						I	Y 2018-19							
	Service Category	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019	FY 2018-19 Tota YTD
	Physician Service	\$78,380,461	\$61,070,509	\$59,192,791	\$86,765,522	\$61,747,144	\$74,604,526		-	-	-	-	-	\$485,223,9
- 1	EPSDT Screening	\$0	\$0	\$0	\$0	\$0	\$0		-	-	-	-	-	\$2,111,6
	Emergency Transportation	\$5,510,460	\$1,779,386	\$3,295,813	\$4,726,036	\$3,693,122	\$2,179,607	\$3,388,628	-	-	-	-	-	\$24,573,0
- 1	Non-Emergency Medical Transportation	\$4,988,553	\$4,049,695	\$4,323,998	\$5,207,817	\$4,522,294	\$5,007,937	\$3,753,066	_	_		_		\$31,853,3
- 1	Dental Service	\$29,655,550	\$26,484,063	\$27,091,622	\$32,286,363	\$25,941,474	\$28,051,204	\$26,180,012	-	-	-	-	-	\$195,690,2
- [Family Planning	\$451	\$1,471	\$18,704	-\$5,226	-\$79,292	\$0	\$0	-	-	-	-	-	(\$63,89
- [Health Maintenance Organization	\$45,197,654	\$29,880,714	\$30,470,669	\$36,072,908	\$33,729,642	\$33,348,574			-	-	-	-	\$240,998,5
- 1	Inpatient Hospital	\$70,682,634	\$50,034,177	\$62,740,573	\$75,433,401	\$65,101,779	\$68,221,250			-	-	-	-	\$459,467,2
- 1	Outpatient Hospital	\$54,524,627	-\$3,477,665	\$32,709,410	\$52,815,249	\$22,755,749	\$51,868,951	\$31,875,974		-	-	-	-	\$243,072,2
e e	Laboratory and X-Ray	\$10,633,602	\$8,712,201	\$9,638,846	\$11,667,921	\$8,826,159	\$11,331,075	\$11,368,870		-	-	-	-	\$72,178,6
್ದ	Durable Medical Equipment (DME) Pharmacy	\$16,677,716 \$88,943,746	\$10,781,197 \$73,410,603	\$3,982,627 \$74,636,239	\$14,745,083 \$90,449,310	\$11,827,857 \$72,466,135	\$15,087,991 \$82,556,008	\$11,435,482 \$82,111,029		-	-	-	-	\$84,537,9 \$564,573,0
ă l	Drug Rebates - Standard	\$66,943,740	\$75,410,603		\$90,449,510	-\$109,283,423	-\$75,413,416					- :		(\$305,721,97
₹	Rural Health Centers	\$1,625,052	\$2,017,784	\$1,679,403	\$6,810,587	\$1,633,337	\$1,978,169			-	-	_	-	\$18,032,6
- 1	Federally Qualified Health Centers	\$14,793,341	\$13,542,271	\$13,008,924	\$19,424,266	\$14,677,097	\$16,292,618			-	-	-	-	\$101,169,6
- 1	Co-Insurance (Title XVIII-Medicare)	\$7,414,428	\$1,196,478	\$14,261,866	\$5,098,615	\$6,386,071	\$7,092,009	\$7,040,790		-	-	-	-	\$48,490,2
ı	Breast and Cervical Cancer	\$0	\$0		\$0	\$0	\$0							
- 1	Treatment Program	30	50	30	30	30	90	30	-	-	-	-	-	
	Prepaid Inpatient Health Plan	\$0	\$0	\$0	\$0	\$0	\$0	\$0						1
	Services	\$0	61.216		\$0	\$0	\$0	\$0	-	-	-	-	-	l .
	Other Medical Services Preventive Services	\$6,290,287	-\$1,216 \$5,976,866	\$1,216 \$5,787,090	\$7,469,215	\$5,305,217	\$6,624,074			-	-	-	-	\$46,917,1
ı	Acute Home Health	\$2,509,897	\$2,297,540	\$2,477,424	\$3,195,767	\$2,303,809	\$2,636,290	\$2,397,726		-		-		\$17,818,45
ŀ	Acute Care Subtotal	\$437,828,459	\$287,756,074		\$452,162,834	\$231,554,171	\$331,466,867				-	-		\$2,330,922,49
┪		\$41,053,155	\$33,397,860	\$35,500,268	\$41,350,523	\$35,274,770	\$42,056,543	\$36,302,437						\$264,935,55
	HCBS - Elderly, Blind, and Disabled	\$41,033,133	\$33,397,600	\$55,500,208	\$41,330,323	\$33,274,770	\$42,030,343	\$30,302,437	-	-	-	-	-	\$204,933,33
- 1	HCBS - Community Behavioral Health Supports	\$3,774,492	\$3,216,539	\$3,364,962	\$3,677,625	\$3,603,096	\$4,218,552	\$3,756,044						\$25,611,31
ı	HCBS - Children's HCBS	\$3,290,066	\$2,716,526	\$2,567,917	\$3,153,267	\$2,793,208	\$3,702,073	\$3,092,042	-	-	-	-		\$21,315,09
.	HCBS - Consumer Directed									-	-	-	_	
are	Attendant Support	\$0	\$166,921	\$183,791	\$170,489	\$173,410	\$168,794	\$161,382	_	_	_	_	_	\$1,024,78
20	HCBS - Brain Injury	\$2,314,077	\$2,228,402	\$1,728,666	\$1,828,428	\$2,507,955	\$2,607,407	\$2,113,260	-	-	-	-	-	\$15,328,19
E .	HCBS - Children with Autism	\$20,928	\$437	\$0	-\$87	\$0	\$241	\$0	-	-	-	-	-	\$21,51
ii g	HCBS - Children with Life Limiting	\$77,918	\$62,656	\$66,984	\$61,542	\$53,277	\$80,195	\$39,894						\$442,46
33	Illness							-		-	-	-	-	1
·	HCBS - Spinal Cord Injury	\$537,104	\$516,101	\$515,339	\$714,233	\$504,463	\$630,880	\$521,655	-	-	-	-	-	\$3,939,77
- 1	CCT - Services	\$374,100	\$266,712	\$375,502	\$429,976 \$9,684,812	\$379,901	\$474,513	\$474,245 \$6,659,216	-	-	-	-	-	\$2,774,94
	Private Duty Nursing Long-Term Home Health	\$8,834,300 \$32,114,153	\$7,283,609 \$26,198,643	\$6,498,015 \$26,103,613	\$32,518,494	\$7,642,802 \$26,524,251	\$9,400,356 \$34,451,912			-	-	-	-	\$56,003,11 \$205,789,92
- 1	Hospice	\$5,165,951	\$5,805,330	\$5,681,881	\$5,482,674		\$5,604,818	\$5,361,523	-	-				\$38,404,52
ı	CBLTC Subtotal	\$97,556,244	\$81,859,736		\$99,071,976	\$84,759,478	\$103,396,284		-	-	-	-	-	\$635,591,21
_	Class I Nursing Facilities	\$60,142,760	\$57,416,961	\$58,833,980	\$60,827,532	\$55,206,878	\$61,365,695	\$53,923,031		-	-	-	-	\$407,716,83
Ĭ į	Class II Nursing Facilities	\$461,463	\$454,502	\$419,555	\$430,253	\$398,680	\$402,316	\$413,015	-	-	-	-	-	\$2,979,78
n Care	Program of All-Inclusive Care for the Elderly	\$10,096,789	\$20,576,435	\$17,761,539	\$26,828,537	\$14,591,530	\$18,534,901	\$15,535,130	_	_		_	_	\$123,924,86
nsu	Supplemental Medicare Insurance	\$16,424,323	\$15,728,720	\$17,532,330	\$16,731,348	\$15,563,035	\$15,995,942	\$17,381,851						\$115,357,54
e _	Benefit			\$242,405			\$216,671	\$218,669	-	-	-	-	-	
3	Health Insurance Buy-In Program LTC + Insurance Subtotal	\$170,973 \$87,296,308	\$170,737 \$94,347,355		\$215,204 \$105,032,874	\$204,406 \$85,964,529	\$216,671 \$96,515,525			-	-	-	-	\$1,439,06 \$651,418,09
ı.	Single Entry Points	\$67,290,308	\$3,394,068		\$3,376,754	\$3,397,637	\$3,357,327	\$3,398,275				-	-	\$20,338,30
Mgmt	Disease Management	\$0	\$0,574,000	\$71,828	\$0,570,754	\$108,657	\$108,461	\$0		-				\$288,94
e S	Prepaid Inpatient Health Plan													
rvic	Administration	\$4,675,008	\$16,693,854	\$15,709,846	\$12,957,457	\$17,536,498	\$15,413,479		-	-	-	-	-	\$94,952,51
Ser	Service Management Subtotal	\$4,675,008	\$20,087,922	\$19,195,919	\$16,334,211	\$21,042,792	\$18,879,267	\$15,364,644	-	-	-	-	-	\$115,579,76
- 1	Nursing Facility Upper Payment	\$0	\$0	\$0	\$0	\$0	\$6,145,239	\$0						\$6,145,23
	Limit Outpatient Hospital Upper Payment								-	-	-	-	-	
- 1	Limit	\$0	\$0	\$0	\$0	\$0	\$0	\$0	_	_	_	_		:
- 1	Home Health Service Upper Payment								-	-	-	-	-	
	Limit	\$0	\$0	\$0	\$0	\$0	\$0	\$0	-	-	-	-	-	
cing	Hospital Supplemental Medicaid	\$131,895,012	\$132,152,803	\$148,554,926	\$82,080,874	\$81,739,913	\$87,121,785	\$79,340,964						\$742,886,2
anci	Payments	************	,,000	0,00,720	,,0/	,,	,,/02	4,	-	-	-	-	-	
Fir.	Nursing Facility Supplemental Payments	\$9,149,789	\$9,388,138	\$9,202,344	\$9,501,963	\$9,201,206	\$9,365,562	\$9,177,993	_	_	_	_	_	\$64,986,9
- 1	Physician Supplemental Payments	\$0	-\$1,039,207	\$0	\$0	\$0	\$0	\$0	-	-		-		(\$1,039,20
ı	Outstationing Payments	\$0	\$0	\$604,895	\$0	\$0	\$714,102			-	-	-	-	\$1,318,9
- 1	University of Colorado School of	S0	\$0		\$0	\$34,154,639	\$34,140,979							\$68,295,6
I	Medicine Payments					, . ,		* '	-	-	-	-	-	
Į	Accounting Adjustments	-\$6,315,573	\$197,975	-\$1,291,246	-\$250,748	-\$1,172,051	-\$6,452,109	\$4,361,353	-	-	-	-	-	(\$10,922,39
	Other Categories Subtotal	\$134,729,228	\$140,699,709	\$157,070,919	\$91,332,089	\$123,923,707	\$131,035,558			-	-	-	-	\$871,671,5
ļ	Number of Weeks in Month	5	4	4	5	4	5	4		4	5	4	4	5
- 1	Total Expenditures	\$762,085,247	\$624,750,796	\$577,935,662	\$763,933,984	\$547,244,677	\$681,293,501	\$647,939,224	-	-	-	-	-	\$4,605,183,09

