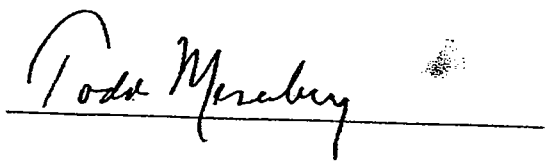
Grooms

v.

Maram

Expert Witness Report

Signed: 

Todd D. Menenberg
Navigant Consulting, Inc.

March 19, 2007

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I. Introduction

This report was prepared by Todd D. Menenberg of Navigant Consulting, Inc. ("Navigant"). Navigant is an international consulting firm providing litigation, financial and other services to clients. I am a Managing Director of Navigant. I am a certified public accountant. I have provided consulting services on a wide variety of health care-related financial and economic matters, including Medicaid disputes involving lost profits, damages, and economic projections. My experience is summarized in my resume, included as Attachment 1.

A listing of cases in which I have testified as an expert witness during the past four years is included as Attachment 2 to this report. My hourly billing rate in this matter is $180. I have no publications during the last ten years. Navigant's work on this matter was performed by me or under my supervision.

Navigant has been retained by legal counsel for the Illinois Department of Healthcare and Family Services (HFS) to provide expert testimony related to the cost and financial issues relevant to this matter.

I have considered certain documents in forming the opinions contained in this report. A list of these documents is attached to my report in Attachment 3. My opinions have been formed based on the information now available to me. As additional information becomes available (such as newly produced data and documents, expert reports, and testimony) or additional analyses are performed, I may evaluate and consider that information. As a result, I reserve the right to modify or supplement my opinions.

II. Background on the Illinois Medicaid Program

The Illinois Department of Healthcare and Family Services (HFS) is responsible for providing health care coverage for adults and children who qualify for Medicaid, and for providing Child Support Enforcement services to help ensure that Illinois children receive financial support from both parents. The Division of Medical Programs within HFS administers the Medical Assistance Programs, which provide health care coverage to low-income families lacking health insurance, children who are wards of the state, low-income senior citizens, individuals with disabilities, elderly in nursing facilities and people struggling with catastrophic medical bills.

Illinois has a Medicaid State Plan, approved by the Centers for Medicare and Medicaid Services (CMS) that specifies the healthcare services available to all Medicaid eligible individuals. In addition to services in the State Plan, Illinois operates several Medicaid home- and community-based (HCBS) "waiver" programs. Medicaid HCBS waiver programs allow qualified individuals to receive care in their own home or other community setting as an alternative to a nursing facility or other institutional setting. Individuals in a waiver program have access to specified services that are not generally included in Medicaid State Plans, including services such as homemaker, personal assistant, and home delivered meals, among others. In addition to these services, waiver recipients are able to access Medicaid State Plan services, such as physician visits, hospital stays, etc. For state waiver programs to be eligible for Federal matching funds, Federal regulations require that waiver programs be cost neutral, that is, services provided to waiver recipients must cost no more than services that would be provided to the same individuals were they to be served in institutional settings.

Physically disabled persons in the Illinois Medicaid program who require a nursing facility level of care generally receive services in one of two ways: 1) care is provided in a nursing facility or similar type of institutional setting; or, 2) care is provided at home or in a

community-based setting through an HCBS waiver program. Disabled children may receive services in either an institutional or an HCBS setting and are eligible to receive additional services through the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program. Under the EPSDT program, children can receive services that are not included in the Illinois Medicaid State Plan, but that are deemed medically necessary for the child's treatment.

Illinois' Medicaid HCBS Waiver Programs

Illinois' Medicaid HCBS waiver programs are administered by HFS as the Medicaid agency, but several of the waiver programs are operated by the Division of Rehabilitation Services (DRS), a division of the Illinois Department of Human Services (DHS).

Illinois has seven HCBS waiver programs:

TABLE 1

Waiver	Level of Institutional Care Required by Waiver Recipients	Operating State Agency
1) Medically Fragile/ Technology Dependent Children (MFTD)	Hospital / Skilled Pediatric Facility	University of Illinois, Division of Specialized Care for Children (DSCC)
2) Persons with Disabilities	Nursing Facility	DHS-DRS
3) Persons with Brain Injury	Nursing Facility	DHS-DRS
4) Adults with Developmental Disabilities	Intermediate Care Facility for the Mentally Retarded (ICF/MR)	DHS-Division of Developmental Disabilities Services
5) Persons Who are Elderly	Nursing Facility	Department of Aging
6) Persons with HIV or AIDS	Hospital	DHS-DRS
7) Supported Living Facilities	Assisted Living	HFS-Bureau of Long Term Care

Following is a more detailed description of the MFTD Waiver and the Persons with Disabilities Waiver.

MFTD Waiver

The MFTD Waiver is for individuals under age 21. To qualify for this waiver, individuals must need a level of care equivalent to that provided in a skilled pediatric facility (licensed as an ICF/MR) or a hospital. Participants in the waiver program have a dollar limit on the amount of services they can receive. This limit, which applies to each waiver recipient, is equal to 125% of the average per diem expenditure for hospital care in the previous fiscal year.[1] Approximately 530 children participated in the MFTD Waiver during the time period September 1, 2003 through August 31, 2004. During that same period, it cost approximately $2 million to provide waiver services and the EPSDT program spent an additional $49 million to provide nursing services to children in the MFTD Waiver.

Persons with Disabilities Waiver

The Persons with Disabilities Waiver is for Medicaid-eligible individuals under age 60. To qualify for this program, individuals must need a level of care equivalent to that provided in a nursing facility. Participants in the waiver program also have a dollar limit, which is generally referred to as a Service Cost Maximum (SCM). The SCM limits the cost of the service plan a waiver recipient can receive. The SCM is determined for each waiver applicant by way of an assessment tool, referred to as the Determination of Need (DON). Higher DON scores generally correspond with higher SCMs. A service plan, which sets out the allowed waiver services, is developed by DRS for each waiver recipient. The service plans are tailored to the specific medical conditions and needs of the recipients. These service plans are designed to

[1] The limit for ventilator dependent children is equal to the greater of: 1) 125% of the average per diem expenditure for hospital care in the previous fiscal year, or 2) 100% of the average per diem cost of the institution from which they were placed.

economically provide the necessary services within the recipient's SCM. Approximately 20,000 adults participated in the Persons with Disabilities Waiver during the time period October 1, 2003 through September 30, 2004. During that same period, it cost approximately $175 million to provide waiver services to persons in the Persons with Disabilities Waiver.

