

Performance Audit
2022 Achieved Savings Rebate Financial Report
For the Florida Agency for Health Care Administration

Auditee: Sunshine State Health Plan, Inc.

Year ended December 31, 2022

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Performance Audit Report on 2022 Achieved Savings Rebate Financial Report

Medicaid Program Finance
Florida Agency for Health Care Administration

Auditee: Sunshine State Health Plan, Inc.

This report presents the results of the 2022 Achieved Savings Rebate (ASR) Financial Report performance audit conducted to address the audit objectives related to Sunshine State Health Plan, Inc. (hereinafter referred to as “the Plan”) for the year ended December 31, 2022.

Thomas Howell Ferguson P.A. was engaged under Contract MED218, dated November 1, 2021, to conduct the audit of the Plan’s Managed Medical Assistance (MMA) Revenue and Expense Schedule – Summary, MMA Related-Party Transaction Schedule – Summary, Long Term Care (LTC) Revenue and Expense Schedule – Summary, LTC Related-Party Transaction Schedule – Summary, the Achieved Savings Rebate Exhibit, and the Medical Loss Ratio Exhibit within the Annual ASR Financial Report. This performance audit report presents the results of our audit.

We conducted this performance audit in accordance with *Government Auditing Standards* issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

Our audit objective was to evaluate the 2022 MMA Revenue and Expense Schedule – Summary, MMA Related-Party Transaction Schedule – Summary, LTC Revenue and Expense Schedule – Summary, LTC Related-Party Transaction Schedule – Summary, the Achieved Savings Rebate Exhibit, and the Medical Loss Ratio Exhibit (collectively, the Schedules) within the Annual ASR Financial Report to determine the Schedules were prepared in accordance with Florida Statute 409.967(3) and ASR Financial Report Instructions, which include annual revenue, benefit and administrative expenses, and income or losses reported by the Plan. The results of this performance audit will allow the Florida Agency for Health Care Administration (AHCA) to comply with Florida Statute 409.967 to verify the Achieved Savings Rebate calculated by the Plan as well as the Medical Loss Ratio (MLR) calculations. The Plan’s Schedules have been included at Appendix B.

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Accuracy, Allowability, and Reasonableness of Claimed Amounts

We noted the following exceptions regarding the accuracy, allowability, and reasonableness of amounts claimed in the Schedules within the ASR financial report for the year ended December 31, 2022:

MMA – Related-Party Transaction Schedule – Summary

Adjustment No. 01:

The Plan reported expenses of \$5,451,556 with a related party, National Imaging Association, Inc. on line 11.4, Total Services Paid by Settlements/AP, and line 12.7, Total Administrative Expenses on the MMA Revenue and Expense Schedule – Summary. This amount was not reported on the MMA Related-Party Transaction Schedule – Summary which resulted in an adjustment of \$5,451,556.

Achieved Savings Rebate Exhibit

Adjustment No. 02:

The amount reported on line 1.1, Total Revenue from Revenue & Expense Schedules, includes DPP Administration Fees of \$7,376,624. AHCA has determined that DPP Administration Fee revenue is to be excluded from the Revenue Subject to ASR and, therefore, included on line 1.5, Less: Financial Incentive Payments Outside of Capitation Rate. The adjustment needed to exclude DPP Administration Fees from Revenue Subject to ASR on line 1.5 is \$7,376,624.

Achieved Savings Rebate

Florida Statute 409.967(3)(f) states that the achieved savings rebate is established by determining pretax income as a percentage of revenues and applying the following income sharing ratios:

- One hundred percent of income up to and including 5 percent of revenue shall be retained by the plan.
- Fifty percent of income above 5 percent and up to 10 percent shall be retained by the plan, and the other 50 percent refunded to the state.
- One hundred percent of income above 10 percent of revenue shall be refunded to the state.

Determined on this basis and using the adjusted amounts as discussed above and summarized in Appendix A, the Plan's calculated rebate due to the state is \$0. However, the final calculated rebate is to be determined by AHCA.

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Medical Loss Ratio

42 CFR § 438.8 provides that the medical loss ratio is established by the following calculation:

1. Numerator: Total Benefit Expense after Reinsurance (Line 2.8) plus Total Florida-Specific Contributions (Line 3.3) plus Total of Defined Expenses Incurred for Improving Health Care Quality (Line 4.6) plus Deductible Fraud and Abuse Detection/Recovery Expenses-(MLR Only) (Line 5.0).
2. Denominator: Revenue Subject to MLR (Line 1.5).

Determined on this basis, and using the adjusted amounts as discussed above, the Plan's stand-alone calculated ratio is 90%. However, the final calculated ratio is to be determined by AHCA.

Conclusion

Based upon the performance audit procedures performed and the results obtained, the audit objective has been met. We conclude that, with the exception of the amounts previously described above, the Plan has prepared its 2022 MMA Revenue and Expense Schedule – Summary, MMA Related-Party Transaction Schedule – Summary, LTC Revenue and Expense Schedule – Summary, LTC Related-Party Transaction Schedule – Summary, the Achieved Savings Rebate Exhibit, and the Medical Loss Ratio Exhibit in accordance with Florida Statute 409.967 and the ASR Financial Report Instructions, regarding accuracy, allowability, and reasonableness of claimed amounts for the year ended December 31, 2022 such that the Florida Agency for Healthcare Administration can validate the Plan's Achieved Savings Rebate and Medical Loss Ratio determinations. Our performance audit resulted in no changes to the 2022 Achieved Savings Rebate and Medical Loss Ratio calculations, other than those described above and summarized in Appendix A. We recommend AHCA consider the results of this audit in completing closeout procedures regarding the Plan's 2022 contract year.

This performance audit did not constitute an audit of financial statements in accordance with auditing standards generally accepted in the United States of America or *Government Auditing Standards*. In planning and conducting our performance audit of the ASR Financial Report, we considered the Plan's internal control associated with the completion of the Annual ASR Financial Report to determine the procedures that are appropriate in the circumstances for achieving the audit objectives, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we do not express an opinion on the effectiveness of the Plan's internal control, or the Plan's financial management system.

This report is intended for the information and use of the Florida Agency for Healthcare Administration and management of the Plan. The report is not intended to be, and should not be, used by anyone other than these specified parties.



Tallahassee, Florida
August 28, 2023

Sunshine State Health Plan, Inc.

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For the year ended December 31, 2022

BACKGROUND

Plan Overview

Sunshine State Health Plan, Inc. (the Plan) is a wholly owned subsidiary of Centene Corporation (Centene), a Delaware stock corporation. Centene owns all of the issued and outstanding shares of the Plan’s stock through Centene’s wholly-owned subsidiary, Sunshine Health Holding Company, a Florida corporation.

The Plan contracts with the Florida Agency for Healthcare Administration (AHCA) to provide healthcare services to eligible Medicaid recipients under Statewide Medicaid Managed Care (SMMC) Managed Medical Assistance (MMA) and Long Term Care (LTC) programs.

OBJECTIVE, SCOPE, AND METHODOLOGY

Objective

Our objective was to conduct a performance audit of the Plan’s 2022 Managed Medical Assistance Revenue and Expense Schedule – Summary, Managed Medical Assistance Related-Party Transaction Schedule – Summary, Long Term Care Revenue and Expense Schedule – Summary, Long Term Care Related-Party Transaction Schedule – Summary, the Achieved Savings Rebate Exhibit, and Medical Loss Ratio Exhibit (collectively “the Schedules”) within the Annual Achieved Savings Rebate (ASR) Financial Report. We evaluated the Schedules to determine whether amounts claimed were accurate, allowable, and reasonable in accordance with Florida Statute 409.967(3) and the ASR Financial Report Instructions, such that the Florida Agency for Healthcare Administration can validate the Plan’s Achieved Savings Rebate.

Scope

We conducted our performance audit in accordance with *Government Auditing Standards*. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. The performance audit scope included quarterly and year-to-date amounts reported by the Plan for the year ended December 31, 2022, considering revenue and medical benefits “paid dates” through March 31, 2023.

Sunshine State Health Plan, Inc.

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Scope (continued)

Our scope was limited to evaluating the claimed amounts reported by the Plan for the year ended December 31, 2022. We included the following components of the MMA and LTC revenue and expense summary schedules for accuracy, allowability, and reasonableness:

- Quarterly and annual revenue;
- Benefit and administrative expenses;
- Other income or losses;
- Pre-tax income (loss) reported by the Plan;
- Income tax expense; and
- Net underwriting gain (loss).

We included the following components of the MMA and LTC related-party schedules for accuracy, allowability, and reasonableness:

- Related-party vendors, their affiliation, service type, and payment methodology; and
- Related-party expenses.

We included the following components of the ASR Exhibit for accuracy, allowability, and reasonableness:

- Annual revenue;
- Benefit and administrative expenses;
- Pre-tax income (loss) reported by the Plan;
- Pre-tax income (loss) as a percent of revenue; and
- The Preliminary Achieved Savings Rebate calculation.

We included the following components of the MLR Exhibit for accuracy, allowability, and reasonableness:

- Annual revenue;
- Benefit expenses;
- Florida-Specific Contributions;
- Improving Health Care Quality Expenses;
- Deductible Fraud and Abuse Detection/Recovery Expense; and
- The Preliminary Medical Loss Ratio.

This performance audit did not constitute an audit of the Plan's underlying financial statements and accounting records in accordance with auditing standards generally accepted in the United States of America or *Government Auditing Standards*. As such, as agreed by AHCA, the scope of the performance audit excluded the following items:

Sunshine State Health Plan, Inc.

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Scope (continued)

- Tests of any opening balances (accruals, receivable, and payables included in the prior year ASR Schedules which may impact prior calendar year adjustments in the 2022 ASR Schedules).
- Tests of underlying data or transactions related to reported amounts allocated from a parent or other related entity, including but not limited to, allocations included in medical benefits, administrative expenses, defined expenses improving health care quality, federal income taxes, and net investment income. We obtained an understanding of the allocation methodology used by the Plan, evaluated whether the allocations comply with administrative service or related party transaction agreements, if any, and agreed amounts to internal documentation.

Methodology

We performed the following procedures as part of our performance audit:

1. We conducted planning procedures which included the following:
 - Communications with the Plan;
 - Developing an understanding of the Plan and its environment, including internal control;
 - Performance of risk assessments associated with the preparation of the Annual ASR Financial Report; and
 - Obtained and read the entity's audited statutory-basis financial statements for the year ended December 31, 2022 and the Annual Statement submitted to the Florida Office of Insurance Regulation.
2. We performed substantive testing procedures including the following:
 - Performed applicable walk-throughs of transaction cycles critical to generating information included in summary schedules, ASR Exhibit;
 - Verification of the mathematical accuracy of the 2022 summary schedules, ASR Exhibit, and MLR Exhibit;
 - Inspection of quarterly and annual reconciliations of amounts in the MMA and LTC revenue and expense summary schedules to the Plan's general ledger or other summarized amounts from detailed accounting records;
 - Reconciliation of amounts independently audited in the Plan's financial statements to amounts reported in the MMA and LTC revenue and expense summary schedules;
 - Reconciliation of the Plan's annual revenue to monthly state capitation reports;

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Methodology (continued)

- Selected a representative sample* of transactions included in the Plan's fee for service medical benefit expense of the MMA and LTC revenue and expense summary schedules and agreed to supporting documentation;
- Selected a representative sample* of vendor payments included in the Plan's subcapitated expenses of the MMA and LTC revenue and expense summary schedules and performed recalculations in accordance with applicable contracts or agreements;
- Selected a representative sample* of significant other revenue and expense transactions and obtained documentation supporting those transactions in the MMA and LTC revenue and expense summary schedules;
- Performed evaluation of revenues and expenses of the MMA and LTC revenue and expense summary schedules for proper classification and proper exclusion of disallowed amounts;
- Performed verification of the information disclosed on the MMA and LTC related-party schedules through independent documentation and inquiry with Plan management;
- Traced amounts reported on the MMA and LTC revenue and expense schedules to the ASR Exhibit;
- Performed evaluation of proper recording and classification of Administrative Expense transactions and recalculation of certain administrative expenses in accordance with ASR Exhibit instructions;
- Performed evaluation of proper recording and calculation of Actuarially Sound Administrative Maximum calculation reported on line 4.0 of the ASR Exhibit;
- Performed evaluation of the proper calculation of Pre-tax Income (Loss) in accordance with ASR Exhibit instructions, specifically as it relates to lines 7.1 through 7.3 of the ASR Exhibit;
- Performed evaluation of proper recording and calculation of Preliminary Achieved Savings Rebate reported on line 7.3 of the ASR Exhibit;
- Selected a representative sample* of provider medical payments included in the Plan's subcapitated expenses of the MLR Exhibit and agreed to supporting documentation and determined that administrative costs were properly excluded;
- Performed evaluation of proper reporting and classification of amounts associated with Florida-Specific Contributions used for medical loss ratios;
- Performed evaluation of proper reporting and classification of amounts associated with Improving Health Care Quality Expenses Incurred used for medical loss ratios;
- Performed evaluation of proper reporting and classification of amounts associated with Deductible Fraud and Abuse Detection/Recovery Expenses used for medical loss ratios; and

Sunshine State Health Plan, Inc.

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Methodology (continued)

- Performed evaluation of the proper calculation of the Medical Loss Ratio in accordance with MLR Exhibit instructions, specifically as it relates to line 6.0 of the MLR Exhibit.

*Representative sample was determined in accordance with AICPA Audit Guide *Audit Sampling* AU-C 530.

* * * * *

RESULTS

Based on results of procedures performed, we identified adjustments, as described in the Accuracy, Allowability, and Reasonableness of Claimed Amounts section and summarized in Appendix A, needed for compliance with F.S. 409.967 and ASR Financial Report Instructions.