Notes:
1) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.
2) September Hospital Supplemental Medicaid Payments expenditure will not tie out to the total for the Medical Services Premiums Hospital Supplemental Payments by Service Category exhibit due to a prior period adjustment outside of the current model period.

Department of Health Care Policy and Financing

FY 2018-19 Medical Premiums Expenditure and Caseload Report

FY 2018-19 Appropriation	-
FY 2018-19 Long Bill Appropriation (HB 18-1322)	\$7,642,975,557
HB 18-1321 "Urgent NEMT"	(\$248,142)
HB 18-1326 "Community Transition Services"	(\$1,384,496)
HB 18-1328 "CHRP Habilitation Residential Program Transfer"	\$67,940
HB 18-1407 "Developmental Disabilities Stable Workforce Annualization"	\$69,070
SB 18-266 "Controlling Medicaid Costs Reconciliation"	(\$10,000,000)
FY 2018-19 Appropriation YTD	\$7,631,479,929
FY 2018-19 YTD Expenditures	\$4,605,183,091
Remaining FY 2018-19 Appropriation	\$3,026,296,838

					FY 2018-19	Supplemental Payn	ents by Service Ca	tegory						
	Service Category	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019	FY 2018-19 Total YTD
miums	Inpatient Medicaid Supplemental Payments	\$52,631,356	\$52,657,747	\$52,630,252	\$38,136,591	\$38,136,591	\$40,451,979	\$36,978,897	-	-	-	-	1	\$311,623,413
Pre eme	Medicaid Disproportionate Share Hospital (DSH) and Other Payments	\$0	\$48,355	\$0	\$146,303	-\$194,658	\$0	\$0	-	-	-	-	1	-
vice Supp	Medicaid Hospital Quality Incentive Payments	\$10,100,539	\$10,093,779	\$10,107,291	\$8,129,483	\$8,129,483	\$9,451,683	\$7,468,383	-	-	-	-	-	\$63,480,641
edical Ser Hospital	Outpatient Medicaid Supplemental Payments	\$69,163,117	\$69,352,922	\$71,671,922	\$35,668,497	\$35,668,497	\$37,218,123	\$34,893,684	-	-	-	-	-	\$353,636,762
Med	Total Medical Services Premiums Payments	\$131,895,012	\$132,152,803	\$134,409,465	\$82,080,874	\$81,739,913	\$87,121,785	\$79,340,964	-	1	-	-	-	\$728,740,816
	CICP Disproportionate Share Hospital (DSH) Payment	\$14,594,243	\$14,545,888	\$14,594,247	\$14,239,825	\$14,580,786	\$24,483,648	\$44,641,918	-	-	-	-	1	\$141,680,555
CICP	Uncompensated Care Supplemental Hospital Medicaid Payment	\$7,956,680	\$7,852,070	\$7,956,684	\$9,206,683	\$9,206,683	\$11,837,215	\$7,891,417	-	-	-	-	-	\$61,907,432
	Total CICP Payments	\$22,550,923	\$22,397,958	\$22,550,931	\$23,446,508	\$23,787,469	\$36,320,863	\$52,533,335	-	-	-	-	-	\$203,587,987
1	Total Supplemental Payments	\$154,445,935	\$154,550,761	\$156,960,396	\$105,527,382	\$105,527,382	\$123,442,648	\$131,874,299	-	-	-	-	-	\$932,328,803

