



A UnitedHealth Group Company

# AmeriChoice

July 15, 2009

## STATEMENT OF ACTUARIAL OPINION

Statutory Quarterly Statement of United Healthcare Plan of the River Valley, Inc.  
Medicaid Risk Business in Eastern Tennessee  
As of and for the Period Ended June 30, 2009

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid risk business in Eastern Tennessee, which had approximately 175,000 members in June 2009. This business became effective January 1, 2009.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of June 30, 2009.

I have determined that the appropriate level for claims liability for this block of business is \$53,123,500.

Note that in the annual statement, both Medicaid and non-Medicaid business is combined.

I have relied upon information supplied by responsible officers of employees of United Healthcare Plan of the River Valley, Inc. as to the accuracy and completeness of listings and summaries of policies and contracts in force and other information underlying the loss reserves. A data reliance letter is enclosed. In other respects, my examination included such review of the actuarial assumptions and actuarial methods and such test of actuarial calculations as I considered necessary in the circumstances. My examination considered the need for cash flow testing, but none was performed because such tests were determined to be unnecessary. The cash flows associated with United Healthcare Plan of the River Valley, Inc.'s products and investments are believed to be relatively insensitive to influences such as changes in economic conditions.

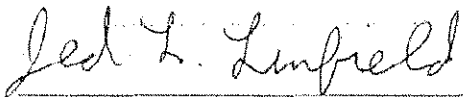
In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

- a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;
- b) Are based on actuarial assumptions which are in accordance with or stronger than those called for in related contract provisions and are appropriate for the purpose for which the statement was prepared;
- c) Meet the requirements of the laws of the State of Tennessee;
- d) Make good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization guaranteed under the terms of its contracts and agreements;
- e) Are computed on the basis of actuarial assumptions and methods consistent in all material respects with those used in computing the corresponding items in the annual statement of the preceding year-end; and
- f) Include provision, in the aggregate, for all actuarial reserves and related statement items which ought to be established.

The actuarial methods, considerations and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time to time by the Actuarial Standards Board, whose standards form the basis of this statement of opinion.

This statement has been prepared for inclusion with United Healthcare Plan of the River Valley, Inc.'s statutory quarterly statement for filing with regulatory authorities of the State of Tennessee and is intended for no other purpose.

July 15, 2009



Jed L. Linfield  
Fellow, Society of Actuaries  
Member, American Academy of Actuaries  
AmeriChoice of New Jersey  
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A UnitedHealth Group Company

# AmeriChoice

July 15, 2009

I, Christopher R. Otley, am employed by AmeriChoice as Senior Director, Medical Economics, Corporate Finance. I hereby affirm that the listings, summaries, and analyses relating to data for Medicaid business, prepared for and submitted to Jed L. Linfield, FSA, MAAA in support of his actuarial opinion for United Healthcare Plan of the River Valley, Inc.'s Medicaid risk business in Eastern Tennessee, as of June 30, 2009, were prepared under my direction and, to the best of my knowledge and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the quarterly statement for the quarter ended June 30, 2009.

Christopher R. Otley  
Senior Director  
Medical Economics, Corporate Finance  
(571) 262-8945

Medical Loss Ratio Report - Total  
Grand Region - East

MCO

AmeriChoice	2009							For the Year Ended 6/30/2009
	Reporting Month	Incurred Month						
	Jun-09	January	February	March	April	May	June	
Enrollment		171,082	167,455	168,235	169,474	169,625	174,538	1,020,409
Capitation Revenue		\$35,921,746	\$34,817,038	\$34,681,606	\$34,642,574	\$34,338,750	\$35,319,599	\$209,721,312
<b>Payments for Covered Services for the Month</b>								
<b>Medical Services</b>								
CMS 1450/UB 92 Payments by the Claims Processing System								
Inpatient - Maternity		800,959	614,769	680,537	671,286	513,536	12,797	\$3,293,883
Inpatient - Newborn		379,967	351,798	345,416	345,457	186,120	4,582	\$1,613,340
Inpatient - Medical		2,601,327	1,539,024	1,469,615	911,609	763,549	13,161	\$7,298,285
Inpatient - Surgery		3,719,676	\$2,638,709	\$2,597,604	\$2,200,862	\$1,176,924	\$7,284	\$12,341,060
Inpatient Other		135,235	148,914	77,989	99,484	45,988	-	\$507,610
Outpatient - Emergency Room		3,584,893	3,516,716	3,962,038	3,318,868	3,218,778	241,504	\$17,842,797
Outpatient - Laboratory		234,833	206,691	255,539	214,166	163,275	58,508	\$1,133,011
Outpatient - Radiology		1,291,840	1,248,272	1,365,365	1,393,244	1,056,563	251,130	\$6,606,414
Outpatient - Surgery		2,094,359	1,830,077	2,015,891	2,236,197	1,606,970	161,799	\$9,945,293
Outpatient - Other		-	-	-	-	-	-	-
CMS 1500 Payments by the Claims Processing System								
Prof - E&M		3,901,048	3,958,676	4,314,743	4,039,680	3,532,742	1,445,354	\$21,192,242
Prof - Maternity		387,163	302,396	368,057	381,118	304,246	143,017	\$1,885,995
Prof - Surgery		982,648	975,520	1,075,155	1,193,265	968,302	365,131	\$5,560,020
Prof - DME		507,250	467,188	542,924	547,031	374,949	159,554	\$2,598,896
Prof - Lab		636,135	609,535	691,967	668,372	542,137	244,780	\$3,392,926
Prof - Radiology		648,779	653,720	735,608	730,592	639,718	341,136	\$3,749,553
Prof - Transportation		981,083	854,483	830,853	631,395	413,533	17,994	\$3,729,341
Prof - Other		4,710,581	4,025,597	4,365,009	4,276,810	3,353,078	886,164	\$21,617,239
Capitation Payments		89,722	88,463	94,631	89,912	90,321	104,396	\$557,445
Subcontractor Payments for Medical Services		-	-	-	-	-	-	-
Other Medical (Vision)		45,630	58,603	81,625	90,971	70,103	88,529	\$435,461
<b>Behavioral Health</b>								
Inpatient Payments by the Claims Processing System		1,418,236	1,203,778	1,187,008	1,121,901	1,001,553	67,084	\$5,999,560
Outpatient Payments by the Claims Processing System		977,966	1,035,677	1,104,086	1,114,315	814,281	225,257	\$5,271,584
Supported Housing Payments by the Claims Processing System		354,801	322,045	389,124	364,219	298,650	34,916	\$1,763,755
Intensive Outpatient Payments by the Claims Processing System		57,530	58,835	68,570	56,875	41,025	6,110	\$288,945
Partial Hospitalization Payments by the Claims Processing System		14,989	17,859	13,413	8,596	14,184	570	\$69,611
In Home Payments by the Claims Processing System		-	-	-	-	-	-	-
Transportation Payments by the Claims Processing System		307	-	-	560	11	25	\$903
Twenty-Three Hour Payments by the Claims Processing System		450	450	-	-	168	-	\$1,068
CMHA Capitation Payments		-	-	-	-	-	-	-
Other Capitation Payments		104,717	104,717	102,650	106,420	106,161	114,869	\$639,533
Grant Payments		-	-	-	-	10,112	2,510	\$12,623
Non-FFS Inpatient		-	-	-	-	-	-	-
Subcontractor Payments for Mental Health and Substance Abuse Services		-	162,540	150,990	150,990	196,140	165,060	\$825,720
Crisis Services Team Pass Through		172,979	172,752	172,866	166,043	161,307	174,821	\$1,041,362
Less:								
Recoveries not Reflected in Claims Payments								
<b>Total Payments</b>		30,835,100	\$27,167,805	\$29,059,273	\$27,130,236	\$21,685,017	\$5,338,042	\$141,215,474
<b>Remaining IBNR</b>		807,164	2,008,511	3,559,977	5,125,055	12,091,051	\$28,631,743	\$53,123,500
<b>Payments and Remaining IBNR</b>		31,642,264	29,176,316	32,619,250	\$32,255,291	\$34,676,068	\$33,969,785	\$194,338,974
<b>Medical Loss Ratio</b>		88.09%	83.80%	94.05%	93.11%	100.08%	95.18%	92.67%
<b>Per Member Expense</b>		\$184.95	\$174.23	\$193.89	\$190.33	\$204.43	\$194.63	\$190.45

Beginning February 2009, AmeriChoice membership and enrollment statistics are reported on an updated basis as reflected on the 820 payment file from January 2009 to current reporting month. Please note that MLR submissions prior to February 2009 reported revenue in the month of payment with all retroactivity in the current month.

\$2.5M in additional earned capitation revenue (referred to as "2009") has been added for current and prior periods and is expected for payment in July. This revenue is reflected in the MLR allocated by incurred date.

Medical Loss Ratio Report - Base Capitation Only  
Grand Region - East

MCO

Americhoice	2009						For the Year Ended 6/30/2009
	Incurred Month						
	January	February	March	April	May	June	
<b>Reporting Month</b> Jun-09							
<b>Enrollment</b>	171,082	167,455	168,235	169,474	169,625	174,538	1,020,409
<b>Capitation Revenue (For base capitation only)</b>	\$33,023,346	\$32,083,600	\$32,033,640	\$32,054,451	\$31,678,320	\$32,871,494	\$193,744,851
<b>Payments for Covered Services for the Month</b>							
<b>Medical Services</b>							
CMS 1450/UB 92 Payments by the Claims Processing System							
Inpatient - Maternity	800,959	614,769	680,537	671,286	513,536	12,797	\$3,293,883
Inpatient - Newborn	379,967	351,798	345,416	345,457	186,120	4,582	\$1,613,340
Inpatient - Medical	2,601,327	1,539,024	1,469,615	911,609	763,549	13,161	\$7,298,285
Inpatient - Surgery	3,719,676	2,638,709	2,597,604	2,200,862	1,176,924	7,284	\$12,341,060
Inpatient Other	135,235	148,914	77,989	99,484	45,988	-	\$507,610
Outpatient - Emergency Room	3,584,893	3,516,716	3,962,038	3,318,868	3,218,778	241,504	\$17,842,797
Outpatient - Laboratory	234,833	206,691	255,539	214,166	\$163,275	\$58,508	\$1,133,011
Outpatient - Radiology	1,291,840	\$1,248,272	\$1,365,365	\$1,393,244	\$1,056,563	\$251,130	\$6,606,414
Outpatient - Surgery	2,094,359	\$1,830,077	\$2,015,891	\$2,236,197	\$1,606,970	\$161,799	\$9,945,293
Outpatient - Other							
CMS 1500 Payments by the Claims Processing System							
Prof - E&M	3,901,048	\$3,958,676	\$4,314,743	\$4,039,680	\$3,532,742	\$1,445,354	\$21,192,242
Prof - Maternity	387,163	\$302,396	\$368,057	\$381,118	\$304,246	\$143,017	\$1,885,995
Prof - Surgery	982,648	\$975,520	\$1,075,155	\$1,193,265	\$968,302	\$365,131	\$5,560,020
Prof - DME	507,250	\$467,188	\$542,924	\$547,031	\$374,949	\$159,554	\$2,598,896
Prof - Lab	636,135	\$609,535	\$691,967	\$668,372	\$542,137	\$244,780	\$3,392,926
Prof - Radiology	648,779	\$653,720	\$735,608	\$730,592	\$639,718	\$341,136	\$3,749,553
Prof - Transportation	981,083	\$854,483	\$830,853	\$631,395	\$413,533	\$17,994	\$3,729,341
Prof - Other	4,710,581	\$4,025,597	\$4,365,009	\$4,276,810	\$3,353,078	\$886,164	\$21,617,239
Capitation Payments	\$89,722	\$88,463	\$94,631	\$89,912	\$90,321	104,396	\$557,445
Subcontractor Payments for Medical Services							
Other Medical (vision)	\$45,630	\$58,603	\$81,625	\$90,971	\$70,103	88,529	\$435,461
<b>Behavioral Health (Excluding payments on behalf of priority enrollees)</b>							
Inpatient Payments by the Claims Processing System	\$442,664	\$427,594	\$428,247	\$459,248	\$427,631	\$35,833	\$2,221,217
Outpatient Payments by the Claims Processing System	\$239,127	\$267,996	\$312,348	\$329,962	\$311,715	\$137,265	\$1,598,413
Supported Housing Payments by the Claims Processing System	\$37,565	\$25,360	\$25,808	\$25,034	\$31,962	\$1,102	\$146,831
Intensive Outpatient Payments by the Claims Processing System	\$30,490	\$38,400	\$41,345	\$40,665	\$23,820	\$5,505	\$180,225
Partial Hospitalization Payments by the Claims Processing System	\$8,089	\$13,839	\$7,105	\$7,696	\$8,960	\$570	\$46,259
In Home Payments by the Claims Processing System							
Transportation Payments by the Claims Processing System	\$307			\$6			\$313
Twenty-Three Hour Payments by the Claims Processing System		\$450			\$168		\$618
CMHA Capitation Payments							
Other Capitation Payments	\$27,540	\$27,540	\$26,997	\$27,989	\$27,920	\$30,210	\$168,197
Grant Payments					\$2,660	\$660	\$3,320
Non-FFS Inpatient							
Subcontractor Payments for Mental Health and Substance Abuse Services							
Crisis Services	\$40,558	\$15,434	\$45,404	\$43,669	\$47,840	\$45,978	\$273,270
<b>Less:</b>							
Recoveries not Reflected in Claims Payments							
<b>Total Payments:</b>	28,564,402	24,935,765	26,757,879	24,974,584	19,903,507	4,803,944	\$129,940,081
Remaining IBNR	657,990	1,721,455	2,968,473	4,374,494	11,842,500	26,648,935	\$65,163,636
<b>Payments and Remaining IBNR</b>	29,172,182	26,657,220	29,726,352	29,349,078	31,746,006	31,452,879	\$178,103,717
<b>Medical Loss Ratio</b>	88.3%	83.0%	86.6%	91.56%	100.21%	95.68%	95.63%
<b>Per Member Expense</b>	\$170.52	\$159.19	\$176.70	\$173.18	\$187.15	\$180.21	\$174.54

