	31,647	62,760	31,113	\$221.42	\$14.16	\$8.21	\$12.19	\$233.84	\$14.71	\$8.57	\$12.67	\$243.50	\$15.30	\$9.07	\$13.24
OptionalExp	5,137	10,845	5,547	\$143.55	\$143.55	\$152.85	\$146.70	\$151.93	\$151.93	\$164.52	\$156.19	\$158.21	\$158.21	\$174.18	\$163.61
Total - All MEG's	377,158	755,598	378,270	\$502.30	\$459.78	\$488.22	\$469.27	\$533.40	\$488.59	\$527.50	\$501.57	\$554.98	\$508.46	\$558.02	\$524.99
Total \$															
ABD - Non-Medicare - Adult				\$38,269,698	\$77,222,558	\$41,309,258	\$118,531,816	\$40,865,258	\$82,460,012	\$44,860,074	\$127,320,086	\$42,556,041	\$85,871,760	\$47,500,639	\$133,372,398
ABD - Non-Medicare - Child				\$18,143,368	\$36,610,546	\$19,887,151	\$56,497,697	\$19,259,160	\$38,862,042	\$21,454,042	\$60,316,085	\$20,050,040	\$40,457,917	\$22,705,855	\$63,163,772
ABD - Dual				\$45,055,731	\$70,752,312	\$37,551,294	\$108,303,605	\$47,715,530	\$75,067,992	\$40,459,668	\$115,527,660	\$49,510,599	\$77,919,193	\$42,646,197	\$120,565,390
ANFC - Non-Medicare - Adult				\$12,246,410	\$24,495,635	\$12,949,623	\$37,445,258	\$12,940,800	\$25,884,575	\$13,922,020	\$39,806,595	\$13,477,301	\$26,957,699	\$14,742,815	\$41,700,515
ANFC - Non-Medicare - Child				\$45,333,640	\$90,677,783	\$47,852,251	\$138,530,033	\$48,205,758	\$96,422,685	\$51,760,061	\$148,182,746	\$50,205,992	\$100,423,616	\$54,814,830	\$155,238,446
GlobalExp				\$22,578,956	\$45,059,613	\$24,023,786	\$69,083,399	\$23,929,763	\$47,755,345	\$25,901,463	\$73,656,808	\$24,915,917	\$49,723,362	\$27,419,043	\$77,142,404
GlobalRx - Non-Medicare				\$73,733	\$146,138	\$2,686	\$148,824	\$77,868	\$154,334	\$2,801	\$157,135	\$81,084	\$160,707	\$2,967	\$163,674
GlobalRx - Dual				\$7,007,307	\$888,881	\$255,580	\$1,144,461	\$7,400,310	\$923,061	\$266,502	\$1,189,564	\$7,705,909	\$960,271	\$282,264	\$1,242,536
OptionalExp				\$737,416	\$1,556,799	\$847,884	\$2,404,683	\$780,484	\$1,647,722	\$912,583	\$2,560,304	\$812,721	\$1,715,779	\$966,166	\$2,681,945
Total - All MEG's				\$189,446,260	\$347,410,264	\$184,679,513	\$532,089,777	\$201,174,932	\$369,177,769	\$199,539,214	\$568,716,983	\$209,315,603	\$384,190,304	\$211,080,775	\$595,271,079
FFY 2006 Total (10/05-9/06)							\$721,536,037				\$769,891,915				\$804,586,682
							3/4 yr \$541,152,028				3/4 yr \$577,418,937				3/4 yr \$603,440,012

**Vermont Medicaid
Development of Rates for 10/2006 to 9/2007**

DRAFT - Work In Progress

MEG	Projected Member Months		Total Rate - LOW END OF RANGE			Total Rate - BEST ESTIMATE			Total Rate - HIGH END OF RANGE		
	10/06-6/07	7/07-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07
			Rates			Rates			Rates		
PMPM											
ABD - Non-Medicare - Adult	111,968	37,755	\$1,119.77	\$1,197.12	\$1,139.27	\$1,216.02	\$1,325.29	\$1,243.57	\$1,287.59	\$1,430.27	\$1,323.57
ABD - Non-Medicare - Child	33,408	11,265	\$1,806.77	\$1,965.06	\$1,846.69	\$1,949.13	\$2,159.56	\$2,002.19	\$2,062.86	\$2,329.01	\$2,129.97
ABD - Dual	116,120	39,155	\$981.50	\$1,040.51	\$996.38	\$1,057.52	\$1,140.94	\$1,078.56	\$1,114.67	\$1,223.83	\$1,142.20
ANFC - Non-Medicare - Adult	78,319	26,109	\$496.08	\$528.39	\$504.16	\$533.33	\$579.35	\$544.83	\$564.77	\$625.31	\$579.91
ANFC - Non-Medicare - Child	479,234	159,762	\$299.59	\$318.52	\$304.32	\$324.05	\$351.31	\$330.87	\$343.18	\$379.20	\$352.19
GlobalExp	207,279	68,891	\$346.69	\$373.83	\$353.46	\$373.79	\$411.00	\$383.07	\$395.69	\$443.40	\$407.59
GlobalRx - Non-Medicare	971	320		\$8.70	\$8.33	\$8.57	\$9.25	\$8.73		\$9.98	\$9.30
GlobalRx - Dual	92,271	30,401	\$8.21	\$8.70	\$8.33	\$8.57	\$9.25	\$8.73	\$9.07	\$9.98	\$9.30
OptionalExp	17,562	6,125	\$152.85	\$164.16	\$155.78	\$164.52	\$180.10	\$168.55	\$174.18	\$194.33	\$179.39
Total - All MEG's	1,137,132	379,783	\$490.22	\$526.05	\$499.19	\$529.67	\$579.25	\$542.08	\$560.30	\$624.32	\$576.33
Total \$											
ABD - Non-Medicare - Adult			\$125,377,869	\$45,197,413	\$170,575,282	\$136,154,964	\$50,036,277	\$186,191,241	\$144,169,351	\$53,999,832	\$198,169,183
ABD - Non-Medicare - Child			\$60,360,675	\$22,136,408	\$82,497,083	\$65,116,439	\$24,327,478	\$89,443,917	\$68,915,889	\$26,236,331	\$95,152,221
ABD - Dual			\$113,972,039	\$40,741,258	\$154,713,297	\$122,799,253	\$44,673,522	\$167,472,775	\$129,435,595	\$47,918,922	\$177,354,517
ANFC - Non-Medicare - Adult			\$38,852,340	\$13,795,728	\$52,648,068	\$41,769,793	\$15,126,209	\$56,896,002	\$44,232,399	\$16,326,091	\$60,558,490
ANFC - Non-Medicare - Child			\$143,572,630	\$50,886,743	\$194,459,373	\$155,297,357	\$56,125,357	\$211,422,714	\$164,462,678	\$60,582,478	\$225,045,156
GlobalExp			\$71,861,266	\$25,753,402	\$97,614,668	\$77,477,874	\$28,314,359	\$105,792,233	\$82,017,343	\$30,546,072	\$112,563,414
GlobalRx - Non-Medicare			\$7,976	\$2,784	\$10,760	\$8,317	\$2,960	\$11,277	\$8,809	\$3,195	\$12,004
GlobalRx - Dual			\$757,967	\$264,481	\$1,022,448	\$790,359	\$281,163	\$1,071,522	\$837,103	\$303,542	\$1,140,646
OptionalExp			\$2,684,432	\$1,005,456	\$3,689,889	\$2,889,270	\$1,103,127	\$3,992,397	\$3,058,916	\$1,190,254	\$4,249,171
Total - All MEG's			\$557,447,195	\$199,783,674	\$757,230,868	\$602,303,627	\$219,990,450	\$822,294,077	\$637,138,083	\$237,106,719	\$874,244,802

Scenarios

High ▼

Low
Best
High

Scenario: Non-Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%		5.3%
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%		
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%	4.5%	-21.0%
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%	4.5%	
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	3.0%	4.0%		
2. NH	4.0%	5.0%		
3. Outpatient	5.2%	8.0%		
4. Physician & Other	2.3%	5.0%		
5. Home Health	13.9%	11.0%		
6. Nursing	4.0%	5.0%		
7. Dental	4.0%	5.0%		
8. Transportation	3.8%	5.0%		
9. DME/Supplies	8.6%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	2.0%	4.0%		
12. OADAP	20.9%	11.0%		
13. Ambulance	8.4%	5.0%		
14. Prescribed Drugs	3.4%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	7.8%	5.0%		
17. HCBS - Aged/Disabled	1.0%	1.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Scenario: Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.6%			

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.1%			

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	10.0%			

Scenario: Non-Medicare - Low

- 1. Inpatient
- 2. NH
- 3. Outpatient
- 4. Physician & Other
- 5. Home Health
- 6. Nursing
- 7. Dental
- 8. Transportation
- 9. DME/Supplies
- 10. Enhanced Residential Care
- 11. D&P
- 12. OADAP
- 13. Ambulance
- 14. Prescribed Drugs
- 15. Behavioral Health - IP
- 16. Behavioral Health - OP/Phy
- 17. HCBS - Aged/Disabled
- 18. HCBS - MH/MR
- 19. HCBS TBI
- 20. Buy-In

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	1.0%	2.0%		5.3%
	2.0%	3.0%		
	3.2%	6.0%		
	0.3%	3.0%		
	11.9%	9.0%		
	2.0%	3.0%		
	2.0%	3.0%		
	1.8%	3.0%		
	6.6%	4.0%		
	1.0%	3.0%		
	0.0%	2.0%		
	18.9%	9.0%		
	6.4%	3.0%		
	1.4%	6.0%		
	1.0%	3.0%		
	5.8%	3.0%		
	-1.0%	-1.0%		
	2.0%	3.0%		
	1.0%	3.0%		

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	1.0%	2.0%	0.0%	-19.1%
	2.0%	3.0%	8.4%	0.8%
	3.2%	6.0%	-0.7%	1.0%
	0.3%	3.0%	-3.2%	0.7%
	11.9%	9.0%	-0.4%	-0.8%
	2.0%	3.0%	-3.2%	0.7%
	2.0%	3.0%		
	1.8%	3.0%	-3.2%	0.7%
	6.6%	4.0%	-3.2%	0.7%
	1.0%	3.0%		
	0.0%	2.0%	-3.2%	0.7%
	18.9%	9.0%	-5.7%	-0.1%
	6.4%	3.0%	-3.2%	0.7%
	1.4%	6.0%	-2.3%	-0.8%
	1.0%	3.0%	-7.1%	0.4%
	5.8%	3.0%	-5.7%	-0.1%
	-1.0%	-1.0%		
	2.0%	3.0%	-5.7%	-0.1%
	1.0%	3.0%		

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	1.0%	2.0%		
	2.0%	3.0%		
	3.2%	6.0%		
	0.3%	3.0%		
	11.9%	9.0%		
	2.0%	3.0%		
	2.0%	3.0%		
	1.8%	3.0%		
	6.6%	4.0%		
	1.0%	3.0%		
	0.0%	2.0%		
	18.9%	9.0%		
	6.4%	3.0%		
	1.4%	6.0%		
	1.0%	3.0%		
	5.8%	3.0%		
	-1.0%	-1.0%		
	2.0%	3.0%		
	1.0%	3.0%		

Scenario: Non-Medicare - Best

Category of Service

1. Inpatient
2. NH
3. Outpatient
4. Physician & Other
5. Home Health
6. Nursing
7. Dental
8. Transportation
9. DME/Supplies
10. Enhanced Residential Care
11. D&P
12. OADAP
13. Ambulance
14. Prescribed Drugs
15. Behavioral Health - IP
16. Behavioral Health - OP/Phy
17. HCBS - Aged/Disabled
18. HCBS - MH/MR
19. HCBS TBI
20. Buy-In

FY05			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	3.0%		5.3%
3.0%	4.0%		
4.2%	7.0%		
1.3%	4.0%		
12.9%	10.0%		
3.0%	4.0%		
3.0%	4.0%		
2.8%	4.0%		
7.6%	5.0%		
2.0%	4.0%		
1.0%	3.0%		
19.9%	10.0%		
7.4%	4.0%		
2.4%	7.0%		
2.0%	4.0%		
6.8%	4.0%		
0.0%	0.0%		
3.0%	4.0%		
2.0%	4.0%		

FY06			
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3.0%	4.0%		
3.0%	4.0%		
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7.6%	5.0%		
2.0%	4.0%		
1.0%	3.0%		
19.9%	10.0%		
7.4%	4.0%		
2.4%	7.0%		
2.0%	4.0%		
6.8%	4.0%		
0.0%	0.0%		
3.0%	4.0%		
2.0%	4.0%		

FY07			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	3.0%		
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3.0%	4.0%		
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7.6%	5.0%		
2.0%	4.0%		
1.0%	3.0%		
19.9%	10.0%		
7.4%	4.0%		
2.4%	7.0%		
2.0%	4.0%		
6.8%	4.0%		
0.0%	0.0%		
3.0%	4.0%		
2.0%	4.0%		

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	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
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19. HCBS TBI	3.0%	5.0%		
20. Buy-In				

Scenario: Medicare - Low

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	0.0%	2.0%		
2. NH	7.4%	3.0%		
3. Outpatient	-1.0%	1.2%		
4. Physician & Other	4.0%	3.0%		
5. Home Health	-3.4%	2.0%		
6. Nursing	0.5%	2.0%		
7. Dental	2.0%	3.0%		
8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%		
12. OADAP	18.3%	9.0%		
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%		
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%		
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%		
19. HCBS TBI	1.0%	3.0%		
20. Buy-In	15.6%			

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	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
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8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%	-3.2%	0.7%
12. OADAP	18.3%	9.0%	-5.7%	-0.1%
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%	-2.3%	-0.8%
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%	-5.7%	-0.1%
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%	-5.7%	-0.1%
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	Trends		Other	
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	Trends		Other	
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	Trends		Other	
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6. Nursing	1.5%	3.0%		
7. Dental	3.0%	4.0%		
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18. HCBS - MH/MR	3.0%	4.0%		
19. HCBS TBI	2.0%	4.0%		
20. Buy-In	10.0%			

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.6%			

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.1%			

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	10.0%			



STATE OF VERMONT
AGENCY OF ADMINISTRATION

MEMORANDUM

TO: Joint Fiscal Committee

FROM: Charles P. Smith, Secretary of Administration *Charles P. Smith /hj*

DATE: December 5, 2005

RE: Approval for Environmental Contingency Fund (ECF) expenditures

Pursuant to 10 VSA Sec. 1283(b), the Secretary of the Agency of Natural Resources must receive Joint Fiscal Committee approval for Environmental Contingency Fund (ECF) disbursements on a site to exceed \$100,000 under each of the subdivisions under subsection (b).

The attached request for Joint Fiscal Committee approval relates to expenditures for investigation and remediation of contamination at the 9 Depot Square site in Barre, which had at one time been a drycleaning facility. The Agency of Natural Resources has used ECF funds since 2000 to address these contamination problems, and is now facing cumulative expenditures over \$100,000 in two of the expenditure categories under 10 VSA Sec 1283(b). Further details are provided on the attached request from the Agency.

The balance in the ECF will not drop below \$100,000, and the Fund is projected to have a \$481,000 balance at the end of FY 2006. The Administration is reviewing the long-range condition of the ECF in the course of developing the FY 2007 Executive Budget.

There is some urgency to this request. Litigation is pending and additional investigation is required to support the State's case, and the remedial treatment system requires on-going maintenance.

I have been assured that the Agency has improved its procedures for monitoring expenditures from the Fund so that retroactive requests will not arise in the future.

A draft motion is attached. Thank you for your consideration.

Attachment

PROPOSED MOTION

Pursuant to 10 VSA Sec. 1283(b), The Joint Fiscal Committee approves Environmental Contingency Fund expenditures of \$50,335 in excess of \$100,000 under subdivision (b)(2), and \$20,000 in excess of \$100,000 under subdivision (b)(4), for investigation and remediation at the contaminated 9 Depot Square site in Barre, Vermont.

**Agency of Natural Resources
Department of Environmental Conservation**

**Waste Management Division
West Building
802-241-3888**

MEMORANDUM

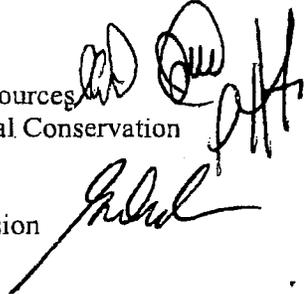
To: Charles P. Smith, Secretary, Agency of Administration

Through: Canute Dalmasse, Deputy Secretary, Agency of Natural Resources
Jeff Wennberg, Commissioner, Department of Environmental Conservation
P. Howard Flanders, Director, Waste Management Division

From: George Desch, Program Manager, Waste Management Division

Date: December 5, 2005

Subject: Expenditures from the Environmental Contingency Fund for the 9 Depot Square site in Barre (Site #99-2631)



The Agency of Natural Resources (Agency) requests to appear before the Joint Fiscal Committee of the General Assembly to discuss expenditures from the Environmental Contingency Fund (ECF) on the 9 Depot Square site in Barre. In this appearance the Agency requests:

- (1) Retroactive approval for the expenditure of \$10,334.71 in excess of the cap established under 10 V.S.A. § 1283(b); and
- (2) Approval of an additional \$40,000.00 to be spent under subdivision (b)(2) (investigations) and \$20,000.00 to be spent under subdivision (b)(3) (remedial actions). The details of this request are more fully explained below.

