

Appendix D1. Member Months

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Estimated Member Month Calculations

State of Florida - Long Term Care 1915(b) - Initial Waiver Submission
Enrollment Projections for the Time Period July 1, 2013 - June 30, 2016

Medicaid Eligibility Group (MEG)	All Regions											
	Base Year (BY)	Projected Quarter 1	Projected Quarter 2	Projected Quarter 3	Projected Quarter 4	Projected Year 1	Projected Quarter 5	Projected Quarter 6	Projected Quarter 7	Projected Quarter 8	Projected Year 2	for Y1 through 2
	SFY 2010	07/01/13-09/30/13	10/01/13-12/31/13	01/01/14-03/31/14	04/01/14-06/30/14	(P1)	07/01/14-09/30/14	10/01/14-12/31/14	01/01/15-03/31/15	04/01/15-06/30/15	(P2)	(H+M)
HCBS Enrollees 65+ enrolled in Medicare	407,501	16,275	47,879	94,477	142,066	271,600	113,426	113,090	114,565	115,123	457,096	728,695
All Other HCBS Enrollees	11,287	411	1,211	2,384	2,948	6,853	2,962	3,070	2,881	2,905	11,534	18,387
Non-HCBS Enrollees 65+ enrolled in Medicare	577,614	28,401	71,205	132,106	171,917	403,528	174,407	177,038	179,706	182,414	713,563	1,117,092
All Other Non-HCBS Enrollees	98,595	4,378	10,975	20,362	26,483	62,198	26,883	27,268	27,099	28,117	109,986	172,185
Total Member Months	1,095,058	49,465	131,369	249,329	314,016	744,179	317,579	321,190	324,850	328,559	1,292,179	2,036,358
Quarterly % Increase			165.6%	89.8%	25.9%		1.1%	1.1%	1.1%	1.1%		
Annualized % Increase Base Year to Year 1 to Year 2						-9.2%					73.6%	

Medicaid Eligibility Group (MEG)	All Regions						
	Projected Year 2	Projected Quarter 9	Projected Quarter 10	Projected Quarter 11	Projected Quarter 12	Projected Year 3	for Y1 through 3
	(P2)	07/01/15-09/30/15	10/01/15-12/31/15	01/01/16-03/31/16	04/01/16-06/30/16	(P3)	
HCBS Enrollees 65+ enrolled in Medicare	457,096	115,725	116,552	117,416	118,287	467,981	1,196,676
All Other HCBS Enrollees	11,534	2,920	2,941	2,963	2,985	11,808	30,195
Non-HCBS Enrollees 65+ enrolled in Medicare	713,563	185,184	187,956	190,785	193,665	757,574	1,874,666
All Other Non-HCBS Enrollees	109,986	28,541	28,971	29,408	29,851	116,770	288,954
Total Member Months	1,292,179	332,350	336,419	340,576	344,788	1,354,134	3,390,492
Quarterly % Increase			1.2%	1.2%	1.2%		
Annualized % Increase Year 2 to Year 3						4.8%	

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

Appendix D2.S Services in Waiver Cost

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Services in Actual Waiver Cost (Comprehensive and Expedited)

~~State of Florida Long Term Care Waiver Initial Waiver Submission~~

Base Year Initial Waiver

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

Service Category	MEGs 1 & 2 (HCBS Enrollees)				MEGs 3 & 4 (Non-HCBS Enrollees)			
	State Plan and HCBS Waiver Approved Services	MCO Capitated Reimbursement	PIHP Capitated Reimbursement	PIHP Fee-for Service Reimbursement	State Plan Approved Services	MCO Capitated Reimbursement	PIHP Capitated Reimbursement	PIHP Fee-for Service Reimbursement
Adult Day Care	X		X					
Assistive care services	X		X		X		X	
Attendant Care	X		X					
Behavior Management	X		X					
Caregiver training	X		X					
Case Management	X		X					
Companion	X		X					
Home accessibility adaptation	X		X					
Home-delivered meals	X		X					
Home health services	X		X		X		X	
Homemaker	X		X					
Hospice					X		X	
Intermittent and skilled nursing	X		X					
Medication administration	X		X					
Medical equipment and supplies, including incontinence supplies	X		X					
Medication management	X		X					
Nursing Facility care					X		X	
Nutritional assessment and risk reduction	X		X					
Occupational therapy	X		X					
Personal care	X		X					
Personal emergency response system	X		X					
Physical therapy	X		X					
Respiratory therapy	X		X					
Respite care	X		X					
Assisted living services	X		X					
Speech therapy	X		X					
Transportation to program services	X		X					

Row # /
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FFS Administration in Actual Waiver Cost (Comprehensive and Expedited)

State of Florida

Base Year Initial Waiver

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

CMS 64.10 line Item	CMS 64.10 Explanation	Contract	Match Rate	BY Expenses
1	FAMILY PLANNING		90% FFP	
2	DESIGN DEVELOPMENT OR INSTALLATION OF MMIS*		90% FFP	
A.	COSTS OF IN-HOUSE ACTIVITIES PLUS OTHER STATE AGENCIES AND INSTITUTIONS		90% FFP	\$ 44,724
B.	COST OF PRIVATE SECTOR CONTRACTORS		90% FFP	\$ -
C.	DRUG CLAIMS SYSTEM		90% FFP	\$ -
3	SKILLED PROFESSIONAL MEDICAL PERSONNEL		75% FFP	\$ -
4	OPERATION OF AN APPROVED MMIS*		75% FFP	\$ 148,102
A.	COSTS OF IN-HOUSE ACTIVITIES PLUS OTHER STATE AGENCIES AND INSTITUTIONS		75% FFP	\$ 2,408,490
B.	COST OF PRIVATE SECTOR CONTRACTORS		75% FFP	\$ -
5	MECHANIZED SYSTEMS, NOT APPROVED UNDER MMIS PROCEDURES:		50% FFP	\$ -
A.	COSTS OF IN-HOUSE ACTIVITIES PLUS OTHER STATE AGENCIES AND INSTITUTIONS		50% FFP	\$ 6,639,024
B.	COST OF PRIVATE SECTOR CONTRACTORS		50% FFP	\$ -
6	PEER REVIEW ORGANIZATIONS (PRO)		75% FFP	\$ -
7. A.	THIRD PARTY LIABILITY RECOVERY PROCEDURE - BILLING OFFSET		50% FFP	\$ -
B.	ASSIGNMENT OF RIGHTS - BILLING OFFSET		50% FFP	\$ -
8	IMMIGRATION STATUS VERIFICATION SYSTEM COSTS		100% FFP	\$ -
9	NURSE AIDE TRAINING COSTS		50% FFP	\$ -
10	PREADMISSION SCREENING COSTS		75% FFP	\$ -
11	RESIDENT REVIEW ACTIVITIES COSTS		75% FFP	\$ -
12	DRUG USE REVIEW PROGRAM		75% FFP	\$ -
13	OUTSTATIONED ELIGIBILITY WORKERS		50% FFP	\$ -
14.	TANF BASE		90% FFP	\$ -
15.	TANF SECONDARY 90%		90% FFP	\$ -
16.	TANF SECONDARY 75%		75% FFP	\$ -
17.	EXTERNAL REVIEW		75% FFP	\$ -
18.	ENROLLMENT BROKERS		50% FFP	\$ -
19.	OTHER FINANCIAL PARTICIPATION		50% FFP	\$ 4,441,564
20	Total			\$ 13,681,904

*Allocation basis is 17.1 % of Medicaid costs to reflect the % of Medicaid that the waiver-covered LTC services costs represent
 Add multiple line items as necessary to fit the administration of the program (i.e. if you have more than one contract on line 19, detail the contracts separately).

