

COLORADO DEPARTMENT OF HEALTH CARE POLICY AND FINANCING: FY 2016-17 BUDGET REQUEST; COLORADO HEALTH CARE AFFORDABILITY ACT UPDATE

Colorado Health Care Affordability Act: Outlook FY 2013-14 to FY 2017-18					
	SFY 2013-14 Actuals	SFY 2014-15 Actuals	SFY 2015-16 Estimate	SFY 2016-17 Request	SFY 2017-18 Estimate
A. Hospital Provider Fee Cash Fund Revenue					
Actual/Projected Revenue	\$565,976,813	\$528,370,519	\$805,000,000	\$656,000,000	\$699,000,000
Interest Earned	\$709,429	\$416,036	\$800,000	\$700,000	\$700,000
Other Income	\$30,143	\$0	\$0	\$0	\$0
Previous Year's Cash Fund Balance	\$36,381,634	\$11,788,788	\$8,500,000	\$7,900,000	\$13,700,000
Hospital Provider Fee Cash Funds Available	\$603,098,019	\$540,575,343	\$814,300,000	\$664,600,000	\$713,400,000
B. Hospital Provider Fee Cash Fund Expenditures					
(1) Executive Director's Office - Total Prior to Bottom-Line Adjustments	\$11,097,221	\$14,449,783	\$20,500,000	\$21,400,000	\$22,400,000
(A) General Administration	\$3,364,269	\$3,741,442	\$4,600,000	\$4,800,000	\$5,000,000
(C) Information Technology Contracts and Projects	\$3,741,966	\$4,237,172	\$6,400,000	\$6,700,000	\$7,000,000
(D) Eligibility Determinations and Client Services	\$3,607,967	\$5,928,040	\$8,700,000	\$9,100,000	\$9,600,000
(E) Utilization and Quality Review Contracts	\$93,766	\$329,807	\$400,000	\$400,000	\$400,000
(F) Provider Audits and Services, Professional Audit Contracts	\$191,790	\$94,200	\$200,000	\$200,000	\$200,000
(H) Indirect Cost Recoveries	\$97,463	\$119,122	\$200,000	\$200,000	\$200,000
Bottom-Line Adjustments	\$0	\$0	\$5,200,000	\$0	\$0
(1) Executive Director's Office - Total After Bottom-Line Adjustments	\$11,097,221	\$14,449,783	\$25,700,000	\$21,400,000	\$22,400,000
(2) Medical Service Premiums - Total Prior to Bottom-Line Adjustments	\$396,442,993	\$344,064,915	\$610,000,000	\$453,500,000	\$494,600,000
Expansion Populations	\$70,417,819	\$30,415,373	\$34,400,000	\$73,300,000	\$121,300,000
Supplemental Payments to Hospitals	\$308,806,653	\$291,517,724	\$534,600,000	\$336,200,000	\$324,800,000
Continuous Eligibility	\$1,518,521	\$6,431,818	\$25,300,000	\$28,300,000	\$32,800,000
UPL Backfill	\$15,700,000	\$15,700,000	\$15,700,000	\$15,700,000	\$15,700,000
Bottom-Line Adjustments	\$0	\$0	\$0	\$0	\$0
(2) Medical Services Premiums Request- Total After Bottom-Line Adjustments	\$396,442,993	\$344,064,915	\$610,000,000	\$453,500,000	\$494,600,000
(3) Behavioral Health Community Programs - Total Prior to Bottom-Line Adjustments	\$12,353,767	\$5,245,631	\$8,800,000	\$16,500,000	\$26,300,000
Expansion Populations	\$12,124,584	\$5,245,631	\$5,400,000	\$13,000,000	\$22,500,000
Continuous Eligibility	\$229,183	\$0	\$3,400,000	\$3,500,000	\$3,800,000
Bottom-Line Adjustments	\$0	\$0	\$0	\$0	\$0
(3) Behavioral Health Request - Total After Bottom-Line Adjustments	\$12,353,767	\$5,245,631	\$8,800,000	\$16,500,000	\$26,300,000
(5) Indigent Care Program - Total Prior to Bottom-Line Adjustments²	\$171,126,112	\$165,539,461	\$161,800,000	\$159,500,000	\$160,000,000
Children's Basic Health Plan Administration	\$2,807	\$9,361	\$0	\$0	\$0
Expansion Populations	\$16,134,927	\$13,138,781	\$8,300,000	\$6,000,000	\$6,500,000
Supplemental Payments to CICIP Providers	\$154,988,378	\$152,391,319	\$153,500,000	\$153,500,000	\$153,500,000
Bottom-Line Adjustments	\$0	\$0	\$0	\$0	\$0
(5) Indigent Care Program- Total After Bottom-Line Adjustments	\$171,126,112	\$165,539,461	\$161,800,000	\$159,500,000	\$160,000,000
(7) Department of Human Services Medicaid Funded Programs - Total Prior to Bottom-Line Adjustments	\$289,073	\$2,710,793	\$100,000	\$0	\$0
DHS: Colorado Benefits Management System Projects HCPF Only	\$289,073	\$2,710,793	\$100,000	\$0	\$0
Bottom-Line Adjustments	\$0	\$0	\$0	\$0	\$0
(7) Department of Human Services Medicaid Funded Programs - Total After Bottom-Line Adjustments	\$289,073	\$2,710,793	\$100,000	\$0	\$0
C. Other Expenditures	\$63	\$0	\$0	\$0	\$0
D. Base Hospital Provider Fee Expenditures - Total Prior to Bottom-Line Adjustments	\$591,309,229	\$532,010,583	\$801,200,000	\$650,900,000	\$703,300,000
Bottom-Line Adjustments: Hospital Provider Fee Cash Funds	\$0	\$0	\$5,200,000	\$0	\$0
Final Hospital Provider Fee Cash Funds - Total After Bottom-Line Adjustments	\$591,309,229	\$532,010,583	\$806,400,000	\$650,900,000	\$703,300,000
E. Cash Fund Reserve Balance^{3,4}	\$11,788,789	\$8,500,000	\$7,900,000	\$13,700,000	\$10,100,000
F. Base Total Fund Hospital Provider Fee Expenditures - Total Prior to Bottom-Line Adjustments	\$1,583,938,401	\$2,422,963,891	\$3,210,700,000	\$2,867,100,000	\$2,906,800,000
Bottom-Line Adjustments: Total Funds	\$0	\$0	\$10,400,000	\$0	\$0
Final Total Fund Hospital Provider Fee Expenditures After Bottom-Line Adjustments¹	\$1,583,938,401	\$2,422,963,891	\$3,221,100,000	\$2,867,100,000	\$2,906,800,000