Site Background

The Agency determined that the site was contaminated in 1999 as a result of an assessment conducted at the neighboring property. Contaminants typically associated with drycleaning activities were detected in a sample taken from a sump in the basement as a part of that assessment. The source of the contamination was traced to the neighboring 9 Depot Square building, which had been a drycleaning facility from approximately 1947 to 1992. The 9 Depot Square building is currently a pizza restaurant. The Agency initially requested the current owner to conduct an investigation of the site to determine the extent of contamination. The current owner declined to voluntarily initiate this site investigation work. In 2000 the Agency began to investigate the extent of contamination at the site using ECF funds. Significant levels of dry cleaning compounds such as perchloroethylene (PCE) in groundwater, soil, and indoor air were found in the course of this investigation. The Agency requested the EPA to use federal funds to remove the sources of contamination.

Potentially responsible parties have been identified at this site, and the Attorney General's Office is currently assisting the Agency in having future work performed by these parties and to recover ECF funds spent at this site.

Request for Joint Fiscal Committee Approval.

The funds spent at this site have been allocated to the following categories, as indicated in 10 V.S.A. § 1283, as follows:

- **10 V.S.A. § 1283(b)(2). *Investigation of an actual or threatened release to the environment:***

The Agency has currently spent \$110,334.71 to investigate the releases from this site. These funds were used to examine the contamination's impacts on indoor air at the restaurant, determine the contaminant impacts on groundwater, the contaminant impact on the nearby Stevens Branch, and the contaminant impact on subsurface soils. The results of this investigation show a property that is significantly contaminated.

Investigation of source contaminants that took place in October 2005, and invoiced in November 2005, caused the Agency to exceed the statutory cap of \$100,000.00. This overrun was an oversight on the part of the Agency and procedures have been put in place to ensure that such oversights do not occur in the future.

The Agency is requesting Joint Fiscal Committee approval for the \$10,334.71 over the cap and approval to expend an additional \$40,000.00 for additional investigatory work at the site. These funds will be used to continue contaminant monitoring at the site, and further delineate the contaminant plume.

- **10 V.S.A. § 1283(b)(4). *Take appropriate remedial action to prevent or minimize the immediate impact of such release to the public health or the environment:***

The Agency has currently spent \$86,091.54 to remediate the impacts that have resulted from contamination at the site. The indoor air quality at the site has been impacted by the contamination at the site. The Agency has installed an indoor air treatment system to reduce contaminant levels in this structure.

The Agency is requesting Joint Fiscal Committee approval to spend \$20,000.00 in ECF funds in excess of the \$100,000.00 cap to maintain the indoor air treatment system (e.g. replacement of filters and disposal of wastes) and monitor indoor air quality.

- **10 V.S.A. § 1283(b)(3). *To take appropriate removal action:***

The Agency has currently spent \$60,452.70 under this subdivision. At this time, the Agency does not request an approval to increase the allowable \$100,000.00 under this subdivision. The Agency has installed a soil vapor extraction system to treat soil vapor underneath the building in an effort to prevent these vapors from entering the building.

Ginny's copy

Do NOT remove

Fiscal Office

5633-5701 • 802) 828-2295 • Fax: 802) 828-2483

MEMORANDUM

ath, Chair; Senator Susan Bartlett, Vice Chair;
Fiscal Committee

officer

, 11 AM on the 13th of December

As you are aware the final review of the conditions for the Global Commitment waiver was postponed until December 13th at 11 AM. The Committee will meet in Room 11 in order that we can provide lunch. For House Appropriation Committee members this meeting is sandwiched in between a full day of meetings. The meeting is to make a final determination on the remaining conditions on the Global Commitment approval. We have also been asked to approve an Environmental Contingency Fund Allocation at that time.

The postponement of the Global Commitment condition review was due to a delay in getting sufficient materials to develop an understanding of the premium range. The initial submission by the actuary required revisions as the Actuary, OVHA and the Fiscal Office have had to work through the technical elements of Vermont's programs and the uniqueness of this waiver proposal. At this point we still do not have a final actuarial determination. Subsequent changes are expected to result in little or positive change to the maximum allowable premium. We expect further information to be available prior to the meeting with the final actuarial premium resolution to occur subsequent to Fiscal Committee action. As indicated above, the levels in the enclosed materials represent what we see as a floor to the premium level. We are providing in this mailing the following:

- A brief agenda for the meeting
- A general description of the rate setting methodology
- A memorandum on the most recent actuarial estimate and what it means for Vermont's proposal
- Premium related back up materials
 - Bill Russell's Memorandum on the Committee Jurisdiction
 - The September 30th and October 17th 2005 motions
 - Premium data
- The Environmental Contingency Fund Request
- A Memo/update on the LIHEAP fuel assistance situation will be sent separately as it has not yet come in!



STATE OF VERMONT
JOINT FISCAL OFFICE

DRAFT

Fiscal Committee Agenda
Tuesday, December 13, 2005
11 AM, Room 11

11:00 Global Commitment Condition Review

- a) The FY 2006 & FY 2007 premium ranges and the implications for out years
 - Presentation of Actuary Determination - Administration: Consultants, OVHA and AHS
 - Comments by the Fiscal Office
- b) Final review of the letter proposed letter -Administration staff
- c) Committee Discussion, questions and votes

12:45 Consideration of Environmental Contingency Fund Expenditures
Joint Fiscal Committee Responsibility per 10 V.S.A. §1283 (b)
(Administration Request)

Adjournment

--Lunch will be provided --



STATE OF VERMONT

MEMORANDUM

To: Martha Heath, Chair; Members of the Joint Fiscal Committee
From: Stephanie Barrett, Steve Kappel; Joint Fiscal Office
Date: December 6, 2005
Subject: Global Commitment – Preliminary Premium Evaluation

Overview

This memorandum presents the results of the Joint Fiscal Office's preliminary evaluation of the premiums developed by the Agency of Human Services' consulting actuary. This evaluation is being conducted to determine compliance with condition #2 and to the extent possible condition #3 of the Committee's contingent approval of the Global Commitment waiver.

For state fiscal year 2006, there is approximately \$21.8 million in room (3.5% of total spending) between spending obligations (including the Medicaid program and managed care investments) and the high end of the premium range. Note that this is for three quarters of the year. For SFY 2007, there is between \$33.2 million (3.9%) and \$46.2 million (5.4%). This room can be used in case of unforeseen expenditures or for new program initiatives.

Background

Joint Fiscal Office staff are reviewing the actuarial analysis. JFO will follow up on several outstanding issues that may have the impact of increasing the upper limit of the range. These include the administration percentage included in the estimates, and the treatment of the reduction in hospital reimbursement that went into effect on October 1st. Once the premium range is finalized, the actuary will produce a certification letter, as required by CMS. Final premiums will have to be approved by the CMS however they indicated via a conference call that such approval is likely to be routine.

The actuary has developed three specific premium estimates: "Best," which represents the firm's estimate of costs, "High" which increases assumptions about utilization and price trends by 1% each over "Best" trends, and "Low," which assumes a tighter managed care model, 1% reductions in trends, managed care savings, and increased administrative costs.

SFY 2006

Current SFY06 Global Commitment premium projection (three quarters of a year due to the start date of October 1, 2005 of the waiver)

<u>Low</u>	<u>Best</u>	<u>High</u>
\$541.2m	\$577.4m	\$603.4m

Consensus estimates for SFY06 expenditures under Global Commitment, including an estimate for budget adjustment, are:

Medicaid expenditures	\$545.9m
MCO Investments	<u>\$ 35.7m</u>
Total	\$581.6m

There is \$21.8 million of "room" in the current SFY06 "High" premium above the total needed (\$581.6m). JFO feels this should be sufficient room to accommodate unanticipated increases in Medicaid GC expenditures or additional MCO investments.

SFY 2007

The actuary provided a FY2007 premium range estimate (this is full year estimate). This estimate will change as the legislature makes changes which impact global commitment during the upcoming session. Based on current data, the FY2007 Global Commitment premium projection is as follows:

FY07 Global Commitment premium projection

<u>Low</u>	<u>Best</u>	<u>High</u>
\$742.1	\$801.8	\$848.2

JFO estimate of SFY07 Global Commitment expenditures

Medicaid GC expenditures	\$755.1m	to	\$765.0m
MCO Investments	<u>\$ 46.9m</u>	to	<u>\$ 50.0m</u>
Total	\$802.0m	to	\$815.0m

The preliminary estimate of "room" under the premium is between \$33.2m and \$46.2m. This estimate will be revised once consensus estimates are developed by JFO and the administration.

Subsequent Years

The "High" premium trend used by the actuary in developing the FY 2006 and FY 2007 estimates should lead to increasing room in the subsequent years of the waiver. This trend could bring us close to the \$4.7 million maximum waiver amount if sufficient state funds were available.

The process and events that would impact FY 2008 and beyond are not established and risk will remain as the methodology and actual experience is evaluated. Similarly, in that even with Global Commitment, our Medicaid program is facing FY 2008 and FY 2009 state fund deficits in the range of \$42m and \$62m respectively, it is difficult to project expenditure need in those years as well.

Global Commitment – Development of the Premium Rate

Prepared by Don Dickey, Vermont Legislative Fiscal Office

Under contract with the Agency of Human Services (AHS), the actuarial firm Milliman developed premium rates for the Global Commitment waiver for State Fiscal Years 2006 and 2007. This document provides a general explanation of the rate development model.

Under Global Commitment, AHS pays a monthly premium to a public managed care organization (MCO) administered by the Office of Vermont Health Access (OVHA). Federal regulations require that premium rates paid to Medicaid MCOs be developed on an actuarially sound basis in accordance with generally accepted actuarial principles and practices, and American Academy of Actuaries guidelines. Accordingly, to calculate the premium rate (or range), Milliman developed a baseline derived from the most recent health care utilization and cost data for Vermont's Medicaid and VHAP populations, and then projected forward to waiver years 2006 and 2007 (beginning October 1) using a combination of historical trend data and actuarial assumptions. The following general steps were performed by the actuary in developing the premium rate:

Summarize the Fee-for-Service Claims and Eligibility Data. The actuary received summarized fee-for-service claims and eligibility data for the beneficiaries (including the VHAP waiver groups) and services to be covered under the managed care plan. Three years of data were made available – for State Fiscal Years 2002, 2003, and 2004. Data for 2002 and 2003 were adjusted to account for benefit and program changes. Categories such as pharmacy rebates, which are not associated with specific eligibility groups, were allocated.

Project the Fee-for-Service Base Data Forward. FY 2004 data were then projected forward to the time period for which the premium rates are to be paid. Based on historical trend data for SFY 2002-2004, trend factors were developed to estimate the future costs of the services that the covered population would generate in the fee-for-service program. The trend factors varied by service and population group – for example, the actuary developed separate trend assumptions for hospital inpatient care for Medicare and non-Medicare enrollment groups. Historical rates were compared with other information to determine final projection rates. Policy changes subsequent to the base data year, such as the FY06 reduction in provider reimbursement, were incorporated into final projections.

11/17/05 Fiscal Committee Motion

Joint Fiscal Committee finds that the following conditions of the September 30th motion of contingent approval of the Global Commitment to Health Demonstration Waiver Program have been met:

Condition:

- (1) Complete demonstration provisions furnished
- (4) MCO Savings Identified
- (5) Attorney General Review

Based upon an Administration request, the Committee hereby postpones until November 30th consideration of two remaining conditions (2) "Final premium amounts determined to be sufficient" and (3) "Agreement regarding future years' premiums." At that meeting the committee will also complete final review of the letter of acceptance, and carry out a final approval vote.

Joint Fiscal Committee

Motion to approve with amendments the recommendation of the Health Access Oversight Committee to grant contingent approval of the Global Commitment to Health Demonstration Waiver Program.

Approved: September 30, 2005, unanimously.

Senator Bartlett, seconded by Representative Westman, moved:

That the recommendation of the Health Access Oversight Committee to the Joint Fiscal Committee to grant contingent approval of the Global Commitment to Health Demonstration Waiver Program is accepted and approved by the Joint Fiscal Committee with amendments, and that as amended, the Joint Fiscal Committee moves:

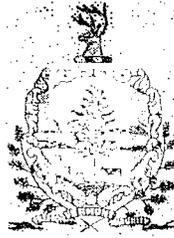
(a) That the Joint Fiscal Committee, pursuant to its authority under Section 250(c) of Act 71 of 2005, grant contingent approval to the Global Commitment to Health Demonstration Waiver Program negotiated by the Administration and the Centers for Medicare and Medicaid Services (CMS) as delineated in Special Terms and Conditions, Number 11-W-00914/1, dated September 27, 2005, and that pursuant to this contingent grant of approval the Administration may begin implementation of the Demonstration Waiver Program on October 1, 2005 for the five year period, from October 1, 2005 through September 30, 2010.

(b) That the Joint Fiscal Committee's full approval to the Global Commitment to Health Demonstration Waiver Program be granted on or before November 17, 2005, if, on or before that time, the Joint Fiscal Committee finds that the following conditions have been met:

(1) *Complete demonstration provisions furnished.* That a complete and comprehensive listing and description of all the provisions of the Demonstration Waiver

(c) That by granting contingent approval of the Demonstration Waiver program, the Joint Fiscal Committee cedes none of the authority of the General Assembly to determine policy, eligibility and benefits for the Medicaid program (including expansion programs), through legislative enactments, administrative rules review, the state budget and appropriations process, or any other means of legislative oversight. Further, the Joint Fiscal Committee affirm the legislature's commitment to providing health care benefits to low-income Vermonters through the Medicaid program.

(d) That pursuant to #40 of the Special Terms and Conditions, revenue from capitation payments will be used to reduce the rates of uninsured or underinsured and improve the access and quality of services to that group; that the approval letter from the Department of Health & Human Services also indicate that Department's understanding that "Vermont will demonstrate its ability to promote universal access to health care"; and therefore, to the extent that there is unused spending capacity as measured by the difference between the amount necessary to maintain the current Medicaid program and the Demonstration Waiver program's maximum certified premium, that unused spending capacity shall be used to fund health care initiatives authorized by the legislature to improve the access to and quality of health care services received by the uninsured and underinsured.



STATE OF VERMONT
LEGISLATIVE COUNCIL

MEMORANDUM

To: Representative Martha Heath
Chair, Joint Fiscal Committee

From: William P. Russell, Chief Legislative Counsel

Date: November 29, 2005

Subject: Duration of JFC's Authority to Approve the Global Commitment

Question

Is the authority of the Joint Fiscal Committee to approve the Global Commitment to Health Demonstration Waiver Program divested if it meets in order to ascertain the fulfillment of conditions to its approval within 30 days of the legislative session?

Answer

The FY 2006 General Appropriations Act granted to the Joint Fiscal Committee the authority to approve the "Global Commitment to Health" with this language:

Any agreement, waiver ...or commitment..., such as global funding commitments..., is conditional upon approval by act of the general assembly, or, if the general assembly is not in session and the speaker and the president pro tempore determine that it will not reconvene within the next 30-day period, by a majority vote of the joint fiscal committee upon recommendation of the health access oversight committee." [Section 250(c)]

On September 30, 2005 the Joint Fiscal Committee unanimously granted contingent approval of the Global Commitment program. Notably, in its motion of approval the JFC explicitly allowed for the agreement to be implemented beginning October 1, 2005.

The committee's approval was contingent on five conditions. Those conditions were established to provide the committee with information, not available on September 30, on several key provisions of the agreement. The information was to be provided to the

committee at a future date (since extended) to provide assurance that significant features and details of the agreement were in accord with all representations made to the committee which formed the basis of the committee's approval.

In my opinion, September 30, 2005 is the operative date for the purposes of determining the Joint Fiscal Committee's authority to act. Its actions at meetings since September 30 (including those proposed for meetings in December) have been (or will be) for the purpose of ascertaining whether the conditions upon which the committee granted its approval have been met. Their purpose is more in the nature of oversight, and not for the purpose of revising or amending the approval previously granted on September 30.

Failure to meet the conditions, or any changes made to the conditions, or the addition of new conditions, may void the approval granted on September 30. In this case, and at this date, authority to approve a revised agreement would revert to the General Assembly under the provisions of Section 250(c) of the Appropriations Act.