Illinois Nursing Facilities

There are over 700 nursing facilities participating in the Illinois Medicaid program. HFS reimburses nursing facilities on a per diem basis for days of care provided to Medicaid recipients. The per diem rates vary by facility and averaged approximately $95 per day as of Fall 2006, however, Illinois recently revised its rate setting methodology for nursing facilities, which resulted in new per diem rates effective January 1, 2007.[2] The average of these new rates increased to approximately $100 per day.

III. Nature of the Dispute

The Plaintiff in this matter is David Grooms. I understand that David has quadriplegia and is ventilator dependent. David received services through Illinois' MFTD Waiver program until he reached age 21 in October 2005. I understand that through the MFTD Waiver, David received nursing services at home from RNs and LPNs that cost approximately $16,000 per month as well as respite care costing approximately $1,000 per month. Nursing services in the MFTD Waiver are generally funded by EPSDT, which was described in Section II above.

Once David reached age 21, he was no longer eligible for the MFTD Waiver. In late 2005, DRS developed a service plan for David under the Persons with Disabilities Waiver. The Persons with Disabilities Waiver has different (lower) SCM levels (as a result of different cost

[2] Prior to the rate setting change, nursing facilities could receive "exceptional care rates" for services provided to certain individuals with special needs. The $95 per day average rate does not include consideration of individuals receiving exceptional care rates. With the change in the rate setting system, exceptional care rates were eliminated.

neutrality measures) than the MFTD Waiver.[3] The service plan developed for David under the Persons with Disabilities Waiver contained fewer nursing hours than he had received under the MFTD Waiver.[4] I understand that David has been receiving nursing services at the level approved by the service plan developed under the Persons with Disabilities Waiver; however, David now seeks to receive his "pre-age 21 levels of funding for home nursing services."[5] These additional requested nursing services would result in the cost of David's services exceeding his cost limitation in the Persons with Disabilities Waiver.[6]

IV. Scope of Work

I was asked by counsel to HFS to quantify the economic impact on the cost of the State's current Persons with Disabilities Waiver program, assuming David were to prevail on his request for additional home nursing services and other individuals were then also able to access additional waiver services. The two populations I was asked to evaluate are:

1) Current nursing facility residents who potentially would move from nursing facilities to community-based settings and receive services through the Persons with Disabilities Waiver program; and,

2) Current Persons with Disabilities Waiver recipients who currently use services at a cost that is less than their SCM.

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[3] The cost neutrality comparison for the MFTD Waiver is based on the cost of hospital or skilled pediatric facility services, whereas the comparison for the Persons with Disabilities Waiver is based on the cost of nursing facility services.

[4] The service plan contained, on average, approximately 12 hours per day of RN / LPN services and approximately 1 hour per day of personal assistance. The total cost of the plan was $8,660, which is under the SCM (based on an exceptional care rate) of $8,840 per month. Exceptional care rates are extended to waiver recipients on a case-by-case basis when the recipient would have qualified for an exceptional care rate in a nursing facility.

[5] Defendant's Amended Answer and Affirmative Defenses to Complaint, paragraph 45.B.

[6] The costs for David's pre-21 services were approximately $17,000 per month, which is approximately twice the cost of his service plan ($8,660) under the Persons with Disabilities Waiver.

If David prevails on his request for additional home nursing services, the cost of David's care would exceed his cost limitation under the Persons with Disabilities Waiver and would exceed the cost of his approved service plan for the waiver. Therefore, if David were to prevail, it is reasonable to believe that some current nursing facility residents that have been unable to access HCBS services through the Persons with Disabilities Waiver (because the cost of their home-based service needs exceeded their SCM) would then be able to receive services through the Persons with Disabilities Waiver. Similarly, if David prevails, it is reasonable to believe that current Persons with Disabilities Waiver recipients would likely access additional HCBS services up to (and potentially in excess of) their SCMs.[7]

The process I used to evaluate the two populations above and the results of my analyses are explained in more detail in the following section.

V. Process and Results

My colleagues and I had a series of discussions in early 2007 with a number of State personnel, including attorneys and executives with HFS and DHS. Our work included discussions with the following individuals:

- Matt Werner – HFS, Bureau of Rate Development and Analysis
- Barbara Ginder – HFS, Bureau of Interagency Coordination
- Kelly Cuningham – HFS, Bureau of Long Term Care
- Nancy Becker – HFS, Bureau of Rate Development and Analysis
- Sue Coonrod – HFS, Bureau of Long Term Care
- Teri Dederer – DHS, Division of Rehabilitation Services
- John Huston – Office of the Attorney General
- Karen Konieczny – Office of the Attorney General
- Joseph Howard – HFS, Office of General Counsel

[7] My analyses of nursing facility residents and individuals currently served under the Persons with Disabilities Waiver are not limited to individuals with quadriplegia or that are ventilator dependent. If David were to prevail in this matter, individuals with various medical conditions (not only those with quadriplegia or that are ventilator dependent) would likely access additional services.

As part of our discussions, we requested and received information relevant to this matter including:

- Medicaid HCBS waiver documents
- CMS 372 reports detailing HCBS waiver expenditures
- Statistical data on services and costs for individuals in the HCBS waiver programs
- Medicaid fee schedule for HCBS waiver services
- Statewide nursing facility utilization statistics
- Statewide nursing facility Medicaid per diem rate schedules
- Summary MDS data for selected nursing facility residents
- David's plan of care developed for the Persons with Disabilities Waiver
- Summary of the costs of David's services since October 2005
- General description of the process used to develop service plans for HCBS waiver recipients
- Selected depositions, pleadings, and court rulings in this and related matters

After our discussions with State personnel and our review of the information listed above, we were asked to specifically quantify the following:

1) the cost for additional individuals that would move from nursing facilities into the community, who would access Medicaid services through the Persons with Disabilities Waiver; and,

2) the additional cost for current Persons with Disabilities Waiver recipients that would access additional HCBS services up to (and potentially in excess of) their SCMs.

Due to the nature of this dispute, the elements needed to analyze these costs include financial, economic, and cost data, both historical and projected. The framework basically compares financial estimates of: (a) the cost of care for Medicaid recipients under the current programs, with (b) the estimated costs assuming changes to the programs. I have been asked to take various assumptions and data and design an appropriate cost model based on my experience and general practices of computing costs, which would determine a reasonable

estimate of costs at issue in this matter. The rest of this report describes the process I have undertaken and the results of my analyses.

