

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.

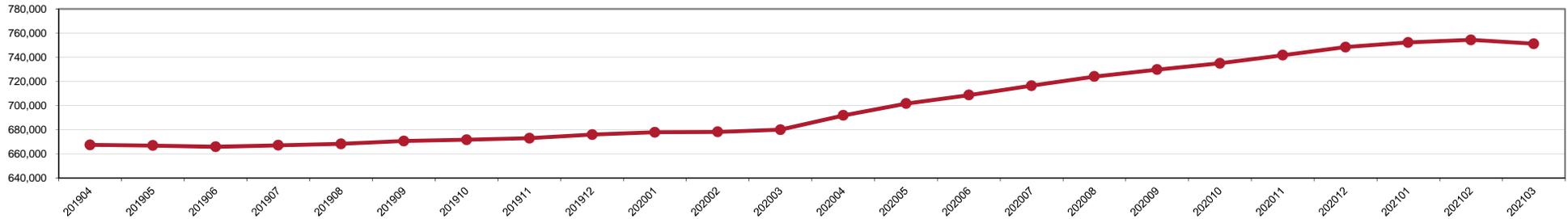
Program Changes Effective 1/1/2020	
Community Hospital – Native Americans Rate Increase	The Community Hospital – Native Americans Rate Increase reflects a 13.0% increase to reimbursement levels for inpatient services for eligible in-state hospitals.
For-Profit & Government-Owned Hospital Rate Increase	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.

Program Changes Effective 1/1/2021	
RHC PPS Rate Rebate	The RHC PPS Rate Rebate reflects increasing the PPS rate for RHC to \$169.77 for all RHC medical services effective October 1, 2020.
PCS Minimum Wage effective 1/1/2021	The PCS Minimum Wage Adjustment reflects New Mexico's average minimum wage increasing from \$9.00 to \$10.50 per hour effective January 1, 2021.
High Cost Low Utilization (HCLU) Drug Adjustment	The HCLU Drug Adjustment for 2021 reflects one treatment of Zolgensma.
Air Ambulance Rate Increase	The air ambulance FFS fee schedule increase effective November 15, 2020 reflects the following additional rate increases: 28.56% to procedure code A0430, 35.51% to procedure codes A0431, and 68.13% to procedure code A0436.
Crisis Triage Center (CTC) Adjustment	The CTC adjustment reflects the expectation that two additional CTC providers will be providing CTC adult outpatient services by January 1, 2021.

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	4,660,844	5,102,018	9%
Long Term Services and Supports	582,601	596,506	2%
Other Adult Group	2,820,804	3,057,755	8%
Total Member Months	8,064,249	8,756,279	9%

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	\$ 1,376,779,796	\$ 1,412,436,266	3%	\$ 295.39	\$ 276.84	-6%
Long Term Services and Supports	\$ 953,450,951	\$ 1,092,736,175	15%	\$ 1,636.54	\$ 1,831.89	12%
Other Adult Group Physical Health	\$ 1,199,198,059	\$ 1,357,776,693	13%	\$ 425.13	\$ 444.04	4%
Behavioral Health - All Members	\$ 440,441,123	\$ 533,724,801	21%	\$ 54.62	\$ 60.95	12%
Total Medical Costs	\$ 3,969,869,930	\$ 4,396,673,935	11%	\$ 492.28	\$ 502.12	2%

Aggregate Non-Medical Costs	Previous (12 mon)			Current (12 mon)			% Change		
	Amount	Amount	% Change	Amount	Amount	% Change			
Admin, care coordination, Centennial Rewards	\$ 398,173,641	\$ 372,453,137	-6%	\$ 49.38	\$ 42.54	-14%			
NMMMP Assessment	\$ 67,748,656	\$ 81,887,059	21%	\$ 8.40	\$ 9.35	11%			
Premium Tax - Net of NMMMP Offset	\$ 146,659,416	\$ 169,864,378	16%	\$ 18.19	\$ 19.40	7%			
Total Non-Medical Costs	\$ 612,581,713	\$ 624,204,574	2%	\$ 75.96	\$ 71.29	-6%			

Estimated Total Centennial Care Costs	Previous (12 mon)	Current (12 mon)	% Change
	\$ 4,582,451,643	\$ 5,020,878,509	10%
	\$ 568.24	\$ 573.40	1%