Appendix A

Adjustments to Amounts Reported in the MMA – Related-Party Transaction Schedule - Summary

EXPENSES		Vendor Name	Reported Annual Amount	Adjustment No. 1	Adjusted Annual Amount
Hospital Services	1.1	Vendor #1	\$ -	\$ -	\$ -
	1.2	Vendor #2	-	-	-
	1.3	Vendor #3	-	-	-
	1.4	Vendor #4	-	-	-
	1.5	Vendor #5	-	-	-
	1.6	Total Hospital Services	-	-	-
Professional Services	2.1	Involve PeopleCare, Inc. (Nurse Helpline)	-	-	-
	2.2	Involve PeopleCare, Inc. (Disease Management)	-	-	-
	2.3	Access Medical Acquisitions, Inc.	8,266,941	-	8,266,941
	2.4	Access Medical Acquisitions, Inc.	7,723,356	-	7,723,356
	2.5	Vendor #5	-	-	-
	2.6	Total Professional Services	15,990,297	-	15,990,297
Mental Health	3.1	Vendor #1	-	-	-
	3.2	Vendor #2	-	-	-
	3.3	Vendor #3	-	-	-
	3.4	Vendor #4	-	-	-
	3.5	Vendor #5	-	-	-
	3.6	Total Mental Health	-	-	-
Dental	4.1	Vendor #1	-	-	-
	4.2	Vendor #2	-	-	-
	4.3	Vendor #3	-	-	-
	4.4	Vendor #4	-	-	-
	4.5	Vendor #5	-	-	-
	4.6	Total Dental	-	-	-
Transportation	5.1	Vendor #1	-	-	-
	5.2	Vendor #2	-	-	-
	5.3	Vendor #3	-	-	-
	5.4	Vendor #4	-	-	-
	5.5	Vendor #5	-	-	-
	5.6	Total Transportation	-	-	-
Pharmacy	6.1	Involve Pharmacy Solutions, Inc.	1,187,654,370	-	1,187,654,370
	6.2	Vendor #2	-	-	-
	6.3	Vendor #3	-	-	-
	6.4	Vendor #4	-	-	-
	6.5	Vendor #5	-	-	-
	6.6	Total Pharmacy	1,187,654,370	-	1,187,654,370
Other Services	7.1	Involve Vision of Florida, Inc.	3,015,242	-	3,015,242
	7.2	U.S. Medical Management, LLC	-	-	-
	7.3	National Imaging Association, Inc.	-	(901,537)	(901,537)
	7.4	Vendor #4	-	-	-
	7.5	Vendor #5	-	-	-
	7.6	Total Other Services	3,015,242	(901,537)	2,113,705
Administrative Expense	8.1	Centene Management Company, LLC	536,100,641	-	536,100,641
	8.2	Interpreta, Inc.	1,842,046	-	1,842,046
	8.3	National Imaging Association, Inc.	-	6,353,093	6,353,093
	8.4	Vendor #4	-	-	-
	8.5	Vendor #5	-	-	-
	8.6	Total Administrative Expense	537,942,687	6,353,093	544,295,780
9	Grand Total	1,744,602,596	\$5,451,556	1,750,054,152	

Adjustments to Amounts Reported in the Annual Achieved Savings Rebate Exhibit

	<u>Reported Annual Amount</u>	<u>Adjustment No. 2</u>	<u>Adjusted Annual Amount</u>
REVENUES			
1.1 Total Revenue from Revenue & Expense Schedules	\$ 6,871,919,677	\$ -	\$ 6,871,919,677
1.2 Federal Taxes and Assessments-ACA § 9010	-	-	-
1.3 State Insurance, Premium and other Taxes	-	-	-
1.4 Regulatory Authority Licenses and Fees	-	-	-
1.5 Less: Financial Incentive Payments Outside of Capitation Rate	-	(7,376,624)	(7,376,624)
1.6 Revenue Subject to ASR	6,871,919,677	(7,376,624)	6,864,543,053
EXPENSES			
Benefit Expenses			
2.1 Total Benefits Paid through FFS and Subcapitation During the Year	5,893,356,642	-	5,893,356,642
2.2 Incurred but not Paid (IBNP) Ending Balance	43,539,755	-	43,539,755
2.3 Settlements/AP	130,853,661	-	130,853,661
2.4 Total Benefit Expense before Reinsurance	6,067,750,058	-	6,067,750,058
2.5 Net Cost of Reinsurance	1,073,493	-	1,073,493
2.6 Total Benefit Expense after Reinsurance	6,068,823,551	-	6,068,823,551
Administrative Expenses			
3.1 Total Administrative Expenses from Revenue & Expense Schedule	675,685,800	-	675,685,800
3.2 Less: Compliance/Regulatory	(10,607,637)	-	(10,607,637)
3.3 Less: Lobbying/Political expenses	(591,754)	-	(591,754)
3.4 Less: Cash-value of Executive Bonuses Above Base Salary	(2,168,175)	-	(2,168,175)
3.5 Less: Other Non-allowed expenses	(1,632,800)	-	(1,632,800)
3.6 Administrative Expense Subject to ASR	660,685,434	-	660,685,434
4.0 Actuarially-sound Administrative Expense Maximum	696,666,536	-	696,666,536
5.0 Administrative Expenses Subject to ASR	660,685,434	-	660,685,434
6.0 Total Benefit and Administrative Expense subject to ASR	6,729,508,985	-	6,729,508,985
Calculation of Pre-Tax Income and ASR			
7.1 Pre-tax Income	\$ 142,410,691	\$ (7,376,624)	\$ 135,034,068
7.2 Pre-tax Income as a Percent of Revenue	2.1%		2.0%
7.3 Preliminary Achieved Savings Rebate	\$ -		\$ -

Appendix B

Expanded Benefits	10.1	Expanded Benefits FFS	6,996,662	3,452,083	711,864	994,111	684,782	401,061	31	3,392	166,199	31,931	264,504	286,703
	10.2	Expanded Benefits Subcapitation	820,872	711,166	31,466	34,020	10,729	10,776	8,634	278	1,730	198	10,197	1,678
	10.3	Ending IBNP for Expanded Benefits	113,051	46,461	12,792	21,354	17,537	1,083	-	25	1,910	7	3,427	8,455
	10.4	Expanded Benefits Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	10.5	Total Expanded Benefits	7,930,585	4,209,710	756,122	1,049,485	713,049	412,920	8,666	3,695	169,838	32,137	278,128	296,835
Totals Before and After Reinsurance	11.1	Total Services Paid Directly FFS	1,005,223,120	527,247,238	66,726,332	193,136,222	95,234,125	11,431,139	12,453,439	269,435	26,411,052	33,834,680	9,184,984	29,294,473
	11.2	Total Services Paid Directly – IBNP	28,346,336	16,766,410	1,901,369	4,616,266	2,280,163	386,482	-	11,486	299,488	1,248,697	200,454	635,520
	11.3	Total Services Paid through Subcapitation	70,308,665	61,208,826	2,508,395	3,688,236	1,159,080	331,678	645,063	8,541	202,503	29,453	313,243	213,646
	11.4	Total Services Paid by Settlements/AP	42,007,355	24,651,500	2,624,353	6,089,328	3,014,858	1,645,030	15,296	46,282	406,652	1,703,049	944,083	866,923
	11.5	TRL & Fraud/Abuse Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.6.1	Premium Deficiency Reserve	-	-	-	-	-	-	-	-	-	-	-	-
	11.7	Subtotal Benefit Expense before Reinsurance	1,145,885,475	629,873,974	73,760,449	207,530,052	101,688,227	13,794,330	13,113,798	335,744	27,319,695	36,815,879	10,642,765	31,010,561
	11.8	Reinsurance Premiums	287,011	294,015	14,322	15,733	5,506	(21,288)	-	(621)	286	107	(21,617)	569
	11.9	Reinsurance Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.10	Net cost of Reinsurance	287,011	294,015	14,322	15,733	5,506	(21,288)	-	(621)	286	107	(21,617)	569
	11.11	Grand Total Medical Benefit Expense Net of Reinsurance	1,146,172,486	630,167,989	73,774,771	207,545,785	101,693,732	13,773,042	13,113,798	335,123	27,319,982	36,815,986	10,621,147	31,011,130
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees														
JANUARY - MARCH (Q1)														
			Total	Health Plan	Corporate									
Administrative Expenses	12.1	Salaries & Benefits	123,379,565	(32,784)	123,412,349									
	12.2	Administrative Services	3,673,665	2,116,681	1,556,984									
	12.3	Information Systems	12,910,236	11,264,568	1,645,667									
	12.4	Marketing Expenses	5,362,422	1,849,423	3,512,999									
	12.5	General Administration	8,825,407	193,247	8,632,160									
	12.6	Compliance/Regulatory	2,087,831	2,087,831	-									
	12.7	Total Administrative Expenses	156,239,126	17,478,967	138,760,159									
Government-Mandated Fees, Other Than Income Taxes	13.1	State Premium tax	-	-	-									
	13.2	Department of Insurance Assessments	-	-	-									
	13.3	Section 9010 Health Insurance Providers Fee	-	-	-									
	13.4	Other 1	-	-	-									
	13.5	Other 2	-	-	-									
	13.6	Other 3	-	-	-									
	13.7	Total	-	-	-									
14.0	Grand Total Expenses	1,302,411,612												
15.0	Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	56,113,995												
16.0	Income Tax Expense	15,425,737												
17.0	Net Underwriting Gain (Loss)	40,688,258												

MANAGED MEDICAL ASSISTANCE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary		APRIL - JUNE (Q2)											
		Total	TANF Non-SMI	TANF SMI	SSI Medicaid Only Non-SMI	SSI Medicaid Only SMI	Dual Eligible	Child Welfare	HIV/AIDS Dual Eligible	HIV/AIDS Medicaid Only	Private Duty Nursing	LTC Dual Eligible	LTC Medicaid Only
MEMBER MONTHS		4,633,245.4	3,899,714.6	179,653.6	250,900.6	80,887.6	77,309.1	41,867.1	2,106.0	13,508.9	1,412.4	73,325.5	12,559.9
REVENUES													
Revenues	1.1 Capitalation	1,300,137,040	704,022,122	91,309,772	235,513,200	115,463,886	17,064,029	16,433,817	324,601	44,760,145	35,631,739	9,083,026	30,530,702
	1.2.1 Pharmacy Drug High Risk Pool	6,716,958	2,316,065	299,414	1,020,590	499,568	1,302,180	52,781	25,902	202,150	164,887	696,268	137,155
	1.3 Hepatitis C Kick Payments	-	-	-	-	-	-	-	-	-	-	-	-
	1.4.1 Maternity Kick Payments	24,225,971	22,018,540	1,765,801	204,506	114,270	-	22,237	-	100,617	-	-	-
	1.5 ACA § 9010 related payments	-	-	-	-	-	-	-	-	-	-	-	-
	1.6 Other Revenue	574,734	420,722	54,390	43,808	21,444	2,020	9,588	40	8,677	7,078	1,080	5,887
	1.7 Total Revenue	1,331,654,704	728,777,449	93,429,377	236,782,103	116,099,168	18,368,229	16,518,422	350,543	45,071,589	35,803,703	9,780,374	30,673,745
BENEFIT EXPENSES													
	2.1 Inpatient FFS	162,049,837	89,346,646	7,227,591	35,220,044	15,153,259	771,481	1,789,855	16,701	2,921,245	1,698,749	872,553	7,031,713
Hospital Services	2.2 Ending IBNP for Inpatient Hospital Services	6,179,548	3,941,657	374,137	1,024,236	483,266	-	-	-	74,124	63,543	-	218,585
	2.3 Outpatient FFS: ER	64,823,532	49,490,994	5,155,215	4,985,813	3,164,853	156,037	473,810	2,246	626,042	63,487	130,637	574,397
	2.4 Outpatient FFS: Other than ER	69,854,819	44,853,620	3,465,333	13,967,041	4,264,302	480,982	705,619	26,453	646,732	377,312	156,959	910,466
	2.5 Ending IBNP for Outpatient Hospital Services	5,812,365	4,104,587	375,636	826,781	325,646	26,683	-	1,260	55,685	19,178	12,203	64,705
	2.6 Subcapitated Outpatient Hospital Services	-	-	-	-	-	-	-	-	-	-	-	-
	2.7 Hospital Settlements/AP	(1,134,576)	(1,071,788)	(141,587)	(210,857)	(106,835)	340,148	(53,455)	9,950	(9,672)	(63,597)	199,343	(26,226)
	2.7.1 Transplant Services	2,797,066	1,113,497	368,272	981,620	124,001	8,214	5,441	-	91,802	-	6,228	97,992
	2.8 Total Hospital Services	310,382,590	191,779,213	16,824,598	56,794,679	23,408,491	1,783,544	2,921,271	56,610	4,405,959	2,158,672	1,377,923	8,871,631
Professional Services	3.1 Primary Care FFS	82,341,125	65,979,557	3,686,355	6,173,389	3,104,923	278,955	959,338	7,284	464,630	82,714	218,556	1,385,425
	3.2 Specialty Care FFS	119,895,118	74,430,032	7,092,357	21,186,544	9,335,681	1,143,452	1,193,912	40,923	1,436,320	613,510	787,798	2,634,589
	3.3 Other Professional FFS	-	-	-	-	-	-	-	-	-	-	-	-
	3.4 § 1202 PCP Payments to providers	-	-	-	-	-	-	-	-	-	-	-	-
	3.5 Subcapitated Professional Services	48,658,538	43,182,870	1,719,679	2,335,317	718,323	88	413,587	-	131,708	19,757	60	137,149
	3.6 Ending IBNP for Professional Services	8,566,136	5,943,443	457,043	1,219,159	555,432	52,608	-	1,741	84,812	31,444	40,823	179,631
	3.7 Professional Settlements/AP	28,115,662	16,366,093	1,757,916	4,375,938	2,155,212	838,119	(35,531)	23,412	311,912	1,202,475	480,510	639,607
	3.8 Total Physician Services	287,576,579	205,901,995	14,713,349	35,290,347	15,869,571	2,313,221	2,531,306	73,361	2,429,381	1,949,900	1,527,747	4,976,400
Maternity Services	4.1.1 Maternity Services	21,228,817	19,163,766	1,620,496	185,191	127,538	10,056	20,682	-	-	-	-	7,117
	4.2.1 Ending IBNP for Maternity Services	1,090,508	695,587	66,024	180,748	85,282	-	-	-	13,081	11,213	-	38,574
	4.3.1 Maternity Settlements/AP	(84,817)	(80,123)	(10,585)	(15,763)	(7,987)	25,428	(3,996)	744	(723)	(4,754)	14,902	(1,961)
	4.4.1 Total Maternity Services	22,234,508	19,779,229	1,675,935	350,176	204,833	35,484	16,686	744	106,328	6,459	14,902	43,730
Mental Health	5.1 Mental Health & Substance Abuse FFS	53,825,722	25,141,515	10,021,879	3,793,414	8,499,194	1,354,119	2,655,766	38,276	798,508	10,274	732,708	780,069
	5.2 Mental Health & Substance Abuse Subcapitation	-	-	-	-	-	-	-	-	-	-	-	-
	5.3 Ending IBNP for Mental Health & Substance Abuse	2,748,150	1,350,250	542,769	212,251	481,168	47,993	-	1,265	44,644	610	23,415	43,784
	5.4 Mental Health Settlements/AP	(206,522)	(195,093)	(25,773)	(38,381)	(19,447)	61,916	(9,730)	1,811	(1,761)	(11,576)	36,285	(4,774)
	5.5 Total Mental Health & Substance Abuse Services	56,367,350	26,296,672	10,538,876	3,967,283	8,960,916	1,464,028	2,646,036	41,352	841,392	(693)	792,408	819,079
Dental	6.1 Dental FFS	-	-	-	-	-	-	-	-	-	-	-	-
	6.2 Dental Subcapitation	-	-	-	-	-	-	-	-	-	-	-	-
	6.3 Ending IBNP for Dental Services	-	-	-	-	-	-	-	-	-	-	-	-
	6.4 Dental Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	6.5 Total Dental Services	-	-	-	-	-	-	-	-	-	-	-	-
Transportation	7.1 Transportation FFS	7,514,955	2,024,259	388,253	721,419	629,203	225,473	26,978	9,626	104,638	23,082	2,440,783	921,241
	7.2 Transportation Subcapitation	14,065,323	11,838,515	545,381	761,669	245,554	234,690	127,098	6,393	41,010	4,288	227,597	38,128
	7.3 Ending IBNP for Transportation	196,075	-	-	20,304	9,691	93,713	-	3,338	2,348	4,926	57,881	3,874
	7.4 Transportation Settlements/AP	(19,336)	(18,266)	(2,413)	(3,594)	(1,821)	5,797	(911)	170	(165)	(1,084)	3,397	(447)
	7.5 Total Transportation Services	21,757,016	13,844,508	931,222	1,499,798	882,627	559,673	153,164	19,527	147,832	31,212	2,724,658	962,797
Pharmacy	8.1 Prescription Drugs FFS	288,000,295	119,637,088	21,610,722	69,426,829	40,429,319	178,813	3,323,266	4,795	19,232,898	2,317,762	57,423	11,781,380
	8.2 Hepatitis C Prescription Drug FFS	3,365,290	1,491,448	416,144	707,626	451,529	-	24,013	-	249,090	-	-	25,440
	8.3 Ending IBNP for Prescription Drugs	-	-	-	-	-	-	-	-	-	-	-	-
	8.4 Prescription Drug Rebates	(2,694,460)	(989,830)	(178,954)	(723,910)	(424,556)	(30,941)	-	(1,159)	(196,169)	(25,066)	(8,496)	(115,379)
	8.5 Ending accrual for Rebates receivable	-	-	-	-	-	-	-	-	-	-	-	-
	8.6 Prescription Drugs Subcapitation	-	-	-	-	-	-	-	-	-	-	-	-
	8.7 Prescription Drug Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	8.8 Total Prescription Drugs	288,671,126	120,138,706	21,847,912	69,410,546	40,456,293	147,872	3,347,279	3,636	19,285,819	2,292,696	48,926	11,691,441
Other Services	9.1 Home Health, Private Duty Nursing, Personal Care FFS	34,134,986	2,350,467	236,887	5,659,033	1,189,947	575,484	277,507	4,238	51,251	23,790,173	-	-
	9.2 Hospice FFS	4,739,864	1,96,942	28,661	2,459,527	1,059,431	720,519	16,615	4,473	103,281	150,414	-	-
	9.2.1 Nursing Facility FFS	4,305,713	67,810	26,981	2,058,746	611,528	1,357,869	96,271	50,737	35,771	-	-	-
	9.3 DME FFS	16,278,301	6,358,354	567,767	5,373,418	1,409,050	207,906	340,060	7,708	94,697	1,919,341	-	-
	9.4 Other State Plan Services FFS	55,088,887	32,839,996	3,408,949	9,330,466	3,486,154	1,546,242	342,243	57,367	703,947	468,351	1,218,842	1,686,331
	9.5 Other Services Subcapitation	5,904,368	5,152,277	237,257	222,197	71,634	68,465	61,299	1,865	11,963	1,251	64,937	11,123
	9.6 Ending IBNP for Other Services	4,922,822	1,746,972	178,737	1,082,369	338,617	237,087	-	6,507	43,215	1,152,181	63,657	73,482
	9.7 Other Service Settlements/AP	(3,824,499)	(1,770,236)	(215,292)	(1,027,238)	(510,564)	153,441	(44,765)	4,318	(66,526)	(290,872)	88,274	(45,040)
	9.8 Total Other Services	121,550,442	46,942,582	4,470,046	25,158,518	7,655,797	4,867,014	1,089,230	137,212	977,598	27,190,838	1,435,710	1,625,896

