



Table of Contents

Table of Contents	1
Independent Accountant's Report	2
Adjusted Medical Loss Ratio for the Calendar Year Ended December 31, 2021 Paid Through April 30, 2022	4
Schedule of Adjustments and Comments for the Calendar Year Ended December 31, 2021	8
Annendix A: Health Plan Responses	11



State of Louisiana Louisiana Department of Health Baton Rouge, Louisiana

Independent Accountant's Report

We have examined the accompanying Adjusted Medical Loss Ratio of Healthy Blue of Louisiana for the calendar year ended December 31, 2021. Healthy Blue of Louisiana's management is responsible for presenting the Medical Loss Ratio (MLR) Reporting in accordance with the criteria set forth in Healthy Louisiana's MLR Reporting Guide, the Code of Federal Regulations (CFR) 42 § 438.8, and other applicable federal guidance (criteria). This criteria was used to prepare the Adjusted Medical Loss Ratio. Our responsibility is to express an opinion on the Adjusted Medical Loss Ratio based on our examination.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. Those standards require that we plan and perform the examination to obtain reasonable assurance about whether the Adjusted Medical Loss Ratio is in accordance with the criteria, in all material respects. An examination involves performing procedures to obtain evidence about the Adjusted Medical Loss Ratio. The nature, timing, and extent of the procedures selected depend on our judgment, including an assessment of the risk of material misstatement of the Adjusted Medical Loss Ratio, whether due to fraud or error. We believe that the evidence we obtained is sufficient and appropriate to provide a reasonable basis for our opinion.

We are required to be independent and to meet our other ethical responsibilities in accordance with relevant ethical requirements related to our engagement.

The accompanying Adjusted Medical Loss Ratio was prepared for the purpose of complying with the criteria, and is not intended to be a complete presentation in conformity with accounting principles generally accepted in the United States of America.

The Other Non-Claims Costs amount reported on the Adjusted Medical Loss Ratio Rebate Calculation has not been subjected to the procedures applied in the examination. In accordance with CFR 42 § 438.8, reporting of the Other Non-Claims Costs is required. Any adjustments to the Other Non-Claims Costs were determined without testing as the procedure was outside of the scope of our examination, and accordingly, we express no opinion on it.

In our opinion, the above referenced accompanying Adjusted Medical Loss Ratio is presented in accordance with the above referenced criteria, in all material respects, and the Adjusted Medical Loss Ratio exceeds the



Centers for Medicare & Medicaid Services (CMS) requirement of eighty-five percent (85%) for the Expansion and Non-Expansion population for the calendar year ended December 31, 2021.

This report is intended solely for the information and use of the Louisiana Department of Health, Milliman, and Healthy Blue of Louisiana and is not intended to be and should not be used by anyone other than these specified parties.