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,281	\$947.98	\$101.21	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	1,320	\$1,038.17	\$114.16
2. NH	1	\$1,593.18	\$0.13	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,672.84	\$0.14
3. Outpatient	4,582	\$232.73	\$88.86	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	4,818	\$251.34	\$100.91
4. Physician & Other	25,028	\$47.94	\$99.98	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,600	\$50.33	\$107.37
5. Home Health	948	\$227.06	\$17.94	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,080	\$252.03	\$22.68
6. Nursing	52	\$850.05	\$3.65	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	54	\$892.55	\$3.99
7. Dental	2,258	\$50.87	\$9.57	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,348	\$53.41	\$10.45
8. Transportation	5,899	\$17.22	\$8.47	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,121	\$18.08	\$9.22
9. DME/Supplies	1,616	\$98.70	\$13.29	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	1,755	\$104.62	\$15.30
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	259	\$592.73	\$12.78	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	264	\$616.44	\$13.56
12. OADAP	2,275	\$36.67	\$6.95	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,750	\$40.71	\$9.33
13. Ambulance	902	\$41.42	\$3.11	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	978	\$43.50	\$3.54
14. Prescribed Drugs	1,336,703	\$1.30	\$145.11	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,382,782	\$1.41	\$162.12
15. Behavioral Health - IP	334	\$325.26	\$9.06	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	344	\$341.53	\$9.80
16. Behavioral Health - OP/Phy	9,198	\$142.95	\$109.57	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	9,912	\$150.09	\$123.98
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	7,213	\$386.82	\$232.52	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	7,502	\$406.16	\$253.91
19. HCBS TBI	381	\$166.04	\$5.27	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	392	\$174.34	\$5.69
20. Buy-In			\$0.00									\$0.00
Total			\$867.46									\$966.18

mont Medicaid
 .G: ABD - Non-Medicare - Adult
 nario: Non-Medicare - High

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
Inpatient	1,320	\$1,038.17	\$114.16	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	1,420	\$853.07	\$100.97
NH	1	\$1,672.84	\$0.14	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,756.48	\$0.15
Outpatient	4,818	\$251.34	\$100.91	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	5,294	\$271.45	\$119.77
Physician & Other	25,600	\$50.33	\$107.37	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	26,185	\$52.85	\$115.32
Home Health	1,080	\$252.03	\$22.68	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,230	\$279.76	\$28.69
Nursing	54	\$892.55	\$3.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	56	\$937.18	\$4.36
Dental	2,348	\$53.41	\$10.45	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,442	\$56.08	\$11.41
Transportation	6,121	\$18.08	\$9.22	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,350	\$18.99	\$10.05
DME/Supplies	1,755	\$104.62	\$15.30	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	1,907	\$110.90	\$17.62
1. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
1. D&P	264	\$616.44	\$13.56	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	269	\$641.10	\$14.38
2. OADAP	2,750	\$40.71	\$9.33	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,326	\$45.18	\$12.52
3. Ambulance	978	\$43.50	\$3.54	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	1,060	\$45.67	\$4.03
4. Prescribed Drugs	1,382,782	\$1.41	\$162.12	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,430,450	\$1.52	\$181.12
5. Behavioral Health - IP	344	\$341.53	\$9.80	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	355	\$358.60	\$10.60
6. Behavioral Health - OP/Phy	9,912	\$150.09	\$123.98	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	10,682	\$157.60	\$140.29
7. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
8. HCBS - MH/MR	7,502	\$406.16	\$253.91	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	7,802	\$426.47	\$277.27
9. HCBS TBI	392	\$174.34	\$5.69	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	404	\$183.06	\$6.16
0. Buy-In			\$0.00									\$0.00
Total			\$966.18									\$1,054.71

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,420	\$853.07	\$100.97	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	1,463	\$887.20	\$108.16
2. NH	1	\$1,756.48	\$0.15	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$1,844.31	\$0.17
3. Outpatient	5,294	\$271.45	\$119.77	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	5,568	\$293.17	\$136.02
4. Physician & Other	26,185	\$52.85	\$115.32	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	26,784	\$55.49	\$123.85
5. Home Health	1,230	\$279.76	\$28.69	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	1,402	\$310.53	\$36.27
6. Nursing	56	\$937.18	\$4.36	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	58	\$984.04	\$4.76
7. Dental	2,442	\$56.08	\$11.41	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,540	\$58.89	\$12.46
8. Transportation	6,350	\$18.99	\$10.05	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	6,588	\$19.94	\$10.95
9. DME/Supplies	1,907	\$110.90	\$17.62	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	2,071	\$117.55	\$20.29
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	269	\$641.10	\$14.38	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	275	\$666.74	\$15.26
12. OADAP	3,326	\$45.18	\$12.52	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	4,021	\$50.15	\$16.81
13. Ambulance	1,060	\$45.67	\$4.03	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	1,149	\$47.95	\$4.59
14. Prescribed Drugs	1,430,450	\$1.52	\$181.12	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	1,479,762	\$1.64	\$202.36
15. Behavioral Health - IP	355	\$358.60	\$10.60	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	365	\$376.53	\$11.46
16. Behavioral Health - OP/Phy	10,682	\$157.60	\$140.29	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	11,511	\$165.48	\$158.74
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	7,802	\$426.47	\$277.27	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	8,114	\$447.79	\$302.77
19. HCBS TBI	404	\$183.06	\$6.16	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	416	\$192.21	\$6.66
20. Buy-In			\$0.00									\$0.00
Total			\$1,054.71									\$1,171.58

rmont Medicaid
 EG: ABD - Non-Medicare - Child
 Scenario: Non-Medicare - High

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
Inpatient	847	\$676.57	\$47.73	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	872	\$740.94	\$53.84
NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
Outpatient	2,309	\$184.67	\$35.53	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	2,428	\$199.45	\$40.35
Physician & Other	13,700	\$38.34	\$43.77	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,013	\$40.25	\$47.01
Home Health	15,313	\$153.72	\$196.16	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	17,445	\$170.63	\$248.06
Nursing	1,373	\$576.90	\$66.01	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,428	\$605.75	\$72.09
Dental	3,015	\$49.96	\$12.55	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,135	\$52.45	\$13.71
Transportation	3,000	\$17.09	\$4.27	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,112	\$17.95	\$4.65
DME/Supplies	2,782	\$126.47	\$29.32	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,022	\$134.06	\$33.76
0. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
1. D&P	7,451	\$528.75	\$328.29	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,600	\$549.90	\$348.25
2. OADAP	1,095	\$36.88	\$3.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,323	\$40.94	\$4.52
3. Ambulance	217	\$49.30	\$0.89	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	235	\$51.76	\$1.02
4. Prescribed Drugs	751,750	\$1.33	\$83.21	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	777,665	\$1.43	\$92.97
5. Behavioral Health - IP	706	\$736.19	\$43.30	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	727	\$773.00	\$46.83
6. Behavioral Health - OP/Phy	79,357	\$38.33	\$253.50	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	85,518	\$40.25	\$286.85
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	8,886	\$234.41	\$173.58	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,241	\$246.13	\$189.55
19. HCBS TBI	300	\$84.55	\$2.11	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	309	\$88.78	\$2.29
20. Buy-In			\$0.00									\$0.00
Total			\$1,323.61									\$1,485.73

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	872	\$740.94	\$53.84	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	939	\$608.84	\$47.62
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,428	\$199.45	\$40.35	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	2,668	\$215.40	\$47.89
4. Physician & Other	14,013	\$40.25	\$47.01	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,333	\$42.27	\$50.48
5. Home Health	17,445	\$170.63	\$248.06	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	19,874	\$189.40	\$313.68
6. Nursing	1,428	\$605.75	\$72.09	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,485	\$636.04	\$78.72
7. Dental	3,135	\$52.45	\$13.71	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,261	\$55.08	\$14.97
8. Transportation	3,112	\$17.95	\$4.65	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,229	\$18.84	\$5.07
9. DME/Supplies	3,022	\$134.06	\$33.76	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,282	\$142.10	\$38.87
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,600	\$549.90	\$348.25	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,752	\$571.90	\$369.43
12. OADAP	1,323	\$40.94	\$4.52	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,600	\$45.44	\$6.06
13. Ambulance	235	\$51.76	\$1.02	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	255	\$54.35	\$1.16
14. Prescribed Drugs	777,665	\$1.43	\$92.97	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	804,473	\$1.55	\$103.87
15. Behavioral Health - IP	727	\$773.00	\$46.83	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	749	\$811.65	\$50.65
16. Behavioral Health - OP/Phy	85,518	\$40.25	\$286.85	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	92,158	\$42.26	\$324.58
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,241	\$246.13	\$189.55	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,611	\$258.44	\$206.99
19. HCBS TBI	309	\$88.78	\$2.29	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	318	\$93.22	\$2.47
20. Buy-In			\$0.00									\$0.00
Total			\$1,485.73									\$1,662.49

Vermont Medicaid
 MEG: ABD - Non-Medicare - Child
 Scenario: Non-Medicare - High

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	939	\$608.84	\$47.62	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	967	\$633.19	\$51.01
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	2,668	\$215.40	\$47.89	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	2,806	\$232.64	\$54.39
4. Physician & Other	14,333	\$42.27	\$50.48	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	14,661	\$44.38	\$54.22
5. Home Health	19,874	\$189.40	\$313.68	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	22,641	\$210.24	\$396.66
6. Nursing	1,485	\$636.04	\$78.72	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,545	\$667.84	\$85.96
7. Dental	3,261	\$55.08	\$14.97	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,391	\$57.83	\$16.34
8. Transportation	3,229	\$18.84	\$5.07	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	3,350	\$19.79	\$5.52
9. DME/Supplies	3,282	\$142.10	\$38.87	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	3,566	\$150.63	\$44.76
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	7,752	\$571.90	\$369.43	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	7,907	\$594.77	\$391.89
12. OADAP	1,600	\$45.44	\$6.06	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	1,935	\$50.44	\$8.13
13. Ambulance	255	\$54.35	\$1.16	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	276	\$57.07	\$1.31
14. Prescribed Drugs	804,473	\$1.55	\$103.87	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	832,205	\$1.67	\$116.04
15. Behavioral Health - IP	749	\$811.65	\$50.65	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	771	\$852.24	\$54.78
16. Behavioral Health - OP/Phy	92,158	\$42.26	\$324.58	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	99,314	\$44.38	\$367.27
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,611	\$258.44	\$206.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,995	\$271.36	\$226.03
19. HCBS TBI	318	\$93.22	\$2.47	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	328	\$97.88	\$2.67
20. Buy-In			\$0.00									\$0.00
Total			\$1,662.49									\$1,876.99

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	249	\$896.09	\$18.59	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	254	\$931.94	\$19.72
2. NH	84	\$1,699.55	\$11.84	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	91	\$1,784.53	\$13.60
3. Outpatient	3,388	\$113.64	\$32.08	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,422	\$117.24	\$33.43
4. Physician & Other	19,150	\$27.59	\$44.03	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	20,299	\$28.97	\$49.01
5. Home Health	472	\$329.74	\$12.96	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	465	\$342.93	\$13.29
6. Nursing	27	\$759.43	\$1.74	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	28	\$789.81	\$1.85
7. Dental	1,592	\$44.40	\$5.89	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,656	\$46.62	\$6.43
8. Transportation	10,924	\$16.39	\$14.92	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,924	\$17.21	\$15.67
9. DME/Supplies	2,234	\$51.72	\$9.63	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	2,480	\$54.83	\$11.33
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	46	\$376.59	\$1.44	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	48	\$391.65	\$1.56
12. OADAP	629	\$45.73	\$2.40	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	757	\$50.76	\$3.20
13. Ambulance	473	\$69.12	\$2.73	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	492	\$72.58	\$2.98
14. Prescribed Drugs	2,073,270	\$1.28	\$221.82	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,139,902	\$1.39	\$247.26
15. Behavioral Health - IP	811	\$563.76	\$38.11	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	836	\$591.95	\$41.22
16. Behavioral Health - OP/Phy	8,609	\$218.61	\$156.83	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	9,169	\$229.54	\$175.39
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	9,531	\$418.10	\$332.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	9,912	\$439.00	\$362.62
19. HCBS TBI	959	\$157.24	\$12.57	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	988	\$165.10	\$13.59
20. Buy-In			\$57.55	15.6%	0.0%	15.6%	0.0%	0.0%	0.0%			\$66.53
Total			\$977.20									\$1,078.67

Vermont Medicaid
 MEG: ABD - Dual
 Scenario: Medicare - High

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	254	\$931.94	\$19.72	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	259	\$969.21	\$20.92
2. NH	91	\$1,784.53	\$13.60	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	100	\$1,873.76	\$15.61
3. Outpatient	3,422	\$117.24	\$33.43	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,456	\$120.96	\$34.84
4. Physician & Other	20,299	\$28.97	\$49.01	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	21,517	\$30.42	\$54.54
5. Home Health	465	\$342.93	\$13.29	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	458	\$356.65	\$13.63
6. Nursing	28	\$789.81	\$1.85	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	29	\$821.40	\$1.98
7. Dental	1,656	\$46.62	\$6.43	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,722	\$48.95	\$7.02
8. Transportation	10,924	\$17.21	\$15.67	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,925	\$18.07	\$16.46
9. DME/Supplies	2,480	\$54.83	\$11.33	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	2,753	\$58.11	\$13.33
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	48	\$391.65	\$1.56	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	50	\$407.31	\$1.68
12. OADAP	757	\$50.76	\$3.20	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	911	\$56.34	\$4.27
13. Ambulance	492	\$72.58	\$2.98	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	512	\$76.21	\$3.25
14. Prescribed Drugs	2,139,902	\$1.39	\$247.26	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,208,675	\$1.50	\$275.63
15. Behavioral Health - IP	836	\$591.95	\$41.22	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	861	\$621.54	\$44.58
16. Behavioral Health - OP/Phy	9,169	\$229.54	\$175.39	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	9,765	\$241.02	\$196.14
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	9,912	\$439.00	\$362.62	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	10,309	\$460.95	\$395.98
19. HCBS TBI	988	\$165.10	\$13.59	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	1,018	\$173.35	\$14.70
20. Buy-In			\$66.53	15.1%	0.0%	15.1%	0.0%	0.0%	0.0%			\$76.57
Total			\$1,078.67									\$1,191.14

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	259	\$969.21	\$20.92	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	264	\$1,007.98	\$22.19
2. NH	100	\$1,873.76	\$15.61	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	109	\$1,967.44	\$17.93
3. Outpatient	3,456	\$120.96	\$34.84	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	3,491	\$124.79	\$36.30
4. Physician & Other	21,517	\$30.42	\$54.54	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	22,808	\$31.94	\$60.71
5. Home Health	458	\$356.65	\$13.63	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	452	\$370.91	\$13.97
6. Nursing	29	\$821.40	\$1.98	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	30	\$854.26	\$2.11
7. Dental	1,722	\$48.95	\$7.02	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1,791	\$51.40	\$7.67
8. Transportation	10,925	\$18.07	\$16.46	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	10,925	\$18.98	\$17.28
9. DME/Supplies	2,753	\$58.11	\$13.33	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	3,056	\$61.60	\$15.69
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	50	\$407.31	\$1.68	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	52	\$423.61	\$1.82
12. OADAP	911	\$56.34	\$4.27	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	1,095	\$62.54	\$5.71
13. Ambulance	512	\$76.21	\$3.25	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	532	\$80.02	\$3.55
14. Prescribed Drugs	2,208,675	\$1.50	\$275.63	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	2,279,659	\$1.62	\$307.24
15. Behavioral Health - IP	861	\$621.54	\$44.58	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	887	\$652.62	\$48.21
16. Behavioral Health - OP/Phy	9,765	\$241.02	\$196.14	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	10,401	\$253.07	\$219.35
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	10,309	\$460.95	\$395.98	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	10,721	\$484.00	\$432.41
19. HCBS TBI	1,018	\$173.35	\$14.70	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	1,048	\$182.02	\$15.90
20. Buy-In			\$76.57	10.0%	0.0%	10.0%	0.0%	0.0%	0.0%			\$84.23
Total			\$1,191.14									\$1,312.27

Vermont Medicare
 MEG: ANFC Non-Medicare - Adult
 Scenario: Non-Medicare - High

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,010	\$1,123.76	\$94.56	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	1,040	\$1,230.67	\$106.66
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,048	\$183.23	\$77.08	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	5,308	\$197.89	\$87.54
4. Physician & Other	24,158	\$56.34	\$113.42	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	24,710	\$59.16	\$121.82
5. Home Health	80	\$239.20	\$1.59	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	91	\$265.52	\$2.01
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,476	\$53.11	\$10.96	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,575	\$55.77	\$11.97
8. Transportation	2,384	\$19.48	\$3.87	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,473	\$20.45	\$4.22
9. DME/Supplies	239	\$103.23	\$2.05	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	259	\$109.42	\$2.37
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	869	\$146.93	\$10.64	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	886	\$152.81	\$11.29
12. OADAP	3,040	\$37.38	\$9.47	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,676	\$41.50	\$12.71
13. Ambulance	387	\$40.23	\$1.30	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	420	\$42.24	\$1.48
14. Prescribed Drugs	513,035	\$1.13	\$48.46	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	530,720	\$1.22	\$54.14
15. Behavioral Health - IP	114	\$31.56	\$0.30	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	118	\$33.13	\$0.32
16. Behavioral Health - OP/Phy	4,345	\$40.44	\$14.64	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	4,682	\$42.46	\$16.57
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	42	\$441.67	\$1.56	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	44	\$463.76	\$1.70
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$389.90									\$434.78

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,040	\$1,230.67	\$106.66	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	1,119	\$1,011.25	\$94.34
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,308	\$197.89	\$87.54	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	5,833	\$213.72	\$103.89
4. Physician & Other	24,710	\$59.16	\$121.82	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,275	\$62.12	\$130.83
5. Home Health	91	\$265.52	\$2.01	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	104	\$294.72	\$2.54
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,575	\$55.77	\$11.97	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,678	\$58.55	\$13.07
8. Transportation	2,473	\$20.45	\$4.22	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,566	\$21.47	\$4.59
9. DME/Supplies	259	\$109.42	\$2.37	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	282	\$115.99	\$2.72
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	886	\$152.81	\$11.29	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	904	\$158.92	\$11.97
12. OADAP	3,676	\$41.50	\$12.71	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	4,445	\$46.06	\$17.06
13. Ambulance	420	\$42.24	\$1.48	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	455	\$44.35	\$1.68
14. Prescribed Drugs	530,720	\$1.22	\$54.14	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	549,016	\$1.32	\$60.49
15. Behavioral Health - IP	118	\$33.13	\$0.32	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	121	\$34.79	\$0.35
16. Behavioral Health - OP/Phy	4,682	\$42.46	\$16.57	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	5,045	\$44.58	\$18.74
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	44	\$463.76	\$1.70	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	46	\$486.94	\$1.86
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$434.78									\$464.14

Vermont Medicaid
 MEG: ANFC - Non-Medicare - Adult
 Scenario: Non-Medicare - High

