

Program Changes Effective 7/1/2019	
E&M Fee Schedule Increase	Increase to all FFS rates for procedure codes 99201–99499 below 90% to 90% of the CY2019 Medicare fee schedules. FFS procedure codes already above 90% remain unchanged. Procedure codes without a corresponding Medicare fee schedule have been increased by 14.5%.
Assisted Living Fee Increase	5% increase to procedure codes T2030 and T2031.
Community Pharmacy Dispensing Fee Increase	\$2 increase to dispensing fees for select pharmacies.
Chronic Care Management/Transitional Care Management	Implementation of new services for non-dual Medicaid populations.
Hospital Fee Increase	Increase of 5% to inpatient services and 10% increase to outpatient services for State Teaching Hospitals; 14% increase to inpatient services and 25% increase to outpatient services for SNCP providers; 12% increase to inpatient services and 18% increase to outpatient services for all remaining in-state hospitals.
Pre-Tenancy	Implementation of new services for members with SMI.
Personal Care Services Fee Increase	\$.50 per hour increase to procedure codes T1019 and 99505.
Dental Fee Schedule Increase	Increase of 2% to dental reimbursement rates.
Dental Fluoride with Varnish	Implementation of new services and procedure codes D1026 and 99188.

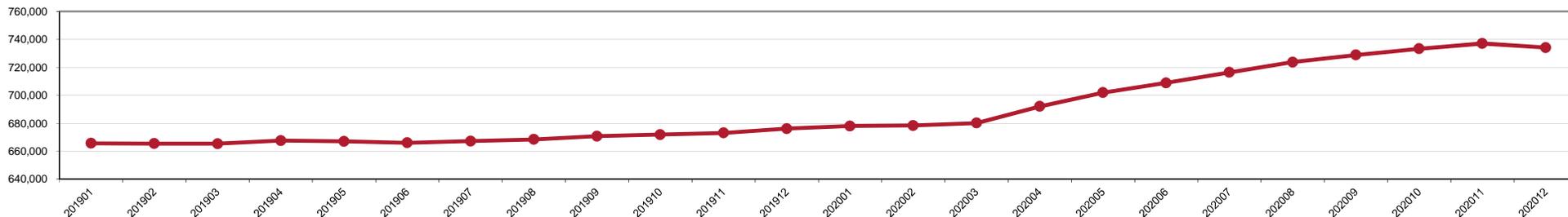
Program Changes Effective 10/1/2019	
BH Outpatient Rate Increase	Increase to all BH OP rates below 90% to 90% of the CY2019 Medicare fee schedules. FFS procedure codes already above 90% remain unchanged. Procedure codes without a Medicare fee schedule have been increased by 30%.
ECHO E&M Reimbursement Adjustments	Increase to program for anticipated additional physician utilization in the Centennial Care program resulting from Project ECHO.
FQHC Base/Dental Rate Increase	Increase to the base PPS rate to a minimum of \$169.77 for all FQHC medical services besides dental. For FQHC dental services, this is an increase to the base PPS rate to a minimum \$200.
Not-For-Profit Community Hospital Rate Increase	Increase of 3.8% for all inpatient and outpatient services for in-state not-for-profit hospitals.

Program Changes Effective 1/1/2020	
Community Hospital – Native Americans Rate Increase	The Community Hospital – Native Americans Rate Increase reflects a 13.0% increase to reimbursement levels for inpatient services for eligible in-state hospitals.
For-Profit & Government-Owned Hospital Rate Increase	The For-Profit & Government Owned Hospital Rate Increase reflects a 2.0% increase to reimbursement levels to inpatient and outpatient services for in-state for-profit/investor-owned and government-owned hospitals (excluding UNM hospitals).
Adult Residential Treatment Center	The Adult RTC adjustment reflects the added benefit for adults to receive SUD services at three adult RTCs.
Photo-Ocular Screening	The Photo-Ocular Screening adjustment effective January 1, 2020 reflects an expansion of vision screenings available during well-child visits that will include procedure code 99177.
Justice-Involved Transportation to Pharmacies	The Justice-Involved Transportation to Pharmacies adjustment reflects the added benefit for members released from incarceration to be transported to and from a pharmacy within seven days post-discharge to retrieve appropriate medication.
NF VBP	The NF VBP adjustment reflects a \$4.5 million increase to Nursing Facilities to improve quality outcomes by comparing the nursing facilities to CMS benchmarks. After the completion of the contract year, a reconciliation will be performed to reflect actual experience.
PCS Minimum Wage Adjustment	The PCS Minimum Wage Adjustment reflects New Mexico's average minimum wage increasing from \$7.50 to \$9.00 per hour.
Long-Acting Reversible Contraception (1/1/2020)	The Long-Acting Reversible Contraception (LARC) fee schedule increase reflects the following additional rate increases: a 100.9% to procedure code 11981, 100.0% to procedure codes 11982, 11983, 58301 and a 152.0% to procedure code 58300.
Leap Day Adjustment	The Leap Day Adjustment reflects an additional day of utilization for nursing facility and HCBS services.
HCQS and NF MBI Adjustments	The Health Care Quality Surcharge (HCQS) and Nursing Facility Market Basket Increase (NF MBI) adjustment reflects a new surcharge for nursing facilities with over 60 beds and a 2.8% market basket increase to all nursing facilities.