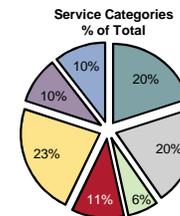
3. Total Program Medical/Pharmacy Dollars

Medical Pharmacy Total	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
Medical	\$ 3,553,175,336	\$ 3,941,691,404	11%	\$ 440.61	\$ 450.16	2%
Pharmacy	\$ 416,694,594	\$ 454,982,531	9%	\$ 51.67	\$ 51.96	1%
Total	\$ 3,969,869,930	\$ 4,396,673,935	11%	\$ 492.28	\$ 502.12	2%

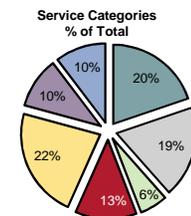
Service Categories	Aggregate Costs by Service Categories			Per Capita Medical Costs by Service Categories (PMPM)		
	Previous (12 mon)	Current (12 mon)	% Change	Previous (12 mon)	Current (12 mon)	% Change
Acute Inpatient	\$ 796,478,490	\$ 870,101,516	9%	\$ 98.77	\$ 99.37	1%
Acute Outp/Phy	\$ 803,856,444	\$ 820,227,673	2%	\$ 99.68	\$ 93.67	-6%
Nursing Facility	\$ 247,902,618	\$ 251,173,950	1%	\$ 30.74	\$ 28.69	-7%
Community Benefit/PCO	\$ 422,338,355	\$ 551,363,972	31%	\$ 52.37	\$ 62.97	20%
Other Services	\$ 904,560,793	\$ 990,172,437	9%	\$ 112.17	\$ 113.08	1%
Behavioral Health	\$ 378,038,637	\$ 458,651,856	21%	\$ 46.88	\$ 52.38	12%
Pharmacy (All)	\$ 416,694,594	\$ 454,982,531	9%	\$ 51.67	\$ 51.96	1%
Total Costs	\$ 3,969,869,930	\$ 4,396,673,935	11%	\$ 492.28	\$ 502.12	2%

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

Previous (12 mon) service distribution

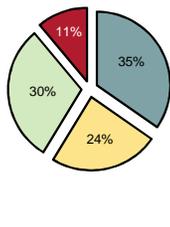


Current (12 mon) service distribution

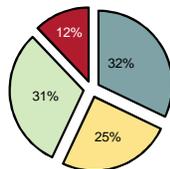


Centennial Care Medical Expenditures

Previous (Q2CY2019 - Q1CY2020)



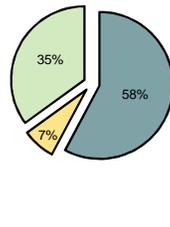
Current (Q2CY2020 - Q1CY2021)



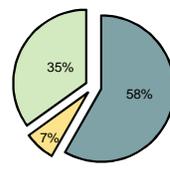
*See above for legend.

Centennial Care Member Months

Previous (Q2CY2019 - Q1CY2020)



Current (Q2CY2020 - Q1CY2021)



*See above for legend.

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.

State of New Mexico - All MCOs

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

Physical Health Utilization and Cost Review

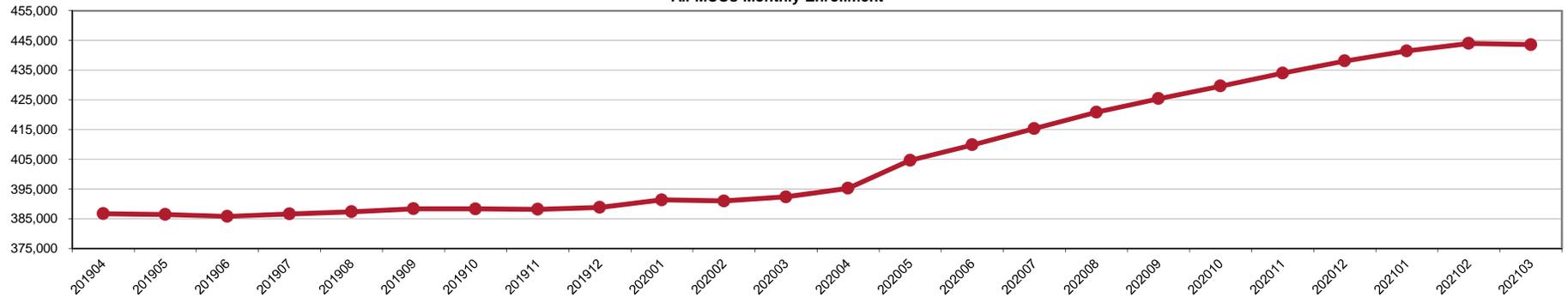
Reported Eligibility for Members Enrolled as of: March 31, 2021