State Completion Sections

Appendix D3. Actual Waiver Cost

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Actual Waiver Cost Initial Waiver Comprehensive Version

State of Florida - Long Term Care (9150) - Initial Waiver Submission

Medicaid Eligibility Group (MEG)	Base Year Member Months	Base Year (BY) Aggregate Costs							Total Actual Waiver Costs (F+G+H+I)
		MCO/PIHP Capitated Costs (Including incentives and risksharing payouts/withholds or PCCM Case Management Fees) (represents Nursing Home Diversion Waiver)	Fee-for-Service Costs	State Plan Service Costs (D+E)	FFS Incentive Costs (not included in capitation rates, provide documentation)	1915(b)(3) service costs (will be 0 in Initial Waiver)	Administration Costs (Attach list using CMS 64.10 Waiver schedule categories)		
HCBS Enrollees 65+ enrolled in Medicare	407,561	\$ 310,969,856	\$ 108,947,519	\$ 419,917,376		\$ -	\$ 5,092,168	\$ 425,009,536	
All Other HCBS Enrollees	11,287	\$ -	\$ 14,554,188	\$ 14,554,188		\$ -	\$ 141,022	\$ 14,695,210	
Non-HCBS Enrollees 65+ enrolled in Medicare	577,614	\$ -	\$ 2,150,049,826	\$ 2,150,049,826		\$ -	\$ 7,216,841	\$ 2,157,266,667	
All Other Non-HCBS Enrollees	98,596	\$ -	\$ 321,088,272	\$ 321,088,272		\$ -	\$ 1,231,831	\$ 322,320,153	
Total	1,095,058	\$ 310,969,856	\$ 2,594,639,805	\$ 2,905,609,682	\$ -	\$ -	\$ 13,681,904	\$ 2,919,291,566	
BY Overall PMPM for BY (BY MMs)							\$ 12.49		

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

Appendix D3. Actual Waiver Cost

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Actual Waiver Cost Conversion Initial Comprehensive Version

State of Florida - Long Term Calc (9/5/16) - Initial Waiver Submission

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Medicaid Eligibility Group (MEG)	Base Year Member Months	Base Year (BY) Per Member Per Month (PMPM) Costs				Total Actual Waiver Costs (J/C)
		State Plan Service Costs (F/C)	Incentive Costs (G/C)	1915(b)(3) Service Costs (H/C)	Administration Costs (I/C)	
HCBS Enrollees 65+ enrolled in Medicare	407,561	\$ 1,030.32	\$ -	\$ -	\$ 12.49	\$ 1,042.81
All Other HCBS Enrollees	11,287	\$ 1,289.46	\$ -	\$ -	\$ 12.49	\$ 1,301.96
Non-HCBS Enrollees 65+ enrolled in Medicare	577,614	\$ 3,722.30	\$ -	\$ -	\$ 12.49	\$ 3,734.79
All Other Non-HCBS Enrollees	98,596	\$ 3,256.61	\$ -	\$ -	\$ 12.49	\$ 3,269.10
Total	1,095,058					
BY Overall PMPM for BY (BY MMs)		\$ 2,653.38	\$ -	\$ -	\$ 12.49	\$ 2,665.88

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

Appendix D4. Adjustments in Projection

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

State of Florida - Long Term Care 1915(b) - Initial Waiver Submission

Prospective Years 1 through 3 (P1 - P3)

Initial Waiver

Adjustments to the Waiver Cost Projection	Adjustments Made Per Year	Location of Adjustment
State Plan Trend	X	Tab: D5; Column: J; Row: 13-16, 30-33, 44-47
Administrative Cost Inflation Adjustment	X	Tab: D5; Column: Y; Row: 13-16, 30-33, 44-47
Administrative Cost PIHP Adjustment	X	Tab: D5; Column: AA; Row: 13-16, 30-33, 44-47
Managed Care Efficiency Adjustment	X	Tab: D5; Column: AA; Row: 13-16

State Completion Sections

Appendix D5. Waiver Cost Projection

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

Medicaid Eligibility Group (MEG)	Base Year (BY) Member Months	Base Year Per Member Per Month (PMPM) Costs					Prospective Year 1 (P1) Projection for State Plan Services**						
		State Plan Service Costs*	Incentive Costs*	1915(b)(3) Service Costs*	Administration Costs*	Total Actual Waiver Costs*	State Plan Service Costs* (Same as D13-D16)	State Plan Inflation Adjustment Annual Trend (Preprint Explains)	PMPM Effect of Inflation Adjustment (b.)	Managed Care Efficiency adjustment (Preprint Explains)	PMPM Effect of Program Adjustment (I+K+L)	Aggregate PMPM Effect of State Plan Service Adj. (K+M)	Total P1 PMPM State Plan Service Cost Projection (I+N)
HCBS Enrollees 65+ enrolled in Medicare	407,561	\$ 1,030.32	\$ -	\$ -	\$ 12.49	\$ 1,042.81	\$ 1,000.32	7.8%	\$ 345.46	8.8%	\$ -	\$ 345.46	\$ 1,375.78
All Other HCBS Enrollees	11,287	\$ 1,289.46	\$ -	\$ -	\$ 12.49	\$ 1,301.95	\$ 1,289.46	7.3%	\$ 432.35	9.3%	\$ -	\$ 432.35	\$ 1,721.82
Non-HCBS Enrollees 65+ enrolled in Medicare	577,814	\$ 3,722.30	\$ -	\$ -	\$ 12.49	\$ 3,734.79	\$ 3,722.30	6.2%	\$ 637.68	6.2%	\$ (5.12)	\$ 628.56	\$ 4,690.85
All Other Non-HCBS Enrollees	98,595	\$ 3,256.61	\$ -	\$ -	\$ 12.49	\$ 3,269.10	\$ 3,256.61	6.2%	\$ 732.85	6.5%	\$ (7.90)	\$ 724.90	\$ 3,981.50
Total	1,095,058												
P1 PMPM Casemix for BY (BY Mths)		\$ 2,653.88	\$ -	\$ -	\$ 12.49	\$ 2,666.38	\$ 2,653.81	5.6%	\$ 640.87	-0.2%	\$ (6.63)	\$ 636.34	\$ 3,288.72

* For comprehensive waivers, Columns D, E, F, G and H are columns K, L, M, N, and O from the Actual Waiver Cost Spreadsheet D3. For expedited waivers, sum the CMS-54.5 WAV and 6421UNAV forms and divide by the member months for column D. Sum the CMS 54.10 WAV forms and divide by the member months for Column G. Sum D+G for Column H.
 ** If additional columns are needed in order to identify all of the adjustments being made, please insert the appropriate number of columns and label them accordingly.

