## Risk Pool Detail for Qualifying SSP Participants

Includes SSP participants with capitation payments and evaluates each month if eligible for risk share. If not all months for participant are risk share eligible, the month's not eligible must subtract the total cost from the risk threshold and then total for all the months summed to get that person's risk share eligible. Note: this may not match state if not all risk pool is paid out, bills have not yet been sent or were sent after the state calculated the risk pool, if any of the participants listed have rejected encounters, or if anyone has been paid the non-SSP capitation rate and not yet the SSP rate.

Agent Code: 04 Date Range: 01-OCT-2021 to 21-JUL-2022 Programs: 'WA-Y'

SSN	Name	M. P ! I ID	Month	SSP Cat	T-4-1 C4	Capitation _	Risk Pool		Risk Share
		Medicaid ID			Total Cost	<b>Payment</b>	Threshold	Added	Eligible

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