Previous Period: April 1, 2019 to March 31, 2020

Current Period: April 1, 2020 to March 31, 2021

1. Total Population Monthly Enrollment

All MCOs Monthly Enrollment



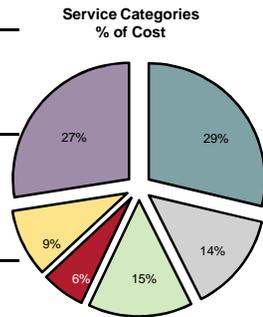
2. Total Population Medical/Pharmacy Dollars

Aggregate Annual Costs

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 1,245,682,650	\$ 1,279,172,782	3%
Pharmacy	\$ 131,097,147	\$ 133,263,484	2%
Total	\$ 1,376,779,796	\$ 1,412,436,266	3%

Aggregate Costs by Service Categories

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Inpatient (IP)	\$ 410,233,637	\$ 405,045,779	-1%
Outpatient (OP)	\$ 191,762,268	\$ 196,102,058	2%
Physician (PH)	\$ 201,136,809	\$ 204,665,163	2%
Emergency Department (ED)	\$ 98,203,471	\$ 85,161,085	-13%
Pharmacy (RX)	\$ 131,097,147	\$ 133,263,484	2%
Other (OTH)	\$ 344,346,464	\$ 388,198,697	13%
Total Population Costs	\$ 1,376,779,796	\$ 1,412,436,266	3%
Per Capita Cost (PMPM)	\$ 295.39	\$ 276.84	-6%
Total Member Months	4,660,844	5,102,018	9%

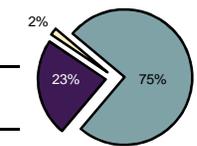


3. Retail Pharmacy Usage (Definitions in Glossary)

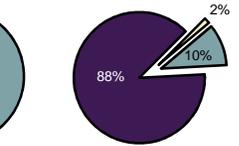
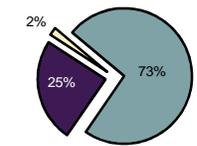
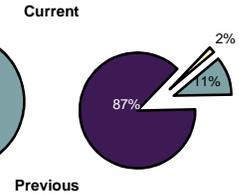
Total Generic / Brand Rx

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 96,316,454	\$ 100,032,587	4%
Generic	\$ 32,232,982	\$ 30,974,529	-4%
Other Rx	\$ 2,547,711	\$ 2,256,368	-11%
Total	\$ 131,097,147	\$ 133,263,484	2%

% of Rx Spend



% of Scripts



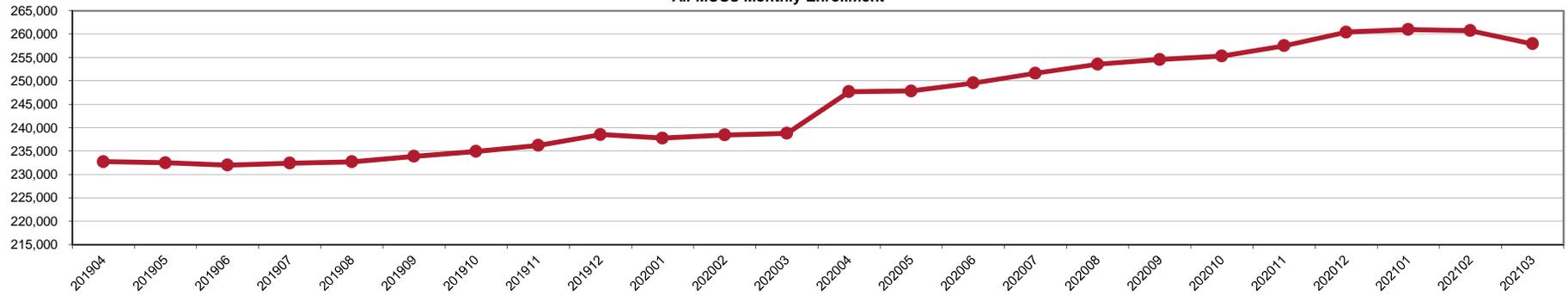
* "Other Rx" represents supplies such as diabetic test strips.

