# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY 2021-22 Budget Cycle					
Request Title						
	R-01 Medical Services Premiums					
Dept. Approval By:	BC		Supplemental FY 2020-21			
OSPB Approval By:	Cishly Clark		Budget Amendment FY 2021-22			
		<u>x</u>	Change Request FY 2021-22			

	_	FY 2020-21		FY 2021-22		FY 2022-23
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	\$329,669,130	\$1,046,400,692
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$2,245,225,203	\$0	\$2,422,686,658	\$198,145,197	\$420,683,725
Impacted by Change Request	CF	\$1,393,285,900	\$0	\$1,201,917,467	(\$26,212,193)	\$136,677,817
. toquoot	RF	\$41,603,960	\$0	\$43,625,726	(\$5,066)	(\$5,066)
	FF	\$5,346,276,891	\$0	\$5,315,964,548	\$157,741,192	\$489,044,216

	_	FY 2020-21		FY 2021-22		FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	\$329,669,130	\$1,046,400,692
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	\$198,145,197	\$420,683,725
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	(\$26,212,193)	\$136,677,817
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	(\$5,066)	(\$5,066)
Services i remidins	FF	\$5,346,276,891	\$0	\$5,315,964,548	\$157,741,192	\$489,044,216

Auxiliary Data						
Requires Legislation?	NO					
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact			



Department of Health Care Policy and Financing Medical Services Premiums

FY 2020-21, FY 2021-22, and FY 2022-23 Budget Request

November 2020

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#### I. BACKGROUND

Medicaid was enacted by Title XIX of the Social Security Act as an entitlement program to provide health care services to eligible elders, people with disabilities, adults, and children. The Medicaid budget is constructed based on projected numbers of persons who will be eligible (caseload) and projected average costs per person/eligible (per capita cost). This Budget Request is a projection of services that entitled individuals will utilize during the year. The first section of the Medical Services Premiums Budget Narrative describes the Medicaid caseload projection. The second section describes the development of the per capita cost, the application of per capita caseload and bottom-line adjustments. A series of exhibits in this Budget Request support the narrative.

Further discussion depends on several key points that complicate the projection of this line item. They are summarized as follows:

- 1. The Department's request identifies, and in some cases amends, the fiscal impact of various State and federal policy changes through a series of bottom-line impacts. Bottom-line impacts can be found by service category (e.g., Acute Care, Community-Based Long-Term Care, Long-Term Care, Insurance, etc.) in the respective sections of this request. Those bottom-line impacts include the identification number of the originally submitted request, so that the bottom-line impact in the current year may be traced to the originally submitted budget change request document. Additionally, the annualization of a reduction's fiscal impact can be found in the out-year bottom-line impacts. Revisions to bottom-line impacts between requests are primarily limited to changes in implementation timeline. The Department generally does not adjust fiscal impact assumptions unless a deviation from assumptions in the original budget action is clear and significant.
- 2. The presence of varying funding mechanisms makes the Department's request more complex. Different Medicaid services have different federal match rates and are pertinent to different populations under Medicaid. Certain categories of service have historically been federally matched at different percentages than others. Indian Health Services, described further in this narrative, have historically received a 100% federal medical assistance percentage (FMAP) while Family Planning Services receive a 90% FMAP. Breast and Cervical Cancer Program (BCCP) services are matched at 65% FMAP. Medicaid expansion populations receive a different match rate than existing populations. Expansion Adults to 133% and the MAGI Adults populations, for instance, receive a 91.5% FMAP in FY 2019-20 and a 90.0% FMAP in FY 2020-21 ongoing as the federal match for these populations falls from 93% to 90% in January 2020. The former CHP+ population that transferred to Medicaid with SB 11-008 (Eligible Children) and SB 11-250 (Eligible Pregnant Adults) receives the enhanced CHP+ FMAP of approximately 65% with an additional 23 percentage point FMAP increase through September 30, 2019; the enhanced FMAP is expected to be 79.38% in FY 2019-20, 67.88% in FY 2020-21, and 65.00% in FY 2021-22 ongoing.

- 3. Under the Affordable Care Act, states are eligible for a one percentage point increase in the FMAP for adult vaccines and clinical preventive services if the state covers all the recommended services without cost-sharing. The recommended services are those that have been given an A or B rating by the United States Preventive Services Task Force.
- 4. The State's FMAP for Medicaid services is currently 56.2% at the beginning of FY 2020-21. The enhanced federal match was authorized through the Families First Coronavirus Response Act and is currently projected to end March 31, 2021 which would result in an average FMAP of 54.65% in FY 2020-21. Data from the Colorado Population Forecast, the U.S. Census, and the Legislative Council is used to estimate the FMAP for FY 2021-22 and FY 2022-23 at 50.00%. These changes are outlined in Exhibit R. Medicaid administrative costs will also continue to receive 50.00% Federal Financial Participation (FFP). If the FMAP changes from Department estimates, the Department would submit a supplemental funding request to account for the change in federal funds. More information can be found about the FMAP estimates in Exhibit R.
- 5. The Colorado Operations Resource Engine (CORE) was implemented as a replacement for the Colorado Financial Reporting System (COFRS) in July 2014. Under COFRS, the previous fiscal year closed and the data became final at the beginning of the current fiscal year. Under CORE, the previous fiscal year may not close until December of the current fiscal year. This introduces a small degree of uncertainty regarding actuals that was not present previously. The FY 2019-20 actuals contained within this request reflect data for FY 201 9-20 as of August 4, 2020.

The Department's exhibits for Medical Services Premiums remain largely the same as previous budget requests. Minor differences are noted in the description of each exhibit and/or program in sections IV and V.

#### II. MEDICAID CASELOAD

The Medicaid caseload analysis, including assumptions and calculations, are included in a separate section of this request. Please refer to the section titled "Medicaid Caseload."

# III. BASIC APPROACH TO MEDICAL SERVICES PREMIUMS CALCULATIONS

Once the caseload forecast is complete, the next step in the process is to forecast per capita costs. Per capita costs contain price, utilization, and Special Bill impacts. Inherent in the per capita cost is the differential "risk" of each eligibility category. The concept of "risk" can be roughly described as follows: due to the differences in health status (age, pre-existing condition, etc.), generally healthy clients are less costly to serve (lower "risk") than clients with severe acute or chronic medical needs requiring medical intervention (higher "risk"). For example, on average, a categorically eligible low-income child is substantially less costly to serve than a person

with disabilities each year. Because Medicaid caseload is growing and receding at differing rates by individual eligibility categories, it is essential to determine the anticipated cost per capita for all types of eligibility categories that will be served. In very broad terms and for most services, the rate of change experienced across actual expenditure reference periods is applied to the future to estimate the premiums needed for current and request years. To that base, adjustments are made due to policy items or environmental changes (e.g., Change Requests and new legislation).

A detailed discussion of how the projection was prepared for this budget request follows.

#### Rationale for Grouping Services for Projection Purposes

The Medical Services Premiums calculations are grouped into like kinds of services and similar calculation considerations. Actual collection of expenditure data is very detailed, but for purposes of preparing projections, premium calculations are clustered into several groupings. This is done to improve the reasonableness of the projections that result from the calculations. The objective is to cluster services that have like characteristics (e.g., community-based long-term care services) or that demonstrate a high degree of relationship (e.g., the impact of health maintenance organization service utilization on inpatient hospital, outpatient, physician services, etc.). Adversely, the approach of projecting the budget by individual service category and applying historic rates generates a materially higher forecast.

Following are the service groupings used in computing the projections or summarizing individual service calculations in this Budget Request.

#### Acute Care:

- Physician Services and the Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT)
- Emergency Transportation
- Non-emergency Medical Transportation
- Dental Services
- Family Planning
- Health Maintenance Organizations
- Inpatient Hospitals
- Outpatient Hospitals
- Lab and X-Ray
- Durable Medical Equipment

- Prescription Drugs
- Drug Rebate
- Rural Health Centers
- Federally Qualified Health Centers
- Co-Insurance (Title XVIII-Medicare)
- Breast and Cervical Cancer Treatment Program
- Other Medical Services
- Acute Home Health

# Community Based Long-Term Care:

- Home-and Community-Based Services: Elderly, Blind and Disabled
- Home-and Community-Based Services: Community Mental Health Supports
- Home-and Community-Based Services: Children's Home-and Community-Based Services Waiver
- Home-and Community-Based Services: Brain Injury
- Home-and Community-Based Services: Children with Life Limiting Illness
- Home-and Community-Based Services: Spinal Cord Injury Adult
- Private Duty Nursing
- Long-Term Home Health
- Hospice

# Long-Term Care:

- Class I Nursing Facilities
- Class II Nursing Facilities
- Program of All-Inclusive Care for the Elderly

#### Insurance:

- Supplemental Medicare Insurance Benefit
- Health Insurance Buy-In

### Service Management:

- Single Entry Points
- Disease Management
- Accountable Care Collaborative
- Prepaid Inpatient Health Plan Administration

# Financing:

- Healthcare Affordability and Sustainability Fee Financed Programs and Populations
- Department Recoveries
- Upper Payment Limit Financing
- Outstationing Payments
- Other Supplemental Payments

Note that for services in the Community Based Long-Term Care, Long-Term Care, Insurance, Service Management and Financing categories, separate forecasts are performed. Only Acute Care is forecast as a group.

# IV. PROJECTION METHODOLOGY AND DESCRIPTION OF EXHIBITS

#### EXHIBIT A - CALCULATION OF TOTAL REQUEST AND FUND SPLITS

# Summary of Request

For the current year, the Department sums total spending authority by fund source, including the Long Bill and any special bills which have appropriations that affect the Department. The total spending authority is compared to the total projected current year expenditure from page EA-2. The difference between the two figures is the Department's request for the Medical Services Premiums line item for the current year.

For the request year, the Department starts with the prior year's appropriation, including special bills, and adds in any required annualizations. This total is the Base Amount for the request year. The total Base Amount is compared to the total projected request year expenditure from page EA-3. The difference between the two figures is the Department's request for the Medical Services Premiums line item for the request year.

For the out year, the Department starts with the prior year's appropriation, including special bills, and adds in any required annualizations. This total is the Base Amount for the out year. The total Base Amount is compared to the total projected out year expenditure from page EA-4. The difference between the two figures is the Department's request for the Medical Services Premiums line item for the out year.

Totals for the base request on this page correspond with Columns 2, 4, and 5 on the Schedule 13, where appropriate.

#### Federal Medical Assistance Percentages

The Department's standard federal medical assistance percentage (FMAP) is typically around 50%. The FMAP for Medicaid is recomputed by the Federal Funds Information Service (FFIS) each year and is based on a statewide per capita earnings formula that is set in federal law. In October 2014, the FMAP for Medicaid services increased to 51.01% and then ramped down each year until it returned to 50.00% beginning October 1, 2017. The State's FMAP for Medicaid services is currently 56.2% at the beginning of FY 2020-21. The enhanced federal match was authorized through the Families First Coronavirus Response Act and is currently projected to end March 31, 2021 which would result in an average FMAP of 54.65% in FY 2020-21. For more information about historic FMAP and FMAP changes, see Exhibit R.

Certain populations and services receive different FMAPs than the new standard 50.00% that begins October 2017, summarized in the table below. Clients who transitioned from CHP+ to Medicaid under SB 11-008 and SB 11-250 receive the CHP+ FMAP, which is approximately 65%. Section 2105(b) of the Social Security Act further modifies the enhanced FMAP for CHP+ clients, including clients who transitioned from CHP+ to Medicaid and are funded under Title XXI, by an additional 23 percentage points, effective October 1, 2015 through September 30, 2019. The enhanced FMAP steps down to 11.5 percentage points effective October 1, 2019 before returning to 65% effective October 1, 2020, per the HEALTHY KIDS Act. The State's FMAP for Medicaid services for clients who transitioned from CHP+ to Medicaid is currently 69.34% due to enhancements authorized through the Families First Coronavirus Response Act and is currently projected to end March 31, 2021 which would result in an average FMAP of 71.13% in FY 2020-21. Therefore, FMAP for clients who transitioned from CHP+ to Medicaid receive 71.13% FMAP in FY 2019-20, 65.00% in FY 2020-21, and 65.00% in FY 2021-22. Clients in the BCCP program also receive a 65% match. The expansion populations, MAGI Parents/Caretakers 69% to 133% and MAGI Adults, receive a match of 93% beginning January 1, 2019, which falls to 90.00% beginning January 1, 2020. The FMAP for expansion populations is 90.00% in FY 2020-21 ongoing. However, any Community-Based Long-Term Care waiver services for these individuals must be claimed at the standard match as they are not eligible to receive the enhanced FMAP. A sub-group of MAGI Adults, non-newly eligible individuals with disabilities, receive the ACA expansion FMAP for 75% of their expenditure and the standard FMAP for the remaining 25%, resulting in an effective FMAP of 81.16%, 80.00%, and 80.00% for FY 2020-21, FY 2021-22, and FY 2022-23 respectively. The Disabled Buy-In population receives the standard match for expenditure net of patient premiums.

Calculation of expenditure by financing type can be found in Exhibit A and calculation of FMAP can be found in Exhibit R.

Population-Based FMAPs								
Fiscal Year	FMAP	Population(s)	Comments					
	71.13%	Qualifying clients transitioned from CHP+ to Medicaid	Please see Exhibit F					
	68.26%	Clients in the BCCP program	Please see Exhibit F					
FY 2020-21	90.00%	MAGI Parents/Caretakers 69% to 133% FPL, MAGI Adults	Please see Exhibit J					
	81.16%	MAGI Adult Non-Newly Eligible	Please see Exhibit J					
	54.650%	Disabled Buy-In, MAGI Parents/Caretakers 60-68% FPL	HAS Fee portion matched at 53.10%, Medicaid Buy-In Fund 0%					
	65.00%	Qualifying clients transitioned from CHP+ to Medicaid	Please see Exhibit F					
	65.00%	Clients in the BCCP Program	Please see Exhibit F					
FY 2021-22	90.00%	MAGI Parents/Caretakers 69% to 133% FPL, MAGI Adults	Please see Exhibit J					
F 1 2021-22	80.00%	MAGI Adult Non-Newly Eligible	Please see Exhibit J					
	50.00%	Disabled Buy-In, MAGI Parents/Caretakers 60-68% FPL	HAS Fee portion matched at 50.00%, Medicaid Buy-In Fund 0%					
	65.00%	Qualifying clients transitioned from CHP+ to Medicaid	Please see Exhibit F					
	65.00%	Clients in the BCCP Program	Please see Exhibit F					
	90.00%	MAGI Parents/Caretakers 69% to 133% FPL, MAGI Adults	Please see Exhibit J					
FY 2022-23	80.00%	MAGI Adult Non-Newly Eligible	Please see Exhibit J					
	50.00%	Disabled Buy-In, MAGI Parents/Caretakers 60-68% FPL	HAS Fee portion matched at 50.00%, Medicaid Buy-In Fund 0%					

	Service-Based FMAPs						
Fiscal Year	FMAP	Service	Comments				
	100.00%	Affordable Care Act Drug Rebate Offset	Please see Exhibit F				
EW 2020 21	55.65%	ACA Preventive Services	Please see Exhibit A				
FY 2020-21	90.00%	Family Planning Services	Please see Exhibit F				
	100.00%	Indian Health Services	Please see Exhibit F				
	100.00%	Affordable Care Act Drug Rebate Offset	Please see Exhibit F				
EW 2021 22	51.00%	ACA Preventive Services	Please see Exhibit A				
FY 2021-22	90.00%	Family Planning Services	Please see Exhibit F				
	100.00%	Indian Health Services	Please see Exhibit F				
	100.00%	Affordable Care Act Drug Rebate Offset	Please see Exhibit F				
EV 2022 22	51.00%	ACA Preventive Services	Please see Exhibit A				
FY 2022-23	90.00%	Family Planning Services	Please see Exhibit F				
	100.00%	Indian Health Services	Please see Exhibit F				

# Calculation of Fund Splits

These pages take the total estimated expenditure by service group and calculate the required source of funding for each. For each service category, the federal medical assistance percentage (FMAP) is listed on the right-hand side of the table. The FMAP calculations reflect the participation rate information provided from the federal Centers for Medicare and Medicaid Services (CMS), as reported through the Federal Register or as specified in federal law and/or regulation.

To calculate appropriate fund splits, the Department selectively breaks out the large service groups (e.g., Acute Care) by programs funded with either a different state source or a different FMAP rate. Most programs in Medical Services Premiums are paid with 50% General Fund and 50% federal funds. However, the following programs are paid for using different funding mechanisms:

• Breast and Cervical Cancer Program: This program typically receives a 65.00% FMAP. Per 25.5-5-308(9)(g), C.R.S (2014), enacted in HB 14-1045, the state's share of expenditure shall be appropriated one hundred percent from the Breast and Cervical Cancer Prevention and Treatment Fund.

- Family Planning: The Department receives a 90% FMAP available for all documented family planning expenditure. This includes those services rendered through health maintenance organizations. Please see Exhibit F for calculations.
- Indian Health Services: The federal financial participation rate for this program is 100%. Please see Exhibit F for calculations.
- Affordable Care Act Drug Rebate Offset: The Affordable Care Act (ACA) increased the number of pharmaceutical rebates the Department receives. Under section 2501 of the ACA, the entire increase in the drug rebates is due to the federal government. As a result, this provision of the ACA is intended to be budget neutral to the State. Drug rebates are recorded as an offset to total fund expenditure in Acute Care (Exhibit F), and the Department's total fund expenditure projection reflects the estimated expenditure after the increase in the drug rebates. To properly account for this decrease in expenditure, the Department shows the estimated increase in drug rebates as a federal funds decrease in Exhibit A, as the increased drug rebate will offset total federal funds expenditure.
- Affordable Care Act Preventive Services: Under the Affordable Care Act, states are eligible for a one percentage point increase in the FMAP for adult vaccines and clinical preventive services if the state covers all the recommended services without cost-sharing.
- Non-Emergency Medical Transportation (NEMT): These services receive the administrative federal financial participation (FFP) rate of 50% rather than the various service FMAP rates. This entry adjusts the fund splits between federal and state funding to properly account for this service receiving FFP.
- SB 11-008 "Aligning Medicaid Eligibility for Children": This bill specifies that the income eligibility criteria for Medicaid that applies to children aged five and under shall also apply to children from ages 6 to 19. Effective January 1, 2013, children under the age of 19 are eligible for Medicaid if their family income is less than 133% of the federal poverty level (FPL). FMAP for these clients remains at the same level as if the clients had enrolled in Children's Basic Health Plan (CHP+) instead of Medicaid, or 65%. Section 1205(b) of the Social Security Act increases the enhanced FMAP by an additional 23 percentage points, effective October 2015 through September 2019 and stepping down to 76.5% until October 2020. Therefore, FMAP for this population for FY 2019-20, FY 2020-21, and FY 2021-22 is expected to be 79.38%, 67.88%, and 65.00% respectively.
- SB 11-250 "Eligibility for Pregnant Women in Medicaid": This bill increases the upper income limit for Medicaid eligibility among pregnant women from the current level of 133% to 185% of federal poverty level (FPL) to comply with federal law. By changing income limits, it also allows eligible pregnant women to move from CHP+ to Medicaid effective January 1, 2013. As with SB 11-008, the Department assumes the same level of FMAP, 65%, will be available for these clients. The Department received permission from the Centers for Medicare and Medicaid Services (CMS) to continue receiving a higher match rate for this population, including

Section 1205(b) of the Social Security Act, similar to the population under SB 11-008 "Aligning Medicaid Eligibility for Children". Therefore, FMAP for this population for FY 2019-20, FY 2020-21, and FY 2021-22 is expected to be 79.38%, 67.88%, and 65.00% respectively.

- MAGI Parents/Caretakers 69% to 133% FPL: This population began participation in Medicaid in FY 2009-10 and is funded with a combination of federal funds and HAS Fee. SB 13-200 amended Medicaid eligibility for parents and caretakers of eligible children from 100% of the federal poverty line to 133% of the federal poverty line in keeping with Medicaid expansion under the Affordable Care Act, which also ensures that MAGI Parents/Caretakers 69% to 133% of the federal poverty line receive a 100% federal match rate through the end of CY 2016, effective January 1, 2014, with ramp down every year until it reaches 90% effective January 1, 2020. See Exhibit J for additional information and detailed calculations.
- MAGI Adults: This population began participation in Medicaid in FY 2011-12 and was previously labeled Adults without Dependent Children (AwDC). The population is funded with a combination of federal funds and HAS Fee. SB 13-200 amended the Medicaid eligibility criteria for MAGI Adults to 133% of the federal poverty line in accordance with Medicaid expansion under the Affordable Care Act. Effective January 1, 2014, the Affordable Care Act provides this population a 100% federal match rate from CY 2014 through CY 2016 with ramp down every year until it reaches 90% effective January 1, 2020. However, waiver services for this population receive the standard FMAP and not the enhanced FMAP per CMS. Calculations and information regarding this population can be found in Exhibit J.
- Continuous Eligibility for Children: HB 09-1293, the Colorado Health Care Affordability Act of 2009, established continuous eligibility for twelve months for children on Medicaid, beginning March 2014, even if the family experiences an income change during any given year. The Department has the authority to use the HAS Fee Cash Fund to fund the State share of continuous eligibility for Medicaid children. Because this population is not an expansion population, it receives the standard federal financial participation rate. Previously, the Department showed this adjustment in funding as a General Fund offset under Cash Funds Financing. Effective with the November 2016 request, the Department has broken this population out in its respective service categories to better show the impact of continuous eligibility for children. Calculations and information regarding this population can be found in Exhibit J.
- Disabled Buy-In: Funds for this population come from three sources: HAS Fee, premiums paid by clients, and federal funds. While the program receives federal match on the HAS Fee contribution, the premiums paid by clients are not eligible. Premium estimates and additional calculations of fund splits can be found in Exhibit J.