Expanded Benefits	10.1	Expanded Benefits FFS	7,289,645	3,646,020	783,625	1,020,604	763,953	330,609	210	11,376	187,333	31,337	172,260	342,316
	10.2	Expanded Benefits Subcapitation	820,675	711,950	32,798	33,120	10,678	10,205	8,338	278	1,783	186	9,679	1,658
	10.3	Ending IBNP for Expanded Benefits	138,511	58,816	18,220	23,706	21,419	1,517	-	99	2,832	0	966	10,937
	10.4	Expanded Benefits Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	10.5	Total Expanded Benefits	8,248,830	4,416,787	834,643	1,077,430	796,050	342,332	8,548	11,753	191,948	31,524	182,905	354,911
Totals Before and After Reinsurance	11.1	Total Services Paid Directly FFS	994,839,512	537,142,182	65,926,533	182,526,815	93,379,309	9,315,271	12,251,587	281,044	27,645,986	31,521,439	6,786,250	28,063,096
	11.2	Total Services Paid Directly – IBNP	29,654,114	17,841,312	2,012,565	4,589,553	2,300,521	459,601	-	14,210	320,741	1,283,096	198,945	633,571
	11.3	Total Services Paid through Subcapitation	69,448,903	60,885,612	2,535,216	3,352,303	1,046,189	313,448	610,322	8,536	186,464	25,482	297,273	188,058
	11.4	Total Services Paid by Settlements/AP	22,845,912	13,230,587	1,362,267	3,080,105	1,508,559	1,424,849	(148,388)	40,404	233,065	830,592	822,712	461,160
	11.5	TRL & Fraud/Abuse Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.6.1	Premium Deficiency Reserve	-	-	-	-	-	-	-	-	-	-	-	-
	11.7	Subtotal Benefit Expense before Reinsurance	1,116,788,441	629,099,693	71,836,581	193,548,776	98,234,578	11,513,169	12,713,520	344,194	28,386,256	33,660,609	8,105,180	29,345,885
	11.8	Reinsurance Premiums	256,477	214,262	9,731	13,722	4,376	6,375	-	182	799	77	6,240	714
	11.9	Reinsurance Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.10	Net cost of Reinsurance	256,477	214,262	9,731	13,722	4,376	6,375	-	182	799	77	6,240	714
	11.11	Grand Total Medical Benefit Expense Net of Reinsurance	1,117,044,918	629,313,955	71,846,312	193,562,497	98,238,953	11,519,544	12,713,520	344,376	28,387,056	33,660,685	8,111,420	29,346,599
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees														
			APRIL - JUNE (Q2)											
			Total	Health Plan	Corporate									
Administrative Expenses	12.1	Salaries & Benefits	120,939,184	(32,135)	120,971,319									
	12.2	Administrative Services	3,601,002	2,074,814	1,526,188									
	12.3	Information Systems	12,654,878	11,041,761	1,613,117									
	12.4	Marketing Expenses	5,256,356	1,812,843	3,443,513									
	12.5	General Administration	8,650,845	189,424	8,461,421									
	12.6	Compliance/Regulatory	2,046,535	2,046,535	-									
	12.7	Total Administrative Expenses	153,148,801	17,133,242	136,015,558									
Government-Mandated Fees Other Than Income Taxes	13.1	State Premium tax	-	-	-									
	13.2	Department of Insurance Assessments	-	-	-									
	13.3	Section 9010 Health Insurance Providers Fee	-	-	-									
	13.4	Other 1	-	-	-									
	13.5	Other 2	-	-	-									
	13.6	Other 3	-	-	-									
	13.7	Total	-	-	-									
14.0	Grand Total Expenses	1,270,193,719												
15.0	Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	61,460,985												
16.0	Income Tax Expense	16,895,625												
17.0	Net Underwriting Gain (Loss)	44,565,360												

MANAGED MEDICAL ASSISTANCE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary		JULY - SEPTEMBER (Q3)												
		Total	TANF Non-SMI	TANF SMI	SSI Medicaid Only Non-SMI	SSI Medicaid Only SMI	Dual Eligible	Child Welfare	HIV/AIDS Dual Eligible	HIV/AIDS Medicaid Only	Private Duty Nursing	LTC Dual Eligible	LTC Medicaid Only	
MEMBER MONTHS		4,588,251.3	3,868,100.0	185,630.3	241,251.0	79,911.4	73,609.4	41,597.1	2,093.0	13,750.9	1,402.2	68,673.1	12,233.1	
REVENUES														
Revenues	1.1	Capitation	1,283,133,480	698,187,185	93,958,829	235,576,109	113,413,412	16,289,868	16,174,036	325,006	45,517,941	35,439,459	8,521,783	29,729,852
	1.2.1	Pharmacy Drug High Risk Pool	6,591,660	2,308,156	298,392	991,302	485,232	1,264,811	52,600	25,159	196,349	160,155	676,287	133,219
	1.3	Hepatitis C Kick Payments	-	-	-	-	-	-	-	-	-	-	-	-
	1.4.1	Maternity Kick Payments	23,631,709	21,250,933	1,943,735	193,683	137,524	-	6,775	-	99,060	-	-	-
	1.5	ACA § 9010 related payments	-	-	-	-	-	-	-	-	-	-	-	-
	1.6	Other Revenue	302,606	227,841	29,455	20,103	9,840	156	5,192	3	3,982	3,248	84	2,702
	1.7	Total Revenue	1,313,659,454	721,974,115	96,230,411	226,781,197	114,046,008	17,554,835	16,238,604	350,167	45,817,332	35,602,861	9,198,153	29,865,772
	BENEFIT EXPENSES													
Hospital Services	2.1	Inpatient FFS	160,997,410	86,604,571	7,897,670	35,494,938	16,816,232	709,816	2,192,674	25,654	1,958,793	2,085,967	873,132	6,337,963
	2.2	Ending IBNP for Inpatient Hospital Services	10,367,216	6,873,221	616,649	1,582,875	749,560	-	-	-	112,328	97,774	-	334,808
	2.3	Outpatient FFS: ER	62,912,627	48,012,787	5,136,641	4,670,339	3,111,677	192,952	455,646	11,538	581,037	64,527	152,241	523,241
	2.4	Outpatient FFS: Other than ER	64,436,592	41,619,319	3,305,452	12,138,256	4,273,570	448,301	684,528	29,920	645,786	308,137	174,919	808,405
	2.5	Ending IBNP for Outpatient Hospital Services	6,816,449	4,831,969	455,726	897,637	389,394	55,728	-	3,149	64,705	19,977	27,297	70,867
	2.6	Subcapitated Hospital Services	-	-	-	-	-	-	-	-	-	-	-	-
	2.7	Hospital Settlements/AP	(1,093,377)	(1,032,869)	(136,446)	(203,201)	(102,955)	327,796	(51,513)	9,588	(9,321)	(61,288)	192,104	(25,273)
	2.7.1	Transplant Services	2,383,239	879,150	-	886,905	393,235	10,657	66,400	-	-	-	3,116	143,776
2.8	Total Hospital Services	306,820,156	187,788,148	17,275,691	55,467,749	25,630,713	1,745,250	3,347,734	79,850	3,353,329	2,515,095	1,422,810	8,193,787	
Professional Services	3.1	Primary Care FFS	81,575,930	65,296,486	3,917,721	6,030,270	3,094,048	233,527	990,023	6,915	437,060	73,045	179,916	1,316,920
	3.2	Specialty Care FFS	112,886,463	70,250,685	7,126,430	19,413,749	8,827,268	934,650	1,086,550	33,642	1,398,289	605,368	688,086	2,521,747
	3.3	Other Professional FFS	-	-	-	-	-	-	-	-	-	-	-	-
	3.4	§ 1202 PCP Payments to providers	-	-	-	-	-	-	-	-	-	-	-	-
	3.5	Subcapitated Professional Services	53,995,750	47,882,379	1,984,244	2,557,661	791,408	951	458,700	-	149,249	13,863	608	156,687
	3.6	Ending IBNP for Professional Services	9,629,569	6,666,938	540,458	1,386,751	624,978	67,532	-	2,217	95,892	36,209	56,944	201,649
3.7	Professional Settlements/AP	13,583,626	8,326,531	890,511	1,696,555	834,543	647,115	(29,389)	17,959	118,556	467,340	369,496	244,407	
3.8	Total Physician Services	271,671,338	198,423,019	14,459,365	31,034,986	14,172,245	1,883,774	2,505,884	60,734	2,199,047	1,935,284	1,295,050	4,441,410	
Maternity Services	4.1.1	Maternity Services	21,951,668	19,613,157	1,894,954	180,987	134,772	8,977	6,265	-	110,076	-	-	2,480
	4.2.1	Ending IBNP for Maternity Services	1,829,509	1,212,921	108,820	279,331	132,275	-	-	-	19,823	17,254	-	59,084
	4.3.1	Maternity Settlements/AP	(81,737)	(77,214)	(10,200)	(15,191)	(7,697)	24,505	(3,851)	717	(6,997)	(4,582)	14,361	(1,889)
	4.4.1	Total Maternity Services	23,699,439	20,748,864	1,993,574	445,127	259,351	33,482	2,415	717	129,201	12,673	14,361	59,674
Mental Health	5.1	Mental Health & Substance Abuse FFS	50,022,106	22,989,276	9,588,376	3,353,610	8,185,052	1,469,101	2,356,378	31,031	794,009	9,370	480,732	765,171
	5.2	Mental Health & Substance Abuse Subcapitation	-	-	-	-	-	-	-	-	-	-	-	-
	5.3	Ending IBNP for Mental Health & Substance Abuse	3,322,591	1,625,030	674,237	244,736	586,201	61,479	-	1,300	54,924	736	20,421	53,256
	5.4	Mental Health Settlements/AP	(199,022)	(188,008)	(24,837)	(36,988)	(18,741)	59,667	(9,377)	1,745	(1,697)	(11,156)	34,968	(4,600)
	5.5	Total Mental Health & Substance Abuse Services	53,145,675	24,426,298	10,237,777	3,561,358	8,752,512	1,590,247	2,347,001	34,077	847,237	(1,050)	536,121	814,097
Dental	6.1	Dental FFS	-	-	-	-	-	-	-	-	-	-	-	-
	6.2	Dental Subcapitation	-	-	-	-	-	-	-	-	-	-	-	-
	6.3	Ending IBNP for Dental Services	-	-	-	-	-	-	-	-	-	-	-	-
	6.4	Dental Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	6.5	Total Dental Services	-	-	-	-	-	-	-	-	-	-	-	-
Transportation	7.1	Transportation FFS	7,246,398	1,920,616	363,977	669,002	639,869	196,531	30,870	8,425	101,648	10,154	2,396,613	908,691
	7.2	Transportation Subcapitation	13,928,733	11,742,541	563,525	732,375	242,590	223,459	126,278	6,354	41,744	4,257	208,473	37,136
	7.3	Ending IBNP for Transportation	180,253	-	-	18,665	8,909	86,151	-	3,068	2,159	4,529	53,211	3,562
	7.4	Transportation Settlements/AP	(18,634)	(17,603)	(2,325)	(3,463)	(1,755)	5,586	(878)	163	(159)	(1,044)	3,274	(431)
	7.5	Total Transportation Services	21,336,750	13,645,555	925,177	1,416,580	889,614	511,728	156,270	18,011	145,392	17,895	2,661,571	948,958
Pharmacy	8.1	Prescription Drugs FFS	290,884,196	123,720,838	23,081,277	65,990,254	40,632,022	161,818	3,926,324	639	19,127,974	2,455,065	28,528	11,759,456
	8.2	Hepatitis C Prescription Drug FFS	3,197,636	1,315,238	449,000	747,744	567,508	-	-	-	92,706	-	-	25,440
	8.3	Ending IBNP for Prescription Drugs	-	-	-	-	-	-	-	-	-	-	-	-
	8.4	Prescription Drug Rebates	(1,982,129)	(808,618)	(149,125)	(472,266)	(291,945)	(21,955)	-	(165)	(133,257)	(18,152)	(6,011)	(80,634)
	8.5	Ending accrual for Rebates receivable	-	-	-	-	-	-	-	-	-	-	-	-
	8.6	Prescription Drugs Subcapitation	-	-	-	-	-	-	-	-	-	-	-	-
	8.7	Prescription Drug Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	8.8	Total Prescription Drugs	292,099,703	124,227,458	23,381,152	66,265,731	40,907,585	139,862	3,926,324	474	19,087,424	2,436,914	22,517	11,704,262
Other Services	9.1	Home Health, Private Duty Nursing, Personal Care FFS	32,138,109	2,179,849	244,734	4,687,334	1,025,584	590,272	271,544	4,650	33,251	23,100,890	-	-
	9.2	Hospice FFS	3,836,711	207,586	16,788	1,855,763	992,449	595,478	-	-	48,614	120,032	-	-
	9.2.1	Nursing Facility FFS	3,520,496	98,198	17,880	1,710,943	494,037	1,072,610	65,286	28,408	33,135	-	-	-
	9.3	DME FFS	16,185,249	6,335,511	567,954	5,297,596	1,337,350	199,850	321,258	5,873	109,499	2,010,358	-	-
	9.4	Other State Plan Services FFS	53,158,167	32,020,219	3,497,121	8,455,380	3,377,878	1,509,520	343,543	56,304	709,294	389,469	1,156,082	1,643,357
	9.5	Other Services Subcapitation	5,853,198	5,110,508	245,253	213,652	70,769	65,188	60,903	1,854	12,178	1,242	60,817	10,934
	9.6	Ending IBNP for Other Services	5,374,643	1,878,984	199,762	1,136,827	372,558	260,146	-	6,767	48,141	1,316,359	71,461	83,738
	9.7	Other Service Settlements/AP	32,027,964	19,801,371	2,129,651	4,469,450	2,205,054	630,753	129,331	17,681	311,573	1,235,185	360,736	647,179
	9.8	Total Other Services	152,094,535	67,632,226	6,919,142	27,826,944	9,875,578	4,923,817	1,281,865	121,538	1,305,685	28,173,536	1,649,096	2,385,108