Myers and Stauffer LC Atlanta, GA March 27, 2023

	Adjusted Medical Loss Ratio for the Calendar Year Ending Decen Expansion	nber	31, 2021 Paid Th	rou	gh April 30, 2022		
Line #	Line Description		Reported Amounts		Adjustment Amounts		Adjusted Amounts
Expenses							
1	Total Incurred Claims	\$	949,135,869	Ś		\$	949,135,869
	Adjustments to Incurred Claims		,,	Ė		Ė	,,
2	Deductions:						
2a	Prescription drug rebates	\$	640,374	\$	-	\$	640,374
2b	Prompt pay discounts	\$	-	\$	-	\$	-
2с	Overpayment recoveries received from providers	\$	-	\$	-	\$	-
3	Inclusions:			Ė		Ė	
3a	Incentive and bonus payments made to providers	\$	2,160,331	\$	45,480,746	\$	47,641,077
3b	Fraud reduction expenses	\$	-	\$	-	\$	-
4	Optional Inclusion: Value-Added Services	\$	9,544,850	\$	-	\$	9,544,850
5	Exclusions:	-		Ė		•	-,- ,
5a	Non-Claims Costs	\$	-	\$	-	\$	-
5b	Prior year MLR rebates paid to LDH	\$	-	\$	-	\$	-
5c	Payments to delegated vendors exceeding amount paid to providers	\$		\$		\$	
5d	Spread pricing amounts paid to PBM	\$		\$	-	\$	
5e	Reinsurance premiums exceeding reinsurance recoveries	\$		\$		\$	
6	Other: Incurred claims assumed	_		Ť		·	
7	Adjusted Incurred Claims	\$	960,200,676	Ś	45,480,746	Ś	1,005,681,422
	Health Care Quality Improvement (HCQI) Expenses	Ť	300,200,070	Ť	15, 150,1 15	Ť	2,000,002,122
8	HCQI administrative expenses	\$	11,523,560	\$	(4,210,066)	Ġ	7,313,494
9	Exclusions to HCQI	\$	640,546	\$	(4,210,000)	\$	640,546
	Health Information Technology (HIT) Expenses	Ť	040,540	Ť		_	040,540
10	HIT administrative expenses	\$	2,197,724	\$	(760,645)	¢	1,437,079
11	Exclusions to HIT expenses	\$	2,137,724	\$	(700,043)	\$	1,437,075
12	External Quality Review (EQR) related expenses	\$		\$		\$	
13	Adjusted Incurred Claims and Adjusted HCOI, HIT and EQR Expenses	\$	973,281,414	\$	40,510,035	_	1,013,791,449
14	Less: Adjustment for 50% or more of Medical expenses attributed to new enrollees	\$	373,201,414	\$	40,310,033	\$	1,013,731,443
14	Add: Prior Year New Enrollee Medical Expenditures deferred to current year from line 34	۶		٦		٦	
15	below	\$	-	\$	-	\$	-
16	Total Adjusted MLR Numerator	\$	973,281,414	\$	40,510,035	\$	1,013,791,449
	Non-Claims Cost (For reporting purposes only, not included in Numerator)						
17	Non-Claims Cost (Excluding amounts reported on lines 18 and 19)	\$	43,583,417	\$	4,970,711	\$	48,554,128
18	Program Integrity Activities [42 CFR §438.608(a)(1) through (5), (7), (8) and (b)]. [Must reconcile to the detail amounts on the Program Integrity Cost tab)	\$	2,238,746	\$	-	\$	2,238,746
19	Adjustments to Non-Claims Cost including amounts removed in the line 5 exclusions. (Excluding any related party profit)	\$	-	\$	-	\$	-
20	Total Adjusted Non-Claim Cost	\$	45,822,163	\$	4,970,711	\$	50,792,874
Revenues							
21	Healthy Louisiana Premium Revenue	\$	1,122,621,610	\$	27,538,738	\$	1,150,160,348
	Revenue Adjustments						
22	Less: Premium tax component of reported revenue	\$	62,042,777	\$	(1,357,663)	\$	60,685,114
23	Less: Other taxes and licensing and regulatory fees	\$	-	\$	-	\$	-
24	Net Annual MLR Revenue	\$	1,060,578,833	\$	28,896,401	\$	1,089,475,234
25	Less: Adjustment for 50% or more of TOTAL capitation attributed to new enrollees (net of premium tax component)	\$	-	\$	-	\$	-
26	Add: Adjustment for 50% or more of TOTAL capitation attributed to new enrollees (net of premium tax component) deferred from prior year from line 29 below	\$	-	\$	-	\$	-
27	Total Adjusted MLR Denominator	\$	1,060,578,833	Ś	28,896,401	Ś	1,089,475,234

	Adjusted Medical Loss Ratio for the Calendar Year Ending December 31, 2021 Paid Through April 30, 2022					
Expansion						
Line#	Line Description	Reported	Adjustment	Adjusted		
Lille #	Line Description	Amounts	Amounts	Amounts		
MLR Calcu	lation					
28	MLR Percentage Achieved	91.8%	1.3%	93.1%		
29	MLR Percentage Requirement for Rebate Calculation	85.0%	85.0%	85.0%		
30	Percentage Below 85% Requirement	0.0%	0.0%	0.0%		
31	Dollar Amount of Rebate Requirement	\$ -	\$ -	\$ -		

