Family Care Financial Summary Six Months ending June 30, 2010 (Report Date: October 1, 2010)

Background

- Based on the 2010 calendar year financial reporting through June 30, 2010, Family Care is projected to be a \$950+ million program this year.
- The program has experienced a 33% growth in capitation payments and a 26% growth in member months during the first six months of 2010, compared to the same period in 2009.
- The collective 2010 net surplus, which was \$1.1 million for the nine FC MCOs at the end of the first quarter, increased to \$4.8 million at the end of the second quarter.
- Five of the MCOs have positive surplus, or close to breakeven. Two of the MCOs in a deficit position are in the process of expanding. Other MCOs that are in a deficit position and beyond initial expansion are receiving close direction with corrective measures from the Department to ensure operational requirements are achieved.
- Business Plans for the upcoming 2011-13 time period are due October 15, 2010. The continuation of the positive trends and strategies addressing areas of desired improvement are anticipated in those submissions.
- The turnaround of the MCOs in expansion was projected in the 2010 Business Plans, and provides a good basis for evaluating successful strategies for both individual MCO performance, and overall performance of the Family Care program.

Key Metrics

- Capitation: The average capitation revenue increased by 8.9%, on a per member per month (PMPM) basis, relative to the first six months of the prior year. This increase is largely due to a change in the representation of the program's enrollment by target group (i.e., increased enrollment of disabled adults). Developmentally disabled and physically disabled members generally have higher acuity and, therefore, higher capitation rates than do frail elders.
- Member services: There was a 3.4% increase in the overall member services costs, expressed on PMPM basis, relative to the same period in 2009. This is reflective of the changing target group mix described above, and the cost structure associated with care in the legacy waiver programs for MCOs in initial expansion. MCOs have implemented efforts/strategies to move toward and achieve Family Care program historical experience. The proportion of revenue spent on the combined member services and care management expenses has declined by 1.4%, from 95.7% to 94.3%, compared to the same period in 2009. The wide variation in what each MCO is spending for member services reflects both member mix, or acuity, and progress toward achieving the pilot MCO experience.
- Administration: The program continues to achieve administrative savings relative to the fee-for-service system. The percentage of revenue going to administrative expenses has decreased from 5.5% to 5.2%, when compared to the first six months in 2009. PMPM expenses for administrative functions have decreased 1.4% on a year-over-year basis. Seven of the nine MCOs have lowered their administrative PMPMs in 2010, compared to the same time period in 2009. The two MCOs with higher PMPMs have been investing administrative dollars to support their expansion efforts.

- *Net Income:* Net income for the Family Care program was \$4.8 million surplus for the first six months. This represents improvement relative to the \$1.1 million surplus in the first quarter, and significant improvement over the \$5.9 million loss incurred in the first six months in 2009. This turnaround was predicted in the MCO business plans for 2010. Surplus expressed as a proportion of total revenue is now at +1.0%, compared to +0.5% in the first quarter of 2010 and -1.3% for the first six months in 2009.
- Solvency: MCOs continue to struggle to meet all of the capital requirements for the program. During the second quarter, however, Working Capital improved by \$4.2 million, primarily as a result of MCO surpluses. MCOs are short of meeting Restricted Reserve requirements by \$3.4 million, or 18%. Each MCO must have a plan approved by the Office of the Commissioner of Insurance (OCI) to meet the \$750,000 MCO Solvency Fund requirement; MCOs have funded almost 60% of their required Solvency Fund deposits by the end of June.

More Recent Developments

- As a result of positive second quarter results, two additional MCOs have entirely funded their \$750,000 solvency fund requirements.
- Many MCOs remain in a state of fiscal corrective action because they are not meeting all capital
 requirements, a result of the financial distress associated with rapid expansion. MCOs will
 remain in corrective action until the full set of capital requirements are met.
- DHS and OCI continue to monitor MCO financial health on a monthly basis, provide MCOs with feedback, and identify emerging issues that warrant regulatory intervention. OCI has begun one of the three targeted MCO audits that has been planned for 2010.
- An evaluation of the Family Care funding formula and solvency trajectory is currently underway by APS Healthcare, with a report due in late fall. This evaluation will focus on the adequacy and precision of the current payment methodology and assist with the development of long-range options that will address the timeline required to satisfy capital requirement deficiencies.
- The Department, through its integrated Oversight Teams, continues to actively monitor the MCOs' progress on achieving their overall performance, contractual Performance Expectations, and Business Plan goals. Success in meeting these goals has been an effective predictor of improved financial health.
- 2011 2013 MCO Business Plans are due October 15, 2010. As with 2009, the MCO Oversight Teams will be reviewing the plans, making recommendations on approval of the plans, and assessing whether the strategies outlined in the plans will meet the financial and programmatic benchmarks of the program.