Expanded Benefits	10.1	Expanded Benefits FFS	7,681,139	3,817,475	968,126	1,001,769	874,537	293,041	50	6,553	176,970	29,607	162,664	350,345
	10.2	Expanded Benefits Subcapitation	813,427	706,184	33,890	31,847	10,549	9,717	8,284	276	1,815	185	9,065	1,615
	10.3	Ending IBNP for Expanded Benefits	200,873	88,549	32,946	28,605	30,074	2,453	-	123	3,340	0	1,745	13,038
	10.4	Expanded Benefits Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	10.5	Total Expanded Benefits	8,695,439	4,612,209	1,034,962	1,062,221	915,160	305,211	8,334	6,952	182,125	29,792	173,475	364,998
Totals Before and After Reinsurance	11.1	Total Services Paid Directly FFS	973,032,007	526,072,343	67,924,976	172,112,571	94,485,144	8,605,145	12,797,339	249,388	26,224,886	31,243,838	6,290,018	27,026,359
	11.2	Total Services Paid Directly – IBNP	37,721,102	23,177,613	2,628,598	5,525,428	2,893,849	533,488	-	16,624	401,312	1,492,839	231,078	820,272
	11.3	Total Services Paid through Subcapitation	74,591,108	65,441,613	2,826,913	3,535,534	1,115,316	299,315	654,166	8,484	204,986	19,546	278,964	206,272
	11.4	Total Services Paid by Settlements/AP	44,218,819	26,812,209	2,846,354	5,907,163	2,908,450	1,695,423	124,323	47,855	418,256	1,624,455	974,940	859,392
	11.5	TRL & Fraud/Abuse Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.6.1	Premium Deficiency Reserve	-	-	-	-	-	-	-	-	-	-	-	-
	11.7	Subtotal Benefit Expense before Reinsurance	1,129,563,036	641,503,777	76,226,841	187,080,696	101,402,758	11,133,371	13,575,827	322,351	27,249,441	34,380,678	7,775,000	28,912,296
	11.8	Reinsurance Premiums	440,613	375,238	18,084	23,945	7,956	6,531	-	181	1,333	139	6,004	1,201
	11.9	Reinsurance Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.10	Net cost of Reinsurance	440,613	375,238	18,084	23,945	7,956	6,531	-	181	1,333	139	6,004	1,201
	11.11	Grand Total Medical Benefit Expense Net of Reinsurance	1,130,003,648	641,879,016	76,244,924	187,104,641	101,410,714	11,139,902	13,575,827	322,533	27,250,773	34,380,818	7,781,005	28,913,496
JULY - SEPTEMBER (Q3)														
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees														
Administrative Expenses	12.1	Salaries & Benefits	119,304,878	(31,701)	119,336,579									
	12.2	Administrative Services	3,552,340	2,046,777	1,505,564									
	12.3	Information Systems	12,483,867	10,892,549	1,591,318									
	12.4	Marketing Expenses	5,185,325	1,788,345	3,396,980									
	12.5	General Administration	8,533,942	186,865	8,347,078									
	12.6	Compliance/Regulatory	2,018,879	2,018,879	-									
	12.7	Total Administrative Expenses	151,079,232	16,901,713	134,177,519									
	Government-Mandated Fees, Other Than Income Taxes	13.1	State Premium tax	-	-	-								
13.2		Department of Insurance Assessments	-	-	-									
13.3		Section 9010 Health Insurance Providers Fee	-	-	-									
13.4		Other 1	-	-	-									
13.5		Other 2	-	-	-									
13.6		Other 3	-	-	-									
13.7		Total	-	-	-									
14.0	Grand Total Expenses	1,281,082,881												
15.0	Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	32,576,574												
16.0	Income Tax Expense	8,955,300												
17.0	Net Underwriting Gain (Loss)	23,621,274												

MANAGED MEDICAL ASSISTANCE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary		OCTOBER - DECEMBER (Q4)											
		Total	TANF Non-SMI	TANF SMI	SSI Medicaid Only Non-SMI	SSI Medicaid Only SMI	Dual Eligible	Child Welfare	HIV/AIDS Dual Eligible	HIV/AIDS Medicaid Only	Private Duty Nursing	LTC Dual Eligible	LTC Medicaid Only
MEMBER MONTHS		4,560,276.0	3,848,168.1	191,971.7	233,651.5	79,566.0	71,826.3	40,792.8	2,131.5	14,136.5	1,383.3	64,607.5	12,041.0
REVENUES													
1.1 Capitation		1,216,504,570	665,528,743	89,955,685	207,812,727	109,742,091	13,599,105	15,113,159	344,010	37,173,510	39,505,436	8,571,199	29,158,905
1.2.1 Pharmacy Drug High Risk Pool		5,769,705	1,911,065	247,057	899,424	440,259	1,147,583	43,551	22,827	178,150	145,311	613,606	120,872
1.3 Hepatitis C Kick Payments		-	-	-	-	-	-	-	-	-	-	-	-
1.4.1 Maternity Kick Payments		22,557,135	19,838,584	2,180,354	187,670	160,980	-	35,641	-	153,906	-	-	-
1.5 ACA § 9010 related payments		-	-	-	-	-	-	-	-	-	-	-	-
1.6 Other Revenue		-	-	-	-	-	-	-	-	-	-	-	-
1.7 Total Revenue		1,244,831,410	687,278,392	92,383,096	208,899,821	110,343,330	14,746,688	15,192,351	366,837	37,505,566	39,650,747	9,184,805	29,279,776
BENEFIT EXPENSES		Total	TANF Non-SMI	TANF SMI	SSI Medicaid Only Non-SMI	SSI Medicaid Only SMI	Dual Eligible	Child Welfare	HIV/AIDS Dual Eligible	HIV/AIDS Medicaid Only	Private Duty Nursing	LTC Dual Eligible	LTC Medicaid Only
Hospital Services		147,277,192	80,514,188	7,515,708	28,708,018	15,487,552	930,117	1,473,180	54,268	2,360,151	2,053,916	1,402,017	6,778,076
2.1 Inpatient FFS		29,842,175	18,268,304	1,670,794	4,745,080	2,250,509	510,221	-	15,652	339,753	294,502	734,136	1,013,224
2.2 Ending IBNP for Inpatient Hospital Services		67,573,507	53,067,709	5,190,009	4,548,348	2,822,386	169,875	515,480	5,515	572,224	71,612	138,772	471,576
2.3 Outpatient FFS: ER		61,719,784	40,523,097	3,587,263	10,701,125	3,893,816	371,094	750,066	33,727	619,123	282,143	155,197	803,133
2.4 Outpatient FFS: Other than ER		9,602,529	7,096,503	666,322	1,075,647	462,199	71,627	-	3,958	79,926	24,710	34,608	87,031
2.5 Ending IBNP for Outpatient Hospital Services		2,095,998	283,621	-	-	-	-	-	-	156,260	-	38	158,786
2.6 Subcapitated Hospital Services		(1,063,637)	(1,004,775)	(132,735)	(197,673)	(100,155)	318,880	(50,112)	9,328	(9,067)	(59,621)	186,879	(24,586)
2.7 Hospital Settlements/AP		2,095,998	283,621	-	-	-	43,199	-	-	156,260	-	38	158,786
2.7.1 Transplant Services		317,047,547	198,748,648	18,497,360	51,009,856	24,841,088	2,415,014	2,688,613	122,448	4,118,370	2,667,262	2,651,647	9,287,241
Professional Services		77,998,422	62,508,076	3,913,108	5,359,249	3,000,479	198,559	905,447	8,353	477,848	93,252	172,340	1,361,712
3.1 Primary Care FFS		112,194,898	71,413,413	7,255,138	17,575,397	8,796,343	1,060,317	1,060,627	29,897	1,256,180	682,485	662,158	2,402,944
3.2 Specialty Care FFS		-	-	-	-	-	-	-	-	-	-	-	-
3.3 Other Professional FFS		-	-	-	-	-	-	-	-	-	-	-	-
3.4 § 1202 PCP Payments to providers		-	-	-	-	-	-	-	-	-	-	-	-
3.5 Subcapitated Professional Services		51,670,207	45,826,959	2,007,292	2,368,138	748,330	741	423,586	26	148,392	9,709	178	136,856
3.6 Ending IBNP for Professional Services		14,379,584	10,318,587	840,020	1,688,986	832,119	129,957	-	4,005	124,513	53,522	119,617	268,258
3.7 Professional Settlements/AP		8,436,324	5,140,845	541,442	1,012,128	496,858	494,145	(47,909)	14,002	74,175	275,307	285,994	149,337
3.8 Total Physician Services		266,479,435	195,207,880	14,557,001	28,003,897	13,874,128	1,883,720	2,341,751	56,283	2,081,108	1,114,274	1,240,286	4,319,107
Maternity Services		19,236,539	16,848,929	1,872,260	189,468	146,727	7,362	22,010	510	143,892	-	-	5,382
4.1.1 Maternity Services		5,266,266	3,223,818	294,846	837,367	397,149	90,039	-	2,762	59,956	51,971	129,553	178,804
4.2.1 Ending IBNP for Maternity Services		(79,514)	(75,113)	(9,923)	(14,777)	(7,487)	23,838	(3,746)	(678)	(6,457)	(4,457)	13,970	(1,838)
4.3.1 Maternity Settlements/AP		24,423,292	19,997,634	2,157,183	1,012,058	536,388	121,240	18,264	3,970	203,171	47,514	143,524	182,348
4.4.1 Total Maternity Services		-	-	-	-	-	-	-	-	-	-	-	-
Mental Health		51,972,542	23,098,200	9,886,355	3,279,831	8,282,426	2,473,588	2,285,468	38,552	787,455	10,095	947,575	882,996
5.1 Mental Health & Substance Abuse FFS		6,088,314	2,892,397	1,214,020	443,820	1,064,324	201,482	-	3,761	96,900	1,435	69,360	100,814
5.2 Mental Health & Substance Abuse Subcapitation		(193,609)	(182,895)	(24,161)	(35,982)	(18,231)	58,044	(9,122)	1,698	(1,650)	(10,852)	34,017	(4,475)
5.3 Ending IBNP for Mental Health & Substance Abuse		-	-	-	-	-	-	-	-	-	-	-	-
5.4 Mental Health Settlements/AP		57,867,247	25,807,702	11,076,214	3,687,670	9,328,519	2,733,114	2,276,346	44,011	882,705	678	1,050,952	979,336
5.5 Total Mental Health & Substance Abuse Services		-	-	-	-	-	-	-	-	-	-	-	-
Dental		-	-	-	-	-	-	-	-	-	-	-	-
6.1 Dental FFS		-	-	-	-	-	-	-	-	-	-	-	-
6.2 Dental Subcapitation		-	-	-	-	-	-	-	-	-	-	-	-
6.3 Ending IBNP for Dental Services		-	-	-	-	-	-	-	-	-	-	-	-
6.4 Dental Settlements/AP		-	-	-	-	-	-	-	-	-	-	-	-
6.5 Total Dental Services		-	-	-	-	-	-	-	-	-	-	-	-
Transportation		6,996,612	1,891,232	350,941	606,226	594,326	190,137	29,098	6,084	100,702	56,713	2,284,579	886,573
7.1 Transportation FFS		13,843,807	11,682,033	582,776	709,305	241,541	218,046	123,836	6,471	42,915	4,199	196,132	36,553
7.2 Transportation Subcapitation		153,368	-	-	15,895	7,997	78,526	-	2,309	1,482	3,959	40,351	2,848
7.3 Ending IBNP for Transportation		(18,127)	(17,124)	(2,262)	(3,869)	(1,707)	5,435	(854)	1,599	(155)	(1,016)	3,185	(419)
7.4 Transportation Settlements/AP		20,975,660	13,556,141	931,455	1,328,057	842,158	492,143	152,080	15,023	144,944	63,856	2,524,246	925,556
7.5 Total Transportation Services		-	-	-	-	-	-	-	-	-	-	-	-
Pharmacy		299,898,819	130,935,171	24,380,360	64,905,360	41,247,341	287,596	3,837,508	6,931	19,523,719	2,630,948	32,241	12,111,644
8.1 Prescription Drugs FFS		3,148,201	1,310,434	531,576	455,779	558,610	-	15,265	-	212,551	-	-	63,986
8.2 Hepatitis C Prescription Drug FFS		-	-	-	-	-	-	-	-	-	-	-	-
8.3 Ending IBNP for Prescription Drugs		-	-	-	-	-	-	-	-	-	-	-	-
8.4 Prescription Drug Rebates		(1,738,951)	(737,763)	(136,142)	(391,264)	(250,957)	(16,961)	-	(1,314)	(113,930)	(16,088)	(5,367)	(69,165)
8.5 Ending accrual for Rebates receivable		-	-	-	-	-	-	-	-	-	-	-	-
8.6 Prescription Drugs Subcapitation		-	-	-	-	-	-	-	-	-	-	-	-
8.7 Prescription Drug Settlements/AP		-	-	-	-	-	-	-	-	-	-	-	-
8.8 Total Prescription Drugs		301,308,069	131,507,842	24,775,794	64,969,876	41,554,994	270,635	3,852,773	5,617	19,622,340	2,614,860	26,874	12,106,464
Other Services		32,159,239	2,655,576	326,680	4,431,775	1,042,250	555,605	224,076	3,944	53,951	22,865,381	-	-
9.1 Home Health, Private Duty Nursing, Personal Care FFS		3,554,891	241,604	14,303	1,606,707	976,667	497,110	11,935	-	105,652	100,912	-	-
9.2 Hospice FFS		3,716,019	68,175	21,591	1,454,826	630,145	1,359,893	60,101	43,590	77,698	-	-	-
9.2.1 Nursing Facility FFS		16,805,219	6,585,964	634,002	5,267,543	1,558,449	207,096	290,942	4,799	133,817	2,122,607	-	-
9.2.2 DME FFS		51,389,615	31,523,851	3,416,769	7,914,961	3,224,314	1,265,192	340,133	51,555	686,474	492,632	965,762	1,507,972
9.4 Other State Plan Services FFS		5,822,037	5,084,174	253,632	206,921	70,464	63,609	59,726	1,888	12,519	1,225	57,216	10,663
9.5 Other Services Subcapitation		7,302,192	2,359,518	253,122	1,549,268	532,327	450,966	-	12,316	73,158	1,843,397	117,296	110,825
9.6 Ending IBNP for Other Services		13,443,765	8,278,779	881,278	1,827,625	902,084	335,246	120,516	9,411	129,512	503,593	188,256	267,465
9.7 Other Service Settlements/AP		134,192,976	56,797,641	5,801,378	24,259,627	8,936,699	4,734,716	1,107,428	127,503	1,272,780	27,929,746	1,328,531	1,896,926
9.8 Total Other Services		-	-	-	-	-	-	-	-	-	-	-	-