Cost to Move Nursing Facility Residents into the Community

The objective of this part of my analysis was to estimate the additional cost related to nursing facility residents that would move from the nursing facility into the community and access Medicaid services through the Persons with Disabilities Waiver, if there were no SCM limitations.

This analysis relied on data from the September 30, 2006 MDS database[8] used for nursing facility rate setting. We worked with HFS personnel to identify Medicaid-eligible individuals under age 60 in nursing facilities. There were approximately 9,000 individuals meeting these criteria. We then identified individuals that were not scheduled to be discharged from the nursing facility in the next 90 days.[9] From this group of individuals, we then identified how many individuals had expressed a desire to leave the nursing facility[10] and had a support person "positive towards" their discharge from the nursing facility.[11] 216 individuals met all these criteria. Therefore, these individuals would potentially move from the nursing facility to the community and be served under the Persons with Disabilities Waiver were the SCM limitations removed.

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[8] HFS has access to data from assessments of nursing facility residents. This data is commonly referred to as Minimum Data Set (MDS) information. Resident assessments are completed periodically over the course of a year. The database used for our analysis included MDS information for residents in nursing facilities on September 30, 2006. The MDS information was based on the most recently completed assessment as of September 30, 2006. For certain residents who had recently been admitted to a nursing facility (or for those in a hospital or otherwise temporarily out of the nursing facility), there was a two week "grace period" to complete MDS assessments.

[9] The MDS assessment instrument includes question Q1c, which indicates whether or not the resident is expected to be discharged within 90 days.

[10] The MDS assessment instrument includes question Q1a, which asks whether the resident desires to return to the community.

[11] The MDS assessment instrument includes question Q1b, which indicates whether or not there is a person who is "positive towards" the resident's discharge from the nursing facility.

As part of this process, we observed that a number of the Medicaid nursing facility residents under age 60 *did not respond* to all three questions discussed above. Assuming that these non-responding individuals would have answered the three questions in a similar manner as those who *did respond* to all three questions, there would be a total of approximately 1,100 Medicaid residents (including the 216 individuals above) under age 60 that were not scheduled to be discharged within the next 90 days, desired to return to the community, and had a person positive towards their discharge. Therefore, for purposes of my analysis, I have determined that approximately 1,100 current nursing facility residents would potentially move from nursing facilities into the community and be served under the Persons with Disabilities Waiver were the SCM limitations removed.

We sorted the MDS data for the 216 individuals described above by their activities of daily living (ADL) scores.[12] The ADL scores ranged from 7 to 28. The largest group of individuals had an ADL score of 7. From the 216 MDS assessments, 28 were judgmentally selected for detailed clinical review. The sample was selected with the goal of obtaining residents whose ADL scores were distributed in a similar fashion to the ADL scores of the 216 identified residents.

The table on the following page details the number of MDS assessments by ADL score and the number selected for review.

[12] The ADL score indicates the level of support needed to accomplish activities of daily living, such as eating, bathing, grooming, transfer, etc. Lower scores indicate less need for assistance and higher scores indicate greater need for assistance.

TABLE 2		
ADL Score	Number of MDS Assessments	Number Selected for Review
7	67	8
8	8	1
9	8	1
10	5	1
11	8	1
12	8	1
13	0	0
14	6	1
15	3	1
16	6	1
17	7	1
18	2	1
19	6	1
20	6	1
21	8	1
22	13	1
23	9	1
24	10	1
25	11	1
26	13	1
27	9	1
28	3	1
Total	**216**	**28**

Sue Coonrod, an HFS nurse,[13] performed a detailed clinical review based on the MDS data for the 28 selected MDS assessments. From this information, she developed a medical

[13] Roberta Sue Coonrod is a Registered Nurse currently employed by the HFS as the Supervisor of the Carlinville Region for the Bureau of Long Term Care. She has been with HFS (formerly the Illinois Department of Public Aid) since January 1985 and in her current position since May 1999. Sue has maintained her Determination of Need (DON) certification as well as her certification in gerontological nursing. Throughout her career with HFS, she has completed waiver reviews for the Illinois Department on Aging (IDoA) and the DRS including care plan and provider reviews. She has also participated in facility and individual exceptional care reviews and has been the lead

description of each resident and created a plan of services that would potentially be used by the resident if they were to move from the nursing facility to the community. From the plan of care and the Medicaid fee schedule, we were able to estimate the cost to care for each individual in the community.

Exhibit 1 shows the Medicaid rate paid for each of the 28 individuals to the nursing facility as of Fall 2006 and the current rate (effective January 1, 2007), the estimated cost to care for the individual in the community, and the difference between the nursing facility rates and the estimated cost to care for the individual in the community. The average difference between the nursing facility rate as of Fall 2006 and the estimated cost to care for the individual in the community is $79.94 per day. The difference using the January 2007 nursing facility rates is $83.01 per day.

Assuming that the 28 assessments are representative of the 216 assessments, the additional cost for all 216 assessments would be approximately $17,000 per day or approximately $6.3 million annually ($79.94 per day x 216 individuals x 365 days) using the Fall 2006 nursing facility rates. A similar calculation based on the January 2007 rates results in an additional cost of approximately $6.5 million annually.

An extrapolation to account for the non-response issue discussed above, results in an additional annual cost for the approximately 1,100 individuals (including the 216 individuals above) of approximately $32 million using the Fall 2006 rates or approximately $33 million using the January 2007 rates.

supervisor for the DRS Brain Injury waiver. She has assisted facilities with their on-line MDS submissions. She has participated in MDS training and directs staff regarding the new rate system based on the MDS.

Cost to Provide Additional Services to Current Waiver Recipients

The objective of this part of my analysis was to estimate the potential additional cost if the limitations imposed by the DRS utilization review and service plan development process were eliminated and the Persons with Disabilities Waiver recipients were able to receive services up to their SCMs, and beyond.

We obtained data from the DRS program for fiscal year 2006 with the monthly costs of service for each individual, grouped by SCM. The monthly cost information was provided in $100 increments. We have been asked to determine the difference between the cost of the Persons with Disabilities Waiver recipients' service plans and their respective SCMs. We were also asked to perform similar calculations assuming each SCM were increased by 10% and 20%. Finally, we were asked to calculate the cost that would be incurred if each service plan were increased by 196%[14], which represents the difference between the cost of services that David requested and the cost of the service plan developed for David for the Persons with Disabilities Waiver.