					MEDICAID	CASELOAD WI	THOUT R	ETROACTIVITY ¹								
	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Individuals to 59	Disabled Buy-In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133%	MAGI Adults	Breast & Cervical Cancer Program	MAGI Eligible Children	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
July 2016	43,104	10,931	67,836	5,334	150,888	90,622	351,908	313	470,963	62,982	20,118	14,896	1,883	2,630	33,512	1,327,920
August 2016	43,374	11,011	67,906	5,452	150,673	91,044	359,971	310	471,980	63,715	20,203	14,911	1,872	2,634	33,636	1,338,692
September 2016	43,633	11,039	68,043	5,598	151,271	90,010	356,125	311	471,754	64,431	20,296	14,401	1,797	2,571	33,623	1,334,903
October 2016	43,725	11,131	67,951	5,825	153,579	88,537	353,370	312	471,116	64,454	20,260	14,168	1,790	2,455	33,461	1,332,134
November 2016	43,913	11,233	67,914	5,918	155,687	90,158	358,986	306	473,863	61,650	20,306	13,876	1,738	2,434	33,416	1,341,398
December 2016	43,481	11,181	66,509	6,114	157,155	90,730	362,193	303	472,054	62,524	20,296	13,608	1,736	2,430	33,390	1,343,704
January 2017	43,888	11,405	68,174	6,267	158,234	87,555	362,098	295	469,992	64,732	20,297	13,527	1,816	2,526	33,173	1,343,979
February 2017	43,649	11,363	67,879	6,382	158,909	86,966	361,837	285	467,770	64,616	20,235	12,860	1,765	2,406	33,167	1,340,089
March 2017	44,261	11,397	67,558	6,964	164,569	156,205	296,427	285	465,588	68,165	20,034	12,813	2,392	2,789	34,322	1,353,769
April 2017	44,637	11,381	67,367	7,018	174,085	141,660	309,197	279	466,511	67,508	20,433	12,786	2,321	2,868	34,407	1,362,458
May 2017	44,816	11,401	67,183	7,042	179,878	116,609	333,778	274	467,044	67,596	20,681	12,727	2,276	2,992	34,806	1,369,103
June 2017	44,814	11,420	67,109	7,102	182,132	82,613	368,291	264	462,931	66,503	20,557	12,236	2,229	2,941	34,798	1,365,940
FY 2016-17 Actuals	43,941	11,241	67,619	6,251	161,422	101,059	347,848	295	469,297	64,906	20,310	13,567	1,968	2,640	33,809	1,346,173
July 2017	44,896	11,410	67,009	7,274	181,640	82,329	370,674	150	457,780	65,467	20,651	11,545	2,177	2,925	34,833	1,360,760
August 2017	45,233	11,486	67,079	7,366	182,123	83,011	374,722	145	457,326	66,362	20,804	11,069	2,119	2,957	35,078	1,366,880
September 2017	45,431	11,509	66,918	7,462	181,352	82,088	376,011	132	452,116	66,778	20,941	10,343	2,105	2,831	35,157	1,361,174
October 2017	45,606	11,558	66,985	7,797	179,385	73,998	350,968	139	444,507	67,110	21,093	9,948	2,197	2,842	34,883	1,319,016
November 2017	45,824	11,643	67,142	7,980	179,750	71,489	350,249	149	441,219	66,946	21,305	9,601	2,222	2,716	34,999	1,313,234
December 2017	45,985	11,718	67,066	8,204	179,877	72,942	356,175	151	439,244	66,517	21,485	9,138	2,154	2,677	35,001	1,318,334
January 2018	46,005	11,812	67,365	8,438	180,335	69,709	345,699	157	437,341	66,260	21,576	9,238	2,134	2,704	34,842	1,313,683
February 2018	46,038	11,860	67,688	8,663	180,744	70,071	345,064	165	433,460	64,494	21,701	9,067	2,202	2,704	34,868	1,298,809
March 2018	46,038	11,968	67,875	8,689	176,469	74,829	344,991	163	429,162	63,156	21,926	9,198	2,219	2,763	34,808	1,294,260
April 2018	46,302	12,054	67,963	8,698	177,031	73,217	337,958	169	423,241	59,499	21,920	9,198	2,216	2,703	34,553	1,277,738
1							338,829			58,572		10,082				
May 2018	46,534	12,138	68,152	8,842	177,139	72,831		165	421,753		22,153		2,363	2,930	34,463	1,276,946
June 2018	46,991	12,411	69,127	8,690	182,397	68,816	339,937	169	428,112	60,990	22,094	12,298	2,463	2,831	34,444	1,291,770
FY 2017-18 Actuals	45,907	11,797	67,531	8,175	179,854	74,611	352,606	155	438,771	64,346	21,473	10,125	2,229	2,809	34,828	1,315,217
July 2018	47,275	12,499	69,243	8,791	183,930	68,773	336,317	160	429,605	60,022	22,059	12,567	2,395	2,868	34,656	1,291,160
August 2018	47,463	12,559	69,221	8,734	183,083	69,297	340,105	158	429,302	60,233	21,913	12,450	2,243	2,796	34,802	1,294,359
September 2018	47,564	12,647	69,235	8,667	182,792	68,226	342,428	154	429,176	60,450	21,826	12,375	2,190	2,654	35,434	1,295,818
October 2018	47,546	12,681	68,963	8,606	178,102	66,710	341,696	155	423,792	61,197	21,804	12,319	2,412	2,583	35,294	1,283,860
November 2018	47,544	12,696	68,776	8,641	176,139	64,480	334,945	148	420,435	61,569	21,741	12,138	2,366	2,533	35,078	1,269,229
December 2018	47,622	12,683	68,468	8,819	175,299	63,665	333,858	138	417,916	60,273	22,127	11,881	2,323	2,495	34,728	1,262,295
January 2019	48,091	12,746	69,053	9,147	175,180	61,152	327,637	142	416,568	60,891	21,696	12,073	2,347	2,604	34,657	1,253,984
February 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
March 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	47,586	12,644	68,994	8,772	179,217	66,043	336,712	151	423,827	60,662	21,881	12,258	2,325	2,648	34,950	1,278,670
FY 2018-19 Year-to-Date Appropriation	47,392	12,369	68,495	10,032	186,391	78,809	366,408	116	439,248	67,553	22,516	9,138	2,154	2,881	36,943	1,350,445
Monthly Growth	469	63	585	328	(119)	(2,513)	(6,221)	4	(1,348)	618	(431)		24	109	(71)	(8,311
Monthly Growth Rate	0.98%	0.50%		3.72%	-0.07%	-3.95%	-1.86%	2.90%	-0.32%	1.03%	-1.95%			4.37%	-0.20%	
Over-the-year Growth	2,086	934	1,688	709	(5,155)	(8,557)	(18,062)	(15)	(20,773)	(5,369)	120	2,835	145	(100)	(185)	
Over-the-year Growth Rate	4.53%	7.91%	2.51%	8.40%	-2.86%	-12.28%	-5.22%	-9.55%	-4.75%	-8.10%	0.56%	30.69%	6.58%	-3.70%	-0.53%	-3.819

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) The FY 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill Appropriation).

³⁾ The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

⁴⁾ A system issue skewed the distribution of caseload between the MAGI Adults and MAGI Parents/Caretakers 69% to 133% categories for March, April, and May 2017, artifically inflating MAGI Parents/Caretakers 69% to 133% and deflating MAGI Adults; the system issue was resolved by June 2017.