4. Notes

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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

All MCOs Monthly Enrollment



2. Total Population Medical/Pharmacy Dollars

Aggregate Annual Costs

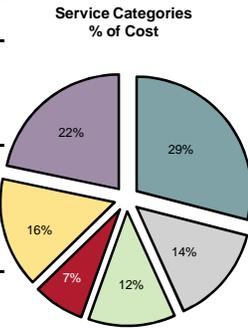
	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 1,005,478,180	\$ 1,146,320,410	14%
Pharmacy	\$ 193,719,880	\$ 211,456,284	9%
Total	\$ 1,199,198,059	\$ 1,357,776,693	13%

Aggregate Costs by Service Categories

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Inpatient (IP)	\$ 318,127,998	\$ 393,910,764	24%
Outpatient (OP)	\$ 188,381,962	\$ 192,778,773	2%
Physician (PH)	\$ 156,809,953	\$ 166,706,062	6%
Emergency Department (ED)	\$ 99,982,123	\$ 98,167,256	-2%
Pharmacy (RX)	\$ 193,719,880	\$ 211,456,284	9%
Other (OTH)	\$ 242,176,143	\$ 294,757,556	22%
Total Population Costs	\$ 1,199,198,059	\$ 1,357,776,693	13%

Per Capita Cost (PMPM) \$ 425.13 \$ 444.04 4%

Total Member Months 2,820,804 3,057,755 8%



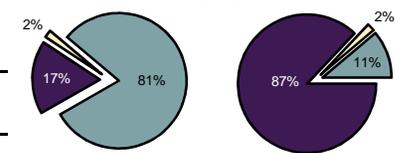
3. Retail Pharmacy Usage (Definitions in Glossary)

Total Generic / Brand Rx

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 154,920,301	\$ 170,564,133	10%
Generic	\$ 34,485,512	\$ 37,007,703	7%
Other Rx	\$ 4,314,067	\$ 3,884,449	-10%
Total	\$ 193,719,880	\$ 211,456,284	9%

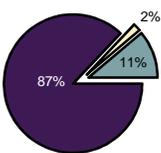
% of Rx Spend

Current

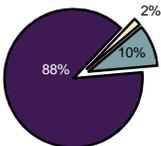
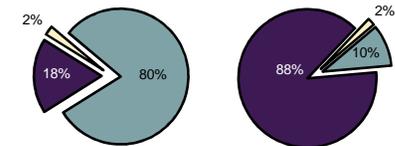


% of Scripts

Current



Previous

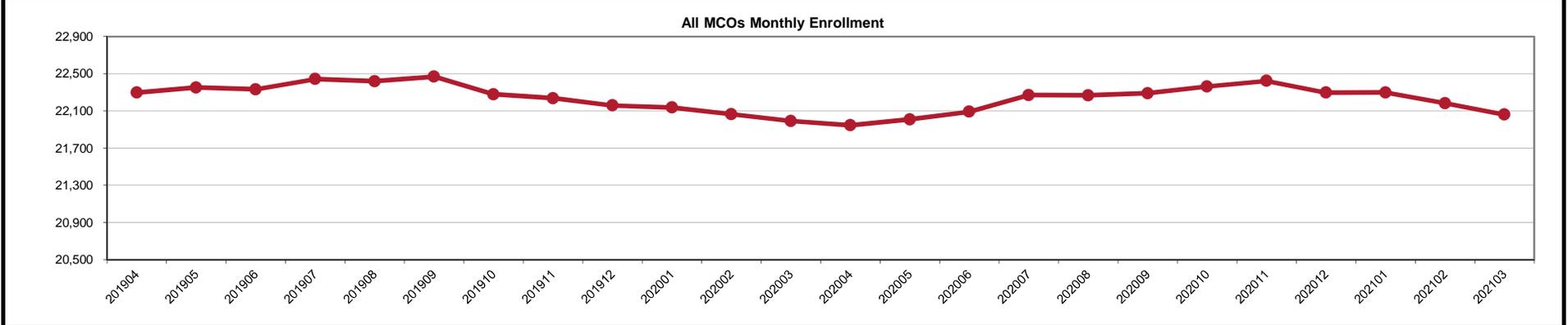


* "Other Rx" represents supplies such as diabetic strips.

