

# ATTACHMENT 11

## PER MEMBER PER MONTH PAYMENT

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Administración de Seguros de Salud  
 July 1, 2020 to September 30, 2021  
 GHP (Vital) PMPM Premium Rates

Rate Cell	PMPM
Medicaid Pulmonary	\$231.19
Medicaid Diabetes or Low Cardio	\$386.20
Medicaid High Cardio	\$784.62
Medicaid Renal	\$1,343.63
Medicaid Cancer	\$2,564.67
Medicaid Male 45+	\$147.96
Medicaid Male 19-44	\$96.78
Medicaid Male 14-18	\$83.72
Medicaid Female 45+	\$194.72
Medicaid Female 19-44	\$130.35
Medicaid Female 14-18	\$88.82
Medicaid Age 7-13	\$76.49
Medicaid Age 1-6	\$112.52
Medicaid Under 1	\$304.22
Public EE Commonwealth Pulmonary	\$184.28
Public EE Commonwealth Diabetes or Low Cardio	\$233.91
Public EE Commonwealth High Cardio	\$441.73
Public EE Commonwealth Renal	\$652.83
Public EE Commonwealth Cancer	\$1,520.12
Public EE Commonwealth Male 45+	\$101.96
Public EE Commonwealth Male 19-44	\$64.70
Public EE Commonwealth Male 14-18	\$77.11
Public EE Commonwealth Female 45+	\$136.74
Public EE Commonwealth Female 19-44	\$102.63
Public EE Commonwealth Female 14-18	\$81.01
Public EE Commonwealth Age 7-13	\$77.89
Public EE Commonwealth Age 1-6	\$108.10
Public EE Commonwealth Under 1	\$372.99
CHIP Pulmonary	\$253.23
CHIP Diabetes	\$1,042.92
CHIP Age 7-13	\$87.49
CHIP Age 14+	\$97.03
CHIP Age 1-6	\$126.60
CHIP Under 1	\$302.89
Dual Eligible Part A and B	\$359.73
Dual Eligible Part A Only	\$393.32
Commonwealth to Medicaid Pulmonary	\$197.39
Commonwealth to Medicaid Diabetes or Low Cardio	\$254.35
Commonwealth to Medicaid High Cardio	\$472.17
Commonwealth to Medicaid Renal	\$695.20
Commonwealth to Medicaid Cancer	\$1,571.43

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Commonwealth to Medicaid Male 45+	\$108.42
Commonwealth to Medicaid Male 19-44	\$69.37
Commonwealth to Medicaid Male 14-18	\$80.71
Commonwealth to Medicaid Female 45+	\$147.38
Commonwealth to Medicaid Female 19-44	\$109.17
Commonwealth to Medicaid Female 14-18	\$83.99
Commonwealth to Medicaid Age 7-13	\$81.92
Commonwealth to Medicaid Age 1-6	\$111.61
Commonwealth to Medicaid Under 1	\$379.93
PRPL Medicaid Male 45+	\$387.51
PRPL Medicaid Male 19-44	\$170.63
PRPL Medicaid Male 14-18	\$121.99
PRPL Medicaid Female 45+	\$451.41
PRPL Medicaid Female 19-44	\$222.00
PRPL Medicaid Female 14-18	\$143.11
PRPL Medicaid Age 7-13	\$117.69
PRPL Medicaid Age 1-6	\$173.24
PRPL Medicaid Under 1	\$354.64
PRPL CHIP Age 7-13	\$122.71
PRPL CHIP Age 14+	\$145.26
PRPL CHIP Age 1-6	\$183.62
PRPL CHIP Under 1	\$319.92
Transferred to CHIP Under 1	\$302.89
Transferred to CHIP Age 1-6	\$126.60
Transferred to CHIP Age 7-13	\$87.49
Transferred to CHIP Age 14+	\$97.03
Transferred to CHIP Diabetes	\$1,042.92
Transferred to CHIP Pulmonary	\$253.23
Maternity Kick Payment	\$5,370.02
Foster Child or Domestic Abuse	\$448.80