Notes: 1) Beginning February 2009, Americhoice membership and Capitation revenue are reported on a retroactive basis reflected on the 820 payment file from January 2009 to current reporting month. Please refer to the 820 payment file for the 2009 reported revenue for the month of payment with all retroactivity in the current month.

2) The 2009 revenue for the month of payment with all retroactivity in the current month has been accounted for in July. This revenue is reflected in the 820 payment file for the month of July.

Medical Loss Ratio Report - Priority Add-On Only  
Grand Region - East

MCO

AmeriChoice	Reporting Month						For the Year Ended 6/30/2009
	2009						
	January	February	March	April	May	June	
Enrollment (For Priority Enrollees Only)	12,659	11,938	11,557	11,280	10,946	10,693	69,073
Capitation Revenue (Priority add-on payment only)	2,898,400	2,733,438	2,647,966	2,588,123	2,660,430	2,448,105	\$15,976,461
<b>Payments for Covered Services for the Month</b>							
<b>Medical Services</b>							
CMS 1450/UB 92 Payments by the Claims Processing System							
Inpatient - Maternity							
Inpatient - Newborn							
Inpatient - Medical							
Inpatient - Surgery							
Inpatient Other							
Outpatient - Emergency Room							
Outpatient - Laboratory							
Outpatient - Radiology							
Outpatient - Surgery							
Outpatient - Other							
CMS 1500 Payments by the Claims Processing System							
Prof - E&M							
Prof - Maternity							
Prof - Surgery							
Prof - DME							
Prof - Lab							
Prof - Radiology							
Prof - Transportation							
Prof - Other							
Capitation Payments							
Subcontractor Payments for Medical Services							
Other Medical (Vision)							
<b>Behavioral Health (On behalf of Priority enrollees only)</b>							
Inpatient Payments by the Claims Processing System	\$975,572	\$776,184	\$758,761	\$662,653	\$573,922	\$31,251	\$3,778,343
Outpatient Payments by the Claims Processing System	\$738,839	\$767,681	\$791,738	\$784,354	\$502,566	\$87,992	\$3,673,171
Supported Housing Payments by the Claims Processing System	\$317,236	\$296,686	\$363,316	\$339,185	\$266,688	\$33,814	\$1,616,924
Intensive Outpatient Payments by the Claims Processing System	\$27,040	\$20,435	\$27,225	\$16,210	\$17,205	\$605	\$108,726
Partial Hospitalization Payments by the Claims Processing System	\$6,900	\$4,020	\$6,308	\$900	\$5,224		\$23,352
In Home Payments by the Claims Processing System							
Transportation Payments by the Claims Processing System				\$554	\$11	\$25	\$590
Twenty-Three Hour Payments by the Claims Processing System	\$450						\$450
CMHA Capitation Payments							
Other Capitation Payments	\$77,176	\$77,176	\$75,653	\$78,432	\$78,240	\$84,658	\$471,336
Special Payments					\$7,453	\$1,550	\$9,303
Non-EFS Inpatient							
Subcontractor Payments for Mental Health and Substance Abuse Services		\$162,540	\$150,990	\$150,990	\$196,140	\$165,060	\$825,720
Special Services/Trans Pass Through	\$127,785	\$127,318	\$127,402	\$122,374	\$134,963	\$125,803	\$767,654
Less:							
Recoveries not Reflected in Claims Payments							
<b>Total Payments</b>	<b>2,270,698</b>	<b>2,232,040</b>	<b>2,301,393</b>	<b>2,155,651</b>	<b>\$1,781,511</b>	<b>\$534,098</b>	<b>\$11,275,393</b>
<b>Remaining IBNR</b>	<b>\$199,384</b>	<b>\$287,056</b>	<b>\$591,504</b>	<b>\$750,361</b>	<b>\$1,148,551</b>	<b>\$1,982,808</b>	<b>\$4,959,864</b>
<b>Payments and Remaining IBNR</b>	<b>\$2,470,082</b>	<b>\$2,519,096</b>	<b>\$2,892,898</b>	<b>\$2,906,213</b>	<b>\$2,930,062</b>	<b>\$2,516,907</b>	<b>\$16,235,257</b>
<b>Medical Loss Ratio</b>	<b>165.22%</b>	<b>183.16%</b>	<b>109.25%</b>	<b>112.29%</b>	<b>110.13%</b>	<b>102.51%</b>	<b>101.62%</b>
<b>Per Member Expense</b>	<b>\$195.12</b>	<b>\$211.01</b>	<b>\$250.32</b>	<b>\$257.64</b>	<b>\$267.68</b>	<b>\$235.38</b>	<b>\$235.04</b>

Beginning February 2009, AmeriChoice membership and Capitation revenue are reported on a restated basis as reflected on the 870 payment file from January 2009 to current. Please note that MLR submissions prior to February 2009 reported revenue by the month of payment with all retroactivity in the next month's submission.

**Medical Loss Ratio Report - Priority Add-On Only**  
**Grand Region - East**

MCO

Americhoice							
<b>Reporting Month</b>	<b>2009</b>						<b>For the Year</b>
Jun-09	<b>Incurred Month</b>						<b>Ended</b>
	January	February	March	April	May	June	<b>6/30/2009</b>

2) \$2.5M in additional earned capitation revenue (related to 10,720 members) has been accrued for current and prior periods and is expected for payment in July. This revenue is reflected in the MLR allocated by incurred date.

Month CMS1450-UB92

Paid  
by the  
Claims  
System

	Total	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09	Jul-09	Aug-09	Sep-09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	
1,223,239	Jan-09	1,223,239																		
7,532,860	Feb-09	7,532,860	6,416,390	1,116,470																
11,458,380	Mar-09	11,458,380	3,536,031	7,177,016	745,334															
12,704,836	Apr-09	12,704,836	1,806,727	2,212,412	8,190,968	494,729														
15,273,184	May-09	15,273,184	868,179	1,079,320	3,067,830	9,069,712	1,188,142													
0	Jun-09	0																		
0	Jul-09	0																		
0	Aug-09	0																		
0	Sep-09	0																		
0	Oct-09	0																		
0	Nov-09	0																		
0	Dec-09	0																		
0	Jan-10	0																		
0	Feb-10	0																		
0	Mar-10	0																		
0	Apr-10	0																		
0	May-10	0																		
0	Jun-10	0																		
<b>Totals</b>		48,192,498	13,850,566	11,585,219	12,004,132	9,564,440	1,188,142	0	0	0	0	0	0	0	0	0	0	0	0	
FY 10		0																		
FY 09		48,192,498																		



Month CMS1500

Paid  
by the  
Claims  
System

	Total	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09	Jul-09	Aug-09	Sep-09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10
3,205,715	Jan-09	3,205,715	3,205,715																
9,152,631	Feb-09	9,152,631	5,831,064	3,321,567															
11,216,644	Mar-09	11,216,644	2,154,788	5,576,873	3,484,984														
12,105,513	Apr-09	12,105,513	937,838	1,780,041	6,433,918	2,953,717													
15,401,091	May-09	15,401,091	487,212	884,609	2,351,198	7,945,237	3,732,835												
0	Jun-09	0																	
0	Jul-09	0																	
0	Aug-09	0																	
0	Sep-09	0																	
0	Oct-09	0																	
0	Nov-09	0																	
0	Dec-09	0																	
0	Jan-10	0																	
0	Feb-10	0																	
0	Mar-10	0																	
0	Apr-10	0																	
0	May-10	0																	
0	Jun-10	0																	

Totals	51,081,593	12,616,616	11,563,090	12,270,100	10,898,954	3,732,835	0	0	0	0	0	0	0	0	0	0	0	0	0
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FY 10 0  
FY 09 51,081,593



# AmeriChoice

A UnitedHealth Group Company

July 15, 2009

## STATEMENT OF ACTUARIAL OPINION

Statutory Quarterly Statement of United Healthcare Plan of the River Valley, Inc.  
Medicaid non-Risk Business in Tennessee  
As of and for the Period Ended June 30, 2009

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid non-risk business in Tennessee, which had zero members effective January 1, 2009.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of June 30, 2009.

I have determined that the appropriate level for claims liability for this block of business is \$5,159,524.

Note that in the annual statement, both Medicaid and non-Medicaid business is combined.

I have relied upon information supplied by responsible officers of employees of United Healthcare Plan of the River Valley, Inc. as to the accuracy and completeness of listings and summaries of policies and contracts in force and other information underlying the loss reserves. A data reliance letter is enclosed. In other respects, my examination included such review of the actuarial assumptions and actuarial methods and such test of actuarial calculations as I considered necessary in the circumstances. My examination considered the need for cash flow testing, but none was performed because such tests were determined to be unnecessary. The cash flows associated with United Healthcare Plan of the River Valley, Inc.'s products and investments are believed to be relatively insensitive to influences such as changes in economic conditions.

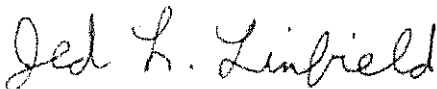
In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

- a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;
- b) Are based on actuarial assumptions which are in accordance with or stronger than those called for in related contract provisions and are appropriate for the purpose for which the statement was prepared;
- c) Meet the requirements of the laws of the State of Tennessee;
- d) Make good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization guaranteed under the terms of its contracts and agreements;
- e) Are computed on the basis of actuarial assumptions and methods consistent in all material respects with those used in computing the corresponding items in the annual statement of the preceding year-end; and
- f) Include provision, in the aggregate, for all actuarial reserves and related statement items which ought to be established.

The actuarial methods, considerations and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time to time by the Actuarial Standards Board, whose standards form the basis of this statement of opinion.

This statement has been prepared for inclusion with United Healthcare Plan of the River Valley, Inc.'s statutory quarterly statement for filing with regulatory authorities of the State of Tennessee and is intended for no other purpose.