Notes for Hospital Provider Fee Cash Fund: Outlook FY 2013-14 to FY 2017-18

¹ Long Bill Group totals for projected Hospital Provider Fee Cash Fund expenditures incorporate Change Requests. For more detail on the specific requests affecting Hospital Provider Fee Cash Fund expenditures, please refer to the Schedule 9 submitted with the Department's November 1, 2015, FY 2016-17 Budget Request.

² The Total Prior to Bottom-Line Adjustments for the Indigent Care Program Long Bill Group will not match that shown in the Indigent Care Program Expansions table of this report, as this summary includes the Children's Basic Health Plan Administration costs while the Expansion Populations table does not.

³ The Department was granted authority by the Hospital Provider Fee Oversight and Advisory Board to create and maintain a reserve fund using unspent Hospital Provider Fee cash funds, although this policy is subject to annual reconsideration.

⁴ Cash Fund Reserve Balances result from timing considerations and conservative methodology of the year-to-year reconciliation of the annual Hospital Provider Fee revenue collection and disbursement models

⁵ The sum of individual line items may not equal totals by Long Bill Group due to rounding.

COLORADO DEPARTMENT OF HEALTH CARE POLICY AND FINANCING: FY 2015-16 BUDGET REQUEST; COLORADO HEALTH CARE AFFORDABILITY ACT UPDATE