Expanded Benefits	10.1	Expanded Benefits FFS	7,802,859	3,828,612	1,059,549	932,766	940,548	299,126	379	16,910	178,968	30,512	131,830	383,660
	10.2	Expanded Benefits Subcapitation	808,849	702,423	35,042	30,836	10,501	9,479	8,123	281	1,866	183	8,526	1,589
	10.3	Ending IBNP for Expanded Benefits	274,659	130,677	51,986	30,204	36,930	2,609	-	188	3,880	1	1,954	16,231
	10.4	Expanded Benefits Settlements/AP	-	-	-	-	-	-	-	-	-	-	-	-
	10.5	Total Expanded Benefits	8,886,368	4,661,712	1,146,577	993,807	987,979	311,214	8,502	17,379	184,713	30,695	142,310	401,479
Totals Before and After Reinsurance	11.1	Total Services Paid Directly FFS	963,801,404	526,560,089	69,819,472	158,975,427	92,976,202	9,898,905	11,821,714	303,323	27,332,734	31,477,120	6,887,143	27,749,274
	11.2	Total Services Paid Directly – IBNP	72,909,086	44,289,804	4,991,109	10,386,267	5,583,554	1,535,426	-	44,951	779,568	2,273,497	1,246,874	1,778,036
	11.3	Total Services Paid through Subcapitation	72,144,901	63,295,589	2,878,741	3,315,200	1,070,836	291,875	615,271	8,666	205,692	15,316	262,053	185,662
	11.4	Total Services Paid by Settlements/AP	20,525,201	12,139,718	1,253,639	2,587,952	1,271,361	1,235,589	8,773	35,295	192,136	702,953	712,301	385,484
	11.5	TRL & Fraud/Abuse Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.6.1	Premium Deficiency Reserve	-	-	-	-	-	-	-	-	-	-	-	-
	11.7	Subtotal Benefit Expense before Reinsurance	1,129,380,592	646,285,200	78,942,962	175,264,848	100,901,953	12,961,795	12,445,758	392,234	28,510,130	34,468,886	9,108,370	30,098,457
	11.8	Reinsurance Premiums	89,393	78,195	3,992	4,791	1,655	190	-	0	251	29	60	230
	11.9	Reinsurance Recoveries	-	-	-	-	-	-	-	-	-	-	-	-
	11.10	Net cost of Reinsurance	89,393	78,195	3,992	4,791	1,655	190	-	0	251	29	60	230
	11.11	Grand Total Medical Benefit Expense Net of Reinsurance	1,129,469,985	646,363,395	78,946,954	175,269,639	100,903,607	12,961,985	12,445,758	392,234	28,510,381	34,468,915	9,108,430	30,098,687
OCTOBER - DECEMBER (Q4)														
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees														
Administrative Expenses	12.1	Salaries & Benefits	113,054,003	(30,040)	113,084,043									
	12.2	Administrative Services	3,366,219	1,939,537	1,426,681									
	12.3	Information Systems	11,829,786	10,321,843	1,507,942									
	12.4	Marketing Expenses	4,913,644	1,694,646	3,218,998									
	12.5	General Administration	8,086,814	177,074	7,909,740									
	12.6	Compliance/Regulatory	1,913,102	1,913,102	-									
	12.7	Total Administrative Expenses	143,163,567	16,016,163	127,147,404									
	Government-Mandated Fees, Other Than Income Taxes	13.1	State Premium tax	-	-	-								
13.2		Department of Insurance Assessments	-	-	-									
13.3		Section 9010 Health Insurance Providers Fee	-	-	-									
13.4		Other 1	-	-	-									
13.5		Other 2	-	-	-									
13.6		Other 3	-	-	-									
13.7		Total	-	-	-									
14.0	Grand Total Expenses	1,272,633,552												
15.0	Underwriting Gain / (Loss) — AKA Pre-tax Earnings from Operations	(27,802,142)												
16.0	Income Tax Expense	(7,642,809)												
17.0	Net Underwriting Gain (Loss)	(20,159,333)												

Expanded Benefits	10.1	Expanded Benefits FFS	157,203	29,927,508	14,744,191	3,523,165	3,949,250	3,263,820	1,323,838	670	38,231	709,470	123,388	731,259	1,363,024	
	10.2	Expanded Benefits Subcapitation	-	3,263,823	2,831,724	133,196	129,823	42,456	40,177	33,379	1,114	7,194	752	37,468	6,540	
	10.3	Ending IBNP for Expanded Benefits	(128,436)	598,658	324,502	115,944	103,869	105,961	7,662	-	434	11,961	8	8,091	48,660	
	10.4	Expanded Benefits Settlements/AP	(20,764)	(20,764)	-	-	-	-	-	-	-	-	-	-	-	
	10.5	Total Expanded Benefits	8,003	33,769,225	17,900,417	3,772,305	4,182,942	3,412,237	1,371,676	34,050	39,779	728,625	124,148	776,818	1,418,224	
Totals Before and After Reinsurance	11.1	Total Services Paid Directly FFS	93,301,144	4,030,197,186	2,117,021,851	270,397,314	706,751,035	376,074,779	39,250,460	49,324,078	1,103,190	107,614,658	128,077,077	29,148,396	112,133,203	
	11.2	Total Services Paid Directly - IBNP	(126,418,742)	42,211,896	102,075,139	11,533,641	25,117,515	13,058,087	2,914,997	-	87,271	1,801,109	6,298,128	1,877,352	3,867,399	
	11.3	Total Services Paid through Subcapitation	-	286,493,577	250,831,640	10,749,264	13,891,273	4,391,420	1,236,317	2,524,822	34,227	799,645	89,798	1,151,532	793,638	
	11.4	Total Services Paid by Settlements/AP	929,932	130,527,219	76,834,013	8,086,614	17,664,548	8,703,229	6,000,891	4	169,835	1,250,110	4,861,049	3,454,036	2,572,959	
	11.5	TRL & Fraud/Abuse Recoveries	-	-	-	-	-	-	-	-	-	-	-	-	-	
	11.6.1	Premium Deficiency Reserve	-	-	-	-	-	-	-	-	-	-	-	-	-	
	11.7	Subtotal Benefit Expense before Reinsurance	(32,187,667)	4,489,429,878	2,546,762,644	300,766,833	763,424,371	402,227,515	49,402,665	51,848,903	1,394,523	111,465,522	139,326,052	35,631,315	119,367,199	
	11.8	Reinsurance Premiums	-	1,073,493	961,711	46,128	58,190	19,491	(8,192)	-	(257)	2,670	351	(9,313)	2,714	
	11.9	Reinsurance Recoveries	-	-	-	-	-	-	-	-	-	-	-	-	-	
	11.10	Net cost of Reinsurance	-	1,073,493	961,711	46,128	58,190	19,491	(8,192)	-	(257)	2,670	351	(9,313)	2,714	
	11.11	Net of Reinsurance	(32,187,667)	4,490,503,371	2,547,724,355	300,812,961	763,482,562	402,247,007	49,394,473	51,848,903	1,394,266	111,468,192	139,326,403	35,622,002	119,369,913	
TOTAL (TO DATE)																
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees			Prior Calendar Year Adjustments													
			Total	Health Plan	Corporate											
Administrative Expenses	12.1	Salaries & Benefits	-	476,577,631	(126,660)	476,804,291										
	12.2	Administrative Services	-	14,193,226	8,177,810	6,015,417										
	12.3	Information Systems	-	49,878,767	43,520,722	6,358,045										
	12.4	Marketing Expenses	-	20,717,747	7,145,257	13,572,489										
	12.5	General Administration	-	34,097,008	746,609	33,350,399										
	12.6	Compliance/Regulatory	-	8,066,348	8,066,348	-										
	12.7	Total Administrative Expenses	-	603,630,726	67,530,085	536,100,641										
Government-Mandated Fees, Other Than Income Taxes	13.1	Slate Premium tax	-	-	-	-										
	13.2	Department of Insurance Assessments, Section 9010 Health Insurance Providers	-	-	-	-										
	13.3	Fee	-	-	-	-										
	13.4	Other 1	-	-	-	-										
	13.5	Other 2	-	-	-	-										
	13.6	Other 3	-	-	-	-										
	13.7	Total	-	-	-	-										
14.0	Grand Total Expenses	(32,187,667)	5,094,134,097													
15.0	Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	36,645,123	158,994,535													
16.0	Income Tax Expense	10,073,744	43,707,598													
17.0	Net Underwriting Gain (Loss)	26,571,379	115,286,938													

MANAGED MEDICAL ASSISTANCE -- RELATED-PARTY TRANSACTION SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023
 Summary

