DEPARTMENT OF HEALTH CARE POLICY AND FINANCING DECEMBER 2006 EXPENDITURE REPORT FY 06-07

(A) ORGANIZATION NUMBER	(B) ORGANIZATION NAME/ SERVICE CATEGORY	(C) CUMULATIVE TOTAL DECEMBER 2006 CASH BASIS	(D) CUMULATIVE ALL PRIOR MONTHS OF FISCAL YEAR CASH BASIS	(E) SUM OF ALL MONTHS CASH BASIS
0108	Prior Fiscal Year Accounts Payable	$0	$6,000	$6,000
5411	Injectibles Drug Rebates	$0	($66,614)	($66,614)
5430	Home and Community Based Services-Brain Injury	$1,027,003	$4,575,889	$5,602,892
5431	Single Entry Points	$1,502,022	$7,694,081	$9,196,103
5432	Private Duty Nursing	$1,449,823	$6,810,027	$8,259,850
5433	Home and Community Based Service-Mentally Ill	$1,448,771	$7,067,095	$8,515,866
5434	Home and Community Based Services-Model 200	$82,353	$335,522	$417,874
5435	Home Health	$9,753,415	$44,795,221	$54,548,636
5437	Home and Community Based Services-Client Services	$11,050,695	$51,404,342	$62,455,037
5439	Home and Community Based Services-People Living With Aids	$53,798	$191,006	$244,805
5440	Class 1 Nursing Homes	$43,394,132	$198,637,190	$242,031,323
5441	Class 2 and 4 Nursing Homes	$217,825	$853,309	$1,071,134
5442	Consumer Directed Attendant Support Waiver Costs	$1,936,024	$3,723,309	$5,659,333
5444	Hospice Program	$2,621,729	$13,258,594	$15,880,323
5445	Health Maintenance Organizations	$7,857,511	$60,247,823	$68,105,335
5446	Program for All Inclusive Care of the Elderly	$3,838,334	$18,475,247	$22,313,581
5450	Pharmacy	$18,680,495	$72,960,865	$91,641,360
5451	Drug Rebates	($1,618,271)	($22,385,314)	($24,003,586)
5452	Early and Periodic Screening, Diagnosis and Treatment	$1,093,306	$3,952,109	$5,045,415
5454	Federally Qualified Health Centers	$5,799,049	$23,332,610	$29,131,659
5455	Physician Services Program	$13,812,017	$58,427,939	$72,239,955
5456	Family Planning Program	$13,068	$84,107	$97,175
5457	Lab and X-ray	$1,799,829	$8,099,807	$9,899,636
5458	Rural Health Clinic	$434,463	$2,001,670	$2,436,133
5459	Dental Services	$3,959,953	$20,538,139	$24,498,092
5460	Durable Medical Equipment	$5,943,192	$25,714,201	$31,657,393
5461	Transportation	$439,598	$1,789,854	$2,229,452
5462	County Transportation	($556)	($10,799)	($11,355)
5464	Breast and Cervical Cancer	$411,703	$2,370,548	$2,782,251
5465	Inpatient Hospital	$26,813,091	$120,689,727	$147,502,818
5466	Outpatient Hospital	$10,602,914	$45,092,300	$55,695,214
5475	Co-insurance	$1,966,603	$5,298,990	$7,265,593
5476	Supplemental Medicare Insurance Benefits	$6,282,716	$33,516,347	$39,799,062
5477	Health Insurance Buy-in	$47,515	$289,535	$337,050
5483	Admin Service Org - Program	$3,422,841	$11,818,749	$15,241,590
5484	Admin Service Org - Admin	$0	$912,654	$912,654
5487	Disease Management	$28,929	$220,429	$249,359
5500	Medicaid Eligible Refugee	$0	$0	$0
5540	Nursing Facility Upper Payment Limit	$0	$0	$0
5566	Outpatient Upper Payment Limit	$0	$1,566,491	$1,566,491
5567	Home Health Upper Payment Limit	$0	$0	$0
5569	Presumptive Eligibility	$0	$696,202	$696,202
	FY 06-07 Medical Services Premium Total Expenditures	$186,165,890	$834,985,202	$1,021,151,092
	FY 06-07 Long Bill Amount HB 06-1385		$2,108,588,722	
	SB 06-165 Telemedicine Chronic Care Pilot Program		$322,431	
	SB 06-131 Nursing Facility Reimbursement Study		$2,376,406	
	FY 06-07 Medical Services Premiums Spending Authority as of December 31, 2006		$2,111,287,559	
	FY 06-07 Medical Services Premiums Expenditures as of December 31, 2006		$1,021,151,092	
	Remaining Appropriation		$1,090,136,467	