Medicaid Eligibility Group (MEG)	Base Year (BY) Member Months	P1 Per Member Per Month (PMPM) Costs					Prospective Year 2 (P2) Projection for State Plan Services**						
		P1 PMPM State Plan Service Costs (same as O13-O18)	P1 PMPM Incentive Service Costs (same as S13-S18)	P1 PMPM 1915(b)(3) Service Costs (same as W13-W18)	P1 PMPM Administration Service Costs (same as AA13-AA18)	P1 PMPM Total Actual Waiver Costs (same as AB13-AB18)	P1 PMPM State Plan Service Cost Projection (Same as D30-D35)	State Plan Inflation Adjustment (Annual Year 2) (Preprint Explains)	PMPM Effect of Inflation Adjustment (i.-j.)	Program Adjustment (Enter Description Here) (Preprint Explains)	PMPM Effect of Program Adjustment (I+K+L)	Aggregate PMPM Effect of State Plan Service Adj. (K+M)	Total P2 PMPM State Plan Service Cost Projection (I+N)
HCBS Enrollees 65+ enrolled in Medicare	407,561	\$ 1,375.78	\$ -	\$ -	\$ 17.83	\$ 1,393.61	\$ 1,375.78	7.0%	\$ 96.30		\$ -	\$ 96.30	\$ 1,472.08
All Other HCBS Enrollees	11,287	\$ 1,721.82	\$ -	\$ -	\$ 17.83	\$ 1,739.65	\$ 1,721.82	7.0%	\$ 120.53		\$ -	\$ 120.53	\$ 1,842.35
Non-HCBS Enrollees 65+ enrolled in Medicare	577,814	\$ 4,550.85	\$ -	\$ -	\$ 17.83	\$ 4,568.68	\$ 4,550.85	7.0%	\$ 318.55		\$ -	\$ 318.55	\$ 4,869.41
All Other Non-HCBS Enrollees	98,595	\$ 3,981.50	\$ -	\$ -	\$ 17.83	\$ 3,999.34	\$ 3,981.50	7.0%	\$ 278.71		\$ -	\$ 278.71	\$ 4,260.21
Total	1,095,058												
P2 PMPM Casemix for BY (BY Mths)		\$ 3,288.72	\$ -	\$ -	\$ 17.83	\$ 3,306.56	\$ 3,288.72	7.0%	\$ 230.21	0.0%	\$ -	\$ 230.21	\$ 3,518.94

Appendix D5. Waiver Cost Projection

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Actual Waiver Cost Initial Waiver Comprehensive Version
 Note: Complete this Appendix for all Prospective Years Waiver Cost Projection

Medicaid Eligibility Group (MEG)	P1 Projection for Incentive Costs not included in Capitation Rates**				P1 Projection for 1915(b)(3) Service Costs**				P1 Projection for Administration Costs**						
	Base Year PMPM	Incentive Cost	PMPM Effect of	Total P1 PMPM	PMPM amount of	1915(b)(3) Service Costs	PMPM Effect of	Total P1 PMPM	Base Year PMPM	Administration Costs	PMPM Effect of	Administration Costs	PMPM Effect of	Total P1 PMPM	Total P1 PMPM
	Incentive Costs* (Same as E13-E18)	Inflation Adjustment (Annual Year 1) (Preprint Explains)	Inflation Adjustment (PaQ)	Incentive Cost Projection (P+R)	Savings from State Plan (Preprint Explains)	Inflation Adjustment (Annual Year 1) (Preprint Explains)	Inflation Adjustment (TxU)	1915(b)(3) Service Cost Projection (T+V)	Administration Costs* (Same as G13-G18)	Inflation Adjustment Annual Trend (Preprint Explains)	Inflation Adjustment (K+Y)	PMP Adjustment (Annual Year 1) (Preprint Explains)	PMP Adjustment (K+Z+AA)	Administration Cost Projection (X+Z+AB)	Projected Waiver Costs (S+W+AB+AH)
HCBS Enrollees 65+ enrolled in Medicare	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 12.49	5.0%	\$ 2.69	17.4%	\$ 2.65	\$ 17.83	\$ 1,983.61
All Other HCBS Enrollees	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 12.49	5.0%	\$ 2.69	17.4%	\$ 2.65	\$ 17.83	\$ 1,709.65
Non-HCBS Enrollees 65+ enrolled in Medicare	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 12.49	5.0%	\$ 2.69	17.4%	\$ 2.65	\$ 17.83	\$ 4,568.68
All Other Non-HCBS Enrollees	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 12.49	5.0%	\$ 2.69	17.4%	\$ 2.65	\$ 17.83	\$ 3,899.34
Total	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 12.49	5.0%	\$ 2.69		\$ 2.65	\$ 17.83	\$ 3,306.06
P1 PMPM Casemix for BY (BY MMs)	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 12.49	5.0%	\$ 2.69		\$ 2.65	\$ 17.83	\$ 3,306.06

Medicaid Eligibility Group (MEG)	P2 Projection for Incentive Costs not included in Capitation Rates**				P2 Projection for 1915(b)(3) Service Costs**				P2 Projection for Administration Costs**				Total P2 PMPM Projected Waiver Costs (O+S+W+AA)
	P1 PMPM Incentive Cost Projection (Same as E30-E35)	Incentive Cost Inflation Adjustment (Annual Year 2) (Preprint Explains)	PMPM Effect of Inflation Adjustment (PaQ)	Total P2 PMPM Incentive Cost Projection (P+R)	P1 PMPM 1915(b)(3) Service Cost Projection (Same as F30-F35)	1915(b)(3) Service Costs Inflation Adjustment (Annual Year 2) (Preprint Explains)	PMPM Effect of Inflation Adjustment (TxU)	Total P2 PMPM 1915(b)(3) Service Cost Projection (T+V)	P1 PMPM Administration Cost Projection (Same as G30-G35)	Administration Costs Inflation Adjustment (Annual Year 2)	PMPM Effect of Inflation Adjustment (K+Y)	Total P2 PMPM Administration Cost Projection (X+Z)	
HCBS Enrollees 65+ enrolled in Medicare	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 17.83	5.0%	\$ 0.89	\$ 18.72	\$ 1,490.81
All Other HCBS Enrollees	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 17.83	5.0%	\$ 0.89	\$ 18.72	\$ 1,861.07
Non-HCBS Enrollees 65+ enrolled in Medicare	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 17.83	5.0%	\$ 0.89	\$ 18.72	\$ 4,888.14
All Other Non-HCBS Enrollees	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 17.83	5.0%	\$ 0.89	\$ 18.72	\$ 4,278.53
Total	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 17.83	5.0%	\$ 0.89	\$ 18.72	\$ 3,537.68
P2 PMPM Casemix for BY (BY MMs)	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 17.83	5.0%	\$ 0.89	\$ 18.72	\$ 3,537.68

