## DEPARTMENT OF HEALTH CARE POLICY AND FINANCING JUNE 2006 EXPENDITURE REPORT FY 2005-06

		(C) CUMULATIVE	(D) CUMULATIVE ALL PRIOR	
		TOTAL	MONTHS OF	(E) SUM OF ALL
(A) ORGANIZATION	(B) ORGANIZATION NAME/	JUNE 2006	FISCAL YEAR	MONTHS
NUMBER	SERVICE CATEGORY	CASH BASIS	CASH BASIS	CASH BASIS
0108	Prior Fiscal Year Accounts Payable	-	-	-
5411	Injectibles Drug Rebates	\$28,295	(\$1,019,265)	(\$990,971)
5430	Home and Community Based Services-Brain Injury	\$829,110	\$7,830,197	\$8,659,307
5431	Single Entry Points	\$143,064	\$16,403,999	\$16,547,063
5432	Private Duty Nursing	\$1,362,360	\$13,995,102	\$15,357,463
5433 5434	Home and Community Based Service-Mentally III Home and Community Based Services-Model 200	\$1,286,467 \$65,868	\$12,611,242 \$584,778	\$13,897,709 \$650,646
5434 5435	Home and Community Based Services-Model 200 Home Health	\$05,808 \$8,288,232	\$584,778 \$82,009,040	\$050,646 \$90,297,272
5435 5437				
5437	Home and Community Based Services-Client Services Home and Community Based Services-People Living With Aids	\$9,058,308 \$50,961	\$93,003,596 \$421,822	\$102,061,904 \$472,783
5440	Class 1 Nursing Homes	\$36,023,935	\$407,287,084	\$443,311,019
5440	Class 2 and 4 Nursing Homes	\$179,787	\$1,257,063	\$1,436,850
5442	Consumer Directed Attendant Support Waiver Costs	\$725,714	\$6,512,175	\$7,237,889
5444	Hospice Program	\$2,042,071	\$24,925,098	\$26,967,168
5445	Health Maintenance Organizations	\$17,094,347	\$137.687.845	\$154.782.191
5446	Program for All Inclusive Care of the Elderly	\$3,304,467	\$37,166,023	\$40,470,490
5450	Pharmacy	\$11,977,744	\$222,346,864	\$234,324,608
5451	Drug Rebates	(\$8,188,721)	(\$69,577,859)	(\$77,766,580)
5452	Early and Periodic Screening, Diagnosis and Treatment	\$645,028	\$7,715,923	\$8,360,951
5454	Federally Qualified Health Centers	\$4,499,493	\$57,445,181	\$61,944,674
5455	Physician Services Program	\$9,151,295	\$125,581,815	\$134,733,110
5456	Family Planning Program	\$135,412	\$206,767	\$342,178
5457	Lab and X-ray	\$1,497,288	\$17,630,830	\$19,128,119
5458	Rural Health Clinic	\$384,436	\$4,338,361	\$4,722,797
5459	Dental Services	\$3,515,424	\$41,639,406	\$45,154,829
5460	Durable Medical Equipment	\$4,714,130	\$53,256,509	\$57,970,639
5461	Transportation	\$330,151	\$3,231,275	\$3,561,426
5462	County Transportation	(\$2,927)	(\$8,237)	(\$11,164
5464	Breast and Cervical Cancer	\$4,719,743	\$2,088,520	\$6,808,264
5465	Inpatient Hospital	\$25,327,318	\$270,422,106	\$295,749,424
5466	Outpatient Hospital	\$8,973,669	\$95,496,295	\$104,469,964
5475	Co-insurance	\$980,720	\$16,918,267	\$17,898,987
5476	Supplemental Medicare Insurance Benefits	\$6,332,280	\$64,443,324	\$70,775,604
5477	Health Insurance Buy-in	\$39,202	\$484,992	\$524,194
5483	Administrative Service Organizations	(\$5,056,480)	\$75,537,578	\$70,481,098
5487	Disease Management	\$42,511	\$279,843	\$322,355
5500	Medicaid Eligible Refugee	\$28,011 \$1,929,948	\$4,023	\$32,034 \$1,929,684
5540 5566	Nursing Facility Upper Payment Limit	\$1,929,948 \$11,609,079	(\$264) \$0	\$1,929,084 \$11,609,079
5567	Outpatient Upper Payment Limit Home Health Upper Payment Limit	\$11,009,079	\$0 \$0	\$11,609,079 \$329,204
5569				
5509	Presumptive Eligibility	\$481,371	\$2,163,169	\$2,644,540
	FY 05-06 Medical Services Premium Total Expenditures	\$164,878,316	\$1,832,320,487	\$1,997,198,802
	Original Appropriation Authority:		\$2 105 CC9 252	
	FY 05-06 Long Bill Amount (SB 05-209) HB 05 1066 Obseity Pilot		\$2,127,668,373 \$222 823	
	HB 05-1066 Obesity Pilot		\$222,823	
	HB 05-1131 Pharmacist to Redispense Specified Unused Meds HB 05-1262 Tobacco Bill Sect 33(1) ( C ) ( D )		(\$733,970) \$52,068,550	
	HB 05-1202 Tobacco Bill Sect 35(1) (C) (D) HB 05-1243 Consumer Directed Under Medicaid Sect 12 (D)		\$52,068,559 \$1,008,375	
	HB 05-1243 Consumer Directed Under Medicaid Sect 12 ( D ) HB 05-1243 Consumer Directed Under Medicaid Sect 12 ( E )		(\$2,012,790)	
	HB 05-1245 Consumer Directed Onder Medicald Sect 12 (E) HB 06-1217 Supplemental Bill - Denver Health & Hospitals - DSH Finand	ing	\$2,925,270	
	HB 06-1217 Supplemental Bill - Change Timing for Upper Payment Limi	(\$15,185,388)		
	HB 06-1217 Supplemental Bin - Change Thing for Opper Payment Emin HB 06-1217 Move MMA Clawback Payment to Other Medical Services I	(\$30,984,982)		
	HB 06-1369 Supplemental Bill #2 - Rate Increases for Medical Providers	(\$50,984,982) \$6,240,000		
	HB 06-1385 Long Bill Add On Section		(\$141,569,712)	
	Total Medical Services Premiums Spending Authority as of June 30, 2006		\$1,999,646,558	
	FY 05-06 Medical Services Premiums Expenditures as of June 30, 2006		\$1,997,198,802	
	Remaining Appropriation		\$2,447,756	

