



**Contract Year Ending 2018
Acute Care Program
Rate Update Letter**

Rural Hospital Payments

**Prepared for:
The Centers for Medicare & Medicaid
Services**

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Management**

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Introduction and Limitations

The purpose of this rate update document is to provide documentation, including the data, assumptions, and methodologies, used to allocate the pass-through payments for rural hospitals across the October 1, 2017 through September 30, 2018 (Contract Year Ending 2018 or CYE 18) capitation rates for the Acute Care program. The rural hospital payments are pass-through payments under 42 CFR § 438.6(d). This rate update document was prepared for Centers for Medicare & Medicaid Services (CMS), or its actuaries, for review of the rural hospital allocation methodology. This rate update document also provides the CYE 18 Acute Care program capitation rates with and without the rural hospital payments for CMS review. This rate update document may not be appropriate for any other purpose.

This rate update document may also be made available publicly on the Arizona Health Care Cost Containment System (AHCCCS) website or distributed to other parties. If this rate update document is made available to third parties, then this rate update document should be provided in its entirety. Any third party reviewing this rate update document should be familiar with the AHCCCS Medicaid managed care program, the provisions of 42 CFR Part 438 of 81 FR 27497 applicable to this rate update document, the 2018 Medicaid Managed Care Rate Development Guide, Actuarial Standards of Practice, and generally accepted actuarial principles and practices.

CMS has yet to release a rate development guide for capitation rate updates related to payments under § 438.6(d). However, AHCCCS has had several meetings with CMS regarding § 438.6(d) payment arrangements. From these meetings, CMS has provided guidance that a capitation rate certification is not required for § 438.6(d) payment allocations across rate cells. Rather, a rate update letter can be provided to CMS that documents the data, assumptions, and methodologies, used to allocate § 438.6(d) payments, along with the capitation rates with and without the § 438.6(d) payments.

In light of not having an official guide to follow, AHCCCS will follow the most recent rate development guide for capitation rate certifications, which is the 2018 Medicaid Managed Care Rate Development Guide (2018 Guide). The 2018 Guide describes the rate development standards and appropriate documentation to be included within Medicaid managed care rate certifications. In particular, Section I.4.E covers pass-through payments and it is this section that will contain the rate update documentation. Since an official guide with respect to § 438.6(d) payment capitation rate updates is not yet available from CMS, the following section, Section I.4.E.ii.(c) was added by AHCCCS to the 2018 Guide to capture the data, assumptions, and methodology used to allocate the rural hospital payments by rate cell. Sections of the 2018 Guide that do not apply will be marked as “Not Applicable” and will be included in this rate update document for completeness.

Section I Medicaid Managed Care Rates

1. General Information

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

2. Data

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

3. Projected Benefit Costs and Trends

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

4. Special Contract Provisions Related to Payment

A. Incentive Arrangements

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

B. Withhold Arrangements

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

C. Risk-Sharing Mechanisms

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

D. Delivery System and Provider Payment Initiatives

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

E. Pass-Through Payments

i. Rate Development Standards

This section of the 2018 Guide provides information on the pass-through payments.

ii. Appropriate Documentation

The following sections of the 2018 Guide, Section I.4.E.ii.(a).(i) through Section I.4.E.ii.(b).(ii), were provided in the Contract Year Ending 2018 Acute Care Program Capitation Rate Certification. These sections are being provided again to facilitate CMS' review. Additionally, as stated in the Introduction and Limitations, AHCCCS has added a new section, Section I.4.E.ii.(c), titled "Allocation Methodology" to describe the data, assumptions, and methodology to allocate the Rural Program payments by rate cell.

(a) Existing Pass-Through Payments

The Acute Care Program includes an existing pass-through payment for rural hospitals.

(i) Description of Pass-Through Payments

The Rural Hospital Inpatient Fund was established in Arizona Revised Statute (A.R.S.) § 36-2905.02 by the Arizona State Legislature in 2005 in response to a 2002 hospital inpatient study that showed rural hospital inpatient cost structures were higher than urban hospital cost structures for inpatient services. The Rural Hospital Inpatient Fund was designed to supplement rural hospital inpatient payments and is paid out by the Contractors to the rural hospitals as a pass-through payment. Additional information regarding the pass-through payment for rural hospitals can be found in the A.R.S. § 36-2905.02 and in the Arizona Administrative Code (A.A.C.) R9-22-712.07.

- A.R.S. §36-2905.02: <http://www.azleg.gov/viewdocument?docName=http://www.azleg.gov/ars/36/02905-02.htm>
- A.A.C. R9-22-712.07: http://apps.azsos.gov/public_services/Title_09/9-22.pdf

(ii) Amount of Pass-Through Payments

The total amount before premium tax of the pass-through payment for CYE 18 rural hospitals is \$12,158,100. The total amount with 2% premium tax is \$12,406,224.49.

(iii) Providers Receiving Pass-Through Payments

The providers receiving the pass-through payment are the rural hospitals that meet the state regulatory definition of a rural hospital. For the purpose of this payment, a rural hospital is defined in the A.A.C. R9-22-712.07 as, *“A health care institution that is licensed as an acute care hospital by the Arizona Department of Health Services for the previous state fiscal year and is not an IHS hospital or a tribally owned or operated facility and: a. Has 100 or fewer PPS beds, not including beds reported as sub provider beds on the hospital’s Medicare Cost Report, and is located in a county with a population of less than 500,000 persons, or b. Is designated as a critical access hospital for the majority of the previous state fiscal year.”*

(iv) Financing Mechanism Pass-Through Payments

The rural hospital supplemental payments are financed through a state General Fund appropriation as specified in A.R.S. § 36-2905.02 and the annual appropriation bill.

(v) Amount of Pass-Through Payments in Previous Rating Period

The total amount before premium tax of the pass-through payment for CYE 17 rural hospitals was \$12,158,100. The total amount with 2% premium tax was \$12,406,224.49.

(vi) Amount of Pass-Through Payments in Rating Period with July 5, 2016

The total amount before premium tax of the pass-through payment for rural hospitals in the previous CYE 16 capitation rates was \$12,158,100. The CYE 16 capitation rates covered the October 1, 2015 through September 30, 2016 and therefore included the date of July 5, 2016 as required by 42 CFR § 438.6(d) at 81 FR 27860 and later amended by 42 CFR Part 438 of 82 FR 5415 (published January 18, 2017 and effective March 20, 2017).

(b) Base Amount Information

This section documents the data, assumptions, and methodology to calculate the base amount. All amounts listed in this section are before premium tax.

(i) Base Amount Data, Assumptions, Methodology

The data, assumptions, and methodology align with the requirements of 42 CFR § 438.6(d) at 81 FR 27860 and later amended at 42 CFR § 438.6(d) at 82 FR 5428. The CYE 16 encounter and Fee-for-Service (FFS) claims data for inpatient services incurred at the rural hospitals was used for the base amount calculation. The AHCCCS DHCM Actuarial Team also used CMS 2552 Hospital Cost Reports provided by the AHCCCS DHCM Rate & Reimbursement Team. The CMS 2552 Hospital Cost Reports were used to get the Medicare FFS inpatient charge and payment amounts to calculate a Medicare FFS payment-to-charge ratio for each rural hospital.

The Medicare FFS inpatient charge amounts were from Worksheet D, Part IV, Line 200, Column 10 of the CMS 2552 Hospital Cost Reports. The Medicare FFS inpatient payment amounts were from Worksheet E, Part A, Lines 1.00 through 2.02, Column 1 and Worksheet E-3, Part V, Line 4, Column 1 of the CMS 2552 Hospital Cost Reports. The Medicare FFS payment-to-charge ratios were applied to the CYE 16 inpatient encounter data and the CYE 16 inpatient FFS claims data for each rural hospital to get estimates of what would had been paid, had Medicare FFS paid for the inpatient services.