Reconciliation of Prior Year New Enrollee Capitation Exclusion			
32	Prior year new enrollee capitation adjustment exclusion (net of premium tax)	\$	-
33	Less: Prior year incurred claims for excluded New Enrollees	\$	-
34	Total Net Adjustment for New Enrollees from prior years	\$	-

35	MLR Member Months	1,702,967	

Credibility Adjustment Applied				
36	MLR Percentage Achieved	0.0%		
37	Credibility Adjustment	0.0%		
38	Adjusted MLR Percentage Achieved	0.0%		
39	MLR Percentage Requirement for Rebate Calculation	85.0%		
40	Percentage Below 85% Requirement	85.0%		
41	Dollar Amount of Rebate Requirement	\$ -		

	Non-Expansion						
Line #	Line Description		Reported Amounts		Adjustment Amounts		Adjusted Amounts
Expenses							
1	Total Incurred Claims	\$	915,681,041	\$	-	\$	915,681,04
	Adjustments to Incurred Claims		, ,.	Ė			, , .
2	Deductions:						
2a	Prescription drug rebates	\$	753,526	\$	-	\$	753,52
2b	Prompt pay discounts	\$	-	\$	-	\$	-
2c	Overpayment recoveries received from providers	Ś	-	\$	-	\$	
3	Inclusions:						
3a	Incentive and bonus payments made to providers	\$	31,318,475	\$	19,009,088	\$	50,327,56
3b	Fraud reduction expenses	\$	-	\$	-	\$	-
4	Optional Inclusion: Value-Added Services	\$	3,976,905	\$	-	\$	3,976,90
5	Exclusions:	, ,	3,370,303	,		<u> </u>	3,370,30
5a	Non-Claims Costs	\$		\$		\$	
5b	Prior year MLR rebates paid to LDH	\$		\$		\$	
5c	Payments to delegated vendors exceeding amount paid to providers	\$	-	\$	_	\$	
5d	Spread pricing amounts paid to PBM	\$	-	\$		\$	
5e	Reinsurance premiums exceeding reinsurance recoveries	\$		\$	_	\$	
6	Other: Incurred claims assumed	Y		Y		٦	_
7	Adjusted Incurred Claims	\$	950,222,895	ć	19,009,088	\$	969,231,98
	Health Care Quality Improvement (HCQI) Expenses	Ÿ	330,222,033	7	13,003,000	,	303,231,30
8		\$	9,908,534	\$	(3,620,025)	ć	6 388 50
9	HCQI administrative expenses	\$		_	(3,620,025)		6,288,50
9	Exclusions to HCQI	\$	550,773	Þ	-	\$	550,77
40	Health Information Technology (HIT) Expenses				(0= 1 0 11)		
10	HIT administrative expenses	\$	1,889,713	-	(654,041)		1,235,67
11	Exclusions to HIT expenses	\$	-	\$	-	\$	
12	External Quality Review (EQR) related expenses	\$	-	\$		\$	-
13	Adjusted Incurred Claims and Adjusted HCQI, HIT and EQR Expenses	\$	961,470,369	\$	14,735,022	_	976,205,39
14	Less: Adjustment for 50% or more of Medical expenses attributed to new enrollees	\$	-	\$	-	\$	-
15	Add: Prior Year New Enrollee Medical Expenditures deferred to current year from line 34 below	\$	-	\$	-	\$	-
16	Total Adjusted MLR Numerator	\$	961,470,369	\$	14,735,022	\$	976,205,39
	Non-Claims Cost (For reporting purposes only, not included in Numerator)						
17	Non-Claims Cost (Excluding amounts reported on lines 18 and 19)	\$	37,475,203	\$	4,274,066	\$	41,749,26
18	Program Integrity Activities [42 CFR §438.608(a)(1) through (5), (7), (8) and (b)]. (Must reconcile to the detail amounts on the Program Integrity Cost tab)	\$	1,924,986	\$	-	\$	1,924,98
19	Adjustments to Non-Claims Cost including amounts removed in the line 5 exclusions. (Excluding any related party profit)	\$	-	\$	-	\$	-
20	Total Adjusted Non-Claim Cost	\$	39,400,188	\$	4,274,066	\$	43,674,25
Revenues	· · · · ·						
21	Healthy Louisiana Premium Revenue	\$	1,001,082,681	\$	54,322,464	\$	1,055,405,14
	Revenue Adjustments						
22	Less: Premium tax component of reported revenue	\$	55,234,770	Ś	245,006	Ś	55,479,77
23	Less: Other taxes and licensing and regulatory fees	\$	-		.,	\$	-
24	Net Annual MLR Revenue	\$	945,847,912	\$	54,077,458		999,925,370
25	Less: Adjustment for 50% or more of TOTAL capitation attributed to new enrollees (net of premium tax component)		-	\$	-	\$	-
26	Add: Adjustment for 50% or more of TOTAL capitation attributed to new enrollees (net of premium tax component) deferred from prior year from line 29 below	\$	<u> </u>	\$	-	\$	
27	Total Adjusted MLR Denominator	\$	945,847,912	\$	54,077,458	Ś	999,925,37

