

## Appendix C - SoonerSelect Dental CRCS

Delivery Date: September 23, 2022

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### CUST, < 6 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	43,715
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	28,042

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	2,003	\$ 20.90	\$ 3.49	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,043	\$ 21.08	\$ 3.59
Basic	827	\$ 92.71	\$ 6.39	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	673	\$ 100.77	\$ 5.65
Major	66	\$ 71.69	\$ 0.40	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	45	\$ 77.92	\$ 0.29
Orthodontics/Other	35	\$ 43.73	\$ 0.13	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	21	\$ 51.88	\$ 0.09
<b>Gross Benefit Total</b>			<b>\$ 10.40</b>	<b>-1.59%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 9.62</b>

**Notes:**

- Totals may differ due to rounding.
- Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
- Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
- All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.03
Underwriting Gain	1.50%	\$ 0.16
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 10.81</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 10.81</b>
Premium Based Taxes	2.25%	\$ 0.25
<b>Final Capitation PMPM</b>		<b>\$ 11.06</b>



### CUST, < 6 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	10,110
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	1,893

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	1,974	\$ 20.63	\$ 3.39	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,013	\$ 20.81	\$ 3.49
Basic	929	\$ 93.54	\$ 7.24	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	756	\$ 101.67	\$ 6.41
Major	82	\$ 67.79	\$ 0.46	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	56	\$ 73.68	\$ 0.34
Orthodontics/Other	39	\$ 45.82	\$ 0.15	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	24	\$ 54.37	\$ 0.11
<b>Gross Benefit Total</b>			<b>\$ 11.25</b>	<b>-1.59%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 10.35</b>

<b>Notes:</b>
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.10
Underwriting Gain	1.50%	\$ 0.17
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 11.63</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 11.63</b>
Premium Based Taxes	2.25%	\$ 0.27
<b>Final Capitation PMPM</b>		<b>\$ 11.90</b>



### CUST, 6+ Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	49,751
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	37,119

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	4,367	\$ 23.07	\$ 8.40	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	4,454	\$ 23.26	\$ 8.63
Basic	1,741	\$ 78.83	\$ 11.43	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,416	\$ 85.69	\$ 10.11
Major	325	\$ 123.63	\$ 3.34	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	223	\$ 134.38	\$ 2.49
Orthodontics/Other	87	\$ 295.68	\$ 2.14	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	53	\$ 350.79	\$ 1.54
<b>Gross Benefit Total</b>			<b>\$ 25.31</b>	<b>-1.57%</b>	<b>1.02%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 22.78</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.43
Underwriting Gain	1.50%	\$ 0.38
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 25.59</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 25.59</b>
Premium Based Taxes	2.25%	\$ 0.59
<b>Final Capitation PMPM</b>		<b>\$ 26.18</b>



### CUST, 6+ Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	15,269
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	3,615

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	3,983	\$ 23.28	\$ 7.73	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	4,062	\$ 23.48	\$ 7.95
Basic	1,801	\$ 77.68	\$ 11.66	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,466	\$ 84.43	\$ 10.31
Major	420	\$ 124.63	\$ 4.36	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	288	\$ 135.47	\$ 3.25
Orthodontics/Other	90	\$ 264.32	\$ 1.99	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	55	\$ 313.59	\$ 1.44
<b>Gross Benefit Total</b>			<b>\$ 25.74</b>	<b>-1.60%</b>	<b>1.02%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 22.94</b>

Notes:
<ol style="list-style-type: none"> <li>Totals may differ due to rounding.</li> <li>Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).</li> <li>Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.</li> <li>All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.</li> </ol>

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.45
Underwriting Gain	1.50%	\$ 0.39
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 25.78</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 25.78</b>
Premium Based Taxes	2.25%	\$ 0.59
<b>Final Capitation PMPM</b>		<b>\$ 26.37</b>



### CUST, All Ages, Male and Female, TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	940
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	747

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	740	\$ 18.61	\$ 1.15	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	744	\$ 18.77	\$ 1.16
Basic	102	\$ 95.01	\$ 0.81	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	82	\$ 103.27	\$ 0.70
Major	26	\$ 44.10	\$ 0.09	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	17	\$ 47.94	\$ 0.07
Orthodontics/Other	13	\$ 752.22	\$ 0.80	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	8	\$ 892.44	\$ 0.57
<b>Gross Benefit Total</b>			<b>\$ 2.85</b>	<b>-1.27%</b>	<b>1.23%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 2.51</b>

Notes:
<ol style="list-style-type: none"> <li>Totals may differ due to rounding.</li> <li>Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).</li> <li>Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.</li> <li>All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.</li> </ol>

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.27
Underwriting Gain	1.50%	\$ 0.04
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 2.82</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 2.82</b>
Premium Based Taxes	2.25%	\$ 0.06
<b>Final Capitation PMPM</b>		<b>\$ 2.88</b>



### CUST, All Ages, Male and Female, TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	209
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	39

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	747	\$ 77.81	\$ 4.84	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	751	\$ 78.46	\$ 4.91
Basic	287	\$ 124.53	\$ 2.98	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	230	\$ 135.36	\$ 2.60
Major	230	\$ 584.10	\$ 11.19	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	155	\$ 634.89	\$ 8.22
Orthodontics/Other	115	\$ 105.48	\$ 1.01	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	69	\$ 125.14	\$ 0.72
<b>Gross Benefit Total</b>			<b>\$ 20.03</b>	<b>-1.91%</b>	<b>0.99%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 16.44</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.76
Underwriting Gain	1.50%	\$ 0.28
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 18.48</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 18.48</b>
Premium Based Taxes	2.25%	\$ 0.43
<b>Final Capitation PMPM</b>		<b>\$ 18.90</b>

## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	342,636
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	297,901

EAST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	1,850	\$ 21.29	\$ 3.28	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	1,887	\$ 21.46	\$ 3.37
Basic	927	\$ 94.27	\$ 7.29	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	755	\$ 102.47	\$ 6.44
Major	71	\$ 79.28	\$ 0.47	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	49	\$ 86.18	\$ 0.35
Orthodontics/Other	29	\$ 44.40	\$ 0.11	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	18	\$ 52.67	\$ 0.08
<b>Gross Benefit Total</b>			<b>\$ 11.14</b>	<b>-1.59%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 10.24</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 36 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.09
Underwriting Gain	1.50%	\$ 0.17
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 11.51</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 11.51</b>
Premium Based Taxes	2.25%	\$ 0.26
<b>Final Capitation PMPM</b>		<b>\$ 11.78</b>



## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	415,579
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	328,260