July 15, 2009



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Jed L. Linfield  
Fellow, Society of Actuaries  
Member, American Academy of Actuaries  
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# AmeriChoice

A UnitedHealth Group Company

July 15, 2009

I, Christopher R. Otley, am employed by AmeriChoice as Senior Director, Medical Economics, Corporate Finance. I hereby affirm that the listings, summaries, and analyses relating to data for Medicaid business, prepared for and submitted to Jed L. Linfield, FSA, MAAA in support of his actuarial opinion for United Healthcare Plan of the River Valley, Inc.'s Medicaid non-risk business in Eastern Tennessee, as of June 30, 2009, were prepared under my direction and, to the best of my knowledge and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the quarterly statement for the quarter ended June 30, 2009. Note that this block of business had zero members as of January 1, 2009.



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Christopher R. Otley  
Senior Director  
Medical Economics, Corporate Finance  
(571) 262-8945





**Medical Services Budget Target Results**  
**CRA Reference: Section 3-10.j, 3-10.i.3(a) and**

MCO

Reporting Month	2005												Total
	Incurred Month												
	January	February	March	April	May	June	July	August	September	October	November	December	
June-09	87,839	88,481	88,735	89,512	90,111	90,065	90,379	86,793	83,765	85,715	82,547	82,595	1,046,537
<b>Enrollment</b>													
<b>Payments for Medical Services for the Month</b>													
UB 92 Payments by the Claims Processing System	9,475,846	8,381,275	9,567,491	9,204,719	8,575,629	9,037,912	8,574,552	8,674,854	7,422,510	7,059,124	7,339,458	7,755,922	101,069,292
HCFA1500 Payments by the Claims Processing System	6,127,474	5,915,208	6,477,374	6,012,443	6,125,111	6,165,166	5,791,009	5,735,124	5,093,946	4,977,538	4,951,413	4,733,082	68,104,888
Dental Payments by the Claims Processing System	0	0	0	0	0	0	0	0	0	0	0	0	0
Capitation Payments	143,184	147,497	145,343	148,508	148,702	150,040	150,287	149,483	137,270	204,550	134,591	203,593	1,863,048
Pharmacy Payments	81	196	165	162	0	4	1,613	0					2,220
Subcontractor Payments for Medical Services	33,567	32,847	39,947	29,438	24,682	11,034	23,981	15,976	22,336	58,777	19,575	45,287	357,447
Reinsurance Payment													0
Other Payments/Adjustments to Medical Costs													0
Less:													0
BHO Capitation Revenue													0
Pharmacy Rebates													0
Recoveries not Claims Payments													0
Total Payments for the month	15,780,152	14,477,023	16,230,320	15,395,270	14,874,124	15,364,154	14,541,442	14,575,437	12,676,062	12,299,989	12,445,037	12,737,884	171,396,894
Remaining IBNR for the month	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Payments and Remaining IBNR for the month</b>	15,780,152	14,477,023	16,230,320	15,395,270	14,874,124	15,364,154	14,541,442	14,575,437	12,676,062	12,299,989	12,445,037	12,737,884	171,396,894
Per Member Expense	179.65	163.62	182.91	171.99	165.06	170.59	160.89	167.93	151.33	143.50	150.76	154.22	163.78
Per Member Month Exp. For Quarter			175.39			169.21			160.16			149.42	
Per Member Month Exp. For Quarter in Prior Year			159.28			152.43			166.39			161.05	
Per Member Month Exp. For Two Years Prior			172.63			176.01			130.84			142.69	
Percent Change			-8%			-13%			27%			13%	
Medical Services Budget for Current Year Quarter			146.96			132.00			211.60			181.78	
(Over)/Under Budget			(28.43)			(37.21)			51.44			32.36	

**Medical Services Budget Target Results**  
**CRA Reference: Section 3-10.j, 3-10.i.3(a) and**

MCO													
AmeriChoice													
Reporting Month													
June-09													
2006													
Incurred Month													
	January	February	March	April	May	June	July	August	September	October	November	December	Total
Enrollment	82,185	79,622	79,462	79,628	79,331	79,301	81,518	80,959	80,502	80,595	80,668	81,167	964,938
<b>Payments for Medical Services for the Month</b>													
UB 92 Payments by the Claims Processing System	8,405,957	7,256,518	8,345,964	6,909,778	7,874,902	7,370,482	8,067,025	7,505,818	8,464,711	8,190,252	8,105,776	8,515,752	95,012,934
HCFA1500 Payments by the Claims Processing System	5,185,085	4,794,490	5,457,224	4,580,305	5,288,432	4,756,040	4,502,790	5,056,588	4,970,082	5,982,876	5,175,990	4,935,436	60,685,338
Dental Payments by the Claims Processing System	0	0	0	0	0	0	0	0	0	0	0	0	0
Capitation Payments	172,190	113,977	131,589	131,865	128,399	149,530	132,928	151,262	136,051	139,469	138,434	137,925	1,663,620
Pharmacy Payments													0
Subcontractor Payments for Medical Services	45,287	24,746	31,580	42,622	29,306	29,306	29,306	2,502	17,599	26,556	0	25,748	304,556
Reinsurance Payment													0
Other Payments/Adjustments to Medical Costs													0
Less:													0
BHO Capitation Revenue													0
Pharmacy Rebates													0
Recoveries not Claims Payments													0
<b>Total Payments for the month</b>	<b>13,808,520</b>	<b>12,189,731</b>	<b>13,966,358</b>	<b>11,664,569</b>	<b>13,321,038</b>	<b>12,305,357</b>	<b>12,732,049</b>	<b>12,716,169</b>	<b>13,588,444</b>	<b>14,339,153</b>	<b>13,420,199</b>	<b>13,614,862</b>	<b>157,666,448</b>
Remaining IBNR for the month	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Payments and Remaining IBNR for the month</b>	<b>13,808,520</b>	<b>12,189,731</b>	<b>13,966,358</b>	<b>11,664,569</b>	<b>13,321,038</b>	<b>12,305,357</b>	<b>12,732,049</b>	<b>12,716,169</b>	<b>13,588,444</b>	<b>14,339,153</b>	<b>13,420,199</b>	<b>13,614,862</b>	<b>157,666,448</b>
Per Member Expense	168.02	153.10	175.76	146.49	167.92	155.17	156.19	157.07	168.80	177.92	166.36	167.74	163.40
Per Member Month Exp. For Quarter			165.64			156.51			160.66			170.66	
Per Member Month Exp. For Quarter in Prior Year			175.39			169.21			160.16			149.42	
Per Member Month Exp. For Two Years Prior			159.28			152.43			166.39			161.05	
Percent Change			10%			11%			-4%			-7%	
Medical Services Budget for Current Year Quarter			193.12			187.84			154.17			138.63	
(Over)/Under Budget			27.48			31.32			(6.49)			(32.04)	



**Medical Services Budget Target Results**  
**CRA Reference: Section 3-10.j, 3-10.i.3(a) and**

MCO

AmeriChoice

Reporting Month

June-09

2007

Incurred Month

	2007												Total
	January	February	March	April	May	June	July	August	September	October	November	December	
Enrollment	80,341	80,634	80,679	81,467	81,801	82,348	83,102	83,976	84,947	85,644	86,050	86,463	997,452
<b>Payments for Medical Services for the Month</b>													
UB 92 Payments by the Claims Processing System	9,077,480	7,296,297	7,603,671	10,167,429	8,283,340	8,502,664	8,452,493	8,497,676	8,066,951	9,173,192	8,461,057	8,208,109	101,790,360
HCFA1500 Payments by the Claims Processing System	5,411,815	4,856,191	5,209,293	5,055,086	5,150,946	4,691,649	5,035,444	5,497,464	5,102,038	5,753,573	5,431,432	4,896,852	62,091,783
Dental Payments by the Claims Processing System	0	0	0	0	0	0	0	0	0	0	0	0	0
Capitation Payments	135,557	138,421	141,545	141,202	150,752	142,882	147,345	149,416	139,077	165,167	149,194	153,643	1,754,202
Pharmacy Payments													0
Subcontractor Payments for Medical Services	40,785	72,852	36,719	36,152	32,758	28,568	26,755	29,077	51,088	35,478	45,937	40,690	476,859
Reinsurance Payment													0
Other Payments/Adjustments to Medical Costs													0
Less:													0
BHO Capitation Revenue													0
Pharmacy Rebates													0
Recoveries not Claims Payments													0
Total Payments for the month	14,665,637	12,363,761	12,991,228	15,399,870	13,617,797	13,365,763	13,662,038	14,173,633	13,359,153	15,127,410	14,087,621	13,299,294	166,113,204
Remaining IBNR for the month	0	0	0	0	\$0	\$0	\$5,500	\$5,500	\$5,880	\$7,591	\$9,194	\$28,869	62,534
<b>Payments and Remaining IBNR for the month</b>	14,665,637	12,363,761	12,991,228	15,399,870	13,617,797	13,365,763	13,667,538	14,179,133	13,365,033	15,135,001	14,096,814	13,328,163	166,175,737
Per Member Expense	182.54	153.33	161.02	189.03	166.47	162.31	164.47	168.85	157.33	176.72	163.82	154.15	166.60
Per Member Month Exp. For Quarter			165.61			172.56			163.52			164.86	
Per Member Month Exp. For Quarter in Prior Year			165.64			156.51			160.66			170.66	
Per Member Month Exp. For Two Years Prior			175.39			169.21			160.16			149.42	
Percent Change			-6%			-8%			0%			14%	
Medical Services Budget for Current Year Quarter			156.44			144.77			161.15			194.93	
(Over)/Under Budget			(9.17)			(27.79)			(2.37)			30.07	

**Medical Services Budget Target Results**  
**RA Reference: Section 3-10.j, 3-10.i.3(a) and**

MCO		2008												
AmeriChoice		Incurred Month												
Reporting Month		January	February	March	April	May	June	July	August	September	October	November	December	Total
June-09		86,577	86,938	87,129	87,143	87,074	87,450	87,915	88,973	89,933	91,128	94,389	97,548	1,072,197
Enrollment														
<b>Payments for Medical Services for the Month</b>														
UB 92 Payments by the Claims Processing System		9,701,712	8,772,236	9,533,681	8,512,544	9,461,360	8,688,024	10,544,278	10,170,705	10,127,655	10,694,555	9,035,039	9,407,132	114,648,922
HCFA1500 Payments by the Claims Processing System		5,887,627	5,685,840	5,404,607	5,632,774	5,380,424	5,393,033	5,828,410	5,926,871	6,069,912	6,391,444	6,029,081	6,419,402	70,049,425
Dental Payments by the Claims Processing System		0	0	0	0	0	0	0	0	0	0	0	0	0
Capitation Payments		159,554	161,547	162,456	160,117	161,837	163,065	163,623	166,688	170,022	170,382	174,718	177,913	1,991,920
Pharmacy Payments														0
Subcontractor Payments for Medical Services		27,196	39,646	42,133	25,185	40,683	41,355	29,164	39,562	47,837	45,106	55,120	46,709	479,696
Reinsurance Payment														0
Other Payments/Adjustments to Medical Costs														0
Less:														0
BHO Capitation Revenue														0
Pharmacy Rebates														0
Recoveries not Claims Payments														0
Total Payments for the month		15,776,088	14,659,269	15,142,877	14,330,620	15,044,305	14,285,477	16,565,475	16,303,826	16,415,426	17,301,487	15,293,958	16,051,156	187,169,963
Remaining IBNR for the month		\$34,698	\$64,506	\$95,353	\$130,571	\$167,650	\$284,631	\$407,545	\$479,966	\$556,795	\$684,974	\$821,421	\$1,431,415	5,159,524
<b>Payments and Remaining IBNR for the month</b>		15,810,787	14,723,775	15,238,230	14,461,191	15,211,955	14,570,107	16,973,019	16,783,792	16,972,222	17,986,461	16,115,378	17,482,571	192,329,487
Per Member Expense		182.62	169.36	174.89	165.95	174.70	166.61	193.06	188.64	188.72	197.38	170.73	179.22	179.38
Per Member Month Exp. For Quarter				175.61			169.08			190.12			182.24	
Per Member Month Exp. For Quarter in Prior Year				165.61			172.56			163.52			164.86	
Per Member Month Exp. For Two Years Prior				165.64			156.51			160.66			170.66	
Percent Change				0%			10%			2%			-3%	
Medical Services Budget for Current Year Quarter				165.58			190.25			166.44			159.25	
(Over)/Under Budget				(10.04)			21.17			(23.69)			(22.98)	

Main data table with columns for Month Paid, The Cause System, and various claim categories (e.g., Total, Acc-01, Acc-02, etc.) across months from Jan-02 to Jun-01.

