

MMP name: **Molina Healthcare**

MMP self-reported data, subject to audit

State Fiscal Year: **2018**

Program: **MMP Dual Demo - Integrated Care Program (STAR+PLUS+Medicare)**

Texas Financial Alignment Demonstration

Submission Date: **9/3/2019**

County: **Bexar County (San Antonio)**

template version 2.0

Submission Type: **Yr-End 334-Day**

Rptg Period End Date: **8/31/2018**

Part 1: **Summary Income Statement**

Managed Care contract revenues & costs

	Incurred Months:	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	SFY YTD
1 Member Months (per Medicaid)		1,627	1,627	1,597	1,587	1,672	1,645	1,617	1,615	1,573	1,553	1,531	1,546	19,190
2 additional / (fewer) Mbr-Mos in Medicare		3	7	5	9	9	9	6	5	4	2	0	12	71
3 Average Monthly Member Months														1,599
Revenues:														
<i>CMS Medicare Premiums:</i>														
4 Monthly Capitation Received - Medical		1,964,766	1,967,611	1,900,352	1,921,471	2,107,105	2,031,378	1,988,770	1,993,125	1,896,674	1,869,224	1,849,647	1,908,900	23,399,024
5 Monthly Capitation Withheld - Medical		40,933	40,992	39,591	40,031	66,540	64,148	62,803	62,941	59,895	59,028	58,410	60,281	655,592
6 Gross Total (before withhold) - Medical		2,005,699	2,008,603	1,939,943	1,961,502	2,173,645	2,095,526	2,051,573	2,056,066	1,956,569	1,928,252	1,908,057	1,969,181	24,054,616
7 Gross Total (no withholding) - Pharmacy		652,635	654,189	641,643	639,952	647,578	636,778	624,212	620,942	603,701	596,180	587,507	598,506	7,503,823
8 Sub-total: Medicare Capitation		2,658,334	2,662,792	2,581,586	2,601,454	2,821,223	2,732,304	2,675,785	2,677,008	2,560,270	2,524,432	2,495,564	2,567,687	31,558,439
<i>Medicaid Premiums:</i>														
9 Monthly Capitation Received - Medical		2,032,898	2,036,430	1,935,235	1,958,743	2,075,919	1,971,245	1,911,853	1,901,914	1,825,719	1,799,637	1,770,847	1,269,896	22,490,335
10 Monthly Capitation Received - Pharmacy		5,235	5,243	5,135	5,111	5,237	5,156	5,075	5,059	4,929	4,873	4,804	1,351	57,210
11 Monthly Capitation Withheld - Medical		38,083	38,167	36,322	36,737	58,709	55,904	54,278	53,971	51,871	51,162	50,351	34,424	559,980
12 Monthly Capitation Withheld - Pharmacy		106	107	105	104	162	160	157	157	153	151	149	42	1,551
13 Gross Total (before withhold) - Medical		2,070,981	2,074,597	1,971,557	1,995,480	2,134,628	2,027,149	1,966,131	1,955,885	1,877,590	1,850,799	1,821,198	1,304,320	23,050,315
14 Gross Total (before withhold) - Pharmacy		5,341	5,350	5,240	5,215	5,399	5,316	5,232	5,216	5,082	5,024	4,953	1,393	58,761
15 Sub-total: Medicaid Capitation		2,076,322	2,079,947	1,976,797	2,000,695	2,140,027	2,032,465	1,971,363	1,961,101	1,882,672	1,855,823	1,826,151	1,305,713	23,109,076
16 Investment Income		12,633	16,428	15,774	20,439	16,712	18,694	22,620	23,174	27,083	25,439	29,934	27,700	256,630
17 Other Revenue		0	0	0	0	0	0	0	0	0	0	0	0	0
18 Total Gross Revenues		4,747,289	4,759,167	4,574,157	4,622,588	4,977,962	4,783,463	4,669,768	4,661,283	4,470,025	4,405,694	4,351,649	3,901,100	54,924,145
19 Premium Taxes (on Medicaid)		36,336	36,399	34,594	35,012	37,450	35,568	34,499	34,319	32,947	32,477	31,958	22,850	404,409
20 Maintenance Taxes		98	98	96	95	100	99	97	97	94	93	92	93	1,151