Appendix D5, Waiver Cost Projection

Row # / Column Letter	B	C	D	E	F	G	H	I	J	K	L	M	N	O	
	Waiver Cost Projection Initial Comprehensive Version														
	Prospective Year 3 (FY3) Projection for State Plan Services**														
		P2 Per Member Per Month (PMPM) Costs					Prospective Year 3 (FY3) Projection for State Plan Services**								
	Medicaid Eligibility Group (MEG)	Base Year (BY) Member Months	P2 PMPM State Plan Service Costs (same as G13-G18)	P2 PMPM Incentive Service Costs (same as S13-S18)	P2 PMPM 1915(b)(3) Service Costs (same as W13-W18)	P2 PMPM Administration Service Costs (same as AA13-AA18)	P2 PMPM Total Actual Waiver Costs (same as AB13-AB18)	P2 PMPM State Plan Service Cost Projection (Same as D36-D35)	State Plan Inflation Adjustment (Annual Year 3) (Preprint Explains)	PMPM Effect of Inflation Adjustment (LJ)	Program Adjustment (Enter Description Here) (Preprint Explains)	PMPM Effect of Program Adjustment ((H+K+L))	Aggregate PMPM Effect of State Plan Service Adj. (K+M)	Total P3 PMPM State Plan Service Cost Projection (I+N)	
44	HCBS Enrollees 65+ enrolled in Medicare	407,561	\$ 1,472.08	\$ -	\$ -	\$ 18.72	\$ 1,490.81	\$ 1,472.08	7.0%	\$ 103.05		\$ -	\$ 103.05	\$ 1,575.13	
45	All Other HCBS Enrollees	11,287	\$ 1,842.35	\$ -	\$ -	\$ 18.72	\$ 1,861.07	\$ 1,842.35	7.0%	\$ 128.96		\$ -	\$ 128.96	\$ 1,971.31	
46	Non-HCBS Enrollees 65+ enrolled in Medicare	577,814	\$ 4,869.41	\$ -	\$ -	\$ 18.72	\$ 4,888.14	\$ 4,869.41	7.0%	\$ 340.86		\$ -	\$ 340.86	\$ 5,210.27	
47	All Other Non-HCBS Enrollees	96,896	\$ 4,269.21	\$ -	\$ -	\$ 18.72	\$ 4,278.93	\$ 4,280.21	7.0%	\$ 298.21		\$ -	\$ 298.21	\$ 4,588.42	
48	Total	1,095,058													
49	P3 PMPM Caseload for BY (BY MM)		\$ 3,518.94	\$ -	\$ -	\$ 18.72	\$ 3,537.66	\$ 3,518.94	7.0%	\$ 246.33	0.0%	\$ -	\$ 246.33	\$ 3,765.26	
52	Modify Line Items as necessary to fit the MEGs of the program.														
53	State Capitation Services														

Appendix D5. Waiver Cost Projection

Row # / Column Letter	B	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD
	Actual Waiver Cost Initial Waiver Comprehensive Version															
	P3 Projection for Incentive Costs not Included in Capitation Rates**				P3 Projection for 1915(b)(3) Service Costs**				P3 Projection for Administration Costs**				Total P3 PMPM Projected Waiver Costs			
Medicaid Eligibility Group (MEG)	P2 PMPM Incentive Cost Projection (Same as E30-E35)	Incentive Cost Inflation Adjustment (Annual Year 3) (Preprint Explains)	PMPM Effect of Inflation Adjustment (PaQ)	Total P3 PMPM Incentive Cost Projection (P+R)	P2 PMPM 1915(b)(3) Service Cost Projection (Same as F30-F35)	1915(b)(3) Service Costs Inflation Adjustment (Annual Year 3) (Preprint Explains)	PMPM Effect of Inflation Adjustment (T+U)	Total P3 PMPM 1915(b)(3) Service Cost Projection (T+V)	F2 PMPM Administration Cost Projection (Same as G30-G35)	Administration Costs Inflation Adjustment (Annual Year 3)	PMPM Effect of Inflation Adjustment (K+Y)	Total P3 PMPM Administration Cost Projection (X+Z)	Total P3 PMPM Projected Waiver Costs (O+S+W+AA)			
HCBS Enrollees 65+ enrolled in Medicare	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 18.72	5.0%	\$ 0.94	\$ 19.66	\$ 1,594.79			
All Other HCBS Enrollees	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 18.72	5.0%	\$ 0.94	\$ 19.66	\$ 1,390.97			
Non-HCBS Enrollees 65+ enrolled in Medicare	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 18.72	5.0%	\$ 0.94	\$ 19.66	\$ 5,229.83			
All Other Non-HCBS Enrollees	\$ -		\$ -	\$ -	\$ -		\$ -	\$ -	\$ 18.72	5.0%	\$ 0.94	\$ 19.66	\$ 4,578.88			
Total									\$ 18.72	5.0%	\$ 0.94	\$ 19.66	\$ 3,784.52			
P3 PMPM Casemix for BY (BY NMs)	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ 18.72	5.0%	\$ 0.94	\$ 19.66	\$ 3,784.52			
Modify Line Items as necessary to fit the MEGs of the program.																
State Description: Reactions																

Row # / Column Letter

Quarterly CMS Targets for RO CMS-64 Review Initial Waiver

State of Florida Form CA-9945 (01/2019) - Initial Waiver Submission

Projected Year 1

Medicaid Eligibility Group (MIG)	Total Projected Year 1 Member Months (P1)	P1 Projected PMPM Costs (Totals weighted on Projected Year 1 Member Months)						Total PMPM Projected Service Costs (Column H-G)
		Total PMPM State Plan Service Cost Projection		Total PMPM Incentive Cost Projection		Total PMPM 1915(a)(3) Service Administration Cost Projection		
		Waiver Costs	Waiver Costs	Waiver Costs	Waiver Costs	Waiver Costs	Waiver Costs	
HCBS Enrollees 65+ enrolled in Medicare	271,600	\$ 1,375.78	\$ -	\$ -	\$ -	\$ 17.83	\$ 1,393.61	\$ 1,375.78
All Other HCBS Enrollees	6,850	\$ 1,721.82	\$ -	\$ -	\$ -	\$ 17.83	\$ 1,739.65	\$ 1,721.82
Non-HCBS Enrollees 65+ enrolled in Medicare	403,508	\$ 4,550.05	\$ -	\$ -	\$ -	\$ 17.83	\$ 4,567.88	\$ 4,550.05
All Other Non-HCBS Enrollees	62,198	\$ 3,981.50	\$ -	\$ -	\$ -	\$ 17.83	\$ 3,999.33	\$ 3,981.50
Total	744,156	\$ 11,629.15	\$ -	\$ -	\$ -	\$ 17.83	\$ 11,646.98	\$ 11,629.15
P1 PMPM Casemix for P1 (P1 MMs)		\$ 3,218.42	\$ -	\$ -	\$ -	\$ 17.83	\$ 3,236.26	