OKC Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	1,991	\$ 21.36	\$ 3.54	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,031	\$ 21.54	\$ 3.65
Basic	918	\$ 92.89	\$ 7.11	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	747	\$ 100.97	\$ 6.29
Major	56	\$ 69.92	\$ 0.33	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	38	\$ 76.00	\$ 0.24
Orthodontics/Other	24	\$ 47.20	\$ 0.09	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	15	\$ 56.00	\$ 0.07
<b>Gross Benefit Total</b>			<b>\$ 11.07</b>	<b>-1.59%</b>	<b>0.94%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 10.24</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.09
Underwriting Gain	1.50%	\$ 0.17
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 11.51</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 11.51</b>
Premium Based Taxes	2.25%	\$ 0.26
<b>Final Capitation PMPM</b>		<b>\$ 11.77</b>

## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	322,814
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	265,579

TULSA	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	2,342	\$ 20.90	\$ 4.08	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,388	\$ 21.08	\$ 4.19
Basic	1,042	\$ 91.46	\$ 7.95	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	848	\$ 99.41	\$ 7.03
Major	71	\$ 78.10	\$ 0.46	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	49	\$ 84.89	\$ 0.34
Orthodontics/Other	39	\$ 37.16	\$ 0.12	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	24	\$ 44.09	\$ 0.09
<b>Gross Benefit Total</b>			\$ 12.61	<b>-1.59%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					\$ 11.65

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.24
Underwriting Gain	1.50%	\$ 0.20
<b>Total Benefit and Non-Benefit PMPM</b>		\$ 13.09

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		\$ 13.09
Premium Based Taxes	2.25%	\$ 0.30
<b>Final Capitation PMPM</b>		\$ 13.40

## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	540,169
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	452,590

WEST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	1,822	\$ 21.31	\$ 3.24	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	1,858	\$ 21.49	\$ 3.33
Basic	817	\$ 91.17	\$ 6.21	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	665	\$ 99.10	\$ 5.49
Major	59	\$ 75.20	\$ 0.37	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	41	\$ 81.74	\$ 0.28
Orthodontics/Other	30	\$ 46.44	\$ 0.12	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	18	\$ 55.10	\$ 0.08
<b>Gross Benefit Total</b>			<b>\$ 9.93</b>	<b>-1.59%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 9.18</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.98
Underwriting Gain	1.50%	\$ 0.15
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 10.31</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 10.31</b>
Premium Based Taxes	2.25%	\$ 0.24
<b>Final Capitation PMPM</b>		<b>\$ 10.55</b>

## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	159,185
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	26,675

EAST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	1,624	\$ 21.33	\$ 2.89	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	1,656	\$ 21.51	\$ 2.97
Basic	974	\$ 95.79	\$ 7.78	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	793	\$ 104.12	\$ 6.88
Major	74	\$ 77.88	\$ 0.48	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	51	\$ 84.66	\$ 0.36
Orthodontics/Other	38	\$ 45.81	\$ 0.14	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	23	\$ 54.35	\$ 0.10
<b>Gross Benefit Total</b>			<b>\$ 11.29</b>	<b>-1.59%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 10.31</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.10
Underwriting Gain	1.50%	\$ 0.17
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 11.58</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 11.58</b>
Premium Based Taxes	2.25%	\$ 0.27
<b>Final Capitation PMPM</b>		<b>\$ 11.85</b>

## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	14,029
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	2,074

OKC	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	1,819	\$ 21.27	\$ 3.22	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	1,856	\$ 21.45	\$ 3.32
Basic	1,071	\$ 93.10	\$ 8.31	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	871	\$ 101.20	\$ 7.35
Major	69	\$ 68.47	\$ 0.40	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	48	\$ 74.42	\$ 0.29
Orthodontics/Other	41	\$ 46.23	\$ 0.16	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	25	\$ 54.84	\$ 0.11
<b>Gross Benefit Total</b>			\$ 12.09	<b>-1.58%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					\$ 11.07

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.18
Underwriting Gain	1.50%	\$ 0.19
<b>Total Benefit and Non-Benefit PMPM</b>		\$ 12.44

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		\$ 12.44
Premium Based Taxes	2.25%	\$ 0.29
<b>Final Capitation PMPM</b>		\$ 12.73



## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	19,099
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	2,886

TULSA	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	1,809	\$ 20.50	\$ 3.09	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	1,845	\$ 20.67	\$ 3.18
Basic	1,116	\$ 92.59	\$ 8.61	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	908	\$ 100.65	\$ 7.61
Major	66	\$ 78.44	\$ 0.43	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	45	\$ 85.27	\$ 0.32
Orthodontics/Other	57	\$ 39.58	\$ 0.19	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	35	\$ 46.96	\$ 0.14
<b>Gross Benefit Total</b>			<b>\$ 12.32</b>	<b>-1.58%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 11.25</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.20
Underwriting Gain	1.50%	\$ 0.19
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 12.64</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 12.64</b>
Premium Based Taxes	2.25%	\$ 0.29
<b>Final Capitation PMPM</b>		<b>\$ 12.93</b>

## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	70,433
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	11,451

WEST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	1,506	\$ 20.95	\$ 2.63	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	1,536	\$ 21.12	\$ 2.70
Basic	944	\$ 93.07	\$ 7.32	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	768	\$ 101.16	\$ 6.48
Major	76	\$ 77.55	\$ 0.49	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	52	\$ 84.29	\$ 0.37
Orthodontics/Other	34	\$ 44.77	\$ 0.13	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	21	\$ 53.12	\$ 0.09
<b>Gross Benefit Total</b>			<b>\$ 10.57</b>	<b>-1.59%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 9.64</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.03
Underwriting Gain	1.50%	\$ 0.16
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 10.83</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 10.83</b>
Premium Based Taxes	2.25%	\$ 0.25
<b>Final Capitation PMPM</b>		<b>\$ 11.08</b>

## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	32,007
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	26,370

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	364	\$ 18.62	\$ 0.56	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	366	\$ 18.77	\$ 0.57
Basic	262	\$ 79.51	\$ 1.73	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	210	\$ 86.43	\$ 1.51
Major	18	\$ 71.08	\$ 0.11	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	12	\$ 77.26	\$ 0.08
Orthodontics/Other	6	\$ 36.35	\$ 0.02	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	3	\$ 43.13	\$ 0.01
<b>Gross Benefit Total</b>			\$ <b>2.42</b>	<b>-1.60%</b>	<b>0.94%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-2.20%</b>					\$ <b>2.18</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ <b>0.23</b>
Underwriting Gain	1.50%	\$ <b>0.04</b>
<b>Total Benefit and Non-Benefit PMPM</b>		\$ <b>2.44</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		\$ <b>2.44</b>
Premium Based Taxes	2.25%	\$ <b>0.06</b>
<b>Final Capitation PMPM</b>		\$ <b>2.50</b>





## TANF/CHIP Child/Adoption, < 6 Years, Male and Female, TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	6,383
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	1,026