				MEDIC	AID CASELOA	D BY PROGRA	M WITHO	UT RETROACTIV	/ITY ¹							
	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	MAGI Eligible Children	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Medicaid Fee for Service ²																
July 2018	38,816	10,354	61,324	7,937	162,389	60,735	292,184	152	397,573	55,982	21,631	10,994	2,105	2,868	34,656	1,159,700
August 2018	39,144	10,428	61,424	7,889	161,839	61,260	295,297	147	397,534	56,186	21,499	10,941	1,955	2,796	34,802	1,163,141
September 2018	39,810	10,628	61,931	7,883	162,414	60,492	300,734	143	398,880	56,640	21,468	10,974	1,916	2,654	35,434	1,172,001
October 2018	39,852	10,671	61,825	7,817	158,482	59,223	300,503	146	394,102	57,314	21,437	10,978	2,125	2,581	35,294	1,162,350
November 2018	39,774	10,676	61,670	7,851	156,955	57,212	294,896	141	391,360	57,619	21,331	10,746	2,100	2,532	35,078	1,149,941
December 2018	39,836	10,668	61,405	8,030	156,360	56,472	293,866	130	389,314	56,512	21,692	10,525	2,066	2,493	34,728	1,144,097
January 2019	40,207	10,717	61,947	8,317	156,323	54,304	288,269	134	388,288	57,083	21,274	10,683	2,070	2,603	34,657	1,136,876
February 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
March 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	39,634	10,592	61,647	7,961	159,252	58,528	295,107	142	393,864	56,762	21,476	10,834	2,048	2,647	34,950	1,155,444
Medicaid Managed Care ³																
July 2018	8,459	2,145	7,919	854	21,541	8,038	44,133	8	32,032	4,040	428	1,573	290	0	0	131,460
August 2018	8,319	2,131	7,797	845	21,244	8,037	44,808	11	31,768	4,047	414	1,509	288	0	0	131,218
September 2018	7,754	2,019	7,304	784	20,378	7,734	41,694	11	30,296	3,810	358	1,401	274	0	0	123,817
October 2018	7,694	2,010	7,138	789	19,620	7,487	41,193	9	29,690	3,883	367			2	0	121,510
November 2018	7,770	2,020	7,106	790	19,184	7,268	40,049	7	29,075	3,950	410	1,392	266	1	0	119,288
December 2018	7,786	2,015	7,063	789	18,939	7,193	39,992	8	28,602	3,761	435	1,356	257	2	0	118,198
January 2019	7,884	2,029	7,106	830	18,857	6,848	39,368	8	28,280	3,808	422	1,390	277	1	0	117,108
February 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
March 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	_	-	-
June 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	7,952	2,053	7,348	812	19,966	7,515	41,605	8	29,963	3,900	405	1,423	277	1	-	123,228
Rocky Mountain Health Plans HMO					· · · · · · · · · · · · · · · · · · ·	,										
July 2018	1,958	693	3,399	527	9,294	4,113	16,831	0	10	6	87	739	155	0	0	37,812
August 2018	1,981	699	3,378	536	9,157	4,139	16,990	0	10	7	84	713	154	0	0	37,848
September 2018	2,066			541	9,233		16,783	1	16	11	90			0	0	37,852
October 2018	2,038	696		517	8,945		16,248	0	15	12	88	659	161	0	0	36,709
November 2018	2,049	701	3,256	520	8,772		15,839	0	12	13	86			0	0	36,026
December 2018	2,089	701	3,255	521	8,728	3,930	15,924	0	14	13	84	674	138	0	0	36,071
January 2019	2,131	710		541	8,717		15,779	0	16	12	85	670	151	1	0	
February 2019	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-
March 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	0	0	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	2,045	700	3,306	529	8,978	4.037	16,342	_	13	11	86	690	151	_	_	36,888

	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	MAGI Eligible Children	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Denver Health & Hospital Authority HMO			·													
July 2018	3,305	1,009	4,297	327	12,247	3,925	27,302	8	32,022	4,034	341	834	135	0		
August 2018	3,185	983	4,201	309	12,087	3,898	27,818	11	31,758	4,040	330	796	134	0	-	
September 2018		874	3,756	243	11,145	3,486	24,911	10		3,799	268			-	-	
October 2018		877	3,669	272	10,675	3,412	24,945	9	,	3,871	279			2		
November 2018	/	861	3,636	270	- ,	3,314	24,210	7	27,003	3,937	324	713		1	0	
December 2018		850	3,594	268	10,211	3,263	24,068	8	,	3,748	351	682			-	
January 2019	2,530	857	3,600	289	10,140	3,045	23,589	8	28,264	3,796	337	720	126	0	0	77,301
February 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
March 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019		-	-	-	0	0	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	2,722	902	3,822	283	10,988	3,478	25,263	9	29,950	3,889	318	733	126	1	-	82,484
PACE - Program of All-Inclusive Care for the Eld																
July 2018		443	223	0			0		-	0	0			-	-	- ,
August 2018		449	218	0		0	0		-	0	0	-		0	-	- ,
September 2018		449	231	0		0	0	0	-	0	0	0	-	0	0	
October 2018		437	214	0	0	0	0	0		0	0	0	-	0	0	- ,
November 2018		458	214	0	0	0	0	0		0	0	0	-	0	0	
December 2018	- ,	464	214	0	0	0	0	0		0	0	0	-	0	0	3,855
January 2019		462	225	0	0	0	0	0	0	0	0	0	0	0	0	-,
February 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
March 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	3,185	452	220	-	-	-	-	-	-	-	-	-	-	-	-	3,857
ACC - Accountable Care Collaborative 4,6																
July 2018	43,765	11,989	68,550	8,661	181,641	67,436	327,430	146	-)	58,752	21,125				0	, .,
August 2018	44,107	12,046	68,589	8,630	180,894	68,057	331,264	150	424,950	59,404	20,994			5	0	
September 2018	44,090	12,128	68,551	8,495	181,081	67,252	333,036	146		59,554	20,890			4	0	
October 2018		12,181	68,324	8,496		65,793	332,415			60,031	20,896			8	0	, , , -
November 2018		12,192	68,156	8,556	174,602	63,777	325,875	140	-7	60,715	20,837	11,926		2		-,,
December 2018		12,151	67,825	8,664	173,630	62,783	324,119	130		59,450	21,209			3	-	-,=,
January 2019	44,683	12,239	68,438	9,061	173,162	60,583	318,535	133	412,502	60,220	20,804	11,886	2,321	4	0	1,194,571
February 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
March 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019		-	-	-	-	-	-	-	-	-		-	-	-	-	-
June 2019		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	44,175	12,132	68,348	8,652	177,347	65,097	327,525	141	419,092	59,732	20,965	12,023	2,270	4	-	1,217,503

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⁾ Medicaid Fee for Service includes all Medicaid clients who are not enrolled in a limited managed care capitation initiative or PACE. Enrollment here includes Managed Fee for Service ACC enrollment, but does not include all clients shown in the ACC Accountable Care Collaborative section. See Footnote 4 for more information.

3) Medicaid Managed Care includes clients who are enrolled in the limited managed care capitation initiatives operated by Rocky Mountain Health Plans in Region 1 and by Colorado Access in collaboration with Denver Health Medical Plan in Region 5, and PACE.

