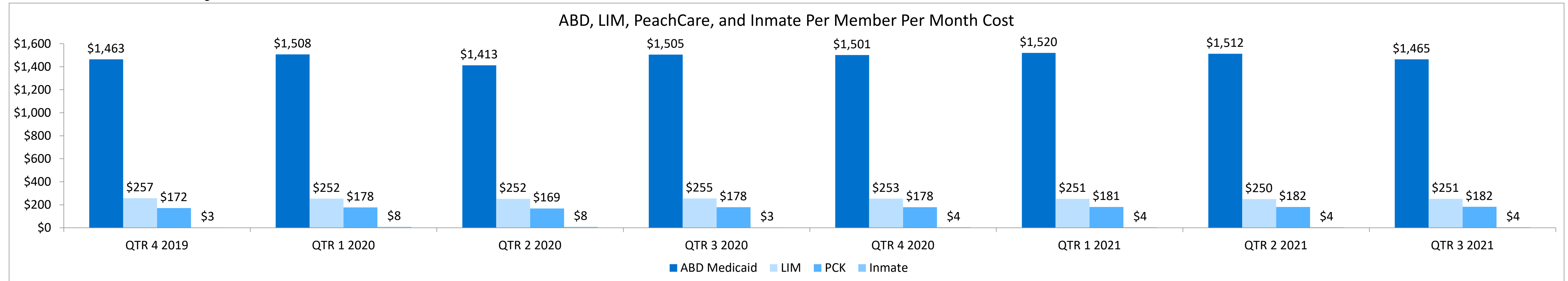
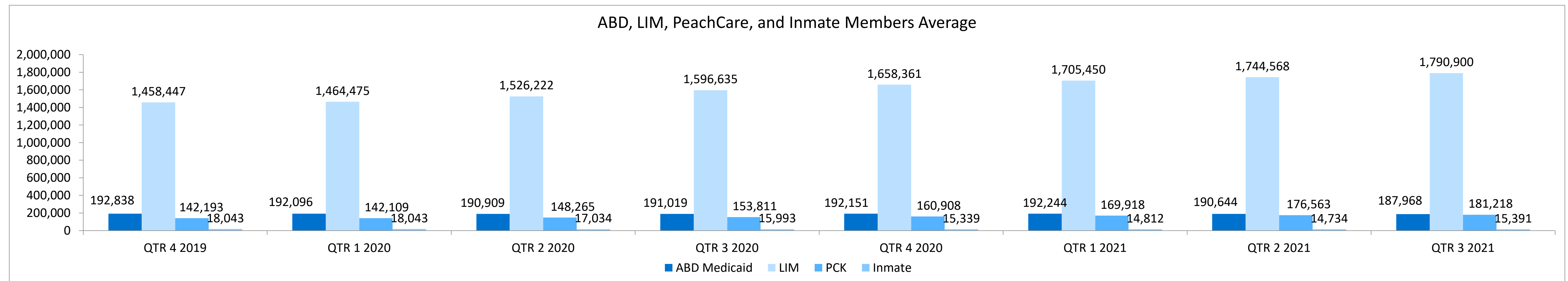