- Non-Newly Eligibles: MAGI Parents/Caretakers 69% to 133% FPL and MAGI Adults are funded with a combination of federal funds and HAS Fee. As explained above under those categories, the Affordable Care Act provides both populations with a 100% federal match rate, effective January 1, 2014, though it ramps down over time beginning in CY 2017. A caveat of this enhanced federal match rate is that the expansion population cannot have been eligible for Medicaid services prior to 2009 (or else those individuals are not considered part of the Medicaid expansion population). A subset of the population may have been eligible for Medicaid services prior to 2009 under disability criteria, had the clients chosen to provide asset information when they applied for Medicaid services. For this population, the Department is unable to prove that these clients would not have been eligible for Medicaid services prior to 2009 if they had provided asset information, and therefore cannot claim the full enhanced expansion FMAP on their expenditure. These clients are now eligible for Medicaid under the expansion, and receive FMAP determined by a resource proxy with the State portion funded through the HAS Fee, as required by statute. The Department can claim 75% of the expenditure for Non-Newly Eligible clients at the enhanced expansion FMAP and the remaining 25% at standard FMAP. Please refer to Exhibit J for calculations and additional details.
- MAGI Parents/Caretakers 60% to 68% FPL: Parents/Caretakers over 60% FPL are funded with a combination of federal funds and HAS Fee. As explained above, the Affordable Care Act provides MAGI Parents/Caretakers 69% to 133% FPL with a 100% federal match rate, effective January 1, 2014, with a ramp down beginning January 1, 2017. Due to new MAGI conversion rules (please refer to the Caseload Narrative for additional details), the non-expansion eligibility category MAGI Parents/Caretakers to 68% FPL now includes FPL levels over 60%. The MAGI Parents/Caretakers to 68% FPL clients who have FPL levels over 60% are funded with HAS Fee for the State's contribution, rather than General Fund, as required by statute. Please refer to Exhibit J for calculations and additional details.
- Adult Dental Benefit Financing: SB 13-242 created a limited dental benefit for adults in the Medicaid program, implemented April 1, 2014. To fund the design and implementation of the adult dental benefit, SB 13-242 created the Adult Dental Fund effective July 1, 2013, financed by the Unclaimed Property Trust Fund. Please refer to Exhibit F for calculations and additional details.
- Supplemental Medicare Insurance Benefit: Medicare premiums are not federally matched for clients who exceed 134% of the federal poverty level. Premiums for clients between 120% and 134% of the federal poverty level receive federal financial participation (FFP) and certain individuals with limited resources qualify as a "Qualified Individual", which receives 100% FFP. In aggregate, the Department estimates that approximately 17.20% of the total will receive no FFP, 77.64% of the total will receive 50% FFP, and 5.16% will receive 100% FFP. These assumptions are held constant in FY 2020-21, 2021-22, and in FY 2022-23.

- Tobacco Quit Line: The Tobacco Quit Line is administered by the Department of Public Health and Environment (DPHE); the Department pays for the share of costs for the quit line related to serving Medicaid members. The costs are administrative and therefore receive FFP rather than the applicable FMAP by eligibility category.
- Upper Payment Limit Financing: Offsets General Fund as a bottom-line adjustment to total expenditure. This is further described in Exhibit K.
- Department Recoveries Adjustment: Department Recoveries used to offset General Fund are incorporated as a bottom-line adjustment to total expenditure. Further detail is available in Exhibit L.
- Denver Health Outstationing: Federal funds are drawn to reimburse Denver Health Federally Qualified Health Centers for the federal share of their actual expenditure in excess of the current reimbursement methodology. Prior to FY 2017-18, these payments were made with certified public expenditure. Going forward, these payments are to be made with General Fund. The FY 2020-21, FY 2021-22, and FY 2022-23 estimates account for payments under the new Random Moment Time Study (RMTS) methodology, with retroactive payments built into the estimate for FY 2020-21.
- Hospital Supplemental Payments: Hospital payments are increased for Medicaid hospital services through a total of five supplemental payments, three of which are paid out of Medical Services Premiums directly to hospitals, outside the Department's Medicaid Management Information System (MMIS). The purpose of these payments is to increase hospital reimbursement payments for Medicaid inpatient and outpatient care, up to a maximum of the federal Upper Payment Limit (UPL), and to create hospital quality incentive payments that reward hospitals for enhanced quality, health outcomes and cost effectiveness.
- Nursing Facility Supplemental Payments: HB 08-1114 and SB 09-263 directed the Department to implement a new methodology for calculating nursing facility reimbursement rates, introduced a cap on General Fund growth for core components of the reimbursement rate, and authorized the Department to collect a provider fee from nursing facilities statewide. Any growth in the portion of the per-diem reimbursement rate for core components beyond the General Fund cap is paid from the Nursing Facility Provider Fee cash fund, as are all supplemental payments. Please refer to Exhibit H for calculations and additional details.
- Physician Supplemental Payments: Federal funds are drawn to reimburse Denver Health and the Memorial Health Systems in Colorado Springs for physician services provided in excess of the current reimbursement methodology. The Department retains 10% of the federally matched dollars as a General Fund offset. The FY 2020-21, FY 2021-22, and FY 2022-23 totals are based on the total amounts Denver Health and Memorial Health Systems were able to certify in prior fiscal years.

- Hospital High Volume Payment: Colorado public hospitals that meet the definition of a high-volume Medicaid and Colorado Indigent Care Program (CICP) Hospital qualify to receive an additional supplemental reimbursement for uncompensated inpatient hospital care for Medicaid clients. To meet the definition of a high volume Medicaid and CICP Hospital a hospital must be: licensed as a General Hospital by the Department, classified as a state-owned government or non-state owned government hospital, a High Volume Medicaid and CICP hospital, defined as those hospitals which participate in CICP, whose Medicaid inpatient days per year total at least 35,000 and whose Medicaid and CICP days combined equal at least 30% of their total inpatient days, and maintain the hospital's percentage of Medicaid inpatient days compared total days at or above the prior State Fiscal Year's level. Historically, Memorial Health has been the only hospital to qualify for this payment.
- Health Care Expansion Fund Transfer Adjustment: In previous years, the Department received an appropriation from the Health Care Expansion Fund to cover the costs of programs funded with tobacco tax revenues. However, beginning in FY 2011-12, the Health Care Expansion Fund was insolvent and no longer covered the cost of the programs. The balance in the Health Care Expansion Fund is appropriated to the Department to offset the costs of these programs. In the Department's calculations in this exhibit, this transfer appears as a General Fund offset because the costs of the programs are included as General Fund in the calculations at the top of the exhibit. The FY 2020-21, FY 2021-22, and FY 2022-23 estimates are based on the most recent Tobacco Tax forecast from Legislative Council.
- Intergovernmental Transfer for Difficult to Discharge Clients: Privately owned nursing facilities are eligible for receiving supplemental Medicaid reimbursements for costs incurred treating medically complex clients, such that the sum of all Medicaid reimbursement remains below the Upper Payment Limit for privately-owned nursing facilities. To be eligible for these payments, nursing facilities must be privately owned; enter into an agreement with the discharging hospital regarding timelines and initial plans of care for the affected medically complex patients; and provide long-term care services and supports in the least restrictive manner for medically complex clients residing in an inpatient hospital setting for whom no other suitable discharge arrangements are available. The transfer is an annual payment of \$1,000,000 total funds, increasing to \$1,400,000 in FY 2018-19 and ongoing, with the State share being transferred through Denver Health & Hospital Authority. The State Plan Amendment (SPA) associated with this program has been approved by CMS and the Department began making payments in FY 2017-18.
- Denver Health Ambulance Payments: Federal funds are drawn to reimburse Denver Health for ambulance services in excess of the current reimbursement methodology. This reimbursement does not require any increase in General Fund; the Department retains 10% of the federally matched dollars as a General Fund offset. The FY 2020-21, FY 2021-22, and FY 2022-23 totals are based on the total amount Denver Health Medical Center was able to certify in prior fiscal years.

- Emergency Transportation Provider Payments: Public emergency medical transportation (EMT) providers incur significant uncompensated costs for services provided to Medicaid clients. Because these providers receive public funds, the Department has an opportunity to obtain a federal match on expenditures made by public entities. Implementation of a certified public expenditure (CPE) program for public ground EMT providers would allow the Department to make supplemental payments to public (EMT) providers for EMT services to Medicaid clients Pursuant to 42 CFR § 433.51, public funds may be considered as the State's share in claiming federal financial participation when the public funds are certified by the contributing public agency as representing expenditures eligible for federal financial participation. EMT service providers eligible to participate in this program would receive supplemental reimbursement payment by completing a federally approved cost report form. The supplemental reimbursement payment is based on claiming federal financial participation on CPEs that have already been incurred by the public provider. To be eligible for the reimbursement, the CPE cannot be claimed at any other time to receive federal funds under Medicaid or any other program. The supplemental reimbursement amount is determined by a methodology approved by Centers for Medicare and Medicaid Services (CMS). The Department has increased its request for FY 2020-21, FY 2021-22, and FY 2022-23 based on more providers qualifying for the payment than previously anticipated.
- University of Colorado School of Medicine Payment: Originally approved under SB 17-254, the Colorado Legislature approved a transfer of \$77 million funds from the University of Colorado School of Medicine (UCSOM) to the Department for FY 2019-20, FY 2020-21 and FY 2021-22, to gain access to federal matching funds. The Department then would reimburse UCSOM approximately \$155 million through a UPL payment for physician services.
- Outpatient Hospital Cost Settlement Transfer: In FY 2020-21 the Department is accounting for the impact of trueing up fund splits
  for outpatient cost settlements received in prior years. The Department collects large settlements from hospitals based on the old
  outpatient cost-to-charge ratio methodology. The Department processed the settlements at the standard 50.00% match rate, even
  though a portion of the outpatient expenditure is incurred by expansion adults and received the expansion FMAP. Trueing up the
  fund splits to reflect the expansion population share of the outpatient hospital settlements results in a positive General Fund impact.
- Public School Health Services: Approved as part of the FY 2019-20 S-7, BA-7 "Public School Health Services Funding Adjustment", this request allowed the Department to use certified public expenditure spent on Public School Health Services (SHS) programs to claim a federal match. Part of the claimed federal funds are applied as a General Fund offset in the Medical Services Premiums line.
- HB 20-1385 Use of Increased Medicaid match accounts for the transfer of savings from cash fund financed services to the General Fund as a result of the enhanced federal match was authorized through the Families First Coronavirus Response Act and is currently projected to end March 31, 2021.

- SB 20-212 Reimbursement for Telehealth Services and Cares Sub-Fund: This bill expands Medicaid reimbursement for telehealth services to new providers. The funding of this bill comes from the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) or Cares Sub-Fund within the General Fund.
- Cash and Reappropriated Funds Financing: This item includes the impact of legislation which reduces General Fund expenditure through cash and reappropriated fund transfers. Starting in FY 2016-17, the General Fund offset from the Old Age Pension Health and Medical Care Fund comes entirely from reappropriated funds based on JBC approval of JBC staff recommendations. This methodology ensures that the full \$10 million authorized by Colorado's constitution can be allocated to people who qualify for services from the Old Age Pension Medical Program and that these funds are not tied up in another line. Please refer to Section V for more detailed information on the legislation which authorized the transfers.

The table below shows the impact by cash fund for FY 2019-20, FY 2020-21, and FY 2021-22.

Cash and Reappropriated Funds	FY 2020-21	FY 2021-22	FY 2022-23
Tobacco Tax Cash Fund (SB 11-210)	\$1,958,415	\$1,919,790	\$1,919,790
Healthcare Affordability and Sustainability Fee Cash Fund (SB 13-230) - Upper Payment Limit Backfill	\$15,700,000	\$15,700,000	\$15,700,000
Use Fees For Medical Assistance Program General Fund Offset (HB 20-1386)	\$161,000,000	\$0	\$0
Old Age Pension Health and Medical Care Fund (SB 13-200)	\$9,863,288	\$9,853,351	\$9,853,351
Service Fee Fund (SB 13-167)	\$200,460	\$200,460	\$200,460
Total	\$188,697,657	\$27,673,601	\$27,673,601

#### EXHIBIT B - MEDICAID CASELOAD PROJECTION

Page EB-1 contains historical and projected caseload for all eligibility types from FY 2000-01 through FY 2022-23. Pages EB-2 through EB-5 provide historical monthly caseload without retroactivity for each of the eligibility types for FY 2009-10 through FY 2019-20. A description of the forecasting methodology for Medicaid caseload, including all adjustments, is in the section titled "Medicaid Caseload" of this request.

#### EXHIBIT C - HISTORY AND PROJECTIONS OF PER CAPITA COSTS

Medical Services Premiums per capita costs history through the most recently completed fiscal year and projections are included for historical reference and comparison. The Department provides two separate tables. On page EC-1, the Department provides the per capita cost history based on the cash-based actuals (i.e., the actual expenditure paid in the fiscal year). On page EC-2, the Department provides the per capita cost history adjusted for the FY 2009-10 payment delay; that is, the claims delayed at the end of FY 2009-10 (and paid in FY 2010-11) are included in the FY 2009-10 totals. Per capita trends can be affected by changes in caseload, utilization of services, and service costs.

For FY 2002-03 through FY 2008-09, expenditure for the Prenatal State-Only program are included in the Non-Citizens aid category. The Prenatal State-Only program allows legal immigrants that entered the United States after August 22, 1996 to have State funded prenatal care and Emergency only Medicaid benefits for labor and delivery. This expenditure is included in the MAGI Pregnant Adults aid category beginning in FY 2009-10. HB 09-1353 was passed in FY 2009-10, which allowed legal immigrants that have lived in the United States less than five years to qualify for Medicaid as pregnant adults, Medicaid children, or CHP+ clients, provided there is available funding. Funding for Medicaid pregnant adults was available July 2010. The population that was Prenatal State-Only now represents pregnant adults that are eligible under HB 09-1353. This expenditure is still included in the MAGI Pregnant Adults aid category. Funding for Medicaid children was available July 2015.

# EXHIBIT D - CASH FUNDS REPORT

This exhibit displays spending authority, total request, and incremental request for each source of cash funds in the Medical Services Premiums line item. This information is a summary of the information presented in Exhibit A. In addition, for the current year, total spending authority is broken out between the Long Bill and other special bills; this information is used to calculate the revised letternote amount on the Schedule 13. The Department also provides the specific requested changes to special bill appropriation clauses, when appropriate.

#### EXHIBIT E - SUMMARY OF PREMIUM REQUEST BY SERVICE GROUP

# Summary of Total Requested Expenditure by Service Group

This exhibit is a summary of the requests by service group and by eligibility category for the current year, request year, and out year. It aggregates information from the calculations contained in Exhibits F, G, H, I, and J and caseload information from Exhibit B.

#### EXHIBIT F - ACUTE CARE

#### Calculation of Acute Care Expenditure

Acute Care services expenditure is calculated in a series of steps. At the top of page EF-1, historical expenditure and the annual percent changes are provided. Historical per capita costs and the annual percent changes are also provided. The first step of the calculation is to select a per capita percent change rate, if possible, to trend the last actual per capita to the next year. Finally, bottom-line adjustments are made for legislation and other impacts not included in historical trends. Total expenditure after bottom-line adjustments is divided by the projected caseload to obtain a final per capita cost for the current year. To calculate the request year expenditure, the same methodology is applied to the projected request year per capita, including a per capita trend factor and bottom-line impacts. The total estimated expenditure for Acute Care is added to total estimated expenditure in other service groups and bottom-line impacts to generate the total request for Medical Services Premiums.

#### Calculation of Per Capita Percent Change

The per capita percent change for several different years is computed for each eligibility category on a per capita cost basis. At the bottom of page EF-1, the Department has provided a list of historic trends. Included are two-year, three-year, four-year, and five-year trends, ending in the three most recent historical years. Typically, the same percentage selected to modify current-year per capita costs is used to modify the request-year and out-year per capita costs, although the Department adjusts the selected trend where necessary.

Percentages selected to modify per capita costs are calculated to assess the percentages considering any policy changes or one-time costs that may skew just one trend year. At the same time, per capita trend factors must not take into account changes in caseload or changes accounted for as bottom-line adjustments. The eligibility categories differ in eligibility requirements, demographics, and utilization, so different trends are used for each eligibility category.

The table below describes the trend selections for FY 2020-21, FY 2021-22, and FY 2022-23. The selected trend factors for each year, with the rationale for selection, are as follows:

Aid Category	FY 2020-21 Per Capita Selection	FY 2021-22 Trend Selection	FY 2022-23 Trend Selection	Justification
Adults 65 and Older (OAP-A)	4.61%	4.61%	4.61%	The Department kept the same trend from the May request.
Disabled Adults 60 to 64 (OAP-B)	0.82%	0.82%	3.28%	The Department kept the same trend from the May request.
Disabled Individuals to 59 (AND/AB)	3.67%	3.67%	3.67%	The Department increased the trend relative to the May request due to an increase in pharmacy expenditure for this population.
Disabled Buy-in	4.23%	4.23%	4.23%	The Department kept the same trend from the May request.
MAGI Parents/ Caretakers to 68% FPL	1.14 %	1.14%	1.14%	The Department kept the same trend from the May request. The Department anticipates the per capita of this population will grow based on increases physician services expenditure.

Aid Category	FY 2020-21 Per Capita Selection	FY 2021-22 Trend Selection	FY 2022-23 Trend Selection	Justification
MAGI Parents/ Caretakers 69% to 133% FPL	2.22%	2.22%	2.22%	The Department kept the same trend from the May request. The Department anticipates the per capita of this population will continue to grow based on historical growth in per capita costs.
MAGI Adults	0.98%	0.98%	0.98%	The Department kept the same trend from the May request. The Department anticipates the per capita of this population will continue to grow at a very low rate in the request and out year.
Breast and Cervical Cancer Program	0.00%	-10.65%	-5.53%	See the section in this Budget Narrative titled "Breast and Cervical Cancer Program Per Capita Detail and Fund Splits" for a description of this trend factor.
Eligible Children (AFDC-C/ BCKC-C)	1.13%	1.13%	2.26%	The Department kept the same trend from the May request. The Department anticipates the per capita of this population will continue to grow.
SB 11-008 Eligible Children	1.61%	1.61%	1.61%	The Department kept the same trend from the May request.
Foster Care	1.07%	2.13%	2.13%	The Department kept the same trend from the May request. The Department anticipates the per capita of this population will continue to grow.

Aid Category	FY 2020-21 Per Capita Selection	FY 2021-22 Trend Selection	FY 2022-23 Trend Selection	Justification
MAGI Pregnant Adults	1.11%	1.11%	1.11%	The Department kept the same trend from the May request.
SB 11-250 Eligible Pregnant Adults	1.11%	1.11%	1.11%	The Department kept the same trend from the May request. The trend for this category is tied to MAGI Pregnant Adults, as the Department assumes similar utilization within these populations.
Non-Citizens	1.23%	1.23%	1.23%	The Department kept the same trend from the May request. The Department anticipates the per capita of this population will continue to grow.
Partial Dual Eligibles	2.90%	2.90%	2.90%	The Department kept the same trend from the May request. The Department has selected a flat positive trend as per capita growth is expected to level out. This population's growth in per capita cost is driven primarily by large expenditure in co-insurance.

# Legislative Impacts and Bottom-line Adjustments

To account for programmatic changes which are not incorporated in the prior per capita or trend factors, the Department adds total-dollar bottom-line impacts to the projected expenditure. These impacts are described briefly below and in detail in section V, Additional Calculation Considerations:

- FY 2019-20 R-13 Community Provider Rate Increase (1.0% Across-the-Board), incorporates the acute care impact of the 1.0% across-the-board increases approved during the 2019 legislative session. The rate increases are effective as of July 1, 2019.
- FY 2019-20 R-13 Community Provider Rate Increase (Targeted Maternity), incorporates maternity rate increases to 80% of the Medicare rates. The rate increases are effective as of July 1, 2019.