Program Changes Effective 7/1/2020	
OTP Adjustment	The Opioid Treatment Program (OTP) Adjustment reflects the removal of projected OTP expenses for Dual-eligible members effective October 1, 2020, as Medicare will become the primary payer for these services.
Trauma Hospital Rate Increase	The Trauma Hospital Rate Increase reflects the following rate increases to reimbursement levels for inpatient and outpatient trauma services for in-state trauma hospitals and developing trauma hospitals: Level I Hospitals: 0.9%; Level II Hospitals: No Adjustment; Level III Hospitals: 13.3%; Level IV Hospitals: 37.0%.
Pharmacy Clinicians Adjustment	Effective July 1, 2020, Pharmacists with Prescriptive Authority are allowed to bill naloxone and other additional services to procedure code 99213 at a rate of \$65.66. The Pharmacy Clinicians adjustment accounts for the increased rates from the incentive fees paid prior to July 1, 2020 to procedure code 99213.

1. Total Centennial Care Monthly Enrollment

Centennial Care Managed Care Enrollment



2. Total Centennial Care Dollars and Member Months by Program

Population	Aggregate Member Months by Program		
	Previous (12 mon)	Current (12 mon)	% Change
Physical Health	4,647,046	4,937,660	6%
Long Term Services and Supports	580,751	592,645	2%
Other Adult Group	2,796,907	2,982,588	7%
<b>Total Member Months</b>	<b>8,024,704</b>	<b>8,512,893</b>	<b>6%</b>

Programs	Aggregate Medical Costs by Program			Per Capita Medical Costs by Program (PMPM)		
	Previous (12 mon)	Current (12 mon)	% Change	Previous (12 mon)	Current (12 mon)	% Change
Physical Health	\$ 1,328,364,009	\$ 1,402,389,583	6%	\$ 285.85	\$ 284.02	-1%
Long Term Services and Supports	\$ 899,333,967	\$ 1,057,388,256	18%	\$ 1,548.57	\$ 1,784.18	15%
Other Adult Group Physical Health	\$ 1,141,418,007	\$ 1,322,361,336	16%	\$ 408.10	\$ 443.36	9%
Behavioral Health - All Members	\$ 411,157,156	\$ 526,087,081	28%	\$ 51.24	\$ 61.80	21%
<b>Total Medical Costs</b>	<b>\$ 3,780,273,138</b>	<b>\$ 4,308,226,255</b>	<b>14%</b>	<b>\$ 471.08</b>	<b>\$ 506.08</b>	<b>7%</b>

Aggregate Non-Medical Costs	Previous (12 mon)			Current (12 mon)		
	Amount	% Change	Amount	Amount	% Change	Amount
Admin, care coordination, Centennial Rewards	\$ 400,994,287	-2%	\$ 392,609,226	\$ 49.97	-8%	\$ 46.12
NMMIP Assessment	\$ 63,146,169	20%	\$ 75,991,399	\$ 7.87	13%	\$ 8.93
Premium Tax - Net of NIMMP Offset	\$ 139,913,661	21%	\$ 168,851,110	\$ 17.44	14%	\$ 19.83
<b>Total Non-Medical Costs</b>	<b>\$ 604,054,117</b>	<b>6%</b>	<b>\$ 637,451,734</b>	<b>\$ 75.27</b>	<b>-1%</b>	<b>\$ 74.88</b>

Estimated Total Centennial Care Costs	Previous (12 mon)	Current (12 mon)	% Change	Previous (12 mon)	Current (12 mon)	% Change
	\$ 4,384,327,255	\$ 4,945,677,989	13%	\$ 546.35	\$ 580.96	6%

3. Total Program Medical/Pharmacy Dollars

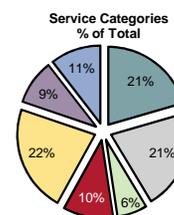
Medical Pharmacy	Aggregate Costs by Service Categories			Per Capita Medical Costs by Service Categories (PMPM)		
	Previous (12 mon)	Current (12 mon)	% Change	Previous (12 mon)	Current (12 mon)	% Change
	\$ 3,383,706,761	\$ 3,860,609,423	14%	\$ 421.66	\$ 453.50	8%
	\$ 396,566,377	\$ 447,616,832	13%	\$ 49.42	\$ 52.58	6%
<b>Total</b>	<b>\$ 3,780,273,138</b>	<b>\$ 4,308,226,255</b>	<b>14%</b>	<b>\$ 471.08</b>	<b>\$ 506.08</b>	<b>7%</b>