Financial Results by Aid Category

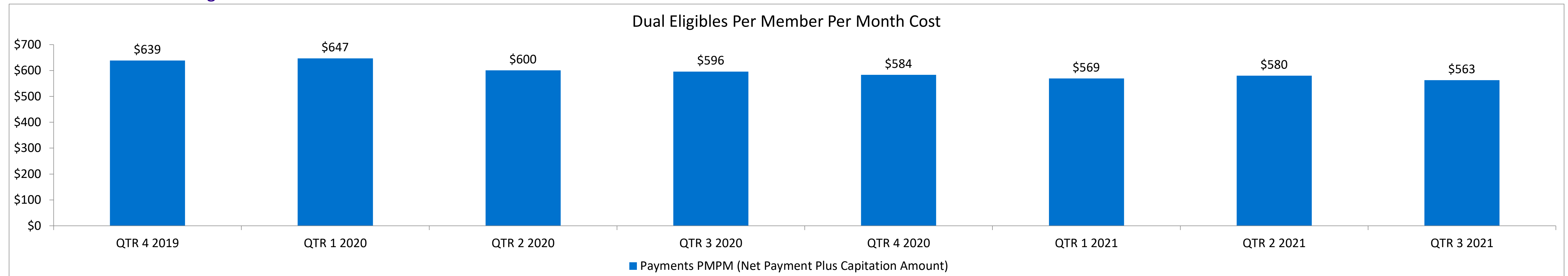
Excludes members with Medicare coverage



Payments includes Net Payments and Capitation Amount. Net Payments include payments for FFS claims. Capitation Amount includes payments to non-emergency transportation (NEMT) brokers and CMO plans to administer benefits.



Financial Results for Dual Eligibles

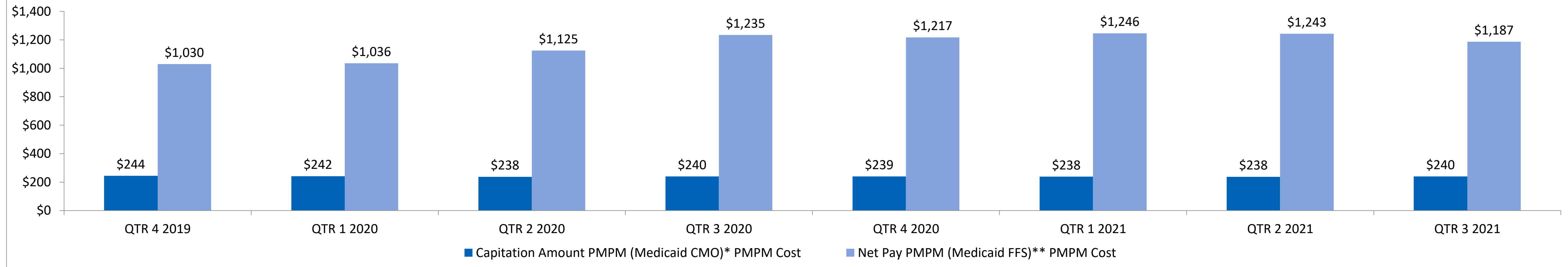


Payments includes Net Payments and Capitation Amount. Net Payments include payments for FFS claims. Capitation Amount includes payments to non-emergency transportation (NEMT) brokers and CMO plans to administer benefits.

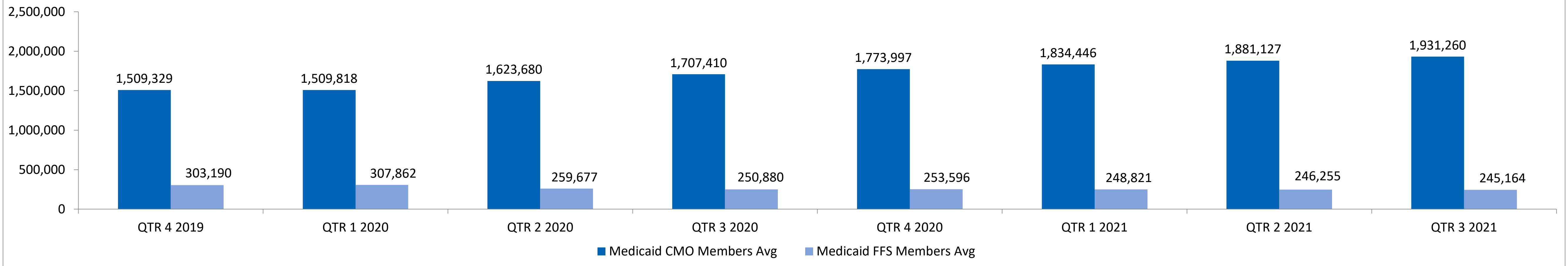
Financial Results by Plan Group

Excludes members with Medicare coverage

CMO and FFS Per Member Per Month Cost



CMO and FFS Members Average



* Capitation Amount is the amount Medicaid paid to the plan; this amount is used to calculate the CMO PMPM cost and includes payments to non-emergency transportation (NEMT) brokers and CMO plans.