The resulting base amount was estimated to be \$33,457,574. As described at 42 CFR § 438.6(d) at 82 FR 5428, the total dollar amount of the pass-through payment for rural hospitals for the CYE 18 capitation rates may not exceed the lesser of 100% of the base amount or the pass-through

payment for rural hospitals in the CYE 16 capitation rates. The result from this lesser of calculation is that pass-through payment for rural hospitals may not exceed \$12,158,100 for the CYE 18 capitation rates. The aggregate amounts calculated for the base amount calculation are provided below in Section I.4.E.ii.(b).(ii).

(ii) Base Amount Aggregate Components

The aggregate amounts for the base amount calculation are provided below.

- For Section I.4.E.i.(c).(i).(A) of the 2018 Guide - \$55,855,269 (this section of the 2018 Guide aligns with 42 CFR § 438.6(d)(2)(i)(A) at 81 FR 27860).
- For Section I.4.E.i.(c).(i).(B) of the 2018 Guide - \$33,712,037 (this section of the 2018 Guide aligns with 42 CFR § 438.6(d)(2)(i)(B) at 81 FR 27860).
- For Section I.4.E.i.(c).(ii).(A) of the 2018 Guide - \$19,626,985 (this section of the 2018 Guide aligns with 42 CFR § 438.6(d)(2)(ii)(A) at 81 FR 27860).
- For Section I.4.E.i.(c).(ii).(B) of the 2018 Guide - \$8,312,642 (this section of the 2018 Guide aligns with 42 CFR § 438.6(d)(2)(ii)(B) at 81 FR 27860).

The difference between \$55,855,269 and \$33,712,037 is \$22,143,232. The difference between \$19,626,985 and \$8,312,642 is \$11,314,342. The base amount is the sum of these differences and is \$33,457,574.

(c) Allocation Methodology

The actual payment for the rural hospital payments is \$12,158,100 without premium tax and the total amount with 2% premium tax is \$12,406,224.49.

AHCCCS will be paying the Contractors via a lump sum payment. The traditional CYE 18 capitation rates will not be disrupted or changed.

The AHCCCS Division of Health Care Management (DHCM) Actuarial Team used SFY 17 (July 1, 2016 through June 30, 2017) adjudicated and approved encounter data to allocate the rural hospital payments by capitation rate cell. The encounter data used for this allocation included: rural hospital providers that were eligible for rural hospital payments, relevant claim health plan information, relevant rate cell information, and health plan paid (HPP) information. The AHCCCS DHCM Actuarial Team excluded Fee for Service (FFS) utilization and any Contractors whose utilization of the rural facilities was less than 5% of total rural hospital costs. After all exclusions, a payment for

three Acute Care Contractors, including an adjustment for premium tax, was developed. See Appendix I for the payments.

The payments were allocated by rate cells using the same encounter data listed above which had all relevant race cell information included.

Appendix II contains the capitation rates with and without rural hospital payments.

5. Projected Non-Benefit Costs

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

6. Risk Adjustment and Acuity Adjustments

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

Section II Medicaid Managed Care Rates with Long-Term Services and Supports

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

Section III New Adult Group Capitation Rates

Not Applicable to the rural hospital payments for the CYE 18 Acute Care program rate update.

Appendix I: CYE 18 Rural Hospital Payments

Prospective Rural Hospital Payments including Premium Tax

MCO	GSA	TANF/KC < 1, M/F	TANF/KC 1-13, M/F	TANF/KC 14-44, F	TANF/KC 14-44, M	TANF 45+, M/F	SSI W/Med	SSI WO MED	Adults <= 106%	Adults > 106%	Delivery Supp	Total
UnitedHealthcare Community Plan	02	\$365.78	\$0.00	\$16,308.04	\$979.97	\$5,906.87	\$8,552.71	\$27,555.16	\$39,693.89	\$4,854.82	\$0.00	\$104,217.25
University Family Care	02	\$0.00	\$0.00	\$0.00	\$1,011.60	\$0.00	\$874.25	\$0.00	\$25,752.79	\$1,411.97	\$0.00	\$29,050.61
UnitedHealthcare Community Plan	04	\$150,652.90	\$36,261.20	\$406,390.43	\$36,456.55	\$41,627.39	\$30,975.70	\$63,648.36	\$269,178.40	\$68,458.17	\$0.00	\$1,103,649.10
Health Choice Arizona	04	\$381,273.95	\$40,173.50	\$1,093,789.03	\$61,742.62	\$66,288.02	\$7,282.81	\$255,487.60	\$604,243.81	\$120,153.92	\$0.00	\$2,630,435.26
UnitedHealthcare Community Plan	06	\$185,866.52	\$20,865.85	\$507,039.37	\$28,967.24	\$56,637.30	\$28,015.25	\$197,260.00	\$492,471.41	\$136,251.72	\$0.00	\$1,653,374.65
University Family Care	06	\$100,757.09	\$12,371.92	\$315,295.59	\$51,219.16	\$43,297.00	\$2,327.19	\$123,711.89	\$259,904.06	\$45,270.87	\$0.00	\$954,154.76
University Family Care	08	\$85,505.39	\$2,175.65	\$218,452.39	\$26,653.04	\$58,168.05	\$21,741.22	\$67,589.44	\$182,765.25	\$28,012.40	\$0.00	\$691,062.82
Health Choice Arizona	08	\$137,088.62	\$6,621.81	\$358,643.72	\$31,736.95	\$34,814.43	\$20,937.51	\$114,449.40	\$362,268.90	\$55,166.13	\$0.00	\$1,121,727.47
University Family Care	10	\$48,301.96	\$7,218.23	\$180,628.96	\$123.04	\$9,038.70	\$2,904.71	\$15,436.83	\$20,805.78	\$15,967.78	\$0.00	\$300,425.97
UnitedHealthcare Community Plan	10	\$58,616.81	\$3,367.21	\$198,408.18	\$594.51	\$0.00	\$8,075.24	\$5,399.32	\$26,212.76	\$7,819.34	\$0.00	\$308,493.38
Health Choice Arizona	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Care 1st Health Plan Arizona, Inc.	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mercy Care Plan	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UnitedHealthcare Community Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Care 1st Health Plan Arizona, Inc.	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Choice Arizona	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Maricopa Health Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mercy Care Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Phoenix Health Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Net of Arizona, Inc.	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
University Family Care	14	\$159,551.55	\$7,793.64	\$369,981.42	\$12,431.36	\$32,375.74	\$25,122.56	\$135,746.37	\$220,693.65	\$79,016.83	\$0.00	\$1,042,713.14
UnitedHealthcare Community Plan	14	\$234,197.24	\$18,150.15	\$573,543.89	\$47,301.39	\$50,101.09	\$33,109.08	\$125,363.34	\$326,014.28	\$58,040.47	\$0.00	\$1,465,820.94
Total Prospective		\$1,542,177.81	\$154,999.16	\$4,238,481.02	\$299,217.43	\$398,254.59	\$189,918.24	\$1,131,647.69	\$2,830,004.99	\$620,424.41	\$0.00	\$11,405,125.34