- FY 2019-20 R-13 Community Provider Rate Increase (Targeted Transportation), incorporates transportation rate increases for specific Emergency and Non-Emergency Transportation services. The rate increases are effective as of July 1, 2019.
- FY 2019-20 R-13 Community Provider Rate Increase (Other Targeted Rate Increases), incorporates rate increases for specific Trachea Prothesis, Polysomnography, and Aquatic Therapy services. The rate increases are effective as of July 1, 2019.
- FY 2019-20 R-13/JBC Action Community Provider Rate Increase (Targeted Anesthesia), incorporates transportation rate reductions to 120% of the Medicare benchmark for Anesthesia Services. The rate increases are effective as of July 1, 2019.
- FY 2019-20 R-13 Community Provider Rate Increase (Targeted Lab and Pathology), incorporates rate reductions for Lab and Pathology services. The rate increases are effective as of July 1, 2019.
- FY 2019-20 R-13 Community Provider Rate Increase (Targeted Diabetes Test Strips), incorporates rate reductions for Diabetes Test Strips. The rate increases are effective as of July 1, 2019.
- FY 2019-20 R-6 Local Administration Transformation The Department received \$700,000 for FY 2019-20 and \$1,966,848 in FY 2020-21 to implement three initiatives that would improve county performance and accountability, increasing incentive funding and oversight, removing NEMT administration from county administration responsibilities, and consolidating returned mail processing.
- FY 2019-20 R-12 Medicaid Enterprise Operations, accounts for recoveries resulting from a scan of the Department's entire data warehouse looking for recoverable overpayments and cost-avoidance opportunities that have never been identified by recovery contractors.
- Adult Dental Cap Reduction (HB 20-1361) is an ongoing decrease in the annual limit for the adult dental benefit from \$1,500 to \$1,000. The reduction to the limit of this benefit cannot be implemented until April 1, 2021 due to the maintenance of effort required during the public health emergency, per the Families First Coronavirus Relief Act. The annualizations going into FY 2021-22 are due to a full year of savings from the reduction in the limit.
- Annualization of Repay Overcollection of Drug Rebates in FY 2016-17, accounts for adjustments to FY 2017-18 drug rebate collections due to voided pharmacy claims from the legacy system being billed to drug manufacturers in FY 2016-17. Manufacturers did not claim the entirety of their credit in FY 2017-18 and FY 2018-19.
- Annualization of HB 18-1322 Long Bill, Provision for 12 Month Supply of Contraceptives, will allow pharmacists to fill a 12-month supply of birth control after an initial 3-month trial dispensing, which will increase the number of total contraceptives dispensed by allowing women to pick up a year-long supply of contraceptives.
- Annualization of FY 2018-19 R-10 Drug Cost Containment Initiatives, The Department was appropriated administrative funds to implement a prior authorization system on physician administered drugs and hire a contractor to help with designing an alternative payment methodology for drugs, particularly those that fall under the categories of high-cost and specialty. The Department anticipates prior authorization of physician administered drugs will begin in January 2019 and result in decreased utilization.

- Annualization of Client Over-Utilization Program, accounts for a lock-in program starting July 1, 2018. This initiative originally sought to increase enrollment to 200 clients in the Client Overutilization Program (COUP) by changing some of the criteria in the MMIS to allow a broader range of providers to participate as lock-in providers. This program generates savings by decreasing excessive use of medical services and thereby reducing the expenditure for medically unnecessary claims. The program criteria targets the abuse of prescription medication, inappropriate use of emergency room and/or physician services. The Department implemented COUP on July 1, 2018, but anticipates lower enrollment than originally requested.
- Annualization of Set DME Rates According to Medicare, will tie DME rates for certain services to Medicare rates, which are updated annually on January 1<sup>st</sup>. Those rates increased with the CARES Act for the duration of the emergency period. Because the Department's rates are only updates once a year on January 1st, the Department anticipates paying the higher rate for all of calendar year 2021.
- Annualization of FY 2018-19 R-8 Medicaid Savings Initiatives Prior Authorization Requirements (PAR) Savings, will account for savings in Acute Care expenditure from improved utilization management (UM) by implementing new prior authorization requirements (PAR) for several services that are at risk for over utilization.
- Annualization of SB 18-266, Controlling Medicaid Costs, requires the Department to implement new initiatives to control Medicaid expenditures.
- Annualization of Accountable Care Collaborative (ACC) savings accounts for reductions in Acute Care expenditure resulting from ACC program activities. Additional detail can be found both in section V and in Exhibit I.
- Annualization of Estimated Impact of Increasing PACE Enrollment accounts for the Department's initiative to increase enrollment of new PACE clients. The Department anticipates that this increased enrollment will cause a shift in expenditure from the Acute Care service group to the PACE service category.
- Additional Week 53 Pay Period in FY 2019-20, factors in an additional payment period in FY 2019-20. Payments are typically made on the Monday of each week and there are 53 Mondays in FY 2019-20.
- FY 2020-21 R-10 Community Provider Rate Decrease (1.0% Across-the-Board) incorporates the acute care impact of the 1.0% across-the-board decreases approved during the 2020 legislative session.
- COVID-19 Utilization incorporates the estimated increase in utilization of hospital services and laboratory services associated with COVID-19. The Department estimated the impact using projections of hospitalizations from the Colorado Department of Public Health and Environment for the state, and by estimating the proportion of hospitalizations that for Medicaid members of the total COVID-19 hospitalizations based on the most recent data on Medicaid members with a hospitalization related to COVID-19.
- Reduction in Acute Services from COVID incorporates the annualization from a reduction in Acute Care Services as a result of stay at home orders during the beginning of the COVID-19 pandemic response. The Department estimated savings for a variety of services as a result of the stay at home orders and anticipates that services will return back to normal based on most recent utilization data.

- Per Capita Dampener for New Enrollee incorporates the estimated effect of new enrollees to Medicaid costing less on average than existing Medicaid members. The Department's initial findings indicate that new enrollees cost less than the average Medicaid per capita cost of members who were on Medicaid prior to the recession.
- FY 2020-21 Budget Request: R-15 Medicaid Recovery and Third Party Liability Modernization: Provides funding for vendor contracts in order to recover and prevent improper payments in three areas: tort and casualty recoveries; identification of third-party insurance; and, identification and collection of overpayments.
- Increase Copays accounts for the savings associated with increasing copays on Acute Care services on members to the federal maximum allowable amount. The increase in copays cannot be implemented until April 1, 2021 due to the maintenance of effort required during the public health emergency, per the Families First Coronavirus Relief Act.
- R-12 Work Number Verification provides funding in order to implement a robust income verification process for Medicaid and CHP+ eligibility determinations based on real-time verifications. The Department will set up contract with a vendor to obtain work number verification data and anticipates costs avoided from a reduction in Medicaid caseload.
- R-6 Local Administration, the NEMT program is now centrally administered to alleviate the need for 55 counties to use local funds and streamline the system.
- R-7 Pharmacy Pricing and Technology Request incorporates savings for rate changes to the departments prescription drug reimbursement methodology and the Department's physician drug administered drug methodology.
- SB 20-212 Telehealth Services this bill increase costs associated with telehealth services being provided and reimbursed at the inperson rate.
- Rocky Mountain Health Partner Rate Reconciliation incorporates savings associated with the Department overpayment on prior years rates for Rocky Mountain Health Partner Rates. The Department currently has the lowest projected amount to be recovered incorporated into the forecast and may update this estimate in future requests.
- Substance Use Disorder (SUD) Drug Rebate Elimination, federal law now precludes claiming a rebate on SUD drugs. The Department estimated the impact of losing the rebate on impacted drugs based on the average rebate percentage.

# Breast and Cervical Cancer Program Per Capita Detail and Fund Splits

In 2001, the General Assembly passed SB 01S2-012, which established a Breast and Cervical Cancer Treatment Program within the Department. In 2019, the General Assembly passed HB 19-1302 which extended the repeal date of the program to 2029. All Breast and Cervical Cancer Program expenditure receives an enhanced federal match rate of approximately 65.00%. Please refer to Exhibit A and Exhibit R for more specific information on the federal match rate for this program.

Beginning January 2017, the age range for clients receiving cervical cancer screening and treatment was expanded to include ages 21 through 39, based on CDPHE's FY 2016-17 R-4 "Cervical Cancer Eligibility Expansion." This change did not have an impact of the anticipated magnitude, and the previous caseload adjustment for this policy change has now been removed as the policy change is incorporated into the trend.

# Per Capita Cost

The Department assumes base per capita growth for this population will be higher than recent years based on per capita expenditure for the population in FY 2019-20. With the implementation of the ACA expansion in January 2014 many clients who were eligible through the Breast and Cervical Cancer Program were re-determined as eligible for the MAGI Adult population instead. Per CMS direction, the Department was unable to claim the enhanced ACA FMAP for those clients while they were still actively receiving cancer treatment, and the Department manually moved them from MAGI Adults to the Breast and Cervical Cancer Program category. Based on analysis of affected clients, the Department determined that the clients included in the manual adjustment were no longer receiving cancer treatment and the Department stopped completing the adjustment as of July 2017. The number of clients in the Breast and Cervical Cancer Program is now much lower, but the per capita costs of clients remaining in the program are higher as they are more likely to use high-cost cancer treatment services as evidenced by the growth in per capita in FY 2019-20. Therefore, the Department adjusted the per capita up for FY 2020-21, FY 2021-22, and FY 2022-23.

# Fund Splits

The second half of this exhibit calculates the portion of Breast and Cervical Cancer Program expenditure that will be allocated to the Breast and Cervical Cancer Prevention and Treatment Program Fund.

### Adult Dental Cash Fund-eligible Per Capita Detail

In 2013, the General Assembly passed SB 13-242, which established the Adult Dental Benefit program along with the Adult Dental Cash Fund, funded through the Unclaimed Property Tax Fund. The Adult Dental Cash Fund provides the funding for the State share of the Adult Dental Benefit program, for expenditure that would otherwise be funded by General Fund for the State share. In 2014, the General Assembly passed HB 14-1336 which provided funding for the addition of full dentures as part of the Adult Dental Benefit. The Department previously covered dental services for adults only in emergencies or in the case of co-occurring conditions that required dental services. The Department does not have a way to systematically distinguish between dental services received in the case of emergency or co-occurring conditions and those covered under the Adult Dental Benefit. The Adult Dental Cash Fund-Eligible Dental Services Exhibit on pages EF-6 through EF-8 reports total Dental expenditure for populations that have the State share of expenditure

funded with the Adult Dental Cash Fund and subtracts out the estimated expenditure for emergency and co-occurring conditions to estimate the expenditure that will be funded by the Adult Dental Cash Fund.

The Department forecasted expenditure based on the most recent actuals, which were higher than previously forecasted. Therefore, the Department has raised the forecast for FY 2020-21, FY 2021-22, and FY 2022-23.

### Antipsychotic Drugs

Antipsychotic drugs were moved from the Department's premiums line to the Department of Human Services for FY 2001-02. For FY 2003-04, the General Assembly moved antipsychotic drugs from the Department of Human Services' portion of the budget to the Medical Services Premiums line item of the Department. This expenditure is now included in the Acute Care service group within the Prescription Drugs service category. Exhibit F, pages EF-11 through EF-12, shows annual costs by aid category and per capita cost in two versions: with and without the estimated impact of drug rebate. The Department has eliminated the projection of expenditure in this area due to the elimination of the informational-only line item in Long Bill group (3), effective with HB 08-1375.

The Department experienced a large decrease in gross aggregate and per-capita acute antipsychotic pharmaceutical expenditure in FY 2012-13 due to several antipsychotic drugs going generic and per-unit costs decreasing significantly. FY 2014-15 resumed growth due to increases in cost, utilization, and caseload, which continued in FY 2015-16. The Department experienced a slight decrease in FY 2016-17 in gross expenditure. In FY 2017-18, there was another significant decrease in gross aggregate and per-capita expenditure due to the brand name preference of Abilify being removed in April 2017, as well as a large decrease in the unit price of aripiprazole (the generic version of Abilify).

# Federal Funds Only Pharmacy Rebates

The Patient Protection and Affordable Care Act (ACA) increased the number of pharmaceutical rebates the Department receives. Under section 2501 of the ACA, the entire increase in the drug rebates is due to the federal government. Drug rebates are recorded as an offset to total funds expenditure in Acute Care (Exhibit F), and the Department's total funds expenditure projection reflects the estimated expenditure after the increase in the drug rebates. To properly account for this decrease in expenditure, the Department shows the estimated increase in drug rebates as a federal funds decrease in Exhibit A, as the increased drug rebate will offset total federal funds expenditure. In this exhibit, the Department estimates the incremental number of rebates that are federal funds only. Estimates are based on FY 2018-19 data and FY 2019-20 data. The Department increased costs in FY 2020-21 from previous forecasts based on FY 2019-20 data. The Department carried the forecasted growth from FY 2019-20 to FY 2020-21 into the FY 2021-22. The trend chosen to

forecast rebates FY 2022-23 is based on the average price increase in 2017 of 267 brand name and generic prescription drugs used to treat chronic and acute conditions.

#### Family Planning - Calculation of Enhanced Federal Match

Certain services that are family planning in nature are eligible for 90% federal financial participation. However, to claim the enhanced match, the State must uniquely identify these services. Some family planning services are provided through fee-for-service, and, beginning in late FY 2001-02, the Department was also able to identify those family planning services provided by health maintenance organizations. Therefore, the State receives the enhanced match on about 95% of the family planning services provided to Medicaid clients. Totals listed on page EF-14 are taken directly from the Department's reporting to the Centers for Medicare and Medicaid Services (CMS) for enhanced federal funds.

In FY 2016-17, the Department received more rebates attributed to Family Planning than it should have, as the result of a rebate payment error. As such, the Department's total reported expenditures are understated and artificially low in FY 2016-17. The Department has trended forward the FY 2019-20 expenditure by a fraction of previous growth rates to reach FY 2020-21, FY 2021-22, and FY 2022-23 estimates.

#### Indian Health Service

In 1976, the Indian Health Care Improvement Act (PL 94-437) passed with the goal of improving the health status of American Indians and Alaskan Natives and encouraging tribes to participate as much as possible in the management of their health services. The law specified that the payments for inpatient and outpatient services and emergency transportation for Medicaid clients who are American Indians with a legal tribe affiliation receive 100% federal financial participation. The Indian Health Service is the federal agency within the Department of Health and Human Services that provides services to American Indians and Alaskan Natives directly through its hospitals, health centers, and health stations, as well as indirectly by coordinating with tribe-administered health care facilities.

# Expenditure by Half-Year

As an additional reasonability check, this section presents previous fiscal years' actual and per capita expenditure by six month intervals. Year-to-date average caseload for this exhibit has been taken from Exhibit B of this request. The per capita by six-month period can be quickly compared, and historic per capita costs may be referenced with page EF-1 of this request.

#### EXHIBIT G - COMMUNITY-BASED LONG-TERM CARE

#### Home- and Community-Based Services (HCBS) Waivers

Community-Based Long-Term Care (CBLTC) services are designed to provide clients who meet the nursing facility level of care with services in the community. The increased emphasis on utilizing community-based services has served to keep the census in Class I Nursing Facilities relatively flat. In FY 1981-82, with the implementation of the first wave of Home- and Community-Based Service (HCBS) waivers, the Class I Nursing Facility census was over 12,500 clients. Almost immediately, the census dropped to just over 10,000 clients. The HCBS census generally remained in this range though FY 2002-03. However, since that time, HCBS utilization has risen sharply; in FY 2015-16, the Department paid HCBS-LTSS waiver claims for an average of 24,994 clients per month. From July 2019 through the June 2020, the Department paid HCBS-LTSS waiver claims for an average of 30,865 clients per month.

Clients receiving CBLTC services currently have access to 10 HCBS waivers, each targeted to specific populations. Of the 10 waivers administered by the Department, 6 are included in the Medical Services Premiums line item and the remaining 4 fall under the Office of Community Living. The HCBS waivers that are included in the Medical Services Premiums line item are referred to throughout this narrative as HCBS-LTSS waivers. The Persons Living with AIDS adult waiver is no longer active and clients were phased into the Elderly, Blind and Disabled waiver by the end of FY 2013-14. The Children with Autism (CWA) waiver ended operation on June 30, 2018 and the Consumer Directed Attendant Support (CDASS) State Plan Waiver ended operation effective January 1, 2019. Information for the CDASS State Plan waiver and CWA waiver was included in this request but will be removed in future requests. The waivers included in the Medical Services Premiums line item are:

- Elderly, Blind and Disabled Adult Waiver
- Community Mental Health Supports Adult Waiver<sup>1</sup>
- Children's Home-and Community-Based Services Waiver
- Brain Injury Adult Waiver
- Children with Life Limiting Illness Waiver<sup>2</sup>
- Spinal Cord Injury Adult Waiver<sup>3</sup>

<sup>&</sup>lt;sup>1</sup> Previously known as "Persons with Mental Illness"

<sup>&</sup>lt;sup>2</sup> Previously known as "Pediatric Hospice Waiver"

<sup>&</sup>lt;sup>3</sup> Previously known as "Alternative Therapies Waiver"

### Calculation of Community-Based Long-Term Care Waiver Expenditure

In FY 2012-13, the Department adjusted the CBLTC forecasting methodology from an eligibility-type forecast to one that forecasts each of the Department's HCBS-LTSS waivers individually. The Department believes this to be a more accurate way of forecasting CBLTC because each waiver targets certain populations and provides services targeted at those clients. In CBLTC, each eligibility type has clients receiving services in the HCBS-LTSS waivers. Because each waiver's services vary depending on the target population, any change to a program could impact multiple eligibility types, thus making it difficult to forecast and identify the root of significant changes in historical trend.

The current methodology includes a forecast for each waiver's enrollment, utilizers, and cost per utilizer. Percentages selected to modify enrollment, utilizer, or per-utilizer costs are calculated to assess the percentages considering any policy changes or one-time costs that may skew just one trend year. At the same time, trend factors must not take into account changes accounted for as bottom-line adjustments. Because each HCBS-LTSS waiver differs in eligibility requirements, demographics, and utilization, different trends are used for each waiver.

Since the Department is using an enrollment-based methodology to define caseload, a utilization adjustment must be used prior to developing final projected expenditure. This utilization adjustment is determined by taking the ratio of paid claims in given month to the number of PARs in the same month. The Department has chosen to incorporate actual data on average monthly utilizers to average monthly enrollments to select a utilization adjustment that aligns with FY 2019-20. The Department then used this adjustment factor to estimate the FPE and adjust projected expenditure for each waiver in FY 2020-21, FY 2021-22, and FY 2022-23.

The selected enrollment, utilization adjustments, and cost per utilizer trend factors for FY 2020-21, FY 2021-22, and FY 2022-23 with the rationale for selection, are below. In most cases, the Department kept the trends for both enrollment and cost per utilizer steady for each of the three years. In situations where trends differ each year, the variation is noted.

Home- an	Home- and Community-Based Long-Term Services and Supports Waivers Enrollment Trends and Justification						
Waiver	Enrollment Trend Selection	Per Utilizer Trend Selection	Justification				
Elderly, Blind and Disabled Waiver	FY 2020-21 through FY 2022- 23: 2.26%,2.51%, 2.51% respectively	FY 2020-21 through FY 2022- 23: 2.42%, 1.66%, 2.48% respectively	Enrollment at the end of FY 2019-20 was slightly higher than anticipated and the Department projects a conservative growth trend of 2.26% in FY 2020-21 and 2.51% in future years.  Per utilizer costs for this waiver decreased slightly in FY 2019-20 compared to previous forecasts. The Department predicts cost per utilizer will grow slightly in FY 2020-21 by approximately 2.42% and will slow to around 1.66% in FY 2021-22, and 2.48% in FY 2022-23.				
Community Mental Health Supports Waiver	FY 2020-21 through FY 2022- 23: 1.12%, 3.16%, 3.17%respectively	FY 2020-21 through FY 2022- 23: -1.46%, 1.95%, 1.95% respectively	Enrollment growth for this waiver has declined slightly based on the most recent data. For FY 2020-21, 2021-22, and FY 2022-23, the Department applied enrollment growth trends of 1.12%, 3.16% and 3.17% respectively.  The estimated cost per utilizer declined slightly in the last half of FY 2019-20. Due to this, the Department expects cost per utilizer to decline slightly in FY 2020-21 which results in a projected trend of – 1.46% in FY 2020-21. The Department is predicting that there will slight growth in the cost per utilizer in FY 2021-22 and FY 2022-23.				

Children's Home and Community Based Services Waiver	FY 2020-21 through FY 2022- 23: 8.92%, 8.88%, 8.89% respectively	FY 2020-21 through FY 2022- 23: 15.53%, 10.40%, 10.75% respectively	Since FY 2011-12, average annual enrollment growth is around 5.78% with large increases in the past three fiscal years. The Department is projecting continued steady growth in enrollment.  Only two services are offered on the waiver: In-Home Supportive Services (IHSS) - Health Maintenance Activities and case management. While IHSS is expensive, it is less costly than Long-Term Home Health services. Very large historical growth in perutilizer costs were driven by IHSS - Health Maintenance Activities client utilization. Per utilizer costs continue to grow as new people join the waiver and existing waiver enrollees shift to IHSS.
Brain Injury Waiver	FY 2020-21 through FY 2022- 23: 5.12%, 7.30%, 7.33% respectively	FY 2020-21 through FY 2022- 23: 4.79%, 2.33%, 2.65% respectively	Historically there has been slow and steady growth in BI enrollment. However, since FY 2014-15 enrollment growth rates have been increasing each year. Enrollment at the end of FY 2019-20 was slightly higher than anticipated and the Department projects a growth trend of 5.12% from in FY 2020-21 and around 7.30% in future years.  In FY 2019-20, the actual cost per utilizer was higher than predicted values. Because of this the Department has increased its projected cost per utilizer expectations for FY 2020-21 and is anticipating a steady growth in cost per utilizer in FY 2021-22 and FY 2022-23.