Date of Service January - December 2005
Date of Service January - December 2006
Date of Service January - December 2007

Jan
Feb
Mar
Apr
May
June

36,605,809.85
Paid Claims
17,545,623
8,268,502
3,824,115
1,962,867
503,805
36,605,809.85





Month	Jan-02	Jan-03	Jan-04	Jan-05	Jan-06	Jan-07	Jan-08	Jan-09	Jan-10	Jan-11	Jan-12	Jan-13	Jan-14	Jan-15	Jan-16	Jan-17	Jan-18	Jan-19	Jan-20	Jan-21	Jan-22	Jan-23	Jan-24	Jan-25	Jan-26	Jan-27	Jan-28	Jan-29	Jan-30	Jan-31
Jan-02	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000

Dates of Service January - December 2002 8 156 843  
 Dates of Service January - December 2003 49 181  
 Dates of Service January - December 2004 18 104  
 Dates of Service January - December 2005 1 12  
 Dates of Service January - December 2006 12 238  
 Dates of Service January - December 2007 and prior 9 172 248

Month  
 By Item  
 Column  
 System

Month	By Item	Column	System	Jan-05	Jan-06	Jan-07	Jan-08	Jan-09	Jan-10	Jan-11	Jan-12	Jan-13	Jan-14	Jan-15	Jan-16	Jan-17	Jan-18	Jan-19	Jan-20	Jan-21	Jan-22	Jan-23	Jan-24	Jan-25	Jan-26	Jan-27	Jan-28	Jan-29	Jan-30	Jan-31	Jan-32	Jan-33	Jan-34	Jan-35	Jan-36	Jan-37	Jan-38	Jan-39	Jan-40	Jan-41	Jan-42	Jan-43	Jan-44	Jan-45	Jan-46	Jan-47	Jan-48	Jan-49	Jan-50	Jan-51	Jan-52	Jan-53	Jan-54	Jan-55	Jan-56	Jan-57	Jan-58	Jan-59	Jan-60	Jan-61	Jan-62	Jan-63	Jan-64	Jan-65	Jan-66	Jan-67	Jan-68	Jan-69	Jan-70	Jan-71	Jan-72	Jan-73	Jan-74	Jan-75	Jan-76	Jan-77	Jan-78	Jan-79	Jan-80	Jan-81	Jan-82	Jan-83	Jan-84	Jan-85	Jan-86	Jan-87	Jan-88	Jan-89	Jan-90	Jan-91	Jan-92	Jan-93	Jan-94	Jan-95	Jan-96	Jan-97	Jan-98	Jan-99	Jan-100
Jan-05	Jan-06	Jan-07	Jan-08	Jan-09	Jan-10	Jan-11	Jan-12	Jan-13	Jan-14	Jan-15	Jan-16	Jan-17	Jan-18	Jan-19	Jan-20	Jan-21	Jan-22	Jan-23	Jan-24	Jan-25	Jan-26	Jan-27	Jan-28	Jan-29	Jan-30	Jan-31	Jan-32	Jan-33	Jan-34	Jan-35	Jan-36	Jan-37	Jan-38	Jan-39	Jan-40	Jan-41	Jan-42	Jan-43	Jan-44	Jan-45	Jan-46	Jan-47	Jan-48	Jan-49	Jan-50	Jan-51	Jan-52	Jan-53	Jan-54	Jan-55	Jan-56	Jan-57	Jan-58	Jan-59	Jan-60	Jan-61	Jan-62	Jan-63	Jan-64	Jan-65	Jan-66	Jan-67	Jan-68	Jan-69	Jan-70	Jan-71	Jan-72	Jan-73	Jan-74	Jan-75	Jan-76	Jan-77	Jan-78	Jan-79	Jan-80	Jan-81	Jan-82	Jan-83	Jan-84	Jan-85	Jan-86	Jan-87	Jan-88	Jan-89	Jan-90	Jan-91	Jan-92	Jan-93	Jan-94	Jan-95	Jan-96	Jan-97	Jan-98	Jan-99	Jan-100				







July 15, 2009

## STATEMENT OF ACTUARIAL OPINION

Statutory Quarterly Statement of United Healthcare Plan of the River Valley, Inc.  
Medicaid Risk Business in Western Tennessee  
As of and for the Period Ended June 30, 2009

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid risk business in Western Tennessee, which had approximately 164,000 members in June 2009. This business became effective November 1, 2008.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of June 30, 2009.

I have determined that the appropriate level for claims liability for this block of business is \$58,631,856.

Note that in the annual statement, both Medicaid and non-Medicaid business is combined.

I have relied upon information supplied by responsible officers of employees of United Healthcare Plan of the River Valley, Inc. as to the accuracy and completeness of listings and summaries of policies and contracts in force and other information underlying the loss reserves. A data reliance letter is enclosed. In other respects, my examination included such review of the actuarial assumptions and actuarial methods and such test of actuarial calculations as I considered necessary in the circumstances. My examination considered the need for cash flow testing, but none was performed because such tests were determined to be unnecessary. The cash flows associated with United Healthcare Plan of the River Valley, Inc.'s products and investments are believed to be relatively insensitive to influences such as changes in economic conditions.

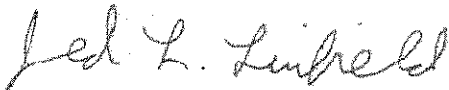
In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

- a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;
- b) Are based on actuarial assumptions which are in accordance with or stronger than those called for in related contract provisions and are appropriate for the purpose for which the statement was prepared;
- c) Meet the requirements of the laws of the State of Tennessee;
- d) Make good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization guaranteed under the terms of its contracts and agreements;
- e) Are computed on the basis of actuarial assumptions and methods consistent in all material respects with those used in computing the corresponding items in the annual statement of the preceding year-end; and
- f) Include provision, in the aggregate, for all actuarial reserves and related statement items which ought to be established.

The actuarial methods, considerations and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time to time by the Actuarial Standards Board, whose standards form the basis of this statement of opinion.

This statement has been prepared for inclusion with United Healthcare Plan of the River Valley, Inc.'s statutory quarterly statement for filing with regulatory authorities of the State of Tennessee and is intended for no other purpose.

July 15, 2009



Jed L. Linfield  
Fellow, Society of Actuaries  
Member, American Academy of Actuaries  
AmeriChoice of New Jersey  
AmeriChoice  
12018 Sunrise Valley Drive  
Reston, VA 20191  
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e-mail: Jlinfield@uhc.com



A UnitedHealth Group Company

# AmeriChoice

July 15, 2009

I, Christopher R. Otley, am employed by AmeriChoice as Senior Director, Medical Economics, Corporate Finance. I hereby affirm that the listings, summaries, and analyses relating to data for Medicaid business, prepared for and submitted to Jed L. Linfield, FSA, MAAA in support of his actuarial opinion for United Healthcare Plan of the River Valley, Inc.'s Medicaid risk business in Western Tennessee, as of June 30, 2009, were prepared under my direction and, to the best of my knowledge and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the quarterly statement for the quarter ended June 30, 2009.

Christopher R. Otley  
Senior Director  
Medical Economics, Corporate Finance  
(571) 262-8945

Medical Loss Ratio Report - Total

Grand Region - West

MCO

Americochoice

Reporting Month	2008		2009						For the Year Ended 6/30/2009
	Incurred Month		Incurred Month						
	November	December	January	February	March	April	May	June	
Enrollment	173,138	163,212	161,558	160,176	160,496	160,894	160,251	164,228	1,303,953
Capitation Revenue	37,069,986	34,847,879	34,355,954	34,001,678	33,868,872	33,671,597	33,181,695	33,991,297	\$274,988,957
<b>Payments for Covered Services for the Month</b>									
<b>Medical Services</b>									
CMS 1450/UB 92 Payments by the Claims Processing System									
Inpatient - Maternity	1,219,266	1,154,215	950,294	958,772	890,828	943,923	735,250	26,296	\$6,878,843
Inpatient - Newborn	543,883	531,829	506,814	463,972	491,354	516,880	284,799	1,785	\$3,341,316
Inpatient - Medical	3,993,692	2,802,447	3,452,047	2,034,082	1,915,158	1,660,508	1,026,477	9,455	\$16,803,867
Inpatient - Surgery	4,615,472	4,034,632	4,259,319	3,215,855	3,025,392	2,527,040	1,392,352	12,094	\$23,082,155
Inpatient Other	68,523	84,260	37,745	23,682	76,966	49,819	26,741	2,794	\$370,530
Outpatient - Emergency Room	3,620,603	3,524,876	3,511,206	3,152,891	3,450,288	3,040,552	2,984,007	281,729	\$23,566,152
Outpatient - Laboratory	78,857	94,844	112,825	95,656	127,229	77,583	27,011	7,527	\$621,532
Outpatient - Radiology	710,824	782,011	1,272,865	840,759	457,538	743,207	719,078	116,056	\$5,642,337
Outpatient - Surgery	739,332	946,587	1,084,576	1,293,236	1,309,830	1,243,537	1,004,789	55,268	\$7,677,154
Outpatient - Other	-	-	-	-	-	-	-	-	-
CMS 1500 Payments by the Claims Processing System									
Prof - E&M	3,109,725	3,250,473	3,366,083	3,259,361	3,441,646	3,362,163	3,081,049	1,262,412	\$24,132,913
Prof - Maternity	366,397	362,735	350,664	362,548	381,272	432,197	377,559	139,964	\$2,773,336
Prof - Surgery	438,043	536,330	674,820	672,284	697,296	691,487	600,227	191,743	\$4,502,230
Prof - DME	261,083	263,393	303,796	343,698	324,031	342,782	282,899	88,950	\$2,210,630
Prof - Lab	390,789	434,519	492,714	479,526	529,160	541,004	451,584	183,710	\$3,503,005
Prof - Radiology	434,566	464,611	505,291	476,317	549,260	560,557	491,247	190,192	\$3,672,141
Prof - Transportation	1,028,699	951,751	921,307	948,344	1,043,082	949,205	781,303	74,167	\$6,697,858
Prof - Other	3,358,411	3,304,723	3,661,089	3,392,392	3,763,575	3,352,728	2,863,777	482,066	\$24,178,761
Capitation Payments	194,750	252,495	273,866	264,594	260,450	268,594	267,598	275,351	\$2,057,698
Subcontractor Payments for Medical Services	-	-	-	-	-	-	-	-	-
Other Medical (Vision)	-	75,359	101,988	102,689	117,406	108,590	78,372	89,327	\$673,731
<b>Behavioral Health</b>									
Inpatient Payments by the Claims Processing System	1,400,671	1,600,055	1,897,053	1,734,789	1,926,471	1,655,413	1,017,470	50,642	\$11,282,564
Outpatient Payments by the Claims Processing System	1,281,157	1,447,227	1,424,247	1,583,105	1,030,459	1,412,409	519,064	33,985	\$8,731,654
Supported Housing Payments by the Claims Processing System	215,968	357,467	341,520	316,810	354,471	293,744	252,159	1,330	\$2,133,469
Intensive Outpatient Payments by the Claims Processing System	5,825	7,540	8,750	9,650	11,455	11,320	7,915	-	\$62,455
Partial Hospitalization Payments by the Claims Processing System	1,500	3,860	5,760	7,380	10,080	4,680	15,590	-	\$48,850
In Home Payments by the Claims Processing System	-	-	-	-	-	-	-	-	-
Transportation Payments by the Claims Processing System	-	-	713	-	396	652	1,005	317	\$3,083
Twenty-Three Hour Payments by the Claims Processing System	1,190	11,900	15,610	29,110	9,400	6,460	-	-	\$73,670
CMHA Capitation Payments	-	-	-	-	-	-	-	-	-
Other Capitation Payments	106,372	106,372	104,966	94,068	98,870	101,378	101,467	106,253	\$819,745
Grant Payments	-	-	-	-	-	-	8,668	2,152	\$10,819
Non-FFS Inpatient	-	-	-	-	-	-	-	-	-
Subcontractor Payments for Mental Health and Substance Abuse Services	-	-	-	210	-	-	-	840	\$1,050
Crisis Services Team Pass Through	148,583	148,583	148,583	128,119	143,844	124,732	142,366	142,294	\$1,127,103
Less:									
Recoveries not Reflected in Claims Payments	-	-	-	-	-	-	-	-	-
Total Payments	28,244,181	27,535,093	29,786,612	26,283,898	26,437,207	25,023,142	19,541,822	3,828,698	\$186,680,632
Remaining IBNR	895,472	1,537,886	2,444,454	2,697,639	4,263,648	6,046,568	12,899,685	27,846,503	\$58,631,855
Payments and Remaining IBNR	29,139,653	29,072,979	32,231,066	28,981,537	30,700,855	31,069,710	32,441,507	31,675,201	\$245,312,507
Medical Loss Ratio	78.61%	83.43%	93.82%	85.24%	90.65%	92.27%	97.77%	93.19%	89.21%
Per Member Expense	\$168.30	\$178.13	\$199.50	\$180.94	\$191.29	\$193.11	\$202.44	\$192.87	\$188.13