PPC Rural Hospital Payments including Premium Tax

MCO	GSA	TANF/KC < 1, M/F	TANF/KC 1-13, M/F	TANF/KC 14-44, F	TANF/KC 14-44, M	TANF 45+, M/F	SSI W/Med	SSI WO MED	Adults <= 106%	Adults > 106%	Delivery Supp	Total
UnitedHealthcare Community Plan	02	\$0.00	\$0.00	\$0.00	\$1,844.81	\$0.00	\$0.00	\$0.00	\$1,218.52	\$0.00	\$0.00	\$3,063.33
University Family Care	02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,004.46	\$0.00	\$0.00	\$7,004.46
UnitedHealthcare Community Plan	04	\$7,728.57	\$956.52	\$11,470.38	\$2,415.63	\$1,103.23	\$37.43	\$0.00	\$23,505.62	\$13,516.88	\$0.00	\$60,734.28
Health Choice Arizona	04	\$29,423.91	\$1,343.14	\$21,791.39	\$0.00	\$4,794.99	\$1,527.88	\$3,410.82	\$154,490.85	\$21,759.76	\$0.00	\$238,542.75
UnitedHealthcare Community Plan	06	\$15,977.87	\$0.00	\$7,698.12	\$1,397.27	\$0.00	\$6.99	\$8,703.24	\$125,547.19	\$53,076.46	\$0.00	\$212,407.14
University Family Care	06	\$16,031.69	\$0.00	\$21,207.53	\$3,339.43	\$5,291.77	\$670.07	\$2,348.25	\$74,263.77	\$17,028.57	\$0.00	\$140,181.08
University Family Care	08	\$4,949.01	\$0.00	\$7,012.78	\$3,362.45	\$0.00	\$0.00	\$0.00	\$27,628.54	\$1,617.62	\$0.00	\$44,570.40
Health Choice Arizona	08	\$9,805.13	\$0.00	\$6,567.55	\$7,193.34	\$0.00	\$1,495.25	\$1,314.34	\$55,091.05	\$10,514.96	\$0.00	\$91,981.61
University Family Care	10	\$10,665.72	\$0.00	\$1,848.34	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,553.39	\$0.00	\$16,067.44
UnitedHealthcare Community Plan	10	\$12,151.23	\$0.00	\$3,942.96	\$0.00	\$978.81	\$0.00	\$0.00	\$2,431.94	\$0.00	\$0.00	\$19,504.94
Health Choice Arizona	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Care 1st Health Plan Arizona, Inc.	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mercy Care Plan	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UnitedHealthcare Community Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Care 1st Health Plan Arizona, Inc.	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Choice Arizona	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Maricopa Health Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mercy Care Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Phoenix Health Plan	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Net of Arizona, Inc.	12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
University Family Care	14	\$6,467.50	\$0.00	\$2,601.38	\$0.00	\$1,526.00	\$0.00	\$3,321.26	\$26,921.75	\$9,597.24	\$0.00	\$50,435.14
UnitedHealthcare Community Plan	14	\$18,667.15	\$0.00	\$7,018.64	\$9,390.55	\$0.00	\$490.59	\$5,657.74	\$73,131.55	\$2,250.35	\$0.00	\$116,606.57
Total PPC		\$131,867.78	\$2,299.66	\$91,159.07	\$28,943.47	\$13,694.81	\$4,228.21	\$24,755.66	\$571,235.25	\$132,915.24	\$0.00	\$1,001,099.15

Total Prospective Plus PPC	\$1,674,045.59	\$157,298.82	\$4,329,640.09	\$328,160.90	\$411,949.40	\$194,146.44	\$1,156,403.35	\$3,401,240.25	\$753,339.65	\$0.00	\$12,406,224.49
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Appendix II: CYE 18 Capitation Rates With and Without Rural Hospital Payments

TANF/KidsCare < 1, M/F

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$383.22	\$0.02	\$383.23	\$391.89	\$0.02	\$391.91	\$417.17	\$0.00	\$417.17	\$447.28	\$0.00	\$447.28
University Family Care	02	\$378.64	\$0.00	\$378.64	\$387.30	\$0.00	\$387.30	\$417.17	\$0.00	\$417.17	\$447.28	\$0.00	\$447.28
UnitedHealthcare Community Plan	04	\$392.47	\$13.10	\$405.57	\$396.14	\$13.10	\$409.24	\$404.99	\$16.18	\$421.17	\$417.09	\$16.18	\$433.27
Health Choice Arizona	04	\$402.41	\$17.78	\$420.19	\$406.32	\$17.78	\$424.11	\$404.99	\$39.03	\$444.02	\$417.09	\$39.03	\$456.12
UnitedHealthcare Community Plan	06	\$384.00	\$19.29	\$403.29	\$384.50	\$19.29	\$403.80	\$474.17	\$35.63	\$509.80	\$452.87	\$35.63	\$488.50
University Family Care	06	\$392.07	\$18.30	\$410.37	\$392.62	\$18.30	\$410.92	\$474.17	\$68.26	\$542.43	\$452.87	\$68.26	\$521.13
University Family Care	08	\$424.01	\$8.61	\$432.63	\$426.13	\$8.61	\$434.74	\$265.26	\$13.14	\$278.40	\$273.69	\$13.14	\$286.84
Health Choice Arizona	08	\$426.46	\$9.60	\$436.06	\$428.61	\$9.60	\$438.21	\$265.26	\$15.32	\$280.58	\$273.69	\$15.32	\$289.01
University Family Care	10	\$421.11	\$2.74	\$423.85	\$429.18	\$2.74	\$431.93	\$410.58	\$19.29	\$429.87	\$448.25	\$19.29	\$467.54
UnitedHealthcare Community Plan	10	\$416.95	\$1.95	\$418.90	\$424.78	\$1.95	\$426.72	\$410.58	\$10.57	\$421.15	\$448.25	\$10.57	\$458.81
Health Choice Arizona	10	\$462.98	\$0.00	\$462.98	\$472.29	\$0.00	\$472.29	\$410.58	\$0.00	\$410.58	\$448.25	\$0.00	\$448.25
Care 1st Health Plan Arizona, Inc.	10	\$439.52	\$0.00	\$439.52	\$448.00	\$0.00	\$448.00	\$410.58	\$0.00	\$410.58	\$448.25	\$0.00	\$448.25
Mercy Care Plan	10	\$390.24	\$0.00	\$390.24	\$397.32	\$0.00	\$397.32	\$410.58	\$0.00	\$410.58	\$448.25	\$0.00	\$448.25
UnitedHealthcare Community Plan	12	\$464.64	\$0.00	\$464.64	\$469.05	\$0.00	\$469.05	\$406.46	\$0.00	\$406.46	\$426.92	\$0.00	\$426.92
Care 1st Health Plan Arizona, Inc.	12	\$446.14	\$0.00	\$446.14	\$450.24	\$0.00	\$450.24	\$406.46	\$0.00	\$406.46	\$426.92	\$0.00	\$426.92
Health Choice Arizona	12	\$464.74	\$0.00	\$464.74	\$469.19	\$0.00	\$469.19	\$406.46	\$0.00	\$406.46	\$426.92	\$0.00	\$426.92
Mercy Care Plan	12	\$453.54	\$0.00	\$453.54	\$457.81	\$0.00	\$457.81	\$406.46	\$0.00	\$406.46	\$426.92	\$0.00	\$426.92
Health Net of Arizona, Inc.	12	\$441.10	\$0.00	\$441.10	\$445.19	\$0.00	\$445.19	\$406.46	\$0.00	\$406.46	\$426.92	\$0.00	\$426.92
University Family Care	14	\$510.43	\$24.21	\$534.63	\$519.94	\$24.21	\$544.15	\$726.86	\$29.13	\$755.98	\$819.54	\$29.13	\$848.67
UnitedHealthcare Community Plan	14	\$480.72	\$27.56	\$508.28	\$489.05	\$27.56	\$516.61	\$726.86	\$96.64	\$823.49	\$819.54	\$96.64	\$916.18