Medical Services Premiums - Rate, Caseload, and Expenditure Forecast						
	FY 2013-14 Actuals	FY 2014-15 Actuals	FY 2015-16 Request³	FY 2016-17 Estimate³	FY 2017-18 Estimate⁴	
MAGI Parents/Caretakers 69% to 133%						
1	Per Capita Cost ¹	\$2,399.41	\$2,331.52	\$2,509.99	\$2,419.43	\$2,388.81
2	% Change Over Prior Year	-7.13%	-2.83%	7.65%	-3.61%	-1.27%
3	Caseload ¹	47,082	70,900	82,897	86,948	91,000
4	% Change Over Prior Year	13.33%	50.59%	16.92%	4.89%	4.66%
5	Total Fund Expenditures	\$112,968,575	\$165,304,640	\$208,071,733	\$210,364,476	\$217,381,512
6	Cash Fund Expenditures	\$26,708,674	\$0	\$50,820	\$5,313,312	\$12,011,537
Buy-In Program for Individuals with Disabilities						
7	Per Capita Cost ¹	\$11,655.62	\$10,518.27	\$7,580.00	\$7,248.88	\$7,171.24
8	% Change Over Prior Year	-17.99%	-9.76%	-27.93%	-4.37%	-1.07%
9	Per Client Premiums Contribution: Disabled Buy-In Cash Fund	\$367.63	\$599.98	\$674.63	\$677.00	\$678.92
10	Effective Per Capita Cost	\$11,287.99	\$9,918.29	\$6,905.37	\$6,571.88	\$6,492.32
11	Caseload ¹	2,560	3,425	4,859	5,721	6,482
12	% Change Over Prior Year	188.29%	33.79%	41.87%	17.74%	13.30%
13	Total Fund Expenditures	\$29,838,383	\$33,970,150	\$33,553,204	\$37,597,723	\$42,083,230
14	Cash Fund Expenditures	\$15,129,653	\$15,715,845	\$14,898,405	\$16,720,668	\$18,750,796
15	Cash Fund Expenditures - Medicaid Buy-In Cash Fund ²	\$941,137	\$2,054,946	\$3,278,046	\$3,873,100	\$4,400,760
MAGI Adults						
16	Per Capita Cost ¹	\$3,765.62	\$4,195.37	\$3,962.90	\$3,976.92	\$4,022.78
17	% Change Over Prior Year	-37.94%	11.41%	-5.54%	-5.21%	1.51%
18	Caseload ¹	87,243	238,923	291,149	301,325	305,880
19	% Change Over Prior Year	720.42%	173.86%	21.86%	3.50%	1.51%
20	Total Fund Expenditures	\$328,523,764	\$1,002,370,169	\$1,153,794,381	\$1,198,346,361	\$1,230,488,343
21	Cash Fund Expenditures	\$23,741,132	\$0	\$691,254	\$30,693,587	\$68,426,514
Non Newly Eligibles						
22	Total Fund Expenditures	\$4,291,652	\$24,551,058	\$31,497,153	\$33,269,058	\$34,300,230
23	Cash Fund Expenditures	\$2,145,826	\$3,022,236	\$3,874,149	\$4,747,494	\$5,680,118
MAGI Parents/Caretakers 60% to 68%						
24	Total Fund Expenditures	\$5,385,068	\$23,233,424	\$30,170,062	\$31,857,217	\$33,053,119
25	Cash Fund Expenditures	\$2,692,534	\$11,440,138	\$14,846,687	\$15,794,808	\$16,447,232
26	Expansion Populations - Total Funds Expenditures	\$499,744,484	\$1,249,429,441	\$1,457,086,533	\$1,511,434,835	\$1,557,306,434
27	Expansion Populations - Hospital Provider Fee Cash Funds Expenditures	\$87,636,340	\$30,178,219	\$34,361,315	\$73,269,869	\$121,316,197
28	Supplemental Payments to Hospitals - Total Fund Expenditures	\$617,613,306	\$584,796,102	\$1,086,400,000	\$679,000,000	\$652,700,000
29	Supplemental Payments to Hospitals - Hospital Provider Fee Cash Fund Expenditures	\$308,806,653	\$287,968,220	\$534,600,000	\$336,700,000	\$324,800,000
Total Fund Hospital Provider Fee Expenditures (Row 26 + Row 28)		\$1,117,357,790	\$1,834,225,543	\$2,543,486,533	\$2,190,434,835	\$2,210,006,434
State Share: Hospital Provider Fee Cash Funds (Row 27 + Row 29)		\$396,442,993	\$318,146,439	\$568,961,315	\$409,969,869	\$446,116,197

Notes for Medical Services Premiums - Rate, Caseload, and Expenditure Forecast

¹ Projected caseload and per capita expenditures for the populations shown above are taken from Exhibit J of the Department's November 2015 R-1.
² The Medicaid Buy-In Cash Fund expenditures are based on the Medicaid Buy-In Program for Working Adults with Disabilities and Medicaid Buy-in program for Children with Disabilities premium schedules approved by the Medical Services
³ FY 2014-15 and FY 2015-16 fund splits account for the 100% federal match provided under the Affordable Care Act beginning in CY 2014 for the MAGI Parents/Caretakers to 133% and MAGI Adults populations.
⁴ FY 2016-17 fund splits account for the 95% federal match beginning January 1, 2017, provided under the Affordable Care Act for the MAGI Parents/Caretakers to 133% and MAGI Adults populations.