Notes: 1) Beginning February 2009, Americochoice membership and Capitation revenue are reported on a restated basis as reflected on the 820 payment file from November 2008 to current reporting month. Please note that MLR submissions prior to February 2009 reported revenue in the month of payment with all retroactivity in the current month.

2.) Payments for Other Medical (Vision) were reported in December 2008 in order to allocate the expense between Middle and West regions.

3.) \$2.0M in additional earned capitation revenue (related to 9,052 members) has been accrued for current and prior periods and is expected for payment in July. This revenue is reflected in the MLR allocated by incurred date.

Medical Loss Ratio Report - Total

Grand Region - West

MCO

AmeriChoice

Reporting Month

Jun-09

Enrollment

Capitation Revenue

Payments for Covered Services for the Month

Medical Services

CMS 1450/UB 92 Payments by the Claims Processing System

Inpatient - Maternity

Inpatient - Newborn

Inpatient - Medical

Inpatient - Surgery

Inpatient Other

Outpatient - Emergency Room

Outpatient - Laboratory

Outpatient - Radiology

Outpatient - Surgery

Outpatient - Other

CMS 1500 Payments by the Claims Processing System

Prof - E&M

Prof - Maternity

Prof - Surgery

Prof - DME

Prof - Lab

Prof - Radiology

Prof - Transportation

Prof - Other

Capitation Payments

Subcontractor Payments for Medical Services

Other Medical (Vision)

Behavioral Health

Inpatient Payments by the Claims Processing System

Outpatient Payments by the Claims Processing System

Supported Housing Payments by the Claims Processing System

Intensive Outpatient Payments by the Claims Processing System

Partial Hospitalization Payments by the Claims Processing System

In Home Payments by the Claims Processing System

Transportation Payments by the Claims Processing System

Twenty-Three Hour Payments by the Claims Processing System

CMHA Capitation Payments

Other Capitation Payments

Grant Payments

Non-FFS Inpatient

Subcontractor Payments for Mental Health and Substance Abuse Servi

Crisis Services Team Pass Through

Less:

Recoveries not Reflected in Claims Payments

Total Payments

Remaining IBNR

Payments and Remaining IBNR

Medical Loss Ratio

Per Member Expense

Notes:

Medical Loss Ratio Report - Base Capitation Only  
Grand Region - West

MCO

Reporting Month Jun-09	2008		2009						For the Year Ended 6/30/2009
	Incurred Month		Incurred Month						
	November	December	January	February	March	April	May	June	
Enrollment	173,138	163,212	161,558	160,176	160,496	160,594	160,251	164,228	1,303,953
Capitation Revenue (For base capitation only)	34,504,786	32,219,873	31,714,145	31,402,125	31,307,451	31,158,407	30,736,360	31,576,551	\$254,619,697
Payments for Covered Services for the Month									
Medical Services									
CMS 1450/LB 92 Payments by the Claims Processing System									
Inpatient - Maternity	\$1,219,266	\$1,154,215	\$950,294	\$958,772	\$890,828	\$943,923	\$735,250	\$26,296	\$6,878,843
Inpatient - Newborn	\$543,883	\$531,829	\$506,814	\$463,972	\$491,354	\$516,880	\$284,799	\$1,785	\$3,341,316
Inpatient - Medical	\$3,903,692	\$2,802,447	\$3,452,047	\$2,034,082	\$1,915,158	\$1,660,508	\$1,026,477	\$9,455	\$16,803,867
Inpatient - Surgery	\$4,615,472	\$4,034,632	\$4,259,319	\$3,215,855	\$3,025,392	\$2,527,040	\$1,392,352	\$12,094	\$23,082,155
Inpatient - Other	\$68,523	\$84,260	\$37,745	\$23,682	\$76,966	\$49,819	\$26,741	\$2,794	\$370,530
Outpatient - Emergency Room	\$3,620,603	\$3,524,876	\$3,511,206	\$3,152,891	\$3,450,288	\$3,040,552	\$2,984,007	\$281,729	\$23,566,152
Outpatient - Laboratory	78,857	94,844	112,825	95,656	127,229	77,583	27,011	7,527	\$621,532
Outpatient - Radiology	710,824	782,011	1,272,865	840,759	457,538	743,207	719,078	116,056	\$5,642,337
Outpatient - Surgery	739,332	946,587	1,084,576	1,293,236	1,309,830	1,243,537	1,004,789	55,268	\$7,677,154
Outpatient - Other	-	-	-	-	-	-	-	-	-
CMS 1500 Payments by the Claims Processing System									
Prof - E&M	3,109,725	3,250,473	3,366,083	3,259,361	3,441,646	3,362,163	3,081,049	1,262,412	\$24,132,913
Prof - Maternity	366,397	362,735	350,664	362,548	381,272	432,197	377,559	139,964	\$2,773,336
Prof - Surgery	438,043	536,330	674,820	672,284	697,296	691,487	600,227	191,743	\$4,502,230
Prof - DME	261,083	263,393	303,796	343,698	324,031	342,782	282,899	88,950	\$2,210,630
Prof - Lab	390,789	434,519	492,714	479,526	529,160	541,004	451,584	183,710	\$3,503,005
Prof - Radiology	434,566	464,611	505,391	476,317	549,260	560,557	491,247	190,192	\$3,672,141
Prof - Transportation	1,028,699	951,751	921,307	948,344	1,043,082	949,205	781,303	74,167	\$6,697,858
Prof - Other	3,358,411	3,304,723	3,661,089	3,392,392	3,763,575	3,352,728	2,863,777	482,066	\$24,178,761
Capitation Payments	194,749.66	252,495.49	273,866.00	264,594.00	260,450.00	\$268,594	\$267,598	\$275,351	\$2,057,698
Subcontractor Payments for Medical Services	-	-	-	-	-	-	-	-	-
Other Medical (vision)	-	75,359	\$101,988	\$102,689	\$117,406	\$108,590	\$78,372	89,327	\$673,731
Behavioral Health (Excluding payments on behalf of priority enrollees)									
Inpatient Payments by the Claims Processing System	\$442,624	\$510,426	\$623,492	\$496,136	\$652,207	\$602,469	\$323,079	\$23,459	\$3,673,893
Outpatient Payments by the Claims Processing System	\$106,509	\$144,893	\$146,045	\$178,637	\$169,676	\$221,545	\$100,540	\$21,001	\$1,088,844
Supported Housing Payments by the Claims Processing System	\$4,718	\$7,610	\$8,722	\$7,103	\$12,531	\$11,365	\$6,878	-	\$58,926
Intensive Outpatient Payments by the Claims Processing System	\$615	\$3,370	\$5,170	\$3,215	\$5,605	\$5,925	\$2,530	-	\$26,630
Partial Hospitalization Payments by the Claims Processing System	\$240	\$980	\$5,760	\$2,880	\$3,240	\$1,800	\$8,210	-	\$23,110
In Home Payments by the Claims Processing System	-	-	-	-	-	-	-	-	-
Transportation Payments by the Claims Processing System	-	-	\$713	-	\$274	\$221	\$183	\$317	\$1,709
Twenty-Three Hour Payments by the Claims Processing System	-	-	\$340	\$1,560	\$1,360	\$680	-	-	\$3,940
CMHA Capitation Payments	-	-	-	-	-	-	-	-	-
Other Capitation Payments	\$29,040	\$29,039	\$18,369	\$16,462	\$17,302	\$17,741	\$17,757	\$18,594	\$164,304
Grant Payments	-	-	-	-	-	-	\$1,517	\$377	\$1,893
Non-FFS Inpatient	-	-	-	-	-	-	-	-	-
Subcontractor Payments for Mental Health and Substance Abuse Services	-	-	-	-	-	-	-	-	-
Crisis Services Team Pass Through	\$40,563	\$40,563	\$26,002	\$22,421	\$25,173	\$21,828	\$24,914	\$24,901	\$226,365
Less:									
Revenues not Reflected in Claims Payments	-	-	-	-	-	-	-	-	-
Total Payments	25,707,224	24,589,171	26,674,022	23,109,070	23,739,128	22,295,929	17,961,726	3,579,534	\$167,655,804
Revenues IBNR	867,249	1,488,022	2,280,306	2,465,081	3,813,283	5,424,238	11,063,833	24,688,179	\$52,070,191
Payments and Remaining IBNR	26,574,473	26,077,193	28,954,328	25,574,150	27,552,411	27,720,167	29,025,559	28,267,713	\$219,725,994
Medical Loss Ratio	77.02%	80.94%	91.23%	81.44%	88.01%	88.97%	94.43%	89.52%	86.30%
Per Member Expense	\$153.49	\$159.77	\$179.10	\$159.66	\$171.67	\$172.29	\$181.13	\$172.12	\$168.51

Notes: 1.) Beginning February 2009, AmeriChoice membership and Capitation revenue are reported on a restated basis as reflected on the 820 payment file from November 2008 to current reporting month. Please note that MLR submissions prior to February 2009 reported revenue in the month of payment with all retroactivity in the current month.  
2.) Payments for Other Medical (Vision) were restated in December 2008 in order to allocate the expense between Middle and West regions.