TANF/Kidscare 1-13, M/F

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$121.81	\$0.00	\$121.81	\$122.02	\$0.00	\$122.02	\$30.99	\$0.00	\$30.99	\$31.67	\$0.00	\$31.67
University Family Care	02	\$109.66	\$0.00	\$109.66	\$109.84	\$0.00	\$109.84	\$30.99	\$0.00	\$30.99	\$31.67	\$0.00	\$31.67
UnitedHealthcare Community Plan	04	\$97.79	\$0.25	\$98.03	\$97.94	\$0.25	\$98.19	\$59.46	\$0.32	\$59.77	\$59.46	\$0.32	\$59.77
Health Choice Arizona	04	\$98.58	\$0.16	\$98.74	\$98.74	\$0.16	\$98.90	\$59.46	\$0.27	\$59.72	\$59.46	\$0.27	\$59.73
UnitedHealthcare Community Plan	06	\$115.74	\$0.22	\$115.96	\$116.01	\$0.22	\$116.23	\$47.74	\$0.00	\$47.74	\$48.81	\$0.00	\$48.81
University Family Care	06	\$111.80	\$0.20	\$112.00	\$112.06	\$0.20	\$112.26	\$47.74	\$0.00	\$47.74	\$48.81	\$0.00	\$48.81
University Family Care	08	\$101.29	\$0.02	\$101.30	\$101.55	\$0.02	\$101.57	\$51.57	\$0.00	\$51.57	\$53.54	\$0.00	\$53.54
Health Choice Arizona	08	\$102.41	\$0.04	\$102.45	\$102.68	\$0.04	\$102.73	\$51.57	\$0.00	\$51.57	\$53.54	\$0.00	\$53.54
University Family Care	10	\$108.35	\$0.04	\$108.39	\$108.68	\$0.04	\$108.71	\$53.32	\$0.00	\$53.32	\$54.64	\$0.00	\$54.64
UnitedHealthcare Community Plan	10	\$113.33	\$0.01	\$113.34	\$113.67	\$0.01	\$113.68	\$53.32	\$0.00	\$53.32	\$54.64	\$0.00	\$54.64
Health Choice Arizona	10	\$107.49	\$0.00	\$107.49	\$107.81	\$0.00	\$107.81	\$53.32	\$0.00	\$53.32	\$54.64	\$0.00	\$54.64
Care 1st Health Plan Arizona, Inc.	10	\$101.92	\$0.00	\$101.92	\$102.22	\$0.00	\$102.22	\$53.32	\$0.00	\$53.32	\$54.64	\$0.00	\$54.64
Mercy Care Plan	10	\$109.94	\$0.00	\$109.94	\$110.26	\$0.00	\$110.26	\$53.32	\$0.00	\$53.32	\$54.64	\$0.00	\$54.64
UnitedHealthcare Community Plan	12	\$116.56	\$0.00	\$116.56	\$116.88	\$0.00	\$116.88	\$51.15	\$0.00	\$51.15	\$52.40	\$0.00	\$52.40
Care 1st Health Plan Arizona, Inc.	12	\$108.06	\$0.00	\$108.06	\$108.34	\$0.00	\$108.34	\$51.15	\$0.00	\$51.15	\$52.40	\$0.00	\$52.40
Health Choice Arizona	12	\$109.79	\$0.00	\$109.79	\$110.08	\$0.00	\$110.08	\$51.15	\$0.00	\$51.15	\$52.40	\$0.00	\$52.40
Mercy Care Plan	12	\$114.55	\$0.00	\$114.55	\$114.86	\$0.00	\$114.86	\$51.15	\$0.00	\$51.15	\$52.40	\$0.00	\$52.40
Health Net of Arizona, Inc.	12	\$102.22	\$0.00	\$102.22	\$102.48	\$0.00	\$102.48	\$51.15	\$0.00	\$51.15	\$52.40	\$0.00	\$52.40
University Family Care	14	\$114.57	\$0.10	\$114.66	\$114.85	\$0.10	\$114.95	\$58.36	\$0.00	\$58.36	\$59.30	\$0.00	\$59.30
UnitedHealthcare Community Plan	14	\$116.13	\$0.21	\$116.34	\$116.42	\$0.21	\$116.63	\$58.36	\$0.00	\$58.36	\$59.30	\$0.00	\$59.30

TANF/Kidscore 14-44, F

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$240.33	\$0.13	\$240.46	\$243.49	\$0.13	\$243.62	\$172.24	\$0.00	\$172.24	\$176.22	\$0.00	\$176.22
University Family Care	02	\$212.93	\$0.00	\$212.93	\$215.72	\$0.00	\$215.72	\$172.24	\$0.00	\$172.24	\$176.22	\$0.00	\$176.22
UnitedHealthcare Community Plan	04	\$203.57	\$5.21	\$208.78	\$205.02	\$5.21	\$210.22	\$173.39	\$5.67	\$179.06	\$174.54	\$5.67	\$180.20
Health Choice Arizona	04	\$213.99	\$7.76	\$221.76	\$215.54	\$7.76	\$223.31	\$173.39	\$6.67	\$180.06	\$174.54	\$6.67	\$181.20
UnitedHealthcare Community Plan	06	\$250.64	\$9.32	\$259.97	\$250.65	\$9.32	\$259.98	\$206.68	\$4.96	\$211.64	\$205.29	\$4.96	\$210.25
University Family Care	06	\$247.48	\$9.67	\$257.14	\$247.49	\$9.67	\$257.16	\$206.68	\$31.56	\$238.24	\$205.29	\$31.56	\$236.85
University Family Care	08	\$249.67	\$3.36	\$253.04	\$250.05	\$3.36	\$253.41	\$169.08	\$4.04	\$173.12	\$169.15	\$4.04	\$173.19
Health Choice Arizona	08	\$257.28	\$4.16	\$261.44	\$257.67	\$4.16	\$261.83	\$169.08	\$2.73	\$171.81	\$169.15	\$2.73	\$171.88
University Family Care	10	\$228.68	\$1.57	\$230.26	\$231.43	\$1.57	\$233.00	\$197.03	\$0.87	\$197.90	\$200.52	\$0.87	\$201.38
UnitedHealthcare Community Plan	10	\$246.19	\$1.02	\$247.21	\$249.14	\$1.02	\$250.17	\$197.03	\$0.85	\$197.88	\$200.52	\$0.85	\$201.36
Health Choice Arizona	10	\$227.62	\$0.00	\$227.62	\$230.35	\$0.00	\$230.35	\$197.03	\$0.00	\$197.03	\$200.52	\$0.00	\$200.52
Care 1st Health Plan Arizona, Inc.	10	\$222.56	\$0.00	\$222.56	\$225.20	\$0.00	\$225.20	\$197.03	\$0.00	\$197.03	\$200.52	\$0.00	\$200.52
Mercy Care Plan	10	\$235.84	\$0.00	\$235.84	\$238.66	\$0.00	\$238.66	\$197.03	\$0.00	\$197.03	\$200.52	\$0.00	\$200.52
UnitedHealthcare Community Plan	12	\$270.74	\$0.00	\$270.74	\$271.93	\$0.00	\$271.93	\$207.71	\$0.00	\$207.71	\$209.32	\$0.00	\$209.32
Care 1st Health Plan Arizona, Inc.	12	\$250.06	\$0.00	\$250.06	\$251.15	\$0.00	\$251.15	\$207.71	\$0.00	\$207.71	\$209.32	\$0.00	\$209.32
Health Choice Arizona	12	\$251.21	\$0.00	\$251.21	\$252.30	\$0.00	\$252.30	\$207.71	\$0.00	\$207.71	\$209.32	\$0.00	\$209.32
Mercy Care Plan	12	\$266.79	\$0.00	\$266.79	\$267.97	\$0.00	\$267.97	\$207.71	\$0.00	\$207.71	\$209.32	\$0.00	\$209.32
Health Net of Arizona, Inc.	12	\$234.27	\$0.00	\$234.27	\$235.28	\$0.00	\$235.28	\$207.71	\$0.00	\$207.71	\$209.32	\$0.00	\$209.32
University Family Care	14	\$256.14	\$7.84	\$263.98	\$258.44	\$7.84	\$266.29	\$127.34	\$3.20	\$130.55	\$129.29	\$3.20	\$132.50
UnitedHealthcare Community Plan	14	\$246.03	\$10.91	\$256.94	\$248.21	\$10.91	\$259.12	\$127.34	\$7.20	\$134.54	\$129.29	\$7.20	\$136.49