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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

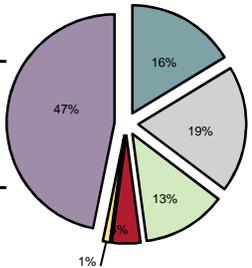
Aggregate Annual Costs

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 48,205,776	\$ 44,547,523	-8%
Pharmacy	\$ 852,361	\$ 459,045	-46%
Total	\$ 49,058,137	\$ 45,006,567	-8%

Aggregate Costs by Service Categories

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Inpatient (IP)	\$ 8,075,784	\$ 7,343,329	-9%
Outpatient (OP)	\$ 9,779,428	\$ 8,542,315	-13%
Physician (PH)	\$ 6,302,786	\$ 5,669,221	-10%
Emergency Department (ED)	\$ 3,204,470	\$ 1,928,418	-40%
Pharmacy (RX)	\$ 852,361	\$ 459,045	-46%
Other (OTH)	\$ 20,843,308	\$ 21,064,240	1%
Total Population Costs	\$ 49,058,137	\$ 45,006,567	-8%
Per Capita Cost (PMPM)	\$ 183.62	\$ 168.88	-8%
Total Member Months	267,177	266,497	0%

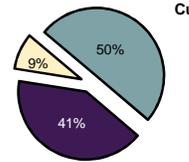
Service Categories
% of Cost



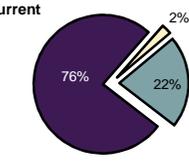
3. Retail Pharmacy Usage (Definitions in Glossary)

Total Generic / Brand Rx	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 572,491	\$ 230,050	-60%
Generic	\$ 236,138	\$ 189,386	-20%
Other Rx	\$ 43,732	\$ 39,608	-9%
Total	\$ 852,361	\$ 459,045	-46%

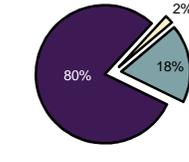
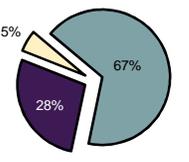
% of Rx Spend



% of Scripts



Total Generic / Brand Rx	Previous (12 mon)	Current (12 mon)	% Change
Brand	\$ 572,491	\$ 230,050	-60%
Generic	\$ 236,138	\$ 189,386	-20%
Other Rx	\$ 43,732	\$ 39,608	-9%
Total	\$ 852,361	\$ 459,045	-46%

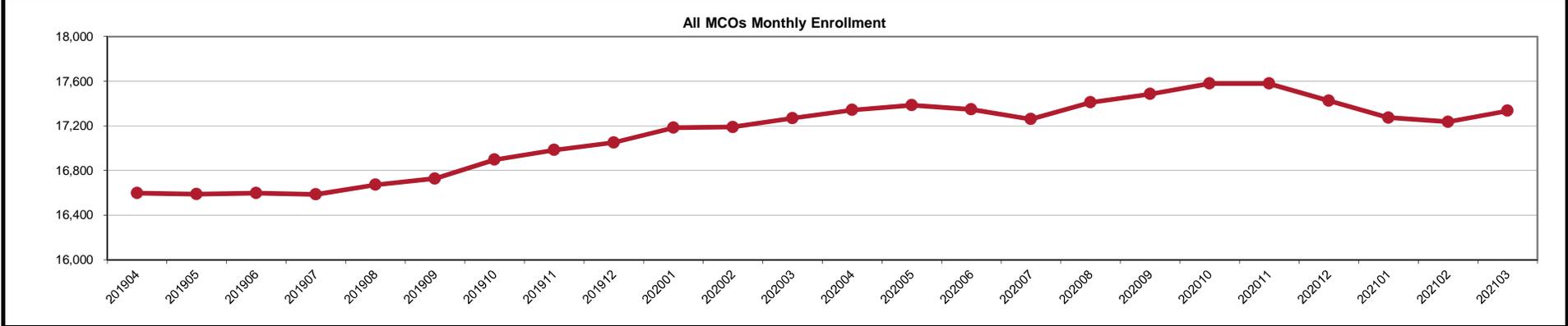


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3. Other Services category includes, but is not limited to, the following services: emergent and non-emergent transportation, vision, and dental.
4. Amounts are reported based on dates of service within the previous and current periods.