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Medical Loss Ratio Report - Priority Add-On Only  
Grand Region - West

MCO

Americhoice	Reporting Month		2008				2009				For the Year Ended 6/30/2009
	Jun-09		Incurred Month		Incurred Month		Incurred Month		June		
	November	December	January	February	March	April	May				
<b>Enrollment</b> (For Priority Enrollees Only)	10,556	10,812	10,870	10,696	10,538	10,340	10,062	9,935	83,809		
<b>Capitation Revenue</b> (Priority add-on payment only)	2,565,200	2,628,006	2,641,809	2,599,553	2,561,421	\$2,513,190	\$2,445,335.00	\$2,414,746.00	\$20,369,260		
<b>Payments for Covered Services for the Month</b>											
<b>Medical Services</b>											
CMS 1450/UB 92 Payments by the Claims Processing System											
Inpatient - Maternity											
Inpatient - Newborn											
Inpatient - Medical											
Inpatient - Surgery											
Inpatient - Other											
Outpatient - Emergency Room											
Outpatient - Laboratory											
Outpatient - Radiology											
Outpatient - Surgery											
Outpatient - Other											
CMS 1500 Payments by the Claims Processing System											
Prof - E&M											
Prof - Maternity											
Prof - Surgery											
Prof - DME											
Prof - Lab											
Prof - Radiology											
Prof - Transportation											
Prof - Other											
Capitation Payments											
Subcontractor Payments for Medical Services											
Other Medical (Vision)											
<b>Behavioral Health</b> (On behalf of Priority enrollees only)											
Inpatient Payments by the Claims Processing System	\$958,047	\$1,089,629	\$1,273,561	\$1,238,653	\$1,274,264	\$1,052,943	\$694,391	\$27,183	\$7,608,672		
Outpatient Payments by the Claims Processing System	\$1,174,648	\$1,302,334	\$1,378,202	\$1,404,468	\$860,784	\$1,190,865	\$418,524	\$12,985	\$7,642,810		
Supported Housing Payments by the Claims Processing System	\$211,250	\$349,858	\$332,799	\$309,707	\$341,940	\$282,379	\$245,281	\$1,330	\$2,074,543		
Intensive Outpatient Payments by the Claims Processing System	\$5,210	\$3,970	\$3,580	\$6,435	\$5,850	\$5,395	\$5,385		\$35,825		
Partial Hospitalization Payments by the Claims Processing System	\$1,260	\$2,880		\$4,500	\$6,840	\$2,880	\$7,380		\$25,740		
In Home Payments by the Claims Processing System											
Transportation Payments by the Claims Processing System					\$122	\$430	\$822		\$1,375		
Twenty-Three Hour Payments by the Claims Processing System	\$1,190	\$11,900	\$15,270	\$27,550	\$8,040	\$5,780			\$69,730		
CMHA Capitation Payments											
Other Capitation Payments	\$77,332	\$77,332	\$86,597	\$77,606	\$81,568	\$83,637	\$83,710	\$87,658	\$655,441		
Grant Payments							\$7,151	\$1,775	\$8,926		
Non-FFS Inpatient											
Subcontractor Payments for Mental Health and Substance Abuse Services				\$210				\$840	\$1,050		
Crisis Services Team Pass Through	\$108,020	\$108,020	\$122,581	\$105,698	\$118,671	\$102,904	\$117,452	\$117,393	\$900,738		
<b>Less:</b>											
Recoveries not Reflected in Claims Payments											
<b>Total Payments</b>	\$2,536,957	\$2,945,922	\$3,112,590	\$3,174,828	\$2,698,079	\$2,727,213	\$1,580,096	\$249,164	\$19,024,848		
<b>Remaining IBNR</b>	\$28,222	\$49,864	\$184,148	\$232,558	\$450,365	\$622,330	\$1,835,852	\$3,158,324	\$6,561,665		
<b>Payments and Remaining IBNR</b>	\$2,565,180	\$2,995,787	\$3,296,738	\$3,407,387	\$3,148,444	\$3,349,542	\$3,415,948	\$3,407,488	\$25,586,513		
<b>Medical Loss Ratio</b>	100.00%	113.99%	124.79%	131.08%	122.92%	133.28%	139.69%	141.11%	125.61%		
<b>Per Member Expense</b>	\$243.01	\$277.08	\$303.29	\$318.57	\$298.77	\$323.94	\$339.49	\$342.98	\$305.30		

Notes: 1) Beginning February 2009, Americhoice's membership and Capitation revenue are reported on a restated basis as reflected on the 820 payment file from November 2008 to current reporting month. Please note that MLR submissions prior to February 2009 reported revenue in the month of payment with all reactivity in the current month.  
2) Payments for Other Medical (Vision) were reported in December 2009 in order to allocate the expense between Middle and West regions.



Americhoice - West Tennessee  
 Reconciliation Between 2A and MLR Report  
 As of June 30, 2009

<u>Capitation Revenue</u>	<u>Revenue</u>
Revenue reported per MLR report	203,071,092
Restated revenue for prior months	3,090,874
	<b>206,161,966</b>
TennCare Capitation per 2A	<b>206,161,966</b>
<b>Difference</b>	<b>(0)</b>
<u>Claims &amp; Reserve</u>	<u>Claims</u>
Paid claims per the 2A	174,265,694
Change in IBNR	826,461
<b>Total 2A Paid Claims and Change in Reserves</b>	<b>175,092,155</b>
Incurred Claims per the MLR for the reporting period	187,099,875
Restated prior year incurred claims	(12,007,721)
<b>Adjusted MLR</b>	<b>175,092,154</b>
<b>Difference (rounding)</b>	<b>0</b>



Medical Loss Ratio Report - Total  
Grand Region - Middle

MCO

Americhoice	2008												2009				For the Year Ended 6/30/2009
	Reporting Month																
	Jun-09	Incurred Month											Incurred Month				
	July	August	September	October	November	December	January	February	March	April	May	June					
<b>Enrollment</b>	183,483	183,463	183,732	184,531	185,206	185,500	184,711	185,741	187,227	189,331	190,738	193,851	2,237,514				
<b>Capitation Revenue</b>	47,342,584	47,329,849	47,320,617	47,547,796	47,598,563	47,603,832	46,646,572	46,774,640	47,030,840	47,462,888	47,642,423	48,555,935	\$568,856,538				
<b>Payments for Covered Services for the Month</b>																	
<b>Medical Services</b>																	
CMS 1450/UB 92 Payments by the Claims Processing System																	
Inpatient - Maternity	1,650,735	1,623,042	1,657,729	1,778,471	1,655,478	1,660,623	1,610,375	1,477,049	1,650,472	1,537,883	1,446,775	64,798	\$17,813,430				
Inpatient - Newborn	836,816	802,712	833,383	825,455	1,088,301	785,950	708,855	659,017	687,940	643,197	521,593	6,581	\$8,399,802				
Inpatient - Medical	2,531,175	2,393,643	2,206,344	2,670,390	2,719,856	2,290,579	2,970,702	2,735,761	2,396,503	1,936,331	1,538,994	14,828	\$26,405,106				
Inpatient - Surgery	5,922,651	5,153,865	5,082,292	4,445,508	4,359,765	5,101,220	5,105,674	5,151,655	4,576,330	3,867,037	2,340,381	103,303	\$51,209,680				
Inpatient Other	52,588	127,190	71,818	89,352	94,552	155,239	80,866	47,204	130,167	120,742	66,680	6,244	\$1,042,642				
Outpatient - Emergency Room	2,449,509	2,547,813	2,582,151	2,533,289	2,754,108	2,675,728	2,932,383	2,902,544	3,594,213	5,328,148	805,044	-	\$31,104,930				
Outpatient - Laboratory	203,395	197,794	201,824	209,278	186,663	174,655	212,346	205,322	208,122	13,999	135,835	66,015	\$2,015,248				
Outpatient - Radiology	1,426,244	1,373,303	1,365,966	1,460,776	1,258,093	1,332,582	1,416,785	1,512,575	1,400,858	1,408,488	1,613,709	281,318	\$15,850,697				
Outpatient - Surgery	1,865,202	1,965,436	1,787,152	1,952,389	1,668,297	1,773,738	1,969,071	1,956,547	2,535,316	3,371,924	403,663	-	\$21,248,735				
Outpatient - Other	-	-	-	-	-	-	-	-	-	-	-	-	-				
CMS 1500 Payments by the Claims Processing System																	
Prof - E&M	4,586,329	4,862,066	5,018,969	5,193,925	4,819,687	4,907,008	4,935,149	5,137,231	5,447,882	5,079,699	4,581,736	1,981,091	\$56,570,771				
Prof - Maternity	671,327	707,372	720,777	727,130	646,312	689,910	702,937	589,454	663,581	644,132	662,787	264,266	\$7,689,983				
Prof - Surgery	1,520,312	1,433,153	1,425,215	1,473,807	1,245,935	1,425,889	1,350,606	1,453,293	1,492,495	1,484,325	1,230,572	537,888	\$16,073,488				
Prof - DME	554,879	531,635	520,496	599,319	543,167	650,336	533,894	591,417	613,208	548,447	476,256	168,843	\$6,328,897				
Prof - Lab	668,190	666,851	686,082	717,258	583,514	611,889	732,964	726,323	789,907	750,872	657,577	319,922	\$7,911,349				
Prof - Radiology	857,608	863,225	894,861	954,855	792,386	805,767	867,576	866,914	1,000,400	993,564	877,917	369,108	\$10,144,182				
Prof - Transportation	1,495,267	1,489,246	1,604,160	1,728,899	1,364,092	1,372,336	1,353,973	1,368,636	1,435,520	1,487,562	769,823	148,791	\$15,618,303				
Prof - Other	8,324,285	8,191,007	7,093,383	6,698,309	5,745,192	5,922,963	6,061,615	5,721,586	5,759,237	2,638,525	7,851,720	1,545,736	\$71,553,558				
Capitation Payments	83,667	83,008	83,868	82,608	82,557	86,245	87,252	86,469	94,024	90,748	86,697	101,251	\$1,048,395				
Subcontractor Payments for Medical Services	-	-	-	-	-	-	-	-	-	-	-	-	-				
Other Medical (Vision)	125,313	176,306	161,729	161,092	148,521	129,487	112,057	97,634	117,712	140,380	104,035	108,520	\$1,582,786				
<b>Behavioral Health</b>																	
Inpatient Payments by the Claims Processing System	1,777,020	1,810,318	1,512,737	1,779,537	1,717,552	1,627,047	1,431,195	1,496,405	1,417,301	1,244,253	1,109,118	47,873	\$16,970,357				
Outpatient Payments by the Claims Processing System	1,272,160	1,380,797	1,232,195	1,279,254	1,508,431	1,995,679	1,932,365	2,077,250	2,118,180	2,174,377	2,055,286	959,870	\$19,985,845				
Supported Housing Payments by the Claims Processing System	303,583	309,510	320,220	344,836	315,275	358,403	363,141	382,071	427,875	427,081	443,923	158,722	\$4,154,640				
Intensive Outpatient Payments by the Claims Processing System	52,883	57,181	56,239	73,238	64,582	62,840	50,730	64,571	75,845	84,555	52,325	3,535	\$698,524				
Partial Hospitalization Payments by the Claims Processing System	75,655	67,730	57,700	60,830	22,545	41,816	55,538	45,039	82,141	89,545	49,515	3,625	\$651,679				
In Home Payments by the Claims Processing System	-	-	-	-	-	-	-	-	-	-	-	-	-				
Transportation Payments by the Claims Processing System	12,698	10,341	13,223	13,064	10,501	14,946	549	424	527	811	261	-	\$77,345				
Twenty-Three Hour Payments by the Claims Processing System	8,550	11,100	7,950	3,450	8,250	4,500	8,700	8,850	5,550	4,050	2,700	450	\$74,100				
CMHA Capitation Payments	-	-	-	-	-	-	-	-	-	-	-	-	-				
Other Capitation Payments	117,596	116,765	118,063	146,413	120,449	114,985	117,314	116,260	144,253	132,015	126,568	137,172	\$1,507,853				
Grant Payments	-	-	-	-	-	-	-	-	-	-	10,112	4,036	\$14,149				
Non-FFS Inpatient	-	-	-	-	-	-	-	-	-	-	-	-	-				
Subcontractor Payments for Mental Health and Substance Abuse	1,849,170	1,874,790	2,002,890	1,950,516	1,647,288	(18,900)	310,590	308,700	330,960	395,430	342,090	-	\$10,993,524				
Crisis Services Team Pass Through	300,317	301,805	298,825	303,923	296,809	313,777	301,476	304,539	298,376	302,980	319,089	296,853	\$3,638,768				
<b>Less:</b>																	
Recoveries not Reflected in Claims Payments	-	-	-	-	-	-	-	-	-	-	-	-	-				
<b>Total Payments</b>	31,295,123	41,129,004	39,618,244	40,257,172	37,468,157	37,067,238	38,316,677	38,100,739	39,494,894	36,941,099	30,682,779	7,697,642	\$428,378,768				
<b>Remaining IBNR</b>	438,633	346,756	620,922	775,964	796,754	1,167,959	1,737,047	2,214,018	3,954,965	6,416,875	14,246,276	37,728,071	\$70,444,220				
<b>Payments and Remaining IBNR</b>	32,053,756	41,475,760	40,239,166	41,033,136	38,264,911	38,235,177	40,053,724	40,314,757	43,449,859	43,357,974	44,929,055	45,425,713	\$498,822,988				
<b>Medical Loss Ratio</b>	88.79%	87.63%	85.04%	86.30%	80.39%	80.32%	85.87%	86.21%	92.39%	91.35%	94.30%	93.55%	87.69%				
<b>Per Member Expense</b>	\$229.09	\$226.07	\$219.01	\$222.36	\$206.61	\$206.12	\$216.85	\$217.10	\$232.07	\$229.01	\$235.55	\$234.33	\$222.04				