TANF/Kidscare 14-44, M

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$144.10	\$0.01	\$144.11	\$144.62	\$0.01	\$144.64	\$199.37	\$1.39	\$200.76	\$204.86	\$1.39	\$206.25
University Family Care	02	\$120.93	\$0.05	\$120.98	\$121.32	\$0.05	\$121.37	\$199.37	\$0.00	\$199.37	\$204.86	\$0.00	\$204.86
UnitedHealthcare Community Plan	04	\$135.03	\$0.77	\$135.80	\$135.31	\$0.77	\$136.08	\$130.48	\$1.97	\$132.45	\$131.74	\$1.97	\$133.71
Health Choice Arizona	04	\$144.05	\$0.73	\$144.77	\$144.35	\$0.73	\$145.08	\$130.48	\$0.00	\$130.48	\$131.74	\$0.00	\$131.74
UnitedHealthcare Community Plan	06	\$201.14	\$0.97	\$202.12	\$201.68	\$0.97	\$202.66	\$182.57	\$1.61	\$184.18	\$182.45	\$1.61	\$184.06
University Family Care	06	\$201.21	\$2.71	\$203.92	\$201.75	\$2.71	\$204.46	\$182.57	\$8.17	\$190.73	\$182.45	\$8.17	\$190.61
University Family Care	08	\$152.27	\$0.76	\$153.03	\$152.80	\$0.76	\$153.55	\$143.44	\$3.24	\$146.68	\$144.30	\$3.24	\$147.54
Health Choice Arizona	08	\$153.08	\$0.69	\$153.77	\$153.60	\$0.69	\$154.30	\$143.44	\$5.22	\$148.66	\$144.30	\$5.22	\$149.52
University Family Care	10	\$148.81	\$0.00	\$148.81	\$150.08	\$0.00	\$150.08	\$175.80	\$0.00	\$175.80	\$182.02	\$0.00	\$182.02
UnitedHealthcare Community Plan	10	\$152.88	\$0.01	\$152.89	\$154.18	\$0.01	\$154.19	\$175.80	\$0.00	\$175.80	\$182.02	\$0.00	\$182.02
Health Choice Arizona	10	\$146.60	\$0.00	\$146.60	\$147.85	\$0.00	\$147.85	\$175.80	\$0.00	\$175.80	\$182.02	\$0.00	\$182.02
Care 1st Health Plan Arizona, Inc.	10	\$132.91	\$0.00	\$132.91	\$134.01	\$0.00	\$134.01	\$175.80	\$0.00	\$175.80	\$182.02	\$0.00	\$182.02
Mercy Care Plan	10	\$139.34	\$0.00	\$139.34	\$140.51	\$0.00	\$140.51	\$175.80	\$0.00	\$175.80	\$182.02	\$0.00	\$182.02
UnitedHealthcare Community Plan	12	\$175.90	\$0.00	\$175.90	\$176.20	\$0.00	\$176.20	\$154.52	\$0.00	\$154.52	\$156.59	\$0.00	\$156.59
Care 1st Health Plan Arizona, Inc.	12	\$155.61	\$0.00	\$155.61	\$155.86	\$0.00	\$155.86	\$154.52	\$0.00	\$154.52	\$156.59	\$0.00	\$156.59
Health Choice Arizona	12	\$163.68	\$0.00	\$163.68	\$163.95	\$0.00	\$163.95	\$154.52	\$0.00	\$154.52	\$156.59	\$0.00	\$156.59
Mercy Care Plan	12	\$173.63	\$0.00	\$173.63	\$173.93	\$0.00	\$173.93	\$154.52	\$0.00	\$154.52	\$156.59	\$0.00	\$156.59
Health Net of Arizona, Inc.	12	\$150.85	\$0.00	\$150.85	\$151.08	\$0.00	\$151.08	\$154.52	\$0.00	\$154.52	\$156.59	\$0.00	\$156.59
University Family Care	14	\$176.41	\$0.47	\$176.88	\$176.74	\$0.47	\$177.21	\$96.02	\$0.00	\$96.02	\$98.40	\$0.00	\$98.40
UnitedHealthcare Community Plan	14	\$171.15	\$1.69	\$172.84	\$171.33	\$1.69	\$173.02	\$96.02	\$13.66	\$109.68	\$98.40	\$13.66	\$112.06

TANF 45+, M/F

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$390.79	\$0.16	\$390.95	\$390.67	\$0.16	\$390.82	\$182.90	\$0.00	\$182.90	\$191.84	\$0.00	\$191.84
University Family Care	02	\$324.21	\$0.00	\$324.21	\$324.04	\$0.00	\$324.04	\$182.90	\$0.00	\$182.90	\$191.84	\$0.00	\$191.84
UnitedHealthcare Community Plan	04	\$360.39	\$2.38	\$362.78	\$360.46	\$2.38	\$362.84	\$233.10	\$2.15	\$235.25	\$235.01	\$2.15	\$237.15
Health Choice Arizona	04	\$388.42	\$2.20	\$390.62	\$388.51	\$2.20	\$390.71	\$233.10	\$11.02	\$244.13	\$235.01	\$11.02	\$246.03
UnitedHealthcare Community Plan	06	\$444.39	\$4.79	\$449.18	\$444.31	\$4.79	\$449.09	\$372.68	\$0.00	\$372.68	\$367.18	\$0.00	\$367.18
University Family Care	06	\$400.93	\$6.10	\$407.03	\$400.85	\$6.10	\$406.95	\$372.68	\$41.93	\$414.61	\$367.18	\$41.93	\$409.11
University Family Care	08	\$515.75	\$4.40	\$520.15	\$510.84	\$4.40	\$515.24	\$179.40	\$0.00	\$179.40	\$180.12	\$0.00	\$180.12
Health Choice Arizona	08	\$547.74	\$2.07	\$549.81	\$542.52	\$2.07	\$544.59	\$179.40	\$0.00	\$179.40	\$180.12	\$0.00	\$180.12
University Family Care	10	\$406.64	\$0.33	\$406.97	\$407.68	\$0.33	\$408.01	\$165.72	\$0.00	\$165.72	\$167.76	\$0.00	\$167.76
UnitedHealthcare Community Plan	10	\$422.52	\$0.00	\$422.52	\$423.61	\$0.00	\$423.61	\$165.72	\$1.07	\$166.79	\$167.76	\$1.07	\$168.83
Health Choice Arizona	10	\$376.44	\$0.00	\$376.44	\$377.37	\$0.00	\$377.37	\$165.72	\$0.00	\$165.72	\$167.76	\$0.00	\$167.76
Care 1st Health Plan Arizona, Inc.	10	\$353.30	\$0.00	\$353.30	\$354.14	\$0.00	\$354.14	\$165.72	\$0.00	\$165.72	\$167.76	\$0.00	\$167.76
Mercy Care Plan	10	\$397.57	\$0.00	\$397.57	\$398.57	\$0.00	\$398.57	\$165.72	\$0.00	\$165.72	\$167.76	\$0.00	\$167.76
UnitedHealthcare Community Plan	12	\$481.38	\$0.00	\$481.38	\$480.45	\$0.00	\$480.45	\$287.86	\$0.00	\$287.86	\$289.60	\$0.00	\$289.60
Care 1st Health Plan Arizona, Inc.	12	\$415.12	\$0.00	\$415.12	\$414.31	\$0.00	\$414.31	\$287.86	\$0.00	\$287.86	\$289.60	\$0.00	\$289.60
Health Choice Arizona	12	\$457.40	\$0.00	\$457.40	\$456.50	\$0.00	\$456.50	\$287.86	\$0.00	\$287.86	\$289.60	\$0.00	\$289.60
Mercy Care Plan	12	\$490.09	\$0.00	\$490.09	\$489.14	\$0.00	\$489.14	\$287.86	\$0.00	\$287.86	\$289.60	\$0.00	\$289.60
Health Net of Arizona, Inc.	12	\$362.38	\$0.00	\$362.38	\$361.66	\$0.00	\$361.66	\$287.86	\$0.00	\$287.86	\$289.60	\$0.00	\$289.60
University Family Care	14	\$482.90	\$3.03	\$485.94	\$485.54	\$3.03	\$488.57	\$118.29	\$12.30	\$130.59	\$119.72	\$12.30	\$132.02
UnitedHealthcare Community Plan	14	\$465.35	\$4.22	\$469.56	\$467.83	\$4.22	\$472.05	\$118.29	\$0.00	\$118.29	\$119.72	\$0.00	\$119.72