Children with Life Limiting Illness Waiver	FY 2020-21 through FY 2022- 23: 3.51%, 5.65%, 5.88% respectively	FY 2020-21 through FY 2022- 23: -7.57%, - 0.06%, 0.00% respectively	Since FY 2016-17, average annual enrollment growth has been 7.04% and has slowed down in FY 2019-20. The Department believes enrollment will grow modestly in FY 2020-21 and beyond.  Cost per utilizer growth has been volatile but negative for recent fiscal years, likely due to billing issues. The Department is forecasting – 7.57% growth in FY 2020-21 with 0% growth in future years.
Spinal Cord Injury Waiver	FY 2020-21 through FY 2022- 23: 9.55%, 9.23%, 9.39% respectively	FY 2020-21 through FY 2022- 23: -3.30%, 3.11%, 3.85%	Senate Bill 19-197 "Spinal Cord Pilot Alterative Med" reauthorized the waiver for five more years. After removal of the enrollment cap, annual enrollment growth has averaged 32.93% in the last three fiscal years. The Department believes growth will continue to increase in FY 2020-21, and throughout FY 2021-22, and FY 2022-23.  Cost per utilizer decreased in FY 2019-20 with an increase in the number of waiver utilizers. A negative growth trend of -3.30% was selected in FY 2020-21 and then a conservative trend of 3.02% in the out years. Cost is primarily composed of consumer directed services like CDASS and IHSS.

### Legislative Impacts and Bottom-Line Adjustments

To account for programmatic changes not incorporated in the prior per-enrollee trend factors, the Department adds total-dollar bottom-line impacts to the projected enrollment or expenditure. For complete information on legislative impacts, see section V, Additional Calculation Considerations. The following impacts have been included in the Request for Community-Based Long-Term Care:

#### **Expenditure**

- Colorado Choice Transitions The Department was awarded Money Follows the Person federal grant monies to implement a program designed to transition clients from nursing facilities into community-based services. The program began enrolling clients in May 2013. The program has seen enrollment expectations decrease due to issues with payment methodology and low rates; however, with recent access changes, enrollment began to increase. The program is coming to an end and can no longer transition clients beginning on January 1, 2020. To address this, the Department decreased the expected enrollment until it is close to zero in the last year of this request. The Department has decreased the cost per client for some CCT services based on actual utilization of recent clients which also decreased the impact to other areas of the forecast. CCT clients enrolling into LTSS waivers are captured in the enrollment trends. These clients, however, are eligible for five services, in addition to waiver services, to aid in their transitions. This bottom line impact accounts for expenditure on those five transition services that clients have access to during their one year of transitioning.
- FY 2019-20 1% Across the Board Rate Increases The Joint Budget Committee approved a 1.00% across the board rate increase, effective July 1, 2019. The rate increase applies to waiver services that did not also receive a targeted rate increase in FY 2019-20.
- FY 2019-20 Adult Day Targeted Rate Increase The Joint Budget Committee approved a targeted rate increase for adult day providers which was implemented January 1, 2020. The exact targeted rate increase percentage varies by waiver but ranges from 28% to 50%.
- FY 2019-20 Respite Targeted Rate Increase The Joint Budget Committee approved a targeted rate increase for respite providers implemented January 1, 2020. The exact targeted rate increase percentage varies by waiver and type of respite but ranges from 12% to 52%.
- FY 2019-20 Behavioral Therapy Targeted Rate Increase The Joint Budget Committee approved a targeted rate increase for mental health counseling providers which was implemented January 1, 2020. The exact targeted rate increase percentage varies by service setting but ranges from 70% to 78%.
- FY 2019-20 Long Bill Personal Care & Homemaker Rate Increase As part of SB 19-207 "FY 2019-20 Long Appropriations Bill", the Joint Budget Committee approved a targeted rate increases of 8.11% for personal care and homemaker services as part of In Home Support Services (IHSS) and Consumer Directed Attendant Support Services (CDASS).

- SB 20-212 "Reimbursement for Telehealth Services": The bill expands Medicaid reimbursement for telehealth services to new
  providers and establishes requirements for state-regulated health insurance carriers and home care agencies related to the delivery
  of telehealth services.
- COVID Emergency Spending- In response to the coronavirus the Department implemented a handful of time-limited emergency
  rate increases that only applied to FY 2019-20. The department increased rates for providers of residential HCBS services and nonresidential HCBS providers. These rate increases were no longer in affect in FY 2020-21 and the savings is a reflection of the
  removal of the increase.
- Local Minimum Wage: In the 2020 legislative session, the JBC approved an action to increase rates for certain HCBS services in the Denver metro area in response to Denver increasing its minimum wage starting on January 1, 2020 with subsequent increases each January through January 1, 2022. This bottom line impact includes the expenditure impact of three years of rate increases.
- SB 19-238 "Improve Wages and Accountability Home Care Workers": SB 19-238 requires the Department to enforce training requirements for a wage pass through to direct home care workers and to increase the rate for agency-based IHSS and CDASS personal care and homemaker services by 8.11% which was implemented January 1, 2020.
- Brain Injury Supported Living Program (SLP) Rate Change: Through the Department's FY 2017-18 R-9 "Long Term Care Utilization Management" request, the Department received funding for a contractor to complete SLP acuity assessments for Brain Injury (BI) clients in order to eliminate a conflict of interest that existed as providers were completing the acuity assessments while providing services to the same clients. As a result, clients have received new acuity scores which factor into the rates SLP providers receive. This adjustment accounts for the budget impact of these new rates which use the new acuity scores completed by a third-party entity instead of providers.
- FY 2020-21 R-10 Community Provider Rate Decrease incorporates the HCBS waiver impact of the 1.0% across-the-board decreases approved during the 2020 legislative session.

### Hospice

Hospice expenditure for FY 2020-21, FY 2021-22, and FY 2022-23 is forecasted as the sum of two primary categories of services. The first – Nursing Facility Room and Board expenditure – is expenses incurred on a per-diem basis for clients receiving hospice services in a full-time capacity at a nursing facility. This expenditure represented approximately 76% of total hospice expenditure in FY 2019-20. The remaining portion of hospice expenditure is represented under the Hospice Services category and includes Hospice General Inpatient Care, Hospice Routine Home Care, Hospice Inpatient Respite, Hospice Continuous Home Care, and vision, dental, hearing, and other Post-Eligibility Treatment of Income (PETI) benefits.

Payments made to nursing facilities for services provided to hospice clients differ from payments made for Class I Nursing Facility clients in two predominant ways: there is no patient payment component of the per diem rate for hospice services, and the per diem for hospice clients is prescribed at approximately 95% of the per diem rate for Class I Nursing Facility clients. Otherwise, the methodology for forecasting nursing facility room and board expenditure for hospice clients mirrors the Class I Nursing Facility forecast.

Hospice nursing facility room and board total expenditure estimates for a fiscal year are the product of forecasted patient days and forecasted room and board per diem, with additional bottom-line impact adjustments made for rate cuts applied to claims paid that were incurred in the previous fiscal year. To create the patient days forecast, the Department used claims information adjusted by an incurred-but-not-reported (IBNR) analysis to determine historical patient day counts. The Department used a time trend model with monthly control variables to estimate FY 2020-21 patient days; this slightly increased patient days for the fiscal year relative to the February forecast. This trend estimate assumes patient days will continue to grow at a slow pace due to an increasingly aging Medicaid population. As hospice client nursing facility per diems are linked to the per diem for Class I Nursing Facility clients, they are assumed to grow at roughly the same 3% per-year rate<sup>4</sup>. Rate reductions are accounted for in the same fashion as they are for nursing facilities: their impact is included in calculations as a bottom-line impact.

Please refer to the portion of the narrative devoted to Class I Nursing Facilities for a more detailed description of IBNR analysis, the 3% General Fund growth cap for nursing facility rates, and nursing facility rate reductions. Additional information is available in footnotes (1) through (7) in the footnotes section of the hospice forecast.

The second category of hospice expenditure, referred to throughout the hospice forecast as Hospice Services, contains all hospice expenses other than those accrued as payments to nursing facilities for room and board for hospice clients.

The largest component of this expenditure category is Hospice Routine Home Care; this is considered the standard level of hospice care provided to hospice clients in their homes typically two or three times per week, generally by nurses. In FY 2019-20, Hospice Routine Home Care expenditure was approximately \$14.8 million and thus represented 84% of Hospice Services expenditure and 22% of total hospice expenditure. Hospice Routine Home Care expenditure is computed as a product of patient days and the daily rate. The Department arrived at estimates for patient days by trending forward total patient days in FY 2019-20 by 5.38% for FY 2020-21 based on YTD actuals and by approximately 4.52% for FY 2021-22 and 1.48% in FY 2022-23; the trends were selected with the assumption that patient days would continue to grow over time. The Hospice Routine Home Care per diem is forecasted by applying approximately

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<sup>&</sup>lt;sup>4</sup> Because the distribution of patient days across facilities is likely different between class I nursing facility and hospice services, the aggregate rate for hospice might not grow at exactly 3% as outlined in statute.

a 3.00% trend to daily rates in FY 2019-20 based on the YTD average rate. Starting on January 1, 2016, the Department was instructed by CMS to implement a tiered rate system for Routine Home Care Services. <sup>5</sup> Patient days incurred in the first sixty days of service are billed a higher rate than days incurred beyond the sixty-day threshold.

The next-largest component of hospice services expenditure is Hospice General Inpatient Care. This expenditure is incurred for services provided to hospice patients at inpatient facilities under severe circumstances. In FY 2018-19, the Department paid approximately \$2.5 million for Hospice General Inpatient Care. The Department estimated FY 2020-21, FY 2021-22, and FY 2022-23 service costs by trending FY 2019-20 expenditure by the percentage change in growth from FY 2018-19 to FY 2019-20.

The remaining components of hospice services expenditure in total represent approximately \$156,000 of expenditure based on FY 2019-20 actual expenditure. There is significant variation in these remaining services by fiscal year. The Department estimated that expenditure would decrease slightly into FY 2020-21 and will increase by about 10% in FY 2021-22 and FY 2022-23.

Hospice is not normally affected by bottom line impacts, except through items that also affect Class I Nursing Facilities, such as the HB 13-1152 1.5% permanent rate reduction on Nursing Facility core per-diem. However, the current request includes the estimated impact of a rate decrease that affects Hospice services other than Nursing Facility Room and Board: the across the board rate decrease, which decreases the Hospice rate by 1.00%. This increase does not apply to Nursing Facility Room and Board.

### Private Duty Nursing

Private Duty Nursing (PDN) services are face-to-face skilled nursing services provided in a more individualized fashion than comparable services available under the home health benefit or in hospitals or nursing facilities and are generally provided in a client's home. PDN services are billed hourly; maximum daily eligibility is 16 hours for adults and 24 hours for pediatric clients. There are five categories of PDN expenditure: individual services provided by a registered nurse (RN), group services provided by a registered nurse (RN-group), individual services provided by a licensed practical nurse (LPN-group), and blended services. RN services are associated with the highest hourly rate and LPN-group services with the lowest. The remaining three services – RN-group, LPN, and blended – charge similar rates. PDN rates are based on the Department's fee-schedule, and there is no mechanism forcing them to change. During the FY 2020-21 Legislative Session, PDN services received a 1% across the board rate decrease which was implemented on July 1, 2020.

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<sup>&</sup>lt;sup>5</sup> For more information, refer to: <a href="https://www.colorado.gov/pacific/sites/default/files/2016%20Hospice%20Rates%20and%20Rules.pdf">https://www.colorado.gov/pacific/sites/default/files/2016%20Hospice%20Rates%20and%20Rules.pdf</a>

As PDN expenditure is the product of the units utilized per client, the number of utilizers, and the rate; and the Department expects rates to remain constant, expenditure forecasts for FY 2020-21, FY 2021-22 and FY 2022-23 are primarily based on unit per utilizer and utilizer forecasts for those fiscal years. The unit per utilizer and utilizer forecasts are separated into three pieces: RN; LPN; and grouped RN Group, LPN Group, and Blended Group.

### Private Duty Nursing Utilization Trends and Justification

Service	Average Month Utilizer Trend Selection	Units Per Client Trend Selection
Registered Nursing (RN)	FY 2020-21: 1.43%	FY 2020-21: -1.89%
	FY 2021-22: 1.41%	FY 2021-22: 0.00%
	FY 2022-23: 1.39%	FY 2022-23: 0.00%
<b>Licensed Practical Nursing (LPN)</b>	FY 2020-21: 0.00%	FY 2020-21: 0.00%
	FY 2021-22: 0.00%	FY 2021-22: 0.00%
	FY 2022-23: 0.00%	FY 2022-23: 0.00%
Registered Nursing (RN)	FY 2020-21: 2.81%	FY 2020-21: 0.72%
<b>Group/Licensed Practical Nursing</b>	FY 2021-22: 1.41%	FY 2021-22: 0.54%
Group (LPN) and Blended RN/LPN	FY 2022-23: 1.41%	FY 2022-23: 0.54%

### Registered Nursing (RN):

Average monthly clients have started to slow over the last couple of years from the double digit growth that was seen from FY 2010 through FY 2014. The Department anticipates that this trend will continue and chose a small positive growth trend of 1.43% which is halved in the out-years to 1.41% and 1.39%

FY 2019-20 units per clients included a 53rd payment week and because of this the trend appears to be lower in FY 2020-21; because of the additional payment period in the last fiscal year. The Department applied a small decrease in units per client in the current year and then leveled off the trend. To keep in line with this expectation the Department placed a small negative trend of -1.89% on units per client for FY 20-21 and then assumed 0.00% growth for the out-years.

### **Licensed Practical Nursing (LPN):**

LPN average utilizers per month has had strong negative trends for the last two fiscal years. The Department believes that the number of clients has started to level off. The Department choose a trend of 0.00% for the current year and the out years.

FY 2019-20 units per clients included a 53rd payment week and because of this the trend appears to be lower in FY 2020-21; because of the additional payment period in the last fiscal year. LPN units per client have historically decreased, and the Department assumes that the increase in FY 2019-20 was a level shift and that units will remain constant in the future years.

### Registered Nursing (RN) Group/Licensed Practical Nursing Group (LPN) and Blended RN/LPN:

LPN-group, RN-group, and Blended RN/LPN drove 16.58% of total expenditure in FY 2019-20 and represent the smallest number of average utilizers per month. Due to large growth in FY 2017-18 and in FY 2018-19 the Department assumes growth will level off in FY 2020-21 with a trend of 2.81% and then decrease in future fiscal years to 1.41%.

FY 2019-20 units per clients included a 53rd payment week and because of this the trend appears to be lower in FY 2020-21; because of the additional payment period in the last fiscal year. For the grouped and blended PDN services, the growth of units per client has generally been positive over the last few years. The Department assumed a small growth trend of 0.72% as the FY 2020-21 trend and then assumed small growth of 0.54% growth for FY 2021-22 and FY 2022-23.

### Long-Term Home Health

Long-Term Home Health (LTHH) services are deemed necessary by a medical need and are skilled nursing and therapy services that are generally provided in a client's home. LTHH services are either billed hourly or on a per-visit basis with a maximum number of hours. There are nine services under LTHH that are for both children under 21 and adults: clients under 21 that have a medical need can access Physical, Occupational, Speech and Language Therapies (PT, OT, and S/LT respectively), and all clients have access to Registered Nursing/Licensed Practical Nursing (RN/LPN), Home Health Aid Basic and Extended (HHA), Registered Nursing – Brief first visit of day and Brief Second or More Visit of Day, and telehealth. LTHH rates are based on the Department's fee-schedule. During the FY 2020-21 Legislative Session, LTHH services received a 1.00% across the board rate decrease effective July 1, 2020.

All but one of the services in LTHH are forecasted individually using the average monthly service utilizers, the average units per utilizer, and the rate. The rate is assumed to be constant beyond the current year legislative rate increases. Due to low utilization, telehealth is forecasted by total expenditure.

# LTHH Trends and Justifications

Service	Average Monthly Utilizer Trend Selection	Average Units Per Client Trend Selection
Home Health Aid Basic	FY 2020-21: 5.80%	FY 2020-21: 0.80%
	FY 2021-22: 5.80%	FY 2021-22: 2.80%
	FY 2022-23: 5.80%	FY 2022-23: 2.70%
Home Health Aid Extended	FY 2020-21: 6.25%	FY 2020-21: -1.63%
	FY 2021-22: 3.12%	FY 2021-22: 0.00%
	FY 2022-23: 3.11%	FY 2022-23: 0.00%
Registered Nursing/Licensed Practical	FY 2020-21: 3.71%	FY 2020-21: -1.64%
Nurse	FY 2021-22: 0.00%	FY 2021-22: 0.00%
	FY 2022-23: 0.00%	FY 2022-23: 0.00%
RN Brief First of Day	FY 2020-21: 5.50%	FY 2020-21: -1.80%
,	FY 2021-22: 0.00%	FY 2021-22: 0.00%
	FY 2022-23: 0.00%	FY 2022-23: 0.00%
RN Brief Second or more	FY 2020-21: 0.00%	FY 2020-21: 1.87%
	FY 2021-22: 0.00%	FY 2021-22: 0.00%
	FY 2022-23: 0.00%	FY 2022-23: 0.00%
Physical (PT)	FY 2020-21: 10.08%	FY 2020-21: 1.96%
	FY 2021-22: 5.04%	FY 2021-22: 0.00%
	FY 2022-23: 5.04%	FY 2022-23: 0.00%
Occupational (OT)	FY 2020-21: 13.49%	FY 2020-21: -0.95%
	FY 2021-22: 13.48%	FY 2021-22: 0.00%
	FY 2022-23: 6.76%	FY 2022-23: 0.00%
Speech/Language Therapy (S/LT)	FY 2020-21: 21.61%	FY 2020-21: 2.38%
1 3 6 7 7 (1 1 2 )	FY 2021-22:10.80%	FY 2021-22: 0.00%
	FY 2022-23: 10.80%	FY 2022-23: 0.00%

#### **Home Health Aid Basic and Home Health Aid Extended:**

Average utilizers per month for HHA Basic and Extended have steadily increased since FY 2012-13, with a large increase in FY 2017-18 and continued growth in FY 2019-20. The Department believes that this trend will continue to increase but is assuming a steady level of growth.

FY 2019-20 units per clients included a 53rd payment week and because of this the trend appears to be lower in FY 2020-21; because of the additional payment period in the last fiscal year. HHA Basic units per utilizer growth has been historically positive which the Department continued in the current forecast. HHA Extended units per utilizer decreased significantly since FY 2017-18, as a result, the Department decreased the FY 2020-21 trend to reach a more normal level and assumed 0.00% growth from there.

### **Registered Nursing/Licensed Practical Nurse:**

In FY 2019-20 average monthly utilizers decreased the Department believes that average monthly client count is increasing due to PARs for this service being turned off and applied a positive trend of 3.71% followed by a trend of 0.00% assuming growth is leveling off.

FY 2019-20 units per clients included a 53rd payment week and due to this, the trend appears to be lower in FY 2020-21; because of the additional payment period in the last fiscal year. The Department applied a small negative trend of -1.64% to get to a more normal unit amount and assumed 0.00% growth from there.

### RN Brief First of Day and RN Brief Second or more:

For RN Brief 1st Visit of Day, the Department chose a trend of 5.50% for average monthly utilizers. There was a large increase in the number of utilizers because of the claims system implementation in FY 2017-18 followed by a large decrease in FY 2018-19 and an increase in FY 2019-20. The Department assumes client count will return to a more normal growth rate. Utilizers for Second or More Visit of the day had a slight positive growth occur in the last fiscal years. The Department assumed this trend would continue in the request and out years.

FY 2019-20 units per clients included a 53rd payment week and because of this the trend appears to be lower in FY 2020-21; because of the additional payment period in the last fiscal year. The Department assumes that unit growth has leveled off and applied a small negative trend followed by a trend of 0.00%. The Department assumes the units per utilizer will recover to a more normal level and assumed a small decrease in FY 2020-21 to reach that level. After the recovery, it is assumed growth would be 0.00% as the need per client should be steady.

#### Physical (PT), Occupational (OT), and Speech/Language Therapy (S/LT):

Growth in all the therapy services has been high over the past few fiscal years. The Department has seen significant growth in average monthly utilizers with most services in the second half probably due to increased telehealth options during the COVID-19 pandemic. The Department selected positive trends for the current year and expected strong growth in the out-years.