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	316	\$ 19.18	\$ 0.50	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	317	\$ 19.34	\$ 0.51
Basic	312	\$ 87.34	\$ 2.27	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	250	\$ 94.94	\$ 1.98
Major	28	\$ 78.50	\$ 0.18	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	19	\$ 85.32	\$ 0.14
Orthodontics/Other	9	\$ 43.82	\$ 0.03	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	6	\$ 51.99	\$ 0.02
<b>Gross Benefit Total</b>			<b>\$ 3.00</b>	<b>-1.60%</b>	<b>0.95%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 2.65</b>

<b>Notes:</b>
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.28
Underwriting Gain	1.50%	\$ 0.04
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 2.98</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 2.98</b>
Premium Based Taxes	2.25%	\$ 0.07
<b>Final Capitation PMPM</b>		<b>\$ 3.05</b>



## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	444,981
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	396,083

EAST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	4,226	\$ 23.08	\$ 8.13	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	4,310	\$ 23.27	\$ 8.36
Basic	1,270	\$ 76.87	\$ 8.13	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,033	\$ 83.56	\$ 7.19
Major	236	\$ 75.32	\$ 1.48	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	162	\$ 81.87	\$ 1.11
Orthodontics/Other	77	\$ 482.26	\$ 3.09	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	47	\$ 572.16	\$ 2.23
<b>Gross Benefit Total</b>			<b>\$ 20.83</b>	<b>-1.45%</b>	<b>1.09%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 18.88</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.02
Underwriting Gain	1.50%	\$ 0.32
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 21.22</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 21.22</b>
Premium Based Taxes	2.25%	\$ 0.49
<b>Final Capitation PMPM</b>		<b>\$ 21.71</b>

## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	560,797
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	472,946

OKC Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	4,510	\$ 22.60	\$ 8.50	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	4,600	\$ 22.79	\$ 8.74
Basic	1,079	\$ 73.83	\$ 6.64	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	878	\$ 80.25	\$ 5.87
Major	257	\$ 90.71	\$ 1.94	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	176	\$ 98.60	\$ 1.45
Orthodontics/Other	80	\$ 371.52	\$ 2.47	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	48	\$ 440.78	\$ 1.78
<b>Gross Benefit Total</b>			<b>\$ 19.55</b>	<b>-1.50%</b>	<b>1.07%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 17.84</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.90
Underwriting Gain	1.50%	\$ 0.30
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 20.05</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 20.05</b>
Premium Based Taxes	2.25%	\$ 0.46
<b>Final Capitation PMPM</b>		<b>\$ 20.51</b>

## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	401,524
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	355,443

TULSA	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	4,838	\$ 23.22	\$ 9.36	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	4,935	\$ 23.42	\$ 9.63
Basic	1,407	\$ 78.63	\$ 9.22	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,145	\$ 85.46	\$ 8.16
Major	282	\$ 76.77	\$ 1.80	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	193	\$ 83.44	\$ 1.35
Orthodontics/Other	108	\$ 423.20	\$ 3.80	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	66	\$ 502.08	\$ 2.74
<b>Gross Benefit Total</b>			<b>\$ 24.19</b>	<b>-1.44%</b>	<b>1.10%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 21.87</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.33
Underwriting Gain	1.50%	\$ 0.37
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 24.58</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 24.58</b>
Premium Based Taxes	2.25%	\$ 0.57
<b>Final Capitation PMPM</b>		<b>\$ 25.14</b>



## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	705,119
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	634,358

WEST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	4,326	\$ 23.00	\$ 8.29	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	4,412	\$ 23.19	\$ 8.53
Basic	1,201	\$ 72.56	\$ 7.26	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	978	\$ 78.87	\$ 6.43
Major	269	\$ 89.44	\$ 2.00	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	184	\$ 97.22	\$ 1.49
Orthodontics/Other	107	\$ 380.59	\$ 3.40	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	65	\$ 451.53	\$ 2.45
<b>Gross Benefit Total</b>			<b>\$ 20.96</b>	<b>-1.45%</b>	<b>1.11%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 18.89</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.02
Underwriting Gain	1.50%	\$ 0.32
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 21.23</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 21.23</b>
Premium Based Taxes	2.25%	\$ 0.49
<b>Final Capitation PMPM</b>		<b>\$ 21.72</b>



## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	248,214
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	50,031

EAST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	3,553	\$ 23.08	\$ 6.83	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	3,623	\$ 23.27	\$ 7.03
Basic	1,193	\$ 77.77	\$ 7.73	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	970	\$ 84.53	\$ 6.84
Major	217	\$ 79.89	\$ 1.44	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	149	\$ 86.84	\$ 1.08
Orthodontics/Other	71	\$ 453.94	\$ 2.70	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	43	\$ 538.56	\$ 1.95
<b>Gross Benefit Total</b>			<b>\$ 18.71</b>	<b>-1.46%</b>	<b>1.09%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 16.89</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.80
Underwriting Gain	1.50%	\$ 0.28
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 18.97</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 18.97</b>
Premium Based Taxes	2.25%	\$ 0.44
<b>Final Capitation PMPM</b>		<b>\$ 19.41</b>

## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	28,703
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	5,294

OKC Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	3,836	\$ 23.10	\$ 7.38	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	3,912	\$ 23.29	\$ 7.59
Basic	1,094	\$ 74.06	\$ 6.75	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	890	\$ 80.50	\$ 5.97
Major	238	\$ 80.65	\$ 1.60	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	163	\$ 87.66	\$ 1.19
Orthodontics/Other	79	\$ 400.65	\$ 2.65	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	48	\$ 475.34	\$ 1.91
<b>Gross Benefit Total</b>			<b>\$ 18.38</b>	<b>-1.47%</b>	<b>1.09%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 16.67</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.78
Underwriting Gain	1.50%	\$ 0.28
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 18.73</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 18.73</b>
Premium Based Taxes	2.25%	\$ 0.43
<b>Final Capitation PMPM</b>		<b>\$ 19.16</b>



## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	34,335
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	6,631

TULSA	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	3,708	\$ 23.49	\$ 7.26	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	3,782	\$ 23.68	\$ 7.46
Basic	1,259	\$ 80.63	\$ 8.46	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,024	\$ 87.64	\$ 7.48
Major	226	\$ 88.63	\$ 1.67	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	155	\$ 96.34	\$ 1.25
Orthodontics/Other	110	\$ 429.22	\$ 3.93	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	67	\$ 509.23	\$ 2.83
<b>Gross Benefit Total</b>			<b>\$ 21.31</b>	<b>-1.42%</b>	<b>1.13%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 19.02</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.03
Underwriting Gain	1.50%	\$ 0.32
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 21.37</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 21.37</b>
Premium Based Taxes	2.25%	\$ 0.49
<b>Final Capitation PMPM</b>		<b>\$ 21.86</b>



## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	116,441
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	23,464