The results (see Exhibit 2 for calculations) of these analyses indicate:

- The difference between the cost of the Persons with Disabilities Waiver recipients' service plans and their respective SCMs would be approximately $206 million annually.
- The difference between the cost of the Persons with Disabilities Waiver recipients' service plans and their respective SCMs increased by 10% would be approximately $258 million annually.

[14] The cost model is set up so that similar calculations can easily be done for varying percentages.

- The difference between the cost of the Persons with Disabilities Waiver recipients' service plans and their respective SCMs increased by 20% would be approximately $310 million annually.
- The cost of increasing each Persons with Disabilities Waiver recipient's service plan by 196% would be approximately $302 million annually.

Total Cost Impact

When the cost impacts related to nursing facility residents moving into the community are added to the cost impacts related to additional services that would be provided to current Persons with Disabilities Waiver recipients, the total annual costs range from approximately $238 million to $343 million annually.

Other Considerations

In addition to the costs described above, there are a number of potential additional costs should David prevail, which I have not attempted to quantify at this time. These include:

- Costs are only for the first year of the potential change; costs in future years would continue to be substantial
- Children currently in the MFTD Waiver will reach age 21, move into the Persons with Disabilities Waiver, and may access services at David's level of care
- The costs of developing and administering a significantly revised Persons with Disabilities Waiver program
- The initial costs incurred when a new Persons with Disabilities Waiver recipient moves from a nursing facility into the waiver program, e.g., home modifications, durable medical equipment, developing service plan, etc.
- The costs of increasing nursing facility rates

- The costs related to an increase in demand for nursing and a resulting increase in nursing wages and State payments for nursing services
- The costs related to other Medicaid-eligible people moving to Illinois to avail themselves of the Persons with Disabilities Waiver benefits

EXHIBITS

Additional Cost if Individuals Move from Nursing Facilities to the Community

EXHIBIT 1

	Nursing Facility Rates (Per Diems)		HCBS Services Cost	Difference	
Assessment #	Rate as of Fall 2006	Rate as of January 2007	Average Cost Per Day	HCBS Cost Compared to NF Rate as of Fall 2006	HCBS Cost Compared to NF Rate as of January 2007
	A	B	C	D=C-A	E=C-B
1	$101.54	$103.01	$14.72	($86.82)	($88.29)
2	101.91	106.82	91.92	(9.99)	(14.90)
3	84.44	87.48	183.10	98.66	95.62
4	81.63	90.56	193.76	112.13	103.20
5	101.91	106.82	190.12	88.21	83.30
6	108.15	111.15	183.50	75.35	72.35
7	101.52	105.14	213.48	111.96	108.34
8	81.63	90.56	210.13	128.50	119.57
9	101.88	104.23	23.79	(78.09)	(80.44)
10	103.13	106.13	46.54	(56.59)	(59.59)
11	102.10	105.46	161.80	59.70	56.34
12	105.08	108.71	180.45	75.37	71.74
13	272.17	102.13	279.07	6.90	176.94
14	94.71	95.78	256.43	161.72	160.65
15	121.70	128.12	223.27	101.57	95.15
16	107.70	109.18	239.31	131.61	130.13
17	111.15	126.74	236.15	125.00	109.41
18	97.99	99.25	267.35	169.36	168.10
19	97.96	163.80	248.60	150.64	84.80
20	89.92	93.03	217.92	128.00	124.89
21	81.79	85.62	224.71	142.92	139.09
22	107.03	147.17	235.18	128.15	88.01
23	112.04	115.77	259.44	147.40	143.67
24	155.32	102.82	194.24	38.92	91.42
25	105.26	109.22	226.90	121.64	117.68
26	87.39	90.50	173.90	86.51	83.40
27	104.48	106.61	105.44	0.96	(1.17)
28	171.23	104.92	249.79	78.56	144.87
TOTALS	$3,092.76	$3,006.73	$5,331.01	$2,238.25	$2,324.28
AVERAGES				$79.94	$83.01

Note:

The average HCBS cost per day amounts were calculated as monthly cost divided by 30.5 days (average of 30- and 31-day months in a year). If the average HCBS cost per day amounts were calculated by dividing the monthly costs by 31 days, the $79.94 and $83.01 average differences would decrease by less than 4%.