1. Total Population Monthly Enrollment



2. Total Population Medical/Pharmacy Dollars

Aggregate Annual Costs			
	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 536,877,962	\$ 615,891,534	15%
Pharmacy	\$ 169,920	\$ 190,278	12%
Total	\$ 537,047,882	\$ 616,081,811	15%

Aggregate Costs by Service Categories			
Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Personal Care (PCO)	\$ 230,659,043	\$ 308,928,709	34%
Nursing Facility (NF)	\$ 221,322,343	\$ 222,259,405	0%
Inpatient (IP)	\$ 12,264,291	\$ 11,175,149	-9%
Outpatient (OP)	\$ 14,715,575	\$ 12,256,801	-17%
Pharmacy (RX)	\$ 169,920	\$ 190,278	12%
HCBS	\$ 18,558,218	\$ 23,642,429	27%
Other (OTH)	\$ 39,358,492	\$ 37,629,041	-4%
Total Population Costs	\$ 537,047,882	\$ 616,081,811	15%

Per Capita Cost (PMPM)	Previous (12 mon)	Current (12 mon)	% Change
	\$ 2,654.15	\$ 2,952.55	11%

Total Member Months	Previous (12 mon)	Current (12 mon)	% Change
	202,343	208,661	3%

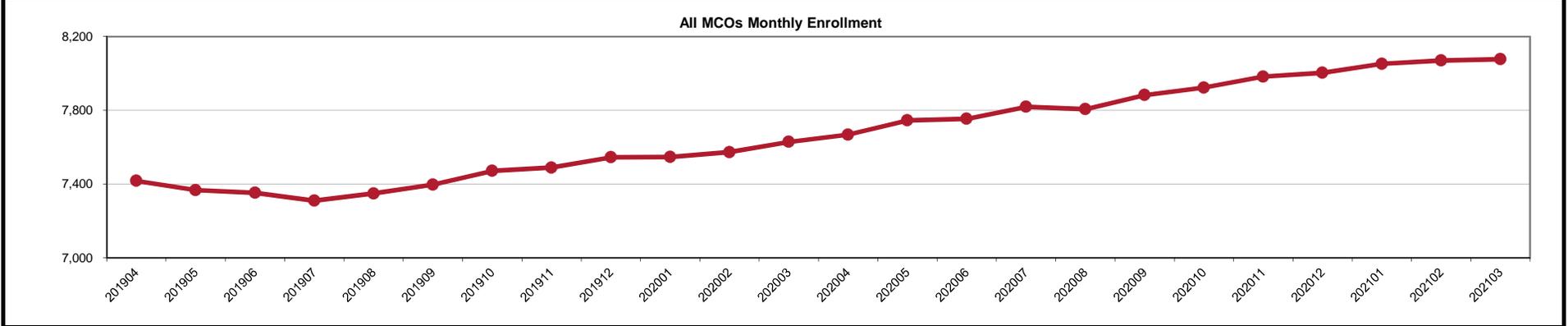
3. Retail Pharmacy Usage (Definitions in Glossary)

Total Generic / Brand Rx			
	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 81,123	\$ 80,882	0%
Generic	\$ 73,500	\$ 80,827	10%
Other Rx	\$ 15,298	\$ 28,569	87%
Total	\$ 169,920	\$ 190,278	12%

4. Notes

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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	\$ 264,099,315	\$ 309,409,332	17%
Pharmacy	\$ 24,908,732	\$ 30,944,439	24%
Total	\$ 289,008,047	\$ 340,353,771	18%

Aggregate Costs by Service Categories			
Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Personal Care (PCO)	\$ 98,990,627	\$ 126,846,370	28%
Nursing Facility (NF)	\$ 26,230,271	\$ 28,697,842	9%
Inpatient (IP)	\$ 45,298,011	\$ 48,611,280	7%
Outpatient (OP)	\$ 31,240,499	\$ 30,057,948	-4%
Pharmacy (RX)	\$ 24,908,732	\$ 30,944,439	24%
HCBS	\$ 11,981,925	\$ 19,256,389	61%
Other (OTH)	\$ 50,357,983	\$ 55,939,502	11%
Total Population Costs	\$ 289,008,047	\$ 340,353,771	18%
Per Capita Cost (PMPM)	\$ 3,231.05	\$ 3,590.87	11%
Total Member Months	89,447	94,783	6%

Service Category	% of Cost
Personal Care (PCO)	37%
Nursing Facility (NF)	6%
Inpatient (IP)	17%
Outpatient (OP)	9%
Pharmacy (RX)	9%
HCBS	14%
Other (OTH)	8%