WEST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	3,332	\$ 22.82	\$ 6.34	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	3,398	\$ 23.01	\$ 6.52
Basic	1,120	\$ 74.36	\$ 6.94	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	911	\$ 80.83	\$ 6.14
Major	233	\$ 90.60	\$ 1.76	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	160	\$ 98.48	\$ 1.31
Orthodontics/Other	90	\$ 392.60	\$ 2.96	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	55	\$ 465.79	\$ 2.13
<b>Gross Benefit Total</b>			<b>\$ 17.99</b>	<b>-1.45%</b>	<b>1.11%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 16.10</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.72
Underwriting Gain	1.50%	\$ 0.27
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 18.08</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 18.08</b>
Premium Based Taxes	2.25%	\$ 0.42
<b>Final Capitation PMPM</b>		<b>\$ 18.50</b>

## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	87,579
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	79,390

STATEWIDE	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	601	\$ 21.60	\$ 1.08	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	604	\$ 21.78	\$ 1.10
Basic	335	\$ 59.19	\$ 1.65	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	268	\$ 64.33	\$ 1.44
Major	76	\$ 79.61	\$ 0.50	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	51	\$ 86.53	\$ 0.37
Orthodontics/Other	49	\$ 481.11	\$ 1.95	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	29	\$ 570.80	\$ 1.39
<b>Gross Benefit Total</b>			\$ 5.19	<b>-1.21%</b>	<b>1.33%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-2.20%</b>					\$ 4.29

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.46
Underwriting Gain	1.50%	\$ 0.07
<b>Total Benefit and Non-Benefit PMPM</b>		\$ 4.82

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		\$ 4.82
Premium Based Taxes	2.25%	\$ 0.11
<b>Final Capitation PMPM</b>		\$ 4.93



## TANF/CHIP Child/Adoption, 6-14 Years, Male and Female, TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	20,067
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	4,196

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	500	\$ 21.77	\$ 0.91	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	502	\$ 21.96	\$ 0.92
Basic	309	\$ 54.33	\$ 1.40	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	248	\$ 59.06	\$ 1.22
Major	70	\$ 71.17	\$ 0.41	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	47	\$ 77.36	\$ 0.30
Orthodontics/Other	38	\$ 505.32	\$ 1.61	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	23	\$ 599.51	\$ 1.14
<b>Gross Benefit Total</b>			\$ 4.33	-1.21%	1.33%	0.00%	0.00%	-2.20%					\$ 3.59

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.38
Underwriting Gain	1.50%	\$ 0.06
<b>Total Benefit and Non-Benefit PMPM</b>		\$ 4.03

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		\$ 4.03
Premium Based Taxes	2.25%	\$ 0.09
<b>Final Capitation PMPM</b>		\$ 4.12

## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	157,602
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	150,191

EAST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	3,388	\$ 25.74	\$ 7.27	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	3,455	\$ 25.96	\$ 7.47
Basic	1,608	\$ 81.25	\$ 10.89	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,308	\$ 88.31	\$ 9.63
Major	455	\$ 216.00	\$ 8.20	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	312	\$ 234.78	\$ 6.11
Orthodontics/Other	117	\$ 341.50	\$ 3.34	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	71	\$ 405.16	\$ 2.41
<b>Gross Benefit Total</b>			<b>\$ 29.70</b>	<b>-1.64%</b>	<b>1.05%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 25.62</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.73
Underwriting Gain	1.50%	\$ 0.43
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 28.79</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 28.79</b>
Premium Based Taxes	2.25%	\$ 0.66
<b>Final Capitation PMPM</b>		<b>\$ 29.45</b>

## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	179,743
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	177,947

OKC Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	3,844	\$ 24.86	\$ 7.96	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	3,921	\$ 25.07	\$ 8.19
Basic	1,392	\$ 78.43	\$ 9.10	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,132	\$ 85.25	\$ 8.05
Major	460	\$ 254.01	\$ 9.75	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	316	\$ 276.09	\$ 7.26
Orthodontics/Other	143	\$ 291.41	\$ 3.46	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	87	\$ 345.73	\$ 2.50
<b>Gross Benefit Total</b>			<b>\$ 30.27</b>	<b>-1.67%</b>	<b>1.06%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 25.99</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.77
Underwriting Gain	1.50%	\$ 0.44
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 29.21</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 29.21</b>
Premium Based Taxes	2.25%	\$ 0.67
<b>Final Capitation PMPM</b>		<b>\$ 29.88</b>

## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	126,964
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	128,713

TULSA	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	3,985	\$ 25.97	\$ 8.62	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	4,064	\$ 26.19	\$ 8.87
Basic	1,689	\$ 79.55	\$ 11.19	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,374	\$ 86.46	\$ 9.90
Major	483	\$ 206.81	\$ 8.32	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	331	\$ 224.79	\$ 6.20
Orthodontics/Other	148	\$ 329.31	\$ 4.07	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	90	\$ 390.70	\$ 2.93
<b>Gross Benefit Total</b>			<b>\$ 32.21</b>	<b>-1.61%</b>	<b>1.07%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 27.90</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.98
Underwriting Gain	1.50%	\$ 0.47
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 31.35</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 31.35</b>
Premium Based Taxes	2.25%	\$ 0.72
<b>Final Capitation PMPM</b>		<b>\$ 32.07</b>

## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	235,709
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	239,755

WEST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	3,567	\$ 25.09	\$ 7.46	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	3,638	\$ 25.30	\$ 7.67
Basic	1,514	\$ 77.24	\$ 9.74	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,232	\$ 83.96	\$ 8.62
Major	489	\$ 246.64	\$ 10.04	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	335	\$ 268.08	\$ 7.48
Orthodontics/Other	191	\$ 294.42	\$ 4.68	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	116	\$ 349.30	\$ 3.38
<b>Gross Benefit Total</b>			<b>\$ 31.92</b>	<b>-1.62%</b>	<b>1.09%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 27.15</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.90
Underwriting Gain	1.50%	\$ 0.46
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 30.50</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 30.50</b>
Premium Based Taxes	2.25%	\$ 0.70
<b>Final Capitation PMPM</b>		<b>\$ 31.20</b>

## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	93,492
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	21,798

EAST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	2,832	\$ 25.36	\$ 5.99	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,889	\$ 25.57	\$ 6.16
Basic	1,369	\$ 81.83	\$ 9.33	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,114	\$ 88.94	\$ 8.25
Major	392	\$ 239.98	\$ 7.84	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	269	\$ 260.85	\$ 5.84
Orthodontics/Other	107	\$ 325.66	\$ 2.91	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	65	\$ 386.37	\$ 2.10
Gross Benefit Total			\$ 26.07	-1.66%	1.05%	0.00%	0.00%	-0.75%					\$ 22.35

Notes:
1. Totals may differ due to rounding. 2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023). 3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024. 4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.39
Underwriting Gain	1.50%	\$ 0.38
Total Benefit and Non-Benefit PMPM		\$ 25.11

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 25.11
Premium Based Taxes	2.25%	\$ 0.58
Final Capitation PMPM		\$ 25.69



## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	11,801
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	2,632