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	1,119	\$1,011.25	\$94.34	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	1,153	\$1,051.70	\$101.05
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	5,833	\$213.72	\$103.89	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	6,134	\$230.82	\$117.99
4. Physician & Other	25,275	\$62.12	\$130.83	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	25,852	\$65.22	\$140.51
5. Home Health	104	\$294.72	\$2.54	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	118	\$327.14	\$3.22
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	2,678	\$58.55	\$13.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,785	\$61.48	\$14.27
8. Transportation	2,566	\$21.47	\$4.59	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	2,662	\$22.55	\$5.00
9. DME/Supplies	282	\$115.99	\$2.72	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	306	\$122.95	\$3.14
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	904	\$158.92	\$11.97	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	922	\$165.28	\$12.70
12. OADAP	4,445	\$46.06	\$17.06	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	5,374	\$51.13	\$22.90
13. Ambulance	455	\$44.35	\$1.68	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	493	\$46.57	\$1.91
14. Prescribed Drugs	549,016	\$1.32	\$60.49	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	567,941	\$1.43	\$67.58
15. Behavioral Health - IP	121	\$34.79	\$0.35	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	125	\$36.53	\$0.38
16. Behavioral Health - OP/Phy	5,045	\$44.58	\$18.74	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	5,437	\$46.81	\$21.21
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	46	\$486.94	\$1.86	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	48	\$511.29	\$2.03
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$464.14									\$513.89

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	189	\$1,058.44	\$16.67	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	195	\$1,159.14	\$18.80
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,030	\$180.12	\$15.46	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	1,083	\$194.53	\$17.55
4. Physician & Other	11,421	\$35.72	\$33.99	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	11,682	\$37.50	\$36.51
5. Home Health	408	\$166.12	\$5.64	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	464	\$184.40	\$7.14
6. Nursing	20	\$594.23	\$0.99	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	21	\$623.94	\$1.08
7. Dental	3,959	\$42.47	\$14.01	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,117	\$44.60	\$15.30
8. Transportation	698	\$13.89	\$0.81	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	724	\$14.58	\$0.88
9. DME/Supplies	165	\$88.70	\$1.22	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	179	\$94.02	\$1.40
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,200	\$281.70	\$51.65	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,244	\$292.97	\$54.79
12. OADAP	400	\$72.65	\$2.42	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	484	\$80.65	\$3.25
13. Ambulance	90	\$48.47	\$0.36	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	98	\$50.89	\$0.41
14. Prescribed Drugs	253,145	\$0.85	\$17.92	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	261,871	\$0.92	\$20.02
15. Behavioral Health - IP	156	\$1,206.64	\$15.64	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	160	\$1,266.97	\$16.92
16. Behavioral Health - OP/Phy	20,650	\$28.55	\$49.13	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	22,253	\$29.98	\$55.59
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	322	\$309.21	\$8.29	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	335	\$324.67	\$9.06
19. HCBS TBI	4	\$29.47	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$30.95	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$234.23									\$258.72

Vermont Medicaid
 MEG: ANFC - Non-Medicare - Child
 Scenario: Non-Medicare - High

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	195	\$1,159.14	\$18.80	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	209	\$952.48	\$16.63
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,083	\$194.53	\$17.55	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	1,190	\$210.09	\$20.83
4. Physician & Other	11,682	\$37.50	\$36.51	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	11,949	\$39.38	\$39.21
5. Home Health	464	\$184.40	\$7.14	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	529	\$204.68	\$9.02
6. Nursing	21	\$623.94	\$1.08	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	22	\$655.13	\$1.18
7. Dental	4,117	\$44.60	\$15.30	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,282	\$46.83	\$16.71
8. Transportation	724	\$14.58	\$0.88	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	751	\$15.31	\$0.96
9. DME/Supplies	179	\$94.02	\$1.40	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	194	\$99.67	\$1.61
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,244	\$292.97	\$54.79	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,289	\$304.69	\$58.12
12. OADAP	484	\$80.65	\$3.25	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	585	\$89.52	\$4.36
13. Ambulance	98	\$50.89	\$0.41	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	106	\$53.44	\$0.47
14. Prescribed Drugs	261,871	\$0.92	\$20.02	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	270,899	\$0.99	\$22.37
15. Behavioral Health - IP	160	\$1,266.97	\$16.92	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	165	\$1,330.32	\$18.29
16. Behavioral Health - OP/Phy	22,253	\$29.98	\$55.59	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	23,981	\$31.48	\$62.91
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	335	\$324.67	\$9.06	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	348	\$340.90	\$9.89
19. HCBS TBI	4	\$30.95	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$32.49	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$258.72									\$282.59

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	209	\$952.48	\$16.63	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	216	\$990.57	\$17.81
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	1,190	\$210.09	\$20.83	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	1,251	\$226.90	\$23.66
4. Physician & Other	11,949	\$39.38	\$39.21	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	12,222	\$41.35	\$42.11
5. Home Health	529	\$204.68	\$9.02	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	603	\$227.19	\$11.41
6. Nursing	22	\$655.13	\$1.18	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$687.89	\$1.29
7. Dental	4,282	\$46.83	\$16.71	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	4,453	\$49.17	\$18.25
8. Transportation	751	\$15.31	\$0.96	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	779	\$16.08	\$1.04
9. DME/Supplies	194	\$99.67	\$1.61	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	211	\$105.64	\$1.86
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	2,289	\$304.69	\$58.12	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	2,335	\$316.87	\$61.66
12. OADAP	585	\$89.52	\$4.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	707	\$99.36	\$5.86
13. Ambulance	106	\$53.44	\$0.47	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	115	\$56.11	\$0.54
14. Prescribed Drugs	270,899	\$0.99	\$22.37	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	280,237	\$1.07	\$25.00
15. Behavioral Health - IP	165	\$1,330.32	\$18.29	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	170	\$1,396.84	\$19.79
16. Behavioral Health - OP/Phy	23,981	\$31.48	\$62.91	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	25,843	\$33.05	\$71.18
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	348	\$340.90	\$9.89	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	362	\$357.95	\$10.80
19. HCBS TBI	4	\$32.49	\$0.01	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	4	\$34.12	\$0.01
20. Buy-In			\$0.00									\$0.00
Total			\$282.59									\$312.26

Vermont Medicaid
 MEG: GlobalExp
 Scenario: Non-Medicare - High

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	451	\$1,018.13	\$38.27	3.0%	4.0%	7.1%	0.0%	5.7%	5.7%	465	\$1,119.04	\$43.32
2. NH	0	\$312.13	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$327.73	\$0.00
3. Outpatient	2,838	\$239.57	\$56.66	5.2%	8.0%	13.6%	6.1%	2.0%	8.2%	3,167	\$263.80	\$69.62
4. Physician & Other	17,211	\$43.06	\$61.75	2.3%	5.0%	7.4%	2.0%	3.9%	6.0%	17,950	\$46.99	\$70.28
5. Home Health	44	\$527.95	\$1.92	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	50	\$586.02	\$2.43
6. Nursing	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	23	\$92.15	\$0.18	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$96.76	\$0.19
8. Transportation	19	\$25.23	\$0.04	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	19	\$26.50	\$0.04
9. DME/Supplies	239	\$113.92	\$2.27	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	259	\$120.75	\$2.61
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	16	\$330.59	\$0.45	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$343.82	\$0.47
12. OADAP	1,968	\$57.09	\$9.36	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,380	\$63.37	\$12.57
13. Ambulance	291	\$42.10	\$1.02	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	315	\$44.20	\$1.16
14. Prescribed Drugs	485,305	\$1.11	\$44.98	3.4%	8.0%	11.7%	15.9%	26.6%	46.7%	581,837	\$1.52	\$73.73
15. Behavioral Health - IP	81	\$22.26	\$0.15	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	84	\$23.38	\$0.16
16. Behavioral Health - OP/Phy	2,527	\$62.88	\$13.24	7.8%	5.0%	13.2%	0.0%	1.2%	1.2%	2,723	\$66.81	\$15.16
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	22	\$63.51	\$0.11	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	22	\$66.69	\$0.12
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In												
Total			\$230.41									\$291.88

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	465	\$1,119.04	\$43.32	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	500	\$919.52	\$38.32
2. NH	0	\$327.73	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$344.12	\$0.00
3. Outpatient	3,167	\$263.80	\$69.62	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	3,480	\$284.91	\$82.62
4. Physician & Other	17,950	\$46.99	\$70.28	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	18,360	\$49.33	\$75.48
5. Home Health	50	\$586.02	\$2.43	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	57	\$650.48	\$3.07
6. Nursing	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	24	\$96.76	\$0.19	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	25	\$101.60	\$0.21
8. Transportation	19	\$26.50	\$0.04	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	20	\$27.82	\$0.05
9. DME/Supplies	259	\$120.75	\$2.61	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	282	\$128.00	\$3.01
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	17	\$343.82	\$0.47	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$357.57	\$0.50
12. OADAP	2,380	\$63.37	\$12.57	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	2,877	\$70.34	\$16.87
13. Ambulance	315	\$44.20	\$1.16	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	342	\$46.41	\$1.32
14. Prescribed Drugs	581,837	\$1.52	\$73.73	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	601,894	\$1.64	\$82.38
15. Behavioral Health - IP	84	\$23.38	\$0.16	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	86	\$24.55	\$0.18
16. Behavioral Health - OP/Phy	2,723	\$66.81	\$15.16	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	2,934	\$70.15	\$17.15
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	22	\$66.69	\$0.12	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$70.02	\$0.14
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In	0	\$0.00	\$0.00									
Total			\$291.88									\$321.29

Vermont Medicaid
 MEG: GlobalExp
 Scenario: Non-Medicare - High

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	500	\$919.52	\$38.32	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	515	\$956.30	\$41.04
2. NH	0	\$344.12	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$361.33	\$0.00
3. Outpatient	3,480	\$284.91	\$82.62	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	3,660	\$307.70	\$93.84
4. Physician & Other	18,360	\$49.33	\$75.48	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	18,780	\$51.80	\$81.07
5. Home Health	57	\$650.48	\$3.07	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	65	\$722.04	\$3.89
6. Nursing	0	\$0.00	\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
7. Dental	25	\$101.60	\$0.21	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	26	\$106.68	\$0.23
8. Transportation	20	\$27.82	\$0.05	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	21	\$29.21	\$0.05
9. DME/Supplies	282	\$128.00	\$3.01	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	306	\$135.68	\$3.46
10. Enhanced Residential Care	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
11. D&P	17	\$357.57	\$0.50	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	17	\$371.87	\$0.53
12. OADAP	2,877	\$70.34	\$16.87	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	3,479	\$78.08	\$22.64
13. Ambulance	342	\$46.41	\$1.32	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	370	\$48.73	\$1.50
14. Prescribed Drugs	601,894	\$1.64	\$82.38	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	622,643	\$1.77	\$92.03
15. Behavioral Health - IP	86	\$24.55	\$0.18	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	89	\$25.77	\$0.19
16. Behavioral Health - OP/Phy	2,934	\$70.15	\$17.15	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	3,162	\$73.66	\$19.41
17. HCBS - Aged/Disabled	0	\$0.00	\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
18. HCBS - MH/MR	23	\$70.02	\$0.14	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$73.52	\$0.15
19. HCBS TBI	0	\$0.00	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0	\$0.00	\$0.00
20. Buy-In			\$0.00									\$0.00
Total			\$321.29									\$360.03

Vermont Medicaid
 MEG: GlobalRx
 Scenario: Medicare - High

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$816.88	\$0.66	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$849.56	\$0.70
2. NH	0	\$1,374.00	\$0.02	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,442.70	\$0.02
3. Outpatient	123	\$134.27	\$1.37	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	124	\$138.53	\$1.43
4. Physician & Other	1,543	\$25.97	\$3.34	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,636	\$27.27	\$3.72
5. Home Health	0		\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0		\$0.00
6. Nursing	0		\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	1	\$735.13	\$0.05	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$771.88	\$0.05
8. Transportation	0		\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
9. DME/Supplies	301	\$24.70	\$0.62	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	335	\$26.19	\$0.73
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	0	\$273.17	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$284.10	\$0.00
12. OADAP	0		\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0		\$0.00
13. Ambulance	16	\$76.52	\$0.10	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	16	\$80.34	\$0.11
14. Prescribed Drugs	1,614,291	\$1.19	\$159.51	3.2%	8.0%	11.5%	2.7%	3.7%	6.5%	1,711,158	\$1.33	\$189.36
15. Behavioral Health - IP	9	\$24.56	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	9	\$25.79	\$0.02
16. Behavioral Health - OP/Phy	6	\$66.17	\$0.03	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$69.48	\$0.04
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In	0		\$0.00	15.6%	0.0%	15.6%	0.0%	0.0%	0.0%	0		\$0.00
Total			\$165.72									\$196.18

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$849.56	\$0.70	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$883.54	\$0.74
2. NH	0	\$1,442.70	\$0.02	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,514.84	\$0.03
3. Outpatient	124	\$138.53	\$1.43	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	125	\$142.92	\$1.49
4. Physician & Other	1,636	\$27.27	\$3.72	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,734	\$28.63	\$4.14
5. Home Health	0		\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0		\$0.00
6. Nursing	0		\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	1	\$771.88	\$0.05	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$810.48	\$0.06
8. Transportation	0		\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
9. DME/Supplies	335	\$26.19	\$0.73	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	371	\$27.76	\$0.86
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	0	\$284.10	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$295.46	\$0.00
12. OADAP	0		\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0		\$0.00
13. Ambulance	16	\$80.34	\$0.11	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	17	\$84.36	\$0.12
14. Prescribed Drugs	1,711,158	\$1.33	\$189.36	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	1,766,152	\$1.43	\$211.08
15. Behavioral Health - IP	9	\$25.79	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	10	\$27.08	\$0.02
16. Behavioral Health - OP/Phy	7	\$69.48	\$0.04	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$72.95	\$0.04
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In			\$0.00	15.1%	0.0%	15.1%	0.0%	0.0%	0.0%			\$0.00
Total			\$196.18									\$218.58

vermont Medicaid
 MEG: GlobalRx
 Scenario: Medicare - High

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	10	\$883.54	\$0.74	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	10	\$918.88	\$0.79
2. NH	0	\$1,514.84	\$0.03	9.4%	5.0%	14.8%	0.0%	0.0%	0.0%	0	\$1,590.58	\$0.03
3. Outpatient	125	\$142.92	\$1.49	1.0%	3.2%	4.2%	0.0%	0.0%	0.0%	126	\$147.45	\$1.55
4. Physician & Other	1,734	\$28.63	\$4.14	6.0%	5.0%	11.3%	0.0%	0.0%	0.0%	1,838	\$30.06	\$4.61
5. Home Health	0		\$0.00	-1.4%	4.0%	2.5%	0.0%	0.0%	0.0%	0		\$0.00
6. Nursing	0		\$0.00	2.5%	4.0%	6.6%	0.0%	0.0%	0.0%	0		\$0.00
7. Dental	1	\$810.48	\$0.06	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	1	\$851.00	\$0.06
8. Transportation	0		\$0.00	0.0%	5.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
9. DME/Supplies	371	\$27.76	\$0.86	11.0%	6.0%	17.7%	0.0%	0.0%	0.0%	412	\$29.42	\$1.01
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	0	\$295.46	\$0.00	4.0%	4.0%	8.1%	0.0%	0.0%	0.0%	0	\$307.28	\$0.00
12. OADAP	0		\$0.00	20.3%	11.0%	33.5%	0.0%	0.0%	0.0%	0		\$0.00
13. Ambulance	17	\$84.36	\$0.12	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	18	\$88.58	\$0.13
14. Prescribed Drugs	1,766,152	\$1.43	\$211.08	3.2%	8.0%	11.5%	0.0%	0.0%	0.0%	1,822,914	\$1.55	\$235.30
15. Behavioral Health - IP	10	\$27.08	\$0.02	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	10	\$28.43	\$0.02
16. Behavioral Health - OP/Phy	7	\$72.95	\$0.04	6.5%	5.0%	11.8%	0.0%	0.0%	0.0%	7	\$76.60	\$0.05
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	4.0%	5.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
19. HCBS TBI	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
20. Buy-In	0		\$0.00	10.0%	0.0%	10.0%	0.0%	0.0%	0.0%	0		\$0.00
Total			\$218.58									\$243.55

Vermont Medicaid
 MEG: OptionalExp
 Scenario: Non-Medicare - High

Category of Service	FY04 Total w/ Lump Sums			FY05 Trends			FY05 Other			FY05 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	8	\$1,111.47	\$0.74	3.0%	4.0%	7.1%	0.0%	5.3%	5.3%	8	\$1,217.21	\$0.83
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	310	\$110.13	\$2.85	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	326	\$118.94	\$3.24
4. Physician & Other	4,613	\$22.19	\$8.53	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,718	\$23.30	\$9.16
5. Home Health	387	\$281.29	\$9.08	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	441	\$312.23	\$11.48
6. Nursing	22	\$1,674.34	\$3.07	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	23	\$1,758.05	\$3.35
7. Dental	2,816	\$41.89	\$9.83	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	2,929	\$43.98	\$10.74
8. Transportation	487	\$26.96	\$1.09	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	506	\$28.31	\$1.19
9. DME/Supplies	91	\$95.09	\$0.72	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	99	\$100.79	\$0.83
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,632	\$264.98	\$36.04	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,665	\$275.58	\$38.24
12. OADAP	29	\$374.03	\$0.89	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	34	\$415.17	\$1.19
13. Ambulance	30	\$35.67	\$0.09	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	32	\$37.45	\$0.10
14. Prescribed Drugs	237,015	\$0.61	\$12.13	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	245,185	\$0.66	\$13.55
15. Behavioral Health - IP	2	\$6,081.90	\$1.13	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$6,386.00	\$1.23
16. Behavioral Health - OP/Phy	9,221	\$34.05	\$26.16	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	9,937	\$35.75	\$29.61
17. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
18. HCBS - MH/MR	160	\$188.87	\$2.52	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	166	\$198.32	\$2.75
19. HCBS TBI	21	\$117.73	\$0.20	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	21	\$123.62	\$0.22
20. Buy-In			\$0.00									\$0.00
Total			\$115.08									\$127.70