**Net Payment is used to calculate PMPM cost for FFS plans.

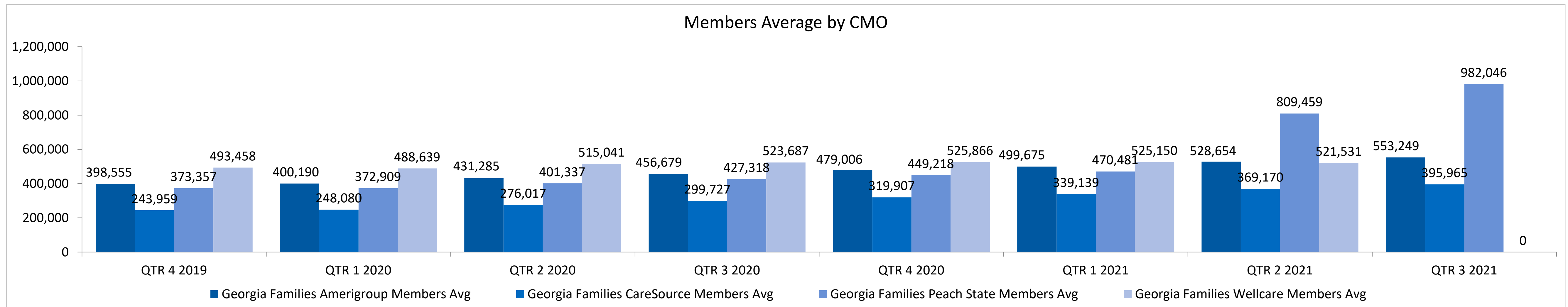
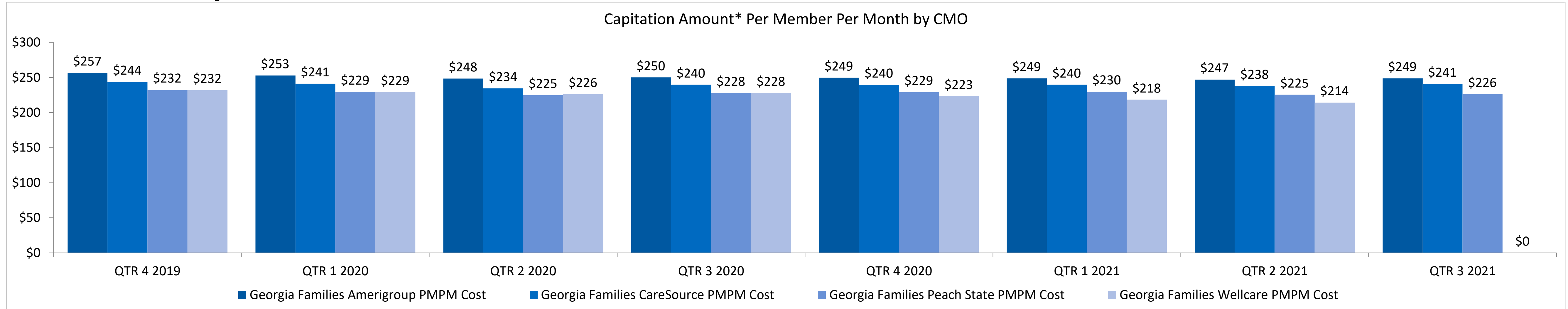
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Financial Results by CMO