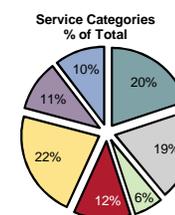
Service Categories	Aggregate Costs by Service Categories			Per Capita Medical Costs by Service Categories (PMPM)		
	Previous (12 mon)	Current (12 mon)	% Change	Previous (12 mon)	Current (12 mon)	% Change
Acute Inpatient	\$ 775,223,146	\$ 858,845,588	11%	\$ 96.60	\$ 100.89	4%
Acute Outp/Phy	\$ 788,831,832	\$ 817,982,711	4%	\$ 98.30	\$ 96.09	-2%
Nursing Facility	\$ 235,865,344	\$ 260,011,940	10%	\$ 29.39	\$ 30.54	4%
Community Benefit/PCO	\$ 393,508,003	\$ 511,154,680	30%	\$ 49.04	\$ 60.04	22%
Other Services	\$ 838,107,049	\$ 960,383,477	15%	\$ 104.44	\$ 112.82	8%
Behavioral Health	\$ 352,171,387	\$ 452,231,026	28%	\$ 43.89	\$ 53.12	21%
Pharmacy (All)	\$ 396,566,377	\$ 447,616,832	13%	\$ 49.42	\$ 52.58	6%
<b>Total Costs</b>	<b>\$ 3,780,273,138</b>	<b>\$ 4,308,226,255</b>	<b>14%</b>	<b>\$ 471.08</b>	<b>\$ 506.08</b>	<b>7%</b>

\* Per capita not normalized for case mix changes between periods.

Previous (12 mon) service distribution



Current (12 mon) service distribution

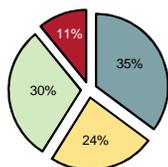


4. Notes

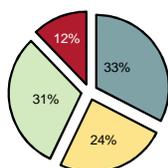
1. Data source: MCO-submitted financial reports, including MCO estimates for unpaid claims liability. Values are based on information available at the time of this report and are subject to change as new information becomes available.
2. Amounts are based on expenditures for medical and pharmacy services only. Expenditures for Indian Health Services, Tribal 638, and non-state plan services are excluded.
3. Other Services includes, but is not limited to, the following services: emergent transportation, non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.

Centennial Care Medical Expenditures

Previous (Q1CY2019 - Q4CY2019)



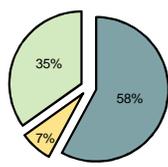
Current (Q1CY2020 - Q4CY2020)



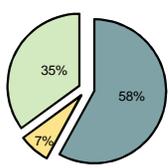
\*See above for legend.

Centennial Care Member Months

Previous (Q1CY2019 - Q4CY2019)



Current (Q1CY2020 - Q4CY2020)



\*See above for legend.

**State of New Mexico - All MCOs**

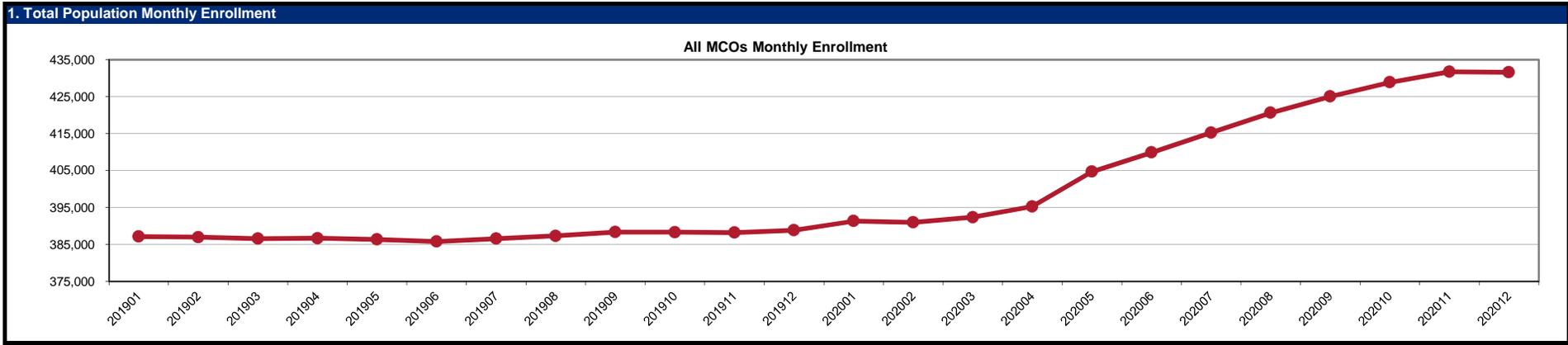
Total Population (TANF, Aged, Blind, Disabled, CYFD, Pregnant Women)

Physical Health Utilization and Cost Review

Reported Eligibility for Members Enrolled as of: December 31, 2020

Previous Period: January 1, 2019 to December 31, 2019

Current Period: January 1, 2020 to December 31, 2020



### 2. Total Population Medical/Pharmacy Dollars

**Aggregate Annual Costs**

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 1,203,351,712	\$ 1,270,185,394	6%
Pharmacy	\$ 125,012,296	\$ 132,204,189	6%
<b>Total</b>	<b>\$ 1,328,364,009</b>	<b>\$ 1,402,389,583</b>	<b>6%</b>

**Aggregate Costs by Service Categories**

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Inpatient (IP)	\$ 401,879,221	\$ 409,709,854	2%
Outpatient (OP)	\$ 190,667,731	\$ 194,748,049	2%
Physician (PH)	\$ 198,252,660	\$ 205,681,381	4%
Emergency Department (ED)	\$ 94,876,989	\$ 92,364,120	-3%
Pharmacy (RX)	\$ 125,012,296	\$ 132,204,189	6%
Other (OTH)	\$ 317,675,111	\$ 367,681,990	16%
<b>Total Population Costs</b>	<b>\$ 1,328,364,009</b>	<b>\$ 1,402,389,583</b>	<b>6%</b>

**Per Capita Cost (PMPM)**

	\$ 285.85	\$ 284.02	-1%
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**Total Member Months**