## Department of Health Care Policy and Financing Monthly Medicaid Caseload Report for FY 05-06

MEDICAID CASELOAD FY 05-06 WITHOUT RETROACTIVITY														
Current Year	Supplemental Security Income 65+ (OAP-A)	Supplemental Security Income 60 to 64 Years of Age (OAP-B)	r.	Categorically Eligible Low Income Adults (AFDC-A)	Breast & Cervical Cancer Program	Eligible Children (AFDC- C/BC)	Foster Care	Baby Care Adults	Non- Citizens	Qualified Medicare Beneficiaries and Special Low Income Medicare Beneficiaries	TOTAL	Monthly Growth	Monthly Growth Rate	Number of Days Captured in Monthly Figures
July	36,376	6,072	47,214	57,905	171	212,576	15,958	5,151	5,187	9,416	396,026	(14,914)	-3.589%	28
August	36,351	6,060	47,358	57,827	178	213,413	16,078	5,434	5,588	9,710	397,997	1,971	0.498%	35
September	36,430	6,161	47,467	57,922	186	212,975	16,249	5,259	5,670	10,063	398,382	385	0.097%	28
October	36,396	6,132	47,365	56,684	192	207,644	16,237	4,834	5,523	10,162	391,169	(7,213)	-1.811%	28
November	36,612	6,134	47,783	57,923	191	209,732	16,351	4,775	5,732	10,584	395,817	4,648	1.188%	35
December	36,256	6,061	47,429	57,944	191	210,394	16,427	4,682	5,744	11,378	396,506	689	0.174%	28
January	36,116	6,016	47,373	58,721	198	213,996	16,348	4,778	5,930	11,491	400,967	4,461	1.125%	35
February	36,176	5,990	47,541	57,872	181	215,042	16,366	4,887	6,120	11,673	401,848	881	0.220%	28
March	35,997	5,996	47,579	57,354	178	215,429	16,539	5,009	6,265	11,850	402,196	348	0.087%	28
April	35,925	5,995	47,705	57,730	188	217,685	16,334	5,161	6,496	11,891	405,110	2,914	0.725%	28
May	36,032	5,979	48,055	58,748	201	219,252	16,437	5,354	6,689	11,994	408,741	3,631	0.896%	35
June	35,959	5,975	47,912	56,416	198	215,060	16,410	5,273	6,563	11,934	401,700	(7,041)	-1.723%	28
Year-to-Date Average	36,219	6,048	47,565	57,754	188	213,600	16,311	5,050	5,959	11,012	399,705			
HMO's Year to Date Average	5,612	1,462	11,749	8,491	-	43,326	729	429	-	1	71,799			
PCPP's Year to Date Average	4,246	1,154	9,875	3,059	-	17,923	231	74	-	1	36,563			

Regarding the Caseload detail reflected above, please note the following: 1) HMO and PCPP numbers are based on year to date averages for the HMO and PCPP enrollment gathered from the Modified Recipient Status Report for March 2006.