Notes:



Medical Loss Ratio Report - Base Capitation Only  
 Grand Region - Middle

MCO

Americochoice

Reporting Month	2007						2008						For the Year Ended				
	Jan-07	Feb-07	Mar-07	Apr-07	May-07	June-07	July-07	Aug-07	Sept-07	Oct-07	Nov-07	Dec-07		Jan-08	Feb-08	Mar-08	Apr-08
	6) Capitation Revenue line (M.R. - Base) was updated to reflect the additional PDN settlement amounts of \$44,690,337.09 received in July and \$1,037,861.32 received in September. These settlements were spread by incurred date between April 2007 at 2008.												6/30/2007				
													6/30/2008				

Americochoice																	
Reporting Month	2007						2008						For the Year Ended				
	Jan-07	Feb-07	Mar-07	Apr-07	May-07	June-07	July-07	Aug-07	Sept-07	Oct-07	Nov-07	Dec-07		Jan-08	Feb-08	Mar-08	Apr-08
	6) Capitation Revenue line (M.R. - Base) was updated to reflect the additional PDN settlement amounts of \$44,690,337.09 received in July and \$1,037,861.32 received in September. These settlements were spread by incurred date between April 2007 at 2008.												6/30/2007				
													6/30/2008				

Medical Loss Ratio Report - Base Capitation Only  
Grand Region - Middle

MCO

Americhoice	2008												For the Year Ended 6/30/2009
	Reporting Month	Incurred Month						Incurred Month					
	Jun-09	July	August	September	October	November	December	January	February	March	April	May	
<b>Enrollment</b>	183,483	183,463	183,732	184,531	185,206	185,500	184,711	185,741	187,227	189,331	190,738	193,851	2,237,514
<b>Capitation Revenue (For base capitation only)</b>	42,460,251	42,320,940	42,258,854	42,414,371	42,449,880	42,508,392	42,414,930	42,524,078	42,698,011	42,952,279	43,014,299	43,746,677	\$511,762,961
<b>Payments for Covered Services for the Month</b>													
<b>Medical Services</b>													
CMS 1450/UB 92 Payments by the Claims Processing													
Inpatient - Maternity	\$1,650,735	\$1,623,042	\$1,657,729	\$1,778,471	\$1,655,478	\$1,660,623	\$1,610,375	\$1,477,049	\$1,650,472	\$1,537,883	\$1,446,775	\$64,798	\$17,813,430
Inpatient - Newborn	\$836,816	\$802,712	\$833,385	\$825,455	\$1,088,301	\$785,950	\$708,855	\$659,017	\$687,940	\$643,197	\$521,593	\$6,581	\$8,399,802
Inpatient - Medical	\$2,531,175	\$2,393,643	\$2,206,344	\$2,670,190	\$2,719,856	\$2,290,579	\$2,970,702	\$2,735,761	\$2,396,503	\$1,936,331	\$1,538,994	\$14,828	\$26,405,106
Inpatient - Surgery	\$5,922,651	\$5,153,865	\$5,082,292	\$4,445,508	\$4,359,765	\$5,101,220	\$5,105,674	\$5,151,655	\$4,576,330	\$3,867,037	\$2,340,381	\$103,303	\$51,209,680
Inpatient Other	\$52,588	\$127,190	\$71,818	\$89,352	\$94,552	\$155,239	\$80,866	\$47,204	\$130,167	\$120,742	\$66,680	\$6,244	\$1,042,642
Outpatient - Emergency Room	\$2,449,509	\$2,547,813	\$2,582,151	\$2,533,289	\$2,754,108	\$2,675,728	\$2,932,383	\$2,902,544	\$3,594,213	\$5,328,148	\$805,044		\$31,104,930
Outpatient - Laboratory	203,395	197,794	201,824	209,278	186,663	174,655	212,346	205,322	208,122	13,999	135,835	66,015	\$2,015,248
Outpatient - Radiology	1,426,244	1,373,303	1,365,966	1,460,776	1,258,093	1,332,582	1,416,785	1,512,575	1,400,858	1,408,488	1,613,709	281,318	\$15,850,697
Outpatient - Surgery	1,865,202	1,965,436	1,787,152	1,952,389	1,668,297	1,773,738	1,969,071	1,956,547	2,535,316	3,371,924	403,663		\$21,248,735
Outpatient - Other													
CMS 1500 Payments by the Claims Processing System													
Prof - E&M	4,586,329	4,862,066	5,018,969	5,193,925	4,819,687	4,907,008	4,935,149	5,157,231	5,447,882	5,079,699	4,581,736	1,981,091	\$56,570,771
Prof - Maternity	671,327	707,372	720,777	727,130	646,312	689,910	702,937	589,454	663,581	644,132	662,787	264,266	\$7,689,983
Prof - Surgery	1,520,312	1,433,153	1,425,215	1,473,807	1,245,925	1,425,889	1,330,606	1,452,293	1,492,495	1,484,325	1,230,572	537,888	\$16,073,488
Prof - DME	554,879	531,635	520,496	599,319	543,167	650,336	533,894	591,417	613,208	548,447	476,256	165,843	\$6,328,897
Prof - Lab	668,190	666,851	686,082	717,258	583,514	611,889	732,964	726,323	789,907	750,872	657,577	319,922	\$7,911,349
Prof - Radiology	857,608	863,225	894,861	954,855	792,386	805,767	867,576	866,914	1,000,400	993,564	877,917	369,108	\$10,144,182
Prof - Transportation	1,495,267	1,489,246	1,604,160	1,728,899	1,364,092	1,372,336	1,353,973	1,368,636	1,435,520	1,487,562	769,823	148,791	\$15,618,305
Prof - Other	8,324,285	8,191,007	7,093,383	6,698,309	5,745,192	5,922,963	6,061,615	5,721,586	5,759,237	2,638,525	7,851,720	1,545,736	\$71,553,558
Capitation Payments	583,667	583,008	583,868	82,608	582,557	586,245	587,252	586,469	594,024	590,748	586,697	510,251	\$1,048,395
Subcontractor Payments for Medical Services													
Other Medical (vision)	\$125,313	\$176,306	\$161,729	161,092	\$148,521	\$129,487	\$112,057	97,634	117,712	\$140,380	\$104,035	\$108,520	\$1,582,786
<b>Behavioral Health (Excluding payments on behalf of priority)</b>													
Inpatient Payments by the Claims Processing System	626,935	646,037	623,569	5669,900	\$708,832	640,493.24	\$667,551	\$709,717	\$737,113	\$635,007	\$526,370	\$21,638	\$7,213,163
Outpatient Payments by the Claims Processing System	316,170	335,337	277,741	\$302,219	\$336,055	412,303.53	\$412,000	\$455,604	\$463,083	\$468,721	\$468,684	\$200,723	\$4,468,641
Supported Housing Payments by the Claims Processing	79,665	88,324	92,120	\$102,755	\$90,588	104,431.75	\$106,541	\$96,628	\$118,091	\$135,712	\$136,418	\$49,205	\$1,200,479
Intensive Outpatient Payments by the Claims Processing	29,090	33,504	39,268	\$44,572	\$41,575	47,700.00	\$36,205	\$45,766	\$53,000	\$61,285	\$37,070	\$2,645	\$471,680
Partial Hospitalization Payments by the Claims Processing	38,480	33,425	30,415	\$29,930	\$16,470	24,480.00	\$38,593	\$21,615	\$59,295	\$66,155	\$31,455	\$1,755	\$392,068
In Home Payments by the Claims Processing System													
Transportation Payments by the Claims Processing System	199		283		5611	601.25	336		338	479	261		\$3,109
Twenty-Three Hour Payments by the Claims Processing	2,100	2,400	1,050	\$1,050	\$150		\$1,800	\$1,350	\$150	\$1,350	\$1,350		\$12,750
CMHA Capitation Payments													
Other Capitation Payments	32,104	31,877	32,231	\$39,971	\$32,883	31,390.89	\$32,027	\$31,739	\$39,381	\$36,040	\$34,553	\$37,448	\$411,644
Grant Payments											\$2,761	\$1,102	\$3,863
Non-FFS Inpatient													
Subcontractor Payments for Mental Health and Substance Abuse	117,300	123,740	120,520	\$120,705	\$72,629								\$554,894
Crisis Services Team Pass Through	81,686	82,393	81,579	\$82,971	\$81,029	85,661.18	\$82,303	\$83,135	\$81,457	\$82,713	\$87,111	\$81,041	\$993,384
Less:													
Recoveries not Reflected in Claims Payments													
<b>Total Payments</b>	37,149,521	36,565,703	35,296,979	35,696,183	33,157,298	33,899,206	35,122,435	34,752,189	36,145,793	33,573,465	27,497,825	6,481,062	\$385,337,659
Remaining IBNR	431,587	333,340	605,591	754,146	735,800	1,051,655	1,628,884	2,080,074	3,765,092	6,042,712	13,208,079	35,318,115	\$65,954,476
<b>Payments and Remaining IBNR</b>	37,581,108	36,899,043	35,902,569	36,450,329	33,893,098	34,950,262	36,751,319	36,832,263	39,910,885	39,616,177	40,705,904	41,799,178	\$451,292,135
<b>Medical Loss Ratio</b>	88.61%	87.19%	84.96%	85.94%	79.84%	82.22%	86.65%	86.62%	93.47%	92.23%	94.63%	95.55%	88.18%
<b>Per Member Expense</b>	\$204.82	\$201.13	\$195.41	\$197.53	\$183.00	\$188.41	\$198.97	\$198.30	\$213.17	\$209.24	\$213.41	\$215.63	\$201.69

Notes:

reported

Medical Loss Ratio Report - Base Capitation Only  
Grand Region - Middle

MCO

Reporting Month	2009												For the Year Ended 6/30/2009					
	2008						2009											
Jan-09	February	March	April	May	June	July	August	September	October	November	December	January	February	March	April	May	June	

nd March

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Medical Loss Ratio Report - Priority Add-On Only  
Grand Region - Middle

