

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2010-11														
	Service Category	July 2010	August 2010	September 2010	October 2010	November 2010	December 2010	January 2011	February 2011	March 2011	April 2011	May 2011	June 2011	FY 2010-11 Total YTD
Acute Care	Physician Service	\$26,184,690	\$22,423,547	\$18,128,868	\$18,811,826	\$22,725,451	\$18,302,011	\$23,721,801	\$21,219,325	\$21,895,296	\$21,655,818	\$26,201,833		\$241,270,467
	EPSTD Screening	\$1,997,816	\$2,208,144	\$1,717,677	\$1,639,088	\$1,802,063	\$1,377,388	\$1,758,797	\$1,426,794	\$1,506,475	\$1,435,180	\$1,871,624		\$18,741,047
	Emergency Transportation	\$677,572	\$573,823	\$370,916	\$388,786	\$530,638	\$543,165	\$545,200	\$422,579	\$550,744	\$476,938	\$625,887		\$5,706,247
	Non-Emergency Medical Transportation	\$414,052	\$1,427,240	\$833,039	\$811,994	\$959,056	\$794,030	\$875,097	\$823,928	\$854,342	\$341,323	\$891,854		\$9,025,956
	Dental Service	\$11,738,729	\$10,830,795	\$7,609,546	\$8,091,253	\$9,417,905	\$7,483,979	\$9,410,837	\$8,039,227	\$8,574,309	\$8,878,643	\$10,284,591		\$100,359,813
	Family Planning	\$47,598	\$42,829	\$34,074	\$43,890	\$34,826	\$29,989	\$38,869	\$28,090	\$34,004	\$34,885	\$47,648		\$416,703
	Health Maintenance Organization	\$8,651,587	\$10,040,778	\$7,977,126	\$9,975,641	\$10,161,698	\$8,510,999	\$10,439,144	\$10,331,518	\$9,539,834	\$10,480,265	\$12,530,099		\$108,638,688
	Inpatient Hospital	\$37,630,592	\$35,395,110	\$27,568,220	\$25,928,709	\$31,987,662	\$26,830,021	\$32,666,961	\$29,480,283	\$30,613,939	\$28,977,634	\$32,295,656		\$339,374,787
	Outpatient Hospital	\$23,120,235	\$20,151,191	\$12,997,892	\$16,367,288	\$20,794,970	\$16,669,707	\$20,225,414	\$14,531,649	\$15,615,466	\$18,005,112	\$21,035,597		\$199,514,519
	Laboratory and X-Ray	\$3,753,944	\$3,324,022	\$2,622,023	\$2,738,357	\$3,294,219	\$2,567,495	\$3,490,112	\$3,083,420	\$3,349,437	\$3,008,976	\$3,665,824		\$34,897,829
	Durable Medical Equipment (DME)	\$9,286,084	\$8,203,742	\$6,544,408	\$6,749,352	\$8,080,607	\$6,857,344	\$8,182,534	\$6,817,778	\$7,080,071	\$6,976,616	\$8,666,281		\$83,444,818
	Pharmacy	\$27,326,468	\$23,705,870	\$19,619,586	\$17,334,685	\$24,291,534	\$21,040,799	\$27,287,512	\$23,143,973	\$24,558,253	\$23,305,755	\$26,861,281		\$258,475,716
	Drug Rebates - Standard	\$0	(\$16,951,644)	(\$2,578,253)	(\$4,109,052)	(\$23,741,666)	(\$3,743,330)	(\$9,208,134)	(\$17,998,196)	(\$3,987,065)	(\$2,963,794)	(\$29,464,917)		(\$114,746,051)
	Drug Rebates - Injectibles (J-Codes)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0
	Rural Health Centers	\$974,274	\$993,592	\$719,343	\$776,843	\$914,687	\$659,735	\$953,397	\$848,724	\$853,179	\$735,403	\$1,100,971		\$9,530,149
	Federally Qualified Health Centers	\$8,214,015	\$7,559,427	\$6,318,342	\$6,858,833	\$8,625,020	\$6,426,341	\$8,238,148	\$7,541,183	\$7,635,155	\$7,827,673	\$8,202,928		\$83,447,067