⁴⁾ Accountable Care Collaborative (ACC) caseload includes ACC Managed Fee for Service enrollment, as well as enrollment in the limited managed care capitation initiatives operated by Rocky Mountain Health Plans in Region 1 and by Colorado Access in collaboration with Denver Health Medical Plan in Region 5, as these are ACC initiatives in

⁵⁾ The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

⁶⁾ On July 1, 2018, as part of the implementation of the ACC Phase II, the Department moved to mandatory enrollment of all individuals eligible for full Medicaid. This accounts for the increase in the overall enrollment into the program. In addition, the way members are enrolled to a regional accountable entity (RAE) has changed; members are attributed to a primary care medical provider first and that dictates the RAE to which they are enrolled.

DAE														
RAE	County of Residence	Jul 2018	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	FY 2018-19 Average Monthly Enrollment
	Archuleta	3,283	3,291	3,285	3,234	3,187	3,150	3,170	-	-	-	-	-	3,229
Ţ	Delta	9,274	9,266	9,366	9,201	9,099	9,072	9,019	-	-	-	_	-	9,185
Ţ	Dolores	595	602	601	609	613	605	592	-	-	-	-	-	602
7	Eagle	5,781	5,785	5,773	5,700	5,577	5,508	5,533	-	-	-	-	-	5,665
	Garfield	11,931	11,969	11,923	11,778	11,641	11,608	11,621	-	-	-	-	-	11,782
	Grand	1,688	1,661	1,651	1,629	1,584	1,520	1,509	-	-	-	-	-	1,606
	Gunnison	2,992	2,993	3,041	2,935	2,894	2,880	2,878	-	-	-	-	-	2,945
Ţ	Hinsdale	149	152	153	149	150	144	138	-	-	-	-	-	148
	Jackson	256	259	260	256	248	246	234	-	-	-	-	-	251
	La Plata	11,217	11,234	11,264	11,227	11,187	10,990	11,129	-	-	-	-	-	11,178
	Larimer	50,938	51,031	51,912	51,163	50,317	50,555	50,702	-	-	-	-	-	50,945
² 1 ²	Mesa	41,820	41,858	41,986	41,294	40,738	40,700	40,582	-	-	-	-	-	41,283
RAE	Moffat	3,438	3,451	3,404	3,387	3,420	3,452	3,416	-	-	-	-	-	3,424
~ [Montezuma	8,958	8,979	9,146	9,057	9,026	8,973	8,992	-	-	-	-	-	9,019
1	Montrose	11,441	11,373	11,350	11,070	10,938	10,959	10,944	-	-	-	-	-	11,154
[9	Ouray	682	661	654	640	637	631	639	-	-	-	-	-	649
[7	Pitkin	1,483	1,483	1,469	1,438	1,390	1,404	1,377	-	-	-	-	-	1,435
[7	Rio Blanco	1,253	1,242	1,229	1,221	1,206	1,213	1,223	-	-	-	-	-	1,227
	Routt	3,264	3,275	3,235	3,179	3,114	3,108	3,086	-	-	-	-	-	3,180
	San Juan	179	173	175	169	170	170	168	-	-	-	-	-	172
	San Miguel	1,109	1,077	1,081	1,059	1,031	1,005	1,013	-	-	-	-	-	1,054
	Summit	3,208	3,204	3,172	3,105	3,037	2,952	2,909	-	-	-	-	-	3,084
7	Residence Outside RAE Area ⁽¹⁾	16,085	15,847	10,421	10,277	10,192	10,905	11,021	-	-	-	-	-	12,107
Ī	Total	191,024	190,866	186,551	183,777	181,396	181,750	181,895	-	-	-	-	-	185,322
	Cheyenne	445	448	426	415	402	381	378	-	-	-	-	-	414
	Kit Carson	1,804	1,819	1,811	1,825	1,828	1,826	1,817	-	-	-	_	-	1,819
Ţ	Lincoln	1,102	1,095	1,097	1,067	1,061	1,080	1,081	-	-	-	_	-	1,083
Ţ	Logan	4,493	4,471	4,386	4,340	4,340	4,269	4,336	-	-	-	-	-	4,376
	Morgan	7,890	7,946	7,902	7,816	7,663	7,533	7,628	-	-	-	-	-	7,768
RAE 2	Phillips	929	936	914	928	947	930	906	-	-	-	-	-	927
- ₹ - [Sedgwick	647	646	639	633	637	624	629	-	-	-	-	-	636
- I	Washington	1,046	1,051	1,056	1,020	1,019	1,018	1,033	-	-	-	-	-	1,035
ľ	Weld	55,824	55,836	54,512	52,968	52,253	50,159	50,110	-	-	-	-	-	53,095
	Yuma	2,375	2,365	2,380	2,396	2,445	2,384	2,385	-	-	-	-	-	2,390
Ţ	Residence Outside RAE Area ⁽¹⁾	15,049	15,089	12,867	13,180	13,489	12,536	12,419	-	-	-	-	_	13,518
E	Total	91,604	91,702	87,990	86,588	86,084	82,740	82,722	-	-	-	-	-	87,061
-	Adams	101,766	103,179	104,495	101,410	97,940	97,451	98,438	-	-	-	-		100,668
_	Arapahoe	105,712	106,701	106,267	102,826	100,455	99,569	100,288	_	_	_	_	_	103,117
. რ	Douglas	18,317	18,805	23,443	23,411	22,094	22,397	22,667	_	_	_	_	_	21,591
	Elbert	2,495	2,509	2,559	2,460	2,408	2,329	2,356	_	-	-	_	_	2,445
~ 1	Residence Outside RAE Area ⁽¹⁾	40,879	44,537	46,634	47,312	49,719	52,220	51,393	_		_			47,528
- h	Residence Outside RAE Area -	40 x /0												