SSI With Medicare

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$169.18	\$0.14	\$169.31	\$170.01	\$0.14	\$170.15	\$167.28	\$0.00	\$167.28	\$168.55	\$0.00	\$168.55
University Family Care	02	\$144.72	\$0.06	\$144.78	\$145.43	\$0.06	\$145.48	\$167.28	\$0.00	\$167.28	\$168.55	\$0.00	\$168.55
UnitedHealthcare Community Plan	04	\$124.03	\$0.67	\$124.71	\$124.35	\$0.67	\$125.03	\$59.92	\$0.05	\$59.97	\$60.42	\$0.05	\$60.47
Health Choice Arizona	04	\$128.55	\$0.17	\$128.73	\$128.89	\$0.17	\$129.06	\$59.92	\$1.81	\$61.73	\$60.42	\$1.81	\$62.23
UnitedHealthcare Community Plan	06	\$166.07	\$0.79	\$166.87	\$165.84	\$0.79	\$166.63	\$81.81	\$0.01	\$81.82	\$81.53	\$0.01	\$81.54
University Family Care	06	\$152.33	\$0.19	\$152.52	\$152.12	\$0.19	\$152.31	\$81.81	\$3.83	\$85.63	\$81.53	\$3.83	\$85.36
University Family Care	08	\$139.15	\$1.05	\$140.20	\$139.17	\$1.05	\$140.22	\$93.86	\$0.00	\$93.86	\$93.81	\$0.00	\$93.81
Health Choice Arizona	08	\$147.84	\$0.67	\$148.51	\$147.86	\$0.67	\$148.53	\$93.86	\$2.59	\$96.45	\$93.81	\$2.59	\$96.40
University Family Care	10	\$121.51	\$0.06	\$121.57	\$122.00	\$0.06	\$122.06	\$92.39	\$0.00	\$92.39	\$92.70	\$0.00	\$92.70
UnitedHealthcare Community Plan	10	\$125.45	\$0.08	\$125.53	\$125.96	\$0.08	\$126.04	\$92.39	\$0.00	\$92.39	\$92.70	\$0.00	\$92.70
Health Choice Arizona	10	\$117.27	\$0.00	\$117.27	\$117.74	\$0.00	\$117.74	\$92.39	\$0.00	\$92.39	\$92.70	\$0.00	\$92.70
Care 1st Health Plan Arizona, Inc.	10	\$102.30	\$0.00	\$102.30	\$102.68	\$0.00	\$102.68	\$92.39	\$0.00	\$92.39	\$92.70	\$0.00	\$92.70
Mercy Care Plan	10	\$124.94	\$0.00	\$124.94	\$125.45	\$0.00	\$125.45	\$92.39	\$0.00	\$92.39	\$92.70	\$0.00	\$92.70
UnitedHealthcare Community Plan	12	\$159.49	\$0.00	\$159.49	\$159.70	\$0.00	\$159.70	\$111.20	\$0.00	\$111.20	\$111.54	\$0.00	\$111.54
Care 1st Health Plan Arizona, Inc.	12	\$134.76	\$0.00	\$134.76	\$134.93	\$0.00	\$134.93	\$111.20	\$0.00	\$111.20	\$111.54	\$0.00	\$111.54
Health Choice Arizona	12	\$147.88	\$0.00	\$147.88	\$148.08	\$0.00	\$148.08	\$111.20	\$0.00	\$111.20	\$111.54	\$0.00	\$111.54
Mercy Care Plan	12	\$165.54	\$0.00	\$165.54	\$165.77	\$0.00	\$165.77	\$111.20	\$0.00	\$111.20	\$111.54	\$0.00	\$111.54
Health Net of Arizona, Inc.	12	\$118.78	\$0.00	\$118.78	\$118.92	\$0.00	\$118.92	\$111.20	\$0.00	\$111.20	\$111.54	\$0.00	\$111.54
University Family Care	14	\$151.72	\$1.48	\$153.20	\$152.28	\$1.48	\$153.76	\$47.48	\$0.00	\$47.48	\$47.55	\$0.00	\$47.55
UnitedHealthcare Community Plan	14	\$154.37	\$1.03	\$155.40	\$154.94	\$1.03	\$155.97	\$47.48	\$1.47	\$48.95	\$47.55	\$1.47	\$49.02