EXPENSES	Vendor Name	Affiliation	Payment Methodology	JANUARY - MARCH (Q1)		APRIL - JUNE (Q2)		JULY - SEPTEMBER (Q3)		OCTOBER - DECEMBER (Q4)		PRIOR YEAR ADJUSTMENTS		TOTAL (TO DATE)	
				MM	Amount	MM	Amount	MM	Amount	MM	Amount	MM	Amount	MM	Amount
1.1	Vendor #1														
1.2	Vendor #2														
1.3	Vendor #3														
1.4	Vendor #4														
1.5	Vendor #5														
1.6	Total Hospital Services														
2.1	Enolve PeopleCare, Inc. (Nurse)	Non-Insurance Affiliate	Subcapitation												
2.2	Enolve PeopleCare, Inc. (Disease)	Non-Insurance Affiliate	Fee-for-Service	99,757.0	2,221,639	94,547.0	2,104,248	88,153.0	1,959,952	88,684.0	1,981,102			371,141.0	8,266,941
2.3	Access Medical Acquisitions, Inc.	Non-Insurance Affiliate	Subcapitation	99,757.0	1,930,839	94,547.0	1,930,839	88,153.0	1,930,839	88,684.0	1,930,839			371,141.0	7,723,356
2.4	Access Medical Acquisitions, Inc.	Non-Insurance Affiliate	Alternative Payment Methodology												
2.5	Vendor #5														
2.6	Total Professional Services				4,152,478		4,035,087		3,890,791		3,511,941				15,990,297
3.1	Vendor #1														
3.2	Vendor #2														
3.3	Vendor #3														
3.4	Vendor #4														
3.5	Vendor #5														
3.6	Total Mental Health														
4.1	Vendor #1														
4.2	Vendor #2														
4.3	Vendor #3														
4.4	Vendor #4														
4.5	Vendor #5														
4.6	Total Dental														
5.1	Vendor #1														
5.2	Vendor #2														
5.3	Vendor #3														
5.4	Vendor #4														
5.5	Vendor #5														
5.6	Total Transportation														
6.1	Enolve Pharmacy Solutions, Inc	Non-Insurance Affiliate	Fee-for-Service	4,638,683.0	288,511,687	4,633,245.4	295,078,551	4,588,251.3	297,508,594	4,560,276.0	306,555,538			18,420,455.7	1,187,654,370
6.2	Vendor #2														
6.3	Vendor #3														
6.4	Vendor #4														
6.5	Vendor #5														
6.6	Total Pharmacy				288,511,687		295,078,551		297,508,594		306,555,538				1,187,654,370
7.1	Enolve Vision of Florida, Inc.	Non-Insurance Affiliate	Subcapitation	4,638,683.0	758,275	4,633,245.4	758,105	4,588,251.3	751,459	4,560,276.0	747,403			18,420,455.7	3,015,242
7.2	U.S. Medical Management, LLC	Non-Insurance Affiliate	Fee-for-Service		(227,027)		(226,761)		(224,559)		(223,190)				(901,537)
7.3	National Imaging Associates	Non-Insurance Affiliate	Subcapitation	4,638,683.0		4,633,245.4		4,588,251.3		4,560,276.0					
7.4	Vendor #4														
7.5	Vendor #5														
7.6	Total Other Services				531,248		531,344		526,900		524,213				2,113,705
8.1	Centric Management Company	Non-Insurance Affiliate	% of Premium	4,638,683.0	135,760,159	4,633,245.4	136,013,538	4,588,251.3	134,177,519	4,560,276.0	137,147,404			18,420,455.7	536,100,691
8.2	Interpreco, Inc.	Non-Insurance Affiliate	Subcapitation	4,638,683.0	463,886	4,633,245.4	463,325	4,588,251.3	456,825	4,560,276.0	456,028			18,420,455.7	1,842,046
8.3	National Imaging Associates	Non-Insurance Affiliate	Subcapitation	4,638,683.0	1,279,733	4,633,245.4	1,539,941	4,588,251.3	1,527,664	4,560,276.0	1,385,754			18,420,455.7	6,353,099
8.4	Vendor #4														
8.5	Vendor #5														
8.6	Total Administrative Expense				140,509,760		138,038,824		136,164,008		129,689,187				544,295,780
9	Grand Total				435,699,174		437,683,806		438,090,294		440,580,879				1,750,054,152

LONG TERM CARE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary

		JANUARY - MARCH (Q1)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
MEMBER MONTHS		117,350.0	51,720.0	65,630.0	-
REVENUES					
Revenues	1.1 Capitation	425,516,502			
	1.2 NH Rate Reconciliation	20,443			
	1.2.1 Community High Risk Pool	3,839,698			
	1.2.2 Patient Responsibility Reconciliation	1,068,836			
	1.3 Other Revenue	-			
1.4 Total Revenue	430,445,478				
		JANUARY - MARCH (Q1)			
EXPENSES		Total	Non-HCBS	HCBS	MED-P / SIXT
LTC Nursing Facility (NF) & Hospice Services	2.1 Nursing Facility Days (Medicaid)	1,259,504	1,212,349	47,155	
	2.2 Nursing Facility Days (Crossover)	4,977	4,435	542	
	2.3 Nursing Facility FFS (Medicaid)	258,131,129	248,274,920	9,856,209	
	2.4 Nursing Facility FFS (Crossover)	943,198	860,716	82,482	
	2.5 Hospice Days	110,607	104,114	6,493	
	2.6 Hospice FFS	22,917,778	20,715,468	2,202,310	
	2.7 Ending IBNP for NF & Hospice Services	3,471,528	3,340,556	130,972	
	2.8 NF & Hospice Subcapitated Services	-	-	-	
	2.9 NF & Hospice Settlements/AP	-	-	-	
	2.10 Total Nursing Facility and Hospice	285,463,634	273,191,661	12,271,973	
Long Term Care Services	2.11 Assisted Living FFS	14,600,749	1,576,144	13,024,605	
	2.12 Home Health FFS	53,918,493	510,173	53,408,320	
	2.13 Medical Equipment/Supplies FFS	4,453,595	333,188	4,120,407	
	2.14 Therapy Services FFS	3,282,930	2,959,815	323,115	
	2.15 Transportation Services FFS	1,246,516	548,986	697,530	
	2.16 Case Management (Plan Provided) FFS	17,957,762	8,003,717	9,954,045	
	2.17 Case Management (non-Plan Provided) FFS	957,786	16,837	940,949	
	2.18 Home & Community Based Services (HCBS) FFS	12,399,886	1,100,921	11,298,965	
	2.19 Subcapitated LTC Services (excluding NF)	10,091,264	177,393	9,913,871	
	2.20 Ending IBNP for Long Term Care Services (excluding NF)	1,719,371	59,915	1,659,455	
2.21 LTC Services Settlements/AP (excluding NF)	328,235	148,675	179,560		
2.22 Grand Total LTC Services	406,420,221	288,627,427	117,792,794		
Expanded Benefits	3.1 Expanded Benefits FFS	376,984	202,891	174,093	
	3.2 Expanded Benefits Subcapitation	345,257	152,161	193,096	
	3.3 Ending IBNP for Expanded Benefits	-	-	-	
	3.4 Expanded Benefits Services Settlements	-	-	-	
	3.5 Total Expanded Benefits	722,240	355,051	367,189	
Totals Before and After Reinsurance	4.1 Total Services Paid Directly FFS	391,186,807	285,103,777	106,083,029	
	4.2 Total Services Paid Directly -- IBNP	5,190,899	3,400,471	1,790,428	
	4.3 Total Services Paid through Subcapitation	10,436,521	329,554	10,106,967	
	4.4 Total Services Paid by Settlements/AP	328,235	148,675	179,560	
	4.5 TPL & Fraud/Abuse Recoveries	-	-	-	
	4.6.1 Premium Deficiency Reserve	-	-	-	
	4.7 Subtotal Benefit Expense before Reinsurance	407,142,461	288,982,478	118,159,983	
	4.8 Reinsurance Premiums	-	-	-	
	4.9 Reinsurance Recoveries	-	-	-	
	4.10 Net Cost of Reinsurance	-	-	-	
4.11 Grand Total Service Benefit Expense Net of Reinsurance	407,142,461	288,982,478	118,159,983		
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees		JANUARY - MARCH (Q1)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
Administrative Expenses	5.1 Salaries & Benefits	13,059,565	5,820,322	7,239,243	
	5.2 Administrative Services	1,090,568	486,039	604,529	
	5.3 Information Systems	539,259	240,334	298,925	
	5.4 Marketing Expenses	1,456,543	649,145	807,398	
	5.5 General Administration	2,259,038	1,006,797	1,252,241	
	5.6 Compliance/Regulatory	672,850	299,872	372,978	
	5.7 Total Administrative Expenses	19,077,822	8,502,509	10,575,313	
Government-Mandated Assessments, Taxes, and Fees Other Than Income	6.1 State Premium Tax	-	-	-	
	6.2 Department of Insurance Assessments	-	-	-	
	6.3 Other 1	-	-	-	
	6.4 Other 2	-	-	-	
	6.5 Other 3	-	-	-	
	6.6 Total	-	-	-	
7.0 Grand Total Expenses	426,220,283				
8.0 Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	4,225,195				
9.0 Income Tax Expense	1,161,506				
10.0 Net Underwriting Gain (Loss)	3,063,689				

LONG TERM CARE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary

		APRIL - JUNE (Q2)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
MEMBER MONTHS		112,972.0	50,754.6	62,217.4	-
REVENUES					
Revenues	1.1 Capitation	404,249,665			
	1.2 NH Rate Reconciliation	36,898			
	1.2.1 Community High Risk Pool	3,733,185			
	1.2.2 Patient Responsibility Reconciliation	1,068,836			
	1.3 Other Revenue	-			
1.4 Total Revenue	409,088,584				
		APRIL - JUNE (Q2)			
EXPENSES		Total	Non-HCBS	HCBS	MED-P / SIXT
LTC Nursing Facility (NF) & Hospice Services	2.1 Nursing Facility Days (Medicaid)	1,226,679	1,170,508	56,171	
	2.2 Nursing Facility Days (Crossover)	4,454	3,853	601	
	2.3 Nursing Facility FFS (Medicaid)	251,657,682	239,889,439	11,768,243	
	2.4 Nursing Facility FFS (Crossover)	859,285	742,480	116,806	
	2.5 Hospice Days	108,286	101,867	6,419	
	2.6 Hospice FFS	22,321,894	20,251,092	2,070,802	
	2.7 Ending IBNP for NF & Hospice Services	4,830,766	4,604,858	225,908	
	2.8 NF & Hospice Subcapitated Services	-	-	-	
	2.9 NF & Hospice Settlements/AP	-	-	-	
	2.10 Total Nursing Facility and Hospice	279,669,628	265,487,869	14,181,759	
Long Term Care Services	2.11 Assisted Living FFS	14,472,787	1,867,197	12,605,590	
	2.12 Home Health FFS	54,392,784	544,416	53,848,369	
	2.13 Medical Equipment/Supplies FFS	3,925,313	208,614	3,716,700	
	2.14 Therapy Services FFS	3,026,473	2,681,696	344,776	
	2.15 Transportation Services FFS	2,706,084	1,225,764	1,480,320	
	2.16 Case Management (Plan Provided) FFS	17,065,066	7,605,846	9,459,221	
	2.17 Case Management (non-Plan Provided) FFS	993,305	17,461	975,843	
	2.18 Home & Community Based Services (HCBS) FFS	13,283,991	1,330,919	11,953,073	
	2.19 Subcapitated LTC Services (excluding NF)	10,404,609	182,902	10,221,707	
	2.20 Ending IBNP for Long Term Care Services (excluding NF)	2,428,183	89,459	2,338,724	
2.21 LTC Services Settlements/AP (excluding NF)	352,835	162,744	190,091		
2.22 Grand Total LTC Services	402,721,058	281,404,885	121,316,172		
Expanded Benefits	3.1 Expanded Benefits FFS	363,751	197,865	165,886	
	3.2 Expanded Benefits Subcapitation	326,927	146,873	180,053	
	3.3 Ending IBNP for Expanded Benefits	-	-	-	
	3.4 Expanded Benefits Services Settlements	-	-	-	
	3.5 Total Expanded Benefits	690,678	344,738	345,940	
Totals Before and After Reinsurance	4.1 Total Services Paid Directly FFS	385,068,416	276,562,788	108,505,629	
	4.2 Total Services Paid Directly -- IBNP	7,258,949	4,694,317	2,564,632	
	4.3 Total Services Paid through Subcapitation	10,731,536	329,775	10,401,761	
	4.4 Total Services Paid by Settlements/AP	352,835	162,744	190,091	
	4.5 TPL & Fraud/Abuse Recoveries	-	-	-	
	4.6.1 Premium Deficiency Reserve	-	-	-	
	4.7 Subtotal Benefit Expense before Reinsurance	403,411,735	281,749,623	121,662,112	
	4.8 Reinsurance Premiums	-	-	-	
	4.9 Reinsurance Recoveries	-	-	-	
	4.10 Net Cost of Reinsurance	-	-	-	
4.11 Grand Total Service Benefit Expense Net of Reinsurance	403,411,735	281,749,623	121,662,112		
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees		APRIL - JUNE (Q2)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
Administrative Expenses	5.1 Salaries & Benefits	12,411,604	5,531,542	6,880,062	
	5.2 Administrative Services	1,036,458	461,924	574,535	
	5.3 Information Systems	512,503	228,410	284,093	
	5.4 Marketing Expenses	1,384,275	616,937	767,338	
	5.5 General Administration	2,146,954	956,844	1,190,110	
	5.6 Compliance/Regulatory	639,466	284,994	354,472	
	5.7 Total Administrative Expenses	18,131,261	8,080,650	10,050,611	
Government-Mandated Assessments, Taxes, and Fees Other Than Income	6.1 State Premium Tax	-	-	-	
	6.2 Department of Insurance Assessments	-	-	-	
	6.3 Other 1	-	-	-	
	6.4 Other 2	-	-	-	
	6.5 Other 3	-	-	-	
	6.6 Total	-	-	-	
7.0 Grand Total Expenses	421,542,996				
8.0 Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	(12,454,413)				
9.0 Income Tax Expense	(3,423,718)				
10.0 Net Underwriting Gain (Loss)	(9,030,695)				