MEDICAID CASELOAD FY 06-07 WITHOUT RETROACTIVITY															
Current Year	**Adults 65+ (OAP A)**	**Disabled Adults 60 to 64 Years of Age (OAP-B)**	**Disabled Individuals to Age 59 (AND/AB)**	**Categorically Eligible Low Income Adults (AFDC-A)**	**Expansion Adults**	**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	**36,033**	**5,953**	**47,946**	**56,253**	**971**	**203**	**214,085**	**16,332**	**5,152**	**6,514**	**12,050**	**401,492**	**(208)**	**-0.052%**	**28**
August	**36,190**	**5,985**	**48,192**	**56,565**	**1,976**	**213**	**214,766**	**16,492**	**4,990**	**6,248**	**12,250**	**403,867**	**2,375**	**0.592%**	**35**
September	**36,258**	**5,990**	**48,320**	**55,341**	**2,940**	**222**	**212,808**	**16,430**	**4,926**	**6,103**	**12,349**	**401,687**	**(2,180)**	**-0.540%**	**28**
October	**36,233**	**6,040**	**48,611**	**53,950**	**4,452**	**231**	**211,000**	**16,461**	**5,026**	**5,849**	**12,438**	**400,291**	**(1,396)**	**-0.348%**	**35**
November	**36,105**	**6,070**	**48,503**	**51,838**	**5,131**	**236**	**207,366**	**16,387**	**4,927**	**5,306**	**12,594**	**394,463**	**(5,828)**	**-1.456%**	**28**
December	**36,029**	**6,098**	**48,363**	**50,857**	**5,388**	**237**	**204,273**	**16,512**	**4,948**	**4,978**	**12,837**	**390,520**	**(3,943)**	**-1.000%**	**28**
January												-	-		
February												-	-		
March												-	-		
April												-	-		
May												-	-		
June												-	-		
Year-to-Date Average	**36,141**	**6,023**	**48,323**	**54,134**	**3,476**	**224**	**210,716**	**16,436**	**4,995**	**5,833**	**12,420**	**398,721**			
HMO Year to Date Average															
PCPP's Year to Date Average															

Regarding the Caseload detail reflected above, please note the following:
1) 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.
2) The REX01/COLD (MARS) R464600 report is used for reporting caseload in this report to the Joint Budget Committee.

FY 06-07 Children's Basic Health Plan Expenditures			
	Total Expenditures as Reported in the Colorado Financial Reporting System	Children Medical and Prenatal Expenditures	Children Dental Expenditures
July	$5,883,471	$5,329,659	$553,812
August	$6,537,891	$5,972,149	$565,742
September	$6,455,410	$5,931,829	$523,581
October	$7,028,140	$6,501,992	$526,148
November	$7,245,444	$6,714,375	$531,069
December	$7,360,830	$6,745,974	$614,856
January	$0	$0	$0
February	$0	$0	$0
March	$0	$0	$0
April	$0	$0	$0
May	$0	$0	$0
June	$0	$0	$0
Expenditures Year to Date	$40,511,186	$37,195,978	$3,315,208
Appropriation (Long Bill HB 06-1385 Plus Special Bills through December 2006)	$76,284,836	$70,371,177	$5,913,659
Remaining in Appropriation	**$35,773,650**	**$33,175,199**	**$2,598,451**

Notes:
1. Expenditures include medical and dental benefit payments for children and prenatal and delivery costs for adult women, [illegible] Traditional Prenatal 119; Expansion Prenatal 1,459; Traditional Children Dental 33,612; Expansion Children Dental 3,441.

Department of Health Care Policy and Financing
FY 06-07 Children's Basic Health Plan Enrollment Report

CHILDREN			
	Base Population </=185% FPL	**Expansion Population From 186% to 200% FPL**	**Total**
July	**48,452**	**2,613**	**51,065**
August	46,729	2,745	49,474
September	45,429	2,894	48,323
October	45,107	3,232	48,339
November	45,282	3,352	48,634
December	45,005	3,476	48,481
January			
February			
March			
April			
May			
June			
Year to Date Average	46,001	3,052	49,053

1) Capitation payments are made retroactively for up to six months. The current month includes 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) Budgeted caseload: Traditional Children 38,635; Expansion Children 3,955; Traditional Prenatal 119; Expansion Prenatal 1,459; Traditional Children Dental 33,612; Expansion Children Dental 3,441.

PREGNANT WOMEN			
	Base Population </=185% FPL	**Expansion Population From 186% to 200% FPL**	**Total**
July	**1,100**	**195**	**1,295**
August	1,121	219	1,340
September	1,093	249	1,342
October	1,108	300	1,408
November	1,116	303	1,419
December	1,106	307	1,413
January			
February			
March			
April			
May			
June			
Year to Date Average	1,107	262	1,370

1) Capitation payments are made retroactively for up to six months. The current month includes 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.
3) Budgeted caseload: Traditional Children 38,635; Expansion Children 3,955; Traditional Prenatal 119; Expansion Prenatal 1,459; Traditional Children Dental 33,612; Expansion Children Dental 3,441.