



COLORADO DEPARTMENT OF HEALTH CARE POLICY & FINANCING

1570 Grant Street, Denver, CO 80203-1818 • (303) 866-2993 • (303) 866-4411 Fax • (303) 866-3883 TTY

John W. Hickenlooper, Governor • Susan E. Birch MBA, BSN, RN, Executive Director

September 20, 2012

Eric Kurtz
Joint Budget Committee Staff
200 East 14th Avenue, Third Floor
Denver, CO 80203

Dear Mr. Kurtz:

The Department regretfully submits this report late. This is due to a number of factors, including the Labor Day Holiday causing delays to the availability of necessary data, a data anomaly that needed to be researched and resolved before the report could be finalized, and Department staff dedicating time to completing the FY 2013-14 budget cycle documents.

Enclosed please find a report to the Joint Budget Committee on the Health Care Policy and Financing expenditures and caseload for Medicaid and the Children's Basic Health Plan pursuant to FY 2012-13 Legislative Request For Information #1:

"The Department is requested to submit monthly Medicaid expenditure and caseload reports on the Medical Services Premiums and mental health capitation line items to the Joint Budget Committee, by the fifteenth or first business day following the fifteenth of each month. The Department is requested to include in the report the managed care organization caseload by aid category. The Department is also requested to provide caseload and expenditure data for the Children's Basic Health Plan, the Medicare Modernization Act State Contribution Payment, and the Old Age Pension State Medical Program within the monthly report."

The data contained in this month's Medicaid expenditure and caseload report is reflected as of August 31, 2012, coinciding with the close of Period 2 in the Colorado Financial Reporting System. The current report contains a separate worksheet for Medical Services Premiums expenditures by service category and Medicaid caseload data by eligibility category, which includes the monthly and over-the-year growth rates. Year-to-date caseload averages for clients in risk-based managed care organizations, non-risk based managed care organizations, and the Primary Care Physician Program appear in the Medicaid caseload worksheet. Beginning in FY 2012-13, the Department is reporting on the number of clients enrolled in the Accountable Care Collaborative. This count is based on capitations paid to a Regional Care Collaborative Organization (RCCO) for the month of service, and does not include clients who have been attributed to a RCCO but for whom a capitation has not been paid.

To date, the Department has not received federal approval for its State Plan Amendment (SPA) for outpatient hospital supplemental payments for federal fiscal year (FFY) 2011-12. From

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October 2011 through March 2012, the Department was making outpatient and inpatient hospital supplemental payments at the FFY 2010-11 levels in anticipation of federal approval of the new hospital provider fee model. However, because the Department is in ongoing negotiations for approval of the outpatient SPA and cannot anticipate when it will be approved, the Department has opted to make interim payments back to October 2011. The interim payments incorporate the approved inpatient payments and interim outpatient payments while SPA negotiations continue. The Department will continue to make these interim payments until the FFY 2011-12 hospital provider fee model is approved.

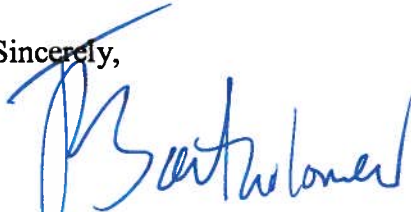
This report also includes caseload and expenditure data for the Old Age Pension State Medical Program and the Medicare Modernization Act State Contribution Payments.

In addition to the information requested in Legislative Request For Information #1, the Department is including Medicaid Mental Health expenditure and caseload by Behavioral Health Organization pursuant to the FY 2008-09 Legislative Request For Information #26:

"The Department is requested to provide recommendations to the Joint Budget Committee by November 1, 2008 on whether greater budget accuracy would be achieved if caseload and capitation payments were estimated and tracked for each Regional Behavioral Center. In developing their recommendations, the Department will note any additional administrative costs associated with changing systems to track caseload data in this manner and to compile and report on the data."

If you have any questions, please contact Jennifer St. Peter at (303) 866-3982.