	4,647,046	4,937,660	6%
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**Service Categories % of Cost**

### 3. Retail Pharmacy Usage (Definitions in Glossary)

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 93,082,454	\$ 97,977,336	5%
Generic	\$ 29,327,006	\$ 31,937,108	9%
Other Rx	\$ 2,602,836	\$ 2,289,744	-12%
<b>Total</b>	<b>\$ 125,012,296</b>	<b>\$ 132,204,189</b>	<b>6%</b>

**% of Rx Spend**

**% of Scripts**

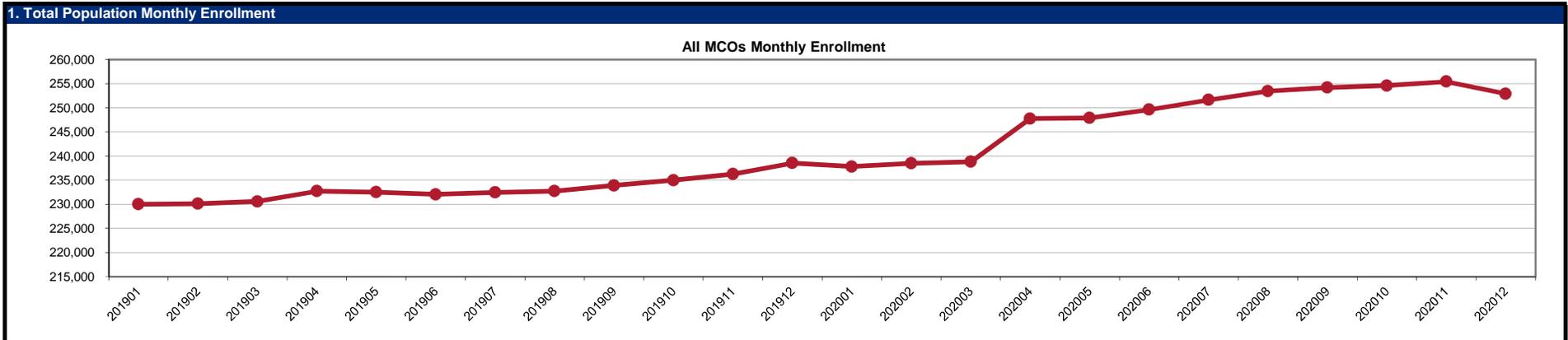
**Total Generic / Brand Rx**

	Previous	Current
Brand	74%	74%
Generic	24%	24%
Other Rx	2%	2%

*\* "Other Rx" represents supplies such as diabetic test strips.*

### 4. Notes

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3. Other Services category includes, but is not limited to, the following services: emergent and non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.



### 2. Total Population Medical/Pharmacy Dollars

**Aggregate Annual Costs**

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 956,408,114	\$ 1,115,406,414	17%
Pharmacy	\$ 185,009,893	\$ 206,954,921	12%
<b>Total</b>	<b>\$ 1,141,418,007</b>	<b>\$ 1,322,361,336</b>	<b>16%</b>

**Aggregate Costs by Service Categories**

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Inpatient (IP)	\$ 308,250,402	\$ 378,254,922	23%
Outpatient (OP)	\$ 182,149,876	\$ 193,399,312	6%
Physician (PH)	\$ 153,443,259	\$ 163,509,780	7%
Emergency Department (ED)	\$ 94,584,953	\$ 101,626,034	7%
Pharmacy (RX)	\$ 185,009,893	\$ 206,954,921	12%
Other (OTH)	\$ 217,979,625	\$ 278,616,366	28%
<b>Total Population Costs</b>	<b>\$ 1,141,418,007</b>	<b>\$ 1,322,361,336</b>	<b>16%</b>

**Per Capita Cost (PMPM)**      \$ 408.10      \$ 443.36      9%

**Total Member Months**      2,796,907      2,982,588      7%

**Service Categories % of Cost**

### 3. Retail Pharmacy Usage (Definitions in Glossary)

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
<b>Total Generic / Brand Rx</b>	<b>\$ 149,053,190</b>	<b>\$ 166,892,506</b>	<b>12%</b>
Brand	\$ 31,707,575	\$ 36,080,522	14%
Generic	\$ 4,249,127	\$ 3,981,893	-6%
<b>Total</b>	<b>\$ 185,009,893</b>	<b>\$ 206,954,921</b>	<b>12%</b>