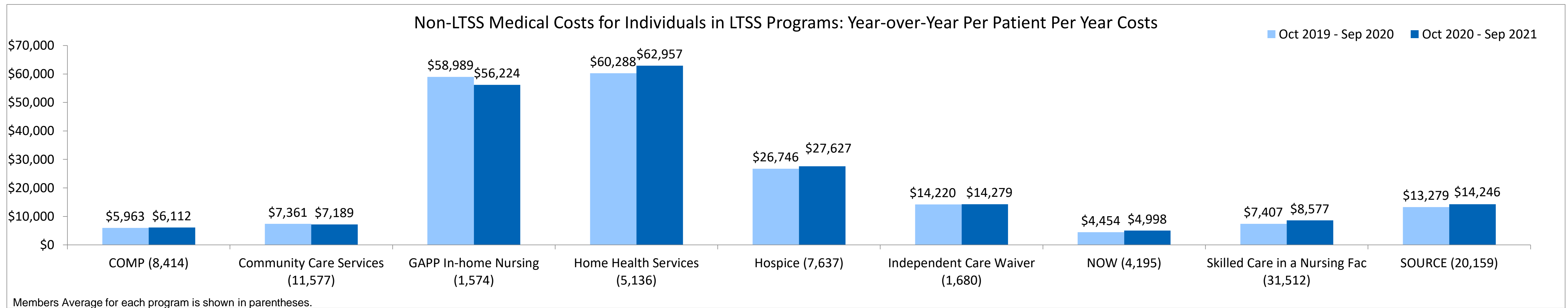
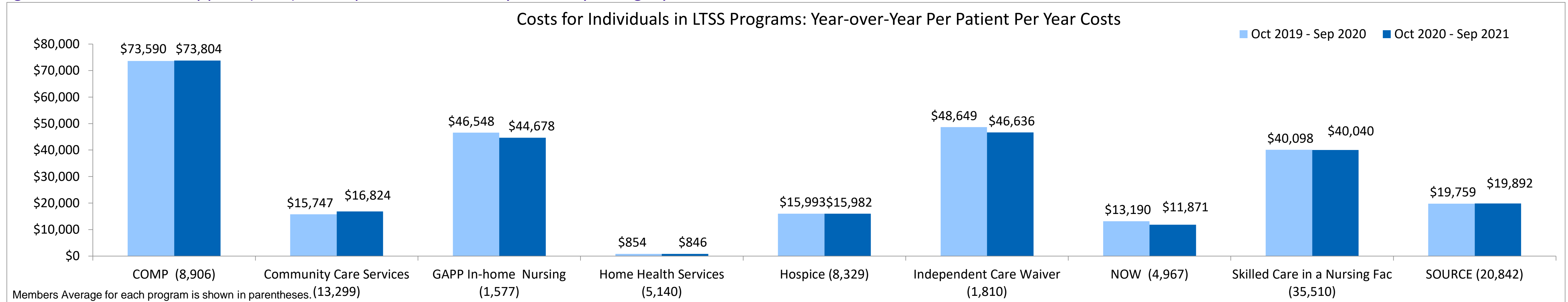
Excludes members with Medicare coverage



*Capitation Amount is what Medicaid paid and excludes NEMT. Wellcare members moved to other plans in May 2021 due to merger with Peach State, which accounts for the large increase in Peach State members average in Q2 2021.

Long Term Care (LTC) Services Summary

Long Term Service and Support (LTSS) Participation and Net Payments by Category of Service



Note: LTSS report includes members with Medicare coverage.

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Cost by Aid Category Group

Excludes members with Medicare coverage

Aid Category Group	Measures	Oct 2019 - Sep 2020	Oct 2020 - Sep 2021	% Change	Oct 2019 - Sep 2020	Oct 2020 - Sep 2021
					PMPM	PMPM
LIM	Net Pay Med	\$409,543,389	\$323,177,151	-21%	\$23	\$16
	Net Pay Rx	\$33,408,456	\$37,870,499	13%	\$2	\$2
	CMO Capitation Payments	\$4,002,306,491	\$4,638,113,182	16%	\$225	\$227
	P4HB Capitation Payments	\$22,846,110	\$25,969,716	14%	\$1	\$1
	NEMT Capitation Payments	\$88,019,767	\$104,674,126	19%	\$5	\$5
	Total Cost	\$4,556,124,214	\$5,129,804,673	13%	\$256	\$252
ABD	Net Pay Med	\$2,433,449,247	\$2,417,723,711	-1%	\$1,085	\$1,090
	Net Pay Rx	\$811,623,977	\$852,603,913	5%	\$362	\$384
	NEMT Capitation Payments	\$11,437,478	\$11,583,996	1%	\$5	\$5
	Total Cost	\$3,256,510,703	\$3,281,911,620	1%	\$1,452	\$1,480
PCK	Net Pay Med	\$13,156,440	\$6,907,663	-47%	\$7	\$3
	Net Pay Rx	\$2,561,813	\$2,895,432	13%	\$1	\$1
	CMO Capitation Payments	\$292,194,452	\$365,297,470	25%	\$166	\$177
	Total Cost	\$307,912,705	\$375,100,565	22%	\$175	\$182
Foster Care	Net Pay Med	\$25,917,968	\$25,391,986	-2%	\$69	\$67
	Net Pay Rx	\$8,434,804	\$8,105,310	-4%	\$23	\$21
	CMO Foster Care Capitation Payments	\$182,331,060	\$179,899,018	-1%	\$487	\$475
	NEMT Capitation Payments	\$1,975,075	\$1,999,021	1%	\$5	\$5
	Total Cost	\$218,658,908	\$215,395,335	-1%	\$583	\$569
Inmate	Net Pay Med	\$1,063,041	\$421,051	-60%	\$5	\$2
	Total Cost	\$1,063,041	\$421,051	-60%	\$5	\$2