OKC Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	2,819	\$ 25.14	\$ 5.91	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,875	\$ 25.36	\$ 6.07
Basic	1,273	\$ 77.21	\$ 8.19	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,036	\$ 83.93	\$ 7.25
Major	366	\$ 306.47	\$ 9.35	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	251	\$ 333.13	\$ 6.97
Orthodontics/Other	93	\$ 258.25	\$ 1.99	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	56	\$ 306.39	\$ 1.44
<b>Gross Benefit Total</b>			\$ 25.44	<b>-1.74%</b>	<b>1.02%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					\$ 21.72

Notes:
1. Totals may differ due to rounding. 2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023). 3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024. 4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.32
Underwriting Gain	1.50%	\$ 0.37
<b>Total Benefit and Non-Benefit PMPM</b>		\$ 24.41

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		\$ 24.41
Premium Based Taxes	2.25%	\$ 0.56
<b>Final Capitation PMPM</b>		\$ 24.97

## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	15,394
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	3,448

TULSA	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	2,857	\$ 25.84	\$ 6.15	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,914	\$ 26.06	\$ 6.33
Basic	1,550	\$ 80.30	\$ 10.37	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,262	\$ 87.28	\$ 9.18
Major	472	\$ 205.51	\$ 8.09	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	324	\$ 223.38	\$ 6.03
Orthodontics/Other	136	\$ 384.27	\$ 4.37	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	83	\$ 455.90	\$ 3.15
Gross Benefit Total			\$ 28.99	-1.59%	1.09%	0.00%	0.00%	-0.75%					\$ 24.68

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.63
Underwriting Gain	1.50%	\$ 0.42
Total Benefit and Non-Benefit PMPM		\$ 27.73

Premium Tax	%	PMPM
Subtotal Prior to Premium Tax		\$ 27.73
Premium Based Taxes	2.25%	\$ 0.64
Final Capitation PMPM		\$ 28.37



## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, Non-TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	48,600
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	11,130

WEST	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost
Diagnostic/Preventive	2,530	\$ 24.87	\$ 5.24	-1.57%	0.94%	0.00%	0.00%	-0.75%	11.25%	-3.75%	2,580	\$ 25.08	\$ 5.39
Basic	1,256	\$ 77.94	\$ 8.16	-1.57%	0.94%	0.00%	0.00%	-0.75%	-11.25%	3.75%	1,022	\$ 84.72	\$ 7.22
Major	357	\$ 241.52	\$ 7.19	-2.27%	0.94%	0.00%	0.00%	-0.75%	-22.50%	3.75%	245	\$ 262.52	\$ 5.36
Orthodontics/Other	128	\$ 287.65	\$ 3.08	-0.41%	1.99%	0.00%	0.00%	-0.75%	-37.50%	7.50%	78	\$ 341.27	\$ 2.22
<b>Gross Benefit Total</b>			<b>\$ 23.67</b>	<b>-1.64%</b>	<b>1.07%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 20.18</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 2.15
Underwriting Gain	1.50%	\$ 0.34
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 22.68</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 22.68</b>
Premium Based Taxes	2.25%	\$ 0.52
<b>Final Capitation PMPM</b>		<b>\$ 23.20</b>



## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, TPL, Non-Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	36,360
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	38,867

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	537	\$ 22.92	\$ 1.03	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	540	\$ 23.12	\$ 1.04
Basic	411	\$ 63.15	\$ 2.16	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	330	\$ 68.64	\$ 1.89
Major	117	\$ 243.22	\$ 2.36	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	79	\$ 264.37	\$ 1.73
Orthodontics/Other	59	\$ 345.78	\$ 1.71	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	36	\$ 410.23	\$ 1.22
<b>Gross Benefit Total</b>			<b>\$ 7.26</b>	<b>-1.53%</b>	<b>1.18%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 5.88</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.63
Underwriting Gain	1.50%	\$ 0.10
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 6.60</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 6.60</b>
Premium Based Taxes	2.25%	\$ 0.15
<b>Final Capitation PMPM</b>		<b>\$ 6.75</b>



## TANF/CHIP Child/Adoption, 15+ Years, Male and Female, TPL, Voluntary

<b>Base Period:</b>	July 1, 2018 to June 30, 2019
<b>Base Member Months:</b>	8,690
<b>Trend Months (No Seasonality):</b>	60

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	2,340

STATEWIDE Category of Service	Adjusted Base Data			Annual Dental Trends		Prospective Rating Adjustments		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM	Util/1000 %	Unit Cost %	Util/1000 %	Unit Cost %	PMPM %	Util/1000 %	Unit Cost %	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	424	\$ 22.12	\$ 0.78	-1.57%	0.94%	0.00%	0.00%	-2.20%	11.25%	-3.75%	426	\$ 22.31	\$ 0.79
Basic	380	\$ 51.15	\$ 1.62	-1.57%	0.94%	0.00%	0.00%	-2.20%	-11.25%	3.75%	304	\$ 55.60	\$ 1.41
Major	186	\$ 269.71	\$ 4.19	-2.27%	0.94%	0.00%	0.00%	-2.20%	-22.50%	3.75%	126	\$ 293.17	\$ 3.08
Orthodontics/Other	52	\$ 284.22	\$ 1.24	-0.41%	1.99%	0.00%	0.00%	-2.20%	-37.50%	7.50%	31	\$ 337.20	\$ 0.88
<b>Gross Benefit Total</b>			<b>\$ 7.83</b>	<b>-1.76%</b>	<b>1.10%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 6.16</b>

Notes:
1. Totals may differ due to rounding.
2. Trend months reflect the 60 months from the mid-point of SFY 2019 (December 30, 2018) to the mid-point of SFY 2024 (December 30, 2023).
3. Seasonality adjusts the capitation rates to reflect the nine-month period from October 1, 2023 to June 30, 2024.
4. All PMPM values contained on this capitation rate calculation sheet are based on SFY 2019 member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.66
Underwriting Gain	1.50%	\$ 0.10
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 6.92</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 6.92</b>
Premium Based Taxes	2.25%	\$ 0.16
<b>Final Capitation PMPM</b>		<b>\$ 7.08</b>

### FFC, All Ages, Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	6,816
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	5,164

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	755	\$ 21.52	\$ 1.35	-2.46%	2.50%	0.00%	-0.75%	11.25%	-3.75%	887	\$ 20.21	\$ 1.49
Basic	241	\$ 88.89	\$ 1.78	-1.58%	2.50%	0.00%	-0.75%	-11.25%	3.75%	226	\$ 90.77	\$ 1.71
Major	407	\$ 144.58	\$ 4.90	-0.14%	1.50%	0.00%	-0.75%	-22.50%	3.75%	325	\$ 149.79	\$ 4.06
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 8.04</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 7.26</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.77
Underwriting Gain	1.50%	\$ 0.12
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 8.15</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 8.15</b>
Premium Based Taxes	2.25%	\$ 0.19
<b>Final Capitation PMPM</b>		<b>\$ 8.34</b>