**% of Rx Spend**

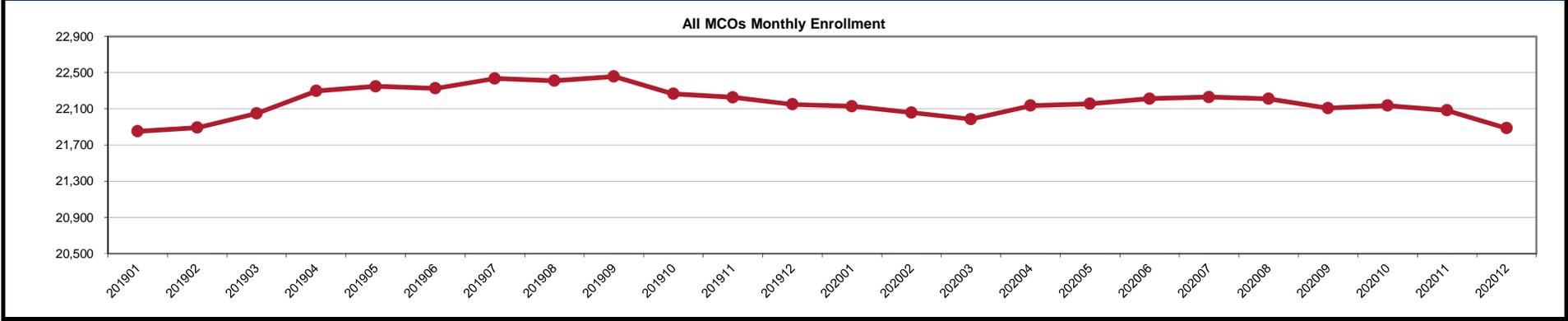
**% of Scripts**

\* "Other Rx" represents supplies such as diabetic strips.

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3. Other Services category includes, but is not limited to, the following services: emergent and non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.

1. Total Population Monthly Enrollment



2. Total Population Medical/Pharmacy Dollars

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 46,468,050	\$ 44,936,844	-3%
Pharmacy	\$ 862,907	\$ 522,573	-39%
<b>Total</b>	<b>\$ 47,330,957</b>	<b>\$ 45,459,417</b>	<b>-4%</b>

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Inpatient (IP)	\$ 8,171,642	\$ 7,001,306	-14%
Outpatient (OP)	\$ 9,526,637	\$ 8,528,244	-10%
Physician (PH)	\$ 5,644,488	\$ 5,669,850	0%
Emergency Department (ED)	\$ 3,166,541	\$ 2,131,844	-33%
Pharmacy (RX)	\$ 862,907	\$ 522,573	-39%
Other (OTH)	\$ 19,958,742	\$ 21,605,600	8%
<b>Total Population Costs</b>	<b>\$ 47,330,957</b>	<b>\$ 45,459,417</b>	<b>-4%</b>

Per Capita Cost (PMPM)	Previous (12 mon)	Current (12 mon)	% Change
	\$ 177.46	\$ 171.33	-3%

Total Member Months	Previous (12 mon)	Current (12 mon)	% Change
	266,708	265,325	-1%

3. Retail Pharmacy Usage (Definitions in Glossary)

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 610,718	\$ 280,001	-54%
Generic	\$ 210,276	\$ 203,809	-3%
Other Rx	\$ 41,913	\$ 38,763	-8%
<b>Total</b>	<b>\$ 862,907</b>	<b>\$ 522,573</b>	<b>-39%</b>

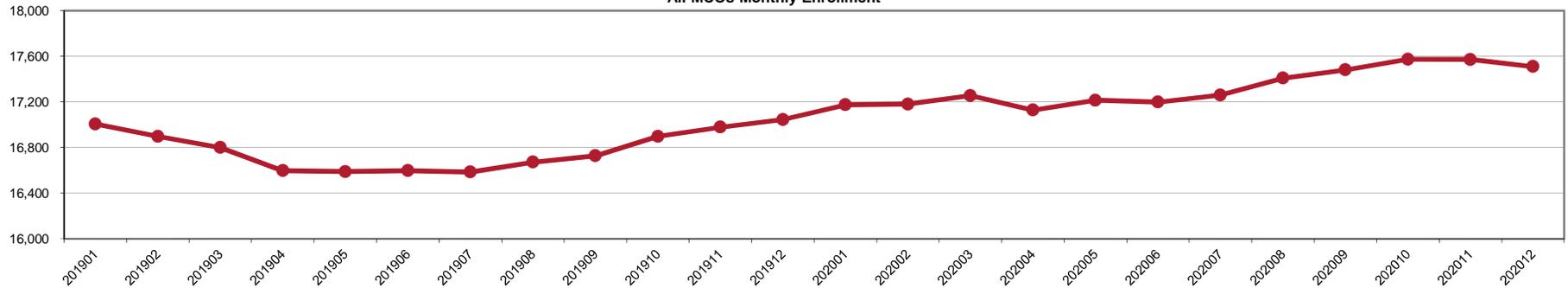
\* "Other Rx" represents supplies such as diabetic strips.

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3. Other Services category includes, but is not limited to, the following services: emergent and non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.

1. Total Population Monthly Enrollment

All MCOs Monthly Enrollment



2. Total Population Medical/Pharmacy Dollars

Aggregate Annual Costs

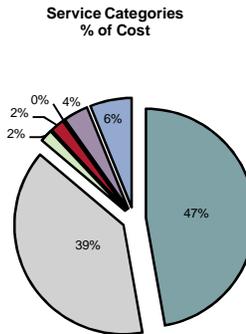
	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 504,119,845	\$ 592,465,409	18%
Pharmacy	\$ 337,521	\$ 209,944	-38%
<b>Total</b>	<b>\$ 504,457,365</b>	<b>\$ 592,675,354</b>	<b>17%</b>