RAE	County of Residence	Jul 2018	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	FY 2018-19 Average Monthly Enrollment
	Alamosa	6,701	6,675	6,578	6,555	6,528	6,509	6,505	-	-	-	-	-	6,579
	Baca	1,306	1,304	1,300	1,297	1,287	1,286	1,279	-	-	-	-	-	1,295
	Bent	1,652	1,649	1,643	1,610	1,608	1,613	1,614	-	-	-	-	-	1,627
	Chaffee	3,528	3,528	3,516	3,488	3,412	3,306	3,339	-	-	-	-	-	3,445
	Conejos	3,146	3,172	3,167	3,085	3,035	3,076	3,063	-	-	-	-	-	3,106
	Costilla	1,851	1,855	1,831	1,840	1,869	1,864	1,871	-	-	-	-	-	1,854
	Crowley	1,387	1,397	1,400	1,388	1,384	1,374	1,367	-	-	-	-	-	1,385
	Custer	840	836	815	797	793	792	783	-	-	-	-	-	808
	Fremont	11,914	11,994	12,443	12,492	12,380	12,310	12,273	-	-	-	-	-	12,258
4	Huerfano	2,644	2,674	2,671	2,656	2,640	2,630	2,595	-	-	-	-	_	2,644
RAE	Kiowa	349	357	359	350	342	347	354	-	-	-	-	_	351
≥ ≥	Lake	1,176	1,200	1,159	1,161	1,168	1,141	1,139	-	-	-	-	-	1,163
	Las Animas	5,484	5,489	5,501	5,479	5,492	5,470	5,512	-	-	-	-	-	5,490
	Mineral	139	146	143	149	142	140	143	-	-	-	-	-	143
	Otero	7,389	7,398	7,352	7,348	7,271	7,250	7,228	-	-	-	-	-	7,319
	Prowers	4,686	4,638	4,579	4,547	4,513	4,527	4,498	-	-	-	-	-	4,570
	Pueblo	64,740	64,851	64,506	63,883	63,279	62,841	62,509	-	-	-	-	-	63,801
	Rio Grande	4,081	4,073	4,067	4,031	4,017	3,982	4,011	-	-	-	-	-	4,037
	Saguache	2,257	2,275	2,227	2,178	2,211	2,179	2,174	-	-	-	-	-	2,214
	Residence Outside RAE Area ⁽¹⁾	7,475	7,482	4,744	6,175	8,632	11,304	11,101	_	-	-	-	_	8,130
	Total	132,745	132,993	130,001	130,509	132,003	133,941	133,358	-	-	-	-	_	132,221
25	Denver	160,258	159,412	156,762	152,888	145,367	144,840	143,205	-	-	-	-	_	151,819
RAE ?	Residence Outside RAE Area ⁽¹⁾	56,858	56,373	54,907	57,392	52,955	56,750	55,531	-	_	_	_	_	55,824
≥	Total	217,116	215,785	211,669	210,280	198,322	201,590	198,736	-	-	-	-	-	207,643
	Boulder	40,406	40,463	42,646	41,983	41,278	41,047	40,758	-	-	_	-	_	41,225
	Broomfield	5,315	5,351	5,401	5,175	5,047	4,746	4,750	_	-	_	_	_	5,112
9	Clear Creek	1,123	1,122	1,169	1,172	1,137	1,101	1,084	_	-	_	_	_	1,130
	Gilpin	794	786	831	825	806	798	814	_	-	_	_	_	808
RAE	Jefferson	68,378	67,458	66,541	65,426	61,988	60,300	61,428	-	-	-	-	-	64,503
	Residence Outside RAE Area ⁽¹⁾	35,898	35,653	33,512	33,975	33,285	32,685	33,080	_	_	_	_	_	34,013
	Total	151,914	150,833	150,100	148,556	143,541	140,677	141,914	_	_	_	_	_	146,791
	El Paso	161,727	162,857	171,032	168,695	165,124	161,915	160,236	_	-	_	_	_	164,512
7	Park	1,663	1,658	1,672	1,549	1,517	1,356	1,308	_	_	_	_	_	1,532
Ħ	Teller	4,667	4,738	5,270	5,241	5,106	5,064	5,042	_	_	_	_	_	5,018
RAE	Residence Outside RAE Area ⁽¹⁾	6,245	6,360	5,818	9,618	23,657	18,457	14,073						12,033
	Total	174,302	175,613	183,792	185,103	195,404	186,792	180,659		_		_	_	183,095
		17.1,002	175,010	100,772	100,100	170,104	100,772	100,000	_	_	_	_		100,075

⁽¹⁾ Previously, members were attributed to RCCOs based on county of residence. In ACC Phase II, members are attributed to RAEs based on their Primary Care Medical Provider attribution. The information in this exhibit is based on member county of residence.

⁽²⁾ RAE 1 includes caseload for the limited managed care capitation initiatives operated by Rocky Mountain Health Plans in Region 1 and RAE 5 includes caseload for the limited managed care capitation initiatives operated by Colorado Access in collaboration with Denver Health Medical Plan in Region 5, as these are ACC initiatives under ACC Phase II.

FY 2018-19	Medicaid Behavioral Health Community I	Programs Expenditures	
	Total Expenditures	Behavioral Health Capitation Payments	Behavioral Health Fee for Service Payments
July	\$47,932,195	\$47,852,128	\$80,067
August	\$73,320,597	\$73,231,190	\$89,407
September	\$48,156,641	\$48,021,470	\$135,171
October	\$47,866,901	\$47,727,892	\$139,009
November	\$47,200,634	\$47,112,482	\$88,152
December	\$29,761,078	\$29,685,932	\$75,146
January	\$51,063,148	\$51,020,053	\$43,095
February	-	-	-
March	-	-	-
April	-	-	-
May	-	-	•
June	-	-	-
Total Year-to-Date Expenditures	\$345,301,194	\$344,651,147	\$650,047
Total Year-to-Date Appropriation	\$656,838,829	\$647,450,482	\$9,388,347
Remaining in Appropriation	\$311,537,635	\$302,799,335	\$8,738,300

- 1) The Medicaid Behavioral Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.
- 2) FY 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill).
- 3) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.
- 4) Behavioral Health Capitation Payments expenditure for August 2018 is higher than usual due to Behavioral Health Incentive Payments made for payments associated with FY 2017-18.

	FY 2018-19 Me	dicaid Community	Behavioral Health	Program Expendit	ures by Regional A	ccountable Entity			
	Total	Rocky Mountain Health Plans (RAE 1)	Northeast Health Partners (RAE 2)	Colorado Access (RAE 3)	Health Colorado (RAE 4)	Colorado Access (RAE 5)	Colorado Community Health Alliance (RAE 6)	Colorado Community Health Alliance (RAE 7)	Other ¹
July	\$47,852,128	\$7,123,336	\$3,094,991	\$9,554,072	\$5,854,028	\$9,408,974	\$7,127,404	\$5,475,423	\$213,900
August	\$73,231,190	\$7,149,048	\$3,093,405	\$9,765,724	\$5,903,148	\$9,489,068	\$7,113,937	\$5,535,017	\$25,181,843
September	\$48,021,470	\$6,968,031	\$2,990,575	\$10,223,702	\$5,781,463	\$9,150,961	\$7,077,381	\$5,831,997	(\$2,640)
October	\$47,727,892	\$6,879,417	\$2,927,676	\$9,896,296	\$5,745,956	\$9,461,418	\$6,985,744	\$5,831,385	\$0
November	\$47,112,482	\$6,780,899	\$2,930,177	\$9,814,484	\$5,840,578	\$8,789,251	\$6,733,267	\$6,223,826	\$0
December	\$29,685,932	\$6,782,651	\$2,878,059	\$9,648,941	\$5,955,010	\$9,255,871	\$6,687,365	\$5,893,998	(\$17,415,963)
January	\$51,020,053	\$7,196,491	\$3,016,273	\$10,899,628	\$6,553,148	\$9,598,954	\$6,994,610	\$6,241,740	\$519,209
February	-	-	-	-	-	-	-	-	-
March	-	-	-	-	-	-	-	-	-
April	-	-	-	-	-	-	-	-	-
May	-	-	-	-	-	-	-	-	-
June	-	-	-	-	-	-	-	-	-
Total Year-to-Date Expenditures	\$344,651,147	\$48,879,873	\$20,931,156	\$69,802,847	\$41,633,331	\$65,154,497	\$48,719,708	\$41,033,386	\$8,496,349
Total Year-to-Date Appropriation	\$647,450,482								
Remaining in Appropriation	\$302,799,335								

Footnotes:

1) "Other" contains dollars paid to Behavioral Health Organizations for dates prior to July 1, 2018 (the beginning of the Accountable Care Collaborative Phase II), as well as dollars where the RAE cannot be identified due to timing discrepancies between the MMIS and CORE systems, since CORE does not contain provider information for payments made in interChange.