### FFC, All Ages, Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	2,026
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	394

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	486	\$ 20.97	\$ 0.85	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	570	\$ 20.19	\$ 0.96
Basic	155	\$ 86.62	\$ 1.12	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	145	\$ 89.87	\$ 1.09
Major	262	\$ 140.88	\$ 3.07	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	209	\$ 146.16	\$ 2.54
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 5.04</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 4.59</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.49
Underwriting Gain	1.50%	\$ 0.08
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 5.16</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 5.16</b>
Premium Based Taxes	2.25%	\$ 0.12
<b>Final Capitation PMPM</b>		<b>\$ 5.28</b>

### FFC, All Ages, Male and Female, TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	108
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	73

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	117	\$ 21.49	\$ 0.21	0.00%	2.50%	0.00%	-2.20%	11.25%	-3.75%	135	\$ 20.69	\$ 0.23
Basic	37	\$ 88.77	\$ 0.28	0.00%	2.50%	0.00%	-2.20%	-11.25%	3.75%	34	\$ 92.10	\$ 0.26
Major	63	\$ 144.38	\$ 0.76	0.00%	1.50%	0.00%	-2.20%	-22.50%	3.75%	50	\$ 149.79	\$ 0.62
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-2.20%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 1.24</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 1.11</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.12
Underwriting Gain	1.50%	\$ 0.02
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 1.25</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 1.25</b>
Premium Based Taxes	2.25%	\$ 0.03
<b>Final Capitation PMPM</b>		<b>\$ 1.28</b>





### FFC, All Ages, Male and Female, TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	26
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	4

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	60	\$ 20.48	\$ 0.10	0.00%	2.50%	0.00%	-2.20%	11.25%	-3.75%	69	\$ 19.71	\$ 0.11
Basic	19	\$ 84.58	\$ 0.13	0.00%	2.50%	0.00%	-2.20%	-11.25%	3.75%	18	\$ 87.75	\$ 0.13
Major	32	\$ 137.56	\$ 0.37	0.00%	1.50%	0.00%	-2.20%	-22.50%	3.75%	25	\$ 142.72	\$ 0.30
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-2.20%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 0.61</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 0.55</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.06
Underwriting Gain	1.50%	\$ 0.01
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 0.61</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 0.61</b>
Premium Based Taxes	2.25%	\$ 0.01
<b>Final Capitation PMPM</b>		<b>\$ 0.63</b>

### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	265,300
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	177,446

EAST	Annualized CY2021 Experience			Copay Adj.	Annual Trend		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost		PMPM	PMPM %		Util/1000 %	Unit Cost %	PMPM %	Util/1,000	Unit Cost
Diagnostic/Preventive	818	\$ 26.17	\$ 1.78	-2.85%	2.50%	0.00%	-0.75%	11.25%	-3.75%	960	\$ 24.47	\$ 1.96
Basic	261	\$ 108.08	\$ 2.35	-0.98%	2.50%	0.00%	-0.75%	-11.25%	3.75%	244	\$ 111.03	\$ 2.26
Major	441	\$ 175.79	\$ 6.45	-0.33%	1.50%	0.00%	-0.75%	-22.50%	3.75%	352	\$ 181.77	\$ 5.33
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 10.58</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 9.55</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.02
Underwriting Gain	1.50%	\$ 0.16
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 10.72</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 10.72</b>
Premium Based Taxes	2.25%	\$ 0.25
<b>Final Capitation PMPM</b>		<b>\$ 10.97</b>

### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	253,035
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	165,519

OKC	Annualized CY2021 Experience			Copay Adj.	Annual Trend			Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost		PMPM	PMPM %	Util/1000 %		Unit Cost %	PMPM %	Util/1,000	Unit Cost	Util/1,000
	Diagnostic/Preventive	1,200	\$ 21.96	\$ 2.20	-3.37%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,409	\$ 20.43	\$ 2.40
	Basic	383	\$ 90.70	\$ 2.89	-1.25%	2.50%	0.00%	-0.75%	-11.25%	3.75%	358	\$ 92.93	\$ 2.78
	Major	647	\$ 147.52	\$ 7.95	-0.33%	1.50%	0.00%	-0.75%	-22.50%	3.75%	516	\$ 152.55	\$ 6.56
	Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
	<b>Gross Benefit Total</b>			<b>\$ 13.04</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 11.74</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.25
Underwriting Gain	1.50%	\$ 0.20
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 13.19</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 13.19</b>
Premium Based Taxes	2.25%	\$ 0.30
<b>Final Capitation PMPM</b>		<b>\$ 13.49</b>



### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	200,829
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	130,650

TULSA Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	1,176	\$ 21.53	\$ 2.11	-3.32%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,381	\$ 20.03	\$ 2.31
Basic	375	\$ 88.92	\$ 2.78	-1.24%	2.50%	0.00%	-0.75%	-11.25%	3.75%	351	\$ 91.11	\$ 2.67
Major	634	\$ 144.62	\$ 7.64	-0.31%	1.50%	0.00%	-0.75%	-22.50%	3.75%	506	\$ 149.59	\$ 6.30
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 12.52</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 11.28</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.20
Underwriting Gain	1.50%	\$ 0.19
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 12.67</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 12.67</b>
Premium Based Taxes	2.25%	\$ 0.29
<b>Final Capitation PMPM</b>		<b>\$ 12.96</b>



### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	382,946
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	250,235

WEST Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	1,048	\$ 23.50	\$ 2.05	-3.30%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,231	\$ 21.87	\$ 2.24
Basic	334	\$ 97.04	\$ 2.70	-1.16%	2.50%	0.00%	-0.75%	-11.25%	3.75%	313	\$ 99.51	\$ 2.60
Major	565	\$ 157.83	\$ 7.43	-0.35%	1.50%	0.00%	-0.75%	-22.50%	3.75%	451	\$ 163.18	\$ 6.13
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 12.19</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 10.97</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.17
Underwriting Gain	1.50%	\$ 0.18
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 12.33</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 12.33</b>
Premium Based Taxes	2.25%	\$ 0.28
<b>Final Capitation PMPM</b>		<b>\$ 12.61</b>



### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	126,832
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	21,077

EAST Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	526	\$ 25.50	\$ 1.12	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	617	\$ 24.54	\$ 1.26
Basic	168	\$ 105.32	\$ 1.47	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	157	\$ 109.26	\$ 1.43
Major	283	\$ 171.29	\$ 4.04	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	226	\$ 177.71	\$ 3.35
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 6.63</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 6.04</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.64
Underwriting Gain	1.50%	\$ 0.10
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 6.79</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 6.79</b>
Premium Based Taxes	2.25%	\$ 0.16
<b>Final Capitation PMPM</b>		<b>\$ 6.94</b>



### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	19,226
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	3,194