3. Retail Pharmacy Usage (Definitions in Glossary)

Total Generic / Brand Rx			
	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 19,889,517	\$ 24,950,655	25%
Generic	\$ 4,382,799	\$ 5,391,268	23%
Other Rx	\$ 636,416	\$ 602,516	-5%
Total	\$ 24,908,732	\$ 30,944,439	24%

Category	Current	Previous
Brand	81%	80%
Generic	17%	18%
Other Rx	2%	2%

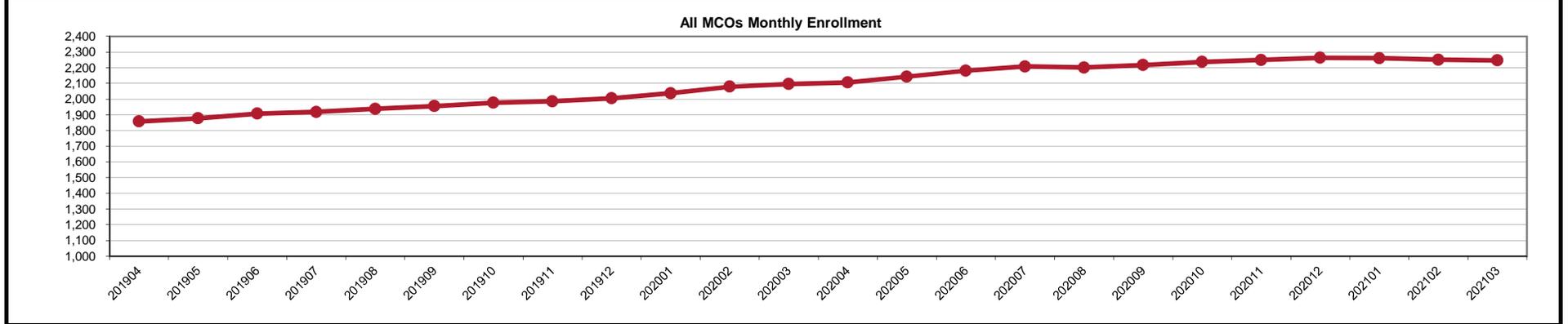
Category	Current	Previous
Brand	11%	11%
Generic	87%	87%
Other Rx	2%	2%

* "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



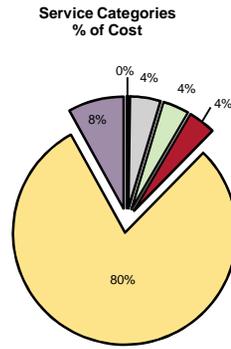
2. Total Population Medical/Pharmacy Dollars

Aggregate Annual Costs

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 74,792,816	\$ 87,697,969	17%
Pharmacy	\$ 3,544,068	\$ 3,596,057	1%
Total	\$ 78,336,885	\$ 91,294,026	17%

Aggregate Costs by Service Categories

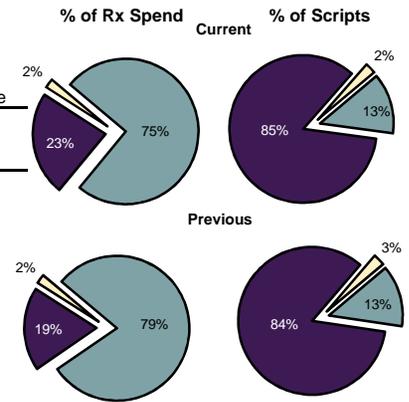
Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Nursing Facility (NF)	\$ 350,004	\$ 216,703	-38%
Inpatient (IP)	\$ 2,478,769	\$ 4,015,215	62%
Outpatient (OP)	\$ 3,727,164	\$ 3,449,333	-7%
Pharmacy (RX)	\$ 3,544,068	\$ 3,596,057	1%
HCBS	\$ 62,148,542	\$ 72,690,075	17%
Other (OTH)	\$ 6,088,338	\$ 7,326,643	20%
Total Population Costs	\$ 78,336,885	\$ 91,294,026	17%
Per Capita Cost (PMPM)	\$ 3,314.58	\$ 3,436.63	4%
Total Member Months	23,634	26,565	12%



3. Retail Pharmacy Usage (Definitions in Glossary)

Total Generic / Brand Rx

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 2,811,246	\$ 2,692,922	-4%
Generic	\$ 659,337	\$ 829,436	26%
Other Rx	\$ 73,486	\$ 73,698	0%
Total	\$ 3,544,068	\$ 3,596,057	1%