Family Care MCO Financial Statement Summaries Year to Date January 1, 2010 Through June 30, 2010

_	SFCA	CCCW	LCD	wwc	мссмо	CCI	CWF	CHP	NB	Total
Revenue										
Capitation	25,873,836	45,028,097	21,454,302	50,598,143	111,495,343	97,229,654	58,206,151	20,392,586	32,264,235	462,542,347
Other DHS Funding	145,604	656,925	429,000	525,259	8,379	682,652	955,803	438,898	438,963	4,281,483
Interest Income- Operating Acct	8,654	19,730				5,013	19,127		15,513	68,036
Risk Sharing Accrual						571,397	0	5,150,000		5,721,397
Other Retro Adjustments, DHS	113,018				1,733,278	627,841	1,036,143			3,510,280
Other Income	47,027	69,580	139,159	376	165,411					421,553
Total Revenue	26,188,139	45,774,332	22,022,461	51,123,778	113,402,411	99,116,556	60,217,224	25,981,483	32,718,711	476,545,096
Expenses										
Member Services	21,782,189	40,978,302	20,067,017	44,703,322	104,700,805	95,429,626	57,044,698	25,697,398	30,814,176	441,217,533
Cost Share	(432,508)	(915,674)	(539,946)	(1,086,760)	(4,428,229)	(1,449,345)	(691,135)	(167,367)	(362,912)	(10,073,875)
Room & Board	(1,778,770)	(3,623,827)	(1,547,450)	(3,657,817)	(7,176,935)	(8,628,145)	(5,841,685)	(1,967,011)	(2,351,013)	(36,572,653)
Spend Down/ Third Party/ Refunds	(61,081)	(261,054)	(136,861)	(144,278)	(751,439)	(613,410)	(379,700)	(56,884)	(82,642)	(2,487,350)
Net Member Services Costs	19,509,830	36,177,747	17,842,760	39,814,467	92,344,202	84,738,725	50,132,178	23,506,137	28,017,609	392,083,655
THE MEMBER CONTINUES COSTS	10,000,000	00,177,747	17,042,700	00,014,407	02,044,202	04,700,720	00,102,170	20,000,107	20,017,000	002,000,000
Net Care Management Costs	3,423,891	6,010,147	3,082,210	6,857,449	14,506,542	11,197,948	5,434,923	2,608,724	4,419,198	57,541,031
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Administrative Expenses	1,612,371	2,228,709	1,697,076	2,322,876	5,144,315	4,237,234	4,728,471	1,093,807	1,693,107	24,757,967
Total Operating Expenses	24,546,091	44,416,603	22,622,046	48,994,792	111,995,058	100,173,907	60,295,572	27,208,668	34,129,914	474,382,652
Total Operating Expenses	24,040,001	44,410,000	22,022,040	40,004,702	111,000,000	100,170,007	00,200,072	27,200,000	04,120,014	474,002,002
Income (Loss) from Operations	1,642,048	1,357,729	(599,585)	2,128,986	1,407,352	(1,057,351)	(78,348)	(1,227,185)	(1,411,203)	2,162,443
Other (Revenue)/Expense										
Total Non-Operating (Revenue)/Expense	(907)	(409,211)	(404,228)	(1,073,664)	21,467	(94,619)	(2,399)	(705,624)	(142)	(2,669,326)
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Net Surplus (Deficit)	1,642,954	1,766,940	(195,357)	3,202,650	1,385,885	(962,732)	(75,949)	(521,561)	(1,411,061)	4,831,769
Member Months	9,130	15,632	8,036	19,285	43,429	30,765	18,009	6,307	10,879	161,471
=	3,130	13,032	0,000	13,203	70,723	30,703	10,003	0,301	10,013	101,471
Key Ratios										
Member Service Cost	74.5%	79.0%	81.0%	77.9%	81.4%	85.5%	83.3%	90.5%	85.6%	82.3%
Care Management Service Cost	13.1%	13.1%	14.0%	13.4%	12.8%	11.3%	9.0%	10.0%	13.5%	12.1%
Total Member Service Cost (Loss Ratio)	87.6%	92.2%	95.0%	91.3%	94.2%	96.8%	92.3%	100.5%	99.1%	94.4%
Administrative Expense	6.2%	4.9%	7.7%	4.5%	4.5%	4.3%	7.9%	4.2%	5.2%	5.2%
Total Operating Expenses	93.7%	97.0%	102.7%	95.8%	98.8%	101.1%	100.1%	104.7%	104.3%	99.5%
Net Surplus (Deficit)	6.3%	3.0%	-2.7%	4.2%	1.2%	-1.1%	-0.1%	-4.7%	-4.3%	0.5%