LONG TERM CARE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary

		JULY - SEPTEMBER (Q3)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
MEMBER MONTHS		107,419.0	45,657.4	61,761.6	-
REVENUES					
Revenues	1.1 Capitation	378,746,336			
	1.2 NH Rate Reconciliation	23,409			
	1.2.1 Community High Risk Pool	3,651,002			
	1.2.2 Patient Responsibility Reconciliation	1,068,836			
	1.3 Other Revenue	-			
1.4 Total Revenue	383,489,583				
		JULY - SEPTEMBER (Q3)			
EXPENSES		Total	Non-HCBS	HCBS	MED-P / SIXT
LTC Nursing Facility (NF) & Hospice Services	2.1 Nursing Facility Days (Medicaid)	1,128,913	1,068,119	60,794	
	2.2 Nursing Facility Days (Crossover)	3,915	3,275	640	
	2.3 Nursing Facility FFS (Medicaid)	232,539,998	219,746,713	12,793,285	
	2.4 Nursing Facility FFS (Crossover)	747,668	646,359	101,309	
	2.5 Hospice Days	102,354	95,502	6,852	
	2.6 Hospice FFS	21,051,049	18,889,427	2,161,622	
	2.7 Ending IBNP for NF & Hospice Services	6,142,285	5,808,953	333,332	
	2.8 NF & Hospice Subcapitated Services	-	-	-	
	2.9 NF & Hospice Settlements/AP	-	-	-	
	2.10 Total Nursing Facility and Hospice	260,481,001	245,091,452	15,389,548	
Long Term Care Services	2.11 Assisted Living FFS	13,879,554	1,978,262	11,901,291	
	2.12 Home Health FFS	54,557,409	624,621	53,932,788	
	2.13 Medical Equipment/Supplies FFS	3,527,524	284,550	3,242,974	
	2.14 Therapy Services FFS	2,626,470	2,236,898	389,572	
	2.15 Transportation Services FFS	2,191,971	934,519	1,257,452	
	2.16 Case Management (Plan Provided) FFS	15,993,823	7,128,396	8,865,427	
	2.17 Case Management (non-Plan Provided) FFS	984,167	17,301	966,866	
	2.18 Home & Community Based Services (HCBS) FFS	13,219,056	1,142,780	12,076,276	
	2.19 Subcapitated LTC Services (excluding NF)	10,283,765	180,777	10,102,987	
	2.20 Ending IBNP for Long Term Care Services (excluding NF)	3,062,715	121,752	2,940,963	
2.21 LTC Services Settlements/AP (excluding NF)	589,635	257,388	332,246		
2.22 Grand Total LTC Services	381,397,088	259,998,696	121,398,392		
Expanded Benefits	3.1 Expanded Benefits FFS	327,561	172,501	155,060	
	3.2 Expanded Benefits Subcapitation	303,883	129,160	174,724	
	3.3 Ending IBNP for Expanded Benefits	-	-	-	
	3.4 Expanded Benefits Services Settlements	-	-	-	
	3.5 Total Expanded Benefits	631,444	301,661	329,784	
Totals Before and After Reinsurance	4.1 Total Services Paid Directly FFS	361,646,250	253,802,327	107,843,923	
	4.2 Total Services Paid Directly -- IBNP	9,205,000	5,930,705	3,274,295	
	4.3 Total Services Paid through Subcapitation	10,587,648	309,937	10,277,711	
	4.4 Total Services Paid by Settlements/AP	589,635	257,388	332,246	
	4.5 TPL & Fraud/Abuse Recoveries	-	-	-	
	4.6.1 Premium Deficiency Reserve	-	-	-	
	4.7 Subtotal Benefit Expense before Reinsurance	382,028,532	260,300,357	121,728,175	
	4.8 Reinsurance Premiums	-	-	-	
	4.9 Reinsurance Recoveries	-	-	-	
	4.10 Net Cost of Reinsurance	-	-	-	
4.11 Grand Total Service Benefit Expense Net of Reinsurance	382,028,532	260,300,357	121,728,175		
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees		JULY - SEPTEMBER (Q3)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
Administrative Expenses	5.1 Salaries & Benefits	11,634,939	5,185,402	6,449,537	
	5.2 Administrative Services	971,601	433,018	538,583	
	5.3 Information Systems	480,433	214,117	266,316	
	5.4 Marketing Expenses	1,297,653	578,332	719,322	
	5.5 General Administration	2,012,607	896,969	1,115,638	
	5.6 Compliance/Regulatory	599,451	267,160	332,291	
	5.7 Total Administrative Expenses	16,996,685	7,574,998	9,421,687	
Government-Mandated Assessments, Taxes, and Fees Other Than Income	6.1 State Premium Tax	-	-	-	
	6.2 Department of Insurance Assessments	-	-	-	
	6.3 Other 1	-	-	-	
	6.4 Other 2	-	-	-	
	6.5 Other 3	-	-	-	
	6.6 Total	-	-	-	
7.0 Grand Total Expenses	399,025,217				
8.0 Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	(15,535,634)				
9.0 Income Tax Expense	(4,270,746)				
10.0 Net Underwriting Gain (Loss)	(11,264,888)				

LONG TERM CARE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary

		OCTOBER - DECEMBER (Q4)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
MEMBER MONTHS		102,485.0	42,870.8	59,614.2	-
REVENUES					
Revenues	1.1 Capitation	398,691,003			
	1.2 NH Rate Reconciliation	-			
	1.2.1 Community High Risk Pool	4,035,934			
	1.2.2 Patient Responsibility Reconciliation	-			
	1.3 Other Revenue	-			
	1.4 Total Revenue	402,726,936			
		OCTOBER - DECEMBER (Q4)			
EXPENSES		Total	Non-HCBS	HCBS	MED-P / SIXT
LTC Nursing Facility (NF) & Hospice Services	2.1 Nursing Facility Days (Medicaid)	1,066,167	998,288	67,879	
	2.2 Nursing Facility Days (Crossover)	5,008	3,676	1,332	
	2.3 Nursing Facility FFS (Medicaid)	239,850,585	224,320,041	15,530,543	
	2.4 Nursing Facility FFS (Crossover)	1,003,274	733,007	270,267	
	2.5 Hospice Days	96,445	89,094	7,351	
	2.6 Hospice FFS	21,499,802	19,132,975	2,366,827	
	2.7 Ending IBNP for NF & Hospice Services	9,484,643	8,831,549	653,094	
	2.8 NF & Hospice Subcapitated Services	-	-	-	
	2.9 NF & Hospice Settlements/AP	-	-	-	
	2.10 Total Nursing Facility and Hospice	271,838,303	253,017,572	18,820,731	
	Long Term Care Services	2.11 Assisted Living FFS	13,052,286	2,042,764	11,009,522
2.12 Home Health FFS		61,866,624	930,990	60,935,634	
2.13 Medical Equipment/Supplies FFS		3,743,935	266,738	3,477,197	
2.14 Therapy Services FFS		2,989,083	2,524,083	465,000	
2.15 Transportation Services FFS		751,670	299,509	452,161	
2.16 Case Management (Plan Provided) FFS		16,911,826	7,537,547	9,374,279	
2.17 Case Management (non-Plan Provided) FFS		1,104,796	19,421	1,085,375	
2.18 Home & Community Based Services (HCBS) FFS		14,051,429	1,291,322	12,760,107	
2.19 Subcapitated LTC Services (excluding NF)		11,516,149	202,441	11,313,708	
2.20 Ending IBNP for Long Term Care Services (excluding NF)		3,417,977	219,814	3,198,163	
2.21 LTC Services Settlements/AP (excluding NF)		(950,316)	(408,460)	(541,856)	
2.22 Grand Total LTC Services	400,293,764	267,943,743	132,350,020		
Expanded Benefits	3.1 Expanded Benefits FFS	269,731	147,329	122,403	
	3.2 Expanded Benefits Subcapitation	234,934	98,196	136,738	
	3.3 Ending IBNP for Expanded Benefits	-	-	-	
	3.4 Expanded Benefits Services Settlements	-	-	-	
	3.5 Total Expanded Benefits	504,665	245,525	259,140	
Totals Before and After Reinsurance	4.1 Total Services Paid Directly FFS	377,095,042	259,245,727	117,849,315	
	4.2 Total Services Paid Directly -- IBNP	12,902,620	9,051,364	3,851,257	
	4.3 Total Services Paid through Subcapitation	11,751,083	300,637	11,450,446	
	4.4 Total Services Paid by Settlements/AP	(950,316)	(408,460)	(541,856)	
	4.5 TPL & Fraud/Abuse Recoveries	-	-	-	
	4.6.1 Premium Deficiency Reserve	-	-	-	
	4.7 Subtotal Benefit Expense before Reinsurance	400,798,429	268,189,268	132,609,161	
	4.8 Reinsurance Premiums	-	-	-	
	4.9 Reinsurance Recoveries	-	-	-	
	4.10 Net Cost of Reinsurance	-	-	-	
	4.11 Grand Total Service Benefit Expense Net of Reinsurance	400,798,429	268,189,268	132,609,161	
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees		OCTOBER - DECEMBER (Q4)			
		Total	Non-HCBS	HCBS	MED-P / SIXT
Administrative Expenses	5.1 Salaries & Benefits	12,218,594	5,445,522	6,773,072	
	5.2 Administrative Services	1,020,341	454,740	565,600	
	5.3 Information Systems	504,533	224,858	279,675	
	5.4 Marketing Expenses	1,362,749	607,343	755,406	
	5.5 General Administration	2,113,567	941,964	1,171,603	
	5.6 Compliance/Regulatory	629,522	280,562	348,960	
	5.7 Total Administrative Expenses	17,849,306	7,954,990	9,894,316	
Government-Mandated Assessments, Taxes, and Fees Other Than Income	6.1 State Premium Tax	-			
	6.2 Department of Insurance Assessments	-			
	6.3 Other 1	-			
	6.4 Other 2	-			
	6.5 Other 3	-			
	6.6 Total	-			
7.0 Grand Total Expenses	418,647,734				
8.0 Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	(15,920,798)				
9.0 Income Tax Expense	(4,376,627)				
10.0 Net Underwriting Gain (Loss)	(11,544,170)				

LONG TERM CARE -- REVENUE AND EXPENSE SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023

Summary

		Prior Year Adjustments	TOTAL (TO DATE)			
			Total	Non-HCBS	HCBS	MED-P / SIXT
MEMBER MONTHS		-	440,226.0	191,002.8	249,223.2	-
REVENUES						
Revenues	1.1 Capitation	(508,390)	1,606,695,115			
	1.2 NH Rate Reconciliation	(2,390,179)	(2,309,429)			
	1.2.1 Community High Risk Pool	2,618,765	17,878,583			
	1.2.2 Patient Responsibility Reconciliation	(6,679,733)	(3,473,225)			
	1.3 Other Revenue	-	-			
1.4 Total Revenue	(6,959,537)	1,618,791,044				
EXPENSES						
LTC Nursing Facility (NF) & Hospice Services	2.1 Nursing Facility Days (Medicaid)	-	4,681,263	4,449,264	231,999	
	2.2 Nursing Facility Days (Crossover)	-	18,354	15,239	3,115	
	2.3 Nursing Facility FFS (Medicaid)	14,621,781	996,801,175	932,231,114	49,948,280	
	2.4 Nursing Facility FFS (Crossover)	(1,476,108)	2,077,318	2,982,563	570,863	
	2.5 Hospice Days	-	417,692	390,577	27,115	
	2.6 Hospice FFS	5,552	87,796,076	78,988,962	8,801,561	
	2.7 Ending IBNP for NF & Hospice Services	(29,181,891)	(5,252,669)	22,585,916	1,343,306	
	2.8 NF & Hospice Subcapitated Services	-	-	-	-	
	2.9 NF & Hospice Settlements/AP	-	-	-	-	
	2.10 Total Nursing Facility and Hospice	(16,030,666)	1,081,421,900	1,036,788,555	60,664,011	
Long Term Care Services	2.11 Assisted Living FFS	883,382	56,888,757	7,464,366	48,541,009	
	2.12 Home Health FFS	3,182,716	227,918,027	2,610,201	222,125,110	
	2.13 Medical Equipment/Supplies FFS	227,249	15,877,617	1,093,090	14,557,278	
	2.14 Therapy Services FFS	521,026	12,445,982	10,402,493	1,522,464	
	2.15 Transportation Services FFS	178,200	7,074,441	3,008,778	3,887,464	
	2.16 Case Management (Plan Provided) FFS	-	67,928,478	30,275,506	37,652,972	
	2.17 Case Management (non-Plan Provided) FFS	-	4,040,053	71,020	3,969,034	
	2.18 Home & Community Based Services (HCBS) FFS	518,778	53,473,141	4,865,942	48,088,420	
	2.19 Subcapitated LTC Services (excluding NF)	(500,000)	41,795,787	743,514	41,552,273	
	2.20 Ending IBNP for Long Term Care Services (excluding NF)	(4,047,717)	6,580,529	490,940	10,137,305	
2.21 LTC Services Settlements/AP (excluding NF)	-	320,388	160,348	160,040		
2.22 Grand Total LTC Services	(15,067,031)	1,575,765,099	1,097,974,751	492,857,379		
Expanded Benefits	3.1 Expanded Benefits FFS	-	1,338,027	720,585	617,442	
	3.2 Expanded Benefits Subcapitation	-	1,211,000	526,389	684,611	
	3.3 Ending IBNP for Expanded Benefits	-	-	-	-	
	3.4 Expanded Benefits Services Settlements	6,054	6,054	-	-	
	3.5 Total Expanded Benefits	6,054	2,555,081	1,246,975	1,302,053	
Totals Before and After Reinsurance	4.1 Total Services Paid Directly FFS	18,662,577	1,533,659,092	1,074,714,619	440,281,896	
	4.2 Total Services Paid Directly -- IBNP	(33,229,608)	1,327,859	23,076,856	11,480,611	
	4.3 Total Services Paid through Subcapitation	(500,000)	43,006,787	1,269,903	42,236,884	
	4.4 Total Services Paid by Settlements/AP	6,054	326,442	160,348	160,040	
	4.5 TPL & Fraud/Abuse Recoveries	-	-	-	-	
	4.6.1 Premium Deficiency Reserve	-	-	-	-	
	4.7 Subtotal Benefit Expense before Reinsurance	(15,060,977)	1,578,320,180	1,099,221,726	494,159,432	
	4.8 Reinsurance Premiums	-	-	-	-	
	4.9 Reinsurance Recoveries	-	-	-	-	
	4.10 Net Cost of Reinsurance	-	-	-	-	
4.11 Grand Total Service Benefit Expense Net of Reinsurance	(15,060,977)	1,578,320,180	1,099,221,726	494,159,432		
Administrative Expenses, Government-Mandated Assessments, Taxes, and Fees						
Administrative Expenses	5.1 Salaries & Benefits	-	49,324,702	21,982,788	27,341,914	
	5.2 Administrative Services	-	4,118,968	1,835,721	2,283,247	
	5.3 Information Systems	-	2,036,728	907,719	1,129,009	
	5.4 Marketing Expenses	-	5,501,220	2,451,756	3,049,463	
	5.5 General Administration	-	8,532,167	3,802,574	4,729,593	
	5.6 Compliance/Regulatory	-	2,541,289	1,132,589	1,408,700	
	5.7 Total Administrative Expenses	-	72,055,074	32,113,147	39,941,927	
Government-Mandated Assessments, Taxes, and Fees Other Than Income	6.1 State Premium Tax	-	-	-	-	
	6.2 Department of Insurance Assessments	-	-	-	-	
	6.3 Other 1	-	-	-	-	
	6.4 Other 2	-	-	-	-	
	6.5 Other 3	-	-	-	-	
	6.6 Total	-	-	-	-	
7.0 Grand Total Expenses	(15,060,977)	1,650,375,254				
8.0 Underwriting Gain / (Loss) --- AKA Pre-tax Earnings from Operations	8,101,440	(31,584,210)				
9.0 Income Tax Expense	2,227,086	(8,682,499)				
10.0 Net Underwriting Gain (Loss)	5,874,354	(22,901,710)				