SSI Without Medicare

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$1,009.51	\$1.50	\$1,011.00	\$1,009.06	\$1.50	\$1,010.56	\$975.99	\$0.00	\$975.99	\$1,059.56	\$0.00	\$1,059.56
University Family Care	02	\$935.84	\$0.00	\$935.84	\$935.29	\$0.00	\$935.29	\$975.99	\$0.00	\$975.99	\$1,059.56	\$0.00	\$1,059.56
UnitedHealthcare Community Plan	04	\$933.68	\$3.38	\$937.06	\$933.56	\$3.38	\$936.93	\$456.17	\$0.00	\$456.17	\$457.62	\$0.00	\$457.62
Health Choice Arizona	04	\$1,007.26	\$9.02	\$1,016.27	\$1,007.31	\$9.02	\$1,016.33	\$456.17	\$5.24	\$461.42	\$457.62	\$5.24	\$462.87
UnitedHealthcare Community Plan	06	\$1,240.63	\$16.43	\$1,257.06	\$1,230.68	\$16.43	\$1,247.11	\$417.20	\$47.20	\$464.40	\$420.59	\$47.20	\$467.78
University Family Care	06	\$1,103.80	\$16.84	\$1,120.64	\$1,094.83	\$16.84	\$1,111.67	\$417.20	\$10.64	\$427.84	\$420.59	\$10.64	\$431.22
University Family Care	08	\$1,046.82	\$5.05	\$1,051.87	\$1,038.04	\$5.05	\$1,043.09	\$387.92	\$0.00	\$387.92	\$388.29	\$0.00	\$388.29
Health Choice Arizona	08	\$965.75	\$6.88	\$972.63	\$957.61	\$6.88	\$964.50	\$387.92	\$3.20	\$391.12	\$388.29	\$3.20	\$391.49
University Family Care	10	\$1,092.48	\$0.69	\$1,093.18	\$1,096.32	\$0.69	\$1,097.01	\$473.40	\$0.00	\$473.40	\$485.67	\$0.00	\$485.67
UnitedHealthcare Community Plan	10	\$1,032.58	\$0.15	\$1,032.73	\$1,035.94	\$0.15	\$1,036.09	\$473.40	\$0.00	\$473.40	\$485.67	\$0.00	\$485.67
Health Choice Arizona	10	\$959.24	\$0.00	\$959.24	\$962.14	\$0.00	\$962.14	\$473.40	\$0.00	\$473.40	\$485.67	\$0.00	\$485.67
Care 1st Health Plan Arizona, Inc.	10	\$908.08	\$0.00	\$908.08	\$910.58	\$0.00	\$910.58	\$473.40	\$0.00	\$473.40	\$485.67	\$0.00	\$485.67
Mercy Care Plan	10	\$998.64	\$0.00	\$998.64	\$1,001.79	\$0.00	\$1,001.79	\$473.40	\$0.00	\$473.40	\$485.67	\$0.00	\$485.67
UnitedHealthcare Community Plan	12	\$1,074.01	\$0.00	\$1,074.01	\$1,070.24	\$0.00	\$1,070.24	\$526.41	\$0.00	\$526.41	\$534.33	\$0.00	\$534.33
Care 1st Health Plan Arizona, Inc.	12	\$974.76	\$0.00	\$974.76	\$971.13	\$0.00	\$971.13	\$526.41	\$0.00	\$526.41	\$534.33	\$0.00	\$534.33
Health Choice Arizona	12	\$1,029.77	\$0.00	\$1,029.77	\$1,026.05	\$0.00	\$1,026.05	\$526.41	\$0.00	\$526.41	\$534.33	\$0.00	\$534.33
Mercy Care Plan	12	\$1,104.91	\$0.00	\$1,104.91	\$1,101.10	\$0.00	\$1,101.10	\$526.41	\$0.00	\$526.41	\$534.33	\$0.00	\$534.33
Health Net of Arizona, Inc.	12	\$948.47	\$0.00	\$948.47	\$944.87	\$0.00	\$944.87	\$526.41	\$0.00	\$526.41	\$534.33	\$0.00	\$534.33
University Family Care	14	\$1,072.08	\$13.09	\$1,085.17	\$1,076.25	\$13.09	\$1,089.34	\$401.91	\$30.43	\$432.33	\$420.70	\$30.43	\$451.12
UnitedHealthcare Community Plan	14	\$1,044.69	\$11.82	\$1,056.51	\$1,048.65	\$11.82	\$1,060.47	\$401.91	\$22.60	\$424.50	\$420.70	\$22.60	\$443.29

Adults <= 106% FPL

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$459.79	\$0.35	\$460.15	\$459.71	\$0.35	\$460.06	\$694.81	\$0.33	\$695.14	\$718.20	\$0.33	\$718.54
University Family Care	02	\$453.31	\$0.62	\$453.93	\$453.22	\$0.62	\$453.84	\$694.81	\$7.52	\$702.32	\$718.20	\$7.52	\$725.72
UnitedHealthcare Community Plan	04	\$436.23	\$2.10	\$438.33	\$435.23	\$2.10	\$437.34	\$628.10	\$5.00	\$633.11	\$636.93	\$5.00	\$641.93
Health Choice Arizona	04	\$466.17	\$3.73	\$469.90	\$465.13	\$3.73	\$468.86	\$628.10	\$25.55	\$653.66	\$636.93	\$25.55	\$662.48
UnitedHealthcare Community Plan	06	\$505.64	\$6.31	\$511.95	\$500.37	\$6.31	\$506.68	\$712.82	\$39.39	\$752.21	\$700.32	\$39.39	\$739.71
University Family Care	06	\$487.35	\$6.81	\$494.15	\$482.24	\$6.81	\$489.04	\$712.82	\$55.59	\$768.41	\$700.32	\$55.59	\$755.91
University Family Care	08	\$481.64	\$3.03	\$484.67	\$478.77	\$3.03	\$481.80	\$642.13	\$13.37	\$655.50	\$643.47	\$13.37	\$656.84
Health Choice Arizona	08	\$496.01	\$3.97	\$499.99	\$493.06	\$3.97	\$497.03	\$642.13	\$14.44	\$656.58	\$643.47	\$14.44	\$657.91
University Family Care	10	\$415.67	\$0.15	\$415.82	\$417.13	\$0.15	\$417.28	\$503.20	\$0.00	\$503.20	\$514.99	\$0.00	\$514.99
UnitedHealthcare Community Plan	10	\$408.23	\$0.12	\$408.35	\$409.63	\$0.12	\$409.76	\$503.20	\$0.27	\$503.47	\$514.99	\$0.27	\$515.26
Health Choice Arizona	10	\$402.66	\$0.00	\$402.66	\$404.06	\$0.00	\$404.06	\$503.20	\$0.00	\$503.20	\$514.99	\$0.00	\$514.99
Care 1st Health Plan Arizona, Inc.	10	\$374.44	\$0.00	\$374.44	\$375.67	\$0.00	\$375.67	\$503.20	\$0.00	\$503.20	\$514.99	\$0.00	\$514.99
Mercy Care Plan	10	\$401.27	\$0.00	\$401.27	\$402.64	\$0.00	\$402.64	\$503.20	\$0.00	\$503.20	\$514.99	\$0.00	\$514.99
UnitedHealthcare Community Plan	12	\$525.89	\$0.00	\$525.89	\$524.33	\$0.00	\$524.33	\$772.33	\$0.00	\$772.33	\$781.41	\$0.00	\$781.41
Care 1st Health Plan Arizona, Inc.	12	\$499.51	\$0.00	\$499.51	\$498.02	\$0.00	\$498.02	\$772.33	\$0.00	\$772.33	\$781.41	\$0.00	\$781.41
Health Choice Arizona	12	\$518.81	\$0.00	\$518.81	\$517.26	\$0.00	\$517.26	\$772.33	\$0.00	\$772.33	\$781.41	\$0.00	\$781.41
Mercy Care Plan	12	\$556.33	\$0.00	\$556.33	\$554.70	\$0.00	\$554.70	\$772.33	\$0.00	\$772.33	\$781.41	\$0.00	\$781.41
Health Net of Arizona, Inc.	12	\$460.48	\$0.00	\$460.48	\$459.07	\$0.00	\$459.07	\$772.33	\$0.00	\$772.33	\$781.41	\$0.00	\$781.41
University Family Care	14	\$462.86	\$4.59	\$467.44	\$463.73	\$4.59	\$468.32	\$505.08	\$22.85	\$527.93	\$522.16	\$22.85	\$545.00
UnitedHealthcare Community Plan	14	\$459.75	\$5.34	\$465.08	\$460.60	\$5.34	\$465.93	\$505.08	\$35.55	\$540.63	\$522.16	\$35.55	\$557.70