Additional Cost if Utilization Review Function Removed

Persons with Disabilities Waiver

EXHIBIT 2

Current Service Plans						Calculation of Additional Cost if Utilization Review Function Removed											
Projected Monthly Costs Per Person						Assume Cost at Full SCM			Assume Cost at SCM + 10%			Assume Cost at SCM + 20%			Assume Cost at 1.96 x Current Cost (David)		
SCM	Low	High	Midpoint	Number of People	Total Projected Monthly Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost
A	B	C	D=avg(B,C)	E	F=D*E	G=A*E	H=G-F	I=H*12	J=(A*1.1)*E	K=J-F	L=K*12	M=(A*1.2)*E	N=M-F	O=N*12	P=(F*1.96)	Q=P-F	R=Q*12
1,249	0	99	49.50	20	$990	$24,980	$23,990	$287,880	$27,478	$26,488	$317,856	$29,976	$28,986	$347,832	$1,940	$950	$11,400
1,249	100	199	149.50	410	61,295	512,090	450,795	5,409,540	563,299	502,004	6,024,048	614,508	553,213	6,638,556	120,138	58,843	706,116
1,249	200	299	249.50	301	75,100	375,949	300,849	3,610,188	413,544	338,444	4,061,328	451,139	376,039	4,512,468	147,196	72,096	865,152
1,249	300	399	349.50	710	248,145	886,790	638,645	7,663,740	975,469	727,324	8,727,888	1,064,148	816,003	9,792,036	486,364	238,219	2,858,628
1,249	400	499	449.50	813	365,444	1,015,437	649,993	7,799,916	1,116,981	751,537	9,018,444	1,218,524	853,080	10,236,960	716,270	350,826	4,209,912
1,249	500	599	549.50	1,123	617,089	1,402,627	785,538	9,426,456	1,542,890	925,801	11,109,612	1,683,152	1,066,063	12,792,756	1,209,494	592,405	7,108,860
1,249	600	699	649.50	908	589,746	1,134,092	544,346	6,532,152	1,247,501	657,755	7,893,060	1,360,910	771,164	9,253,968	1,155,902	566,156	6,793,872
1,249	700	799	749.50	919	688,791	1,147,831	459,040	5,508,480	1,262,614	573,823	6,885,876	1,377,397	688,606	8,263,272	1,350,030	661,239	7,934,868
1,249	800	899	849.50	542	460,429	676,958	216,529	2,598,348	744,654	284,225	3,410,700	812,350	351,921	4,223,052	902,441	442,012	5,304,144
1,249	900	999	949.50	516	489,942	644,484	154,542	1,854,504	708,932	218,990	2,627,880	773,381	283,439	3,401,268	960,286	470,344	5,644,128
1,249	1,000	1,099	1,049.50	280	293,860	349,720	55,860	670,320	384,692	90,832	1,089,984	419,664	125,804	1,509,648	575,966	282,106	3,385,272
1,249	1,100	1,199	1,149.50	295	339,103	368,455	29,352	352,224	405,301	66,198	794,376	442,146	103,043	1,236,516	664,642	325,539	3,906,468
1,249	1,200	1,299	1,224.50	126	154,287	157,374	3,087	37,044	173,111	18,824	225,888	188,849	34,562	414,744	302,403	148,116	1,777,392
1,435	0	99	49.50	5	248	7,175	6,927	83,124	7,893	7,645	91,740	8,610	8,362	100,344	486	238	2,856
1,435	100	199	149.50	242	36,179	347,270	311,091	3,733,092	381,997	345,818	4,149,816	416,724	380,545	4,566,540	70,911	34,732	416,784
1,435	200	299	249.50	71	17,715	101,885	84,170	1,010,040	112,074	94,359	1,132,308	122,262	104,547	1,254,564	34,721	17,006	204,072
1,435	300	399	349.50	260	90,870	373,100	282,230	3,386,760	410,410	319,540	3,834,480	447,720	356,850	4,282,200	178,105	87,235	1,046,820
1,435	400	499	449.50	413	185,644	592,655	407,011	4,884,132	651,921	466,277	5,595,324	711,186	525,542	6,306,504	363,862	178,218	2,138,616
1,435	500	599	549.50	729	400,586	1,046,115	645,529	7,746,348	1,150,727	750,141	9,001,692	1,255,338	854,752	10,257,024	785,149	384,563	4,614,756
1,435	600	699	649.50	673	437,114	965,755	528,641	6,343,692	1,062,331	625,217	7,502,604	1,158,906	721,792	8,661,504	856,743	419,629	5,035,548
1,435	700	799	749.50	949	711,276	1,361,815	650,539	7,806,468	1,497,997	786,721	9,440,652	1,634,178	922,902	11,074,824	1,394,101	682,825	8,193,900
1,435	800	899	849.50	594	504,603	852,390	347,787	4,173,444	937,629	433,026	5,196,312	1,022,868	518,265	6,219,180	989,022	484,419	5,813,028
1,435	900	999	949.50	734	696,933	1,053,290	356,357	4,276,284	1,158,619	461,686	5,540,232	1,263,948	567,015	6,804,180	1,365,989	669,056	8,028,672
1,435	1,000	1,099	1,049.50	460	482,770	660,100	177,330	2,127,960	726,110	243,340	2,920,080	792,120	309,350	3,712,200	946,229	463,459	5,561,508
1,435	1,100	1,199	1,149.50	390	448,305	559,650	111,345	1,336,140	615,615	167,310	2,007,720	671,580	223,275	2,679,300	878,678	430,373	5,164,476
1,435	1,200	1,299	1,249.50	369	461,066	529,515	68,449	821,388	582,467	121,401	1,456,812	635,418	174,352	2,092,224	903,689	442,623	5,311,476
1,435	1,300	1,399	1,349.50	230	310,385	330,050	19,665	235,980	363,055	52,670	632,040	396,060	85,675	1,028,100	608,355	297,970	3,575,640
1,435	1,400	1,499	1,417.50	124	175,770	177,940	2,170	26,040	195,734	19,964	239,568	213,528	37,758	453,096	344,509	168,739	2,024,868
1,597	0	99	49.50	1	50	1,597	1,547	18,564	1,757	1,707	20,484	1,916	1,866	22,392	98	48	576
1,597	100	199	149.50	145	21,678	231,565	209,887	2,518,644	254,722	233,044	2,796,528	277,878	256,200	3,074,400	42,489	20,811	249,732
1,597	200	299	249.50	27	6,737	43,119	36,382	436,584	47,431	40,694	488,328	51,743	45,006	540,072	13,205	6,468	77,616
1,597	300	399	349.50	83	29,009	132,551	103,542	1,242,504	145,806	116,797	1,401,564	159,061	130,052	1,560,624	56,858	27,849	334,188
1,597	400	499	449.50	116	52,142	185,252	133,110	1,597,320	203,777	151,635	1,819,620	222,302	170,160	2,041,920	102,198	50,056	600,672
1,597	500	599	549.50	249	136,826	397,653	260,827	3,129,924	437,418	300,592	3,607,104	477,184	340,358	4,084,296	268,179	131,353	1,576,236
1,597	600	699	649.50	320	207,840	511,040	303,200	3,638,400	562,144	354,304	4,251,648	613,248	405,408	4,864,896	407,366	199,526	2,394,312
1,597	700	799	749.50	542	406,229	865,574	459,345	5,512,140	952,131	545,902	6,550,824	1,038,689	632,460	7,589,520	796,209	389,980	4,679,760
1,597	800	899	849.50	395	335,553	630,815	295,262	3,543,144	693,897	358,344	4,300,128	756,978	421,425	5,057,100	657,684	322,131	3,865,572
1,597	900	999	949.50	549	521,276	876,753	355,477	4,265,724	964,428	443,152	5,317,824	1,052,104	530,828	6,369,936	1,021,701	500,425	6,005,100
1,597	1,000	1,099	1,049.50	404	423,998	645,188	221,190	2,654,280	709,707	285,709	3,428,508	774,226	350,228	4,202,736	831,036	407,038	4,884,456
1,597	1,100	1,199	1,149.50	374	429,913	597,278	167,365	2,008,380	657,006	227,093	2,725,116	716,734	286,821	3,441,852	842,629	412,716	4,952,592
1,597	1,200	1,299	1,249.50	422	527,289	673,934	146,645	1,759,740	741,327	214,038	2,568,456	808,721	281,432	3,377,184	1,033,486	506,197	6,074,364
1,597	1,300	1,399	1,349.50	270	364,365	431,190	66,825	801,900	474,309	109,944	1,319,328	517,428	153,063	1,836,756	714,155	349,790	4,197,480

Additional Cost if Utilization Review Function Removed
Persons with Disabilities Waiver