LONG TERM CARE --- RELATED-PARTY TRANSACTION SCHEDULE - SUMMARY

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023
 Summary

EXPENSES	Vendor Name	Affiliation	Payment Methodology	JANUARY - MARCH (Q1)		APRIL - JUNE (Q2)		JULY - SEPTEMBER (Q3)		OCTOBER - DECEMBER (Q4)		Prior Year Adjustments		TOTAL (TO DATE)	
				MM	Amount	MM	Amount	MM	Amount	MM	Amount	MM	Amount	MM	Amount
1.1	Vendor #1														
1.2	Vendor #2														
1.3	Vendor #3														
1.4	Vendor #4														
1.5	Vendor #5														
1.6	Total LTC Nursing Facility & Hospice														
2.1	Enolve Pharmacy Solutions, Inc.	Non-Insurance Affiliate	Fee-for-Service	113,989	116,800	113,183.0	116,800	100,543	104,056	104,056	435,388				
2.2	Enolve Vision of Florida, Inc.	Non-Insurance Affiliate	Subcapitation	345,257	326,927	113,183.0	326,927	303,883	234,934	234,934	1,211,000				
2.3	Centene Management Company, LLC	Non-Insurance Affiliate	% of Premium	17,957,762	17,065,066	113,183.0	17,065,066	15,993,823	16,911,826	16,911,826	67,928,478				
2.4	Vendor #4														
2.5	Vendor #5														
2.6	Total Long Term Services														
3.1	Centene Management Company, LLC	Non-Insurance Affiliate	% of Premium	16,959,711	16,119,949	113,183.0	16,119,949	15,114,617	15,757,136	15,757,136	63,951,412				
3.2	Interera, Inc.	Non-Insurance Affiliate	Subcapitation	11,750	11,318	113,183.0	11,318	10,770	10,360	10,360	44,199				
3.3	Enolve PeopleCare, Inc.	Non-Insurance Affiliate	Subcapitation	34,076	32,823	113,183.0	32,823	31,234	30,043	30,043	128,176				
3.4	Vendor #4														
3.5	Vendor #5														
3.6	Total Administrative Expenses														
4	Grand Total														

ACHIEVED SAVINGS REBATE EXHIBIT

Health Plan: Sunshine State Health Plan
 Reporting Period: 1/1/2022 - 12/31/2022
 Plan Through: 3/31/2023
 Plan Type: Comprehensive

	JANUARY - MARCH (Q1)		APRIL - JUNE (Q2)		JULY - SEPTEMBER (Q3)		OCTOBER - DECEMBER (Q4)		TOTAL		TOTAL (Q-DATE)	
	Total	MMA	Total	MMA	Total	MMA	Total	MMA	Total	MMA		
REVENUES												
1.1 Total Revenue from Revenue & Expense Schedules	1,788,971,086	1,358,325,608	1,740,743,287	1,331,654,704	1,697,149,037	1,313,659,454	1,647,558,346	1,244,831,410	12,502,080	4,457,457	6,871,935,677	5,253,318,632
1.2 Federal Taxes and Assessments (ACA 9010)	-	-	-	-	-	-	-	-	-	-	-	-
1.3 State Insurance, Premium and other Taxes	33,537,235	28,346,386	7,258,949	7,654,114	46,938,102	37,711,802	72,809,086	72,809,086	(159,648,851)	-	43,539,755	42,213,896
1.4 Other Revenue	-	-	-	-	-	-	-	-	-	-	-	-
1.5 Loan, Forfeited and other Payments Outside of Capitation Rate	(7,376,624)	(7,376,624)	-	-	-	-	-	-	-	-	(7,376,624)	-
1.6 Revenue Subject to ASR	1,781,594,462	1,351,418,984	1,740,743,287	1,331,654,704	1,697,149,037	1,313,659,454	1,647,558,346	1,244,831,410	(1,502,080)	4,457,457	6,864,543,053	5,245,942,008
EXPENSES												
Benefit Expenses												
2.1 Total Revenue Paid through FFS and Subrogation During the Year	1,477,151,112	1,075,531,785	1,460,888,367	1,064,288,415	1,419,857,012	1,047,653,114	1,424,792,479	1,035,946,305	388,846,124	111,463,721	5,893,356,642	4,316,690,763
2.2 Insured but not yet billed Ending Balance	33,537,235	28,346,386	36,933,693	29,654,114	46,938,102	37,711,802	85,811,706	72,809,086	12,500,620	(159,648,851)	43,539,755	42,213,896
2.3 Total Revenue Subject to ASR	1,510,688,347	1,103,878,171	1,520,000,171	1,116,288,441	1,511,591,568	1,125,568,016	1,500,604,185	1,108,755,391	(1,500,000)	4,307,817,596	5,837,396,397	4,358,904,659
2.4 Total Benefit Expense before Insurance	1,553,027,936	1,145,885,475	1,520,000,171	1,116,288,441	1,511,591,568	1,125,568,016	1,500,604,185	1,108,755,391	(1,500,000)	4,307,817,596	5,837,396,397	4,358,904,659
2.5 Net Cost of Insurance	287,011	287,011	256,477	256,477	440,613	440,613	89,393	89,393	(89,393)	-	1,073,493	1,073,493
2.6 Total Benefit Expense after Reinsurance	1,553,314,947	1,146,172,486	1,520,256,647	1,117,044,918	1,512,032,181	1,130,008,629	1,500,693,578	1,108,844,784	(1,500,000)	4,307,817,596	5,838,470,190	4,360,000,152
Administrative Expenses												
3.1 Total Administrative Expenses Non Revenue & Expense Schedule	178,316,945	156,039,145	171,248,625	153,148,891	168,075,617	151,670,313	163,619,613	143,163,667	17,649,316	676,645,649	676,645,649	676,645,649
3.2 Total Administrative Expenses Revenue & Expense Schedule	(7,276,481)	(2,082,431)	(2,082,431)	(2,046,535)	(2,046,535)	(2,046,535)	(2,046,535)	(2,046,535)	(2,046,535)	(2,046,535)	(2,046,535)	(2,046,535)
3.3 Less: (Other)/Medical expenses	(154,008)	(116,971)	(149,800)	(114,167)	(146,063)	(112,625)	(141,842)	(106,724)	(138,118)	(106,724)	(106,724)	(106,724)
3.4 Less: Cash-value of Executive Bonus Above Base Salary	(564,276)	(426,748)	(549,021)	(418,307)	(535,180)	(412,654)	(519,706)	(391,033)	(518,673)	(391,033)	(518,673)	(391,033)
3.5 Less: Other Non-allowed expenses	(42,461,515)	(335,684)	(849,311)	(8,290,044)	(403,829)	(3,598)	(390,795)	(307,951)	(83,204)	-	(1,633,800)	(1,296,916)
3.6 Administrative Expense Subject to ASR	174,413,370	153,772,993	167,488,644	150,240,748	164,372,513	148,210,477	157,417,906	140,445,118	16,972,788	-	660,685,434	592,188,735
3.7 Administrative Expense Subject to ASR - Minimum	-	-	-	-	-	-	-	-	-	-	660,685,434	592,188,735
3.8 Administrative Expense Subject to ASR - Maximum	-	-	-	-	-	-	-	-	-	-	660,685,434	592,188,735
3.9 Total Administrative Expenses Subject to ASR	-	-	-	-	-	-	-	-	-	-	660,685,434	592,188,735
3.10 Total Revenue and Administrative Expense Subject to ASR	-	-	-	-	-	-	-	-	-	-	6,205,258,623	4,948,130,743
Calculation of Pre-Tax Income and ASR												
7.1 Pre-tax Income	-	-	-	-	-	-	-	-	-	-	135,034,067	163,079,903
7.2 Pre-tax Income as a Percent of Revenue	-	-	-	-	-	-	-	-	-	-	2.0%	3.1%
7.3 Preliminary Achieved Savings (ASR)	-	-	-	-	-	-	-	-	-	-	1,641,734,816	(2,843,772)
												-1.4%

MEDICAL LOSS RATIO EXHIBIT
 Health Plan: Sunshine State Health Plan
 Calendar Year: 1/1/2022
 Reporting Period: 1/1/2022 - 12/31/2022
 Paid Through: 3/31/2023
 Plan Type: Comprehensive

	JANUARY - MARCH (Q1)		APRIL - JUNE (Q2)		JULY - SEPTEMBER (Q3)		OCTOBER - DECEMBER (Q4)		Prior Year Adjustments		Total	TOTAL (TD DATE)		
	Total	MVA	Total	MVA	Total	MVA	Total	MVA	Total	MVA		LTC	LTC	
REVENUES														
1.1 Total Revenue from Revenue & Expense Schedules	1,788,971,084	1,358,525,608	1,740,743,287	1,331,054,704	1,697,149,037	1,313,659,454	1,677,538,346	1,244,831,411	4,572,080	(2,502,080)	6,950,157	6,871,919,677	5,231,128,632	1,638,791,044
1.2 Federal Taxes and Assessments, including ACA & 9010	(16,587,243)	(154,257,377)	(16,895,629)	(16,895,629)	(8,955,300)	(8,955,300)	-	-	(10,073,744)	(12,300,830)	(2,227,086)	(54,738,999)	(51,350,407)	(3,388,592)
1.3 State Insurance, Premium and other Taxes	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.4 Regulatory Authority Licenses and Fees	1,772,883,843	1,545,093,870	1,723,847,663	1,314,759,079	1,688,193,737	1,304,704,154	1,647,538,346	1,244,831,410	(5,616,288)	(14,862,910)	(9,386,623)	6,817,960,678	5,201,779,224	1,615,400,452
1.5 Revenue Subject to MR	-	-	-	-	-	-	-	-	-	-	-	-	-	-
EXPENSES														
2.1 Total Benefits Paid through P&S During the Year	1,396,089,874	1,005,270,116	1,379,897,628	994,629,512	1,334,679,815	973,033,007	1,349,896,446	963,801,694	93,301,144	114,963,721	18,663,577	5,559,956,276	4,000,197,685	1,533,659,892
2.2 Total Benefits Paid through P&S During the Year	39,453,025	67,633,105	74,084,553	66,626,462	49,372,166	71,371,945	46,658,660	68,791,001	(500,000)	(500,000)	500,000	304,270,769	214,588,530	89,682,239
2.3 Incurred but not Paid (IBNP) Ending Balance	33,537,235	28,346,336	36,913,063	29,654,114	46,926,102	37,721,102	85,811,706	72,909,086	(126,418,742)	(159,648,351)	(33,229,608)	43,539,755	42,211,896	1,327,859
2.4 Incurred but not Paid (IBNP) Ending Balance Subcontractor	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.5 Settlements/APP	42,335,589	42,007,355	23,198,746	22,845,912	44,808,454	44,218,819	19,574,885	20,525,201	929,932	935,986	6,054	130,853,661	130,577,219	326,442
2.6 Total Benefit Expense Before Reinsurance	1,547,133,774	1,143,509,914	1,514,104,289	1,113,966,006	1,505,539,974	1,126,219,873	1,522,941,888	1,126,026,691	(47,248,644)	(47,248,644)	(15,060,977)	6,042,470,481	4,477,534,824	1,564,935,666
2.7 Net Cost of Reinsurance	287,011	-	256,477	256,477	440,613	440,613	89,393	89,393	-	-	-	1,073,493	1,073,493	-
2.8 Total Benefit Expense after Reinsurance	1,547,420,785	1,143,796,916	1,514,360,766	1,114,224,482	1,505,980,587	1,126,660,486	1,523,030,480	1,126,116,084	(32,187,667)	(47,248,644)	(15,060,977)	6,043,543,974	4,478,608,317	1,564,935,666
Florida-Specific Contributions														
3.1 Contributions for the Support of Supplemental Medical and Indigent Care	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.2 Contributions for the Support of Supplemental Medical and Indigent Care	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.3 Total Florida-Specific Contributions	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Improving Health Care Quality Expenses Incurred														
4.1 Improve Health Outcomes	26,120,480	26,120,480	25,603,831	25,603,831	25,257,835	25,257,835	23,934,473	23,934,473	-	-	-	100,916,619	100,916,619	348,772
4.2 Activities to Prevent Hospital Readmissions	90,273	90,273	88,488	88,488	87,292	87,292	82,719	82,719	-	-	-	348,772	348,772	348,772
4.3 Improve Patient Safety and Reducing Medical Errors	62,248	62,248	61,017	61,017	60,193	60,193	57,039	57,039	-	-	-	240,497	240,497	240,497
4.4 Wellness and Health Promotion Activities	853,075	853,075	836,201	836,201	824,901	824,901	781,684	781,684	-	-	-	3,295,939	3,295,939	3,295,939
4.5 Patient Safety and Quality Improvement	1,130,000	1,130,000	1,130,000	1,130,000	1,130,000	1,130,000	1,130,000	1,130,000	-	-	-	4,477,534,824	4,477,534,824	4,477,534,824
4.6 Total of Readmission Prevention, Health Care Quality, and Patient Safety and Quality Improvement	28,282,066	28,282,066	27,722,656	27,722,656	27,348,028	27,348,028	25,915,151	25,915,151	-	-	-	109,262,896	109,262,896	109,262,896
5.0 Deductible Fraud and Abuse Detection/Recovery Expenses	74,000	74,000	141,881	141,881	10,802	10,802	57,304	57,304	-	-	-	284,577	284,577	284,577
6.0 Preliminary Medical Loss Ratio (MLR)	89%	87%	89%	87%	91%	88%	94%	93%	57%	31%	57%	90%	88%	88%