	Adjusted Medical Loss Ratio for the Calendar Year Ending December 31, 2021 Paid Through April 30, 2022 Non-Expansion						
Line #	Line Description	Amounts	Amounts	Adjusted Amounts			
MLR Calcu	ılation						
28	MLR Percentage Achieved	101.7%	-4.1%	97.6%			
29	MLR Percentage Requirement for Rebate Calculation	85.0%	85.0%	85.0%			
30	Percentage Below 85% Requirement	0.0%	0.0%	0.0%			
31	Dollar Amount of Rebate Requirement	\$ -	\$ -	\$ -			

Reconciliation of Prior Year New Enrollee Capitation Exclusion				
32	Prior year new enrollee capitation adjustment exclusion (net of premium tax)	\$	-	
33	Less: Prior year incurred claims for excluded New Enrollees	\$	-	
34	Total Net Adjustment for New Enrollees from prior years	\$	-	

1	35	MLR Member Months	2,444,571	

Credibility Adjustment Applied				
36	MLR Percentage Achieved		0.0%	
37	Credibility Adjustment		0.0%	
38	Adjusted MLR Percentage Achieved		0.0%	
39	MLR Percentage Requirement for Rebate Calculation	8	85.0%	
40	Percentage Below 85% Requirement		0.0%	
41	Dollar Amount of Rebate Requirement	\$	-	

Schedule of Adjustments and Comments for the Calendar Year Ending December 31, 2021

During our examination we noted certain matters involving costs, that in our determination did not meet the definitions of allowable medical expenses and other operational matters that are presented for your consideration.

Adjustment #1 – To adjust MCIP revenue and expense to the verified amount.

Healthy Blue of Louisiana did not report all MCIP payments in 2021, nor did they allocate the as-filed MCIP expense to the Expansion population. This adjustment is to properly allocate the as-filed MCIP expense and account for additional MCIP revenue and expense supported by the state's data. The MLR denominator and numerator reporting requirements are addressed in Healthy Louisiana's MLR Reporting Guide and Medicaid Managed Care Final Rule 42 CFR § 438.8(f) and 438.8(e).

	Proposed Adjustment - Expansion	
Line #	Line Description	Amount
3a	Incentive and bonus payments made to providers	\$45,480,746
21	Healthy Louisiana Premium Revenue	\$32,213,943

Proposed Adjustment – Non-Expansion		
Line #	Line Description	Amount
3a	Incentive and bonus payments made to providers	\$19,009,088
21	Healthy Louisiana Premium Revenue	\$34,270,422

Adjustment #2 – To adjust premium revenue to the verified amount.