Medicaid Eligibility Group (MIG)	Member Months Projections	Q1 Quarterly Projected Costs			Q2 Quarterly Projected Costs			Q3 Quarterly Projected Costs			Q4 Quarterly Projected Costs			Total P1 Projected Waiver Costs			
		84.99AVM4.21UNAV		84.19 WAV	84.99AVM4.21UNAV		84.19 WAV	84.99AVM4.21UNAV		84.19 WAV	84.99AVM4.21UNAV		84.19 WAV				
		Service Costs	Administration	Costs	Service Costs	Administration	Costs	Service Costs	Administration	Costs	Service Costs	Administration	Costs				
HCBS Enrollees 65+ enrolled in Medicare	16,275	\$ 22,391,294.23	\$ 290,235.58	\$ 290,235.58	47,879	\$ 66,008,554.20	\$ 855,587.94	\$ 855,587.94	94,477	\$ 129,879,947.44	\$ 1,684,790.34	\$ 1,684,790.34	112,968	\$ 155,781,442.02	\$ 2,012,746.42	\$ 2,012,746.42	\$ 378,594,708.16
All Other HCBS Enrollees	411	\$ 707,086.48	\$ 7,723.35	\$ 7,723.35	1,211	\$ 2,084,490.12	\$ 21,568.83	\$ 21,568.83	2,384	\$ 4,104,828.86	\$ 42,511.35	\$ 42,511.35	2,840	\$ 4,903,823.22	\$ 50,786.51	\$ 50,786.51	\$ 11,922,038.75
Non-HCBS Enrollees 65+ enrolled in Medicare	28,401	\$ 129,248,410.51	\$ 505,466.02	\$ 505,466.02	71,202	\$ 324,041,275.88	\$ 1,269,773.36	\$ 1,269,773.36	132,106	\$ 601,183,800.31	\$ 2,355,810.99	\$ 2,355,810.99	171,817	\$ 781,914,910.36	\$ 3,053,872.56	\$ 3,053,872.56	\$ 1,845,840,620.68
All Other Non-HCBS Enrollees	4,378	\$ 17,429,504.37	\$ 78,065.04	\$ 78,065.04	10,975	\$ 43,687,859.08	\$ 195,718.42	\$ 195,718.42	20,362	\$ 81,072,654.35	\$ 353,116.46	\$ 353,116.46	26,493	\$ 106,443,259.25	\$ 472,270.01	\$ 472,270.01	\$ 240,752,448.96
Total	49,465	\$ 169,776,465.98	\$ 882,000.89	\$ 882,000.89	131,269	\$ 435,832,199.08	\$ 2,342,878.54	\$ 2,342,878.54	249,335	\$ 816,351,130.96	\$ 4,446,229.17	\$ 4,446,229.17	314,016	\$ 1,047,542,334.85	\$ 5,989,775.50	\$ 5,989,775.50	\$ 2,492,772,814.57

Projected Year 2

Medicaid Eligibility Group (MIG)	Total Projected Year 2 Member Months (P2)	P2 Projected PMPM Costs (Totals weighted on Projected Year 2 Member Months)						Total PMPM Projected Service Costs (Column H-G)
		Total PMPM State Plan Service Cost Projection		Total PMPM Incentive Cost Projection		Total PMPM 1915(a)(3) Service Administration Cost Projection		
		Waiver Costs	Waiver Costs	Waiver Costs	Waiver Costs	Waiver Costs	Waiver Costs	
HCBS Enrollees 65+ enrolled in Medicare	457,068	\$ 1,472.06	\$ -	\$ -	\$ -	\$ 18.72	\$ 1,490.78	\$ 1,472.06
All Other HCBS Enrollees	11,534	\$ 1,842.35	\$ -	\$ -	\$ -	\$ 18.72	\$ 1,861.07	\$ 1,842.35
Non-HCBS Enrollees 65+ enrolled in Medicare	713,583	\$ 4,869.41	\$ -	\$ -	\$ -	\$ 18.72	\$ 4,888.13	\$ 4,869.41
All Other Non-HCBS Enrollees	109,586	\$ 4,260.21	\$ -	\$ -	\$ -	\$ 18.72	\$ 4,278.93	\$ 4,260.21
Total	1,291,171	\$ 12,454.03	\$ -	\$ -	\$ -	\$ 18.72	\$ 12,472.75	\$ 12,454.03
P2 PMPM Casemix for P2 (P2 MMs)		\$ 3,689.77	\$ -	\$ -	\$ -	\$ 18.72	\$ 3,708.49	

Medicaid Eligibility Group (MIG)	Member Months Projections	Q1 Quarterly Projected Costs			Q2 Quarterly Projected Costs			Q3 Quarterly Projected Costs			Q4 Quarterly Projected Costs			Total P2 Projected Waiver Costs			
		84.99AVM4.21UNAV		84.19 WAV	84.99AVM4.21UNAV		84.19 WAV	84.99AVM4.21UNAV		84.19 WAV	84.99AVM4.21UNAV		84.19 WAV				
		Service Costs	Administration	Costs	Service Costs	Administration	Costs	Service Costs	Administration	Costs	Service Costs	Administration	Costs				
HCBS Enrollees 65+ enrolled in Medicare	113,428	\$ 106,974,948.90	\$ 2,123,802.28	\$ 2,123,802.28	113,990	\$ 197,802,839.41	\$ 2,134,392.74	\$ 2,134,392.74	114,503	\$ 168,624,834.75	\$ 2,144,970.42	\$ 2,144,970.42	115,123	\$ 169,470,985.27	\$ 2,155,610.59	\$ 2,155,610.59	\$ 881,442,419.34
All Other HCBS Enrollees	2,862	\$ 5,272,891.77	\$ 53,590.23	\$ 53,590.23	2,878	\$ 5,299,035.67	\$ 53,855.94	\$ 53,855.94	2,891	\$ 5,325,309.20	\$ 54,122.97	\$ 54,122.97	2,905	\$ 5,351,713.00	\$ 54,391.32	\$ 54,391.32	\$ 21,464,810.11
Non-HCBS Enrollees 65+ enrolled in Medicare	174,407	\$ 849,260,564.14	\$ 3,265,870.45	\$ 3,265,870.45	177,036	\$ 862,063,273.30	\$ 3,314,900.84	\$ 3,314,900.84	178,705	\$ 879,058,984.80	\$ 3,364,873.38	\$ 3,364,873.38	182,414	\$ 896,250,908.48	\$ 3,415,898.27	\$ 3,415,898.27	\$ 3,437,894,474.76
All Other Non-HCBS Enrollees	28,883	\$ 114,525,127.64	\$ 503,369.01	\$ 503,369.01	27,288	\$ 116,251,608.25	\$ 510,947.21	\$ 510,947.21	27,999	\$ 118,004,115.78	\$ 518,649.81	\$ 518,649.81	28,117	\$ 119,783,947.57	\$ 526,468.52	\$ 526,468.52	\$ 470,825,919.79
Total	317,579	\$ 1,136,033,532.44	\$ 5,946,481.95	\$ 5,946,481.95	321,190	\$ 1,151,416,755.83	\$ 6,014,866.74	\$ 6,014,866.74	324,898	\$ 1,167,023,244.83	\$ 6,602,621.59	\$ 6,602,621.59	328,559	\$ 1,182,656,319.32	\$ 6,152,069.69	\$ 6,152,069.69	\$ 4,681,625,123.06

P Q R S T U

Quarterly CMS Targets for RO CMS-64 Review Renewal

State of Florida, Department of Health, Office of Health Waiver Management

Projection for Upcoming Waiver Period

Projections for RO CMS-64 Certification - Aggregate Cost

Appendix D6.1 - 07/01/2014 - 06/30/14					
Waiver Form	Medicaid Eligibility Group (MEG)	Q1 Quarterly Projected Costs	Q2 Quarterly Projected Costs	Q3 Quarterly Projected Costs	Q4 Quarterly Projected Costs
		Start 07/01/2014	Start 10/01/2014	Start 01/01/2015	Start 04/01/2015
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$ 22,391,394.23	\$ 68,002,554.20	\$ 129,879,947.44	\$ 155,281,442.02
64.9 Waiver Form	All Other HCBS Enrollees	\$ 707,096.48	\$ 2,064,490.12	\$ 4,104,628.86	\$ 4,803,823.22
64.8 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$ 120,248,410.51	\$ 324,041,275.68	\$ 601,180,900.31	\$ 781,914,010.20
64.8 Waiver Form	All Other Non-HCBS Enrollees	\$ 17,429,504.37	\$ 43,697,859.08	\$ 81,072,854.35	\$ 105,443,259.25
64.10 Waiver Form		\$ 842,090.89	\$ 2,342,878.54	\$ 4,446,229.17	\$ 5,099,775.50