FY 2019-20 units per clients included a 53rd payment week and due to and because of this the trend appears to be lower in FY 2020-21. The Department believes that the units per client is relatively stable and selected trends that maintained current client utilization levels.

Legislative Impacts and Bottom-Line Adjustments

To account for programmatic changes not incorporated in the prior average monthly enrollment and utilization/cost per client trend factors, the Department adds total-dollar bottom-line impacts to projected enrollment or expenditure. For complete information on legislative impacts, see section V, Additional Calculation Considerations. The following impacts have been included in the Request for Long-Term Home Health:

### **Expenditure**

- Telehealth Expenditure Adjustment: Due to small cell sizes that prevent the Telehealth forecast from using the same methodology as the other LTHH services, expenditure for Telehealth is adjusted via bottom line impact.
- FY 2015-16 R-7 "Participant Directed Programs Expansion": The Department's FY 2015-16 R-7 request expands access to Consumer Directed Attendant Support Services (CDASS) in the Supported Living Services (SLS) Home- and Community-Based Services (HCBS) waiver. The savings to LTHH are expected from the clients who currently utilize LTHH services in the SLS waiver, who would then shift into using CDASS services instead. CDASS was implemented into SLS effective August 2018 and all 1915(i) clients were transferred to other waivers by February 2019.
- FY 2018-19 R-08 Assorted Medicaid Savings Initiatives PAR savings: This initiative creates a requirement that adult Long-Term Home Health Services require review and authorization by the Department's utilization management vendor before a client receives services. This will ensure the Department is not paying for duplicative or unnecessary services and will drive savings.

### Enrollment

• N/A

#### EXHIBIT H - LONG-TERM CARE AND INSURANCE SERVICES

This section is for a series of services that, for a variety of reasons, are individually computed and then allocated to the eligibility categories based on experience. Those services are:

- Class I Nursing Facilities
- Class II Nursing Facilities
- Program of All-Inclusive Care for the Elderly (PACE)
- Supplemental Medicare Insurance Benefits
- Health Insurance Buy-In

### Summary of Long-Term Care and Insurance Request

This exhibit summarizes the total requests from the worksheets within Exhibit H.

#### Class I Nursing Facilities

Class I Nursing Facility costs are a function of the application and interpretation of rate reimbursement methodology specified in detail in State statute, the utilization of the services by Medicaid clients, and the effect of cost offsets such as estate and income trust recoveries. The traditional strategy for estimating the cost of these services is to predict: 1) the costs driven by the estimated Medicaid reimbursement methodology (the weighted average per diem allowable Medicaid rate and the estimated average patient payment), 2) the estimated utilization by clients (patient days without hospital backup and out of state placement), and 3) the estimated cost offsets from refunds and recoveries and the expected adjustments due to legislative impacts.

Historically, patient days have declined since FY 1999-00, although caseload in the Department's Adults 65 and Older, Disabled Adults 60 to 64, and Disabled Individuals to 59 eligibility categories has increased by approximately 45.2% between FY 1999-00 and FY 2016-17. This is due to Department efforts to place clients in Home- and Community-Based Services (HCBS) and in the Department's Program of All-Inclusive Care for the Elderly (PACE). Recent history makes it difficult for the Department to anticipate the behavior of patient days; patient days had been trending upward but changed to a slight negative trend in FY 2011-12 through FY 2013-14. Most recently, patient days increased in FY 2014-15, and have continued to increase through FY 2016-17, while leveling off in FY 2017-18 and FY 2018-19 and FY 2019-20; the Department is closely monitoring this growth.

Patient payment is primarily a function of client income. As clients receive cost-of-living adjustments in their supplemental security income, their patient payment has increased accordingly.

The methodology for the Class I request in Exhibit H is as follows<sup>6</sup>:

- The estimate starts with the estimated per diem allowable Medicaid rate for core components in claims that will be incurred in FY 2020-21.
- Using historic claims data from the Medicaid Management Information System (MMIS), the Department calculates the estimated patient payment for claims that will be incurred in FY 2020-21. The difference between the estimated per-diem rate for core components and the estimated patient payment is an estimate of the amount the Department will reimburse nursing facilities per day in FY 2020-21 for core components.
- Using the same data from above, the Department calculates the estimated number of patient days for FY 2020-21.
- The product of the estimated Medicaid per diem reimbursement rate for core components and the estimated number of patient days yields the estimated total reimbursement for core components in claims incurred in FY 2019-20.
- Of the estimated total reimbursement for claims incurred in FY 2020-21, only a portion of those claims will be paid in FY 2019-20. The remainder is assumed to be paid in FY 2020-21. The Department estimates that 92.89% of claims incurred in FY 2019-20 will also be paid during FY 2020-21. Footnote 4 details the calculation of the percentage of claims that will be incurred and paid in FY 2020-21.
- During FY 2020-21, the Department will also pay for some claims incurred during FY 2019-20 and prior years ("prior year claims"). In Footnote 5, the Department applies the percentages calculated in Footnote 4 to claims incurred during FY 2019-20 to calculate an estimate of outstanding claims to be paid in FY 2020-21.
- The sum of the current year claims and the prior year claims is the estimated expenditure in FY 2020-2, prior to adjustments.
- Other non-rate factors are then added or subtracted from this estimate. These include the hospital backup program, recoveries from Department overpayment reviews, and program reductions. Information and calculations regarding these adjustments are contained in Footnotes 6 and 7.
- Legislative impacts are added as bottom-line adjustments. For FY 2020-21, this includes HB 13-1152, which permanently continued the HB 12-1340 rate reduction effective July 1, 2013.

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<sup>&</sup>lt;sup>6</sup> For clarity, FY 2020-21 is used as an example. The estimates for FY 2021-22 and FY 2022-23 are based on the estimate for FY 2020-21, and follow the same methodology.

• Once the "non-rate" factors are estimated, the non-rate adjustments are added into the current estimate to yield the total estimated FY 2020-21 expenditure.

### Legislative Impacts and Bottom-Line Adjustments

To account for programmatic changes that are not incorporated in the prior per capita or trend factors, the Department adds total-dollar bottom-line impacts to the projected expenditure. For complete information on legislative impacts, see section V, Additional Calculation Considerations. The following impacts have been included in the FY 2020-21, FY 2021-22, and FY 2022-23 calculations for Class I Nursing Facilities:

- Expenditure for the Hospital Backup Program are included as bottom-line adjustments for FY 2020-21 through FY 2022-23. Please refer to Footnote 6 on page EH-7 for more detail. The Department increased estimates from the November forecast based on YTD actuals and recent growth trends.
- The Department recovers funds from in-house audits of nursing facilities; the estimated amount of recoveries is included as a bottom-line impact for FY 2020-21, FY 2021-22, and FY 2022-23. Footnote 7 on page EH-7 contains additional detail about these recoveries.
- HB 13-1152 extended the 1.5% nursing facility per diem rate cut of HB 12-1340 permanently, effective July 1, 2013.
- The JBC appropriated funding for the Department of Local Affairs to increase housing vouchers for people transitioning from a nursing home to a community setting. The increase in housing vouchers is projected to decrease nursing home costs by lowering patient days and utilization of nursing home services. The savings from this increase in housing vouchers are included as bottom-line adjustments for FY 2020-21 and beyond.
- HB 20-1362 Limits annual increase in the general fund share of per diem rates to nursing facilities to 2% for 2020-21 and 2021-22 state fiscal years.
- SB 20-212: The bill expands Medicaid reimbursement for telehealth services and allowed for LTHH supervisory visits to be provided in a telehealth setting instead of in-person. The Department chose to incorporate the increase in utilization due to the rule change through trends in nursing services forecast instead of a bottom line impact.

### Incurred-But-Not-Reported Adjustments

As part of the estimates for the allowable per-diem rate, patient payment, and patient days, the Department utilizes the most recent five years of incurred claims to calculate estimates for the current year and the request year. However, because not all claims which have been incurred have been reported, the Department must adjust the incurred data for the expected incidence of claims which will be paid

in the future for prior dates of service. Without such an adjustment, the claims data would appear to drop off at the end of the year, erroneously introducing a negative trend into the estimate.

The Department uses an extensive model that examines past claims by month of service and month of payment to estimate the claims that will be paid in the future. This is known as an "Incurred But Not Reported" (IBNR) adjustment. IBNR adjustments analyze the prior pattern of expenditure (the lag between when past claims were incurred and when they were paid) and applies that pattern to the data. This enables the Department to use its most recent data, even where there is a significant volume of claims which have yet to be paid.

Separate IBNR adjustment factors are calculated for each month, based upon the number of months between the time claims in that month were incurred and the last month in the data set. These adjustments are applied to the collected data, and the Department calculates the estimate of nursing facility expenditure using the methodology described above. This adjustment is most apparent in the Department's estimate of claims paid in the current year for current year dates of service, particularly Footnotes 4 and 5 of Exhibit H, page EH-6. In these footnotes, the Department uses the calculated monthly IBNR adjustment factors to estimate the percentage of claims in FY 2019-20 that will be paid in FY 2020-21 and the percentage of claims incurred in FY 2020-21 that will be paid in FY 2021-22 and subsequent years. The Department applies the same factor to the FY 2021-22 and FY 2022-23 estimates.

The Department uses the IBNR adjustment calculation for the November 2020 Request using paid claims data through April 2019. For reference, the following table lists IBNR factors calculated for previous Change Requests and compares them with the current IBNR factor.

Date of Change Request:	IBNR Factor:
November 2016	92.88%
February 2017	93.17%
November 2017	93.16%
February 2018	92.71%
November 2018	92.06%
February 2019	92.55%
November 2019	98.57%
February 2020	93.09%
November 2020	92.89%

#### Patient Days Forecast

The Department observed a slight decrease in patient days in FY 2020-21. The Department slightly lowered its assumptions in nursing facility utilization for the patient days forecast. The Department is continuing to expect slow to modest growth in patient days based on a growing elderly population. The Department used fiscal year-to-date actual patient days to inform its forecast for the remainder of the year.

#### Patient Payment Forecast Model

The Department utilizes a seasonally adjusted model that accounts for cost of living adjustment (COLA). Neither the current period nor the previous period are relevant to this forecast. The only indicators of patient payment are the number of days in the month and the COLA increase for a given year. For this reason, neither a linear nor an autoregressive model was used, as they did not add value to the forecast.

The Department expects patient payments to increase steadily based on recent increases in COLA and updated patient payment information from FY 2019-20 YTD.

FY 2014-15 SB 14-130 raises the basic minimum payable for personal needs to any recipient admitted to a nursing facility or intermediate care facility for individuals with intellectual disabilities from \$50.00 to \$75.00 monthly; this increase was effective as of July 1, 2014. This amount increases by 3.0% annually on January 1<sup>st</sup> of each year.

#### Class I Nursing Facilities - Cash-Based Actuals and Projections by Aid Category

For comparison purposes to other service categories, this exhibit lists prior-year expenditure along with the projected expenditure from page EH-1. Estimated totals by aid category are split proportionally to the most recent year of actual expenditure. Additionally, the Department calculates per capita costs for each year. Supplemental payments made to Class I Nursing Facilities through the Nursing Facility Provider Fee program are not included in total expenditure.

Totals for each aid category are used to calculate total expenditure by aid category in Exhibit E, and total per capita by aid category in Exhibit C.

### Class II Nursing Facilities

This service category is for specialized private nursing facility care for developmentally disabled clients, which was the focus of the Department of Human Services' initiative to deinstitutionalize these clients by placing them in appropriate care settings. The deinstitutionalization strategy was completed in April of FY 1997-98. There is currently one Class II Nursing Facility provider in Colorado: Bethesda Lutheran Communities (Bethesda). Bethesda operates 5 facilities with a total of 27 beds. There are no plans to eliminate this facility, as it functions more like a group home than an institutional facility. Class II nursing facilities are authorized to receive an annual cost-based rate adjustment, like class I nursing facilities. Due to the opening of a new facility in July 2016, there was an increase in cost over FY 2016-17. For FY 2020-21 the Department increased the forecast due to higher than anticipated cost per utilizer and increased the forecast in each of the forecast years as the Department believes this growth will continue at a historical rate.

### Program of All-Inclusive Care for the Elderly (PACE)

The Program of All-Inclusive Care for the Elderly (PACE) is a Medicare/Medicaid managed care system that provides health care and support services to persons 55 years of age and older. The goal of PACE is to assist frail individuals to live in their communities as independently as possible by providing comprehensive services depending on their needs. PACE is only used by Adults 65 and Older (OAP-A), Disabled Adults 60-64 (OAP-B), and Disabled individuals to 59 (AND/AB). PACE rates are amended once per year, generally on July 1 of each year.

Exhibit H6 contains two distinct summary measures by fiscal year: average monthly enrollment and average cost per enrollee. The average monthly enrollment is based on the number of distinct clients for whom capitations were paid to PACE providers in each fiscal year, as determined by claims information from the Medicaid Management Information System (MMIS). The average cost per enrollee is the total expenditure divided by the average monthly enrollment for each fiscal year.

The Department has added several PACE providers over the last ten years. Senior Community Care of Colorado (Volunteers of America) began serving clients on August 1, 2008, in Montrose and Delta counties. Rocky Mountain Health Care began serving clients on December 1, 2008, in El Paso County. InnovAge (formerly Total Long-Term Care), the Department's oldest PACE organization, opened a facility in late 2009 to serve clients in Pueblo, and another facility opened in Loveland in November 2015. Most recently, TRU Community Care opened in February 2017 and serves Boulder and Weld counties. One new facility, HopeWest, is expected to open in Spring of 2021 and will serve clients in Mesa county.

Expenditure estimates for PACE for FY 2020-21, FY 2021-22, and FY 2022-23 are the product of two pieces: projected enrollment and cost per enrollee. PACE enrollment was estimated by taking actual enrollment census numbers reported by PACE facilities and applying

the average growth in enrollment over the last six months and continuing that trend through FY 2020-21, FY 2021-22, and FY 2022-23. This method was used to estimate future enrollment on an aggregate-provider by-eligibility-type basis. Enrollment caps are not anticipated to limit growth for the forecast period because of the way PACE services are provided: that is, clients are not full-time residents of PACE facilities. Systems issues since CY 2013 have resulted in clients who are eligible for Medicaid and receiving PACE services showing up in the MMIS as not having an enrollment span in the program, causing a delay in monthly capitation payments for these clients. The Department is closely monitoring these systems issues going forward. Actual enrollment in PACE programs is higher than the enrollment forecasted in the February 20201 request, and as a result, the enrollment forecast in the November 2021 request has increased from the February 2020request for the request year and out years.

Per-enrollee costs for FY 2020-21 are determined by cross-walking the actual FY 2019-20 rates net of patient payment for PACE services with an eligibility-type distribution estimate derived from FY 2019-20 enrollment projections. It was previously assumed that per enrollee costs for FY 2019-20 would remain the same as they were in the February request but new rates for FY 2019-20 were determined in August. To account for this, the Department calculated the per-enrollee cost based on two months at the rate stated in the February forecast and at ten months for the remainder of the fiscal year at the new rates. As such, per enrollee costs only represent an estimate to the extent that the exact eligibility type and exact provider distributions for FY 2019-20 are unknown.

SB 19-209 repealed previous statute directing the Department to apply a grade of membership method in determining the upper payment limit methodology. It also requires the Department to meet with PACE organizations to negotiate an appropriate contracted rate for PACE program services for the FY 2020-21 fiscal year. Until the new rates are negotiated, the Department will continue to use the current rate setting methodology, without the Grade of Membership methodology.

The Department notes that the table showing the average cost per enrollee on page EH-15 represents the total net amount spent in a fiscal year on PACE programs divided by the average number of monthly capitations paid in that specific year. These figures include retroactive capitations and recoupments and do not completely reflect the cost of services received in that fiscal year. For example, the average cost per enrollee in FY 2014-15 factors in approximately \$12.9 million in retroactive payments, while the average cost per enrollee in FY 2015-16 encompasses approximately \$5.4 million in recoupments.

### Supplemental Medicare Insurance Benefit (SMIB)

The Supplemental Medicare Insurance Benefit (SMIB) consists of two parts: Medicare Part A, the insurance premium for hospital care, and Medicare Part B, the insurance premium for Medicare-covered physician and ambulatory care services. Only premiums are paid in this service category; co-payments and deductibles are paid under Acute Care. Medicaid clients who are dual-eligible (clients who have both Medicaid and Medicare coverage) or Partial Dual Eligible receive payment for Medicare Part B and, in some cases, Medicare Part

A. The Partial Dual Eligible aid category has two distinct groups: Qualified Medicare Beneficiaries and Specified Low-Income Medicare Beneficiaries. The Part A premium payments are made for a small subset of the Qualified Medicare Beneficiary eligibility group only. The Supplemental Medicare Insurance Benefit service category includes the estimate of payments for both Part B for all Medicare beneficiary client types and Part A payments for Qualified Medicare Beneficiary clients. Premium payments for Medicare clients who do not meet the Supplemental Security income limit do not receive a federal match.

The federal law that requires Medicaid to pay the Medicare Part B premium for qualifying individuals whose income is between 120% and 135% of the federal poverty level was scheduled to expire September 30, 2003. However, eligibility was extended. This population was referred to as "Medicare Qualified Individual (1)." Legislation for the second group, referred to as "Medicare Qualified Individual (2)," comprised of individuals whose income was between 135% and 175% of the federal poverty level and expired April 30, 2003. Formerly, Medicaid paid the portion of the increase in the Part B premium due to the shift of home health services from Medicare Part A to Part B insurance. Qualified Individuals are 100% federally funded, subject to an annual cap.

Supplemental Medicare Insurance Benefit (SMIB) expenditure is related to two primary factors: the number of dual-eligible clients and the increase in the Medicare premiums. For reference, the historical increases in the Medicare premiums are listed in the table below:<sup>8</sup>

**History of Medicare Premiums** 

	Thistory of vicultary remains										
Calendar Year	Part A	% Change	Part B	% Change							
2015	\$407.00	-4.46%	\$104.90	0.00%							
2016	\$411.00	0.98%	\$123.70	17.92%							
2017	\$413.00	0.49%	\$134.00	8.33%							
2018	\$422.00	2.18%	\$134.00	0.00%							
2019	\$437.00	3.55%	\$135.50	0.75%							
2020	\$458.00	4.81%	\$144.60	6.72%							

These premiums reflect the standard Medicare premiums paid by most Medicare recipients or by the Department on their behalf. Clients with between 30 and 39 work quarters of Medicare Covered Employment require a higher Part A premium. Additionally, some clients

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<sup>&</sup>lt;sup>7</sup> Most Medicare beneficiaries do not make a Part A payment, because they have contributed to Medicare for 40 or more quarters during their working life. The Department only subsidizes Part A payments for Qualified Medicare Beneficiaries who do not meet the 40-quarter requirement.

<sup>&</sup>lt;sup>8</sup> Premium information taken from the Centers for Medicare and Medicaid Services, <a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/ReportsTrustFunds/Downloads/TR2018.pdf">https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/ReportsTrustFunds/Downloads/TR2018.pdf</a> Tables V.E1 and IV.B1.

pay higher Part B premiums based on higher adjusted gross income; however, the Department is only required to pay the base premium cost.

To forecast FY 2020-21, the Department first inflates the estimated expenditure from FY 2019-20 by the estimated caseload trend for FY 2020-21, as reported in Exhibit B, along with the anticipated growth in Medicare Part B Premiums. The forecast of FY 2021-22 expenditure utilizes the same methodology as the forecast of FY 2020-21. In this request, the Department assumes that the Medicare Part B premium will be \$144.60 in CY 202020, \$153.30 in CY 2021, \$157.70 in CY 2022, and \$166.70 in CY 2023.

### Health Insurance Buy-In (HIBI)

The Medicaid program purchases the premiums for private health insurance for individuals eligible for Medicaid if it is cost-effective. This is known as the Health Insurance Buy-In (HIBI) program, permitted under 25.5-4-210, C.R.S. (2013). The Department found that, with rare exceptions, it was no longer cost effective to purchase commercial insurance for clients in the Adults 65 and Older (OAP-A) aid category. Instead, the majority of expenditure was shifted to Disabled Individuals to 59 (AND/AB) for clients who do not qualify for the Medicare Part D benefit.

The Department estimates expenditure based directly on the contractor's program enrollment estimates to calculate provider and premiums payments for clients enrolled in HIBI.

### EXHIBIT I - SERVICE MANAGEMENT

This service group includes administrative-like contract services within the Medical Services Premiums budget. The group is comprised of Single Entry Point agencies, disease management, and administrative fees for prepaid inpatient health plans.

#### Summary of Service Management

This exhibit summarizes the total requests from the worksheets within Exhibit I.

### Single Entry Points

Single entry point agencies (SEPs) were authorized by HB 91-1287. Statewide implementation was achieved July 1, 1995. The single entry point system was established for the coordination of access to existing services and service delivery for all long-term care clients to provide utilization of more appropriate services by long-term care clients over time and better information on the unmet service needs

of clients, pursuant to section 25.5-6-105, C.R.S. (2013). A SEP is an agency in a local community through which persons 18 years or older can access needed long-term care services.