	Co-Insurance (Title XVIII-Medicare)	\$3,489,135	\$2,003,057	\$1,621,929	\$1,156,389	\$2,747,081	\$132,464	\$2,194,207	\$2,877,010	\$3,051,505	\$1,310,710	(\$855,762)		\$19,727,724
	Breast and Cervical Cancer Treatment Program	\$1,036,945	\$1,026,493	\$739,153	\$731,130	\$838,350	\$641,895	\$858,219	\$860,735	\$758,865	\$842,553	\$977,078		\$9,311,417
	Prepaid Inpatient Health Plan Services	\$4,065,347	\$5,489,186	\$3,920,911	\$1,760,054	\$4,492,211	\$4,934,036	\$5,639,116	\$1,256,077	\$4,950,950	\$5,204,383	\$5,255,323		\$46,967,595
	Other Medical Services	\$0	\$1,047	\$1,380	\$1,298	\$0	\$0	\$0	\$0	\$1,350	\$0	\$0		\$5,074
	Home Health	\$16,371,337	\$16,184,850	\$12,703,271	\$12,703,258	\$14,378,398	\$12,755,696	\$17,595,244	\$13,535,038	\$13,146,111	\$12,574,642	\$16,477,447		\$158,425,294
	Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0
	Acute Care Subtotal	\$184,980,419	\$154,633,098	\$129,469,452	\$128,759,619	\$142,334,711	\$132,813,765	\$164,912,476	\$128,269,135	\$150,582,221	\$149,108,717	\$146,671,244		\$1,612,534,858
Community Based Long Term Care	HCBS - Elderly, Blind, and Disabled	\$20,501,216	\$17,519,009	\$21,956,930	\$15,822,307	\$18,416,422	\$13,676,197	\$21,574,482	\$16,570,770	\$16,116,614	\$17,551,319	\$18,929,834		\$198,635,100
	HCBS - Mental Illness	\$2,283,658	\$2,359,905	\$2,559,695	\$1,868,319	\$2,142,369	\$1,792,702	\$2,377,384	\$1,878,940	\$2,081,775	\$1,905,078	\$2,233,627		\$23,483,451
	HCBS - Disabled Children	\$198,154	\$199,959	\$138,410	\$147,263	\$174,300	\$153,495	\$188,265	\$149,150	\$171,103	\$110,119	\$178,397		\$1,808,614
	HCBS - Persons Living with AIDS	\$64,747	\$59,794	\$62,836	\$41,716	\$47,874	\$41,964	\$52,926	\$39,651	\$33,390	\$49,188	\$44,445		\$538,531
	HCBS - Consumer Directed Attendant Support	\$0	\$0	\$575,153	\$266,064	\$0	\$564,407	\$274,050	\$275,188	\$0	\$274,581	\$466,349		\$2,695,793
	HCBS - Brain Injury	\$1,022,126	\$981,259	(\$4,382,111)	\$890,200	\$1,268,586	\$963,963	\$989,738	\$1,056,455	\$1,063,766	\$1,066,368	\$1,133,258		\$6,053,608
	HCBS - Children with Autism	\$173,628	\$181,644	\$139,041	\$124,151	\$117,536	\$95,720	\$119,874	\$85,103	\$78,957	\$40,371	\$127,406		\$1,283,431
	HCBS - Pediatric Hospice	\$17,595	\$12,530	\$19,298	\$167,443	(\$148,386)	\$6,503	\$27,885	\$8,424	\$14,714	\$6,649	\$14,108		\$146,762
	Private Duty Nursing	\$2,738,726	\$2,550,692	\$1,860,361	\$1,978,803	\$2,262,529	\$2,126,853	\$2,690,051	\$2,132,159	\$2,116,732	\$2,433,487	\$2,513,893		\$25,404,286
	Hospice	\$3,693,470	\$2,178,921	\$3,248,954	\$3,574,376	\$3,770,630	\$3,661,482	\$3,696,304	\$3,330,128	\$2,788,253	\$3,336,377	\$3,210,276		\$36,489,172
	CBLTC Subtotal	\$30,693,319	\$26,043,713	\$26,178,567	\$24,880,642	\$28,051,860	\$23,083,286	\$31,990,960	\$25,525,967	\$24,465,304	\$26,773,538	\$28,851,593		\$296,538,748
Long Term Care and Insurance	Class I Nursing Facilities	\$50,940,102	\$47,927,403	\$37,960,427	\$38,427,508	\$44,793,145	\$39,610,200	\$45,592,499	\$38,399,624	\$36,049,473	\$38,601,195	\$43,326,244		\$461,627,821