Aggregate Costs by Service Categories

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Personal Care (PCO)	\$ 215,506,903	\$ 279,782,840	30%
Nursing Facility (NF)	\$ 210,512,797	\$ 230,848,031	10%
Inpatient (IP)	\$ 11,066,265	\$ 11,006,605	-1%
Outpatient (OP)	\$ 14,231,026	\$ 12,472,473	-12%
Pharmacy (RX)	\$ 337,521	\$ 209,944	-38%
HCBS	\$ 16,376,811	\$ 21,875,672	34%
Other (OTH)	\$ 36,426,043	\$ 36,479,788	0%
<b>Total Population Costs</b>	<b>\$ 504,457,365</b>	<b>\$ 592,675,354</b>	<b>17%</b>

Per Capita Cost (PMPM) \$ 2,504.82 \$ 2,850.03 14%

Total Member Months 201,395 207,954 3%

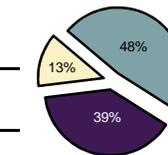


3. Retail Pharmacy Usage (Definitions in Glossary)

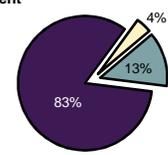
Total Generic / Brand Rx

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 222,006	\$ 100,515	-55%
Generic	\$ 91,927	\$ 82,092	-11%
Other Rx	\$ 23,588	\$ 27,337	16%
<b>Total</b>	<b>\$ 337,521</b>	<b>\$ 209,944</b>	<b>-38%</b>

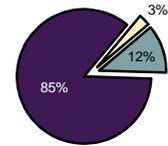
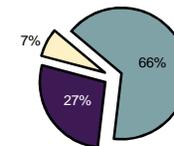
% of Rx Spend



% of Scripts



Previous

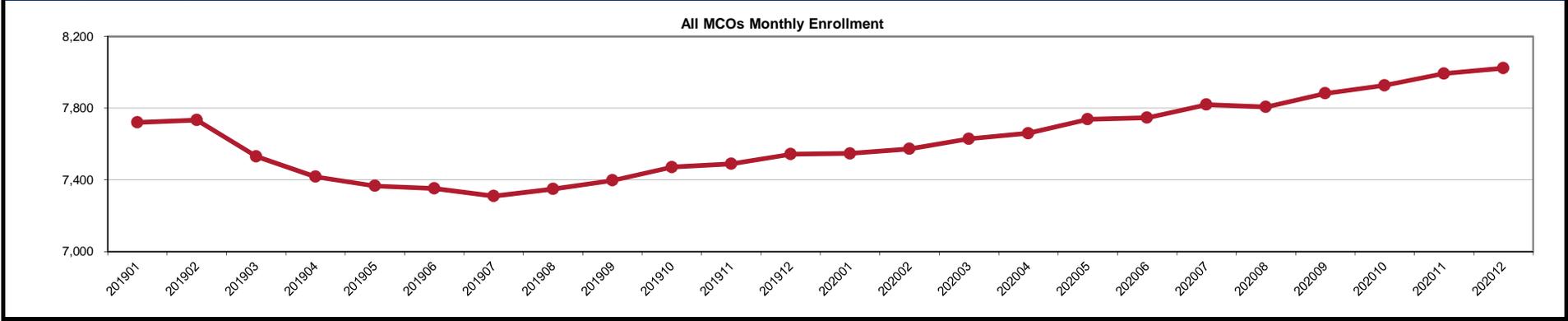


\* "Other Rx" represents supplies such as diabetic test strips.

4. Notes

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3. Other Services category includes, but is not limited to, the following services: emergent and non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.

**1. Total Population Monthly Enrollment**



**2. Total Population Medical/Pharmacy Dollars**

Aggregate Annual Costs			
	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 251,108,165	\$ 296,037,332	18%
Pharmacy	\$ 22,941,848	\$ 30,219,609	32%
<b>Total</b>	<b>\$ 274,050,013</b>	<b>\$ 326,256,942</b>	<b>19%</b>

Aggregate Costs by Service Categories			
Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Personal Care (PCO)	\$ 93,700,229	\$ 116,651,107	24%
Nursing Facility (NF)	\$ 25,019,439	\$ 28,988,209	16%
Inpatient (IP)	\$ 42,951,011	\$ 49,664,470	16%
Outpatient (OP)	\$ 31,397,290	\$ 30,607,592	-3%
Pharmacy (RX)	\$ 22,941,848	\$ 30,219,609	32%
HCBS	\$ 10,292,790	\$ 16,992,484	65%
Other (OTH)	\$ 47,747,406	\$ 53,133,470	11%
<b>Total Population Costs</b>	<b>\$ 274,050,013</b>	<b>\$ 326,256,942</b>	<b>19%</b>

Service Categories % of Cost			
Service Category	% of Cost		
Personal Care (PCO)	36%		
Pharmacy (RX)	10%		
HCBS	15%		
Other (OTH)	9%		
Outpatient (OP)	10%		
Nursing Facility (NF)	9%		
Inpatient (IP)	16%		
Medical	16%		
Other (OTH)	5%		

Per Capita Cost (PMPM)			
	Previous (12 mon)	Current (12 mon)	% Change
Per Capita Cost (PMPM)	\$ 3,055.80	\$ 3,495.10	14%

Total Member Months			
	Previous (12 mon)	Current (12 mon)	% Change
Total Member Months	89,682	93,347	4%

**3. Retail Pharmacy Usage (Definitions in Glossary)**

Total Generic / Brand Rx			
	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 18,416,191	\$ 24,297,963	32%
Generic	\$ 3,907,295	\$ 5,290,302	35%
Other Rx	\$ 618,361	\$ 631,344	2%
<b>Total</b>	<b>\$ 22,941,848</b>	<b>\$ 30,219,609</b>	<b>32%</b>