Scenario: Non-Medicare - High

Category of Service	FY05 Total w/ Lump Sums			FY06 Trends			FY06 Other			FY06 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
1. Inpatient	8	\$1,217.21	\$0.83	3.0%	4.0%	7.1%	4.5%	-21.0%	-17.4%	9	\$1,000.19	\$0.74
2. NH	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
3. Outpatient	326	\$118.94	\$3.24	5.2%	8.0%	13.6%	4.5%	0.0%	4.5%	359	\$128.45	\$3.84
4. Physician & Other	4,718	\$23.30	\$9.16	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,826	\$24.47	\$9.84
5. Home Health	441	\$312.23	\$11.48	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	503	\$346.58	\$14.52
5. Nursing	23	\$1,758.05	\$3.35	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	24	\$1,845.96	\$3.66
7. Dental	2,929	\$43.98	\$10.74	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,046	\$46.18	\$11.72
8. Transportation	506	\$28.31	\$1.19	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	525	\$29.72	\$1.30
9. DME/Supplies	99	\$100.79	\$0.83	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	107	\$106.84	\$0.95
10. Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
11. D&P	1,665	\$275.58	\$38.24	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,698	\$286.61	\$40.56
12. OADAP	34	\$415.17	\$1.19	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	42	\$460.84	\$1.60
13. Ambulance	32	\$37.45	\$0.10	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	35	\$39.32	\$0.11
4. Prescribed Drugs	245,185	\$0.66	\$13.55	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	253,638	\$0.72	\$15.14
5. Behavioral Health - IP	2	\$6,386.00	\$1.23	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$6,705.30	\$1.33
6. Behavioral Health - OP/Phy	9,937	\$35.75	\$29.61	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	10,708	\$37.54	\$33.50
7. HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
8. HCBS - MH/MR	166	\$198.32	\$2.75	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	173	\$208.23	\$3.00
9. HCBS TBI	21	\$123.62	\$0.22	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	22	\$129.80	\$0.24
1. Buy-In			\$0.00									\$0.00
Total			\$127.70									\$142.05

nt Medicaid
 OptionalExp
 io: Non-Medicare - High

Category of Service	FY06 Total w/ Lump Sums			FY07 Trends			FY07 Other			FY07 Projections		
	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM	Util / 1000	Unit Cost	Cost PMPM
patient	9	\$1,000.19	\$0.74	3.0%	4.0%	7.1%	0.0%	0.0%	0.0%	9	\$1,040.20	\$0.79
I	0		\$0.00	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	0		\$0.00
patient	359	\$128.45	\$3.84	5.2%	8.0%	13.6%	0.0%	0.0%	0.0%	377	\$138.73	\$4.36
physician & Other	4,826	\$24.47	\$9.84	2.3%	5.0%	7.4%	0.0%	0.0%	0.0%	4,936	\$25.69	\$10.57
Home Health	503	\$346.58	\$14.52	13.9%	11.0%	26.5%	0.0%	0.0%	0.0%	573	\$384.70	\$18.36
ursing	24	\$1,845.96	\$3.66	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	25	\$1,938.25	\$4.00
ental	3,046	\$46.18	\$11.72	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	3,168	\$48.49	\$12.80
ransportation	525	\$29.72	\$1.30	3.8%	5.0%	8.9%	0.0%	0.0%	0.0%	544	\$31.21	\$1.42
ME/Supplies	107	\$106.84	\$0.95	8.6%	6.0%	15.1%	0.0%	0.0%	0.0%	116	\$113.25	\$1.10
Enhanced Residential Care	0		\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	0		\$0.00
D&P	1,698	\$286.61	\$40.56	2.0%	4.0%	6.1%	0.0%	0.0%	0.0%	1,732	\$298.07	\$43.03
OADAP	42	\$460.84	\$1.60	20.9%	11.0%	34.2%	0.0%	0.0%	0.0%	50	\$511.53	\$2.15
Ambulance	35	\$39.32	\$0.11	8.4%	5.0%	13.8%	0.0%	0.0%	0.0%	38	\$41.29	\$0.13
Prescribed Drugs	253,638	\$0.72	\$15.14	3.4%	8.0%	11.7%	0.0%	0.0%	0.0%	262,381	\$0.77	\$16.91
Behavioral Health - IP	2	\$6,705.30	\$1.33	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	2	\$7,040.56	\$1.44
Behavioral Health - OP/Phy	10,708	\$37.54	\$33.50	7.8%	5.0%	13.2%	0.0%	0.0%	0.0%	11,540	\$39.42	\$37.91
HCBS - Aged/Disabled	0		\$0.00	1.0%	1.0%	2.0%	0.0%	0.0%	0.0%	0		\$0.00
HCBS - MH/MR	173	\$208.23	\$0.24	4.0%	5.0%	9.2%	0.0%	0.0%	0.0%	180	\$218.65	\$3.28
HCBS TBI	22	\$129.80	\$0.00	3.0%	5.0%	8.2%	0.0%	0.0%	0.0%	23	\$136.29	\$0.26
Buy-In												\$0.00
			\$142.05									\$158.48

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% of Prescription Drugs still covered 3.0%

MEG	SFY06			Rate Period Trend Adjusted				Months of Trend	Rate Period Medical Cost ⁽¹⁾			Member Months
	Low	Best	High	Trends			Low		Best	High		
				Low	Best	High						
ABD - Non-Medicare - Adult	\$937.43	\$1,015.22	\$1,054.71	6.7%	8.7%	10.8%	1.5	\$945.02	\$1,025.92	\$1,068.36	109,379	
ABD - Non-Medicare - Child	\$1,486.81	\$1,600.69	\$1,662.49	8.2%	10.3%	12.4%	1.5	\$1,501.60	\$1,620.48	\$1,687.03	32,635	
ABD - Dual												
Non-Rx	\$821.20	\$883.92	\$915.51	6.3%	8.2%	10.1%	1.5	\$827.52	\$892.68	\$926.60		
Rx	\$247.45	\$265.33	\$275.63	7.3%	9.4%	11.5%	-1.5	\$245.29	\$262.38	\$271.91		
10/05 - 12/05 Rate								\$1,072.81	\$1,155.06	\$1,198.51	37,588	
1/06 - 6/06 Rate								\$834.88	\$900.55	\$934.76	75,847	
ANFC - Non-Medicare - Adult	\$416.84	\$446.73	\$464.14	6.1%	8.2%	10.3%	1.5	\$419.96	\$451.16	\$469.86	78,302	
ANFC - Non-Medicare - Child	\$252.20	\$271.98	\$282.59	6.1%	8.1%	10.2%	1.5	\$254.06	\$274.66	\$286.06	479,131	
GlobalExp	\$287.76	\$309.31	\$321.29	7.4%	9.5%	11.6%	1.5	\$290.36	\$312.85	\$325.74	208,491	
GlobalRx												
Non-Rx	\$6.94	\$7.22	\$7.50	5.8%	7.8%	9.9%	1.5	\$6.99	\$7.29	\$7.59		
Rx:												
10/05 - 12/05	\$189.51	\$203.20	\$211.08	7.3%	9.4%	11.5%	1.5	\$191.18	\$205.48	\$213.97		
1/06 - 6/06	\$5.69	\$6.10	\$6.33	0.0%	0.0%	0.0%	1.5	\$5.69	\$6.10	\$6.33		
10/05 - 12/05 Rate								\$198.17	\$212.77	\$221.56	31,980	
1/06 - 6/06 Rate								\$12.68	\$13.38	\$13.92	63,420	
ationalExp	\$127.39	\$136.74	\$142.05	7.1%	9.1%	11.2%	1.5	\$128.48	\$138.24	\$143.95	15,983	

tes:

Rate include drugs not covered by Part D.

MEG	Rate Period Medical Cost			Admin/Contingency Margin			Total Rate			Member Months
	Low	Best	High	Low	Best	High	Low	Best	High	
Admin/Contingency Margin %				10.5%	9.01%	9.01%				
M										
- Non-Medicare - Adult	\$945.02	\$1,025.92	\$1,068.36	\$110.87	\$101.59	\$105.79	\$1,055.89	\$1,127.50	\$1,174.15	109,379
- Non-Medicare - Child	\$1,501.60	\$1,620.48	\$1,687.03	\$176.17	\$160.46	\$167.05	\$1,677.77	\$1,780.95	\$1,854.08	32,635
- Dual - 10/05 - 12/05	\$1,072.81	\$1,155.06	\$1,198.51	\$125.86	\$114.38	\$118.68	\$1,198.67	\$1,269.44	\$1,317.19	37,588
- Dual - 1/06 - 6/06	\$834.88	\$900.55	\$934.76	\$97.95	\$89.17	\$92.56	\$932.83	\$989.73	\$1,027.32	75,847
C - Non-Medicare - Adult	\$419.96	\$451.16	\$469.86	\$49.27	\$44.67	\$46.53	\$469.23	\$495.84	\$516.39	78,302
C - Non-Medicare - Child	\$254.06	\$274.66	\$286.06	\$29.81	\$27.20	\$28.33	\$283.87	\$301.86	\$314.38	479,131
GlobalExp	\$290.36	\$312.85	\$325.74	\$34.06	\$30.98	\$32.26	\$324.42	\$343.83	\$358.00	208,491
GlobalRx - Non-Medicare - 10/05 - 6/06	\$198.17	\$212.77	\$221.56	\$23.25	\$21.07	\$21.94	\$221.42	\$233.84	\$243.50	993
GlobalRx - Dual - 10/05 - 12/05	\$198.17	\$212.77	\$221.56	\$23.25	\$21.07	\$21.94	\$221.42	\$233.84	\$243.50	31,647
GlobalRx - Dual - 1/06 - 6/06	\$12.68	\$13.38	\$13.92	\$1.49	\$1.33	\$1.38	\$14.16	\$14.71	\$15.30	62,760
OptionalExp	\$128.48	\$138.24	\$143.95	\$15.07	\$13.69	\$14.25	\$143.55	\$151.93	\$158.21	15,983
Total - All MEG's	\$424.17	\$458.14	\$476.74	\$49.76	\$45.37	\$47.21	\$473.94	\$503.51	\$523.95	1,132,757
	-7.4%	0.0%	4.1%	9.7%	0.0%	4.1%	-5.9%	0.0%	4.1%	
Total \$										
3D - Non-Medicare - Adult	\$103,365,306	\$112,213,378	\$116,856,158	\$12,126,656	\$11,111,579	\$11,571,315	\$115,491,962	\$123,324,956	\$128,427,473	
3D - Non-Medicare - Child	\$49,004,967	\$52,884,713	\$55,056,431	\$5,749,186	\$5,236,743	\$5,451,791	\$54,754,154	\$58,121,456	\$60,508,222	
BD - Dual - 10/05 - 12/05	\$40,324,548	\$43,416,004	\$45,049,323	\$4,730,813	\$4,299,134	\$4,460,868	\$45,055,361	\$47,715,138	\$49,510,192	
BD - Dual - 1/06 - 6/06	\$63,323,104	\$68,304,134	\$70,898,433	\$7,428,967	\$6,763,603	\$7,020,495	\$70,752,071	\$75,067,737	\$77,918,928	
NFC - Non-Medicare - Adult	\$32,883,903	\$35,326,965	\$36,791,552	\$3,857,888	\$3,498,142	\$3,643,168	\$36,741,791	\$38,825,107	\$40,434,720	
NFC - Non-Medicare - Child	\$121,730,238	\$131,597,437	\$137,057,897	\$14,281,201	\$13,031,024	\$13,571,729	\$136,011,439	\$144,628,461	\$150,629,626	
GlobalExp	\$60,536,590	\$65,226,357	\$67,914,360	\$7,102,058	\$6,458,836	\$6,725,007	\$67,638,648	\$71,685,192	\$74,639,367	
GlobalRx - Non-Medicare - 10/05 - 6/06	\$196,807	\$211,305	\$220,031	\$23,089	\$20,924	\$21,788	\$219,896	\$232,229	\$241,819	
GlobalRx - 10/05 - 12/05	\$6,271,581	\$6,733,586	\$7,011,652	\$735,772	\$666,772	\$694,307	\$7,007,353	\$7,400,358	\$7,705,959	
GlobalRx - 1/06 - 6/06	\$795,551	\$839,896	\$873,754	\$93,333	\$83,168	\$86,521	\$888,884	\$923,064	\$960,275	
OptionalExp	\$2,053,439	\$2,209,550	\$2,300,813	\$240,906	\$218,794	\$227,831	\$2,294,346	\$2,428,344	\$2,528,644	
Total - All MEG's	\$480,486,035	\$518,963,325	\$540,030,404	\$56,369,870	\$51,388,719	\$53,474,821	\$536,855,905	\$570,352,045	\$593,505,225	

Rate Period

MEG	Rate Period Medical Cost			Admin/Contingency Margin			Total Rate			Member Months
	Low	Best	High	Low	Best	High	Low	Best	High	
Admin/Contingency Margin %				10.5%	9.01%	9.01%				
PMPM										
ABD - Non-Medicare - Adult	\$1,002.19	\$1,106.45	\$1,171.58	\$117.58	\$109.56	\$116.01	\$1,119.77	\$1,216.02	\$1,287.59	148,859
ABD - Non-Medicare - Child	\$1,617.06	\$1,773.51	\$1,876.99	\$189.71	\$175.62	\$185.86	\$1,806.77	\$1,949.13	\$2,062.86	44,415
ABD - Dual	\$878.44	\$962.24	\$1,014.24	\$103.06	\$95.28	\$100.43	\$981.50	\$1,057.52	\$1,114.67	154,379
ANFC - Non-Medicare - Adult	\$443.99	\$485.28	\$513.89	\$52.09	\$48.05	\$50.89	\$496.08	\$533.33	\$564.77	104,423
ANFC - Non-Medicare - Child	\$268.13	\$294.86	\$312.26	\$31.46	\$29.20	\$30.92	\$299.59	\$324.05	\$343.18	638,961
GlobalExp	\$310.29	\$340.11	\$360.03	\$36.40	\$33.68	\$35.65	\$346.69	\$373.79	\$395.69	276,574
GlobalRx	\$7.35	\$7.79	\$8.25	\$0.86	\$0.77	\$0.82	\$8.21	\$8.57	\$9.07	124,682
OptionalExp	\$136.80	\$149.70	\$158.48	\$16.05	\$14.82	\$15.69	\$152.85	\$164.52	\$174.18	23,109
Total - All MEG's	\$438.30	\$481.45	\$509.30	\$51.42	\$47.67	\$50.43	\$489.72	\$529.13	\$559.73	1,515,402
	-9.0%	0.0%	5.8%	7.9%	0.0%	5.8%	-7.4%	0.0%	5.8%	
Total \$										
ABD - Non-Medicare - Adult	\$149,185,270	\$164,705,905	\$174,400,864	\$17,502,182	\$16,309,487	\$17,269,500	\$166,687,452	\$181,015,392	\$191,670,363	
ABD - Non-Medicare - Child	\$71,821,632	\$78,770,292	\$83,366,424	\$8,426,001	\$7,799,982	\$8,255,099	\$80,247,633	\$86,570,273	\$91,621,524	
ABD - Dual	\$135,613,316	\$148,549,219	\$156,577,146	\$15,909,942	\$14,709,622	\$15,504,562	\$151,523,258	\$163,258,841	\$172,081,708	
ANFC - Non-Medicare - Adult	\$46,362,689	\$50,673,906	\$53,661,469	\$5,439,198	\$5,017,825	\$5,313,659	\$51,801,887	\$55,691,731	\$58,975,128	
ANFC - Non-Medicare - Child	\$171,325,308	\$188,401,589	\$199,520,651	\$20,099,617	\$18,655,878	\$19,756,908	\$191,424,926	\$207,057,467	\$219,277,559	
GlobalExp	\$85,817,067	\$94,064,799	\$99,576,105	\$10,067,924	\$9,314,472	\$9,860,212	\$95,884,992	\$103,379,272	\$109,436,317	
GlobalRx	\$916,665	\$971,751	\$1,029,224	\$107,542	\$96,225	\$101,916	\$1,024,207	\$1,067,976	\$1,131,140	
OptionalExp	\$3,161,441	\$3,459,325	\$3,662,443	\$370,895	\$342,549	\$362,662	\$3,532,337	\$3,801,874	\$4,025,105	
Total - All MEG's	\$664,203,388	\$729,596,787	\$771,794,325	\$77,923,303	\$72,246,039	\$76,424,518	\$742,126,691	\$801,842,826	\$848,218,843	

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 elopment of Rates for 10/2005 to 9/2006