Family Care MCO Financial Statement Summaries Year to Date January 1, 2010 Through June 30, 2010 PMPM

	SFCA	cccw	LCD	wwc	MCDA	CCI	CW	CHP	NB	Total
Revenue										
Capitation	2,833.94	2,880.51	2,669.91	2,623.70	2,567.32	3,160.40	3,232.14	3,233.31	2,965.74	2,864.56
Other DHS Funding	15.95	42.02	53.39	27.24	0.19	22.19	53.07	69.59	40.35	26.52
Interest Income- Operating Acct	0.95	1.26	0.00	0.00	0.00	0.16	1.06	0.00	1.43	0.42
Risk Sharing Accrual	0.00	0.00	0.00	0.00	0.00	18.57	0.00	816.55	0.00	35.43
Other Retro Adjustments, DHS	12.38	0.00	0.00	0.00	39.91	20.41	57.54	0.00	0.00	21.74
Other Income	5.15	4.45	17.32	0.02	3.81	0.00	0.00	0.00	0.00	2.61
Total Revenue	2,868.36	2,928.25	2,740.61	2,650.96	2,611.23	3,221.73	3,343.81	4,119.45	3,007.51	2,951.28
Expenses										
Member Services	2,385.78	2,621.44	2,497.26	2,318.04	2,410.87	3,101.89	3,167.64	4,074.41	2,832.45	2,732.49
Cost Share	(47.37)	(58.58)	(67.19)	(56.35)	(101.97)	(47.11)	(38.38)	(26.54)	(33.36)	(62.39)
Room & Board	(194.83)	(231.82)	(192.57)	(189.67)	(165.26)	(280.45)	(324.38)	(311.88)	(216.11)	(226.50)
Spend Down/ Third Party/ Refunds	(6.69)	(16.70)	(17.03)	(7.48)	(17.30)	(19.94)	(21.08)	(9.02)	(7.60)	(15.40)
Net Member Services Costs	2,136.89	2,314.34	2,220.46	2,064.53	2,126.34	2,754.39	2,783.80	3,726.97	2,575.38	2,428.20
Net Care Management Costs	375.02	384.48	383.57	355.58	334.03	363.98	301.80	413.62	406.21	356.36
Administrative Expenses	176.60	142.57	211.19	120.45	118.45	137.73	262.57	173.43	155.63	153.33
Total Operating Expenses	2,688.51	2,841.39	2,815.23	2,540.56	2,578.83	3,256.10	3,348.16	4,314.02	3,137.23	2,937.88
Income (Loss) from Operations	179.85	86.86	(74.62)	110.40	32.41	(34.37)	(4.35)	(194.57)	(129.72)	13.39
Other (Revenue)/Expense										
Total Non-Operating (Revenue)/Expense	(0.10)	(26.18)	(50.30)	(55.67)	0.49	(3.08)	(0.13)	(111.88)	(0.01)	(16.53)
Net Surplus/(Deficit)	179.95	113.03	(24.31)	166.07	31.91	(31.29)	(4.22)	(82.70)	(129.71)	29.92
Member Months	9,130	15,632	8,036	19,285	43,429	30,765	18,009	6,307	10,879	161,471