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Medicaid Behavioral Health Community Programs - Rate, Caseload, and Expenditure Forecast						
		FY 2013-14 Actuals	FY 2014-15 Actuals	FY 2015-16 Estimate	FY 2016-17 Request	FY 2017-18 Estimate³
MAGI Parents/Caretakers 69% to 133%						
1	Per Capita Cost ¹	\$215.56	\$439.27	\$261.71	\$266.80	\$274.80
2	% Change Over Prior Year	-26.71%	103.78%	-40.42%	1.94%	3.00%
3	Caseload ¹	47,082	71,609	82,897	86,948	91,000
4	% Change Over Prior Year	13.33%	52.09%	15.76%	4.89%	4.66%
5	Total Fund Expenditures	\$10,148,824	\$31,455,685	\$21,695,262	\$23,198,029	\$25,007,117
6	Cash Fund Expenditures	\$3,212,869	\$0	\$0	\$579,951	\$1,375,391
Buy-In Program for Individuals with Disabilities						
7	Per Capita Cost ¹	\$1,955.82	\$1,918.75	\$1,598.23	\$1,674.10	\$1,712.38
8	% Change Over Prior Year	-4.71%	-1.90%	-16.70%	4.75%	2.29%
9	Caseload ¹	2,560	3,627	4,859	5,721	6,482
10	% Change Over Prior Year	188.29%	41.68%	33.97%	17.74%	13.30%
11	Total Fund Expenditures	\$5,006,888	\$6,959,301	\$7,765,800	\$9,577,527	\$11,099,648
12	Cash Fund Expenditures	\$2,505,638	\$3,409,421	\$3,821,550	\$4,748,538	\$5,523,185
MAGI Adults						
13	Per Capita Cost ¹	\$1,061.53	\$692.43	\$760.93	\$781.62	\$805.25
14	% Change Over Prior Year	-8.64%	-34.77%	9.89%	2.72%	3.02%
15	Caseload ¹	87,243	240,758	291,652	301,902	306,502
16	% Change Over Prior Year	76.28%	175.96%	21.14%	3.51%	1.52%
17	Total Fund Expenditures	\$92,611,488	\$166,708,062	\$221,927,129	\$235,973,027	\$246,811,127
18	Cash Fund Expenditures	\$5,634,632	\$0	\$0	\$5,899,325	\$13,574,612
Non Newly Eligibles						
19	Total Fund Expenditures	\$226,126	\$586,210	\$467,633	\$479,807	\$493,924
20	Cash Fund Expenditures	\$113,063	\$288,650	\$230,122	\$237,889	\$245,777
MAGI Parents/Caretakers 60% to 68%						
21	Total Fund Expenditures	\$1,316,764	\$3,142,892	\$2,743,748	\$3,107,591	\$3,498,804
22	Cash Fund Expenditures	\$658,382	\$1,547,560	\$1,350,199	\$1,540,743	\$1,741,004
23	Expansion Populations Total Funds Expenditures	\$109,768,456	\$208,852,150	\$254,599,572	\$272,335,981	\$286,910,620
24	Expansion Populations Hospital Provider Fee Cash Funds Expenditures	\$12,353,767	\$5,245,631	\$5,401,871	\$13,006,446	\$22,459,969
Notes for Medicaid Behavioral Health Community Programs - Rate, Caseload, and Expenditure Forecast						
¹ Caseload projections are the same as those in the Medical Services Premiums exhibit. Projected per capita expenditures for the above populations are taken from the Department's February 2015 S-2A, Exhibit JJ.						
² FY 2014-15 and FY 2015-16 fund splits account for the 100% federal match provided under the Affordable Care Act beginning in CY 2014 for the MAGI Parents/Caretakers to 133% and MAGI Adults populations.						
³ FY 2016-17 fund splits account for the 95% federal match beginning January 1, 2017, provided under the Affordable Care Act beginning in CY 2014 for the MAGI Parents/Caretakers to 133% and MAGI Adults populations.						