21 Net Revenues		4,710,856	4,722,670	4,539,467	4,587,481	4,940,411	4,747,796	4,635,172	4,626,867	4,436,984	4,373,124	4,319,600	3,878,157	54,518,585
Expenses:														
<i>Medicare Expenses:</i>														
22 Fee-For-Service		1,508,512	1,892,239	1,445,640	1,701,232	1,803,432	1,596,982	1,585,977	1,608,902	1,787,590	1,519,437	1,485,067	1,418,205	19,353,215
23 Capitated Services		0	0	0	0	0	0	0	0	0	0	0	0	0
24 Net Reinsurance cost		212	212	208	(234)	5,604	(3,086)	5,377	5,413	6,008	5,870	(3,621)	3,597	25,560
25 IBNR Accrual - Medical		0	0	0	0	0	0	0	0	0	0	0	0	0
26 Other Medicare Medical Expenses		991	9,022	16,596	526	6,900	136	35,401	12,277	1,288	2,296	232	3,878	89,543
27 Total Medicare Medical Expenses		1,509,715	1,901,473	1,462,444	1,701,524	1,815,936	1,594,032	1,626,755	1,626,592	1,794,886	1,527,603	1,481,678	1,425,680	19,468,318
28 Medicare Gross Rx Exp (excl PBM Admin)		702,333	708,854	677,189	695,080	796,521	709,884	740,037	747,690	782,843	799,822	742,427	739,722	8,842,402
29 Medicare Rx Rebates		159,405	171,115	170,868	172,799	179,271	179,250	179,383	183,877	182,776	184,140	187,856	190,863	2,141,603
30 Sub-total: Medicare Medical & Rx Expenses		2,052,644	2,439,213	1,968,765	2,223,805	2,433,186	2,124,667	2,187,409	2,190,405	2,394,953	2,143,285	2,036,248	1,974,539	26,169,117
<i>Medicaid Expenses:</i>														
31 Fee-For-Service		1,670,262	1,689,367	1,569,621	1,585,474	1,819,234	1,571,562	1,680,540	1,590,171	1,575,571	1,453,905	1,505,236	1,565,878	19,276,821
32 Capitated Services		0	0	0	0	0	0	0	0	0	0	0	0	0
33 Net Reinsurance cost		0	0	0	0	0	0	0	0	0	0	0	0	0
34 IBNR Accrual - Medical		0	0	0	0	0	0	0	0	0	0	0	0	0
35 Minimum Payment Amount Program (MPAP)		0	0	0	0	0	0	0	0	0	0	0	0	0
36 Quality Incentive Payment Program (QIPP):		155,180	154,590	144,559	147,510	165,211	152,230	145,870	145,870	138,162	135,197	132,825	145,870	1,763,074
37 Other Medicaid Medical Expenses		88,955	86,197	85,128	109,790	63,425	78,244	83,885	79,907	80,778	114,284	79,690	85,845	1,036,128
38 Total Medicaid Medical Expenses		1,914,397	1,930,154	1,799,308	1,842,774	2,047,870	1,802,036	1,910,295	1,815,948	1,794,511	1,703,386	1,717,751	1,797,593	22,076,023
39 Medicaid Prescription Exp (excl PBM Admin)		1,887	1,658	2,195	2,266	2,913	2,000	2,199	1,925	2,013	1,440	1,299	981	22,775
40 Sub-total: Medicaid Medical & Rx Expenses		1,916,284	1,931,812	1,801,503	1,845,040	2,050,783	1,804,036	1,912,494	1,817,873	1,796,524	1,704,826	1,719,050	1,798,574	22,098,798
41 Total Medical & Prescription Expenses		3,968,927	4,371,025	3,770,268	4,068,845	4,483,969	3,928,702	4,099,903	4,008,278	4,191,477	3,848,111	3,755,299	3,773,113	48,267,915
42 Administrative Expenses		456,273	376,679	317,487	458,263	489,583	399,830	390,734	240,032	294,392	259,616	379,003	359,317	4,421,209
43 Total Expenses		4,425,200	4,747,704	4,087,754	4,527,108	4,973,552	4,328,532	4,490,636	4,248,310	4,485,869	4,107,727	4,134,302	4,132,430	52,689,124
44 Total Net Income Before Taxes		285,656	(25,034)	451,713	60,373	(33,141)	419,264	144,536	378,557	(48,885)	265,397	185,298	(254,273)	1,829,461
45 Net Income EXCL Medicare Rx		183,181	(134,013)	323,291	(50,380)	(55,613)	319,752	87,947	328,216	(45,697)	291,216	158,767	(296,893)	1,109,775