EXHIBIT 2

Current Service Plans						Calculation of Additional Cost if Utilization Review Function Removed											
Projected Monthly Costs Per Person						Assume Cost at Full SCM			Assume Cost at SCM + 10%			Assume Cost at SCM + 20%			Assume Cost at 1.96 x Current Cost (David)		
SCM	Low	High	Midpoint	Number of People	Total Projected Monthly Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost
A	B	C	D=avg(B,C)	E	F=D*E	G=A*E	H=G-F	I=H*12	J=(A*1.1)*E	K=J-F	L=K*12	M=(A*1.2)*E	N=M-F	O=N*12	P=(F*1.96)	Q=P-F	R=Q*12
1,597	1,400	1,499	1,449.50	391	566,755	624,427	57,672	692,064	686,870	120,115	1,441,380	749,312	182,557	2,190,684	1,110,840	544,085	6,529,020
1,597	1,500	1,599	1,548.50	297	459,905	474,309	14,404	172,848	521,740	61,835	742,020	569,171	109,266	1,311,192	901,414	441,509	5,298,108
1,912	0	99	49.50	3	149	5,736	5,587	67,044	6,310	6,161	73,932	6,883	6,734	80,808	292	143	1,716
1,912	100	199	149.50	54	8,073	103,248	95,175	1,142,100	113,573	105,500	1,266,000	123,898	115,825	1,389,900	15,823	7,750	93,000
1,912	200	299	249.50	14	3,493	26,768	23,275	279,300	29,445	25,952	311,424	32,122	28,629	343,548	6,846	3,353	40,236
1,912	300	399	349.50	34	11,883	65,008	53,125	637,500	71,509	59,626	715,512	78,010	66,127	793,524	23,291	11,408	136,896
1,912	400	499	449.50	50	22,475	95,600	73,125	877,500	105,160	82,685	992,220	114,720	92,245	1,106,940	44,051	21,576	258,912
1,912	500	599	549.50	104	57,148	198,848	141,700	1,700,400	218,733	161,585	1,939,020	238,618	181,470	2,177,640	112,010	54,862	658,344
1,912	600	699	649.50	160	103,920	305,920	202,000	2,424,000	336,512	232,592	2,791,104	367,104	263,184	3,158,208	203,683	99,763	1,197,156
1,912	700	799	749.50	256	191,872	489,472	297,600	3,571,200	538,419	346,547	4,158,564	587,366	395,494	4,745,928	376,069	184,197	2,210,364
1,912	800	899	849.50	205	174,148	391,960	217,812	2,613,744	431,156	257,008	3,084,096	470,352	296,204	3,554,448	341,330	167,182	2,006,184
1,912	900	999	949.50	320	303,840	611,840	308,000	3,696,000	673,024	369,184	4,430,208	734,208	430,368	5,164,416	595,526	291,686	3,500,232
1,912	1,000	1,099	1,049.50	254	266,573	485,648	219,075	2,628,900	534,213	267,640	3,211,680	582,778	316,205	3,794,460	522,483	255,910	3,070,920
1,912	1,100	1,199	1,149.50	214	245,993	409,168	163,175	1,958,100	450,085	204,092	2,449,104	491,002	245,009	2,940,108	482,146	236,153	2,833,836
1,912	1,200	1,299	1,249.50	325	406,088	621,400	215,312	2,583,744	683,540	277,452	3,329,424	745,680	339,592	4,075,104	795,932	389,844	4,678,128
1,912	1,300	1,399	1,349.50	206	277,997	393,872	115,875	1,390,500	433,259	155,262	1,863,144	472,646	194,649	2,335,788	544,874	266,877	3,202,524
1,912	1,400	1,499	1,449.50	340	492,830	650,080	157,250	1,887,000	715,088	222,258	2,667,096	780,096	287,266	3,447,192	965,947	473,117	5,677,404
1,912	1,500	1,599	1,549.50	204	316,098	390,048	73,950	887,400	429,053	112,955	1,355,460	468,058	151,960	1,823,520	619,552	303,454	3,641,448
1,912	1,600	1,699	1,649.50	166	273,817	317,392	43,575	522,900	349,131	75,314	903,768	380,870	107,053	1,284,636	536,681	262,864	3,154,368
1,912	1,700	1,799	1,749.50	259	453,121	495,208	42,087	505,044	544,729	91,608	1,099,296	594,250	141,129	1,693,548	888,117	434,996	5,219,952
1,912	1,800	1,899	1,849.50	173	319,964	330,776	10,812	129,744	363,854	43,890	526,680	396,931	76,967	923,604	627,129	307,165	3,685,980
1,912	1,900	1,999	1,906.00	65	123,890	124,280	390	4,680	136,708	12,818	153,816	149,136	25,246	302,952	242,824	118,934	1,427,208
2,247	100	199	149.50	2	299	4,494	4,195	50,340	4,943	4,644	55,728	5,393	5,094	61,128	586	287	3,444
2,247	200	299	249.50	1	250	2,247	1,997	23,964	2,472	2,222	26,664	2,696	2,446	29,352	490	240	2,880
2,247	300	399	349.50	16	5,592	35,952	30,360	364,320	39,547	33,955	407,460	43,142	37,550	450,600	10,960	5,368	64,416
2,247	400	499	449.50	13	5,844	29,211	23,367	280,404	32,132	26,288	315,456	35,053	29,209	350,508	11,454	5,610	67,320
2,247	500	599	549.50	35	19,233	78,645	59,412	712,944	86,510	67,277	807,324	94,374	75,141	901,692	37,697	18,464	221,568
2,247	600	699	649.50	46	29,877	103,362	73,485	881,820	113,698	83,821	1,005,852	124,034	94,157	1,129,884	58,559	28,682	344,184
2,247	700	799	749.50	112	83,944	251,664	167,720	2,012,640	276,830	192,886	2,314,632	301,997	218,053	2,616,636	164,530	80,586	967,032
2,247	800	899	849.50	81	68,810	182,007	113,197	1,358,364	200,208	131,398	1,576,776	218,408	149,598	1,795,176	134,868	66,058	792,696
2,247	900	999	949.50	169	160,466	379,743	219,277	2,631,324	417,717	257,251	3,087,012	455,692	295,226	3,542,712	314,513	154,047	1,848,564
2,247	1,000	1,099	1,049.50	134	140,633	301,098	160,465	1,925,580	331,208	190,575	2,286,900	361,318	220,685	2,648,220	275,641	135,008	1,620,096
2,247	1,100	1,199	1,149.50	118	135,641	265,146	129,505	1,554,060	291,661	156,020	1,872,240	318,175	182,534	2,190,408	265,856	130,215	1,562,580
2,247	1,200	1,299	1,249.50	179	223,661	402,213	178,552	2,142,624	442,434	218,773	2,625,276	482,656	258,995	3,107,940	438,376	214,715	2,576,580
2,247	1,300	1,399	1,349.50	150	202,425	337,050	134,625	1,615,500	370,755	168,330	2,019,960	404,460	202,035	2,424,420	396,753	194,328	2,331,936
2,247	1,400	1,499	1,449.50	236	342,082	530,292	188,210	2,258,520	583,321	241,239	2,894,868	636,350	294,268	3,531,216	670,481	328,399	3,940,788
2,247	1,500	1,599	1,549.50	127	196,787	285,369	88,582	1,062,984	313,906	117,119	1,405,428	342,443	145,656	1,747,872	385,703	188,916	2,266,992
2,247	1,600	1,699	1,649.50	115	189,693	258,405	68,712	824,544	284,246	94,553	1,134,636	310,086	120,393	1,444,716	371,798	182,105	2,185,260
2,247	1,700	1,799	1,749.50	158	276,421	355,026	78,605	943,260	390,529	114,108	1,369,296	426,031	149,610	1,795,320	541,785	265,364	3,184,368
2,247	1,800	1,899	1,849.50	163	301,469	366,261	64,792	777,504	402,887	101,418	1,217,016	439,513	138,044	1,656,528	590,879	289,410	3,472,920
2,247	1,900	1,999	1,949.50	255	497,123	572,985	75,862	910,344	630,284	133,161	1,597,932	687,582	190,459	2,285,508	974,361	477,238	5,726,856
2,247	2,000	2,099	2,049.50	127	260,287	285,369	25,082	300,984	313,906	53,619	643,428	342,443	82,156	985,872	510,163	249,876	2,998,512