	FY 20	018-19 Medicaid Co	mmunity Behavior	al Health Program	Caseload by Regio	nal Accountable E	ntity		
	Total	Rocky Mountain Health Plans (RAE 1)	Northeast Health Partners (RAE 2)	Colorado Access (RAE 3)	Health Colorado (RAE 4)	Colorado Access (RAE 5)	Colorado Community Health Alliance (RAE 6)	Colorado Community Health Alliance (RAE 7)	Other
July	1,253,636	191,021	91,604	269,243	132,745	216,889	152,044	174,302	25,788
August	1,256,761	190,864	91,702	275,738	132,994	215,731	150,853	175,613	23,266
September	1,257,730	186,540	87,989	283,397	130,001	211,667	150,100	183,792	24,244
October	1,245,983	183,776	86,587	277,415	130,509	210,278	148,555	185,103	23,760
November	1,231,618	181,395	86,084	272,617	132,003	198,315	143,546	195,404	22,254
December	1,225,072	181,750	82,740	273,966	133,940	201,588	140,677	186,792	23,619
January	1,216,723	181,918	82,740	275,162	133,391	198,750	141,925	180,679	22,158
February	-	-	-	-	-	-	-	-	-
March	-	-	-	-	-	-	-	-	-
April	-	-	-	-	-	-	-	-	-
May	-	-	-	-	-	-	-	-	-
June	-	-	-	-		-	-	-	-
Total Year-to-Date Average	1,241,075	185,323	87,064	275,363	132,226	207,603	146,814	183,098	23,584
Total Year-to-Date Appropriation	1,310,621								·

- 1) "Other" category includes clients enrolled in the Program of All-Inclusive Care for the Elderly and clients ineligible for Medicaid Behavioral Health Benefits.
- 2) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report except for the Colorado Access NE which is reported using paid capitation claims. The number of days captured in the monthly figure is equal to the number of days in the report month. The Medicaid Behavioral Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.
- 3) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

FY 2018-19 Children's Basic Health Plan Expenditures													
	Total Expenditures	Children Medical Expenditures	Children Dental Expenditures	Prenatal Medical Expenditures									
July	\$14,541,777	\$12,421,347	\$1,389,318	\$731,112									
August	\$15,296,502	\$12,990,696	\$1,452,711	\$853,095									
September	\$14,938,875	\$12,703,043	\$1,410,259	\$825,573									
October	\$15,101,072	\$12,862,842	\$1,423,773	\$814,457									
November	\$17,588,486	\$13,493,151	\$1,462,866	\$2,632,469									
December	\$19,566,127	\$15,214,350	\$1,452,712	\$2,899,065									
January	\$15,360,628	\$13,016,500	\$1,420,169	\$923,960									
February	-	-	-	-									
March	-	-	-	-									
April	-	-	-	-									
May	-	-	-	-									
June	-	-	-	-									
Total Year-to-Date Expenditures	\$112,393,467	\$92,701,929	\$10,011,807	\$9,679,731									
Total Year-to-Date Appropriation	\$194,981,200	\$163,020,083	\$19,407,153	\$11,644,292									
Remaining in Appropriation	\$82,587,733	-	-	-									

¹⁾ FY 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill).

²⁾ The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of 15th day of the reported month, and may be restated in future reports based on further analysis.

CHILDREN'S	BASIC HEAL	TH PLAN CASELOAD V	WITHOUT RE	FROACTIVITY	Y		
	Children to 205% FPL	Expansion Children to 259% FPL	Total Children	Prenatal to 205% FPL	Expansion Prenatal to 259% FPL	Total Prenatal	
July 2016	39,962	18,968	58,930	227	509	736	
August 2016	41,345	19,419	60,764	200	497	697	
September 2016	41,419	19,945	61,364	199	477	676	
October 2016	40,987	19,751	60,738	205	443	648	
November 2016	40,451	19,205	59,656	202	464	666	
December 2016		19,860	61,834	199	494	693	
January 2017	42,653	20,732	63,385	204	510	714	
February 2017	43,074	21,191	64,265	208	498	706	
March 2017	47,726	23,839	71,565	248	523	771	
April 2017	49,020	24,052	73,072	261	515	776	
May 2017	49,447	24,214	73,661	276	502	778	
June 2017	49,587	24,293	73,880	275	486	761	
FY 2016-17 Actuals	43,970	21,289	65,260	225	493	701	
July 2017	50,236	24,236	74,472	279	503	782	
August 2017	50,635	24,652	75,287	279	509	788	
August 2017 September 2017	49,863	24,632	74,549	279	512	785	
						785	
October 2017	49,855	25,018	74,873	275	523		
November 2017	50,032	25,301	75,333	277	565	842	
December 2017	50,276	24,999	75,275	294	568	862	
January 2018	50,891	25,260	76,151	294	575	869	
February 2018	54,854	27,049	81,903	302	564	866	
March 2018	56,287	27,694	83,981	311	554	865	
April 2018	60,590	29,115	89,705	325	534	859	
May 2018	61,037	29,160	90,197	310	533	843	
June 2018	54,475	27,300	81,775	306	507	813	
FY 2017-18 Actuals	53,253	26,206	79,458	294	537	831	
July 2018		26,301	82,322	349	509	858	
August 2018	55,401	25,854	81,255	369	552	921	
September 2018	54,388	25,249	79,637	351	560	911	
October 2018	53,528	26,116	79,644	263	534	797	
November 2018	54,613	27,269	81,882	277	574	851	
December 2018	52,204	27,094	79,298	295	580	875	
January 2019	51,644	27,763	79,407	341	606	947	
February 2019	- I		-	-	-	-	
March 2019	l -		-	_	-	-	
April 2019	1 -	_	-	_	-	-	
May 2019	l -		-	_	_	-	
June 2019	-	_	-	_	_	-	
	1 -	_1	_	_	-	-	
FY 2018-19 Year-to-Date Average	53,971	26,521	80,492	321	559	880	
FY 2018-19 Year-to-Date Appropriation	50,375	25,855	76,230	403	486	889	
Monthly Growth	(560)		109	46	26	72	
Monthly Growth Rate	-1.07%		0.14%	15.59%	4.48%	8.23%	
Over-the-year Growth	753	2,503	3,256	47	31	78	
Over-the-year Growth Rate	1.48%		4.28%	15.99%	5.39%	8.98%	
Notes:	1.10,0	2.2.1.0	1.2070	13.77.10	0.07.0	0.707	

¹⁾ All children's caseload reporting includes the CHP+ at Work program.
2) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

	FY 2018-19 Division for Intellectual and Developmental Disabilities (DIDD) Waiver and State Only Program Caseload Per Month														
	Program	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019	FY 2018-19 Average YTD	FY 2018-19 Authorized Maximum Enrollment
	HCBS - Developmental Disabilities	5,356	5,438	5,524	5,606	5,672	5,725	5,789	-	-	-	-	-	5,587	6,338
	HCBS - Developmental Disabilities - Regional Centers	107	104	104	104	102	101	99	-	-	-	-	-	103	-
	HCBS - Supported Living Services	4,957	4,937	4,879	4,843	4,788	4,764	4,761	-	-	-	-	-	4,847	-
百	HCBS - Children's Extensive Support	1,784	1,814	1,835	1,855	1,856	1,859	1,838	-	-	-	-	-	1,834	-
Ω	HCBS - Children's Habilitation Residential Program	31	26	28	32	34	34	32	-	-	-	-	-	31	
	HCBS - Targeted Case Management	12,204	12,293	12,342	12,408	12,418	12,449	12,519	-	-	-	-	-	12,376	-
	DIDD Subtotal	24,439	24,612	24,712	24,848	24,870	24,932	25,038	-	-	-	-	-	24,779	-
s - DD zations ⁽⁶⁾	Waiting List Authorizations	357	<30	39	38	38	<30	<30	-	-	-	-	-	-	-
HCBS Authoris	Reserved Capacity Authorizations	<30	34	32	<30	<30	36	31	-	-	-	-	-	-	-

