

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING MAY 2007 EXPENDITURE REPORT FY 06-07

(A) ORGANIZATION NUMBER	(B) ORGANIZATION NAME/ SERVICE CATEGORY	(C) CUMULATIVE TOTAL MAY 2007 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	(\$574)	(\$444,234)	(\$444,808)
5430	Home and Community Based Services-Brain Injury	\$853,972	\$9,364,485	\$10,218,457
5431	Single Entry Points	\$2,173,098	\$14,285,656	\$16,458,754
5432	Private Duty Nursing	\$1,438,885	\$14,254,663	\$15,693,548
5433	Home and Community Based Service-Mentally Ill	\$1,485,099	\$14,241,606	\$15,726,705
5434	Home and Community Based Services-Model 200	\$69,540	\$747,575	\$817,115
5435	Home Health	\$8,907,290	\$90,875,278	\$99,782,569
5436	HCBS Autism Program	\$75	\$0	\$75
5437	Home and Community Based Services-Client Services	\$9,456,455	\$103,837,479	\$113,293,934
5439	Home and Community Based Services-People Living With Aids	\$37,723	\$421,346	\$459,068
5440	Class 1 Nursing Homes	\$36,466,571	\$401,920,055	\$438,386,626
5441	Class 2 and 4 Nursing Homes	\$189,271	\$1,882,429	\$2,071,701
5442	Consumer Directed Attendant Support Waiver Costs	\$1,667,135	\$8,939,896	\$10,607,031
5444	Hospice Program	\$2,519,994	\$26,765,699	\$29,285,693
5445	Health Maintenance Organizations	\$6,977,879	\$95,626,495	\$102,604,374
5446	Program for All Inclusive Care of the Elderly	\$3,798,744	\$35,175,045	\$38,973,789
5450	Pharmacy	\$14,533,362	\$159,702,854	\$174,236,216
5451	Drug Rebates	(\$7,024,323)	(\$38,724,759)	(\$45,749,082)
5452	Early and Periodic Screening, Diagnosis and Treatment	\$797,494	\$8,687,211	\$9,484,705
5454	Federally Qualified Health Centers	\$4,247,488	\$50,071,867	\$54,319,355
5455	Physician Services Program	\$12,682,007	\$128,171,978	\$140,853,985
5456	Family Planning Program	(\$24,478)	\$148,362	\$123,884
5457	Lab and X-ray	\$1,677,833	\$17,108,373	\$18,786,206
5458	Rural Health Clinic	\$332,566	\$5,014,289	\$5,346,856
5459	Dental Services	\$3,649,883	\$41,739,284	\$45,389,166
5460	Durable Medical Equipment	\$5,746,148	\$55,331,227	\$61,077,375
5461	Transportation	\$318,961	\$3,617,715	\$3,936,676
5462	County Transportation	(\$2,527)	(\$10,024)	(\$12,550)
5464	Breast and Cervical Cancer	\$526,225	\$4,563,978	\$5,090,203
5465	Inpatient Hospital	\$23,110,917	\$258,282,411	\$281,393,328
5466	Outpatient Hospital	\$8,815,060	\$95,216,689	\$104,031,749
5475	Co-insurance	\$1,266,800	\$15,630,019	\$16,896,819
5476	Supplemental Medicare Insurance Benefits	\$7,213,839	\$68,278,826	\$75,492,666
5477	Health Insurance Buy-in	\$71,670	\$600,667	\$672,337
5483	Admin Service Org - Program	\$6,047,021	\$23,076,085	\$29,123,106
5484	Admin Service Org - Admin	\$0	\$2,372,714	\$2,372,714
5487	Disease Management	\$31,432	\$387,326	\$418,759
5500	Medicaid Eligible Refugee	\$9,135	\$20,430	\$29,565
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	\$1,055,588	\$6,294,387	\$7,349,975
	FY 06-07 Medical Services Premium Total Expenditures	\$161,123,255	\$1,725,047,876	\$1,886,171,132
	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	
	SB 07-239 Long Bill Add-On		(\$53,486,347)	
	FY 06-07 Medical Services Premiums Spending Authority as of April 30, 2007		\$2,057,801,212	
	FY 06-07 Medical Services Premiums Expenditures as of April 30, 2007		\$1,886,171,132	
	Remaining Appropriation		<u>\$171,630,080</u>	