Healthy Blue of Louisiana reported premium revenue of \$1,113,377,075 for the Expansion population and \$991,651,596 for the Non-Expansion population. The state's capitation data supported premium revenue of \$1,108,701,870 for the Expansion population and \$1,011,703,638 for the Non-Expansion population. The variance between the reported amounts and the state's data was an adjustment to line 21 as shown below. The MLR denominator reporting requirements are addressed in Healthy Louisiana's MLR Reporting Guide and the Medicaid Managed Care Final Rule 42 CFR § 438.8(f).

Proposed Adjustment - Expansion		
Line #	Line Description	Amount
21	Healthy Louisiana Premium Revenue	(\$4,675,205)

Proposed Adjustment – Non-Expansion		
Line #	Line Description	Amount
21	Healthy Louisiana Premium Revenue	\$20,052,042

Adjustment #3 – To adjust premium taxes to the verified amount.

Healthy Blue of Louisiana reported premium taxes of \$62,042,777 for the Expansion population and \$55,234,770 for the Non-Expansion population. The state's revenue data supported premium taxes of \$60,685,114 for the Expansion population and \$44,479,776 for the Non-Expansion population. The variance between the reported amounts and the state's data was an adjustment to line 22 as shown below. The MLR denominator reporting requirements are addressed in Healthy Louisiana's MLR Reporting Guide and the Medicaid Managed Care Final Rule 42 CFR § 438.8(f).

Proposed Adjustment - Expansion		
Line #	Line Description	Amount
22	Premium tax component of reported revenue	(\$1,357,663)

Proposed Adjustment – Non-Expansion		
Line #	Line Description	Amount
22	Premium tax component of reported revenue	\$245,006

Adjustment #4 – To adjust Health Care Quality Improvement (HCQI) and Exclusions to HCQI and Health Information Technology (HIT) expenses to the verified amount.

Healthy Blue of Louisiana reported HCQI of \$11,523,560 for the Expansion population and \$9,908,534 for the Non-Expansion population. MSLC identified salaries and benefits, indirect overhead and vendor expenses of \$4,210,066 for the Expansion population and \$3,620,025 for the Non-Expansion population that do not meet the criteria for HCQI as defined in 42 CFR § 158.150.

Healthy Blue of Louisiana reported HIT of \$2,197,724 for the Expansion population and \$1,889,713 for the Non-Expansion population. MSLC identified salaries and benefits, indirect overhead and vendor expenses of \$760,645 for the Expansion population and \$654,041 for the Non-Expansion population that do not meet the criteria for HIT as defined in 42 CFR § 158.151.

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The non-allowable HCQI and HIT expenses were reclassified from the numerator to non-claims as shown below. The MLR numerator reporting requirements are addressed in Healthy Louisiana's MLR Reporting Guide and Medicaid Managed Care Final Rule 42 CFR § 438.8(e).

Proposed Adjustment - Expansion		
Line #	Line Description	Amount
8	HCQI administrative expenses	(\$4,210,066)
10	HIT administrative expenses	(\$760,645)
17	Non-Claims Cost (Excluding amounts reported on lines 18 and 19)	\$4,970,771

Proposed Adjustment – Non-Expansion		
Line #	Line Description	Amount
8	HCQI administrative expenses	(\$3,620,025)
10	HIT administrative expenses	(\$654,041)
17	Non-Claims Cost (Excluding amounts reported on lines 18 and 19)	\$4,274,066



Myers and Stauffer LC 1349 W Peachtree Street NE, Suite 1600 Atlanta, GA 30309

We are providing this letter in connection with your examination of Healthy Blue of Louisiana's Medical Loss Ratio (MLR) Report for the calendar year ending December 31, 2021.

In response to adjustment #4 HCQI exclusions, Healthy blue does not agree with the determination of the exclusion of salaries based on the requirement that the positions be directed toward members.

We've provided documentation including an attestation from our quality director that for a sample of the positions excluded in the report were in fact directed toward members. Based on these discussions, we feel we've appropriately included salaries as allowable QI in the MLR report.

Sincerely,

Clayborne Harris Healthy Blue LA CFO

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