	Class II Nursing Facilities	(\$615,965)	\$1,162,838	\$185,054	\$174,609	\$169,582	\$177,620	\$190,145	(\$15,225)	\$153,659	\$377,014	\$183,112		\$2,142,444
	Program of All-Inclusive Care for the Elderly	\$6,441,979	\$6,171,684	\$6,679,668	\$6,413,067	\$6,593,853	\$6,532,509	\$6,792,438	\$6,591,475	\$12,770,114	\$6,965,650	\$6,473,337		\$78,425,775
	Supplemental Medicare Insurance Benefit	\$9,475,648	\$9,508,871	\$9,406,624	\$9,593,990	\$9,454,296	\$9,909,751	\$10,098,684	\$10,044,000	\$10,717,519	\$10,507,999	\$10,517,766		\$109,235,147
	Health Insurance Buy-In Program	\$169,446	\$79,925	\$90,783	\$77,759	\$77,389	\$104,678	\$75,720	\$90,071	\$77,732	\$104,745	\$92,739		\$1,040,988
	LTC + Insurance Subtotal	\$66,411,210	\$64,850,721	\$54,322,556	\$54,686,934	\$61,088,265	\$56,334,758	\$62,749,486	\$55,109,945	\$59,768,497	\$56,556,602	\$60,593,199		\$652,472,175
Service Mgmt	Single Entry Points	\$1,928,671	\$1,928,411	\$0	\$4,037,600	\$2,018,800	\$2,018,800	\$2,018,800	\$2,018,800	\$2,012,944	\$2,012,944	\$2,012,944		\$22,008,715
	Disease Management	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0
	Prepaid Inpatient Health Plan Administration	\$0	\$71,390	\$1,497,779	\$26,840	\$32,400	\$1,540,430	\$55,470	\$0	\$1,530,494	\$0	\$39,071		\$4,793,873
	Service Management Subtotal	\$1,928,671	\$1,999,801	\$1,497,779	\$4,064,440	\$2,051,200	\$3,559,230	\$2,074,270	\$2,018,800	\$3,543,437	\$2,012,944	\$2,052,015		\$26,802,588
Financing	Nursing Facility Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	\$4,508,340	\$0	\$0	\$0	\$0	\$1,076,984		\$5,585,324
	Outpatient Hospital Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0
	Home Health Service Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$633,173	\$0		\$633,173
	Hospital Supplemental Medicaid Payments	\$26,070,508	\$26,070,508	\$26,070,483	\$26,070,483	\$26,053,510	\$76,894,800	\$40,250,822	\$40,250,822	\$41,904,087	\$41,904,087	\$41,904,087		\$413,444,197
	Nursing Facility Supplemental Payments	\$2,276,302	\$3,745,173	\$13,206,483	\$7,134,277	\$774,236	\$12,135,424	\$5,148,715	\$5,368,823	\$7,701,012	\$5,152,955	\$5,880,972		\$68,524,373
	Physician Supplemental Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,072,164		\$3,072,164
	Outstationing Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,283,594		\$5,283,594
	HCPF Accounts Payable	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0
	Other Categories Subtotal	\$28,346,810	\$29,815,681	\$39,276,966	\$33,204,760	\$26,827,746	\$93,538,564	\$45,399,537	\$45,619,645	\$49,605,099	\$47,690,215	\$57,217,801		\$496,542,825
	Number of Weeks in Month	4	5	4	4	5	4	5	4	4	4	5	4	
	Total Expenditures	\$312,360,429	\$277,343,015	\$250,745,321	\$245,596,395	\$260,353,782	\$309,329,604	\$307,126,729	\$256,543,492	\$287,964,559	\$282,142,016	\$295,385,851		\$3,084,891,194