The SEP is required to serve clients of publicly funded long-term care programs including nursing facility care, HCBS-LTSS waivers, long-term home health care, home care allowance, alternative care facilities, adult foster care, and certain in-home services available pursuant to the federal Older Americans Act of 1965.

The major functions of SEPs include providing information, screening and referral, assessing clients' needs, developing plans of care, determining payment sources available, authorizing provision of long-term care services, determining eligibility for certain long-term care programs, delivering case management services, targeting outreach efforts to those most at risk of institutionalization, identifying resource gaps, coordinating resource development, recovering overpayment of benefits and maintaining fiscal accountability. SEPs also serve as the utilization review coordinator for all community based long-term care services.

The Department pays SEPs a case-management fee for each client admitted into a community-based service program. SEPs also receive payment for services provided in connection with the development and management of long-term home health prior authorization requests for work associated with client appeals and for utilization review services related to HCBS and nursing facilities.

Annual financial audits are conducted by the Department to verify expenditures were made according to the contract scope of work and to assure SEP compliance with general accounting principles and federal Office of Management and Budget (OMB) circulars. If the audit identifies misused funds, the amount misused is collected through a recovery order.

Effective with the July 1, 2020 the Department revised the methodology used to calculate this portion of the Request. Because of the administrative nature of the service, SEPs were paid through a fixed contract amount for each year. However, the Department has developed and implemented a rates methodology that pays the SEPs for administrative deliverables as well as for Case Management functions.

Therefore, the Department's request includes an increase to SEP contracts based on projected FY 2019-20 utilization and applying the new rate methodology. The requested increase is based on the expected increase in HCBS-LTSS waiver enrollment, as determined by average monthly enrollment. This figure is therefore consistent with the caseload growth of the HCBS-LTSS waivers in Medical Services Premiums. The Department believes that growth in enrollment is a good proxy for growth in SEP caseload.

The Department is expecting to see recoveries from SEPs due to previous overpayments. The expected recoveries have been incorporated into Exhibit I2 after the base contract amount. The recoveries will affect total expenditure on SEPs but will not impact the estimated

base contracts amount for each fiscal year. The Department is only expecting recoveries in FY 2019-20 and FY 2020-21 as the new rate methodology prevents over-allocation of funds.

The Department incorporated the Across the Board 1.00% rate decrease into the rates that were used to project FY 2020-21 expenditure and did not include the rate decrease in the bottom line impacts.

Legislative Impacts and Bottom-Line Adjustments

To account for programmatic changes not incorporated in the prior per capita or trend factors, the Department adds total-dollar bottom-line impacts to the projected expenditure.

• SB 16-192/FY 2018-19 R-17: "Single Assessment Tool" – SB 16-192 requires the state to select a needs assessment tool for persons receiving Long-Term Services and Supports, including persons with intellectual and developmental disabilities. FY 2020-21 costs to CLTBC result from reassessing a sample of Long-Term Services and Supports members in the pilot program. Costs in the affected years include reassessing every Long-Term Services and Supports members with the selected needs assessment tool and include 3 months of costs in FY 2020-21 and the remaining nine months in FY 2021-22.

# Disease Management

Beginning in July 2002, the Department implemented several targeted disease management pilot programs, as permitted by HB 02-1003. Specifically, the Department was authorized "to address over- or under-utilization or the inappropriate use of services or prescription drugs, and that may affect the total cost of health care utilization by a Medicaid recipient with a particular disease or combination of diseases" (25.5-5-316, C.R.S. (2013)). Initially, pilot programs were funded solely by pharmaceutical companies; the programs began and ended at different times between July 2002 and December 2004.

Because of the pilot programs, the Department entered into permanent contracts with two disease management companies for two health conditions: clients with asthma and clients with diabetes. Effective June 30, 2009, the Department discontinued the five specific Disease Management programs. The remaining funds were applied toward services related to the treatment of the health conditions specified in 24-22-117(2)(d)(V), C.R.S. (2013) (further described in Exhibit A).

The only remaining expenditure in the Disease Management program is for the tobacco quit line, administered by the Department of Public Health and Environment (DPHE). The Department pays for the share of costs for the quit line related to serving Medicaid

members. The February 2020 request aligns the Department's projected expenditure with the reappropriated funds in DPHE's budget that are funded by Medicaid.

#### Accountable Care Collaborative

In FY 2010-11, the Department implemented the Accountable Care Collaborative (ACC). The monthly management fees paid to the Regional Accountable Entities (RAEs) that receive service FMAP and that are incorporated in the ACC exhibit.

The ACC is a Department initiative requested originally in FY 2009-10 DI-6 "Medicaid Value Based Care Coordination Initiative" and revised in FY 2010-11 S-6/BA-5 "Accountable Care Collaborative." The Department enrolled the first clients into the program in May 2011 and enrollment increased to 60,000 by December 2011. Enrollment expanded to 123,000 clients in May 2012, which was requested in FY 2011-12 BA-9 "Medicaid Budget Balancing Reductions." The cost savings estimated for this program are included in Acute Care; please see Exhibit F and Section V for more information on its impact to Acute Care. The monthly management fees are estimated in the Accountable Care Collaborative exhibit.

The Department implemented Phase II of the ACC, which was requested in the FY 2017-18 R-6 "Delivery System and Payment Reforms" request approved in HB 17-1353 "Implement Medicaid Delivery & Payment Initiatives". Phase II of the ACC includes mandatory enrollment of the Medicaid population into the ACC, which would only exclude clients enrolled in a managed care program such as a health maintenance organization or the Program of All-Inclusive Care for the Elderly (PACE) and the Non-Citizens-Emergency Services and Partial Dual Eligibles eligibility categories. The ACC Phase II also combines the RCCOs and Behavioral Health Organizations (BHOs) into a single entity called a Regional Accountable Entity (RAE). RAEs will be responsible for further integrating behavioral and physical health care to achieve improved outcomes and cost reduction. PMPM for the RAEs will be \$15.50, with a portion of the PMPM pushed through from the RAEs to PCMPs. RAEs will receive capitated payments for managed Behavioral Health just as BHOs did.

### Legislative Impacts and Bottom-Line Adjustments

The November 2016 request included a bottom-line impact to account for movement of clients from the PMPM-based ACC to the new Kaiser-Access health maintenance organization (HMO), a pilot payment reform initiative under HB 12-1281. This bottom-line impact was removed in the February 2017 forecast with the assumption that the shift of clients to Kaiser-Access was already accounted for in the base FY 2016-17 ACC enrollment trends. On June 30, 2017, the Kaiser-Access HMO ended. The impact of this change is accounted for directly in the forecast of expected ACC enrollment in FY 2017-18, and not as a bottom-line impact.

#### Prepaid Inpatient Health Plan Administration

Prepaid inpatient health plans (formerly known as Administrative Service Organizations) are an alternative to traditional health maintenance organizations. They offer the case management and care coordination services of a health maintenance organization for a fixed fee. The organizations do this by not taking on the risk traditionally assumed by health maintenance organizations. The Department began using this type of organization to deliver health care to Medicaid clients during FY 2003-04. In FY 2005-06, the Department ended its contract with Management Team Solutions. Until FY 2009-10, the Department contracted with only one prepaid inpatient health plan, Rocky Mountain Health Plans. The Department then contracted with three additional prepaid inpatient health plans in FY 2009-10. These included Colorado Access and Kaiser Foundation Health Plan, jointly part of the Colorado Regional Integrated Care Collaborative (CRICC), and Colorado Alliance and Health Independence (CAHI).

Currently, there are no prepaid inpatient health plans, as Rocky Mountain Health Plans ended in November of 2014. The exhibit contains historical information only.

### EXHIBIT J - HEALTHCARE AFFORDABILITY AND SUSTAINABILITY FEE FUNDED POPULATIONS

### Summary of Cash Funded Expansion Populations

These exhibits summarize the source of funding for the Health Care Affordability Act of 2009 cash-funded expansion populations. These estimates are incorporated into the Calculation of Fund Splits in Exhibit A.

### Healthcare Affordability and Sustainability Fee Fund

HB 09-1293 originally established the Hospital Provider Fee Fund to provide for the costs of certain expansion populations on Medicaid, outlined below. SB 17-267 replaced the Hospital Provider Fee Fund with the Healthcare Affordability and Sustainability (HAS) Fee Fund, which provides for the costs of the following expansion populations that impact the Medical Services Premiums budget:

### MAGI Parents/Caretakers 69% to 133% FPL

The Health Care Expansion Fund originally provided funding for parents of children enrolled in Medicaid from approximately 24% to at least 60% of the federal poverty level. This expansion population receives standard Medicaid benefits. SB 13-200 extended this eligibility through 133% FPL, effective July 1, 2013; the Hospital Provider Fee Fund had funded this population up to 100% FPL in the interim before the Affordable Care Act's 100% enhanced federal match began and the population expanded to 133% FPL on January 1, 2014. Beginning January 1, 2017, the enhanced federal match fell to 95%. On January 1, 2018, it fell to 94%, then on January 1, 2019,

it fell to 93%, and on January 1, 2020 it fell to 90%, where it will remain. Effective July 1, 2017, this population is financed with the HAS Fee for the State share of expenditure.

For caseload estimates and methodology, please see the Acute Care and caseload sections of this narrative.

#### MAGI Adults

With the advent of SB 13-200, effective July 1, 2013, MAGI Adults are covered up to 133% FPL as of January 1, 2014. Similar to MAGI Parents/Caretakers 69% to 133% FPL, the Hospital Provider Fee Fund had funded this population in the interim before the population expanded and the enhanced federal match began on January 1, 2014. Beginning January 1, 2017, the enhanced federal match fell to 95%. On January 1, 2018, it fell to 94%, and then to 93% on January 1, 2019 and 90% on January 1, 2020, where it will remain. Effective July 1, 2017, the State share of expenditure for this population is financed with the HAS Fee. Clients in this category are not eligible to receive HCBS Waiver services; in cases where it appears that these clients have received waiver services, this expenditure receives the standard match rate and not the expansion match rate. This incidence can occur for numerous reasons, including clients awaiting disability redeterminations that have caused them to be temporarily moved from their usual eligibility category to this one.

Currently, the Department uses historical actuals as a basis for projecting both caseload and per capita costs for this population.

### Non-Newly Eligibles

Medicaid expansion clients who were eligible for Medicaid prior to 2009 are not eligible for the enhanced expansion federal medical assistance percentage (FMAP) that began January 1, 2014. Clients who may be eligible for Medicaid through Home- and Community-Based Services waivers due to a disability are required to provide asset information to be determined eligible for Medicaid waiver services. With Medicaid expansion, clients who may have been eligible but did not provide asset information can still be eligible under different eligibility categories, such as MAGI Adults. It is difficult for the State to prove whether these clients would have been eligible for Medicaid services prior to 2009, had they provided their asset information at that time. For this reason, some clients under expansion categories are not eligible for the full enhanced expansion FMAP. Instead, with the approval of a resource proxy for the non-newly eligibles, 75% of expenditure receives expansion FMAP while the remaining 25% receives the standard FMAP, funded from the HAS Fee Fund. The Department has incorporated the resource proxy in this request.

## MAGI Parents/Caretakers 60% to 68% FPL

Historically, clients who fell under the Expansion Parents to 133% FPL eligibility category (any client over 60% FPL) were considered expansion clients and the State's share of funding was provided through the Hospital Provider Fee Fund. The MAGI conversion has resulted in some clients with over 60% FPL falling into the MAGI Parents/Caretakers 60% to 68% FPL category. The State share of funding for these clients comes from the HAS Fee Fund, effective July 1, 2017, in compliance with statute.

#### Continuous Eligibility for Children

HB 09-1293, the Colorado Health Care Affordability Act of 2009, established continuous eligibility for twelve months for children on Medicaid, even if the family experiences an income change during any given year, contingent on available funding. The Department implemented continuous eligibility for children in March 2014 and has the authority to use the HAS Fee Cash Fund to fund the state share of continuous eligibility for Medicaid children. Because this population is not an expansion population, it receives standard FMAP. Previously, the Department showed this adjustment in funding as a General Fund offset under Cash Funds Financing. Effective with the November 2016 request, the Department breaks this population out in its respective service categories in Exhibit J to better show the impact of continuous eligibility for children.

#### Medicaid Buy-in Fund

This fund is administered by the Department to collect buy-in premiums and support expenditure for the Buy-in for Individuals with Disabilities expansion population, as authorized by HB 09-1293.

#### Buy-in for Individuals with Disabilities

This expansion allows for individuals with disabilities with income up to 450% of the federal poverty level to pay premiums to purchase Medicaid benefits. Eligibility for the working adults with disabilities with income up to 450% of the FPL began in March 2012, with eligibility to children with disabilities with income up to 300% of the FPL following in June 2012. The Department does not have an implementation timeframe for non-working adults with disabilities at this time. The premiums from the Medicaid Buy-in fund are applied first, and then the remaining expenditure is split at standard medical FMAP as federal funds and HAS Fee Cash Fund. For more information on the funding detail for this population, see Calculation of Fund Splits under Exhibit A.

The Department uses historical actuals as a basis for projecting both caseload and per capita costs for this population.

### Hospital Supplemental Payments

The Department increases hospital payments for Medicaid hospital services through a total of five supplemental payments, three of which are paid out of Medical Services Premiums directly to hospitals, outside the Department's Medicaid Management Information System (MMIS). The purpose of these inpatient and outpatient Medicaid payments, Colorado Indigent Care Program (CICP) and Disproportionate Share Hospital (DSH) payments, and targeted payments is to reduce hospitals' uncompensated care costs for providing care for Medicaid clients and the uninsured and to ensure access to hospital services for Medicaid and CICP clients.

### Cash Fund Financing

An offset of \$15,700,000 is made from the HAS Fee to offset the loss of federal matching funds due to the decrease in certification of public expenditure for outpatient hospital services resulting from the authorization of the Hospital Provider Fee in HB 09-1293. The HAS Fee replaced the Hospital Provider Fee effective July 1, 2017, under SB 17-267.

#### EXHIBIT K - UPPER PAYMENT LIMIT FINANCING

The Upper Payment Limit (UPL) financing methodology accomplishes the following:

- Increases the Medicaid payment up to the federally allowable percentage for all public government owned or operated home health agencies and nursing facilities without an increase in General Fund.
- Maximizes the use of federal funds available to the State under the Medicare upper payment limit using certification of public expenditure.
- Reduces the necessary General Fund cost by using the federal funds for a portion of the State's share of the expenditure.

The basic calculation for UPL financing incorporates the difference between Medicare and Medicaid reimbursement amounts, with slight adjustments made to account for different types of services and facilities. Because actual Medicare and Medicaid reimbursement amounts are not yet known for the current fiscal year, prior year's data for discharges, claims, and charges are incorporated into the current year calculation.

Funds received through the UPL for home health services and nursing facilities are used to offset General Fund expenditure. These offsets started in FY 2001-02. Nursing facilities account for the larger portion of Upper Payment Limit funding. Home health has expenditure that is less by comparison and will experience little impact related to changes in reimbursement rates.

During FY 2007-08, the Department was informed by the Centers for Medicare and Medicaid Services (CMS) it would no longer be permitted to certify public expenditure for nursing facilities. However, in FY 2008-09, CMS and the Department came to an agreement which allowed for a certification process if it included a reconciliation process to provider cost. Therefore, the Department has included expenditure for certification of public nursing facility expenditure. Where applicable, the Department's estimates will be adjusted for any reconciliation performed.

In prior fiscal years, the Department could utilize UPL financing for outpatient hospital services as well. However, FY 2010-11 was the last year the Department could certify public expenditure for Outpatient Hospital services. This was due to HB 09-1293, which allowed the Department to use other State funds to draw federal funds to the upper payment limit.

#### EXHIBIT L - DEPARTMENT RECOVERIES

This exhibit displays the Department's forecast for estate recoveries, trust recoveries, and tort/casualty recoveries. Prior to FY 2010-11, these recoveries were used as an offset to expenditure in Medical Services Premiums. In compliance with State Fiscal Rule 6-6, the Department now reports the recovery types listed above as revenue. A new line of recoveries, Credit Balance and Audits, was added in the re-procured contract effective July 1, 2017. Based on the Department's FY 2018-19 R-08 "Assorted Medicaid Savings Initiatives", the Department was appropriated two FTE to increase staffing to review trust compliance issues and identify additional recoveries for the Department.

In addition to anticipated recovery revenue, Exhibit L also shows the anticipated contingency fee to be paid to contractors for recovery efforts. The Department's revised forecast for the activity reflects changes to contingency fee paid to the contractor as the contract was re-procured in FY 2017-18. Total revenue used to offset General Fund and federal funds, as shown in Exhibit A, is the sum of all recoveries less contingency fee paid to contractors. Recoveries made for dates of service under periods where the State received an enhanced federal match are given the same federal match as was applicable when the services were rendered.

### EXHIBIT M - CASH-BASED ACTUALS

Actual final expenditure data by service category for the past 9 years are included for historical purpose and comparison. This history is built around cash-based accounting, with a 12-month period for each fiscal year, based on paid date. This exhibit displays the estimated distribution of final service category expenditure by aid category from the estimated final expenditure by service categories. This is a necessary step because expenditure in the Colorado Operations Resource Engine (CORE) is not allocated to eligibility categories. The basis for this allocation is data obtained from the Department's Medicaid Management Information System (MMIS). This data provides detailed monthly data by eligibility category and by service category. From that step, the percent of the total represented by service-specific eligibility categories was computed and then applied to the final estimate of expenditure for each service category within each major service grouping: Acute Care, Community-Based Long-Term Care, Long-Term Care and Insurance (including subtotals for long-term care and insurance pieces separately), and Service Management.

The Colorado Operations Resource Engine (CORE) was implemented as a replacement for the Colorado Financial Reporting System (COFRS) in July 2014. Under COFRS, the previous fiscal year closed and the data became final at the beginning of the current fiscal

year. Under CORE, the previous fiscal year may not close until December of the current fiscal year. This introduces a small degree of uncertainty regarding actuals that was not present previously. The data presented in this request is based on information available as of August 4, 2020.

#### EXHIBIT N - EXPENDITURE HISTORY BY SERVICE CATEGORY

Annual rates of change in medical services by service group from FY 2008-09 through FY 2019-20 final actual expenditure is included in this Budget Request for historical purpose and comparison.

Effective with the November 1, 2010 Budget Request, the Department included a second version of this exhibit that adjusts for the payment delays imposed in FY 2009-10.

### EXHIBIT O - COMPARISON OF BUDGET REQUESTS AND APPROPRIATIONS

This exhibit displays the FY 2019-20 final actual total expenditure for Medical Services Premiums, including fund splits, the remaining balance of the FY 2019-20 appropriation, and the per capita cost per client. The per capita cost in this exhibit includes Upper Payment Limit and financing bills. This exhibit will not match Exhibit C due to these inclusions.

Additionally, this exhibit compares the Department's Budget Requests by broad service category to the Department's Long Bill and special bills appropriations for FY 2019-20 and 2020-21 in the chronological order of the requests/appropriations.

### EXHIBIT P - GLOBAL REASONABLENESS

This exhibit displays several global reasonableness tests as a comparison to the projection in this Budget Request. This exhibit is a rough projection utilizing past expenditure patterns as a guide to future expenditure. The Cash Flow Pattern is one forecasting tool used to estimate final expenditure on a monthly basis. It is not meant to replace the extensive forecasting used in the official Budget Request and is not always a predictor of future expenditure.

In places where the Department does not expect the prior year cash flow pattern to be relevant to the current year, the Department has adjusted based on knowledge of current program trends.

### EXHIBIT Q - TITLE XIX AND TITLE XXI TOTAL COST OF CARE

This exhibit details the total cost of Medicaid services, including lines outside of Medical Services Premiums, such as service expenses for Medicaid Behavioral Health, the Office of Community Living, Medicaid-funded Department of Human Services (DHS) services, and CHP+, separating Title XIX and Title XXI fund sources, to show the total services cost of providing care to clients. This exhibit also includes a total cost of care per capita exhibit for these combined services, including both Title XIX expenditure and Title XXI expenditure, by eligibility category. Effective with the November 2016 Budget Request, the Department added the request amounts for the current, request, and out years to this exhibit.

### EXHIBIT R - FEDERAL MEDICAL ASSISTANCE PERCENTAGE (FMAP)

This exhibit calculates expected FMAP for the current year, the request year, and the out year. CMS calculates FMAP using Bureau of Economic Analysis (BEA) personal income data and population data for the United States and each state. FMAP is calculated using the following formula:

$$FMAP_{state} = 1 - ((Per capita income_{state})^2/(Per capita income_{U.S.})^2 * 0.45)$$

where per capita incomes are based on a rolling three-year average and the FMAP for a given year is taken from the calculation from two years prior.