Sincerely,



John Bartholomew
Budget Director

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Cc: Senator Mary Hodge, Vice-Chair, Joint Budget Committee
Senator Pat Steadman, Joint Budget Committee
Senator Kent Lambert, Joint Budget Committee
Representative Jon Becker, Joint Budget Committee
Representative Claire Levy, Joint Budget Committee
Senator Brandon Shaffer, President of the Senate
Senator John Morse, Senate Majority Leader
Senator Bill Cadman, Senate Minority Leader
Representative Frank McNulty, Speaker of the House
Representative Amy Stephens, House Majority Leader
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**Department of Health Care Policy and Financing
FY 2012-13 Medical Premiums Expenditure and Caseload Report**

FY 2012-13														
	Service Category	July 2012	August 2012	September 2012	October 2012	November 2012	December 2012	January 2013	February 2013	March 2013	April 2013	May 2013	June 2013	FY 2012-13 Total YTD
Acute Care	Physician Service	\$25,706,574	\$24,991,767											\$50,698,341
	EPSDT Screening	\$2,169,644	\$2,720,369											\$4,890,013
	Emergency Transportation	\$737,039	\$580,264											\$1,317,303
	Non-Emergency Medical Transportation	\$481,128	\$444,534											\$925,662
	Dental Service	\$9,528,940	\$10,517,795											\$20,046,736
	Family Planning	\$56,772	\$66,060											\$122,831
	Health Maintenance Organization	\$11,086,017	\$12,650,652											\$23,736,669
	Inpatient Hospital	\$35,613,004	\$36,275,131											\$71,888,136
	Outpatient Hospital	\$25,525,619	\$25,270,377											\$50,795,996
	Laboratory and X-Ray	\$4,085,142	\$4,064,287											\$8,149,429
	Durable Medical Equipment (DME)	\$9,262,185	\$8,972,575											\$18,234,760
	Pharmacy	\$29,641,943	\$30,275,874											\$59,917,817
	Drug Rebates - Standard	\$0	(\$32,910,842)											(\$32,910,842)
	Drug Rebates - Injectibles (J-Codes)	\$0	\$0											\$0
	Rural Health Centers	\$901,683	\$975,700											\$1,877,383
	Federally Qualified Health Centers	\$8,402,581	\$9,807,411											\$18,209,992
	Co-Insurance (Title XVIII-Medicare)	\$3,148,984	\$1,768,744											\$4,917,729
	Breast and Cervical Cancer Treatment Program	\$886,933	\$852,135											\$1,739,068
	Prepaid Inpatient Health Plan Services	\$7,373,419	\$6,046,566											\$13,419,985
	Other Medical Services	\$0	(\$12)											(\$12)
	Home Health	\$16,494,849	\$16,255,968											\$32,750,817
	Presumptive Eligibility	\$0	\$0											\$0
	Acute Care Subtotal	\$191,102,457	\$159,625,355											\$350,727,812
Community Based Long Term Care	HCBS - Elderly, Blind, and Disabled	\$20,223,188	\$21,368,847											\$41,592,035
	HCBS - Mental Illness	\$2,415,156	\$2,468,302											\$4,883,458
	HCBS - Disabled Children	\$355,201	\$382,769											\$737,970
	HCBS - Persons Living with AIDS	\$46,880	\$50,354											\$97,234
	HCBS - Consumer Directed Attendant Support	\$0	\$0											\$0
	HCBS - Brain Injury	\$1,144,216	\$1,122,126											\$2,266,342
	HCBS - Children with Autism	\$66,801	\$114,256											\$181,057
	HCBS - Pediatric Hospice	\$17,087	\$10,350											\$27,437
	Private Duty Nursing	\$3,029,687	\$3,328,037											\$6,357,725
	Hospice	\$3,652,376	\$3,236,120											\$6,888,496
	CBLTC Subtotal	\$30,950,592	\$32,081,161											\$63,031,753
Long Term Care and Insurance	Class I Nursing Facilities	\$45,538,911	\$47,213,966											\$92,752,877
	Class II Nursing Facilities	\$202,554	\$155,621											\$358,175
	Program of All-Inclusive Care for the Elderly	\$8,048,772	\$9,021,743											\$17,070,515
	Supplemental Medicare Insurance Benefit	\$9,715,058	\$9,739,084											\$19,454,142
	Health Insurance Buy-In Program	\$87,969	\$86,832											\$174,800
	LTC + Insurance Subtotal	\$63,593,263	\$66,217,246											\$129,810,509
Service Mgmt	Single Entry Points	\$0	\$4,296,948											\$4,296,948
	Disease Management	\$0	\$0											\$0
	Prepaid Inpatient Health Plan Administration	\$1,926,562	\$1,928,400											\$3,854,962
	Service Management Subtotal	\$1,926,562	\$6,225,347											\$8,151,909
Financing	Nursing Facility Upper Payment Limit	\$0	\$0											\$0
	Outpatient Hospital Upper Payment Limit	\$0	\$0											\$0
	Home Health Service Upper Payment Limit	\$0	\$0											\$0
	Hospital Supplemental Medicaid Payments	\$53,594,480	\$53,594,480											\$107,188,960
	Nursing Facility Supplemental Payments	\$6,728,449	\$8,145,809											\$14,874,258
	Physician Supplemental Payments	\$0	\$0											\$0
	Outstationing Payments	\$0	\$0											\$0
	HCPF Accounts Payable	\$0	\$0											\$0
	Other Categories Subtotal	\$60,322,929	\$61,740,289											\$122,063,218
	Number of Weeks in Month	5	4	4	5	4	5	4	4	4	5	4	4	
	Total Expenditures	\$347,895,803	\$325,889,398											\$673,785,201