Measures

Net Pay Med is the sum of facility and professional net payments.

Net Pay Rx is the net amount paid for prescriptions filled and exclude rebates and clawbacks.

CMO Capitation Payment is the capitation amount constrained to Category of Service code 830 (Managed Care Organization).

CMO Foster Care Capitation Payment is the capitation amount constrained to Category of Service code 815 (Managed Care Foster Care).

P4HB Capitation Payment is the capitation amount constrained to Category of Service code 810 (Managed Care Healthy Babies Waiver).

NEMT Capitation Payment is the capitation amount constrained to Category of Service code 381 (Non-Emergency Medical Transportation).

Total Cost is the sum of capitation amounts, net payment and administrative fees.

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Categories of Service Groupings

Excludes members with Medicare coverage

Category of Service	Patients	Payments	Cost Per Patient	Service Count	Cost Per Service	Claims Paid	Providers	Claims Per Provider
Inpatient Hospital Services	188,383	\$1,910,943,672	\$10,144	234,367	\$8,154	235,455	450	523
Outpatient Hospital Services	666,264	\$913,689,347	\$1,371	12,355,928	\$74	1,691,914	1,616	1,047
Professional Services	1,547,603	\$1,209,695,792	\$782	8,900,462	\$136	10,202,151	100,150	102
Pharmacy	1,270,141	\$1,554,370,762	\$1,224	16,184,135	\$96	16,219,552	2,445	6,634
Skilled Care in a Nursing Facility	3,953	\$180,382,504	\$45,632	876,039	\$206	124,954	324	386
Dental	783,579	\$255,632,640	\$326	1,582,259	\$162	1,653,733	3,019	548
Behavioral Health	92,559	\$322,922,542	\$3,489	7,224,004	\$45	2,042,582	1,669	1,224
Waiver	17,164	\$555,944,525	\$32,390	8,592,104	\$65	1,515,407	3,905	388
Other	1,453,100	\$839,801,639	\$578	20,100,401	\$42	7,560,217	35,540	213
Total	1,882,815	\$7,743,383,422	\$4,113	76,049,699	\$102	41,245,965	127,959	322

Category of Service Groupings

Inpatient services are identified by Category of Service codes 001 and 010. Service Count reflects Admits.

Outpatient services are identified by Category of Service code 070. Service Count reflects Service Count.

Professional services are identified by Category of Service codes 330, 400, 410, 420, 430, 431, 432, 470, 480, 490, 550, 560, 570, 721 and 740. Service Counts reflects Visits Patient

Skilled Care in a Nursing Facility services are identified by Category of Service codes 110,140,170 and 180. Service Count reflects Days Billed LTC Calculated Fac.

Pharmacy services are identified by category of service codes 300 and 321. Service Count reflects Scripts Rx. Payments exclude rebates and clawbacks.

Waiver services are identified by Category of Service codes 590, 660, 680, 681, 930, 971 and 972. Service Count reflects Service Count.

Dental services are identified by Category of Service codes 450, 460. Service Count reflects Visits Patient.

Behavioral Health services are identified by Category of Service codes 440, 442, 445. Service Count reflects Service Count.

All other services are identified by excluding the Category of Service codes used in aforementioned groups. Service Count reflects Service Count.

Payments = Net Payment + CMO Plan Paid Amount. CMO Plan Paid Amount is the amount the plan pays to providers.