OKC	Annualized CY2021 Experience			Copay Adj.	Annual Trend		Seasonality	Managed Care Savings		Projected Dental Expenses			
	Category of Service	Util/1,000	Unit Cost		PMPM	PMPM %		Util/1000 %	Unit Cost %	PMPM %	Util/1,000	Unit Cost	Util/1,000
	Diagnostic/Preventive	771	\$ 21.40	\$ 1.38	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	906	\$ 20.60	\$ 1.55
	Basic	246	\$ 88.38	\$ 1.81	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	230	\$ 91.70	\$ 1.76
	Major	416	\$ 143.75	\$ 4.98	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	332	\$ 149.14	\$ 4.12
	Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
	<b>Gross Benefit Total</b>			<b>\$ 8.17</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 7.44</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.79
Underwriting Gain	1.50%	\$ 0.13
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 8.36</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 8.36</b>
Premium Based Taxes	2.25%	\$ 0.19
<b>Final Capitation PMPM</b>		<b>\$ 8.55</b>



### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	27,181
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	4,468

TULSA	Annualized CY2021 Experience			Copay Adj.	Annual Trend		Seasonality	Managed Care Savings		Projected Dental Expenses		
	Category of Service	Util/1,000	Unit Cost		PMPM	PMPM %		Util/1000 %	Unit Cost %	PMPM %	Util/1,000	Unit Cost
Diagnostic/Preventive	756	\$ 20.98	\$ 1.32	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	888	\$ 20.19	\$ 1.49
Basic	241	\$ 86.64	\$ 1.74	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	226	\$ 89.89	\$ 1.69
Major	407	\$ 140.92	\$ 4.78	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	325	\$ 146.21	\$ 3.96
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 7.84</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 7.15</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.76
Underwriting Gain	1.50%	\$ 0.12
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 8.03</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 8.03</b>
Premium Based Taxes	2.25%	\$ 0.18
<b>Final Capitation PMPM</b>		<b>\$ 8.21</b>





### TANF Parent/Caretaker, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	68,692
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	11,257

WEST Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	674	\$ 22.89	\$ 1.29	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	791	\$ 22.04	\$ 1.45
Basic	215	\$ 94.56	\$ 1.69	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	201	\$ 98.10	\$ 1.65
Major	363	\$ 153.79	\$ 4.65	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	290	\$ 159.56	\$ 3.85
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 7.63</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 6.95</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.74
Underwriting Gain	1.50%	\$ 0.12
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 7.81</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 7.81</b>
Premium Based Taxes	2.25%	\$ 0.18
<b>Final Capitation PMPM</b>		<b>\$ 7.99</b>

### TANF Parent/Caretaker, All Ages, Adult Male and Female, TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	48,684
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	34,923

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	20	\$ 26.57	\$ 0.04	-17.25%	2.50%	0.00%	-2.20%	11.25%	-3.75%	23	\$ 21.16	\$ 0.04
Basic	6	\$ 109.74	\$ 0.06	-13.95%	2.50%	0.00%	-2.20%	-11.25%	3.75%	6	\$ 97.97	\$ 0.05
Major	11	\$ 178.48	\$ 0.16	-2.92%	1.50%	0.00%	-2.20%	-22.50%	3.75%	8	\$ 179.76	\$ 0.12
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-2.20%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 0.26</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 0.21</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.02
Underwriting Gain	1.50%	\$ 0.00
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 0.24</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 0.24</b>
Premium Based Taxes	2.25%	\$ 0.01
<b>Final Capitation PMPM</b>		<b>\$ 0.24</b>



### TANF Parent/Caretaker, All Ages, Adult Male and Female, TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Base Member Months:</b>	8,668
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	1,537

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	10	\$ 25.32	\$ 0.02	0.00%	2.50%	0.00%	-2.20%	11.25%	-3.75%	12	\$ 24.37	\$ 0.02
Basic	3	\$ 104.56	\$ 0.03	0.00%	2.50%	0.00%	-2.20%	-11.25%	3.75%	3	\$ 108.48	\$ 0.03
Major	5	\$ 170.05	\$ 0.08	0.00%	1.50%	0.00%	-2.20%	-22.50%	3.75%	4	\$ 176.43	\$ 0.06
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-2.20%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 0.13</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 0.11</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.01
Underwriting Gain	1.50%	\$ 0.00
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 0.13</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 0.13</b>
Premium Based Taxes	2.25%	\$ 0.00
<b>Final Capitation PMPM</b>		<b>\$ 0.13</b>

## Expansion, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	428,162
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	551,743

EAST Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	936	\$ 27.87	\$ 2.17	-3.03%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,099	\$ 26.01	\$ 2.38
Basic	298	\$ 115.11	\$ 2.86	-0.98%	2.50%	0.00%	-0.75%	-11.25%	3.75%	280	\$ 118.25	\$ 2.76
Major	504	\$ 187.22	\$ 7.87	-0.47%	1.50%	0.00%	-0.75%	-22.50%	3.75%	403	\$ 193.34	\$ 6.49
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 12.90</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 11.62</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.24
Underwriting Gain	1.50%	\$ 0.20
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 13.06</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 13.06</b>
Premium Based Taxes	2.25%	\$ 0.30
<b>Final Capitation PMPM</b>		<b>\$ 13.36</b>

## Expansion, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	357,207
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	463,672

OKC Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	1,454	\$ 24.72	\$ 3.00	-3.02%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,708	\$ 23.08	\$ 3.28
Basic	464	\$ 102.10	\$ 3.94	-1.11%	2.50%	0.00%	-0.75%	-11.25%	3.75%	434	\$ 104.76	\$ 3.79
Major	783	\$ 166.07	\$ 10.84	-0.39%	1.50%	0.00%	-0.75%	-22.50%	3.75%	626	\$ 171.61	\$ 8.95
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 17.78</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 16.02</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.71
Underwriting Gain	1.50%	\$ 0.27
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 18.00</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 18.00</b>
Premium Based Taxes	2.25%	\$ 0.41
<b>Final Capitation PMPM</b>		<b>\$ 18.42</b>

## Expansion, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	291,413
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	375,376

TULSA Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	1,382	\$ 23.99	\$ 2.76	-3.02%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,624	\$ 22.39	\$ 3.03
Basic	441	\$ 99.08	\$ 3.64	-1.23%	2.50%	0.00%	-0.75%	-11.25%	3.75%	413	\$ 101.53	\$ 3.49
Major	745	\$ 161.15	\$ 10.00	-0.38%	1.50%	0.00%	-0.75%	-22.50%	3.75%	595	\$ 166.55	\$ 8.25
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 16.41</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 14.78</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.58
Underwriting Gain	1.50%	\$ 0.25
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 16.61</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 16.61</b>
Premium Based Taxes	2.25%	\$ 0.38
<b>Final Capitation PMPM</b>		<b>\$ 16.99</b>

## Expansion, All Ages, Adult Male and Female, Non-TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	576,925
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	729,052