Appendix D6.2 - 07/01/14 - 06/30/15					
Waiver Form	Medicaid Eligibility Group (MEG)	Q5 Quarterly Projected Costs	Q6 Quarterly Projected Costs	Q7 Quarterly Projected Costs	Q8 Quarterly Projected Costs
		Start 07/01/2014	Start 10/01/2014	Start 01/01/2015	Start 04/01/2015
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$ 166,874,848.90	\$ 167,807,839.41	\$ 168,634,814.75	\$ 169,470,965.27
64.9 Waiver Form	All Other HCBS Enrollees	\$ 5,272,891.77	\$ 5,280,025.67	\$ 5,325,309.20	\$ 5,351,713.00
64.8 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$ 849,260,964.14	\$ 862,083,273.30	\$ 875,058,984.50	\$ 888,250,608.48
64.8 Waiver Form	All Other Non-HCBS Enrollees	\$ 114,625,127.84	\$ 116,251,808.25	\$ 118,004,118.78	\$ 119,783,042.97
64.10 Waiver Form		\$ 5,846,481.98	\$ 6,014,008.74	\$ 6,082,621.50	\$ 6,152,069.89

V W X Y Z AA AB AC AD AE AF AG AH AI

Quarterly CMS Targets for RO Cost-Effectiveness Monitoring
 State of Florida Long Term Care 0151631014 Waiver Submission

Projection for Upcoming Waiver Period
 Worksheet for RO PMPM Cost-Effectiveness Monitoring

Projected Year 1 - 07/01/13 - 06/30/14

Waiver Form	Medicaid Eligibility Group (MEG)	State Completion Section - For Waiver Submission	
		P1 Projected PMPM	
		From Column 1 (services)	From Column 9 (Administration)
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$	1,275.78
64.9 Waiver Form	All Other HCBS Enrollees	\$	1,721.02
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$	4,560.85
64.9 Waiver Form	All Other Non-HCBS Enrollees	\$	5,961.80
64.10 Waiver Form	All MEGS	\$	17.83

Waiver Form	Medicaid Eligibility Group (MEG)	RO Completion Section - For ongoing monitoring			RO Completion Section - For ongoing monitoring			RO Completion Section - For ongoing monitoring			RO Completion Section - For ongoing monitoring		
		Q1 Quarterly Actual Costs			Q2 Quarterly Actual Costs			Q3 Quarterly Actual Costs			Q4 Quarterly Actual Costs		
		Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual
		Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs
		Start 07/01/2013	Waiver Form Costs	Start 10/01/2013	Waiver Form Costs	Start 01/01/2014	Waiver Form Costs	Start 04/01/2014	Waiver Form Costs				
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare		\$23667		\$23667		\$23667		\$23667			\$23667	
64.9 Waiver Form	All Other HCBS Enrollees		\$23667		\$23667		\$23667		\$23667			\$23667	
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare		\$23667		\$23667		\$23667		\$23667			\$23667	
64.9 Waiver Form	All Other Non-HCBS Enrollees		\$23667		\$23667		\$23667		\$23667			\$23667	
64.10 Waiver Form	All MEGS		\$77088		\$77088		\$77088		\$77088			\$77088	

Projected Year 2 - 07/01/14 - 06/30/15

Waiver Form	Medicaid Eligibility Group (MEG)	State Completion Section - For Waiver Submission	
		P1 Projected PMPM	
		From Column 1 (services)	From Column 9 (Administration)
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$	1,472.08
64.9 Waiver Form	All Other HCBS Enrollees	\$	1,842.35
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$	4,868.41
64.9 Waiver Form	All Other Non-HCBS Enrollees	\$	4,260.21
64.10 Waiver Form	All MEGS	\$	18.72

Waiver Form	Medicaid Eligibility Group (MEG)	RO Completion Section - For ongoing monitoring			RO Completion Section - For ongoing monitoring			RO Completion Section - For ongoing monitoring			RO Completion Section - For ongoing monitoring		
		Q6 Quarterly Actual Costs			Q6 Quarterly Actual Costs			Q7 Quarterly Actual Costs			Q8 Quarterly Actual Costs		
		Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual
		Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs
		Start 07/01/2014	Waiver Form Costs	Start 10/01/2014	Waiver Form Costs	Start 01/01/2015	Waiver Form Costs	Start 04/01/2015	Waiver Form Costs				
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare		\$23667		\$23667		\$23667		\$23667			\$23667	
64.9 Waiver Form	All Other HCBS Enrollees		\$23667		\$23667		\$23667		\$23667			\$23667	
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare		\$23667		\$23667		\$23667		\$23667			\$23667	
64.9 Waiver Form	All Other Non-HCBS Enrollees		\$23667		\$23667		\$23667		\$23667			\$23667	
64.10 Waiver Form	All MEGS		\$77088		\$77088		\$77088		\$77088			\$77088	

Row # / Column Letter

Quarterly CMS Targets for RO CMS-64 Review Initial Waiver
 State of Florida Long-Term Care (LTC) Initial Waiver Submission

Projected Year 3

Medicaid Eligibility Group (MEG)	Total Projected Year 3 Member Months (P3)	P3 Projected PMPM Costs (Totals weighted on Projected Year 3 Member Months)						Total Projected Service Costs (Column H-G)
		Total PMPM		Total PMPM		Total PMPM		
		State Plan Service Cost Projection	Incentive Cost Projection	1813(a)(1) Service Cost Projection	Administration Cost Projection	Projected Waiver Costs	Projected	
HCBS Enrollees 65+ enrolled in Medicare	497,861	\$ 1,675.13	\$ -	\$ -	\$ 19.66	\$ 1,294.70	\$ 1,575.13	
All Other HCBS Enrollees	11,808	\$ 1,971.31	\$ -	\$ -	\$ 19.66	\$ 1,880.97	\$ 1,971.31	
Non-HCBS Enrollees 65+ enrolled in Medicare	757,574	\$ 5,210.27	\$ -	\$ -	\$ 19.66	\$ 5,229.93	\$ 5,210.27	
All Other Non-HCBS Enrollees	116,770	\$ 4,556.42	\$ -	\$ -	\$ 19.66	\$ 4,575.08	\$ 4,556.42	
Total	1,354,134				19.66	3,889.19		
P3 PMPM Growth for P3 (P3 MMs)		\$ 3,869.53	\$ -	\$ -	\$ 19.66	\$ 3,889.19		