* "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

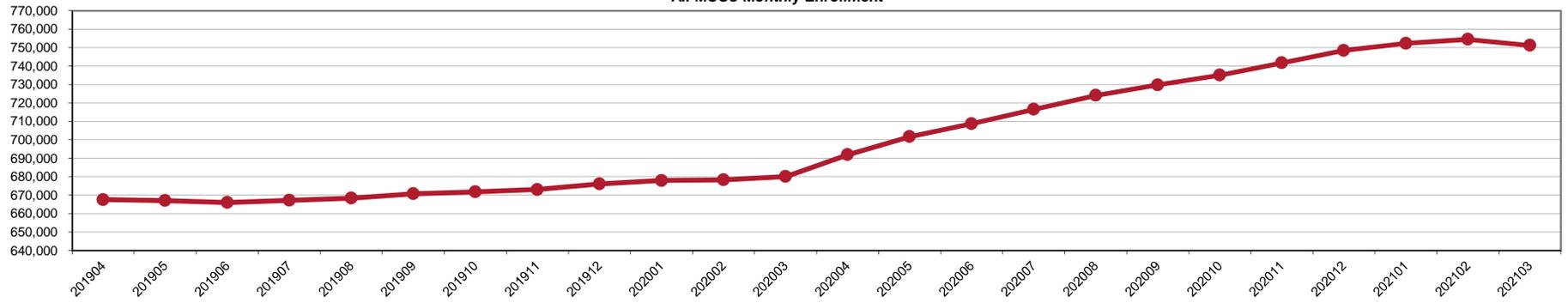
Reported Eligibility for Members Enrolled as of: March 31, 2021

Previous Period: April 1, 2019 to March 31, 2020

Current Period: April 1, 2020 to March 31, 2021

1. Total Population Monthly Enrollment

All MCOs Monthly Enrollment



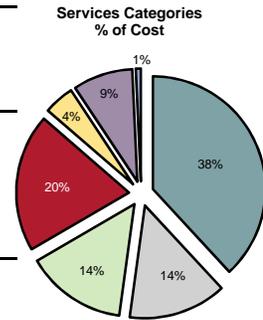
2. Total Population Medical/Pharmacy Dollars

Aggregate Annual Costs

	Previous (12 mon)	Current (12 mon)	% Change
Medical	\$ 378,038,637	\$ 458,651,856	21%
Pharmacy	\$ 62,402,486	\$ 75,072,945	20%
Total	\$ 440,441,123	\$ 533,724,801	21%

Aggregate Costs by Service Categories

Service Categories	Previous (12 mon)	Current (12 mon)	% Change
Outpatient/Clinic (OP/CL)	\$ 170,721,340	\$ 203,372,391	19%
Pharmacy (RX)	\$ 62,402,486	\$ 75,072,945	20%
Res. Treatment Ctr. (RTC)	\$ 72,638,107	\$ 77,091,627	6%
Behavioral Health Prov (BHP)	\$ 66,919,523	\$ 105,350,671	57%
Core Service Agencies (CSA)	\$ 17,853,299	\$ 23,166,325	30%
Inpatient (IP)	\$ 44,406,654	\$ 45,744,068	3%
Other (OTH)	\$ 5,499,715	\$ 3,926,773	-29%
Total Population Costs	\$ 440,441,123	\$ 533,724,801	21%
Per Capita Cost (PMPM)	\$ 54.62	\$ 60.95	12%
Total Member Months	8,064,249	8,756,279	9%

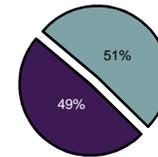


3. Retail Pharmacy Usage (Definitions in Glossary)

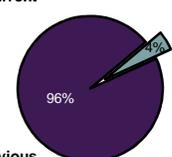
Total Generic / Brand Rx

	Previous Costs (12 mon)	Current Costs (12 mon)	% Change
Brand	\$ 31,051,194	\$ 38,443,815	24%
Generic	\$ 31,351,292	\$ 36,629,131	17%
Total	\$ 62,402,486	\$ 75,072,945	20%

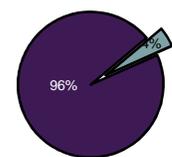
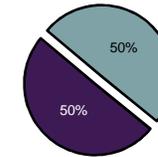
% of Rx Spend Current



% of Scripts Current



Previous



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.