Additional Cost if Utilization Review Function Removed
Persons with Disabilities Waiver

EXHIBIT 2

Current Service Plans						Calculation of Additional Cost if Utilization Review Function Removed											
Projected Monthly Costs Per Person						Assume Cost at Full SCM			Assume Cost at SCM + 10%			Assume Cost at SCM + 20%			Assume Cost at 1.96 x Current Cost (David)		
SCM	Low	High	Midpoint	Number of People	Total Projected Monthly Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost
A	B	C	D=avg(B,C)	E	F=D*E	G=A*E	H=G-F	I=H*12	J=(A*1.1)*E	K=J-F	L=K*12	M=(A*1.2)*E	N=M-F	O=N*12	P=(F*1.96)	Q=P-F	R=Q*12
2,247	2,100	2,199	2,149.50	129	277,286	289,863	12,577	150,924	318,849	41,563	498,756	347,836	70,550	846,600	543,481	266,195	3,194,340
2,247	2,200	2,299	2,223.50	90	200,115	202,230	2,115	25,380	222,453	22,338	268,056	242,676	42,561	510,732	392,225	192,110	2,305,320
2,430	100	199	149.50	1	150	2,430	2,280	27,360	2,673	2,523	30,276	2,916	2,766	33,192	294	144	1,728
2,430	300	399	349.50	1	350	2,430	2,080	24,960	2,673	2,323	27,876	2,916	2,566	30,792	686	336	4,032
2,430	400	499	449.50	3	1,349	7,290	5,941	71,292	8,019	6,670	80,040	8,748	7,399	88,788	2,644	1,295	15,540
2,430	500	599	549.50	6	3,297	14,580	11,283	135,396	16,038	12,741	152,892	17,496	14,199	170,388	6,462	3,165	37,980
2,430	600	699	649.50	19	12,341	46,170	33,829	405,948	50,787	38,446	461,352	55,404	43,063	516,756	24,188	11,847	142,164
2,430	700	799	749.50	31	23,235	75,330	52,095	625,140	82,863	59,628	715,536	90,396	67,161	805,932	45,541	22,306	267,672
2,430	800	899	849.50	24	20,388	58,320	37,932	455,184	64,152	43,764	525,168	69,984	49,596	595,152	39,960	19,572	234,864
2,430	900	999	949.50	69	65,516	167,670	102,154	1,225,848	184,437	118,921	1,427,052	201,204	135,688	1,628,256	128,411	62,895	754,740
2,430	1,000	1,099	1,049.50	60	62,970	145,800	82,830	993,960	160,380	97,410	1,168,920	174,960	111,990	1,343,880	123,421	60,451	725,412
2,430	1,100	1,199	1,149.50	63	72,419	153,090	80,671	968,052	168,399	95,980	1,151,760	183,708	111,289	1,335,468	141,941	69,522	834,264
2,430	1,200	1,299	1,249.50	71	88,715	172,530	83,815	1,005,780	189,783	101,068	1,212,816	207,036	118,321	1,419,852	173,881	85,166	1,021,992
2,430	1,300	1,399	1,349.50	75	101,213	182,250	81,037	972,444	200,475	99,262	1,191,144	218,700	117,487	1,409,844	198,377	97,164	1,165,968
2,430	1,400	1,499	1,449.50	127	184,087	308,610	124,523	1,494,276	339,471	155,384	1,864,608	370,332	186,245	2,234,940	360,811	176,724	2,120,688
2,430	1,500	1,599	1,549.50	58	89,871	140,940	51,069	612,828	155,034	65,163	781,956	169,128	79,257	951,084	176,147	86,276	1,035,312
2,430	1,600	1,699	1,649.50	74	122,063	179,820	57,757	693,084	197,802	75,739	908,868	215,784	93,721	1,124,652	239,243	117,180	1,406,160
2,430	1,700	1,799	1,749.50	87	152,207	211,410	59,203	710,436	232,551	80,344	964,128	253,692	101,485	1,217,820	298,326	146,119	1,753,428
2,430	1,800	1,899	1,849.50	96	177,552	233,280	55,728	668,736	256,608	79,056	948,672	279,936	102,384	1,228,608	348,002	170,450	2,045,400
2,430	1,900	1,999	1,949.50	168	327,516	408,240	80,724	968,688	449,064	121,548	1,458,576	489,888	162,372	1,948,464	641,931	314,415	3,772,980
2,430	2,000	2,099	2,049.50	77	157,812	187,110	29,298	351,576	205,821	48,009	576,108	224,532	66,720	800,640	309,312	151,500	1,818,000
2,430	2,100	2,199	2,149.50	118	253,641	286,740	33,099	397,188	315,414	61,773	741,276	344,088	90,447	1,085,364	497,136	243,495	2,921,940
2,430	2,200	2,299	2,249.50	97	218,202	235,710	17,508	210,096	259,281	41,079	492,948	282,852	64,650	775,800	427,676	209,474	2,513,688
2,430	2,300	2,399	2,349.50	144	338,328	349,920	11,592	139,104	384,912	46,584	559,008	419,904	81,576	978,912	663,123	324,795	3,897,540
2,430	2,400	2,499	2,415.00	78	188,370	189,540	1,170	14,040	208,494	20,124	241,488	227,448	39,078	468,936	369,205	180,835	2,170,020
2,612	100	199	149.50	1	150	2,612	2,462	29,544	2,873	2,723	32,676	3,134	2,984	35,808	294	144	1,728
2,612	300	399	349.50	1	350	2,612	2,262	27,144	2,873	2,523	30,276	3,134	2,784	33,408	686	336	4,032
2,612	500	599	549.50	2	1,099	5,224	4,125	49,500	5,746	4,647	55,764	6,269	5,170	62,040	2,154	1,055	12,660
2,612	600	699	649.50	1	650	2,612	1,962	23,544	2,873	2,223	26,676	3,134	2,484	29,808	1,274	624	7,488
2,612	700	799	749.50	7	5,247	18,284	13,037	156,444	20,112	14,865	178,380	21,941	16,694	200,328	10,284	5,037	60,444
2,612	800	899	849.50	7	5,947	18,284	12,337	148,044	20,112	14,165	169,980	21,941	15,994	191,928	11,656	5,709	68,508
2,612	900	999	949.50	10	9,495	26,120	16,625	199,500	28,732	19,237	230,844	31,344	21,849	262,188	18,610	9,115	109,380
2,612	1,000	1,099	1,049.50	15	15,743	39,180	23,437	281,244	43,098	27,355	328,260	47,016	31,273	375,276	30,856	15,113	181,356
2,612	1,100	1,199	1,149.50	16	18,392	41,792	23,400	280,800	45,971	27,579	330,948	50,150	31,758	381,096	36,048	17,656	211,872
2,612	1,200	1,299	1,249.50	23	28,739	60,076	31,337	376,044	66,084	37,345	448,140	72,091	43,352	520,224	56,328	27,589	331,068
2,612	1,300	1,399	1,349.50	23	31,039	60,076	29,037	348,444	66,084	35,045	420,540	72,091	41,052	492,624	60,836	29,797	357,564
2,612	1,400	1,499	1,449.50	48	69,576	125,376	55,800	669,600	137,914	68,338	820,056	150,451	80,875	970,500	136,369	66,793	801,516
2,612	1,500	1,599	1,549.50	21	32,540	54,852	22,312	267,744	60,337	27,797	333,564	65,822	33,282	399,384	63,778	31,238	374,856
2,612	1,600	1,699	1,649.50	30	49,485	78,360	28,875	346,500	86,196	36,711	440,532	94,032	44,547	534,564	96,991	47,506	570,072
2,612	1,700	1,799	1,749.50	52	90,974	135,824	44,850	538,200	149,406	58,432	701,184	162,989	72,015	864,180	178,309	87,335	1,048,020
2,612	1,800	1,899	1,849.50	70	129,465	182,840	53,375	640,500	201,124	71,659	859,908	219,408	89,943	1,079,316	253,751	124,286	1,491,432
2,612	1,900	1,999	1,949.50	104	202,748	271,648	68,900	826,800	298,813	96,065	1,152,780	325,978	123,230	1,478,760	397,386	194,638	2,335,656