DRAFT - Work In Progress

MEG	Projected Member Months			Total Rate - LOW END OF RANGE				Total Rate - BEST ESTIMATE				Total Rate - HIGH END OF RANGE			
	10/05-12/05	1/06-6/06	7/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06	10/05-12/05	1/06-6/06	7/06-9/06	Subtotal 1/06-9/06
PM				Rates				Rates	Rates			Rates			
D - Non-Medicare - Adult	36,244	73,135	36,891	\$1,055.89	\$1,055.89	\$1,119.77	\$1,077.31	\$1,127.50	\$1,127.50	\$1,216.02	\$1,157.18	\$1,174.15	\$1,174.15	\$1,287.59	\$1,212.19
D - Non-Medicare - Child	10,814	21,821	11,007	\$1,677.77	\$1,677.77	\$1,806.77	\$1,721.02	\$1,780.95	\$1,780.95	\$1,949.13	\$1,837.34	\$1,854.08	\$1,854.08	\$2,062.86	\$1,924.08
D - Dual	37,588	75,847	38,259	\$1,198.67	\$932.83	\$981.50	\$949.15	\$1,269.44	\$989.73	\$1,057.52	\$1,012.46	\$1,317.19	\$1,027.32	\$1,114.67	\$1,056.61
FC - Non-Medicare - Adult	26,099	52,204	26,104	\$469.23	\$469.23	\$496.08	\$478.18	\$495.84	\$495.84	\$533.33	\$508.33	\$516.39	\$516.39	\$564.77	\$532.52
FC - Non-Medicare - Child	159,698	319,433	159,727	\$283.87	\$283.87	\$299.59	\$289.11	\$301.86	\$301.86	\$324.05	\$309.26	\$314.38	\$314.38	\$343.18	\$323.98
GlobalExp	69,598	138,893	69,295	\$324.42	\$324.42	\$346.69	\$331.83	\$343.83	\$343.83	\$373.79	\$353.80	\$358.00	\$358.00	\$395.69	\$370.54
GlobalRx - Non-Medicare	333	660	327	\$221.42	\$221.42	\$238.88	\$150.78	\$233.84	\$233.84	\$238.88	\$159.20	\$243.50	\$243.50	\$266.67	\$165.83
GlobalRx - Dual	31,647	62,760	31,113	\$221.42	\$14.16	\$8.21	\$12.19	\$233.84	\$14.71	\$8.57	\$12.67	\$243.50	\$15.30	\$9.07	\$13.24
OptionalExp	5,137	10,845	5,547	\$143.55	\$143.55	\$152.85	\$146.70	\$151.93	\$151.93	\$164.52	\$156.19	\$158.21	\$158.21	\$174.18	\$163.61
Total - All MEG's	377,158	755,598	378,270	\$502.30	\$459.78	\$488.22	\$469.27	\$533.40	\$488.59	\$527.50	\$501.57	\$554.98	\$508.46	\$558.02	\$524.99
Total \$															
BD - Non-Medicare - Adult				\$38,269,698	\$77,222,558	\$41,309,258	\$118,531,816	\$40,865,258	\$82,460,012	\$44,860,074	\$127,320,086	\$42,556,041	\$85,871,760	\$47,500,639	\$133,372,398
BD - Non-Medicare - Child				\$18,143,368	\$36,610,546	\$19,887,151	\$56,497,697	\$19,259,160	\$38,862,042	\$21,454,042	\$60,316,085	\$20,050,040	\$40,457,917	\$22,705,855	\$63,163,772
BD - Dual				\$45,055,731	\$70,752,312	\$37,551,294	\$108,303,605	\$47,715,530	\$75,067,992	\$40,459,668	\$115,527,660	\$49,510,599	\$77,919,193	\$42,646,197	\$120,565,390
ANFC - Non-Medicare - Adult				\$12,246,410	\$24,495,635	\$12,949,623	\$37,445,258	\$12,940,800	\$25,884,575	\$13,922,020	\$39,806,595	\$13,477,301	\$26,957,699	\$14,742,815	\$41,700,515
ANFC - Non-Medicare - Child				\$45,333,640	\$90,677,783	\$47,852,251	\$138,530,033	\$48,205,758	\$96,422,685	\$51,760,061	\$148,182,746	\$50,205,992	\$100,423,616	\$54,814,830	\$155,238,446
GlobalExp				\$22,578,956	\$45,059,613	\$24,023,786	\$69,083,399	\$23,929,763	\$47,755,345	\$25,901,463	\$73,656,808	\$24,915,917	\$49,723,362	\$27,419,043	\$77,142,404
GlobalRx - Non-Medicare				\$73,733	\$146,138	\$2,686	\$148,824	\$77,868	\$154,334	\$2,801	\$157,135	\$81,084	\$160,707	\$2,967	\$163,674
GlobalRx - Dual				\$7,007,307	\$888,881	\$255,580	\$1,144,461	\$7,400,310	\$923,061	\$266,502	\$1,189,564	\$7,705,909	\$960,271	\$282,264	\$1,242,536
OptionalExp				\$737,416	\$1,556,799	\$847,884	\$2,404,683	\$780,484	\$1,647,722	\$912,583	\$2,560,304	\$812,721	\$1,715,779	\$966,166	\$2,681,945
Total - All MEG's				\$189,446,260	\$347,410,264	\$184,679,513	\$532,089,777	\$201,174,932	\$369,177,769	\$199,539,214	\$568,716,983	\$209,315,603	\$384,190,304	\$211,080,775	\$595,271,079
FFY 2006 Total (10/05-9/06)							\$721,536,037				\$769,891,915				\$804,586,682
					3/4 yr		\$541,152,028			3/4 yr	\$577,418,937			3/4 yr	\$603,440,012

Development of Rates for 10/2006 to 9/2007

MEG	Projected Member Months		Total Rate - LOW END OF RANGE			Total Rate - BEST ESTIMATE			Total Rate - HIGH END OF RANGE		
	10/06-6/07	7/07-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07	10/06-6/07	7/07-9/07 {FY08 Rate}	Total 10/06-9/07
	Rates			Rates			Rates				
PMPM											
ABD - Non-Medicare - Adult	111,968	37,755	\$1,119.77	\$1,197.12	\$1,139.27	\$1,216.02	\$1,325.29	\$1,243.57	\$1,287.59	\$1,430.27	\$1,323.57
ABD - Non-Medicare - Child	33,408	11,265	\$1,806.77	\$1,965.06	\$1,846.69	\$1,949.13	\$2,159.56	\$2,002.19	\$2,062.86	\$2,329.01	\$2,129.97
ABD - Dual	116,120	39,155	\$981.50	\$1,040.51	\$996.38	\$1,057.52	\$1,140.94	\$1,078.56	\$1,114.67	\$1,223.83	\$1,142.20
ANFC - Non-Medicare - Adult	78,319	26,109	\$496.08	\$528.39	\$504.16	\$533.33	\$579.35	\$544.83	\$564.77	\$625.31	\$579.91
ANFC - Non-Medicare - Child	479,234	159,762	\$299.59	\$318.52	\$304.32	\$324.05	\$351.31	\$330.87	\$343.18	\$379.20	\$352.19
GlobalExp	207,279	68,891	\$346.69	\$373.83	\$353.46	\$373.79	\$411.00	\$383.07	\$395.69	\$443.40	\$407.59
GlobalRx - Non-Medicare	971	320	\$8.21	\$8.70	\$8.33	\$8.57	\$9.25	\$8.73	\$9.07	\$9.98	\$9.30
GlobalRx - Dual	92,271	30,401	\$8.21	\$8.70	\$8.33	\$8.57	\$9.25	\$8.73	\$9.07	\$9.98	\$9.30
OptionalExp	17,562	6,125	\$152.85	\$164.16	\$155.78	\$164.52	\$180.10	\$168.55	\$174.18	\$194.33	\$179.39
Total - All MEG's	1,137,132	379,783	\$490.22	\$526.05	\$499.19	\$529.67	\$579.25	\$542.08	\$560.30	\$624.32	\$576.33
Total \$											
BD - Non-Medicare - Adult			\$125,377,869	\$45,197,413	\$170,575,282	\$136,154,964	\$50,036,277	\$186,191,241	\$144,169,351	\$53,999,832	\$198,169,183
BD - Non-Medicare - Child			\$60,360,675	\$22,136,408	\$82,497,083	\$65,116,439	\$24,327,478	\$89,443,917	\$68,915,889	\$26,236,331	\$95,152,221
BD - Dual			\$113,972,039	\$40,741,258	\$154,713,297	\$122,799,253	\$44,673,522	\$167,472,775	\$129,435,595	\$47,918,922	\$177,354,517
NFC - Non-Medicare - Adult			\$38,852,340	\$13,795,728	\$52,648,068	\$41,769,793	\$15,126,209	\$56,896,002	\$44,232,399	\$16,326,091	\$60,558,490
NFC - Non-Medicare - Child			\$143,572,630	\$50,886,743	\$194,459,373	\$155,297,357	\$56,125,357	\$211,422,714	\$164,462,678	\$60,582,478	\$225,045,156
GlobalExp			\$71,861,266	\$25,753,402	\$97,614,668	\$77,477,874	\$28,314,359	\$105,792,233	\$82,017,343	\$30,546,072	\$112,563,414
GlobalRx - Non-Medicare			\$7,976	\$2,784	\$10,760	\$8,317	\$2,960	\$11,277	\$8,809	\$3,195	\$12,004
GlobalRx - Dual			\$757,967	\$264,481	\$1,022,448	\$790,359	\$281,163	\$1,071,522	\$837,103	\$303,542	\$1,140,646
OptionalExp			\$2,684,432	\$1,005,456	\$3,689,889	\$2,889,270	\$1,103,127	\$3,992,397	\$3,058,916	\$1,190,254	\$4,249,171
Total - All MEG's			\$557,447,195	\$199,783,674	\$757,230,868	\$602,303,627	\$219,990,450	\$822,294,077	\$637,138,083	\$237,106,719	\$874,244,802

High

Low
Best
High

Scenario: Non-Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
Inpatient	3.0%	4.0%		5.3%
Home Health	4.0%	5.0%		
Outpatient	5.2%	8.0%		
Physician & Other	2.3%	5.0%		
Home Health	13.9%	11.0%		
Nursing	4.0%	5.0%		
Dental	4.0%	5.0%		
Transportation	3.8%	5.0%		
DME/Supplies	8.6%	6.0%		
Enhanced Residential Care	3.0%	5.0%		
D&P	2.0%	4.0%		
OADAP	20.9%	11.0%		
Ambulance	8.4%	5.0%		
Prescribed Drugs	3.4%	8.0%		
Behavioral Health - IP	3.0%	5.0%		
Behavioral Health - OP/Phy	7.8%	5.0%		
HCBS - Aged/Disabled	1.0%	1.0%		
HCBS - MH/MR	4.0%	5.0%		
HCBS TBI	3.0%	5.0%		
Buy-In				

FY06			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
3.0%	4.0%	4.5%	-21.0%
4.0%	5.0%		
5.2%	8.0%	4.5%	
2.3%	5.0%		
13.9%	11.0%		
4.0%	5.0%		
4.0%	5.0%		
3.8%	5.0%		
8.6%	6.0%		
3.0%	5.0%		
2.0%	4.0%		
20.9%	11.0%		
8.4%	5.0%		
3.4%	8.0%		
3.0%	5.0%		
7.8%	5.0%		
1.0%	1.0%		
4.0%	5.0%		
3.0%	5.0%		

FY07			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
3.0%	4.0%		
4.0%	5.0%		
5.2%	8.0%		
2.3%	5.0%		
13.9%	11.0%		
4.0%	5.0%		
4.0%	5.0%		
3.8%	5.0%		
8.6%	6.0%		
3.0%	5.0%		
2.0%	4.0%		
20.9%	11.0%		
8.4%	5.0%		
3.4%	8.0%		
3.0%	5.0%		
7.8%	5.0%		
1.0%	1.0%		
4.0%	5.0%		
3.0%	5.0%		

Scenario: Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
Inpatient	2.0%	4.0%		
NH	9.4%	5.0%		
Outpatient	1.0%	3.2%		
Physician & Other	6.0%	5.0%		
Home Health	-1.4%	4.0%		
Nursing	2.5%	4.0%		
Dental	4.0%	5.0%		
Transportation	0.0%	5.0%		
DME/Supplies	11.0%	6.0%		
Enhanced Residential Care	3.0%	5.0%		
D&P	4.0%	4.0%		
OADAP	20.3%	11.0%		
Ambulance	4.0%	5.0%		
Prescribed Drugs	3.2%	8.0%		
Behavioral Health - IP	3.0%	5.0%		
Behavioral Health - OP/Phy	6.5%	5.0%		
HCBS - Aged/Disabled	1.0%	4.0%		
HCBS - MH/MR	4.0%	5.0%		
HCBS TBI	3.0%	5.0%		
Buy-In	15.6%			

FY06			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	4.0%		
9.4%	5.0%		
1.0%	3.2%		
6.0%	5.0%		
-1.4%	4.0%		
2.5%	4.0%		
4.0%	5.0%		
0.0%	5.0%		
11.0%	6.0%		
3.0%	5.0%		
4.0%	4.0%		
20.3%	11.0%		
4.0%	5.0%		
3.2%	8.0%		
3.0%	5.0%		
6.5%	5.0%		
1.0%	4.0%		
4.0%	5.0%		
3.0%	5.0%		
15.1%			

FY07			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	4.0%		
9.4%	5.0%		
1.0%	3.2%		
6.0%	5.0%		
-1.4%	4.0%		
2.5%	4.0%		
4.0%	5.0%		
0.0%	5.0%		
11.0%	6.0%		
3.0%	5.0%		
4.0%	4.0%		
20.3%	11.0%		
4.0%	5.0%		
3.2%	8.0%		
3.0%	5.0%		
6.5%	5.0%		
1.0%	4.0%		
4.0%	5.0%		
3.0%	5.0%		
10.0%			

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
Inpatient	1.0%	2.0%		5.3%
NH	2.0%	3.0%		
Outpatient	3.2%	6.0%		
Physician & Other	0.3%	3.0%		
Home Health	11.9%	9.0%		
Nursing	2.0%	3.0%		
Dental	2.0%	3.0%		
Transportation	1.8%	3.0%		
DME/Supplies	6.6%	4.0%		
Enhanced Residential Care	1.0%	3.0%		
D&P	0.0%	2.0%		
OADAP	18.9%	9.0%		
Ambulance	6.4%	3.0%		
Prescribed Drugs	1.4%	6.0%		
Behavioral Health - IP	1.0%	3.0%		
Behavioral Health - OP/Phy	5.8%	3.0%		
HCBS - Aged/Disabled	-1.0%	-1.0%		
HCBS - MH/MR	2.0%	3.0%		
HCBS TBI	1.0%	3.0%		
Buy-In				

	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	1.0%	2.0%	0.0%	-19.1%
	2.0%	3.0%	8.4%	0.8%
	3.2%	6.0%	-0.7%	1.0%
	0.3%	3.0%	-3.2%	0.7%
	11.9%	9.0%	-0.4%	-0.8%
	2.0%	3.0%	-3.2%	0.7%
	2.0%	3.0%		
	1.8%	3.0%	-5.2%	0.7%
	6.6%	4.0%	-3.2%	0.7%
	1.0%	3.0%		
	0.0%	2.0%	-3.2%	0.7%
	18.9%	9.0%	-5.7%	-0.1%
	6.4%	3.0%	-3.2%	0.7%
	1.4%	6.0%	-2.3%	-0.8%
	1.0%	3.0%	-7.1%	0.4%
	5.8%	3.0%	-5.7%	-0.1%
	-1.0%	-1.0%		
	2.0%	3.0%	-5.7%	-0.1%
	1.0%	3.0%		

	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
	1.0%	2.0%		
	2.0%	3.0%		
	3.2%	6.0%		
	0.3%	3.0%		
	11.9%	9.0%		
	2.0%	3.0%		
	2.0%	3.0%		
	1.8%	3.0%		
	6.6%	4.0%		
	1.0%	3.0%		
	0.0%	2.0%		
	18.9%	9.0%		
	6.4%	3.0%		
	1.4%	6.0%		
	1.0%	3.0%		
	5.8%	3.0%		
	-1.0%	-1.0%		
	2.0%	3.0%		
	1.0%	3.0%		

Non-Medicare - Best

Category of Service
 Patient
 Physician & Other
 Behavioral Health
 Transportation
 Medical Supplies
 Enhanced Residential Care
 ADAP
 Ambulance
 Prescribed Drugs
 Behavioral Health - IP
 Behavioral Health - OP/Phy
 ICBS - Aged/Disabled
 ICBS - MH/MR
 ICBS TBI
 Buy-In

FY05			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	3.0%		5.3%
3.0%	4.0%		
4.2%	7.0%		
1.3%	4.0%		
12.9%	10.0%		
3.0%	4.0%		
3.0%	4.0%		
2.8%	4.0%		
7.6%	5.0%		
2.0%	4.0%		
1.0%	3.0%		
19.9%	10.0%		
7.4%	4.0%		
2.4%	7.0%		
2.0%	4.0%		
6.8%	4.0%		
0.0%	0.0%		
3.0%	4.0%		
2.0%	4.0%		

FY06			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	3.0%	4.5%	-21.0%
3.0%	4.0%		
4.2%	7.0%	4.5%	
1.3%	4.0%		
12.9%	10.0%		
3.0%	4.0%		
3.0%	4.0%		
2.8%	4.0%		
7.6%	5.0%		
2.0%	4.0%		
1.0%	3.0%		
19.9%	10.0%		
7.4%	4.0%		
2.4%	7.0%		
2.0%	4.0%		
6.8%	4.0%		
0.0%	0.0%		
3.0%	4.0%		
2.0%	4.0%		

FY07			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	3.0%		
3.0%	4.0%		
4.2%	7.0%		
1.3%	4.0%		
12.9%	10.0%		
3.0%	4.0%		
3.0%	4.0%		
2.8%	4.0%		
7.6%	5.0%		
2.0%	4.0%		
1.0%	3.0%		
19.9%	10.0%		
7.4%	4.0%		
2.4%	7.0%		
2.0%	4.0%		
6.8%	4.0%		
0.0%	0.0%		
3.0%	4.0%		
2.0%	4.0%		

scenario: Non-Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
Inpatient	3.0%	4.0%		5.3%
NH	4.0%	5.0%		
Outpatient	5.2%	8.0%		
Physician & Other	2.3%	5.0%		
Home Health	13.9%	11.0%		
Nursing	4.0%	5.0%		
Dental	4.0%	5.0%		
Transportation	3.8%	5.0%		
DME/Supplies	8.6%	6.0%		
Enhanced Residential Care	3.0%	5.0%		
D&P	2.0%	4.0%		
OADAP	20.9%	11.0%		
Ambulance	8.4%	5.0%		
Prescribed Drugs	3.4%	8.0%		
Behavioral Health - IP	3.0%	5.0%		
Behavioral Health - OP/Phy	7.8%	5.0%		
HCBS - Aged/Disabled	1.0%	1.0%		
HCBS - MH/MR	4.0%	5.0%		
HCBS TBI	3.0%	5.0%		
Buy-In				