2) The REX01/COLD (MARS) R464600 report is scheduled to run four days prior to the last Tuesday of each month (usually on a Friday). This may cause a variation in the number of days being reported each month.

3) The REX01/COLD (MARS) R464600 report is generally used for reporting caseload in this report to the Joint Budget Committee.

FY 05-06 Children's Basic Health Plan Expenditures						
	Total Expenditures as	Children Medical and	Children Dental Expenditures			
	Reported in the Colorado	Prenatal Expenditures				
	Financial Reporting System					
July	\$2,098,603	\$2,098,603	\$0			
August	\$2,116,303	\$2,116,303	\$0			
September	\$3,224,982	\$2,107,519	\$1,117,463			
October	\$2,594,430	\$2,197,822	\$396,608			
November	\$18,289,747	\$17,870,409	\$419,338			
December	\$5,826,881	\$5,389,808	\$437,074			
January	\$6,076,579	\$5,632,041	\$444,538			
February	(\$158,560)	(\$620,604)	\$462,044			
March	\$8,806,307	\$8,324,595	\$481,712			
April	\$6,936,190	\$6,435,211	\$500,979			
May	\$7,445,047	\$6,934,636	\$510,411			
June	\$7,121,568	\$6,605,270	\$516,298			
Expenditures Year to Date	\$70,378,078	\$65,091,613	\$5,286,465			
Appropriation (Long Bill						
Plus Special Bills as of						
3/17/06 revision)	\$71,383,683	\$65,932,159	\$5,451,524			
Remaining in						
Appropriation	\$1,005,605	\$840,546	\$165,059			

Notes:

1. Expenditures reported include medical and dental benefit payments for children and prenatal and delivery costs for adult women.

2. The previous month's expenditures have been updated to reflect additional expenditures recorded in COFRS after the time that the previous month's expenditures were checked but prior to the Accounting close for that month.
3. Expenditures through Period 4 reflect payments to four of the five managed care organizations. Payments to the remaining managed care organization were delayed as new FY 05-06 contracts were not fully executed in time. The November medical and prenatal expenditures contain a catch up payment for July through November for Anthem. Dental expenditures reported in Period 3 include payments for July through September. By December, all contracts with the medical providers were in place. Monthly expenditures are now occurring as expected.

4. Reconciliation with Anthem for FY 04-05 monies resulted in a credit applied in February 2006.

Management Information System. These incomplete records did not generate a capitation payment. When the March 2006 updates were implemented, these updates created retroactivity of capitation payments above the average that typically occurs.

Department of Health Care Policy and Financing	
FY 05-06 Children's Basic Health Plan Enrollment Report	

CHILDREN						
	<b>Base Population</b>	<b>Expansion Population</b>	Total			
	=185% FPL</td <td>From 186% to 200%</td> <td></td>	From 186% to 200%				
		FPL				
July	40,271	736	41,007			
August	38,687	812	39,499			
September	39,187	898	40,085			
October	41,858	1,189	43,047			
November	43,449	1,348	44,797			
December	44,439	1,464	45,903			
January	45,948	1,638	47,586			
February	47,377	1,776	49,153			
March	49,533	1,915	51,448			
April	49,884	2,018	51,902			
May	50,602	2,137	52,739			
June	51,631	2,263	53,894			
Year to Date Average	45,239	1,516	46,755			

1) Capitation payments are made retroactively for up to six months. Figures shown for the current month and the five previous months include an adjustment for anticpated retroactivity. These figures will be updated in next month's report to reflect the impact of actual retroactivity. Figures will be shown in bold font after they are not expected to change.

2) The growth in enrollment reported from October through June is due to the Default Provider system update.

PREGNANT WOMEN						
	<b>Base Population</b>	<b>Expansion Population</b>	Total			
	=185% FPL</td <td>From 186% to 200%</td> <td></td>	From 186% to 200%				
		FPL				
July	985	28	1,013			
August	965	40	1,005			
September	1,000	54	1,054			
October	1,011	68	1,079			
November	1,018	77	1,095			
December	1,038	87	1,125			
January	1,107	118	1,225			
February	1,099	123	1,222			
March	1,065	125	1,190			
April	1,048	143	1,191			
May	1,023	135	1,158			
June	1,069	126	1,195			
Year to Date Average	1,036	94	1,129			

1) Capitation payments are made for retroactivity for up to six months. Figures shown for the current month and the five previous months include an adjustment for anticpated retroactivity. These figures will be updated in next month's report to reflect the impact of actual retroactivity. Figures will be shown in bold font after they are not expected to change.

2) Since presumptive eligibility is not maintained in Colorado Benefits Management System, clients found presumptively eligible are not reflected in the enrollment figures above until they are deemed to be truly eligible.