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County: **Bexar County (San Antonio)**

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Submission Type: **Yr-End 334-Day**

Rptg Period End Date: **8/31/2018**

Part 1: **Summary Income Statement**

Key Ratios:	Incurred Months:	Managed Care contract revenues & costs												SFY YTD
		Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	
46 % total Medical Exp to Net Revenues	72.7%	81.1%	71.9%	77.3%	78.2%	71.5%	76.3%	74.4%	80.9%	73.9%	74.1%	83.1%	76.2%	
47 % total Prescription Exp to Net Revenues	11.6%	11.4%	11.2%	11.4%	12.6%	11.2%	12.1%	12.2%	13.6%	14.1%	12.9%	14.2%	12.3%	
48 % Total Medical & Rx to Net Rev. (MLR)	84.3%	92.6%	83.1%	88.7%	90.8%	82.7%	88.5%	86.6%	94.5%	88.0%	86.9%	97.3%	88.5%	
49 % Admin Exp to Net Revenues	9.7%	8.0%	7.0%	10.0%	9.9%	8.4%	8.4%	5.2%	6.6%	5.9%	8.8%	9.3%	8.1%	
50 % Total Net Income to Net Revenues	6.1%	-0.5%	10.0%	1.3%	-0.7%	8.8%	3.1%	8.2%	-1.1%	6.1%	4.3%	-6.6%	3.4%	
51 % Adj. Admin to Adj. Net Revenues (excludes Taxes & Prescription pass-through)	11.1%	9.1%	8.0%	11.4%	11.2%	9.6%	9.6%	5.8%	7.5%	6.7%	10.0%	10.7%	9.2%	
52 % Net Income EXCL Medicare Rx	4.5%	-3.3%	8.3%	-1.3%	-1.3%	7.8%	2.2%	8.2%	-1.2%	7.7%	4.3%	-9.1%	2.4%	
Memo: QWP withholdings and recoupments														
53 Total Medicare Capitation Withheld	40,933	40,992	39,591	40,031	66,540	64,148	62,803	62,941	59,895	59,028	58,410	60,281	655,592	
54 Total Medicaid Capitation Withheld	38,189	38,274	36,426	36,841	58,871	56,064	54,435	54,128	52,024	51,313	50,500	34,466	561,531	
55 Medicare Payments against Withholding												0	0	
56 Medicaid Payments against Withholding												0	0	
57 Net Amount Not Received by MMP	79,122	79,265	76,017	76,873	125,411	120,212	117,238	117,069	111,918	110,341	108,910	94,747	1,217,123	
Additional memo items:														
58 total Net Revenues (from Line 21)	4,710,856	4,722,670	4,539,467	4,587,481	4,940,411	4,747,796	4,635,172	4,626,867	4,436,984	4,373,124	4,319,600	3,878,157	54,518,585	
59 Medicare portion (incls interest income)	2,664,775	2,671,169	2,589,629	2,611,876	2,829,745	2,741,836	2,687,319	2,688,825	2,574,080	2,537,404	2,510,827	2,581,811	31,689,295	
60 Medicaid portion (excls Prem tax; incls interest inc)	2,046,080	2,051,502	1,949,838	1,975,605	2,110,667	2,005,960	1,947,853	1,938,042	1,862,904	1,835,721	1,808,772	1,296,346	22,829,290	
61 add-check	0	0	0	0	(0)	(0)	(0)	(0)	0	(0)	0	(0)	0	
62 total Net Income (from Line 43)	285,656	(25,034)	451,713	60,373	(33,141)	419,264	144,536	378,557	(48,885)	265,397	185,298	(254,273)	1,829,461	
63 Medicare portion	394,481	51,478	468,427	169,653	162,967	426,287	313,112	382,338	37,553	269,109	293,576	435,166	3,404,147	
64 Medicaid portion	(108,826)	(76,512)	(16,714)	(109,281)	(196,108)	(7,023)	(168,575)	(3,781)	(86,439)	(3,712)	(108,278)	(689,438)	(1,574,687)	
65 add-check	0	(0)	1	0	(0)	(0)	(0)	(0)	0	(0)	0	(0)	0	