Adults > 106% FPL

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$312.16	\$0.12	\$312.28	\$312.47	\$0.12	\$312.60	\$363.89	\$0.00	\$363.89	\$372.27	\$0.00	\$372.27
University Family Care	02	\$317.79	\$0.11	\$317.90	\$318.12	\$0.11	\$318.23	\$363.89	\$0.00	\$363.89	\$372.27	\$0.00	\$372.27
UnitedHealthcare Community Plan	04	\$339.79	\$2.15	\$341.94	\$338.18	\$2.15	\$340.33	\$420.66	\$11.86	\$432.52	\$421.74	\$11.86	\$433.60
Health Choice Arizona	04	\$340.84	\$2.87	\$343.71	\$339.23	\$2.87	\$342.09	\$420.66	\$16.06	\$436.72	\$421.74	\$16.06	\$437.80
UnitedHealthcare Community Plan	06	\$406.18	\$5.71	\$411.89	\$400.70	\$5.71	\$406.41	\$390.83	\$54.38	\$445.21	\$383.74	\$54.38	\$438.11
University Family Care	06	\$396.96	\$3.93	\$400.89	\$391.61	\$3.93	\$395.54	\$390.83	\$61.17	\$452.00	\$383.74	\$61.17	\$444.90
University Family Care	08	\$349.36	\$1.66	\$351.02	\$346.84	\$1.66	\$348.50	\$350.23	\$2.56	\$352.79	\$350.39	\$2.56	\$352.96
Health Choice Arizona	08	\$369.69	\$2.34	\$372.04	\$367.01	\$2.34	\$369.36	\$350.23	\$12.08	\$362.31	\$350.39	\$12.08	\$362.48
University Family Care	10	\$327.14	\$0.43	\$327.57	\$327.71	\$0.43	\$328.14	\$298.62	\$3.07	\$301.69	\$304.70	\$3.07	\$307.77
UnitedHealthcare Community Plan	10	\$313.30	\$0.12	\$313.42	\$313.83	\$0.12	\$313.96	\$298.62	\$0.00	\$298.62	\$304.70	\$0.00	\$304.70
Health Choice Arizona	10	\$297.52	\$0.00	\$297.52	\$298.01	\$0.00	\$298.01	\$298.62	\$0.00	\$298.62	\$304.70	\$0.00	\$304.70
Care 1st Health Plan Arizona, Inc.	10	\$299.46	\$0.00	\$299.46	\$299.96	\$0.00	\$299.96	\$298.62	\$0.00	\$298.62	\$304.70	\$0.00	\$304.70
Mercy Care Plan	10	\$311.91	\$0.00	\$311.91	\$312.44	\$0.00	\$312.44	\$298.62	\$0.00	\$298.62	\$304.70	\$0.00	\$304.70
UnitedHealthcare Community Plan	12	\$350.14	\$0.00	\$350.14	\$348.87	\$0.00	\$348.87	\$385.07	\$0.00	\$385.07	\$387.99	\$0.00	\$387.99
Care 1st Health Plan Arizona, Inc.	12	\$355.31	\$0.00	\$355.31	\$354.02	\$0.00	\$354.02	\$385.07	\$0.00	\$385.07	\$387.99	\$0.00	\$387.99
Health Choice Arizona	12	\$352.64	\$0.00	\$352.64	\$351.36	\$0.00	\$351.36	\$385.07	\$0.00	\$385.07	\$387.99	\$0.00	\$387.99
Mercy Care Plan	12	\$366.84	\$0.00	\$366.84	\$365.52	\$0.00	\$365.52	\$385.07	\$0.00	\$385.07	\$387.99	\$0.00	\$387.99
Health Net of Arizona, Inc.	12	\$342.81	\$0.00	\$342.81	\$341.56	\$0.00	\$341.56	\$385.07	\$0.00	\$385.07	\$387.99	\$0.00	\$387.99
University Family Care	14	\$356.19	\$6.05	\$362.24	\$357.99	\$6.05	\$364.04	\$356.09	\$24.88	\$380.97	\$367.25	\$24.88	\$392.12
UnitedHealthcare Community Plan	14	\$348.98	\$3.49	\$352.47	\$350.73	\$3.49	\$354.22	\$356.09	\$4.19	\$360.28	\$367.25	\$4.19	\$371.44

Delivery Supplemental Payments

MCO	GSA	Prospective Capitation Rates Effective 10/1/17 - 12/31/17			Prospective Capitation Rates Effective 1/1/18 - 9/30/18			PPC Capitation Rates Effective 10/1/17 - 12/31/17			PPC Capitation Rates Effective 1/1/18 - 9/30/18		
		Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural	Cap Rates without Rural	Rural PMPM	Cap Rates with Rural
UnitedHealthcare Community Plan	02	\$5,655.07	\$0.00	\$5,655.07	\$5,655.07	\$0.00	\$5,655.07	N/A	N/A	N/A	N/A	N/A	N/A
University Family Care	02	\$5,607.72	\$0.00	\$5,607.72	\$5,607.72	\$0.00	\$5,607.72	N/A	N/A	N/A	N/A	N/A	N/A
UnitedHealthcare Community Plan	04	\$5,825.80	\$0.00	\$5,825.80	\$5,825.80	\$0.00	\$5,825.80	N/A	N/A	N/A	N/A	N/A	N/A
Health Choice Arizona	04	\$5,778.88	\$0.00	\$5,778.88	\$5,778.88	\$0.00	\$5,778.88	N/A	N/A	N/A	N/A	N/A	N/A
UnitedHealthcare Community Plan	06	\$5,966.15	\$0.00	\$5,966.15	\$5,966.15	\$0.00	\$5,966.15	N/A	N/A	N/A	N/A	N/A	N/A
University Family Care	06	\$5,912.46	\$0.00	\$5,912.46	\$5,912.46	\$0.00	\$5,912.46	N/A	N/A	N/A	N/A	N/A	N/A
University Family Care	08	\$5,523.43	\$0.00	\$5,523.43	\$5,523.43	\$0.00	\$5,523.43	N/A	N/A	N/A	N/A	N/A	N/A
Health Choice Arizona	08	\$5,522.25	\$0.00	\$5,522.25	\$5,522.25	\$0.00	\$5,522.25	N/A	N/A	N/A	N/A	N/A	N/A
University Family Care	10	\$5,530.67	\$0.00	\$5,530.67	\$5,530.67	\$0.00	\$5,530.67	N/A	N/A	N/A	N/A	N/A	N/A
UnitedHealthcare Community Plan	10	\$5,583.87	\$0.00	\$5,583.87	\$5,583.87	\$0.00	\$5,583.87	N/A	N/A	N/A	N/A	N/A	N/A
Health Choice Arizona	10	\$5,536.46	\$0.00	\$5,536.46	\$5,536.46	\$0.00	\$5,536.46	N/A	N/A	N/A	N/A	N/A	N/A
Care 1st Health Plan Arizona, Inc.	10	\$5,582.00	\$0.00	\$5,582.00	\$5,582.00	\$0.00	\$5,582.00	N/A	N/A	N/A	N/A	N/A	N/A
Mercy Care Plan	10	\$5,563.79	\$0.00	\$5,563.79	\$5,563.79	\$0.00	\$5,563.79	N/A	N/A	N/A	N/A	N/A	N/A
UnitedHealthcare Community Plan	12	\$6,300.59	\$0.00	\$6,300.59	\$6,300.59	\$0.00	\$6,300.59	N/A	N/A	N/A	N/A	N/A	N/A
Care 1st Health Plan Arizona, Inc.	12	\$6,323.05	\$0.00	\$6,323.05	\$6,323.05	\$0.00	\$6,323.05	N/A	N/A	N/A	N/A	N/A	N/A
Health Choice Arizona	12	\$6,283.92	\$0.00	\$6,283.92	\$6,283.92	\$0.00	\$6,283.92	N/A	N/A	N/A	N/A	N/A	N/A
Mercy Care Plan	12	\$6,279.40	\$0.00	\$6,279.40	\$6,279.40	\$0.00	\$6,279.40	N/A	N/A	N/A	N/A	N/A	N/A
Health Net of Arizona, Inc.	12	\$6,316.03	\$0.00	\$6,316.03	\$6,316.03	\$0.00	\$6,316.03	N/A	N/A	N/A	N/A	N/A	N/A
University Family Care	14	\$5,443.54	\$0.00	\$5,443.54	\$5,443.54	\$0.00	\$5,443.54	N/A	N/A	N/A	N/A	N/A	N/A
UnitedHealthcare Community Plan	14	\$5,495.05	\$0.00	\$5,495.05	\$5,495.05	\$0.00	\$5,495.05	N/A	N/A	N/A	N/A	N/A	N/A