WEST Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	1,167	\$ 25.39	\$ 2.47	-3.29%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,370	\$ 23.63	\$ 2.70
Basic	372	\$ 104.84	\$ 3.25	-1.17%	2.50%	0.00%	-0.75%	-11.25%	3.75%	349	\$ 107.51	\$ 3.12
Major	629	\$ 170.52	\$ 8.93	-0.42%	1.50%	0.00%	-0.75%	-22.50%	3.75%	502	\$ 176.17	\$ 7.37
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 14.65</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 13.19</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.41
Underwriting Gain	1.50%	\$ 0.22
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 14.82</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 14.82</b>
Premium Based Taxes	2.25%	\$ 0.34
<b>Final Capitation PMPM</b>		<b>\$ 15.16</b>

### Expansion, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	139,154
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	42,954

EAST Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	602	\$ 27.16	\$ 1.36	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	707	\$ 26.14	\$ 1.54
Basic	192	\$ 112.16	\$ 1.79	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	180	\$ 116.37	\$ 1.74
Major	324	\$ 182.43	\$ 4.93	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	259	\$ 189.27	\$ 4.08
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 8.08</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 7.36</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.79
Underwriting Gain	1.50%	\$ 0.12
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 8.27</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 8.27</b>
Premium Based Taxes	2.25%	\$ 0.19
<b>Final Capitation PMPM</b>		<b>\$ 8.46</b>



### Expansion, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	24,352
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	7,305

OKC Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	935	\$ 24.09	\$ 1.88	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,098	\$ 23.19	\$ 2.12
Basic	298	\$ 99.49	\$ 2.47	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	279	\$ 103.22	\$ 2.40
Major	504	\$ 161.81	\$ 6.79	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	402	\$ 167.88	\$ 5.63
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 11.14</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 10.15</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.08
Underwriting Gain	1.50%	\$ 0.17
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 11.40</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 11.40</b>
Premium Based Taxes	2.25%	\$ 0.26
<b>Final Capitation PMPM</b>		<b>\$ 11.66</b>

### Expansion, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	27,154
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	8,409

TULSA Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	889	\$ 23.38	\$ 1.73	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	1,044	\$ 22.50	\$ 1.96
Basic	283	\$ 96.54	\$ 2.28	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	265	\$ 100.17	\$ 2.22
Major	479	\$ 157.02	\$ 6.27	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	382	\$ 162.91	\$ 5.19
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 10.28</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 9.36</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 1.00
Underwriting Gain	1.50%	\$ 0.16
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 10.52</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 10.52</b>
Premium Based Taxes	2.25%	\$ 0.24
<b>Final Capitation PMPM</b>		<b>\$ 10.76</b>

### Expansion, All Ages, Adult Male and Female, Non-TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	81,323
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	24,314

WEST Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	750	\$ 24.74	\$ 1.55	0.00%	2.50%	0.00%	-0.75%	11.25%	-3.75%	881	\$ 23.81	\$ 1.75
Basic	239	\$ 102.16	\$ 2.04	0.00%	2.50%	0.00%	-0.75%	-11.25%	3.75%	224	\$ 105.99	\$ 1.98
Major	404	\$ 166.16	\$ 5.60	0.00%	1.50%	0.00%	-0.75%	-22.50%	3.75%	323	\$ 172.39	\$ 4.64
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-0.75%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 9.18</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-0.75%</b>					<b>\$ 8.36</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.89
Underwriting Gain	1.50%	\$ 0.14
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 9.40</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 9.40</b>
Premium Based Taxes	2.25%	\$ 0.22
<b>Final Capitation PMPM</b>		<b>\$ 9.61</b>

### Expansion, All Ages, Adult Male and Female, TPL, Non-Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	75,679
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	95,949

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	25	\$ 25.25	\$ 0.05	-24.32%	2.50%	0.00%	-2.20%	11.25%	-3.75%	28	\$ 18.39	\$ 0.04
Basic	8	\$ 104.27	\$ 0.07	-18.47%	2.50%	0.00%	-2.20%	-11.25%	3.75%	7	\$ 88.20	\$ 0.05
Major	13	\$ 169.59	\$ 0.19	-4.51%	1.50%	0.00%	-2.20%	-22.50%	3.75%	10	\$ 168.01	\$ 0.15
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-2.20%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 0.31</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 0.24</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.03
Underwriting Gain	1.50%	\$ 0.00
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 0.27</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 0.27</b>
Premium Based Taxes	2.25%	\$ 0.01
<b>Final Capitation PMPM</b>		<b>\$ 0.28</b>

## Expansion, All Ages, Adult Male and Female, TPL, Voluntary

<b>Annualized Base Period:</b>	September 1, 2021 to December 31, 2021
<b>Annualized Base Member Months:</b>	11,891
<b>Trend Months (No Seasonality):</b>	30

<b>Contract Period:</b>	October 1, 2023 to June 30, 2024
<b>Projected Member Months:</b>	3,701

STATEWIDE Category of Service	Annualized CY2021 Experience			Copay Adj. PMPM %	Annual Trend		Seasonality PMPM %	Managed Care Savings		Projected Dental Expenses		
	Util/1,000	Unit Cost	PMPM		Util/1000 %	Unit Cost %		Util/1,000	Unit Cost	Util/1,000	Unit Cost	PMPM
Diagnostic/Preventive	13	\$ 24.06	\$ 0.03	0.00%	2.50%	0.00%	-2.20%	11.25%	-3.75%	15	\$ 23.15	\$ 0.03
Basic	4	\$ 99.35	\$ 0.03	0.00%	2.50%	0.00%	-2.20%	-11.25%	3.75%	4	\$ 103.08	\$ 0.03
Major	7	\$ 161.59	\$ 0.09	0.00%	1.50%	0.00%	-2.20%	-22.50%	3.75%	5	\$ 167.65	\$ 0.07
Orthodontics/Other	-	\$ -	\$ -	0.00%	1.50%	0.00%	-2.20%	-37.50%	7.50%	-	\$ -	\$ -
<b>Gross Benefit Total</b>			<b>\$ 0.15</b>		<b>1.89%</b>	<b>0.00%</b>	<b>-2.20%</b>					<b>\$ 0.13</b>

Notes:
1. Totals may differ due to rounding.
2. Annualized CY2021 experience is based on actual September 1, 2021 to December 31, 2021 experience that is annualized using child to adult utilization patterns.
3. All PMPM values contained on this capitation rate calculation sheet are based on an annualized CY2021 basis member months.

Rate Calculation Summary		
Non-Benefit Expenses	%	PMPM
Administrative Expenses	9.50%	\$ 0.01
Underwriting Gain	1.50%	\$ 0.00
<b>Total Benefit and Non-Benefit PMPM</b>		<b>\$ 0.15</b>

Premium Tax	%	PMPM
<b>Subtotal Prior to Premium Tax</b>		<b>\$ 0.15</b>
Premium Based Taxes	2.25%	\$ 0.00
<b>Final Capitation PMPM</b>		<b>\$ 0.15</b>