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2010-11 Appropriation	
HB 10-1376 FY 2010-11 Long Bill	\$3,158,315,617
HB 10-1382 Annualization Repeal Delay of Payments	(\$43,121,235)
HB 10-1005 Telemedicine Changes	\$123,270
HB 10-1033 Add Screening, Brief Intervention, and Referral to Treatment to Optional Services	\$870,155
HB 10-1146 Circumstances of Receiving Adult Foster Care & Home Care Allowance	(\$704,421)
HB 10-1378 Health Care Services Fund Moneys FY 2010-11	\$0
HB 10-1379 Nursing Facility Rate Reduction	(\$6,234,689)
HB 10-1380 Use of Supplemental Old Age Pension Funds	\$0
HB 10-1381 Use of Tobacco Tax Revenue for Health-Related Purposes	\$0
SB 10-169 HB 09-1293 ARRA Funding FY 2010-11	\$0
SB 10-167 Colorado False Claims Act	(\$2,390,570)
SB 11-209 Long Bill Add-ons	\$237,436,847
FY 2010-11 Total Spending Authority	\$3,344,294,974
FY 2010-11 Total YTD Expenditures	\$3,084,891,194
Remaining Appropriation from FY 2010-11 Funding	\$259,403,780

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

MEDICAID CASELOAD WITHOUT RETROACTIVITY*

Current Year	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults (to 60% FPL)	Expansion Adults (to 100% FPL)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
July 2009	38,058	6,774	52,315	55,087	15,269	-	393	259,609	18,285	7,745	3,930	15,434	472,899
August 2009	38,306	6,863	52,573	55,937	15,530	-	395	263,415	18,325	7,849	3,835	15,522	478,550
September 2009	38,346	6,945	52,710	56,489	15,703	-	402	266,381	18,200	7,775	3,724	15,513	482,188
October 2009	38,480	6,985	52,847	57,359	16,115	-	406	270,514	18,169	7,713	3,650	15,638	487,876
November 2009	38,387	6,986	52,982	57,595	16,362	-	418	272,453	17,992	7,674	3,644	15,743	490,236
December 2009	38,410	7,025	53,000	58,381	16,739	-	411	275,867	18,371	7,627	3,632	15,846	495,309
January 2010	38,452	7,047	53,255	59,210	17,193	-	416	279,000	18,400	7,796	3,610	15,954	500,333
February 2010	38,432	7,049	53,298	59,700	17,514	-	431	279,898	18,467	7,779	3,550	16,076	502,194
March 2010	38,597	7,152	53,629	61,190	18,096	-	449	283,625	18,486	7,996	3,768	16,212	509,200
April 2010	38,727	7,212	53,904	61,702	18,490	-	452	285,746	18,552	8,054	3,831	16,308	512,978
May 2010	38,754	7,228	54,164	55,110	20,694	18,253	455	285,779	18,651	8,039	3,615	16,285	527,027
June 2010	38,900	7,326	54,493	54,173	18,435	20,607	466	285,778	18,678	7,903	3,522	16,495	526,776
FY 2009-10 Actuals	38,487	7,049	53,264	57,661	17,178	3,238	425	275,672	18,381	7,830	3,693	15,919	498,797
July 2010	39,382	7,395	54,740	55,213	18,556	21,446	471	287,674	18,628	7,909	3,492	16,539	531,445
August 2010	38,648	7,492	55,032	56,687	19,176	24,193	493	290,871	18,455	8,014	3,378	16,634	539,073
September 2010	38,774	7,562	55,223	56,852	19,403	25,071	503	291,592	18,451	7,971	3,231	16,652	541,285
October 2010	38,901	7,602	55,508	57,801	19,490	26,016	505	294,155	18,464	7,985	3,080	16,794	546,301
November 2010	39,009	7,682	55,804	58,276	20,002	26,924	511	296,482	18,597	7,891	3,049	16,941	551,168
December 2010	38,769	7,721	55,937	59,591	20,182	27,596	526	299,499	18,510	7,764	3,023	17,002	556,120
January 2011	38,808	7,781	56,371	62,908	19,893	27,180	532	303,692	18,377	7,804	3,116	17,210	563,672
February 2011	38,823	7,870	56,671	63,025	20,522	28,323	535	307,032	18,200	7,677	3,161	17,249	569,088
March 2011	38,939	7,966	57,103	64,697	20,877	28,968	556	312,300	18,244	7,881	3,271	17,390	578,192
April 2011	38,861	7,987	57,385	64,673	21,090	29,451	569	312,603	18,280	7,864	3,274	17,399	579,436
May 2011	38,981	8,051	57,608	65,402	21,194	30,102	587	315,116	18,279	7,830	3,255	17,546	583,951
June 2011													-
FY 2010-11 Year-to-Date Average	38,900	7,737	56,126	60,466	20,035	26,843	526	301,001	18,408	7,872	3,212	17,032	558,158
FY 2010-11 Year-to-Date Appropriation	38,942	7,706	56,032	60,881	47,036		524	300,625	18,502	7,867	3,098	17,094	558,307
Monthly Growth	120	64	223	729	104	651	18	2,513	(1)	(34)	(19)	147	4,515
Monthly Growth Rate	0.31%	0.80%	0.39%	1.13%	0.49%	2.21%	3.16%	0.80%	-0.01%	-0.43%	-0.58%	0.84%	0.78%
Over-the-year Growth	227	823	3,444	10,292	500	11,849	132	29,337	(372)	(209)	(360)	1,261	56,924
Over-the-year Growth Rate	0.59%	11.39%	6.36%	18.68%	2.42%	64.92%	29.01%	10.27%	-1.99%	-2.60%	-9.96%	7.74%	10.80%
HMO Average	3,905	920	4,412	4,993	1,482	1,969	-	27,583	200	276	-	1	45,741
PIHP Average	1,260	524	3,765	2,014	672	784	1,007	9,354	755	309	-	-	20,445
PCPP Average	2,957	844	6,151	1,593	580	617	-	10,411	161	100	-	-	23,414