Department of Health Care Policy and Financing
FY 2012-13 Medical Premiums Expenditure and Caseload Report

FY 2012-13 Appropriation	
HB 12-1335 FY 2012-13 Long Bill	\$3,994,685,293
HB 12-1340 "Nursing Facility Reduction Per Diem Rate"	(\$9,024,676)
SB 12-060 "Improve Medicaid Fraud Prosecution"	(\$54,156)
SB 12-159 "Evaluation Children With Autism Medicaid Waiver"	\$6,925
FY 2012-13 Total Spending Authority	\$3,985,613,386
FY 2012-13 Total YTD Expenditures	\$673,785,201
Remaining FY 2012-13 Appropriation	\$3,311,828,185

**Department of Health Care Policy and Financing
FY 2012-13 Medical Premiums Expenditure and Caseload Report**

MEDICAID CASELOAD WITHOUT RETROACTIVITY*															
	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60% FPL	Expansion Adults to 100% FPL	Adults Without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
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	38,813	7,781	56,417	-	62,929	19,895	27,188	-	532	304,042	18,386	7,806	3,116	17,210	564,115
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	39,154	8,089	57,986	-	66,369	21,458	30,724	-	589	317,551	18,221	7,828	3,229	17,727	588,925
FY 2010-11 Actuals	38,921	7,767	56,285	-	60,960	20,154	27,167	-	531	302,410	18,393	7,868	3,213	17,090	560,759
July 2011	39,341	8,133	58,294	-	65,372	22,184	31,920	-	587	319,065	18,125	7,810	3,089	17,923	591,843
August 2011	39,537	8,222	58,712	-	66,406	22,112	32,462	-	586	322,779	18,084	7,786	2,973	18,046	597,705
September 2011	39,600	8,280	58,937	-	67,613	22,388	33,152	-	590	325,673	18,119	7,628	2,774	18,156	602,910
October 2011	39,697	8,328	59,159	-	68,677	22,985	33,838	-	592	328,632	18,096	7,558	2,657	18,314	608,533
November 2011	39,789	8,343	59,298	-	68,638	23,803	34,915	-	602	332,183	18,077	7,371	2,543	18,584	614,146
December 2011	39,843	8,355	59,384	-	70,628	24,150	34,886	-	606	336,053	18,172	7,333	2,591	18,798	620,799
January 2012	39,742	8,373	59,709	-	68,831	24,692	35,481	-	603	336,096	17,968	7,445	2,617	18,985	620,542
February 2012	39,800	8,401	59,635	-	69,644	25,224	35,962	-	604	339,523	17,863	7,594	2,636	19,220	626,106
March 2012	39,849	8,445	59,847	51	71,278	26,040	37,141	-	604	341,274	17,930	7,734	2,852	19,466	632,511
April 2012	39,837	8,507	59,970	133	67,739	26,578	37,902	-	596	341,546	17,944	7,705	2,846	19,396	630,699
May 2012	39,924	8,600	60,167	202	68,601	26,980	38,955	5,860	597	344,523	18,012	7,744	2,844	19,640	642,649
June 2012	39,923	8,605	60,091	240	70,837	27,283	38,921	7,753	601	348,253	18,022	7,846	2,818	19,929	651,122
FY 2011-12 Actuals	39,740	8,383	59,434	52	68,689	24,535	35,461	1,134	597	334,633	18,034	7,630	2,770	18,871	619,963
July 2012	40,117	8,689	60,389	338	65,652	27,436	38,961	9,652	607	348,510	17,959	7,824	2,764	20,117	649,015
August 2012	40,460	8,771	60,680	445	66,921	27,856	39,881	9,675	612	351,537	17,932	7,864	2,744	20,418	655,796
September 2012															
October 2012															
November 2012															
December 2012															
January 2013															
February 2013															
March 2013															
April 2013															
May 2013															
June 2013															
FY 2012-13 Year-to-Date Average	40,289	8,730	60,535	392	66,287	27,646	39,421	9,664	610	350,024	17,946	7,844	2,754	20,268	652,406
FY 2012-13 Year-to-Date Appropriation	40,820	8,948	62,098	2,208	77,455	26,498	42,381	10,000	679	367,649	18,159	7,546	2,529	20,503	687,473
Monthly Growth	343	82	291	107	1,269	420	920	23	5	3,027	(27)	40	(20)	301	6,781
Monthly Growth Rate	0.85%	0.94%	0.48%	31.66%	1.93%	1.53%	2.36%	0.24%	0.82%	0.87%	-0.15%	0.51%	-0.72%	1.50%	1.04%
Over-the-year Growth	923	549	1,968	445	515	5,744	7,419	9,675	26	28,758	(152)	78	(229)	2,372	58,091
Over-the-year Growth Rate	2.33%	6.68%	3.35%	0.00%	0.78%	25.98%	22.85%	0.00%	4.44%	8.91%	-0.84%	1.00%	-7.70%	13.14%	9.72%
ACC Average	2,393	1,871	16,484	41	28,105	12,716	17,131	8,142	-	41,025	6,887	1,968	3	13	136,776
HMO Average	4,112	1,114	4,816	12	5,379	1,993	2,744	-	-	30,334	196	316	-	-	51,016
PIHP Average	1,098	328	2,470	15	2,357	1,016	1,336	1	1	12,063	864	284	-	1	21,834
PCPP Average	2,708	611	4,432	7	1,868	854	1,116	8	-	11,554	238	121	-	-	23,517