Due to the nature of this calculation, federal fiscal year FMAP for 2015-16 is calculated using data for calendar year 2013 at the latest. Therefore, the FY 2020-21 FMAP estimate is calculated using historic data from the BEA. This FMAP calculation would only change if the BEA restates its historical data, which can sometimes occur. However, CMS has informed the Department of the FMAP the Department is eligible for beginning October 1, 2018. Therefore, FMAP for FY 2019-20 and past time periods is not subject to change, as CMS does not restate announced FMAP even in cases where the BEA's updated data results in different calculations. The FY 2021-22 FMAP estimate is based on data after calendar year 2018, which the BEA does not forecast. The forecasts for personal income come from the legislative council's most recent forecast for the U.S. and Colorado, and the population forecasts come from the U.S. census for U.S. data and the Department of Local Affair's most recent forecasts for Colorado.

Forecasts throughout this request use these FMAP estimates rather than holding FMAP constant in the request and out years, as was previously done. In cases where a restatement of the BEA's data would result in a different FMAP than was previously anticipated, the Department would submit a supplemental funding request to account for the change in federal funds.

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#### Exhibit A - Summary of Request

	Exhibit A - Summar	y or request				
	Calculation of	Request				
	FY 2020	-21				
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2020-21 Appropriation						
HB 20-1360 FY 2020-21 Long Bill	\$9,043,278,907	\$2,350,087,446	\$84,491,394	\$1,208,691,357	\$43,625,726	\$5,356,382,984
HB 20-1362 Nursing Home Provider Rates	(\$7,011,151)	(\$3,288,230)	\$0	\$0	\$0	(\$3,722,921)
SB 20-212 FY 2020-21 Reimbursement for Telehealth Services	\$5,068,381	\$5,068,381	\$0	\$0	\$0	\$0
HB 20-1361 Dental Cap Reduction	(\$5,565,000)	(\$331,462)	\$0	(\$1,139,402)		(\$4,094,136)
HB 20-1386 HAS Fee Transfer for GF offset	\$0	(\$161,000,000)	\$0	\$161,000,000	\$0	\$0
HB 20-1385 Use of Increased Medicaid Match	(\$4,310,802)	(\$24,733,945)	\$0	\$24,733,945	(\$2,021,766)	(\$2,289,036)
FY 2020-21 Total Spending Authority	\$9,031,460,335	\$2,165,802,190	\$84,491,394	\$1,393,285,900	\$41,603,960	\$5,346,276,891
Total Projected FY 2020-21 Expenditure	\$9,013,582,295	\$2,016,886,492	\$84,491,394	\$1,298,793,137	\$41,554,478	\$5,571,856,794
FY 2020-21 Requested Change from Appropriation	(\$17,878,040)	(\$148,915,698)		(\$94,492,763)		\$225,579,903
Percent Change	-0.20%	-6.88%	0.00%	-6.78%	-0.12%	4.22%
	Calculation of	Request				
	FY 2021-	-22				
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2021-22 Appropriation Plus Special Bills						
FY 2020-21 Appropriation Plus Special Bills	\$9,031,460,335	\$2,165,802,190	\$84,491,394	\$1,393,285,900	\$41,603,960	\$5,346,276,891
Annualization of HB 20-1360 FY 2020-21 Long Bill	(\$31,984,781)	(\$2,417,691)	\$0	(\$4,139,192)	\$0	(\$25,427,898)
Annualization of HB 20-1362 Nursing Home Provider Rates Summary by Line Item	(\$9,495,334)	(\$4,965,012)	\$0	\$0	\$0	(\$4,530,322)
Annualization of HB 20-1384 Wraparound Services for Eligible At-Risk Children	(\$9,600,000)	(\$4,800,000)	\$0	\$0	\$0	(\$4,800,000)
Annualization of SB 20-212 FY 2020-21 Reimbursement for Telehealth Services	\$5,068,377	(\$1,489,630)	\$0	\$307,030	\$0	\$6,250,977
Annualization of HB 20-1361 Dental Cap Reduction	(\$5,565,000)	\$331,462	\$0	(\$1,802,326)	\$0	(\$4,094,136)
Annualization of HB 20-1386 HAS Fee Transfer for GF offset	\$0	\$161,000,000	\$0	(\$161,000,000)	\$0	\$0
Annualization of HB 20-1385 Use of Increased Medicaid Match	\$4,310,802	\$24,733,945	\$0	(\$24,733,945)	\$2,021,766	\$2,289,036
Total Special Bills	(\$47,265,936)	\$172,393,074	\$0	(\$191,368,433)	\$2,021,766	(\$30,312,343)
FY 2021-22 Total Spending Authority	\$8,984,194,399	\$2,338,195,264	\$84,491,394	\$1,201,917,467	\$43,625,726	\$5,315,964,548
Total Projected FY 2021-22 Expenditure	\$9,313,863,529	\$2,536,340,461	\$84,491,394	\$1,175,705,274	\$43,620,660	\$5,473,705,740
FY 2021-22 Requested Change from Appropriation	\$329,669,130	\$198,145,197	\$0	(\$26,212,193)	(\$5,066)	\$157,741,192
Percent Change	3.67%	8.47%	0.00%	-2.18%	-0.01%	2.97%
•	Calculation of	Request	•			
	FY 2022-	-23				
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2022-23 Appropriation Plus Special Bills	\$8,984,194,399	\$2,338,195,264	\$84,491,394	\$1,201,917,467	\$43,625,726	\$5,315,964,548
Bill Annualizations						
Annualization of HB 20-1360 FY 2020-21 Long Bill	(\$764,849)	\$1,844,210	\$0	(\$1,818,514)	\$0	(\$790,545)
Annualization of SB 20-033 Medicaid Buy-In Age 65 and Older Summary by Line Item	\$2,651,533	(\$233,074)	\$0	\$1,686,601	\$0	\$1,198,006
Total Annualizations	\$1,886,684	\$1,611,136	\$0	(\$131,913)	\$0	\$407,461
FY 2022-23 Total Spending Authority	\$8,986,081,083	\$2,339,806,400	\$84,491,394	\$1,201,785,554	\$43,625,726	\$5,316,372,009
Total Projected FY 2022-23 Expenditures	\$10,032,481,775	\$2,760,490,125	\$84,491,394	\$1,338,463,371	\$43,620,660	\$5,805,416,225
FY 2022-23 Requested Change From Appropriation	\$1,046,400,692	\$420,683,725	\$0	\$136,677,817	(\$5,066)	\$489,044,216
Percent Change	11.64%	17.98%	0.00%	11.37%	-0.01%	9.20%

Calculation of Fund Splits FY 2020-21									
Item	Total Request	General Fund and General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds	FMAP <sup>(3)</sup>	Notes		
Acute Care Services									
Base Acute	\$2,434,276,596	\$1,103,944,436	\$0	\$0	\$1,330,332,160	54.65%			
Breast and Cervical Cancer Program	\$3,380,126	\$0	\$1,072,852	\$0	\$2,307,274	68.26%	CF: Breast and Cervical Cancer Prevention and Treatment Fund		
Family Planning Indian Health Service	\$19,882,471	\$1,988,247	\$0 \$0	\$0	\$17,894,224	90.00% 100.00%			
Affordable Care Act Drug Rebate Offset	\$5,831,668 (\$31,037,919)	\$0 \$0	\$0 \$0	\$0 \$0	\$5,831,668 (\$31,037,919)	100.00%			
Affordable Care Act Drug Rebate Offset  Affordable Care Act Preventive Services	\$56,557,512	\$25,083,257	\$0 \$0	\$0	\$31,474,255	55.65%			
Non-Emergency Medical Transportation	\$50,557,512	\$103,429	\$0	\$0	(\$103,429)	N/A	CF: Breast and Cervical Cancer Prevention and Treatment Fund		
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$102,598,164	\$29,620,090	\$0	\$0	\$72,978,074	71.13%	C1. Breast and C0 real cancer 110 canon and 110 and 110 and		
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$32,829,716	\$9,477,939	\$0	\$0	\$23,351,777	71.13%			
MAGI Parents/Caretakers to 133% FPL	\$240,668,962	\$0	\$24,217,631	\$0	\$216,451,331	89.94%	93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund; NEMT services receive administrative match		
MAGI Adults	\$1,478,790,029	\$0	\$154,087,838	\$0	\$1,324,702,191	89.58%	93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund; NEMT services receive administrative match		
Continuous Eligibility for Children	\$33,518,791	\$0	\$15,200,772	\$0	\$18,318,019	54.65%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$98,338,292	\$0	\$46,760,370	\$0	\$51,577,922	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Buy-in Fund		
Non-Newly Eligibles	\$57,912,742	\$0	\$10,910,761	\$0	\$47,001,981	81.16%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$17,704,695 \$66,463,270	\$0 \$0	\$8,029,079	\$0	\$9,675,616 \$33,358,905	54.65%	CF: Healthcare Affordability and Sustainability Fee Fund		
Adult Dental Benefit Financing EPSDT Behavioral Therapies Financing	\$12,071,431	\$3,857,395	\$33,104,365 \$2,178,320	\$0 \$0	\$33,358,905 \$6,035,716	Variable 54.65%	CF: Adult Dental Fund CF: Colorado Autism Treatment Fund		
Acute Care Services Sub-Total	\$4,629,786,546	\$1,174,074,793	\$295,561,988	\$0	\$3,160,149,765	34.0376	CF. Colorado Addishi Headhent Fund		
Community Based Long-Term Care Services	34,023,780,340	\$1,174,074,793	\$255,501,566	30	\$3,100,149,703				
Base Community Based Long-Term Care	\$1,286,899,004	\$583,608,698	\$0	\$0	\$703,290,306	54.65%			
Children with Autism Waiver Services	\$1,200,055,001	\$0	\$0	\$0	\$0	54.65%	CF: Colorado Autism Treatment Fund		
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$4,382,369	\$1,265,190	\$0	\$0	\$3,117,179	71.13%			
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$431	\$124	\$0	\$0	\$307	71.13%			
MAGI Parents/Caretakers to 133% FPL	\$99,295	\$0	\$9,929	\$0	\$89,366	90.00%	Waivers receive standard match; 93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Adults	\$4,284,676	\$0	\$428,467	\$0	\$3,856,209	90.00%	Waivers receive standard match; 93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
Continuous Eligibility for Children	\$2,615,926	\$0	\$1,186,322	\$0	\$1,429,604	54.65%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$15,506,297	\$0	\$7,373,325	\$0	\$8,132,972	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Buy-in Fund		
Non-Newly Eligibles	\$27,916	\$0	\$5,259	\$0	\$22,657	81.16%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$35,545	\$0	\$16,120	\$0	\$19,425	54.65%	CF: Healthcare Affordability and Sustainability Fee Fund		
Community Based Long-Term Care Services Sub-Total Long-Term Care and Insurance	\$1,313,851,459	\$584,874,012	\$9,019,422	\$0	\$719,958,025				
Base Class I Nursing Facilities	\$729,599,118	\$330,873,200	\$0	\$0	\$398,725,918	54.65%			
Use Nursing Home Penalty Cash Fund for Closure of Union Printers Home	\$250,000	\$0	\$250,000	\$0	\$0	N/A	CF: Nursing Home Penalty Cash Fund		
Class II Nursing Facilities	\$6,552,757	\$2,971,675	\$0	\$0	\$3,581,082	54.65%			
PACE	\$247,620,167	\$112,295,746	\$0	\$0	\$135,324,421	54.65%			
Supplemental Medicare Insurance Benefit (SMIB)	\$212,149,969	\$112,036,399	\$0	\$0	\$100,113,570	47.19%	Approximately 17.20% of Total is State-Only & approximatly 05.16% is Federal-Only		
Health Insurance Buy-In	\$2,489,570	\$1,129,020	\$0	\$0	\$1,360,550	54.65%			
MAGI Parents/Caretakers to 133% FPL	\$12,298	\$0	\$1,230	\$0	\$11,068	90.00%	93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Adults	\$4,265,900	\$0	\$426,590	\$0	\$3,839,310	90.00%	93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
Continuous Eligibility for Children	\$1,249	\$0	\$566	\$0	\$683	54.65%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$96,018	\$0	\$45,657	\$0	\$50,361	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Buy-in Fund		
Non-Newly Eligibles	\$28,190	\$0	\$5,311	\$0	\$22,879	81.16%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$23,729	\$0	\$10,761	\$0	\$12,968	54.65%	CF: Healthcare Affordability and Sustainability Fee Fund		
Long-Term Care and Insurance Sub-Total	\$1,203,088,965	\$559,306,040	\$740,115	\$0	\$643,042,810	<u> </u>	l .		

Exhibit A - Summary of Request

SB 11-098 "Aligning Medicard Eligibility for Children"  \$10,595,148		Calculation of Fund Splits FY 2020-21										
Base Service Management	Item	Total Request		Cash Funds	Reappropriated Funds	Federal Funds	FMAP <sup>(3)</sup>	Notes				
Base Accommbbs Care Collaborative	Service Management											
Tobacco Quil Line		\$44,974,123										
SB 11-08° *Aligning Medical Eligability for Childred"   \$10,595,148   \$3,305,819   \$0   \$0   \$57,536,329   \$11,139   \$   \$   \$   \$   \$   \$   \$   \$   \$	Base Accountable Care Collaborative		\$55,275,785	\$0								
SB   1-25				\$857,151				CF: Tobacco Education Fund				
MAGI Parents Carcialers to 133% FPL.  \$12,194,559  \$0 \$1,219,456  \$0 \$1,075,10  \$0 \$0,00%  \$1,075,10  \$0 \$0,00%  \$1,075,10  \$0 \$1,075,10  \$0 \$0,00%  \$1,075,10  \$1,000%  \$1,00			\$3,058,819									
MACI Parents Carclaters 10 13% PP.  MACI Adults  S58,318,546  S0 S58,318,545  S0 S52,504,691  90.00%  Affordability and Statistudy  Affordability and Statistudy  Disabled Boy-in  S1,960,341  S0 S932,133  S0 S1,028,188  Variable  CF: Healthcare Affordability and Statistudy  CF: Healthcare Affordability and Statistudy  CF: Healthcare Affordability and Statistudy  FV 2020-21 Estimate of Total Expenditures for Medical  S25,807,970  S78,879,770  S10,061,065  S78,879,770  S10,061,065  S78,879,770  S10,061,065  S1	SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$516,457	\$149,101	\$0	\$0	\$367,356	71.13%					
MACI Adults	MAGI Parents/Caretakers to 133% FPL	\$12,194,559	\$0	\$1,219,456	\$0	\$10,975,103	90.00%	93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund				
Disabled Buy-In   S1,960,508   S0   S1,313,556   S0   S1,822,942   94.69%   CF. Healthcare Affordability and Sustainability Fee Fund   S1,960,141   S0   S32,153   S0   S1,028,188   Variable   CF. Healthcare Affordability and Sustainability Fee Fund   S2,20,101   S38,6332   S0   S72,879   S0   S313,953   S1,16%   CF. Healthcare Affordability and Sustainability Fee Fund   S92,201   S0   S42,201   S0   S520,596   94.65%   CF. Healthcare Affordability and Sustainability Fee Fund   Service Management Sub-Total   S25,587,978   S78,879,70   S106,417,373   FV 200-21 Estimate of Total Expenditures for Medical   S7,402,714,878   S2,397,134,315   S315,982,590   S0   S4,689,597,973   S25,587,980   S78,879,123   S0   S8,991,124   Variable   CF. Certification of Public   C	MAGI Adults	\$58,338,546	\$0	\$5,833,855	\$0	\$52,504,691	90.00%	93% FFP January 1, 2019; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund				
Disabled Bay-In	Continuous Eligibility for Children	\$2,896,508	\$0	\$1,313,566	\$0	\$1,582,942	54.65%	CF: Healthcare Affordability and Sustainability Fee Fund				
MAGI Parenes Carcataces 60% to 68% FPL   S952,001   S.   S.   S.   S.   S.   S.   S.   S	Disabled Buy-In	\$1,960,341	\$0	\$932,153	\$0	\$1,028,188	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Buy-in Fund				
MAGI Parenes Carcataces 60% to 68% FPL   S952,001   S.   S.   S.   S.   S.   S.   S.   S	Non-Newly Eligibles	\$386,832	\$0	\$72,879	\$0	\$313,953	81.16%	CF: Healthcare Affordability and Sustainability Fee Fund				
Service Management Sub-Total   \$225,987,908   \$78,879,470   \$10,661,065   \$90   \$166,447,373   \$   \$   \$   \$   \$   \$   \$   \$   \$								CF: Healthcare Affordability and Sustainability Fee Fund				
PY 202-021 Estimate of Total Expenditures for Medical Services to Clients Financing   S8,991,123   S315,982,590   S4,689,597,973   Services to Clients   S8,991,124   S8,991,124   S8,991,123   S8,991,124   S8,991		,										
Upper Payment Limit Financing	FY 2020-21 Estimate of Total Expenditures for Medical					, , , , , , , , , , , , , , , , , , ,						
Department Recoveries Adjustment												
Demore Health Outstationing	Upper Payment Limit Financing	\$8,991,123	(\$8,991,124)	\$8,991,123	\$0	\$8,991,124	Variable	CF: Certification of Public Expenditure				
Healthcare Affordability and Sustainability Fee Supplemental   S1,225,867,931   S0   S485,321,373   S0   S740,546,558   G0.41%   CF: Healthcare Affordability and Sustainability Fearments   S1,225,867,931   S0   S55,367,886   S0   S66,722,271   S4.65%   CF: Medicaid Nursing Facility Provider Fearments   S15,245,418   (S1,676,403)   S7,630,598   S0   S9,291,223   Variable   CF: Certification of Public Hospital High Volume Inpartent Payment   S9,188,697   (S483,616)   S48,361,56   S0   S4,836,157   S0,00%   CF: Certification of Public Hospital High Volume Inpartent Payment   S1,245,418   S1,640,000   S0   S700,000	Department Recoveries Adjustment	\$0	(\$24,624,112)	\$67,557,609	\$0	(\$42,933,497)	63.55%	CF: Department Recoveries				
Payments	Denver Health Outstationing	\$2,438,147	\$875,467	\$0	\$0	\$1,562,680	64.09%					
Nursing Facility Supplemental Payments   \$122,090,157   \$0   \$55,367,886   \$0   \$66,722,271   \$4.65%   \$CF: Medicaid Nursing Facility Provider F Physician Supplemental Payments   \$15,245,418   \$(\$1,676,403)   \$7,630,598   \$0   \$9,291,223   Variable   \$CF: Certification of Public Physician Supplemental Payment   \$9,188,697   \$4383,6156   \$0   \$4,836,156   \$0   \$4,836,157   \$0.00%   \$CF: Certification of Public Physician Supplemental Payment   \$9,188,697   \$4383,616   \$4,836,156   \$0   \$4,836,157   \$0.00%   \$CF: Certification of Public Physician Supplemental Payment   \$0   \$60,605,920   \$0   \$0   \$0   \$0   \$0   \$0   \$0		\$1,225,867,931	\$0	\$485,321,373	\$0	\$740,546,558	60.41%	CF: Healthcare Affordability and Sustainability Fee Cash Fund				
Physician Supplemental Payment		\$122,090,157	\$0	\$55,367,886	\$0	\$66,722,271	54.65%	CF: Medicaid Nursing Facility Provider Fee Cash Fund				
Health Care Expansion Fund Transfer Adjustment			(\$1,676,403)					CF: Certification of Public Expenditure				
Intergovernmental Transfer for Difficult to Discharge Clients	Hospital High Volume Inpatient Payment	\$9,188,697	(\$483,616)	\$4,836,156	\$0	\$4,836,157	50.00%	CF: Certification of Public Expenditure				
Intergovernmental Transfer for Difficult to Discharge Clients	Health Care Expansion Fund Transfer Adjustment	\$0	(\$60,605,920)	\$60,605,920	\$0	\$0	N/A	CF: Health Care Expansion Fund				
Denver Health Ambulance Payments   \$6,286,592   \$(\$792,903)   \$3,100,819   \$0   \$3,978,676   \$63.29%   \$CF: Certification of Public Varieties of Colorado School of Medicine Payment   \$162,707,438   \$0   \$45,389,025   \$30,587,369   \$86,731,044   \$53.30%   RF: Department of Higher Education, Fee-for-service Contract	Intergovernmental Transfer for Difficult to Discharge Clients	\$1,400,000	\$0	\$700,000	\$0	\$700,000	50.00%	CF: Intergovernmental Transfer				
Section   Contraction   Cont		\$6,286,592	(\$792,903)	\$3,100,819	\$0	\$3,978,676	63.29%	CF: Certification of Public Expenditure				
Emergency Transportation Provider Payments   \$56,651,915   (\$2,981,680)   \$29,816,797   \$0   \$29,816,797   \$0.00%   CF: Certification of Public Outpatient Hospital Cost Settlement Transfer   \$0   \$27,135,595   (\$2,276,872)   \$0   (\$24,858,723)   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu HB 20-1385 Use of Increased Medicaid Match   \$0   (\$31,108,692)   \$37,100,918   \$0   \$1,108,692   \$0   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-212 Reimbursement for Telehealth Services   (\$5,068,381)   (\$1,789,376)   (\$153,151)   \$0   (\$3,125,490)   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-12 Reimbursement for Telehealth Services   (\$5,068,381)   (\$1,789,376)   (\$153,151)   \$0   (\$3,125,490)   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-12 Reimbursement for Telehealth Services   (\$5,068,381)   (\$1,789,376)   (\$153,151)   \$0   (\$3,125,490)   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-12 Reimbursement for Telehealth Services   (\$5,068,381)   (\$1,789,376)   (\$153,151)   \$0   (\$3,125,490)   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-12 Reimbursement for Telehealth Services   (\$5,068,381)   \$5,068,381   \$0   \$0   \$0   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-12 Reimbursement for Telehealth Services   \$5,068,381   \$5,068,381   \$0   \$0   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-12 Reimbursement for Telehealth Services   \$5,068,381   \$5,068,381   \$5,068,381   \$0   \$0   N/A   CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-12 Reimbursement for Telehealth Services   \$5,068,381   \$5,068,381   \$5,068,381   \$5,068,381   \$5,068,381   \$5,068,381   \$5,068,381   \$5,068,381	University of Colorado School of Medicine Payment	\$162,707,438	\$0	\$45,389,025	\$30,587,369	\$86,731,044	53.30%	RF: Department of Higher Education, Fee-for-service Contracts with State Institutions for Speciality Education Programs				
Outpatient Hospital Cost Settlement Transfer         \$0         \$27,135,595         \$(\$2,276,872)         \$0         \$(\$24,858,723)         N/A         CF. Healthcare Affordability and Sustainability Fee Cash Fu           Public School Health Services         \$0         \$(\$1,108,692)         \$0         \$1,108,692         \$0         N/A         CF. Healthcare Affordability and Sustainability Fee Cash Fu           HB 20-1385 Use of Increased Medicaid Match         \$0         \$(\$37,100,918)         \$37,100,918         \$0         \$0         N/A         CF: Healthcare Affordability and Sustainability Fee Cash Fu           SB 20-212 Reimbursement for Telehealth Services         \$(\$5,068,381)         \$(\$1,789,376)         \$(\$153,515)         \$0         \$(\$3,125,490)         N/A         CF: Healthcare Affordability and Sustainability Fee           Cares Sub Fund         \$5,068,381         \$5,068,381         \$0         \$0         \$0         N/A         CF: Healthcare Affordability and Sustainability Fee           Cash Funds Financing <sup>(1)</sup> \$0         \$(\$188,681,127)         \$178,822,710         \$9,858,417         \$0         N/A         CF: Various,           Financing Sub-Total         \$1,610,867,417         \$(\$295,756,429)         \$982,810,547         \$41,554,478         \$882,258,821         \$100,000         \$100,000         \$100,000         \$100,000         \$100,00	Emergency Transportation Provider Payments	\$56,651,915	(\$2,981,680)	\$29,816,797	\$0	\$29,816,797	50.00%					
Public School Health Services         \$0         (\$1,108,692)         \$0         \$1,108,692         \$0         \$N/A         RF: Public School Health Schoo						(\$24,858,723)	N/A	Cr. reanneare Ariordaointy and Sustamaointy ree Cash rund, Breast and				
HB 20-1385 Use of Increased Medicaid Match  S0 (\$37,100,918) \$37,100,918 \$0 \$0 \$N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F SB 20-212 Reimbursement for Telehealth Services (\$5,068,381) (\$1,789,376) (\$153,515) \$0 (\$3,125,490) N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Cares Sub Fund \$5,068,381 \$5,068,381 \$0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Order Sub Funds Financing Financing Financing Sub-Total \$1,010,867,417 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability and Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 N/A CF: Healthcare Affordability And Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 \$0 N/A CF: Healthcare Affordability And Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 \$0 N/A CF: Healthcare Affordability And Sustainability Fee Cash Fu Nursing Facility Provider F S0 \$0 \$0 \$0 \$								RF: Public School Health Services				
SB 20-212 Reimbursement for Telehealth Services         (\$5,068,381)         (\$1,789,376)         (\$153,515)         \$0         (\$3,125,490)         N/A         CF: Healthcare Affordability and Sustainability F           Cares Sub Fund         \$5,068,381         \$5,068,381         \$0         \$0         \$0         N/A         GF: Ca           Cash Funds Financing <sup>(1)</sup> \$0         (\$188,681,127)         \$178,822,710         \$9,858,417         \$0         N/A         CF: Various,           Financing Sub-Total         \$1,610,867,417         (\$295,756,429)         \$982,810,547         \$41,554,478         \$882,258,821         \$882,258,821	HB 20-1385 Use of Increased Medicaid Match	\$0	(\$37,100,918)	\$37,100,918	\$0	\$0	N/A	CF: Healthcare Affordability and Sustainability Fee Cash Fund; Medicaid Nursing Facility Provider Fee Cash Fund				
Cares Sub Fund         \$5,068,381         \$5,068,381         \$0         \$0         \$0         N/A         GF: Ca           Cash Funds Financing <sup>(1)</sup> \$0         (\$188,681,127)         \$178,822,710         \$9,858,417         \$0         N/A         CF: Various,           Financing Sub-Total         \$1,610,867,417         (\$295,756,429)         \$982,810,547         \$41,554,478         \$882,258,821	SB 20-212 Reimbursement for Telehealth Services	(\$5,068,381)	(\$1,789,376)	(\$153,515)	\$0	(\$3,125,490)	N/A	CF: Healthcare Affordability and Sustainability Fee Cash Fund				
Financing Sub-Total \$1,610,867,417 (\$295,756,429) \$982,810,547 \$41,554,478 \$882,258,821	Cares Sub Fund	\$5,068,381	\$5,068,381	\$0	\$0	\$0	N/A	GF: Cares Sub Fund				
Financing Sub-Total \$1,610,867,417 (\$295,756,429) \$982,810,547 \$41,554,478 \$882,258,821	Cash Funds Financing <sup>(1)</sup>	\$0	(\$188,681,127)	\$178,822,710	\$9,858,417	\$0	N/A	CF: Various, see Narrative				
		\$1,610,867,417	(\$295,756,429)	\$982,810,547	\$41,554,478	\$882,258,821						
	Total Projected FY 2020-21 Expenditures <sup>(2)</sup>	\$9,013,582,295	\$2,101,377,886	\$1,298,793,137	\$41,554,478	\$5,571,856,794						
100a Projection and Affordad Assistance Percentage MAGI: Modified Adjusted Gross Income PACE: Program of All-Inclusive Care for the Elderly ACA: Patient Protection and Affordad be Care Act of 2010 FPL: Federal Powerty Level FFP: Federal Financial Participation	Definitions: FMAP: Faderal Medical Assistance Percentage MA	1. / / /	/ / /			1.1) / /	£2010 EDI	· Fadaral Dovarty Laval FED: Fadaral Financial Participation				