Additional Cost if Utilization Review Function Removed
Persons with Disabilities Waiver

EXHIBIT 2

Current Service Plans						Calculation of Additional Cost if Utilization Review Function Removed											
Projected Monthly Costs Per Person						Assume Cost at Full SCM			Assume Cost at SCM + 10%			Assume Cost at SCM + 20%			Assume Cost at 1.96 x Current Cost (David)		
SCM	Low	High	Midpoint	Number of People	Total Projected Monthly Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost	Total Projected Monthly Cost	Monthly Additional Cost	Annual Additional Cost
A	B	C	D=avg(B,C)	E	F=D*E	G=A*E	H=G-F	I=H*12	J=(A*1.1)*E	K=J-F	L=K*12	M=(A*1.2)*E	N=M-F	O=N*12	P=(F*1.96)	Q=P-F	R=Q*12
2,612	2,000	2,099	2,049.50	37	75,832	96,644	20,812	249,744	106,308	30,476	365,712	115,973	40,141	481,692	148,631	72,799	873,588
2,612	2,100	2,199	2,149.50	62	133,269	161,944	28,675	344,100	178,138	44,869	538,428	194,333	61,064	732,768	261,207	127,938	1,535,256
2,612	2,200	2,299	2,249.50	54	121,473	141,048	19,575	234,900	155,153	33,680	404,160	169,258	47,785	573,420	238,087	116,614	1,399,368
2,612	2,300	2,399	2,349.50	77	180,912	201,124	20,212	242,544	221,236	40,324	483,888	241,349	60,437	725,244	354,588	173,676	2,084,112
2,612	2,400	2,499	2,449.50	132	323,334	344,784	21,450	257,400	379,262	55,928	671,136	413,741	90,407	1,084,884	633,735	310,401	3,724,812
2,612	2,500	2,599	2,549.50	112	285,544	292,544	7,000	84,000	321,798	36,254	435,048	351,053	65,509	786,108	559,666	274,122	3,289,464
2,612	2,600	2,699	2,606.00	84	218,904	219,408	504	6,048	241,349	22,445	269,340	263,290	44,386	532,632	429,052	210,148	2,521,776
		Totals		26,189	$26,197,059	$43,351,119	$17,154,060	$205,848,720	$47,686,235	$21,489,176	$257,870,112	$52,021,345	$25,824,286	$309,891,432	$51,346,227	$25,149,168	$301,790,016
		Rounded						*206,000,000*			*258,000,000*			*310,000,000*			*302,000,000*

Note: The data indicated that service plans for 38 individuals had projected monthly cost per person in excess of the SCM.
Based on discussions with DRS staff, we understand that these are cases where additional services were temporarily authorized for special circumstances.
For purposes of this analysis, we have excluded these 38 service plans and their projected costs.

For projected cost intervals (above) where the monthly SCM fell within the monthly projected cost range, the Midpoint (col. D) is calculated as the average between the Low (col. B) and the SCM (col. A).