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Indigent Care Program Expansions - Rate, Caseload, and Expenditure Forecast						
		FY 2013-14 Actuals	FY 2014-15 Actuals	FY 2015-16 Estimate	FY 2016-17 Request	FY 2017-18 Estimate
Children's Basic Health Plan Children's Medical and Dental Premiums from 206-260% of the Federal Poverty Level						
1	Per Capita Cost ¹	\$2,386.14	\$2,135.00	\$2,066.58	\$1,911.61	\$1,933.89
2	% Change Over Prior Year	21.29%	14.36%	-3.20%	-7.50%	1.17%
3	Enrollment ¹	19,043	16,668	18,301	20,063	21,463
4	% Change Over Prior Year	22.27%	-12.47%	9.80%	9.63%	6.98%
5	Total Fund Expenditures	\$45,439,247	\$35,646,145	\$37,820,470	\$38,352,532	\$41,507,041
6	Cash Fund Expenditures	\$15,903,736	\$13,266,398	\$7,114,438	\$5,186,460	\$5,489,058
Children's Basic Health Plan Prenatal Costs from 206-260% of the Federal Poverty Level						
7	Per Capita Cost ¹	\$11,189.55	\$12,544.25	\$11,730.27	\$12,057.15	\$12,329.37
8	% Change Over Prior Year	2.31%	12.11%	-6.49%	2.79%	2.26%
9	Enrollment ¹	502	460	524	573	580
10	% Change Over Prior Year	8.42%	-8.37%	13.91%	9.35%	1.22%
11	Total Fund Expenditures	\$5,617,155	\$5,770,354	\$6,146,662	\$6,908,748	\$7,151,035
12	Cash Fund Expenditures	\$1,966,004	\$2,147,100	\$1,151,436	\$842,905	\$988,471
Children's Basic Health Plan Dental Costs from 206-260% of the Federal Poverty Level ³						
13	Per Capita Cost	N/A	N/A	N/A	N/A	N/A
14	% Change Over Prior Year	N/A	N/A	N/A	N/A	N/A
15	Enrollment	N/A	N/A	N/A	N/A	N/A
16	% Change Over Prior Year	N/A	N/A	N/A	N/A	N/A
17	Total Fund Expenditures	N/A	N/A	N/A	N/A	N/A
18	Cash Fund Expenditures	N/A	N/A	N/A	N/A	N/A
Recoveries Offsetting Expenditure from 206-260% of the Federal Poverty Level						
19	Total Fund Expenditures	(\$4,221,003)	(\$3,223,901)	\$0	\$0	\$0
20	Cash Fund Expenditures	(\$1,734,814)	(\$1,113,183)	\$0	\$0	\$0
21	Expansion Populations Total Fund Expenditures	\$46,835,399	\$38,192,598	\$43,967,132	\$45,261,280	\$48,658,076
22	Expansion Populations Cash Funds Expenditures	\$16,134,927	\$14,300,315	\$8,265,874	\$6,029,365	\$6,477,529
23	Safety Net Provider Payments: Supplemental Payments to Hospitals-Total Fund Expenditures	\$309,976,756	\$309,470,584	\$311,296,186	\$311,296,186	\$311,296,186
24	Safety Net Provider Payments: Supplemental Payments to Hospitals-Hospital Provider Fee Cash F	\$154,988,378	\$152,391,319	\$153,469,465	\$153,469,465	\$153,469,465
Total Fund Hospital Provider Fee Expenditures (Row 21 + Row 23)		\$356,812,155	\$347,663,182	\$355,263,318	\$356,557,466	\$359,954,262
State Share: Hospital Provider Fee Cash Funds (Row 22 + Row 24)		\$171,123,305	\$166,691,634	\$161,735,339	\$159,498,830	\$159,946,994
Notes for Children's Basic Health Plan Expansion - Rate, Caseload, and Expenditure Forecast						
¹ Per capita costs and caseload are taken from Exhibit C5-Expenditure Summary in the Department's November 2015 R-3.						
² Children's Basic Health Plan expenditures receive an enhanced federal match rate of 65% until October 1 2015, when the match rate changes to 88%. Enrollment fees are included in the Cash Fund Expenditures shown, but are not eligible for a federal match.						
³ For FY 2010-11 forward, the Children's Basic Health Plan Medical and Dental Benefits costs were consolidated into one line item in the Department's budget.						