Notes:

1) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report. The number of days captured in the monthly figure is equal to the number of days in the report month.

2) FY 2010-11 Year-to-date Appropriation includes FY 2011-12 Long Bill Add-ons (SB 11-209).

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2010-11 Medicaid Mental Health Community Programs Expenditures			
	Total Expenditures as Reported in the Colorado Financial Reporting System	Mental Health Capitation Payments	Mental Health Fee for Service Payments
July	\$20,130,428	\$19,879,209	\$251,219
August	\$20,619,367	\$20,286,346	\$333,021
September	\$20,560,644	\$20,317,493	\$243,150
October	\$20,522,892	\$20,220,855	\$302,037
November	\$20,867,174	\$20,537,664	\$329,510
December	\$20,976,689	\$20,563,178	\$413,511
January	\$21,267,916	\$21,016,480	\$251,436
February	\$21,922,346	\$21,657,221	\$265,125
March	\$21,989,490	\$21,669,699	\$319,791
April	\$21,780,901	\$21,556,943	\$223,958
May	\$22,429,128	\$21,905,823	\$523,305
June			
Total Year-to-Date Expenditures	\$233,066,975	\$229,610,911	\$3,456,064
Total Year-to-Date Appropriation	\$251,590,109	\$248,120,971	\$3,469,138
Remaining in Appropriation	\$18,523,134	\$18,510,060	\$13,074
Notes:			
1) The Medicaid Mental Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.			
2) FY 2010-11 Year-to-date Appropriation includes FY 2011-12 Long Bill Add-ons (SB 11-209).			

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2010-11 Medicaid Community Mental Health Program Expenditures by Behavioral Health Organization						
	Total	Behavioral Healthcare Inc.	Colorado Access	Colorado Health Partnerships	Foothills Behavioral Health	Northeast Behavioral Health
July	\$19,879,209	\$4,541,453	\$3,484,783	\$6,840,545	\$2,919,982	\$2,092,446
August	\$20,286,346	\$4,663,945	\$3,494,696	\$6,990,699	\$3,007,662	\$2,129,345
September	\$20,317,493	\$4,677,178	\$3,528,952	\$6,963,088	\$3,006,084	\$2,142,192
October	\$20,220,855	\$4,646,783	\$3,452,364	\$6,972,578	\$3,027,227	\$2,121,902
November	\$20,537,664	\$4,743,178	\$3,495,757	\$7,102,852	\$3,046,782	\$2,149,096
December	\$20,563,178	\$4,767,921	\$3,520,307	\$7,031,289	\$3,100,819	\$2,142,841
January	\$21,016,480	\$4,820,485	\$3,699,930	\$7,122,061	\$3,121,828	\$2,252,176
February	\$21,965,243	\$5,024,423	\$3,872,404	\$7,445,057	\$3,236,645	\$2,386,714
March	\$21,669,699	\$4,948,712	\$3,831,365	\$7,336,220	\$3,221,708	\$2,331,693
April	\$21,699,293	\$5,007,371	\$3,812,435	\$7,317,348	\$3,211,664	\$2,350,474
May	\$21,905,823	\$5,016,930	\$3,821,964	\$7,409,471	\$3,239,353	\$2,418,105
June						
Total Year-to-Date Expenditures	\$230,061,284	\$52,858,381	\$40,014,956	\$78,531,208	\$34,139,754	\$24,516,985
Total Year-to-Date Appropriation	\$248,120,971					
Remaining in Appropriation	\$18,059,687					
Notes:						
1) FY 2010-11 Year-to-date Appropriation includes FY 2010-11 Long Bill (HB 10-1376) plus special bills.						