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 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.

3) "HMO Average" line includes all risk-based managed care, such as Health Maintenance Organizations (HMO) and Program of All-Inclusive Care for the Elderly (PACE). "PIHP Average" line includes non-risk based managed care, such as Prepaid Inpatient Health Plans. "ACC Average" is the Accountable Care Collaborative.

Department of Health Care Policy and Financing
FY 2012-13 Medical Premiums Expenditure and Caseload Report

FY 2012-13 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	\$24,755,604	\$24,529,061	\$226,543
August	\$24,664,662	\$24,251,828	\$412,834
September	\$0		
October	\$0		
November	\$0		
December	\$0		
January	\$0		
February	\$0		
March	\$0		
April	\$0		
May	\$0		
June	\$0		
Total Year-to-Date Expenditures	\$49,420,266	\$48,780,889	\$639,377
Total Year-to-Date Appropriation	\$316,728,340	\$312,580,712	\$4,147,628
Remaining in Appropriation	\$267,308,074	\$263,799,823	\$3,508,251
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 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.			

Department of Health Care Policy and Financing
FY 2012-13 Medical Premiums Expenditure and Caseload Report

FY 2012-13 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	\$24,529,061	\$5,536,342	\$4,342,046	\$8,304,132	\$3,667,307	\$2,679,235
August	\$24,251,828	\$5,492,579	\$4,393,371	\$8,148,710	\$3,599,932	\$2,617,235
September						
October						
November						
December						
January						
February						
March						
April						
May						
June						
Total Year-to-Date Expenditures	\$48,780,889	\$11,028,922	\$8,735,417	\$16,452,842	\$7,267,238	\$5,296,470
Total Year-to-Date Appropriation	\$316,728,340					
Remaining in Appropriation	\$267,947,451					
Notes:						
1) FY 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.						

FY 2012-13 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	649,015	151,562	105,846	213,349	71,964	78,213	28,081
August	655,796	153,416	106,836	215,100	72,891	78,964	28,589
September							
October							
November							
December							
January							
February							
March							
April							
May							
June							
Total Year-to-Date Average	652,406	152,489	106,341	214,225	72,428	78,589	28,335
Total Year-to-Date Appropriation	664,441						
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 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.							
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 2012-13 Medical Premiums Expenditure and Caseload Report

FY 2012-13 Children's Basic Health Plan Expenditures				
	Total Expenditures as Reported in the Colorado Financial Reporting System	Children Medical Expenditures	Children Dental Expenditures	Prenatal Medical Expenditures
July	\$15,694,423	\$12,347,081	\$1,205,963	\$2,141,378
August	\$15,272,535	\$11,919,352	\$1,323,931	\$2,029,252
September				
October				
November				
December				
January				
February				
March				
April				
May				
June				
Total Year-to-Date Expenditures	\$30,966,958	\$24,266,433	\$2,529,894	\$4,170,631
Total Year-to-Date Appropriation	\$182,543,053			
Remaining in Appropriation	\$151,576,095			
Notes:				
1) FY 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.				
2) Other Expenditures includes General Fund transfers that show as expenditures in the Colorado Financial Reporting System. The actual expenditures that support these transfers are included in the other expenditure columns, and thus this amount double counted in total expenditures for the line item.				