,	1													
	-													
				FY 2018-19 Divis	ion for Intellectual	and Developmenta	al Disabilities (DIDI)) Waiver and Sta	te Only Program E	xpenditure Per Month				
	Program	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	I 2010	February 2019	March 2019 April 2019	May 2019 June 2019	FY 2018-19	FY 2018-19	Percent of FY 2018-19
	rrogram	July 2018	August 2016	September 2018	October 2018	November 2018	December 2018	January 2019	rebruary 2019	March 2019 April 2019	May 2019 June 2019	YTD	Appropriation	Appropriation Spent
	HCBS - Developmental Disabilities	\$34,456,789	\$32,151,435	\$32,106,295	\$36,526,318	\$32,195,216	\$35,613,741	\$34,114,961	-	-		\$237,164,756	\$435,824,364	54.42%
	HCBS - Developmental Disabilities - Regional Centers	\$2,285,547	\$2,389,845	\$2,110,210	\$2,035,793	\$2,072,412	\$1,935,488	\$1,936,154	-	-		\$14,765,450	\$52,774,028	27.98%
	HCBS - Supported Living Services	\$6,026,330	\$4,918,405	\$5,010,811	\$6,082,072	\$4,648,891	\$5,626,937	\$4,594,942	-	-		\$36,908,388	\$78,617,567	46.95%
9	HCBS - Children's Extensive Support	\$2,584,992	\$1,969,593	\$1,615,295	\$2,186,737	\$1,532,860	\$2,175,829	\$1,811,107	-	-		\$13,876,413	\$25,868,756	53.64%
回	HCBS - Children's Habilitation Residential Program	\$82,358	\$55,767	\$139,754	\$149,168	\$122,151	\$136,159	\$165,590	-	-		\$850,946	\$2,515,319	33.83%
	HCBS - Targeted Case Management	\$2,623,830	\$2,664,452	\$2,578,723	\$3,676,659	\$2,830,693	\$2,807,528	\$2,111,417	-	-		\$19,293,302	\$32,733,043	58.94%
	Quality Assurance, Utilization Review and Supports Intensity Scale	\$0	\$427,730	\$447,630	\$201,496	\$663,870	\$0	\$863,637	-	-		\$2,604,363	\$5,500,281	47.35%
	DIDD Subtotal	\$48,059,846	\$44,577,227	\$44,008,718	\$50,858,243	\$44,066,093	\$48,295,683	\$45,597,808	-	-		\$325,463,618	\$633,833,358	51.35%
	Number of Weeks in Month	5	4	4	5	4	5	4	4	4	5 4 4	52	-	-
	Expenditure Per Week	\$9,611,969	\$11,144,307	\$11,002,180	\$10,171,649	\$11,016,523	\$9,659,137	\$11,399,452	-	-		\$10,498,826	\$0	\$0
	State Only Supported Living Services	\$0	\$611,708	\$611,708	\$611,708	\$611,708	\$0	\$1,223,416	-	-		\$3,670,249	\$8,030,743	45.70%
July sms	Family Support Services Program	\$0	\$587,642	\$587,642	\$587,642	\$587,642	\$0	\$1,174,618	-	-		\$3,525,186	\$7,058,033	49.95%
ogra	State Only Case Management	\$0	\$167,613	\$167,613	\$167,613	\$167,613	\$0	\$335,226	-	-		\$1,005,679	\$2,116,047	47.53%
Sta Pr	State Only Programs Subtotal	\$0	\$1,366,963	\$1,366,963	\$1,366,963	\$1,366,963	\$0	\$2,733,260	-	-		\$8,201,114	\$17,204,823	47.67%
I	Evnenditure Per Week	50	\$341 741	\$341 741	\$273 393	\$341 741	50	\$683 315		-		\$195 265	\$0	SO.

Notes:

1) Historically, DIDD State Only Programs and QA/UR/SIS do not have expenditures in accounting period 1. They do, however, have historical expenditures in periods 02 through 13.

2) Family Support Services Program does not have a caseload appropriation. Services are rendered on a case-by-case and as needed basis.

3) FY 2018-19 Appropriations for DIDD Supported Living Services and Targeted Case Management were adjusted to reflect only the portion appropriated for those services. State-only program appropriations were removed.

4) State Only Programs are part of the Targeted Case Management appropriation and do not have a stand alone appropriation. The appropriation listed here matches the contract amount for each program.

5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information system (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

6) Starting July 2018, the Department began reporting the number of persons moved off the developmental disabilities waiting list, specifying the authorizations initiated under order of selection (waiting list) and the authorizations initiated under reserve capacity criteria per HB 18-1407 requirements. These numbers represent the total number of authorizations that occurred in a month and will not match enrollment as there is a time lag between notice of authorization and enrollment. The number of authorizations is cumulative and represents the number of unique authorizations, which includes declines. <30 values cannot be displayed due to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The Department will report year-to-date authorizations at six month increments

7) Targeted Case Management enrollment was restated January 2019 to reflect the addition of CHRP clients beginning to receive services July 1, 2018

Department of Health Care Policy and Financing

FY 2018-19 Medical Premiums Expenditure and Caseload Report

FY 2018-19 Old Age Pension State Medical Program Expenditures and Caseload							
	Total Expenditures	Old Age Pension State Medical					
		Program Caseload					
July	\$12,085	59					
August	\$18,621	53					
September	\$275	52					
October	\$18,580	49					
November	\$14,833	44					
December	\$43,415	31					
January	\$16,004	<30					
February	-	-					
March	-	-					
April	-	-					
May	-	-					
June	-	-					
Total Year-to-Date	\$123,813	45					
Total Year-to-Date Appropriation	\$10,000,000	-					
Remaining in Appropriation	\$9,876,187	-					

- 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) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.
- 3) Excess funds in the Old Age Pension Health and Medical Care Fund are used to offset the need for General Fund in the Medical Services Premiums line item.
- 4) FY 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill).
- 5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

Department of Health Care Policy and Financing

FY 2018-19 Medical Premiums Expenditure and Caseload Report

FY 2018-19 Medicare Modernization Act State Contribution Payment Expenditures and Caseload								
	Total Expenditures	Medicare Modernization Act State						
		Contribution Payment Caseload						
July	\$12,149,609	76,142						
August	\$12,089,087	76,742						
September	\$12,259,758	75,201						
October	\$12,190,863	76,209						
November	\$12,104,551	75,398						
December	\$12,268,552	78,663						
January	\$12,135,907	78,723						
February	-	-						
March	-	-						
April	-	-						
May	-	-						
June	-	-						
Total Year-to-Date	\$85,198,326	76,725						
Total Year-to-Date Appropriation	\$151,835,471	77,462						
Remaining in Appropriation	\$66,637,146	-						

- 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 is 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, current month expenditures are related to the caseload from the month three months prior from the current month.
- 3) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.
- 4) FY 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill).