

# Georgia Department of Community Health

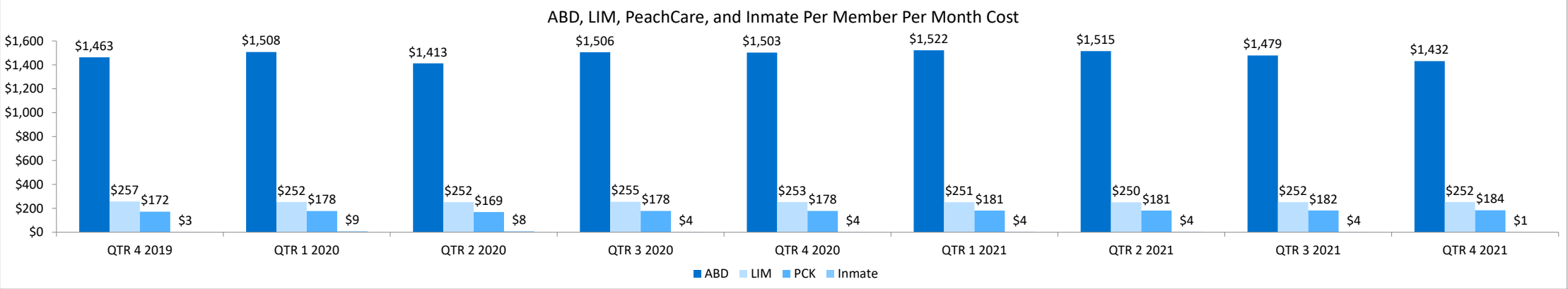
## Finance Report

Claims Incurred through October 2021 and Paid through January 2022

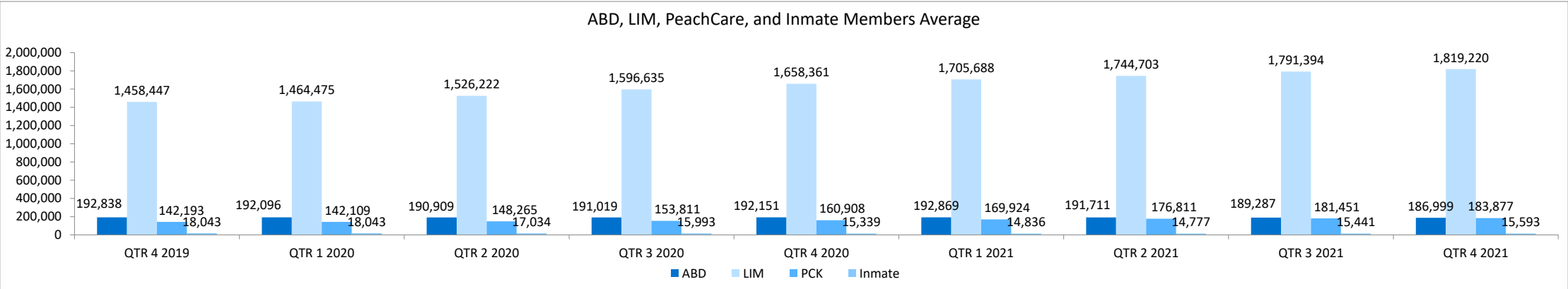
### Financial Results by Aid Category

Excludes members with Medicare coverage

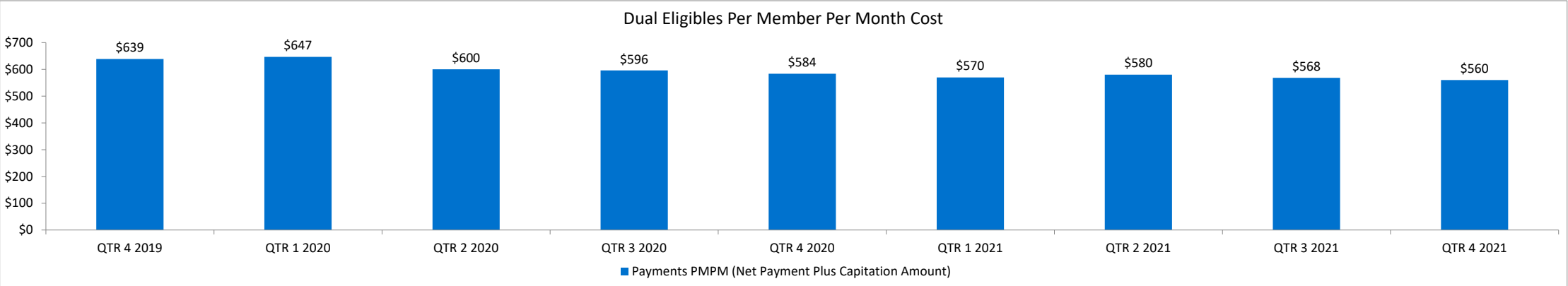
Quarter 4 2021 only includes one month of data.



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.

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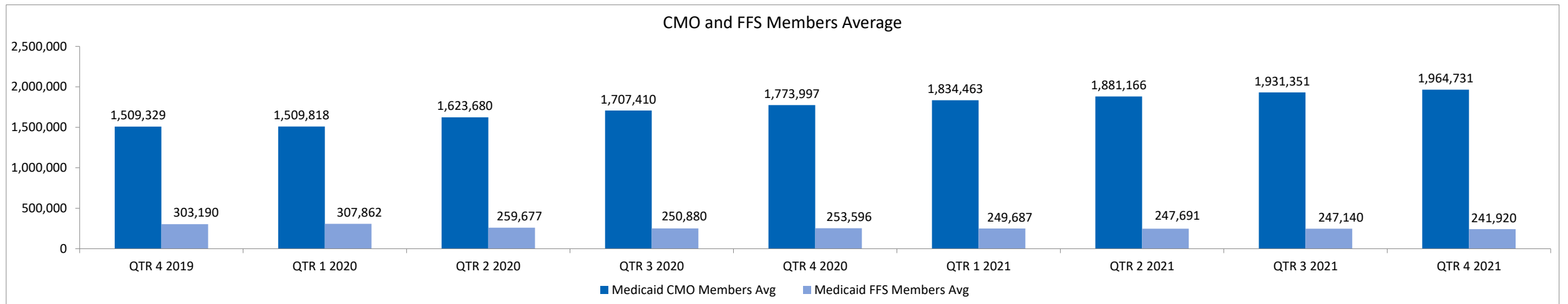
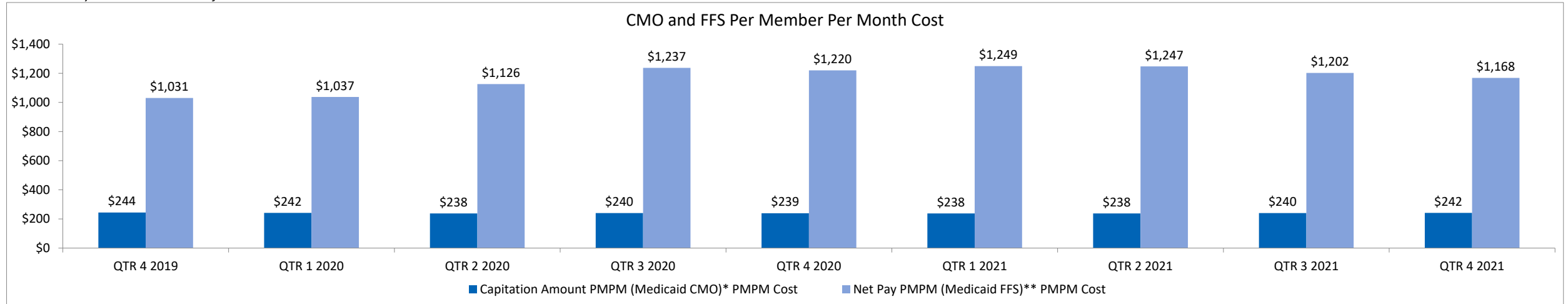
## Finance Report

Claims Incurred through October 2021 and Paid through January 2022

### Financial Results by Plan Group

Excludes members with Medicare coverage

Quarter 4 2021 only includes one month of data.



\* 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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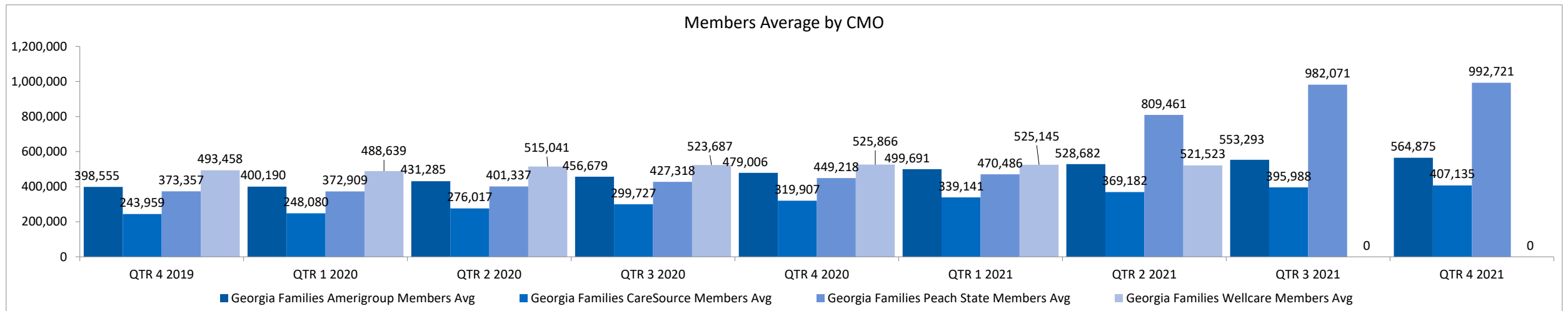
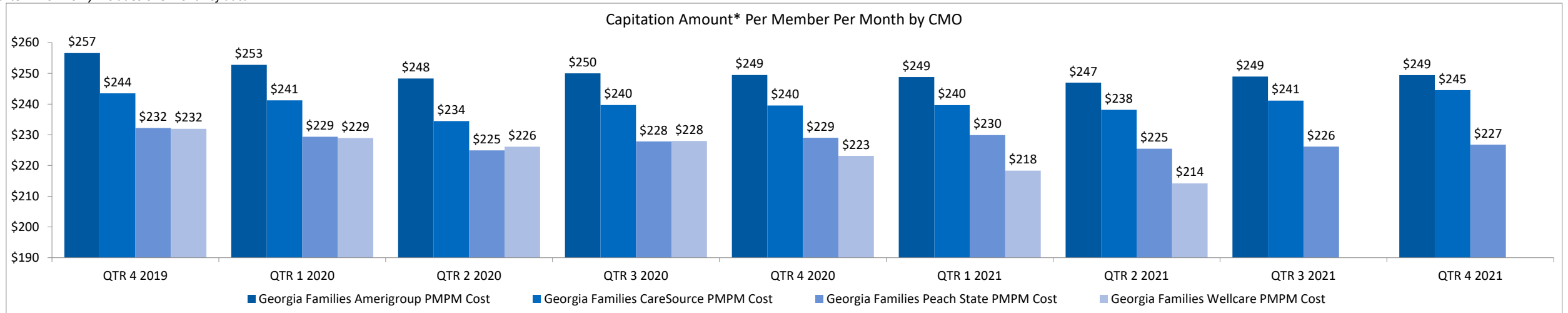
## Finance Report

Claims Incurred through October 2021 and Paid through January 2022

### Financial Results by CMO

Excludes members with Medicare coverage

Quarter 4 2021 only includes one month of data.



\*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.

# Georgia Department of Community Health

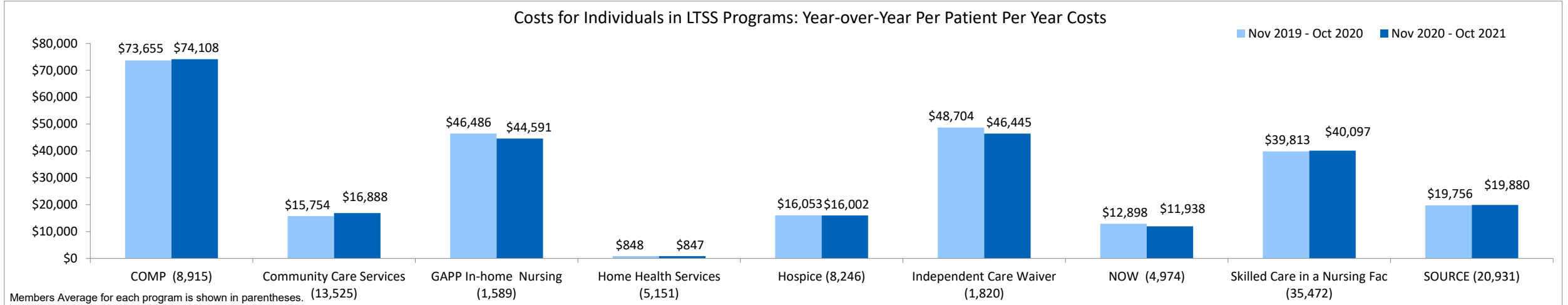
## Finance Report

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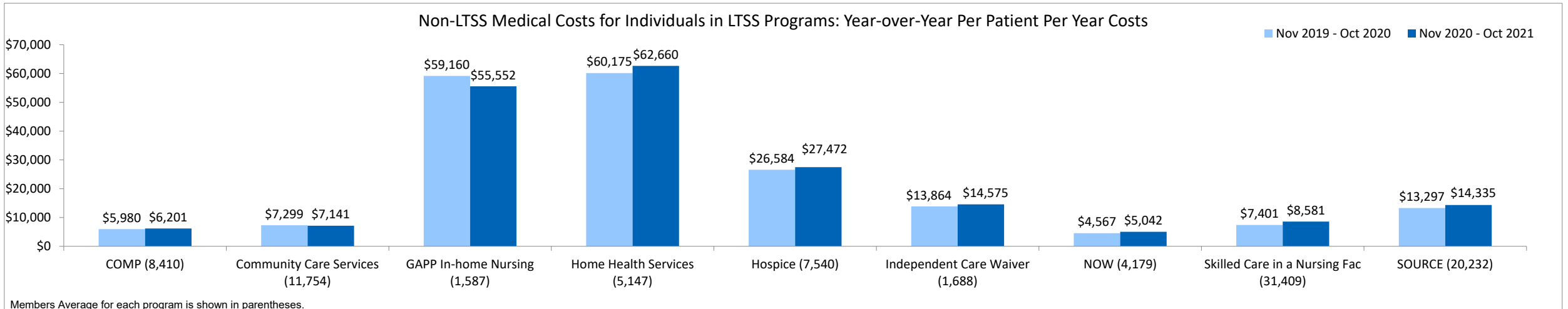
### Long Term Care (LTC) Services Summary

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

Costs for Individuals in LTSS Programs: Year-over-Year Per Patient Per Year Costs



Non-LTSS Medical Costs for Individuals in LTSS Programs: Year-over-Year Per Patient Per Year Costs



Note: LTSS report includes members with Medicare coverage.

# Georgia Department of Community Health

## Finance Report

Claims Incurred through October 2021 and Paid through January 2022

### Cost by Aid Category Group

Excludes members with Medicare coverage

Aid Category Group	Measures	Nov 2019 - Oct 2020	Nov 2020 - Oct 2021	% Change	Nov 2019 - Oct 2020 PMPM	Nov 2020 - Oct 2021 PMPM
LIM	Net Pay Med	\$405,874,939	\$325,487,517	-20%	\$23	\$16
	Net Pay Rx	\$32,950,533	\$38,265,901	16%	\$2	\$2
	CMO Capitation Payments	\$4,045,055,285	\$4,687,860,750	16%	\$225	\$228
	P4HB Capitation Payments	\$23,275,620	\$25,958,532	12%	\$1	\$1
	NEMT Capitation Payments	\$89,207,287	\$105,695,593	18%	\$5	\$5
	<b>Total Cost</b>	<b>\$4,596,363,664</b>	<b>\$5,183,268,293</b>	<b>13%</b>	<b>\$255</b>	<b>\$252</b>
ABD	Net Pay Med	\$2,431,883,627	\$2,414,802,717	-1%	\$1,085	\$1,087
	Net Pay Rx	\$814,354,946	\$853,817,973	5%	\$363	\$384
	NEMT Capitation Payments	\$11,440,700	\$11,600,039	1%	\$5	\$5
	<b>Total Cost</b>	<b>\$3,257,679,273</b>	<b>\$3,280,220,729</b>	<b>1%</b>	<b>\$1,454</b>	<b>\$1,477</b>
PCK	Net Pay Med	\$12,608,918	\$7,114,211	-44%	\$7	\$3
	Net Pay Rx	\$2,581,404	\$2,977,859	15%	\$1	\$1
	CMO Capitation Payments	\$295,903,815	\$370,766,849	25%	\$167	\$177
	<b>Total Cost</b>	<b>\$311,094,137</b>	<b>\$380,858,919</b>	<b>22%</b>	<b>\$176</b>	<b>\$182</b>
Foster Care	Net Pay Med	\$25,754,462	\$25,405,774	-1%	\$69	\$67
	Net Pay Rx	\$8,361,253	\$8,044,874	-4%	\$22	\$21
	CMO Foster Care Capitation Payments	\$181,877,275	\$180,013,966	-1%	\$486	\$475
	NEMT Capitation Payments	\$1,974,947	\$2,002,432	1%	\$5	\$5
	<b>Total Cost</b>	<b>\$217,967,936</b>	<b>\$215,467,045</b>	<b>-1%</b>	<b>\$582</b>	<b>\$568</b>
Inmate	Net Pay Med	\$1,149,205	\$382,150	-67%	\$6	\$2
	<b>Total Cost</b>	<b>\$1,149,205</b>	<b>\$382,150</b>	<b>-67%</b>	<b>\$6</b>	<b>\$2</b>

**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.

# Georgia Department of Community Health

## Finance Report

Claims Incurred through October 2021 and Paid through January 2022

### 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
<b>Inpatient Hospital Services</b>	188,953	\$1,912,845,486	\$10,123	234,729	\$8,149	235,890	451	523
<b>Outpatient Hospital Services</b>	674,046	\$916,432,369	\$1,360	12,384,377	\$74	1,702,469	1,633	1,043
<b>Professional Services</b>	1,559,117	\$1,214,527,368	\$779	8,974,011	\$135	10,281,195	101,054	102
<b>Pharmacy</b>	1,287,788	\$1,569,592,893	\$1,219	16,345,767	\$96	16,381,635	2,455	6,673
<b>Skilled Care in a Nursing Facility</b>	3,943	\$180,754,119	\$45,842	879,134	\$206	125,442	323	388
<b>Dental</b>	787,701	\$256,249,249	\$325	1,589,773	\$161	1,661,203	2,904	572
<b>Behavioral Health</b>	93,549	\$328,317,348	\$3,510	7,227,859	\$45	2,040,389	1,709	1,194
<b>Waiver</b>	17,218	\$557,978,897	\$32,407	8,735,822	\$64	1,515,090	3,934	385
<b>Other</b>	1,464,859	\$845,761,589	\$577	20,238,199	\$42	7,638,330	35,836	213
<b>Total</b>	<b>1,896,324</b>	<b>\$7,782,459,318</b>	<b>\$4,104</b>	<b>76,609,671</b>	<b>\$102</b>	<b>41,581,643</b>	<b>128,977</b>	<b>322</b>

#### 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.

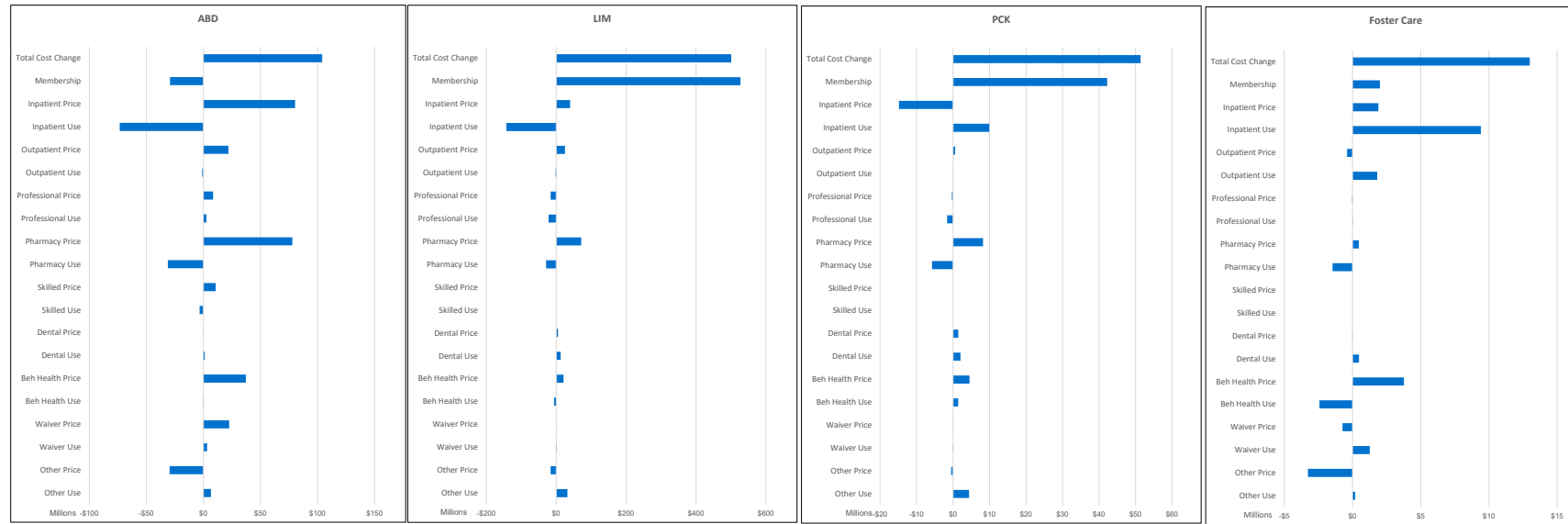
# Georgia Department of Community Health

## Finance Report

Claims Incurred through October 2021 and Paid through January 2022

### Cost and Use Trends by Categories of Service Groupings

*Excludes members with Medicare coverage*



#### Category of Service Groupings

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