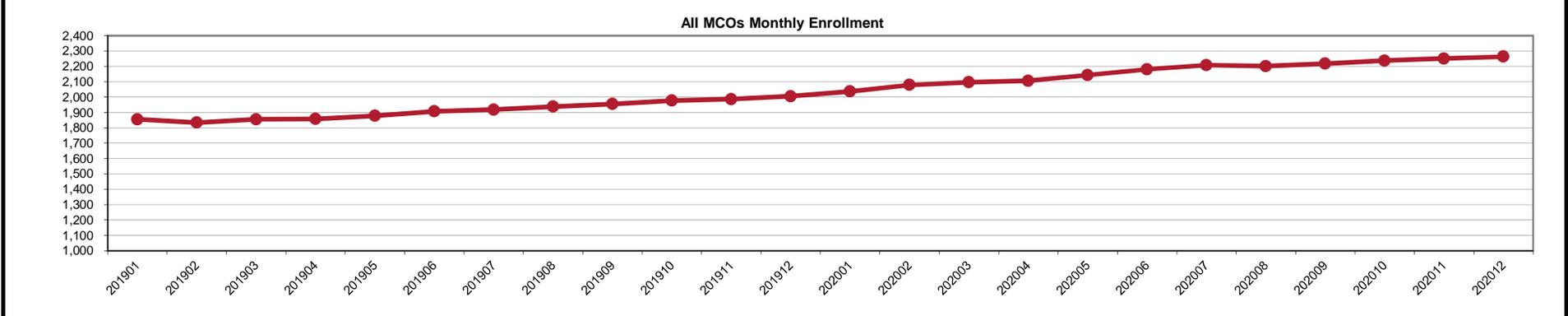
% of Rx Spend		% of Scripts	
Current	Previous	Current	Previous
Brand: 80%	Brand: 80%	Brand: 87%	Brand: 87%
Generic: 18%	Generic: 17%	Generic: 11%	Generic: 11%
Other Rx: 2%	Other Rx: 3%	Other Rx: 2%	Other Rx: 2%

\* "Other Rx" represents supplies such as diabetic test strips.

**4. Notes**

1. Data source: MCO-submitted financial reports, including MCO estimates for unpaid claims liability. Values are based on information available at the time of this report and are subject to change as new information becomes available.
2. Amounts are based on expenditures for medical and pharmacy services only. Expenditures for Indian Health Services, Tribal 638, and non-state plan services are excluded.
3. Other Services category includes, but is not limited to, the following services: emergent and non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.

1. Total Population Monthly Enrollment



2. Total Population Medical/Pharmacy Dollars

Aggregate Annual Costs

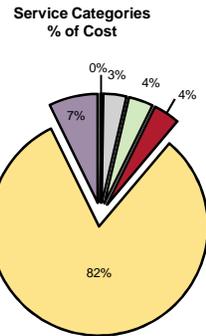
	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 70,079,488	\$ 89,347,003	27%
Pharmacy	\$ 3,416,144	\$ 3,649,540	7%
<b>Total</b>	<b>\$ 73,495,632</b>	<b>\$ 92,996,543</b>	<b>27%</b>

Aggregate Costs by Service Categories

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Nursing Facility (NF)	\$ 333,107	\$ 175,700	-47%
Inpatient (IP)	\$ 2,904,605	\$ 3,208,431	10%
Outpatient (OP)	\$ 3,518,865	\$ 3,366,029	-4%
Pharmacy (RX)	\$ 3,416,144	\$ 3,649,540	7%
HCBS	\$ 57,631,270	\$ 75,852,577	32%
Other (OTH)	\$ 5,691,640	\$ 6,744,266	18%
<b>Total Population Costs</b>	<b>\$ 73,495,632</b>	<b>\$ 92,996,543</b>	<b>27%</b>

Per Capita Cost (PMPM) \$ 3,200.19 \$ 3,574.18 12%

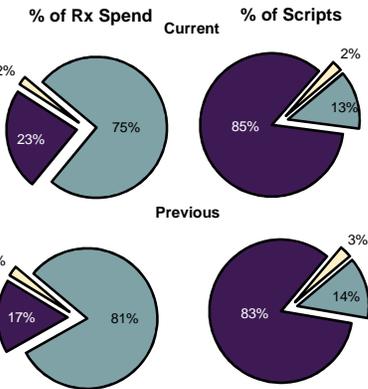
Total Member Months 22,966 26,019 13%



3. Retail Pharmacy Usage (Definitions in Glossary)

Total Generic / Brand Rx

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 2,758,861	\$ 2,732,077	-1%
Generic	\$ 575,901	\$ 844,182	47%
Other Rx	\$ 81,383	\$ 73,282	-10%
<b>Total</b>	<b>\$ 3,416,144</b>	<b>\$ 3,649,540</b>	<b>7%</b>



\* "Other Rx" represents supplies such as diabetic test strips.

4. Notes

1. Data source: MCO-submitted financial reports, including MCO estimates for unpaid claims liability. Values are based on information available at the time of this report and are subject to change as new information becomes available.
2. Amounts are based on expenditures for medical and pharmacy services only. Expenditures for Indian Health Services, Tribal 638, and non-state plan services are excluded.
3. Other Services category includes, but is not limited to, the following services: emergent and non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.