**Department of Health Care Policy and Financing
FY 2012-13 Medical Premiums Expenditure and Caseload Report**

CHILDREN'S BASIC HEALTH PLAN CASELOAD WITHOUT RETROACTIVITY								
	Children to 200% FPL	Expansion Children to 205% FPL	Expansion Children to 250% FPL	Total Children	Prenatal to 200% FPL	Expansion Prenatal to 205% FPL	Expansion Prenatal to 250% FPL	Total Prenatal
July 2010	66,321	1,338	1,511	69,170	1,419	66	124	1,609
August 2010	66,126	1,263	2,018	69,407	1,417	71	162	1,650
September 2010	64,632	1,192	2,505	68,329	1,396	61	187	1,644
October 2010	62,786	1,144	2,935	66,865	1,357	60	206	1,623
November 2010	61,919	1,134	3,342	66,395	1,367	57	228	1,652
December 2010	61,662	1,156	3,759	66,577	1,370	61	270	1,701
January 2011	61,925	1,178	4,316	67,419	1,413	64	325	1,802
February 2011	61,822	1,110	4,888	67,820	1,415	63	357	1,835
March 2011	62,097	1,108	5,358	68,563	1,453	61	361	1,875
April 2011	60,829	1,118	5,674	67,621	1,452	60	355	1,867
May 2011	58,089	1,121	5,872	65,082	1,443	55	342	1,840
June 2011	56,754	1,104	6,098	63,956	1,409	46	349	1,804
FY 2010-11 Actuals	62,080	1,164	4,023	67,267	1,409	60	272	1,741
July 2011	56,237	1,112	6,320	63,669	1,468	43	357	1,868
August 2011	56,495	1,130	6,444	64,069	1,516	51	355	1,922
September 2011	56,349	1,157	7,275	64,781	1,490	43	377	1,910
October 2011	57,549	1,217	8,075	66,841	1,507	43	375	1,925
November 2011	58,238	1,313	10,493	70,044	1,446	47	451	1,944
December 2011	58,258	1,441	12,338	72,037	1,451	55	487	1,993
January 2012	62,736	1,553	12,985	77,274	1,528	62	498	2,088
February 2012	64,579	1,620	13,250	79,449	1,664	58	494	2,216
March 2012	66,466	1,585	13,774	81,825	1,682	56	525	2,263
April 2012	69,001	1,559	13,492	84,052	1,674	62	494	2,230
May 2012	68,520	1,601	14,169	84,290	1,671	66	494	2,231
June 2012	67,346	1,535	13,975	82,856	1,660	53	466	2,179
FY 2011-12 Actuals	61,815	1,402	11,049	74,266	1,563	53	448	2,064
July 2012	68,486	1,491	13,731	83,708	1,639	55	452	2,146
August 2012	67,368	1,570	14,509	83,447	1,610	53	459	2,122
September 2012								
October 2012								
November 2012								
December 2012								
January 2013								
February 2013								
March 2013								
April 2013								
May 2013								
June 2013								
FY 2012-13 Year-to-Date Average	67,927	1,531	14,120	83,578	1,625	54	456	2,134
FY 2012-13 Year-to-Date Appropriation	56,492	1,265	9,785	67,542	812	46	502	1,360
Monthly Growth	(1,118)	79	778	(261)	(29)	(2)	7	(24)
Monthly Growth Rate	-1.63%	5.30%	5.67%	-0.31%	-1.77%	-3.64%	1.55%	-1.12%
Over-the-year Growth	10,873	440	8,065	19,378	94	2	104	200
Over-the-year Growth Rate	19.25%	38.94%	125.16%	30.25%	6.20%	3.92%	29.30%	10.41%
Notes:								
1) All children's caseload reporting includes the CHP+ at Work program.								
2.) FY 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.								

Department of Health Care Policy and Financing
FY 2012-13 Medical Premiums Expenditure and Caseload Report

FY 2012-13 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	\$875,680	3,709
August	\$829,357	3,720
September		
October		
November		
December		
January		
February		
March		
April		
May		
June		
Total Year-to-Date	\$1,705,037	3,715
Total Year-to-Date Appropriation	\$12,400,000	
Remaining in Appropriation	\$10,694,963	
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 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.		
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 2012-13 Medical Premiums Expenditure and Caseload Report

FY 2012-13 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	\$8,098,296	61,829
August	\$8,057,112	60,576
September		
October		
November		
December		
January		
February		
March		
April		
May		
June		
Total Year-to-Date	\$16,155,408	61,203
Total Year-to-Date Appropriation	\$90,656,176	63,421
Remaining in Appropriation	\$74,500,768	
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 2012-13 Year-to-date Appropriation includes FY 2012-13 Long Bill (HB 12-1335) and any Special Bills.		
4) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.		