Medicaid Eligibility Group (MEG)	Member Months Projection	Q4 Quarterly Projected Costs				Q1 Quarterly Projected Costs				Q2 Quarterly Projected Costs				Total P3 Projected Waiver Costs
		84 TO NOV		84 TO NOV		84 TO NOV		84 TO NOV		84 TO NOV		84 TO NOV		
		Service Costs Include Incentives	Administration Costs	Service Costs Include Incentives	Administration Costs	Service Costs Include Incentives	Administration Costs	Service Costs Include Incentives	Administration Costs	Service Costs Include Incentives	Administration Costs	Service Costs Include Incentives	Administration Costs	
HCBS Enrollees 65+ enrolled in Medicare	116,725	\$ 182,282,574.24	\$ 2,275,232.09	115,952	\$ 183,584,698.88	\$ 2,291,485.02	117,418	\$ 184,946,210.46	\$ 2,308,479.32	118,297	\$ 186,317,819.36	\$ 2,325,566.90	\$ 746,322,939.01	
All Other HCBS Enrollees	2,820	\$ 5,798,290.34	\$ 57,409.66	2,841	\$ 5,797,410.05	\$ 57,816.77	2,953	\$ 5,840,425.14	\$ 58,248.57	2,885	\$ 5,883,718.10	\$ 58,680.36	\$ 23,569,843.19	
Non-HCBS Enrollees 65+ enrolled in Medicare	165,164	\$ 964,759,974.29	\$ 3,640,444.35	167,856	\$ 978,289,791.15	\$ 3,695,324.50	190,786	\$ 994,082,857.93	\$ 3,751,031.58	193,695	\$ 1,009,048,479.77	\$ 3,807,579.26	\$ 3,842,861,483.21	
All Other Non-HCBS Enrollees	28,541	\$ 130,100,027.02	\$ 561,125.33	29,074	\$ 130,061,275.79	\$ 566,584.39	29,408	\$ 134,052,116.03	\$ 578,170.94	29,851	\$ 136,072,886.44	\$ 585,855.94	\$ 334,262,129.87	
Total	332,350	\$ 1,282,894,840.83	\$ 6,534,211.43	336,419	\$ 1,300,743,175.86	\$ 6,614,213.73	340,516	\$ 1,318,901,589.56	\$ 6,695,933.81	344,788	\$ 1,337,322,986.96	\$ 6,778,746.36	\$ 2,284,493,693.28	

P Q R S T U

Quarterly CMS Targets for RO CMS-64 Review Renewal

State of Florida Department of Health (DOH) Health Waiver Submissions

Projection for Upcoming Waiver Period

Projections for RO CMS-64 Certification - Aggregate Cost

Fiscal Year 2 - 07/01/21 - 06/30/24					
Waiver Form	Medicaid Eligibility Group (MEG)	Q1 Quarterly Projected Costs	Q2 Quarterly Projected Costs	Q3 Quarterly Projected Costs	Q4 Quarterly Projected Costs
		Start 07/01/2018	Start 10/01/2018	Start 01/01/2019	Start 04/01/2019
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$ 22,391,394.23	\$ 66,003,554.20	\$ 128,879,947.44	\$ 155,281,442.02
64.9 Waiver Form	All Other HCBS Enrollees	\$ 707,096.48	\$ 2,064,480.12	\$ 4,104,628.86	\$ 4,903,623.22
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$ 129,248,410.31	\$ 324,041,275.68	\$ 601,193,800.31	\$ 781,914,010.36
64.9 Waiver Form	All Other Non-HCBS Enrollees	\$ 17,428,504.37	\$ 43,897,859.08	\$ 81,072,654.25	\$ 105,443,258.25
64.19 Waiver Form		\$ 892,090.80	\$ 2,342,978.54	\$ 4,446,229.17	\$ 5,990,775.50

Fiscal Year 2 - 07/01/21 - 06/30/24					
Waiver Form	Medicaid Eligibility Group (MEG)	Q6 Quarterly Projected Costs	Q8 Quarterly Projected Costs	Q7 Quarterly Projected Costs	Q9 Quarterly Projected Costs
		Start 07/01/2014	Start 10/01/2014	Start 01/01/2018	Start 04/01/2018
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$ 166,974,945.00	\$ 167,802,820.41	\$ 168,634,824.75	\$ 169,470,846.27
64.9 Waiver Form	All Other HCBS Enrollees	\$ 5,272,691.77	\$ 5,289,036.67	\$ 5,325,309.20	\$ 5,361,713.00
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$ 649,260,564.14	\$ 682,062,273.30	\$ 715,058,954.90	\$ 748,250,608.48
64.9 Waiver Form	All Other Non-HCBS Enrollees	\$ 114,525,127.64	\$ 118,251,808.25	\$ 118,004,115.78	\$ 119,783,042.57
64.19 Waiver Form		\$ 5,949,481.96	\$ 6,014,096.74	\$ 6,082,621.59	\$ 6,152,069.89

V W X Y Z AA AB AC AD AE AF AG AH AI

Quarterly CMS Targets for RO Cost-Effectiveness Monitoring

Projection for Upcoming Waiver Period
Worksheet for RO PMPM Cost-Effectiveness Monitoring

Projected Year 1 - 07/01/13 - 06/30/14

Waiver Form	Medicaid Eligibility Group (MEG)	State Completion Section - For Waiver Submission		
		P1 Projected PMPM		
		From Column I (services)	From Column G (Administration)	
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$	1,275.70	
64.9 Waiver Form	All Other HCBS Enrollees	\$	1,721.82	
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$	4,560.85	
64.9 Waiver Form	All Other Non-HCBS Enrollees	\$	3,981.50	
64.10 Waiver Form	All MEGS	\$	17.93	

Waiver Form	Medicaid Eligibility Group (MEG)	Q1 Quarterly Actual Costs			Q2 Quarterly Actual Costs			Q3 Quarterly Actual Costs			Q4 Quarterly Actual Costs		
		Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual
		Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs
		Start 07/01/2013	Waiver Form Costs		Start 10/01/2013	Waiver Form Costs		Start 01/01/2014	Waiver Form Costs		Start 04/01/2014	Waiver Form Costs	
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.9 Waiver Form	All Other HCBS Enrollees		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.9 Waiver Form	All Other Non-HCBS Enrollees		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.10 Waiver Form	All MEGS		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	

Projected Year 2 - 07/01/14 - 06/30/15

Waiver Form	Medicaid Eligibility Group (MEG)	State Completion Section - For Waiver Submission		
		P1 Projected PMPM		
		From Column I (services)	From Column G (Administration)	
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare	\$	1,472.08	
64.9 Waiver Form	All Other HCBS Enrollees	\$	1,842.35	
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare	\$	4,865.41	
64.9 Waiver Form	All Other Non-HCBS Enrollees	\$	4,260.21	
64.10 Waiver Form	All MEGS	\$	18.72	

Waiver Form	Medicaid Eligibility Group (MEG)	Q5 Quarterly Actual Costs			Q6 Quarterly Actual Costs			Q7 Quarterly Actual Costs			Q8 Quarterly Actual Costs		
		Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual	Member Months	Actual	Actual
		Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs	Actuals	Aggregate	PMPM Costs
		Start 07/01/2014	Waiver Form Costs		Start 10/01/2014	Waiver Form Costs		Start 01/01/2015	Waiver Form Costs		Start 04/01/2015	Waiver Form Costs	
64.9 Waiver Form	HCBS Enrollees 65+ enrolled in Medicare		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.9 Waiver Form	All Other HCBS Enrollees		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.9 Waiver Form	Non-HCBS Enrollees 65+ enrolled in Medicare		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.9 Waiver Form	All Other Non-HCBS Enrollees		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	
64.10 Waiver Form	All MEGS		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	