**State of New Mexico - All MCOs**

Total Population (Physical Health, Long Term Services and Support, and Other Adult Group)

Behavioral Health Utilization and Cost Review

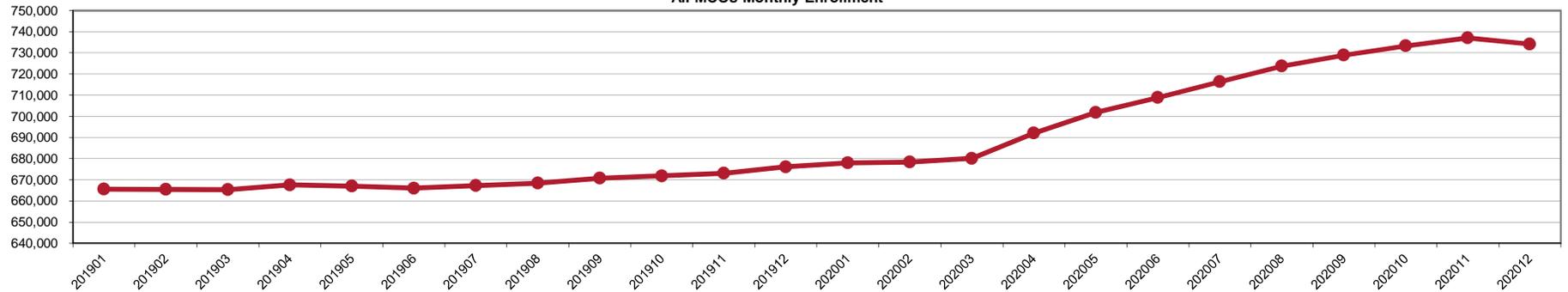
Reported Eligibility for Members Enrolled as of: December 31, 2020

Previous Period: January 1, 2019 to December 31, 2019

Current Period: January 1, 2020 to December 31, 2020

**1. Total Population Monthly Enrollment**

All MCOs Monthly Enrollment



**2. Total Population Medical/Pharmacy Dollars**

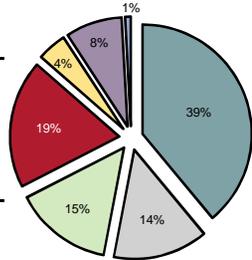
Aggregate Annual Costs

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 352,171,387	\$ 452,231,026	28%
Pharmacy	\$ 58,985,769	\$ 73,856,055	25%
<b>Total</b>	<b>\$ 411,157,156</b>	<b>\$ 526,087,081</b>	<b>28%</b>

Aggregate Costs by Service Categories

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Outpatient/Clinic (OP/CL)	\$ 157,954,718	\$ 204,956,841	30%
Pharmacy (RX)	\$ 58,985,769	\$ 73,856,055	25%
Res. Treatment Ctr. (RTC)	\$ 69,011,984	\$ 76,161,265	10%
Behavioral Health Prov (BHP)	\$ 59,482,497	\$ 99,725,181	68%
Core Service Agencies (CSA)	\$ 16,457,441	\$ 22,857,122	39%
Inpatient (IP)	\$ 43,632,682	\$ 44,102,609	1%
Other (OTH)	\$ 5,632,064	\$ 4,428,008	-21%
<b>Total Population Costs</b>	<b>\$ 411,157,156</b>	<b>\$ 526,087,081</b>	<b>28%</b>
<b>Per Capita Cost (PMPM)</b>	<b>\$ 51.24</b>	<b>\$ 61.80</b>	<b>21%</b>
<b>Total Member Months</b>	<b>8,024,704</b>	<b>8,512,893</b>	<b>6%</b>

Services Categories % of Cost

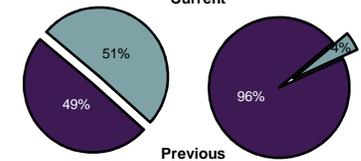


**3. Retail Pharmacy Usage (Definitions in Glossary)**

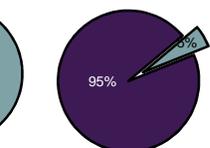
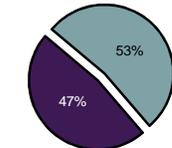
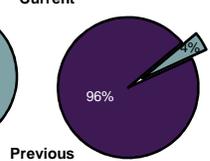
Total Generic / Brand Rx

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 31,006,363	\$ 37,324,949	20%
Generic	\$ 27,979,406	\$ 36,531,105	31%
<b>Total</b>	<b>\$ 58,985,769</b>	<b>\$ 73,856,055</b>	<b>25%</b>

% of Rx Spend



% of Scripts



**4. Notes**

1. Data source: MCO-submitted financial reports, including MCO estimates for unpaid claims liability. Values are based on information available at the time of this report and are subject to change as new information becomes available.
2. Amounts are based on expenditures for medical and pharmacy services only. Expenditures for Indian Health Services, Tribal 638, and non-state plan services are excluded.
3. Other Services category includes, but is not limited to, the following services: Psychosocial Rehab and Skills Training & Development (Behavioral Management Services).
4. Amounts are reported based on dates of service within the previous and current periods.