FY06			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
3.0%	4.0%	4.5%	-21.0%
4.0%	5.0%		
5.2%	8.0%	4.5%	
2.3%	5.0%		
13.9%	11.0%		
4.0%	5.0%		
4.0%	5.0%		
3.8%	5.0%		
8.6%	6.0%		
3.0%	5.0%		
2.0%	4.0%		
20.9%	11.0%		
8.4%	5.0%		
3.4%	8.0%		
3.0%	5.0%		
7.8%	5.0%		
1.0%	1.0%		
4.0%	5.0%		
3.0%	5.0%		

FY07			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
3.0%	4.0%		
4.0%	5.0%		
5.2%	8.0%		
2.3%	5.0%		
13.9%	11.0%		
4.0%	5.0%		
4.0%	5.0%		
3.8%	5.0%		
8.6%	6.0%		
3.0%	5.0%		
2.0%	4.0%		
20.9%	11.0%		
8.4%	5.0%		
3.4%	8.0%		
3.0%	5.0%		
7.8%	5.0%		
1.0%	1.0%		
4.0%	5.0%		
3.0%	5.0%		

Scenario: Medicare - Low

- 1. Inpatient
- 2. NH
- 3. Outpatient
- 4. Physician & Other
- 5. Home Health
- 6. Nursing
- 7. Dental
- 8. Transportation
- 9. DME/Supplies
- 10. Enhanced Residential Care
- 11. D&P
- 12. OADAP
- 13. Ambulance
- 14. Prescribed Drugs
- 15. Behavioral Health - IP
- 16. Behavioral Health - OP/Phy
- 17. HCBS - Aged/Disabled
- 18. HCBS - MH/MR
- 19. HCBS TBI
- 20. Buy-In

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	0.0%	2.0%		
2. NH	7.4%	3.0%		
3. Outpatient	-1.0%	1.2%		
4. Physician & Other	4.0%	3.0%		
5. Home Health	-3.4%	2.0%		
6. Nursing	0.5%	2.0%		
7. Dental	2.0%	3.0%		
8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%		
12. OADAP	18.3%	9.0%		
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%		
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%		
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%		
19. HCBS TBI	1.0%	3.0%		
20. Buy-In	15.6%			

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	0.0%	2.0%		
2. NH	7.4%	3.0%		
3. Outpatient	-1.0%	1.2%		
4. Physician & Other	4.0%	3.0%		
5. Home Health	-3.4%	2.0%		
6. Nursing	0.5%	2.0%		
7. Dental	2.0%	3.0%		
8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%	-3.2%	0.7%
12. OADAP	18.3%	9.0%	-5.7%	-0.1%
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%	-2.3%	-0.8%
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%	-5.7%	-0.1%
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%	-5.7%	-0.1%
19. HCBS TBI	1.0%	3.0%		
20. Buy-In	15.1%			

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	0.0%	2.0%		
2. NH	7.4%	3.0%		
3. Outpatient	-1.0%	1.2%		
4. Physician & Other	4.0%	3.0%		
5. Home Health	-3.4%	2.0%		
6. Nursing	0.5%	2.0%		
7. Dental	2.0%	3.0%		
8. Transportation	-2.0%	3.0%		
9. DME/Supplies	9.0%	4.0%		
10. Enhanced Residential Care	1.0%	3.0%		
11. D&P	2.0%	2.0%		
12. OADAP	18.3%	9.0%		
13. Ambulance	2.0%	3.0%		
14. Prescribed Drugs	1.2%	6.0%		
15. Behavioral Health - IP	1.0%	3.0%		
16. Behavioral Health - OP/Phy	4.5%	3.0%		
17. HCBS - Aged/Disabled	-1.0%	2.0%		
18. HCBS - MH/MR	2.0%	3.0%		
19. HCBS TBI	1.0%	3.0%		
20. Buy-In	10.0%			

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	1.0%	3.0%		
2. NH	8.4%	4.0%		
3. Outpatient	0.0%	2.2%		
4. Physician & Other	5.0%	4.0%		
5. Home Health	-2.4%	3.0%		
6. Nursing	1.5%	3.0%		
7. Dental	3.0%	4.0%		
8. Transportation	-1.0%	4.0%		
9. DME/Supplies	10.0%	5.0%		
10. Enhanced Residential Care	2.0%	4.0%		
11. D&P	3.0%	3.0%		
12. OADAP	19.3%	10.0%		
13. Ambulance	3.0%	4.0%		
14. Prescribed Drugs	2.2%	7.0%		
15. Behavioral Health - IP	2.0%	4.0%		
16. Behavioral Health - OP/Phy	5.5%	4.0%		
17. HCBS - Aged/Disabled	0.0%	3.0%		
18. HCBS - MH/MR	3.0%	4.0%		
19. HCBS TBI	2.0%	4.0%		
20. Buy-In	15.6%			

Category of Service	FY06			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	1.0%	3.0%		
2. NH	8.4%	4.0%		
3. Outpatient	0.0%	2.2%		
4. Physician & Other	5.0%	4.0%		
5. Home Health	-2.4%	3.0%		
6. Nursing	1.5%	3.0%		
7. Dental	3.0%	4.0%		
8. Transportation	-1.0%	4.0%		
9. DME/Supplies	10.0%	5.0%		
10. Enhanced Residential Care	2.0%	4.0%		
11. D&P	3.0%	3.0%		
12. OADAP	19.3%	10.0%		
13. Ambulance	3.0%	4.0%		
14. Prescribed Drugs	2.2%	7.0%		
15. Behavioral Health - IP	2.0%	4.0%		
16. Behavioral Health - OP/Phy	5.5%	4.0%		
17. HCBS - Aged/Disabled	0.0%	3.0%		
18. HCBS - MH/MR	3.0%	4.0%		
19. HCBS TBI	2.0%	4.0%		
20. Buy-In	15.1%			

Category of Service	FY07			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	1.0%	3.0%		
2. NH	8.4%	4.0%		
3. Outpatient	0.0%	2.2%		
4. Physician & Other	5.0%	4.0%		
5. Home Health	-2.4%	3.0%		
6. Nursing	1.5%	3.0%		
7. Dental	3.0%	4.0%		
8. Transportation	-1.0%	4.0%		
9. DME/Supplies	10.0%	5.0%		
10. Enhanced Residential Care	2.0%	4.0%		
11. D&P	3.0%	3.0%		
12. OADAP	19.3%	10.0%		
13. Ambulance	3.0%	4.0%		
14. Prescribed Drugs	2.2%	7.0%		
15. Behavioral Health - IP	2.0%	4.0%		
16. Behavioral Health - OP/Phy	5.5%	4.0%		
17. HCBS - Aged/Disabled	0.0%	3.0%		
18. HCBS - MH/MR	3.0%	4.0%		
19. HCBS TBI	2.0%	4.0%		
20. Buy-In	10.0%			

Scenario: Medicare - High

Category of Service	FY05			
	Trends		Other	
	Util	Unit Cost	Util	Unit Cost
1. Inpatient	2.0%	4.0%		
2. NH	9.4%	5.0%		
3. Outpatient	1.0%	3.2%		
4. Physician & Other	6.0%	5.0%		
5. Home Health	-1.4%	4.0%		
6. Nursing	2.5%	4.0%		
7. Dental	4.0%	5.0%		
8. Transportation	0.0%	5.0%		
9. DME/Supplies	11.0%	6.0%		
10. Enhanced Residential Care	3.0%	5.0%		
11. D&P	4.0%	4.0%		
12. OADAP	20.3%	11.0%		
13. Ambulance	4.0%	5.0%		
14. Prescribed Drugs	3.2%	8.0%		
15. Behavioral Health - IP	3.0%	5.0%		
16. Behavioral Health - OP/Phy	6.5%	5.0%		
17. HCBS - Aged/Disabled	1.0%	4.0%		
18. HCBS - MH/MR	4.0%	5.0%		
19. HCBS TBI	3.0%	5.0%		
20. Buy-In	15.6%			

FY06			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	4.0%		
9.4%	5.0%		
1.0%	3.2%		
6.0%	5.0%		
-1.4%	4.0%		
2.5%	4.0%		
4.0%	5.0%		
0.0%	5.0%		
11.0%	6.0%		
3.0%	5.0%		
4.0%	4.0%		
20.3%	11.0%		
4.0%	5.0%		
3.2%	8.0%		
3.0%	5.0%		
6.5%	5.0%		
1.0%	4.0%		
4.0%	5.0%		
3.0%	5.0%		
15.1%			

FY07			
Trends		Other	
Util	Unit Cost	Util	Unit Cost
2.0%	4.0%		
9.4%	5.0%		
1.0%	3.2%		
6.0%	5.0%		
-1.4%	4.0%		
2.5%	4.0%		
4.0%	5.0%		
0.0%	5.0%		
11.0%	6.0%		
3.0%	5.0%		
4.0%	4.0%		
20.3%	11.0%		
4.0%	5.0%		
3.2%	8.0%		
3.0%	5.0%		
6.5%	5.0%		
1.0%	4.0%		
4.0%	5.0%		
3.0%	5.0%		
10.0%			



STATE OF VERMONT

MEMORANDUM

To: Martha Heath, Chair; Members of the Joint Fiscal Committee
From: Stephanie Barrett, Steve Kappel; Joint Fiscal Office
Date: December 6, 2005
Subject: Global Commitment – Preliminary Premium Evaluation

Overview

This memorandum presents the results of the Joint Fiscal Office's preliminary evaluation of the premiums developed by the Agency of Human Services' consulting actuary. This evaluation is being conducted to determine compliance with condition #2 and to the extent possible condition #3 of the Committee's contingent approval of the Global Commitment waiver.

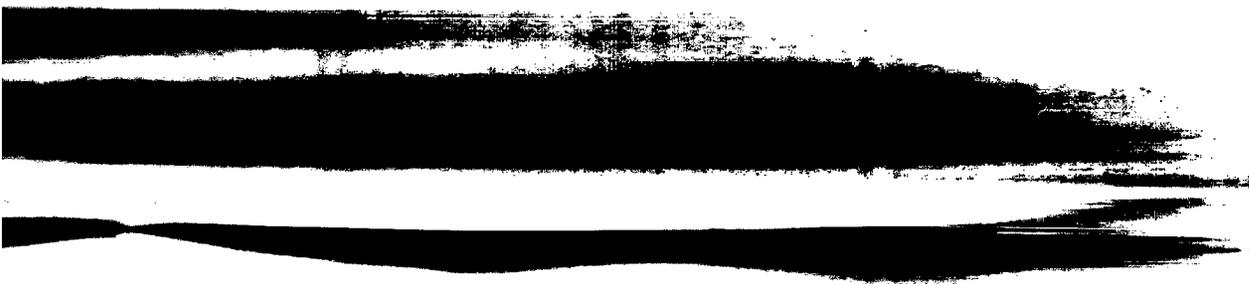
For state fiscal year 2006, there is approximately \$21.8 million in room (3.5% of total spending) between spending obligations (including the Medicaid program and managed care investments) and the high end of the premium range. Note that this is for three quarters of the year. For SFY 2007, there is between \$33.2 million (3.9%) and \$46.2 million (5.4%). This room can be used in case of unforeseen expenditures or for new program initiatives.

Background

Joint Fiscal Office staff are reviewing the actuarial analysis. JFO will follow up on several outstanding issues that may have the impact of increasing the upper limit of the range. These include the administration percentage included in the estimates, and the treatment of the reduction in hospital reimbursement that went into effect on October 1st. Once the premium range is finalized, the actuary will produce a certification letter, as required by CMS. Final premiums will have to be approved by the CMS however they indicated via a conference call that such approval is likely to be routine.

The actuary has developed three specific premium estimates: "Best," which represents the firm's estimate of costs, "High" which increases assumptions about utilization and price trends by 1% each over "Best" trends, and "Low," which assumes a tighter managed care model, 1% reductions in trends, managed care savings, and increased administrative costs.

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SFY 2006

Current SFY06 Global Commitment premium projection (three quarters of a year due to the start date of October 1, 2005 of the waiver)

<u>Low</u>	<u>Best</u>	<u>High</u>
\$541.2m	\$577.4m	\$603.4m

Consensus estimates for SFY06 expenditures under Global Commitment, including an estimate for budget adjustment, are:

Medicaid expenditures	\$545.9m
MCO Investments	<u>\$ 35.7m</u>
Total	\$581.6m

There is \$21.8 million of “room” in the current SFY06 “High” premium above the total needed (\$581.6m). JFO feels this should be sufficient room to accommodate unanticipated increases in Medicaid GC expenditures or additional MCO investments.

SFY 2007

The actuary provided a FY2007 premium range estimate (this is full year estimate). This estimate will change as the legislature makes changes which impact global commitment during the upcoming session. Based on current data, the FY2007 Global Commitment premium projection is as follows:

FY07 Global Commitment premium projection

<u>Low</u>	<u>Best</u>	<u>High</u>
\$742.1	\$801.8	\$848.2

JFO estimate of SFY07 Global Commitment expenditures

Medicaid GC expenditures	\$755.1m	to	\$765.0m
MCO Investments	<u>\$ 46.9m</u>	to	<u>\$ 50.0m</u>
Total	\$802.0m	to	\$815.0m

The preliminary estimate of “room” under the premium is between \$33.2m and \$46.2m. This estimate will be revised once consensus estimates are developed by JFO and the administration.

Subsequent Years

The “High” premium trend used by the actuary in developing the FY 2006 and FY 2007 estimates should lead to increasing room in the subsequent years of the waiver. This trend could bring us close to the \$4.7 million maximum waiver amount if sufficient state funds were available.

The process and events that would impact FY 2008 and beyond are not established and risk will remain as the methodology and actual experience is evaluated. Similarly, in that even with Global Commitment, our Medicaid program is facing FY 2008 and FY 2009 state fund deficits in the range of \$42m and \$62m respectively, it is difficult to project expenditure need in those years as well.





STATE OF VERMONT
AGENCY OF ADMINISTRATION

MEMORANDUM

TO: Joint Fiscal Committee

FROM: Charles P. Smith, Secretary of Administration *Charles P. Smith /hj*

DATE: December 5, 2005

RE: Approval for Environmental Contingency Fund (ECF) expenditures

Pursuant to 10 VSA Sec. 1283(b), the Secretary of the Agency of Natural Resources must receive Joint Fiscal Committee approval for Environmental Contingency Fund (ECF) disbursements on a site to exceed \$100,000 under each of the subdivisions under subsection (b).

The attached request for Joint Fiscal Committee approval relates to expenditures for investigation and remediation of contamination at the 9 Depot Square site in Barre, which had at one time been a drycleaning facility. The Agency of Natural Resources has used ECF funds since 2000 to address these contamination problems, and is now facing cumulative expenditures over \$100,000 in two of the expenditure categories under 10 VSA Sec 1283(b). Further details are provided on the attached request from the Agency.

The balance in the ECF will not drop below \$100,000, and the Fund is projected to have a \$481,000 balance at the end of FY 2006. The Administration is reviewing the long-range condition of the ECF in the course of developing the FY 2007 Executive Budget.

There is some urgency to this request. Litigation is pending and additional investigation is required to support the State's case, and the remedial treatment system requires on-going maintenance.

I have been assured that the Agency has improved its procedures for monitoring expenditures from the Fund so that retroactive requests will not arise in the future.

A draft motion is attached. Thank you for your consideration.

Attachment



PROPOSED MOTION

Pursuant to 10 VSA Sec. 1283(b), The Joint Fiscal Committee approves Environmental Contingency Fund expenditures of \$50,335 in excess of \$100,000 under subdivision (b)(2), and \$20,000 in excess of \$100,000 under subdivision (b)(4), for investigation and remediation at the contaminated 9 Depot Square site in Barre, Vermont.

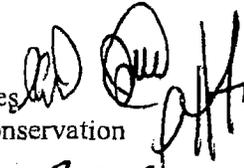


**Agency of Natural Resources
Department of Environmental Conservation**

**Waste Management Division
West Building
802-241-3888**

MEMORANDUM

To: Charles P. Smith, Secretary, Agency of Administration

Through: Canute Dalmasse, Deputy Secretary, Agency of Natural Resources, 
 Jeff Wennberg, Commissioner, Department of Environmental Conservation
 P. Howard Flanders, Director, Waste Management Division

From: George Desch, Program Manager, Waste Management Division 

Date: December 5, 2005

Subject: Expenditures from the Environmental Contingency Fund for the 9 Depot Square site in Barre (Site #99-2631)

The Agency of Natural Resources (Agency) requests to appear before the Joint Fiscal Committee of the General Assembly to discuss expenditures from the Environmental Contingency Fund (ECF) on the 9 Depot Square site in Barre. In this appearance the Agency requests:

- (1) Retroactive approval for the expenditure of \$10,334.71 in excess of the cap established under 10 V.S.A. § 1283(b); and
- (2) Approval of an additional \$40,000.00 to be spent under subdivision (b)(2) (investigations) and \$20,000.00 to be spent under subdivision (b)(3) (remedial actions). The details of this request are more fully explained below.