Note: Except where stated otherwise, reporting is on an incurred basis (that is, reported in the period corresponding to dates of service, rather than to date paid). With each new FSR submission, all prior quarters' data must be updated to reflect, in the column pertaining to the appropriate past month, the most recent revised IBNR estimates, the most recent Medicare capitation premium adjustments, and the most recent Medicare and Medicaid payment file data.

TERMS USED IN FINANCIAL STATISTICAL REPORTS (FSRs)

Total Member Months - Number of members enrolled in each month. YTD is the sum of the individual month's membership.

Revenues:

- **Premiums** – Capitation payments paid to MCOs (Managed Care Organization) by HHSC.
- **Delivery Supplemental Payments** – A one-time per pregnancy supplemental payment made by HHSC to STAR, CHIP MCOs.
- **Pharmacy Premiums** - Pharmacy capitation payments paid to MCOs by HHSC
- **Investment Income** – All interest and dividend income resulting from investment of funds received.
- **Other Revenue** – Any and all income generated from other sources.
- **Premium Taxes** – Premium taxes incurred by MCOs for premiums applicable to the reported period.
- **Maintenance Taxes** – Maintenance taxes incurred by MCOs for premiums applicable to the reported period.

Medical Expenses:

- **Fee for Service** – Non-capitated payments for services rendered to the members.
- **Capitated Services** – Includes PCPs and Hospitals capitation payments which are amounts paid to providers that do not pay claims to other providers from the capitation payments and also the capitation paid to subcontractors in which the capitation is the funding source for paying claims for healthcare services performed in each Texas service area.
- **Net Reinsurance Cost** – Total reinsurance premiums paid by the MCO net of reinsurance recoveries.
- **IBNR Accrual** – Incurred But Not Reported (IBNR) accrual medical expenses are an estimate of the expected healthcare expenses incurred, but not paid, based on claims lag schedules and completion factors, as well as any counts of services rendered but not billed, e.g., pre-authorized hospital days.

Administrative Expenses – includes those expenses that are directly or indirectly in support of the Texas Medicaid/CHIP operations of the MCO. Administrative expenses include Salaries, Wages and other benefits, Payroll taxes, Utilities and Maintenance, Auditing and other consulting expenses etc.

Performance Assessment – Amount of at-risk premium recouped by HHSC for failure to meet the performance expectation for which the MCO is at risk.

Quality Challenge Award – Amount awarded to the MCO for superior clinical quality, service delivery, access to care or member satisfaction.

Liquidated Damages - Amount assessed by HHSC as penalty for non-compliance with contract requirements.