Appendix D7.a. Summary 3Y

Row #
Column
Letter

Cost Effectiveness Summary Sheet Initial Waiver							
Medicaid Eligibility Group (MEG)	Base Year Member Months	Base Year Per Member Per Month (PMPM) Costs					Total Actual Waiver Costs
		BY PMPM State Plan Service Costs	BY PMPM Incentive Costs	BY PMPM 1915(b)(3) Service Costs (0 Initial)	BY PMPM Administration Costs	BY PMPM Total Actual Waiver Costs	
HCBS Enrollees 65+ enrolled in Medicare	407,561	\$ 1,030.32	\$ -	\$ -	\$ 12.49	\$ 1,042.81	
All Other HCBS Enrollees	11,267	\$ 1,289.46	\$ -	\$ -	\$ 12.49	\$ 1,301.95	
Non-HCBS Enrollees 65+ enrolled in Medicare	577,814	\$ 3,722.30	\$ -	\$ -	\$ 12.49	\$ 3,734.79	
All Other Non-HCBS Enrollees	96,596	\$ 3,255.61	\$ -	\$ -	\$ 12.49	\$ 3,268.10	
Total	1,095,068						
BY Overall PMPM for BY (BY MMs)		\$ 2,653.39	\$ -	\$ -	\$ 12.49	\$ 2,665.88	
Total Base Year Expenditures						\$2,919,291,666	

Medicaid Eligibility Group (MEG)	Projected Year 1 Member Months (P1)	P1 Projected PMPM Costs (Totals weighted on Projected Year 1 Member Months)					Overall BY to P1 Change (annual)
		P1 PMPM State Plan Service Cost Projection	P1 PMPM Incentive Cost Projection	P1 PMPM 1915(b)(3) Service Cost Projection	P1 PMPM Administration Cost Projection	P1 PMPM Projected Waiver Costs	
HCBS Enrollees 65+ enrolled in Medicare	271,600	\$ 1,375.78	\$ -	\$ -	\$ 17.83	\$ 1,393.61	7.5%
All Other HCBS Enrollees	8,853	\$ 1,721.82	\$ -	\$ -	\$ 17.83	\$ 1,739.65	7.5%
Non-HCBS Enrollees 65+ enrolled in Medicare	403,528	\$ 4,550.85	\$ -	\$ -	\$ 17.83	\$ 4,568.68	6.2%
All Other Non-HCBS Enrollees	62,198	\$ 3,981.60	\$ -	\$ -	\$ 17.83	\$ 3,999.43	6.2%
Total	744,179						
P1 Weighted Average PMPM Casemix for BY (BY MMs)		\$ 3,288.72	\$ -	\$ -	\$ 17.83	\$ 3,306.56	5.5%
P1 Weighted Average PMPM Casemix for P1 (P1 MMs)		\$ 3,216.42	\$ -	\$ -	\$ 17.83	\$ 3,234.26	5.8%
Total Projected Waiver Expenditures P1 Including casemix						\$2,482,772,915	

Medicaid Eligibility Group (MEG)	Projected Year 2 Member Months (P2)	P2 Projected PMPM Costs (Totals weighted on Projected Year 2 Member Months)					Overall P1 to P2 Change (annual)	Overall BY to P2 Change (monthly)	Overall BY to P2 Change (annualized)
		P2 PMPM State Plan Service Cost Projection	P2 PMPM Incentive Cost Projection	P2 PMPM 1915(b)(3) Service Cost Projection	P2 PMPM Administration Cost Projection	P2 PMPM Projected Waiver Costs			
HCBS Enrollees 65+ enrolled in Medicare	457,096	\$ 1,472.08	\$ -	\$ -	\$ 18.72	\$ 1,490.81	7.0%	0.6%	7.4%
All Other HCBS Enrollees	11,534	\$ 1,847.35	\$ -	\$ -	\$ 18.72	\$ 1,866.07	7.0%	0.6%	7.4%
Non-HCBS Enrollees 65+ enrolled in Medicare	713,563	\$ 4,889.41	\$ -	\$ -	\$ 18.72	\$ 4,888.14	7.0%	0.4%	5.5%
All Other Non-HCBS Enrollees	106,986	\$ 4,360.21	\$ -	\$ -	\$ 18.72	\$ 4,278.93	7.0%	0.4%	5.5%
Total	1,292,179								
P2 Weighted Average PMPM Casemix for BY (BY MMs)		\$ 3,519.94	\$ -	\$ -	\$ 18.72	\$ 3,537.66	7.0%	0.5%	5.8%
P2 Weighted Average PMPM Casemix for P2 (P2 MMs)		\$ 3,689.77	\$ -	\$ -	\$ 18.72	\$ 3,607.49	6.1%	0.5%	6.2%
Total Projected Waiver Expenditures P2 Including casemix						\$4,661,626,120			

Medicaid Eligibility Group (MEG)	Projected Year 3 Member Months (P3)	P3 Projected PMPM Costs (Totals weighted on Projected Year 3 Member Months)					Overall P2 to P3 Change (annual)	Overall BY to P3 Change (monthly)	Overall BY to P3 Change (annualized)
		P3 PMPM State Plan Service Cost Projection	P3 PMPM Incentive Cost Projection	P3 PMPM 1915(b)(3) Service Cost Projection	P3 PMPM Administration Cost Projection	P3 PMPM Projected Waiver Costs			
HCBS Enrollees 65+ enrolled in Medicare	457,981	\$ 1,575.13	\$ -	\$ -	\$ 19.66	\$ 1,594.79	7.0%	0.6%	7.3%
All Other HCBS Enrollees	11,808	\$ 1,971.31	\$ -	\$ -	\$ 19.66	\$ 1,990.97	7.0%	0.6%	7.3%
Non-HCBS Enrollees 65+ enrolled in Medicare	757,574	\$ 5,210.27	\$ -	\$ -	\$ 19.66	\$ 5,229.93	7.0%	0.6%	5.8%
All Other Non-HCBS Enrollees	116,770	\$ 4,598.42	\$ -	\$ -	\$ 19.66	\$ 4,578.08	7.0%	0.5%	5.8%
Total	1,354,134								
P3 Weighted Average PMPM Casemix for BY (BY MMs)		\$ 3,795.26	\$ -	\$ -	\$ 19.66	\$ 3,784.92	7.0%	0.6%	6.0%
P3 Weighted Average PMPM Casemix for P3 (P3 MMs)		\$ 3,869.53	\$ -	\$ -	\$ 19.66	\$ 3,889.19	7.8%	0.6%	6.5%
Total Projected Waiver Expenditures P3 Including casemix						\$5,266,486,695			

Medicaid Eligibility Group (MEG)	Projected Year 1 - 3 Member Months (P1 + P2 + P3)
HCBS Enrollees 65+ enrolled in Medicare	1,196,576
All Other HCBS Enrollees	30,195
Non-HCBS Enrollees 65+ enrolled in Medicare	1,874,686
All Other Non-HCBS Enrollees	288,054
Total	3,390,482

Total Projected Waiver Expenditures P1 + P2 + P3 Including casemix **\$12,410,783,633**

Modify Line items as necessary to fit the MEGs of the program.
 State Crystal Ball Section
 To modify the formulas as necessary to fit the length of the program complete the 5 section. The formulas will automatically update over this data.

NUMBER OF MONTHS OF DATA	
BY	12
Gap (end of BY to P1)	36
P1	12
P2	12
P3	12
TOTAL	84
(Months-12)	72