## Family Care Partnership/PACE MCO Financial Statement Summaries YTD for Period Ending September 30, 2017

	Care WI- CWHP	CCI-CCHP	iCare	Total
Revenues				
Capitation-MA	49,185,638	41,158,464	25,002,700	115,346,802
Capitation- MC	35,170,106	27,529,504	12,420,702	75,120,312
Interest Income-Operating Acct	45,302	-	134,826	180,128
Other Retro Adjustments, DHS	550,623	148,322	-	698,945
Other Income	2,999	206,547	-	209,546
Total Revenues	84,954,668	69,042,837	37,558,228	191,555,733
Expenses				
Total Acute & Primary Services	28,989,172	21,982,232	17,808,118	68,779,522
Total LTC-Family Care Expenses	40,492,787	40,889,523	19,184,852	100,567,162
Cost Share	(1,479,871)	(1,283,552)	(265,905)	(3,029,328)
Room & Board	(2,642,524)	(2,566,625)	(819,406)	(6,028,555)
Other Third Party	-	-	-	-
Net Member Services Expenses	65,359,564	59,021,578	35,907,659	160,288,801
Net Care Management Expenses	7,979,128	7,069,102	2,964,102	18,012,332
	1,010,120	1,000,102	2,001,102	10,012,002
Administrative Expenses	5,331,315	2,972,676	1,747,561	10,051,552
Total Operating Expenses	78,670,007	69,063,356	40,619,322	188,352,685
Income (Loss) from Operations, CY	6,284,661	(20,519)	(3,061,094)	3,203,048
Other (Revenue)/Expense, Operating				
Total Other (Revenue)/Expense	(1,643,895)	(747,285)	(2,541,767)	(4,932,947)
Net Income/ (Loss)	7,928,556	726,766	(519,327)	8,135,995
Member Months by FC Target Group Developmentally Disabled (DD)	16.3%	22.6%	18.5%	19.0%
Physically Disabled (PD)	34.0%	19.7%	53.1%	33.6%
Frail Elder (FE)	49.7%	57.7%	28.4%	47.4%
Total Member Months	13,932	11,161	7,620	32,713
	·	·	<u> </u>	
Key Ratios (as % of Revenue)	70.00/	05 50/	05.00/	00 70/
Member Service Expense, Net	76.9%	85.5%	95.6%	83.7%
Care Management Service Expense Total Member Service Expense	9.4%	10.2% 95.7%	7.9%	9.4%
Administrative Expense	6.3%	4.3%	103.5% 4.7%	<u>93.1%</u> 5.2%
Total Operating Expense	92.6%	100.0%	108.2%	98.3%
Income (Loss) from Operations, CY	7.4%	0.0%	-8.2%	98.3%
Net Income/ (Loss)	9.3%	1.1%	-0.2% - <b>1.4%</b>	4.2%
	5.578	1.1 /0	-1.4/0	4.270

**WISCONSIN DEPARTMENT** of HEALTH SERVICES

## Family Care Partnership/PACE MCO Financial Statement Summaries YTD for Period Ending September 30, 2017

	Care WI- CWHP	CCI-CCHP	iCare	Total
Summary PMPM Presentation				
Revenues				
Capitation-MA	3,530.51	3,687.70	3,281.20	3,526.07
Capitation- MC	2,524.48	2,466.58	1,630.01	2,296.37
Interest Income-Operating Acct	3.26	-	17.69	5.51
Other Retro Adjustments, DHS	39.52	13.29	-	21.37
Other Income	0.22	18.51	-	6.41
Total Revenues	6,097.99	6,186.08	4,928.90	5,855.73
Expenses				
Total Acute & Primary Services	2,080.82	1,969.56	2,337.02	2,102.54
Total LTC-Family Care Expenses	2,906.54	3,663.61	2,517.70	3,074.26
Cost Share	(106.22)	(115.00)	(34.90)	(92.60)
Room & Board	(189.68)	(229.96)	(107.53)	(184.29)
Other Third Party	-	-	-	-
Net Member Services Expenses	4,691.46	5,288.21	4,712.29	4,899.91
Net Care Management Expenses	F72 74	(22.28	288.00	FF0 (2)
Net Care Management Expenses	572.74	633.38	388.99	550.62
Administrative Expenses	382.68	266.34	229.34	307.27
Total Operating Expenses, CY	5,646.88	6,187.93	5,330.62	5,757.80
Income (Loss) from Operations, CY	451.11	(1.85)	(401.72)	97.93
Other (Revenue)/Expense, Ordinary				
Total Other (Revenue)/Expense	(118.00)	(66.95)	(333.57)	(150.80)
Net Income/ (Loss)	569.11	65.10	(68.15)	248.73
			(00110)	2.0
Member Months by FC Target Group				
Developmentally Disabled (DD)	16.3%	22.6%	18.5%	19.0%
Physically Disabled (PD)	34.0%	19.7%	53.1%	33.6%
Frail Elder (FE)	49.7%	57.7%	28.4%	47.4%
Total Member Months	13,932	11,161	7,620	32,713
*Equity	34,753,722	12,892,382	33,319,089	80,965,193

\* Total Equity may include restricted and unrestricted equity, and availability of equity for investment in or support of current year operations should not be assumed.

The DHS presentation of financial results is a subset of the full financial statement reports from the MCOs and reviewed for reasonableness. The MCO financial reporting is on a generally accepted accounting principals (GAAP) basis. Financial reporting is technical in nature and no party should use, or make assumptions about, the results without a thorough understanding of the program and health care industry financial reporting.