Site Background

The Agency determined that the site was contaminated in 1999 as a result of an assessment conducted at the neighboring property. Contaminants typically associated with drycleaning activities were detected in a sample taken from a sump in the basement as a part of that assessment. The source of the contamination was traced to the neighboring 9 Depot Square building, which had been a drycleaning facility from approximately 1947 to 1992. The 9 Depot Square building is currently a pizza restaurant. The Agency initially requested the current owner to conduct an investigation of the site to determine the extent of contamination. The current owner declined to voluntarily initiate this site investigation work. In 2000 the Agency began to investigate the extent of contamination at the site using ECF funds. Significant levels of dry cleaning compounds such as perchloroethylene (PCE) in groundwater, soil, and indoor air were found in the course of this investigation. The Agency requested the EPA to use federal funds to remove the sources of contamination.

Potentially responsible parties have been identified at this site, and the Attorney General's Office is currently assisting the Agency in having future work performed by these parties and to recover ECF funds spent at this site.



Request for Joint Fiscal Committee Approval.

The funds spent at this site have been allocated to the following categories, as indicated in 10 V.S.A. § 1283, as follows:

- **10 V.S.A. § 1283(b)(2). *Investigation of an actual or threatened release to the environment:***

The Agency has currently spent \$110,334.71 to investigate the releases from this site. These funds were used to examine the contamination's impacts on indoor air at the restaurant, determine the contaminant impacts on groundwater, the contaminant impact on the nearby Stevens Branch, and the contaminant impact on subsurface soils. The results of this investigation show a property that is significantly contaminated.

Investigation of source contaminants that took place in October 2005, and invoiced in November 2005, caused the Agency to exceed the statutory cap of \$100,000.00. This overrun was an oversight on the part of the Agency and procedures have been put in place to ensure that such oversights do not occur in the future.

The Agency is requesting Joint Fiscal Committee approval for the \$10,334.71 over the cap and approval to expend an additional \$40,000.00 for additional investigatory work at the site. These funds will be used to continue contaminant monitoring at the site, and further delineate the contaminant plume.

- **10 V.S.A. § 1283(b)(4). *Take appropriate remedial action to prevent or minimize the immediate impact of such release to the public health or the environment:***

The Agency has currently spent \$86,091.54 to remediate the impacts that have resulted from contamination at the site. The indoor air quality at the site has been impacted by the contamination at the site. The Agency has installed an indoor air treatment system to reduce contaminant levels in this structure.

The Agency is requesting Joint Fiscal Committee approval to spend \$20,000.00 in ECF funds in excess of the \$100,000.00 cap to maintain the indoor air treatment system (e.g. replacement of filters and disposal of wastes) and monitor indoor air quality.

- **10 V.S.A. § 1283(b)(3). *To take appropriate removal action:***

The Agency has currently spent \$60,452.70 under this subdivision. At this time, the Agency does not request an approval to increase the allowable \$100,000.00 under this subdivision. The Agency has installed a soil vapor extraction system to treat soil vapor underneath the building in an effort to prevent these vapors from entering the building.





Mailing Address:
1 Baldwin Street
Drawer 33
Montpelier, Vermont 05633-5701

Tel.: (802) 828-2295
Fax: (802) 828-2483

STATE OF VERMONT
JOINT FISCAL COMMITTEE
1 Baldwin Street
Montpelier, Vermont 05633-5701

MEMORANDUM

To: Joint Fiscal Committee Members

From: Maria Belliveau *MB*

Date: December 8, 2005

Subject: LIHEAP Update

Attached please find an update from the Department of Children and Families on the processing of LIHEAP applications. The Joint Fiscal Office requested that the Department provide this update in writing after the November 30th Joint Fiscal Committee meeting was rescheduled. This item had been included on the agenda for the meeting.



VERMONT
DEPARTMENT FOR CHILDREN AND FAMILIES
ECONOMIC SERVICES DIVISION

LIHEAP UPDATE FOR JOINT FISCAL COMMITTEE
12/07/05

We are committed to making sure that no one eligible for the Fuel Program goes cold this winter. That is being accomplished through the following steps:

- 1. The Governor has committed an unprecedented funding level to the Fuel Assistance Program.**

In addition to the federal LIHEAP allotment, Governor Douglas has directed an additional \$7,000,000 toward the program, with another \$3,000,000 available if that is necessary. These amounts are designed to assure that low income Vermonters maintain the same buying power as they had in FY'05, despite enormous increases in fuel prices.

- 2. DCF has implemented an expedited process for processing applications and issuing benefits.**

Approximately 3,000 more Vermonters have applied for fuel assistance this year than last. Additional staff have been assigned to the program. Considerable overtime hours have been authorized. Staff have performed admirably. Applications continue to flow into the system. Despite having received 1,058 new applications since the November 15 report, the number of applications in the pipeline has been cut by more than half over the past 3 weeks.

As of November 15:	
Applications received:	25,500
Processed:	20,700
In the pipeline:	4,800

As of December 7:	
Applications received	26,558
Processed:	24,285
In the pipeline:	2,273



Benefits for those who applied in September were issued on November 30, six weeks ahead of the normal schedule. And, for applications received since then, benefit determinations are being made at an accelerated pace and processed weekly.

3. The Fuel Office, in collaboration with the community action agencies, expedites seasonal fuel assistance applications in urgent situations.

The process is as follows: Households with a heating emergency apply for assistance at their local community action agency. If eligible for assistance, community action faxes a request to process a seasonal fuel application immediately. If the household is determined eligible for seasonal fuel assistance, the amount of the seasonal benefit is confirmed with the fuel supplier within one hour of receiving the fax, and delivery is made soon thereafter.

Recent examples of the Fuel Office providing exceptional customer service to those with emergency needs.

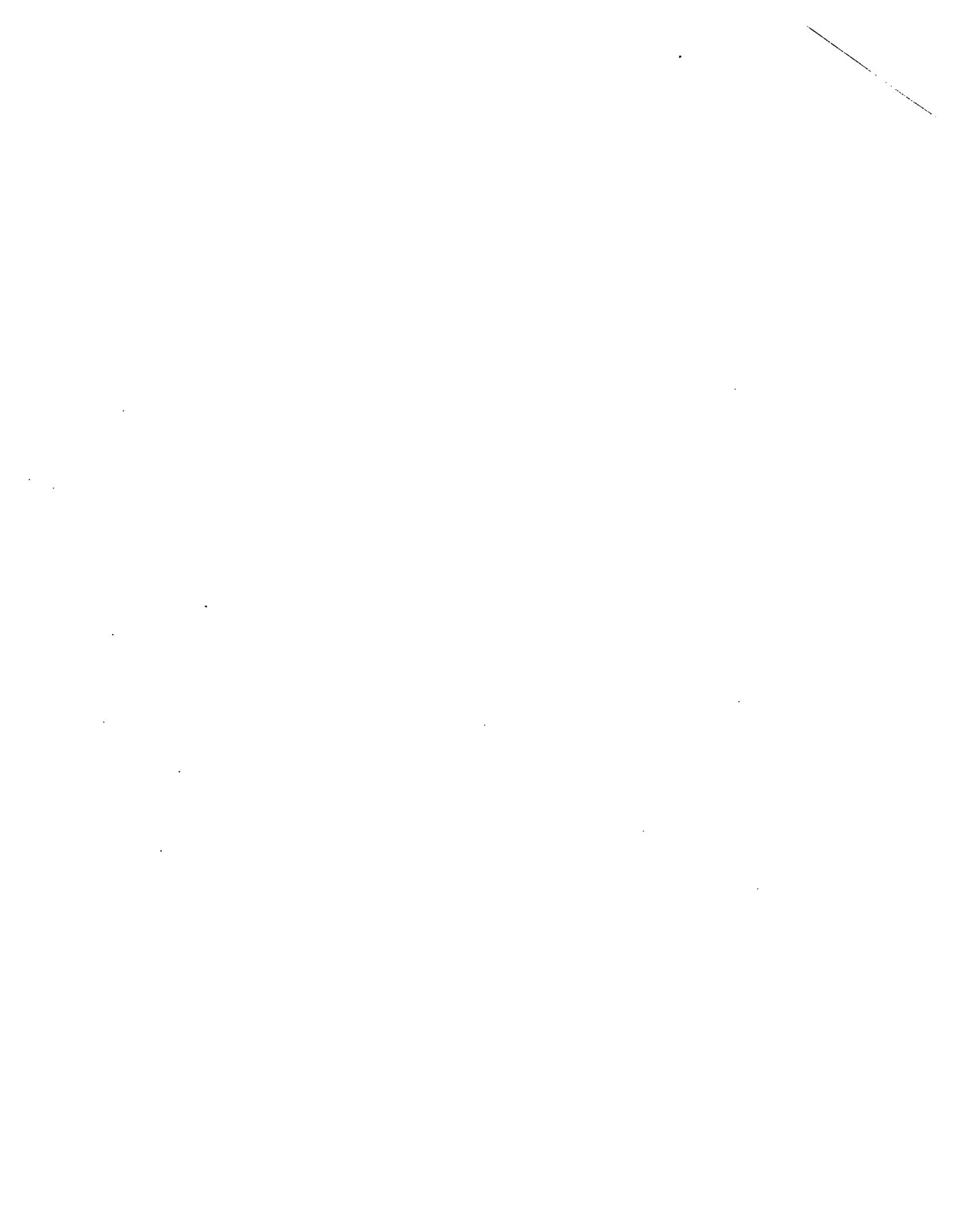
11/22/05 call from VNA: An elderly woman was in a nursing home through August and didn't apply for seasonal fuel until 11/1. She was running low on fuel. The Fuel Office pulled her application, processed it, and confirmed the benefit with the dealer on the same day.

11/28/05 call from Central VT Community Action: A woman whose husband died on 11/18 had not applied for fuel assistance. She had no income and was running low on fuel. The Fuel Office took the application over the phone, processed eligibility, and confirmed the benefit with the fuel dealer on the same day. The dealer delivered fuel on 11/30.

12/2/05 call from a fuel dealer: The dealer was worried about an elderly customer who was low on fuel and didn't seem to have the money to pay for a delivery. The Fuel Office processed the seasonal fuel application and confirmed benefit with the dealer on the same day.

These are just three examples of many situations in which the Fuel Office met an emergency need this season.

4. The Emergency Fuel Program is also available to eligible Vermonters 24 hours per day through the local community action agency.



Information on Prices and Heating Degree Days:

Heating degree days are lower in 2005 than in 2004.

<u>10/04</u>	<u>10/05</u>	<u>11/04</u>	<u>11/05</u>
533	457	830	727

Fuel prices continue to go down.

Type	10/1/2004	11/1/2004	12/1/2004	10/1/2005	11/1/2005	12/1/2005
Oil	\$1.77	\$2.02	\$1.94	\$2.60	\$2.48	\$2.40
Kerosene	\$1.98	\$2.25	\$2.18	\$2.94	\$2.88	\$2.76
Propane	\$1.79	\$1.91	\$1.92	\$2.25	\$2.25	\$2.24

Fuel price information as per Dept. of Public Service's Fuel Price Report



MINUTES

Joint Fiscal Committee Meeting of December 13, 2005

Chair Martha Heath called the meeting of the Joint Fiscal Committee to order at 11:15 a.m. in Room 11, State House.

Also present: Representatives Obuchowski, Perry, Severance and Westman
Senators Bartlett, Cummings and Snelling

Also at the meeting were staff of the Joint Fiscal Office and Legislative Council, Administration officials and staff, representatives of advocacy groups, the news media, and the general public.

GLOBAL COMMITMENT TO HEALTH DEMONSTRATION WAIVER PROGRAM – REVIEW AND APPROVAL:

1. The Committee resumed its consideration of the Global Commitment proposal, postponed at the November 17 meeting with two conditions yet to be voted on: (a) final premium amounts determined to be sufficient and (b) agreement regarding future years' premiums.

Members received packets of information prior to the meeting which included a general description of the rate setting methodology; a memorandum on the most recent actuarial estimate and what it means for Vermont's proposal; a letter from Chief Legislative Council William Russell addressing the question of the Committee's authority to approve the demonstration waiver program in light of the fact that the General Assembly will reconvene in less than 30 days; and the motions that the Committee adopted at the September 30 and November 27 meetings. In addition, at the meeting a memo was distributed to the Committee from Stephanie Barrett and Steve Kappel, Associate Fiscal officers, presenting the Joint Fiscal Office's preliminary evaluation of the premiums developed by the Agency of Human Services' (AHS) consulting actuary. (These documents and others referred to below are on file in the Joint Fiscal Office.)

Susan Besio, AHS Director of Planning for and Joshua Slen, Director of the Office of Vermont Health Access (OVHA), once again joined the Committee. Ms. Besio handed out a memorandum dated December 13 from AHS Secretary Michael K. Smith advising as follows:

The monthly premium amount paid to the Office of Vermont Health Access during State Fiscal Year 2006 will be established at \$65,371,811. This Premium is within the actuarially certified rate range of \$60,115,350 - \$66,747,894 for the nine months of Waiver Year 2 that fall in SFY 2006.

This premium rate is subject to modification, within the certified rate range, based on the Legislative Budget Adjustment Process.

Committee members also were given the proposed final draft of Secretary Smith's letter of acceptance on behalf of the State of Vermont of the Special Terms and Conditions of the Global Commitment Section 115 Demonstration, with an effective start date of October 1, 2005.

Mr. Slen at the outset of the discussion advised that the final figures presented differ slightly from those that were in the rate range set forth in information in the packet which Committee members received prior to the meeting. The previous top of the rate range number for the 9 months of the current fiscal year was approximately \$603,000,000, whereas \$600,670,000 is the new projection for the top of the range.

Mr. Slen said he did not have the fiscal year 2007 and 2008 rates. He has had a preliminary discussion with Joint Fiscal Office staff about the 2007 rate, for which AHS has contracted with the consulting actuarial firm. The Administration has not yet entered into a contract to produce the FY 2008 rate, which will be established subject to legislative action in the forthcoming session and prior to the start of the state's 2008 fiscal year.

Representative Obuchowski questioned Mr. Slen at length about the sufficiency of the rates throughout the duration of the demonstration waiver and the underlying assumptions used in setting those rates.

Other members engaged in the dialogue about the estimates, assumptions and risks for the out years, and Stephanie Barrett and Steve Kappel became participants in the discussion. The Chair asked them whether in their opinion the premiums for the next two years and the agreements with regard to future years' premiums are sufficient for the Committee to feel comfortable about affirmative findings on the conditions stipulated in the action reserved on November 30 for this meeting. Both staff members gave essentially positive responses, although Mr. Kappel said he thinks the risks in the out years are not minimal.

Susan Besio went through the proposed final acceptance letter from the Secretary of the Agency of Human Services to Dr. Mark McClellan, CMS Administrator. She pointed out that the changes in that letter which were discussed at the Committee's last meeting are incorporated in the new version.

The Chair suggested that the penultimate paragraph of that letter be altered slightly by the addition of the insertion after "Vermont Legislature of the phrase, "through the Joint Fiscal Committee," so that the sentence reads,

"The Vermont Legislature, through the Joint Fiscal Committee, has given final approval for entering into the waiver program, in accordance with its September 30th contingent approval, and subsequent review and approval of the completion of these contingencies on December 13, 2005."

The Committee agreed that that change should be made in the letter.

The Committee then voted by roll call on a motion by Representative Perry reading as follows:

The Joint Fiscal Committee finds that the two remaining conditions of the September 30th motion of contingent approval of the Global Commitment to Health Demonstration Waiver Program have been met:

Condition:

- (1) Final premium amount determined to be sufficient
- (2) Agreement regarding future years' premiums.

The Committee also approves the letter of acceptance [with the change noted above].

The motion was adopted, with seven (7) members, Senators Bartlett, Cummings and Snelling and Representatives Heath, Perry, Severance, Westman, voting in the affirmative; one (1) member, Representative Obuchowski, voting "no"; and two (2) members, Senators Sears and Welch, absent.

APPROVAL OF ENVIRONMENTAL CONTINGENCY FUND (ECF) EXPENDITURES:

2. Jeffrey Wennberg, Commissioner of the Department of Environmental Conservation (DEC), and George Desch, Program Manager, Waste Management Division, DEC, accompanied by several other staff members, sought Committee action on two requests:

- (a) Retroactive approval for the expenditure of \$10,334.71 in excess of the cap established under 10 §1283(b); and
- (b) Approval of an additional \$40,000.00 to be spent under subdivision (b)(2) investigations) and \$20,000.00 to be spent under subdivision (b)(3) (remedial actions).

Mr. Desch explained that the Department has determined it will need to expend approximately \$50,000 beyond costs already incurred for remediation of

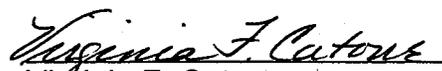
contamination at the 9 Depot Square site in Barre, which at one time was a dry-cleaning facility. With these additional costs, cumulative costs in two expenditure categories of the Environmental Contingency Fund as set forth in 10 VSA §1283(b) will exceed the statutory cap of \$100,000, which triggers the need for Joint Fiscal Committee approval. The balance in the ECF will not drop below the minimum of \$100,000 required by statute.

The overrun related to investigation of the environmental threat was inadvertent, and Mr. Desch briefed the Committee on the procedures that have been instituted to prevent future recurrence of such oversights. He, the Commissioner and DEC staff member Linda Provencer also supplied answers to questions from the Chair and Representative Obuchowski about how the oversight occurred, the remedial actions to ensure such an error will not happen in the future, and various aspects of contractual arrangements to perform the cleanup work.

After further discussion, including issues of liability, Senator Cummings moved that pursuant to 10 VSA §1283(b) the Joint Fiscal Committee approve Environmental Contingency Fund expenditures of \$50,335 in excess of \$100,000 under subdivision (b)(2) and \$20,000 in excess of \$100,000 under subdivision (b)(4), for investigation and remediation at the contaminated 9 Depot Square site in Barre. The motion was seconded by Representative Severance and adopted.

The meeting was adjourned at 1:00 p.m.

Respectfully submitted:


Virginia F. Catone
Joint Fiscal Office