FY 2010-11 Medicaid Community Mental Health Program Caseload by Behavioral Health Organization							
	Total	Behavioral Healthcare Inc.	Colorado Access	Colorado Health Partnerships	Foothills Behavioral Health	Northeast Behavioral Health	Other
July	531,445	120,383	88,343	175,536	57,560	64,238	25,385
August	539,073	122,039	88,800	178,441	58,681	65,243	25,869
September	541,285	122,926	88,526	178,932	59,341	65,510	26,050
October	546,301	124,269	88,556	180,871	59,801	66,480	26,324
November	551,168	125,827	89,337	182,299	60,249	67,083	26,373
December	556,120	126,942	90,382	184,125	60,955	67,556	26,160
January	563,672	128,742	91,568	186,728	61,696	68,620	26,318
February	569,088	130,554	93,052	188,035	62,294	69,032	26,121
March	578,192	132,733	94,899	190,682	63,265	70,101	26,512
April	579,436	132,980	95,466	190,880	63,615	70,196	26,299
May	583,951	134,067	96,126	192,352	63,974	70,814	26,618
June							
Total Year-to-Date Average	558,157	127,406	91,369	184,444	61,039	67,716	26,184
Total Year-to-Date Appropriation	558,307						
Notes:							
1) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report. The number of days captured in the monthly figure is equal to the number of days in the report month. The Medicaid Mental Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.							
2) FY 2010-11 Year-to-date Appropriation includes FY 2011-12 Long Bill Add-ons (SB 11-209).							
3) "Other" category includes clients enrolled in the Program of All-Inclusive Care for the Elderly and clients ineligible for Medicaid Mental Health Benefits.							

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2010-11 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	\$15,533,025	\$14,629,808	\$903,217
August	\$14,009,543	\$12,733,730	\$1,275,813
September	\$18,728,852	\$17,865,208	\$863,644
October	\$13,543,505	\$12,663,946	\$879,558
November	\$16,035,703	\$15,192,081	\$843,622
December	\$13,845,229	\$13,037,336	\$807,893
January	\$12,985,765	\$12,148,513	\$837,253
February	\$15,069,399	\$14,199,214	\$870,185
March	\$14,999,510	\$14,082,654	\$916,855
April	\$15,186,170	\$14,326,180	\$859,989
May	\$14,789,648	\$13,927,724	\$861,924
June			
Total Year-to-Date Expenditures	\$164,726,349	\$154,806,395	\$9,919,954
Total Year-to-Date Appropriation	\$188,081,156	\$176,824,197	\$11,256,959
Remaining in Appropriation	\$23,354,807	\$22,017,802	\$1,337,005
Notes:			
1) Expenditures include medical and dental benefits payments for children and prenatal and delivery costs for adult women.			
2) FY 2010-11 Year-to-date Appropriation includes FY 2011-12 Long Bill Add-ons (SB 11-209).			