Department of Health Care Policy and Financing
Monthly Medicaid Caseload Report for FY 06-07

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	36,182	6,074	48,576	50,395	5,901	232	204,363	16,565	5,042	4,888	12,833	391,051	531	0.136%	35
February	36,095	6,088	48,714	50,058	6,162	229	204,054	16,587	5,133	4,762	12,958	390,840	(211)	-0.054%	28
March	36,028	6,107	48,785	49,325	6,366	233	202,939	16,754	5,252	4,649	13,109	389,547	(1,293)	-0.331%	28
April	35,758	6,059	48,766	48,513	6,774	239	202,831	16,791	5,347	4,480	13,453	389,011	(536)	-0.138%	28
May	35,545	6,024	48,975	47,016	6,786	242	198,384	16,922	5,356	4,424	13,387	383,061	(5,950)	-1.530%	35
June												-	-		
Year-to-Date Average	36,041	6,044	48,523	51,828	4,804	229	206,988	16,567	5,100	5,291	12,751	394,166			
HMO Average	3,931	733	5,073	4,329	473	-	21,421	151	244	-	2	36,356			
PCPP Average	3,947	1,119	8,800	1,900	154	-	13,491	127	84	-	4	29,625			
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 total Medicaid caseload in this report to the Joint Budget Committee. 3) HMO clients are counted based on eligibility. Average includes from February 2007 forward. 4) PCPP clients are counted based on eligibility. Average includes from February 2007 forward.															

Department of Health Care Policy and Financing Children's Basic Health Plan Report

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	\$7,561,841	\$7,001,818	\$560,023
February	\$7,648,948	\$7,089,776	\$559,172
March	\$7,821,948	\$7,246,171	\$575,777
April	\$8,147,668	\$7,561,457	\$586,211
May	\$6,930,460	\$6,335,724	\$594,736
June	\$0	\$0	\$0
Expenditures Year to Date	\$78,622,051	\$72,430,924	\$6,191,127
Appropriation (Long Bill HB 06-1385 Plus Special Bills Plus SB 07-239 Add-On sections through May 2007)	\$87,786,612	\$81,483,970	\$6,302,642
Remaining in Appropriation	\$9,164,561	\$9,053,046	\$111,515
Notes: 1. Expenditures include medical and dental benefit payments for children and prenatal and delivery costs for adult women. Expenditures are based on the following categories: Traditional Children 19,100; Expansion Children 3,562; Traditional Prenatal 119; Expansion Prenatal 1,288; Traditional Children Dental 36,680; Expansion Children Dental 2,810.			

**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	47,038	2,768	49,806
September	46,017	2,923	48,940
October	46,025	3,270	49,295
November	47,100	3,407	50,507
December	47,226	3,510	50,736
January	48,496	3,602	52,098
February	49,749	3,612	53,361
March	51,603	3,610	55,213
April	52,182	3,563	55,745
May	53,313	3,585	56,898
June			
Year to Date Average	48,836	3,315	52,151

- 1) Capitation payments are made retroactively for up to six months. The current month includes an adjustment for anticipated 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 expenditures are based on the following caseload: Traditional Children 46,489; Expansion Children 3,562; Traditional Prenatal 119; Expansion Prenatal 1,288; Traditional Children Dental 36,680; Expansion Children Dental 2,810.
- 3) Beginning in January 2007, all children's caseload reporting includes the CHP+ at Work program.

PREGNANT WOMEN			
	Base Population ≤185% FPL	Expansion Population From 186% to 200% FPL	Total
July	1,100	195	1,295
August	1,123	219	1,342
September	1,098	249	1,347
October	1,114	290	1,404
November	1,131	291	1,422
December	1,114	282	1,396
January	1,101	275	1,376
February	1,056	254	1,310
March	1,106	242	1,348
April	1,055	237	1,292
May	1,034	222	1,256
June			
Year to Date Average	1,094	251	1,344

- 1) Capitation payments are made retroactively for up to six months. The current month includes an adjustment for anticipated 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 expenditures are based on the following caseload: Traditional Children 46,489; Expansion Children 3,562; Traditional Prenatal 119; Expansion Prenatal 1,288; Traditional Children Dental 36,680; Expansion Children Dental 2,810.