MCO

AmeriChoice

Reporting Month	2007			For the Year Ended 6/30/2007	2007						2008						For the Year Ended 6/30/2008
	Incurred Month				Incurred Month						Incurred Month						
	April	May	June		July	August	September	October	November	December	January	February	March	April	May	June	
Enrollment (For Priority Enrollees Only)	14,093	13,890	13,861	#####	13,648	13,491	13,251	13,087	12,925	12,666	12,363	12,165	12,053	12,060	12,275	12,643	152,627
Capitation Revenue (Priority add-on payment only)	\$6,295,161	\$6,206,497	\$6,198,732	\$18,700,390	\$6,105,090	\$6,037,438	\$5,930,872	\$5,859,003	\$5,786,920	\$5,671,052	\$5,535,539	\$5,450,094	\$5,394,469	\$3,933,076	\$4,003,961	\$4,111,146	\$63,818,680
Payments for Covered Services for the Month																	
Medical Services																	
CMS 1450/UB 92 Payments by the Claims Processing System																	
Inpatient - Maternity																	
Inpatient - Newborn																	
Inpatient - Medical																	
Inpatient - Surgery																	
Inpatient Other																	
Outpatient - Emergency Room																	
Outpatient - Laboratory																	
Outpatient - Radiology																	
Outpatient - Surgery																	
Outpatient - Other																	
CMS 1500 Payments by the Claims Processing System																	
Prof - E&M																	
Prof - Maternity																	
Prof - Surgery																	
Prof - DME																	
Prof - Lab																	
Prof - Radiology																	
Prof - Transportation																	
Prof - Other																	
Capitation Payments																	
Subcontractor Payments for Medical Services																	
Other Medical (Vision)																	
Behavioral Health (On behalf of Priority enrollees only)																	
Inpatient Payments by the Claims Processing System	\$1,115,126	\$1,166,837	\$783,787	\$3,065,750	\$1,147,778	\$844,543	\$965,331	\$929,755	\$924,448	\$809,860	\$1,092,748	\$1,114,638	\$1,187,829	\$1,142,276	\$1,303,827	\$1,064,589	\$12,327,621
Outpatient Payments by the Claims Processing System	\$918,896	\$910,562	\$895,025	\$2,724,483	\$869,201	\$897,516	\$874,096	\$889,101	\$861,663	\$826,176	\$902,975	\$863,264	\$882,076	\$905,908	\$964,892	\$934,802	\$10,671,671
Supported Housing Payments by the Claims Processing System	\$134,765	\$132,891	\$129,821	\$397,477	\$135,198	\$137,726	\$145,167	\$173,592	\$160,799	\$170,039	\$174,832	\$191,816	\$217,393	\$237,012	\$230,003	\$231,502	\$2,205,079
Intensive Outpatient Payments by the Claims Processing System	\$28,046	\$43,648	\$33,460	\$105,154	\$26,784	\$26,706	\$21,094	\$20,447	\$18,582	\$17,080	\$10,816	\$14,711	\$22,346	\$20,402	\$14,430	\$12,613	\$226,011
Partial Hospitalization Payments by the Claims Processing System	\$1,285	\$450		\$1,735		\$1,400		\$2,146		\$3,600	\$8,100	\$11,430	\$16,920	\$16,830	\$22,410	\$30,555	\$113,391
In Home Payments by the Claims Processing System																	
Transportation Payments by the Claims Processing System			\$205	\$205	\$198		\$228	\$304	\$270	\$461	\$12,276	\$10,532	\$7,642	\$12,181	\$10,536	\$9,081	\$63,706
Twenty-Three Hour Payments by the Claims Processing System	\$300	\$2,260	\$1,500	\$4,060	\$2,850	\$2,550	\$2,850	\$2,100	\$2,700	\$1,650	\$600				\$8,400	\$9,600	\$33,300
CMHA Capitation Payments																	
Other Capitation Payments	\$114,589	\$115,063	\$115,205	\$344,858	\$161,621	\$120,144	\$144,539	\$116,689	\$157,097	\$130,957	\$85,409	\$95,302	\$103,923	\$86,560	\$92,316	\$108,540	\$1,403,097
Grant Payments								\$24,155			\$14,608						\$38,763
Non-FFS Inpatient																	
Subcontractor Payments for Mental Health and Substance Abuse	\$1,770,650	\$1,801,520	\$1,779,680	\$5,351,850	\$1,781,570	\$1,802,780	\$1,779,680	\$1,796,060	\$1,792,280	\$1,779,890	\$1,804,880	\$1,766,450	\$1,767,710	\$1,791,440	\$1,758,680	\$1,732,640	\$21,354,060
Crisis Services Team Pass Through	\$255,315	\$256,370	\$256,688	\$768,372	\$260,742	\$267,699	\$257,554	\$287,018	\$278,899	\$285,304	\$215,338	\$218,570	\$219,884	\$221,058	\$223,127	\$221,985	\$2,957,178
Less:																	
Recoveries not Reflected in Claims Payments																	
Total Payments	\$4,338,973	\$4,429,600	\$3,995,371	\$12,763,945	\$4,385,941	\$4,101,965	\$4,190,539	\$4,217,212	\$4,220,893	\$4,025,016	\$4,322,582	\$4,286,712	\$4,425,723	\$4,433,666	\$4,628,622	\$4,355,906	\$51,593,878
Remaining IBNR	\$0	\$1,293	\$1,042	\$2,335	\$1,247	\$51,939	\$119,150	\$64,789	\$32,381	\$21,345	\$26,231	\$13,956	\$2,552	\$2,099	\$2,629	\$5,208	\$343,527
Payments and Remaining IBNR	\$4,338,973	\$4,430,893	\$3,996,413	\$12,766,279	\$4,387,188	\$4,153,904	\$4,309,689	\$4,282,001	\$4,253,274	\$4,046,362	\$4,348,814	\$4,300,668	\$4,428,275	\$4,435,765	\$4,631,251	\$4,361,114	\$51,937,405
Medical Loss Ratio	68.93%	71.39%	64.47%	68.27%	71.86%	68.79%	72.67%	73.08%	73.50%	71.35%	75.56%	78.91%	82.09%	112.78%	115.67%	106.08%	81.38%
Per Member Expense	\$307.88	\$318.99	\$288.31	\$305.09	\$321.45	\$307.84	\$325.23	\$327.20	\$329.06	\$319.47	\$351.77	\$353.52	\$367.40	\$367.80	\$377.28	\$344.95	\$340.29

Notes: 1) MLR - Priority tab includes revenue, membership, and medical expense for priority as well as state only and judicial populations. Base tab does not include state only and judicial revenue.  
2) Beginning February 2009, AmeriChoice membership and capitation revenue are reported on a restated basis as reflected on the R20 payment file from April 2007 to current reporting month. Please note that MLR submissions prior to February 2009 reported revenue in the month of payment with all retroactivity included in amount.  
3) MLR submissions prior to February 2009 included a 90 day restatement of membership. Membership on this report has been restated back to April of 2007.



Medical Loss Ratio Report - Priority Add-On Only  
Grand Region - Middle

MCO

Reporting Month	2008						2009						For the Year Ended 6/30/2009	
	Incurred Month						Incurred Month							
	July	August	September	October	November	December	January	February	March	April	May	June		
Enrollment (For Priority Enrollees Only)	12,782	13,102	13,237	13,419	13,432	13,383	11,865	11,899	12,100	#####	###	12,666	12,030	152,469
Capitation Revenue (Priority add-on payment only)	\$4,882,333	\$5,068,909	\$5,061,763	\$5,133,425	\$5,148,683	\$5,095,440	\$4,231,642	\$4,250,562	\$4,332,829	\$4,510,609	\$4,628,124	\$4,809,258	\$4,809,258	\$7,093,577
Payments for Covered Services for the Month														
Medical Services														
CMS 1450/UB 92 Payments by the Claims Processing System														
Inpatient - Maternity														
Inpatient - Newborn														
Inpatient - Medical														
Inpatient - Surgery														
Inpatient Other														
Outpatient - Emergency Room														
Outpatient - Laboratory														
Outpatient - Radiology														
Outpatient - Surgery														
Outpatient - Other														
CMS 1500 Payments by the Claims Processing System														
Prof - E&M														
Prof - Maternity														
Prof - Surgery														
Prof - DME														
Prof - Lab														
Prof - Radiology														
Prof - Transportation														
Prof - Other														
Capitation Payments														
Subcontractor Payments for Medical Services														
Other Medical (Vision)														
Behavioral Health (On behalf of Priority enrollees only)														
Inpatient Payments by the Claims Processing System	\$1,150,085	\$1,164,282	\$889,168	\$1,109,636	\$1,008,721	\$986,554	\$763,644	\$786,687	\$680,188	\$609,246	\$582,748	\$26,235	\$9,757,194	
Outpatient Payments by the Claims Processing System	\$955,990	\$1,045,461	\$954,454	\$977,035	\$1,152,376	\$1,583,376	\$1,520,365	\$1,621,646	\$1,655,097	\$1,705,655	\$1,586,602	\$759,147	\$15,517,204	
Supported Housing Payments by the Claims Processing System	\$223,918	\$221,186	\$228,099	\$242,081	\$224,687	\$253,971	\$256,600	\$285,443	\$309,785	\$291,370	\$307,505	\$109,517	\$2,954,162	
Intensive Outpatient Payments by the Claims Processing System	\$23,793	\$23,677	\$16,971	\$28,666	\$23,007	\$15,140	\$14,525	\$18,805	\$22,845	\$23,270	\$15,255	\$890	\$226,844	
Partial Hospitalization Payments by the Claims Processing System	\$37,175	\$34,305	\$27,285	\$30,900	\$6,075	\$17,336	\$16,945	\$23,424	\$22,846	\$23,390	\$18,060	\$1,870	\$259,611	
In Home Payments by the Claims Processing System														
Transportation Payments by the Claims Processing System	\$12,499	\$10,341	\$12,940	\$13,064	\$9,890	\$14,344	\$213	\$424	\$189	\$331			\$74,236	
Twenty-Three Hour Payments by the Claims Processing System	\$6,450	\$8,700	\$6,900	\$2,400	\$8,100	\$4,500	\$6,900	\$7,500	\$5,400	\$2,700	\$1,350	\$450	\$61,350	
CMHA Capitation Payments														
Other Capitation Payments	\$85,492	\$84,888	\$85,832	\$106,443	\$87,566	\$83,594	\$85,287	\$84,521	\$104,872	\$95,975	\$92,015	\$99,724	\$1,096,209	
Grant Payments											\$7,352	\$2,934	\$10,286	
Non-FFS Inpatient														
Subcontractor Payments for Mental Health and Substance Abuse	\$1,731,870	\$1,751,050	\$1,882,370	\$1,829,811	\$1,574,659	\$18,900	\$310,590	\$308,700	\$330,960	\$395,430	\$342,090		\$10,438,630	
Crisis Services Team Pass Through	\$218,330	\$219,412	\$217,246	\$220,952	\$215,780	\$228,116	\$219,173	\$221,400	\$216,919	\$220,266	\$231,977	\$215,812	\$2,645,384	
Less:														
Recoveries not Reflected in Capitation Payments														
Total Payments	\$4,445,602	\$4,563,302	\$4,321,255	\$4,560,989	\$4,310,860	\$3,168,032	\$3,194,242	\$3,588,550	\$3,349,101	\$3,367,634	\$3,184,954	\$1,216,580	\$13,041,109	
Remaining IBNR	\$7,047	\$13,417	\$15,331	\$21,818	\$6,953,45	\$116,894	\$108,163	\$133,944	\$189,872	\$374,163	\$1,038,196	\$2,409,956	\$4,489,744	
Payments and Remaining IBNR	\$4,452,648	\$4,576,718	\$4,336,586	\$4,582,806	\$4,317,813	\$3,284,916	\$3,302,405	\$3,722,494	\$3,538,973	\$3,741,796	\$4,223,150	\$3,626,536	\$17,530,853	
Medical Loss Ratio	91.20%	91.37%	85.67%	89.27%	84.91%	64.47%	78.04%	82.17%	81.68%	82.96%	91.25%	75.41%	83.25%	
Per Member Expense	\$348.35	\$349.31	\$327.60	\$341.52	\$325.48	\$245.45	\$278.33	\$293.52	\$292.47	\$298.06	\$333.42	\$301.46	\$311.74	

Notes:

Americhoice - Middle Tennessee  
 Reconciliation Between 2A and MLR Report  
 As of June 30, 2009

<u>Capitation Revenue</u>	<u>Revenue</u>
Revenue reported per MLR report	284,113,298
Restated revenue for prior months	5,283,788
	<b>289,397,086</b>
TennCare Capitation per 2A	<b>289,397,086</b>
<b>Difference</b>	<b>(0)</b>
<u>Claims &amp; Reserve</u>	<u>Claims</u>
Paid claims per the 2A	253,177,520
Change in IBNR	(12,048,015)
<b>Total 2A Paid Claims and Change in Reserves</b>	<b>241,129,505</b>
Incurring Claims per the MLR for the reporting period	257,541,081
Restated prior year incurred claims	(16,411,576)
<b>Adjusted MLR</b>	<b>241,129,505</b>
<b>Difference</b>	<b>0</b>