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2010-11 CHILDREN'S BASIC HEALTH PLAN CASELOAD WITHOUT RETROACTIVITY										
	Traditional Children (to 185% FPL)	Expansion Children (186- 200% FPL)	Expansion Children (201- 205% FPL)	Expansion Children (206- 250% FPL)	Total Children	Traditional Prenatal (to 185% FPL)	Expansion Prenatal (186- 200% FPL)	Expansion Prenatal (201- 205% FPL)	Expansion Prenatal (206- 250% FPL)	Total Prenatal
July	62,108	4,213	1,338	1,511	69,170	1,226	193	66	124	1,609
August	61,916	4,210	1,263	2,018	69,407	1,236	181	71	162	1,650
September	60,499	4,133	1,192	2,505	68,329	1,229	167	61	187	1,644
October	58,706	4,080	1,144	2,935	66,865	1,196	161	60	206	1,623
November	57,883	4,036	1,134	3,342	66,395	1,201	166	57	228	1,652
December	57,627	4,035	1,156	3,759	66,577	1,207	163	61	270	1,701
January	57,736	4,189	1,178	4,316	67,419	1,242	171	64	325	1,802
February	57,642	4,180	1,110	4,888	67,820	1,243	172	63	357	1,835
March	57,900	4,197	1,108	5,358	68,563	1,269	184	61	361	1,875
April	56,697	4,132	1,118	5,674	67,621	1,282	170	60	355	1,867
May	53,992	4,097	1,121	5,872	65,082	1,275	168	55	342	1,840
June										
Year-to-Date Average	58,428	4,137	1,169	3,834	67,568	1,237	172	62	265	1,736
Year-to-Date Appropriation	58,763	4,194	1,198	4,293	68,448	1,285	185	63	500	2,033
Monthly Growth	(2,705)	(35)	3	198	(2,539)	(7)	(2)	(5)	(13)	(27)
Monthly Growth Rate	-4.77%	-0.85%	0.27%	3.49%	-3.75%	-0.55%	-1.18%	-8.33%	-3.66%	-1.45%
Over-the-year Growth	(9,155)	(110)	(296)	5,272	(4,289)	0	(17)	(14)	296	265
Over-the-year Growth Rate	-14.50%	-2.61%	-20.89%	9	-6.18%	0.00%	-9.19%	-20.29%	6	16.83%
Notes:										
1) All children's caseload reporting includes the CHP+ at Work program.										
2) FY 2010-11 Year-to-date Appropriation includes FY 2011-12 Long Bill Add-ons (SB 11-209).										

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2009-10 Old Age Pension State Medical Program Expenditures and Caseload		
	Total Expenditures as Reported in the Colorado Financial Reporting System	Old Age Pension State Medical Program Caseload
July	\$1,202,915	4,155
August	\$857,647	3,150
September	\$567,423	3,172
October	\$586,124	3,172
November	\$675,164	3,160
December	\$514,901	3,175
January	\$617,187	3,186
February	\$608,262	3,257
March	\$613,887	3,349
April	\$590,396	3,390
May	\$739,317	3,438
June		
Total Year-to-Date	\$7,573,224	3,328
Total Year-to-Date Appropriation	\$11,000,000	4,517
Remaining in Appropriation	\$3,426,776	
Notes:		
1) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report. The number of days captured in the monthly figure is equal to the number of days in the report month.		
2) FY 2010-11 Year-to-date Appropriation includes FY 2011-12 Long Bill Add-ons (SB 11-209).		
3) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.		

Department of Health Care Policy and Financing
FY 2010-11 Medical Premiums Expenditure and Caseload Report

FY 2010-11 Medicare Modernization Act State Contribution Payment Expenditures and Caseload		
	Total Expenditures as Reported in the Colorado Financial Reporting System	Medicare Modernization Act State Contribution Payment Caseload
July	\$5,679,299	56,628
August	\$5,756,337	57,014
September	\$5,746,329	57,046
October	\$5,785,843	57,357
November	\$5,789,606	58,674
December	\$5,820,921	58,443
January	\$5,954,208	58,286
February	\$5,931,078	61,794
March	\$6,253,707	60,668
April	\$6,618,654	59,182
May	\$6,429,775	59,840
June		
Total Year-to-Date	\$65,765,759	58,630
Total Year-to-Date Appropriation	\$71,986,544	
Remaining in Appropriation	\$6,220,785	
Notes:		
1) Caseload for Medicare Modernization Act State Contribution Payment is from the Centers for Medicare and Medicaid Services Summary Accounting Statement for the State Contribution for Prescription Drug Benefit. This caseload includes 23 months of retroactivity, and are not comparable to the official Medicaid caseload included in this report.		
2) Medicare Modernization Act State Contribution Payments lag by two months. As a result, the expenditures in any given month represent the payment for the caseload from the prior month.		
3) FY 2010-11 Year-to-date Appropriation includes FY 2011-12 Long Bill Add-ons (SB 11-209).		
4) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.		