(1) This line adjusts for transfers from each finds to the General Fund that are not broken out elsewhere. See Narrative for more information.

(2) Of the General Fund total, \$84,491,394 is General Fund Exempt.

Exhibit A - Summary of Request

Calculation of Fund Splits FY 2021-22									
Item	Total Request	General Fund and General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds	FMAP (3)	Notes		
Acute Care Services									
Base Acute	\$2,502,952,385	\$1,251,476,192	\$0	\$0	\$1,251,476,193	50.00%			
Breast and Cervical Cancer Program	\$2,993,664	\$0	\$1,047,782	\$0	\$1,945,882	65.00%	CF: Breast and Cervical Cancer Prevention and Treatment Fund		
Family Planning	\$20,150,884	\$2,015,088	\$0	\$0	\$18,135,796	90.00%			
Indian Health Service	\$6,147,162	\$0	\$0	\$0	\$6,147,162	100.00%			
Affordable Care Act Drug Rebate Offset	(\$38,704,521)	\$0	\$0	\$0	(\$38,704,521)	100.00%			
Affordable Care Act Preventive Services	\$57,321,340	\$28,087,457	\$0	\$0	\$29,233,883	51.00%			
Non-Emergency Medical Transportation	\$0	\$81,390	\$0	\$0	(\$81,390)	N/A	CF: Breast and Cervical Cancer Prevention and Treatment Fund		
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$103,249,705	\$36,137,397	\$0	\$0	\$67,112,308	65.00%			
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$33,508,073	\$11,727,826	\$0	\$0	\$21,780,247	65.00%			
MAGI Parents/Caretakers to 133% FPL	\$227,048,850	\$0	\$22,867,497	\$0	\$204,181,353	89.93%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund; NEMT services receive administrative match		
MAGI Adults	\$1,483,812,580	\$0	\$154,693,780	\$0	\$1,329,118,800	89.57%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund; NEMT services receive administrative match		
Continuous Eligibility for Children	\$33,821,070	\$0	\$16,910,535	\$0	\$16,910,535	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$95,731,636	\$0	\$50,013,955	\$0	\$45,717,681	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaio Buy-in Fund		
Non-Newly Eligibles	\$65,178,223	\$0	\$13,035,645	\$0	\$52,142,578	80.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$18,341,064	\$0	\$9,170,532	\$0	\$9,170,532	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Adult Dental Benefit Financing	\$68,689,815	\$0	\$34,253,963	\$0	\$34,435,852	Variable	CF: Adult Dental Fund		
EPSDT Behavioral Therapies Financing	\$12,071,431	\$4,493,958	\$1,541,757	\$0	\$6,035,716	50.00%	CF: Colorado Autism Treatment Func		
Acute Care Services Sub-Total	\$4,692,313,361	\$1,334,019,308	\$303,535,446	\$0	\$3,054,758,607				
Community Based Long-Term Care Services									
Base Community Based Long-Term Care	\$1,363,336,986	\$681,668,493	\$0	\$0	\$681,668,493	50.00%			
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$4,663,777	\$1,632,322	\$0	\$0	\$3,031,455	65.00%			
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$466	\$163	\$0	\$0	\$303	65.00%			
MAGI Parents/Caretakers to 133% FPL	\$105,835	\$0	\$10,583	\$0	\$95,252	90.00%	Waivers receive standard match; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Adults	\$4,450,975	\$0	\$445,097	\$0	\$4,005,878	90.00%	Waivers receive standard match; 90% FFP January 1, 2020; CF. Healthcare Affordability and Sustainability Fee Fund		
Continuous Eligibility for Children	\$2,730,314	\$0	\$1,365,157	\$0	\$1,365,157	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$16,360,963	\$0	\$8,547,607	\$0	\$7,813,356	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaio Buy-in Fund		
Non-Newly Eligibles	\$196,790	\$0	\$39,358	\$0	\$157,432	80.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$35,864	\$0	\$17,932	\$0	\$17,932	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Community Based Long-Term Care Sub-Total	\$1,391,881,970	\$683,300,978	\$10,425,734	\$0	\$698,155,258				
Long-Term Care and Insurance									
Base Class I Nursing Facilities	\$752,010,563	\$376,005,281	\$0	\$0	\$376,005,282	50.00%			
Use Nursing Home Penalty Cash Fund for Closure of Union Printers Home	\$0	\$0	\$0	\$0	\$0	N/A	CF: Nursing Home Penalty Cash Fund		
Class II Nursing Facilities	\$7,177,235	\$3,588,617	\$0	\$0	\$3,588,618	50.00%			
PACE	\$271,730,970	\$135,865,485	\$0	\$0	\$135,865,485	50.00%			
Supplemental Medicare Insurance Benefit (SMIB)	\$225,540,894	\$127,159,956	\$0	\$0	\$98,380,938	43.62%	Approximately 17.20% of Total is State-Only & approximatly 05.16% is Federal-Only		
Health Insurance Buy-In	\$2,489,570	\$1,244,785	\$0	\$0	\$1,244,785	50.00%			
MAGI Parents/Caretakers to 133% FPL	\$12,298	\$0	\$1,230	\$0	\$11,068	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Adults	\$4,234,973	\$0	\$423,497	\$0	\$3,811,476	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
Continuous Eligibility for Children	\$1,211	\$0	\$605	\$0	\$606	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$98,967	\$0	\$51,704	\$0	\$47,263	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicai Buy-in Fund		
Non-Newly Eligibles	\$187,511	\$0	\$37,503	\$0	\$150,008	80.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$22,992	\$0	\$11,496	\$0	\$11,496	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Long-Term Care and Insurance Sub-Total	\$1,263,507,184	\$643,864,124	\$526,035	\$0	\$619,117,025				

Exhibit A - Summary of Request

Calculation of Fund Splits FY 2021-22										
Item	Total Request	General Fund and General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds	FMAP (3)	Notes			
Service Management										
Base Service Management	\$48,148,621	\$24,074,310	\$0	\$0	\$24,074,311	50.00%				
Base Accountable Care Collaborative	\$124,136,425	\$62,068,212	\$0	\$0	\$62,068,213	50.00%				
Tobacco Quit Line	\$1,285,726	\$0	\$857,151	\$0	\$428,575	33.33%	CF: Tobacco Education Fund			
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$11,340,348	\$3,969,122	\$0	\$0	\$7,371,226	65.00%				
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$598,810	\$209,583	\$0	\$0	\$389,227	65.00%				
MAGI Parents/Caretakers to 133% FPL	\$13,134,204	\$0	\$1,313,420	\$0	\$11,820,784	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund			
MAGI Adults	\$62,254,033	\$0	\$6,225,403	\$0	\$56,028,630	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund			
Continuous Eligibility for Children	\$2,856,819	\$0	\$1,428,409	\$0	\$1,428,410	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund			
Disabled Buy-In	\$1,999,367	\$0	\$1,044,547	\$0	\$954,820	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Buy-in Fund			
Non-Newly Eligibles	\$2,765,129	\$0	\$553,026	\$0	\$2,212,103	80.00%	CF: Healthcare Affordability and Sustainability Fee Fund			
MAGI Parents/Caretakers 60% to 68% FPL	\$874,871	\$0	\$437,435	\$0	\$437,436	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund			
Service Management Sub-Total	\$269,394,353	\$90,321,227	\$11,859,391	\$0	\$167,213,735					
FY 2021-22 Estimate of Total Expenditures for Medical	\$7,617,096,868	\$2,751,505,637	\$326,346,606	\$0	\$4,539,244,625					
Services to Clients	\$7,017,090,000	32,/31,303,03/	\$320,340,000	30	34,539,244,025					
Financing										
Upper Payment Limit Financing	\$9,142,173	(\$9,142,175)	\$9,142,173	\$0	\$9,142,175	Variable	CF: Certification of Public Expenditure			
Department Recoveries Adjustment	\$0	(\$30,408,906)	\$71,300,300	\$0	(\$40,891,394)	57.35%	CF: Department Recoveries			
Denver Health Outstationing	\$2,558,347	\$918,627	\$0	\$0	\$1,639,720	64.09%				
Healthcare Affordability and Sustainability Fee Supplemental Payments	\$1,297,008,616	\$0	\$540,053,854	\$0	\$756,954,762	58.36%	CF: Healthcare Affordability and Sustainability Fee Cash Fund			
Nursing Facility Supplemental Payments	\$121,431,737	\$0	\$60,715,868	\$0	\$60,715,869	50.00%	CF: Medicaid Nursing Facility Provider Fee Cash Fund			
Physician Supplemental Payments	\$16,840,742	(\$915,325)	\$8,602,815	\$0	\$9,153,252	Variable	CF: Certification of Public Expenditure			
Hospital High Volume Inpatient Payment	\$9,594,507	(\$554,651)	\$4,602,643	\$0	\$5,546,515	Variable	CF: Certification of Public Expenditure			
Health Care Expansion Fund Transfer Adjustment	\$0	(\$58,002,327)	\$58,002,327	\$0	\$0	N/A	CF: Health Care Expansion Fund			
Intergovernmental Transfer for Difficult to Discharge Clients	\$1,400,000	\$0	\$700,000	\$0	\$700,000	50.00%	CF: Intergovernmental Transfer			
Denver Health Ambulance Payments	\$7,057,088	(\$371,426)	\$3,714,257	\$0	\$3,714,257	50.00%	CF: Certification of Public Expenditure			
University of Colorado School of Medicine Payment	\$172,557,574	\$0	\$45,389,025	\$32,609,135	\$94,559,414	54.80%	CF: Intergovernmental Transfer from Department of Higher Education RF: Department of Higher Education, Fee-for-service Contracts with State Institutions for Speciality Education Programs			
Emergency Transportation Provider Payments	\$59,250,877	(\$3,322,654)	\$29,346,986	\$0	\$33,226,545	53.10%	CF: Certification of Public Expenditure			
Public School Health Services	(\$75,000)	(\$1,233,174)	\$0	\$1,158,174	\$0	N/A	RF: Public School Health Services			
Cash Funds Financing <sup>(1)</sup>	\$0	(\$27,641,771)	\$17,788,420	\$9,853,351	\$0	N/A	CF: Various, see Narrative			
Financing Sub-Total	\$1,696,766,661	(\$130,673,782)	\$849,358,668	\$43,620,660	\$934,461,115					
Total Projected FY 2021-22 Expenditures <sup>(2)</sup>	\$9,313,863,529	\$2,620,831,855	\$1,175,705,274	\$43,620,660	\$5,473,705,740					
Definitions: FMAP: Federal Medical Assistance Percentage MA	GI: Modified Adjusted Gro	ss Income PACE: Program o	f All-Inclusive Care for the F	Elderly ACA: Patient Protecti	ion and Affordable Care Act	of 2010 FPI	: Federal Poverty Level FFP: Federal Financial Participation CHCBS:			

Definitions. Final received whether Assistance receiving wild with a more range with the received and the received as Children's Home- and Community-Based Services

(1) This line adjusts for transfers from eash funds to the General Fund that are not broken out elsewhere. See Narrative for more information.

(2) Of the General Fund total, \$84,491,394 is General Fund Exempt.

Exhibit A - Summary of Request

Calculation of Fund Splits FY 2022-23									
Item	Total Request	General Fund and General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds	FMAP	Notes		
Acute Care Services									
Base Acute	\$2,769,875,925	\$1,384,937,962	\$0	\$0	\$1,384,937,963	50.00%			
Breast and Cervical Cancer Program	\$2,848,240	\$0	\$996,884	\$0	\$1,851,356	65.00%	CF: Breast and Cervical Cancer Prevention and Treatment Fund		
Family Planning	\$22,425,919	\$2,242,592	\$0	\$0	\$20,183,327	90.00%			
Indian Health Service	\$6,479,723	\$0	\$0	\$0	\$6,479,723	100.00%			
Affordable Care Act Drug Rebate Offset	(\$41,955,701)	\$0	\$0	\$0	(\$41,955,701)	100.00%			
Affordable Care Act Preventive Services	\$63,795,417	\$31,259,754	\$0	\$0	\$32,535,663	51.00%			
Non-Emergency Medical Transportation	\$0	\$50,429	\$0	\$0	(\$50,429)	N/A	CF: Breast and Cervical Cancer Prevention and Treatment Fund		
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$116,933,397	\$40,926,689	\$0	\$0	\$76,006,708	65.00%			
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$35,244,754	\$12,335,664	\$0	\$0	\$22,909,090	65.00%			
MAGI Parents/Caretakers to 133% FPL	\$240,277,054	\$0	\$24,190,317	\$0	\$216,086,737	89.93%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund; NEMT services receive administrative match		
MAGI Adults	\$1,674,940,478	\$0	\$173,806,570	\$0	\$1,501,133,908	89.62%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund; NEMT services receive administrative match		
Continuous Eligibility for Children	\$35,368,643	\$0	\$17,684,321	\$0	\$17,684,322	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$111,045,362	\$0	\$57,889,574	\$0	\$53,155,788	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Buy in Fund		
Non-Newly Eligibles	\$73,598,331	\$0	\$14,719,666	\$0	\$58,878,665	80.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$23,169,802	\$0	\$11,584,901	\$0	\$11,584,901	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Adult Dental Benefit Financing	\$76,161,211	\$0	\$35,642,764	\$0	\$40,518,447	Variable	CF: Adult Dental Fund		
EPSDT Behavioral Therapies Financing	\$12,071,431	\$4,494,097	\$1,541,618	\$0	\$6,035,716	50.00%	CF: Colorado Autism Treatment Func		
Acute Care Services Sub-Total	\$5,222,279,986	\$1,476,247,187	\$338,056,615	\$0	\$3,407,976,184				
Community Based Long-Term Care Services									
Base Community Based Long-Term Care	\$1,451,020,719	\$725,510,359	\$0	\$0	\$725,510,360	50.00%			
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$5,055,920	\$1,769,572	\$0	\$0	\$3,286,348	65.00%			
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$499	\$175	\$0	\$0	\$324	65.00%			
MAGI Parents/Caretakers to 133% FPL	\$114,330	\$0	\$11,432	\$0	\$102,898	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Adults	\$4,846,479	\$0	\$484,648	\$0	\$4,361,831	90.00%	Waivers receive standard match; 90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
Continuous Eligibility for Children	\$2,824,671	\$0	\$1,412,335	\$0	\$1,412,336	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Disabled Buy-In	\$17,685,057	\$0	\$9,219,479	\$0	\$8,465,578	Variable	CF: Healthcare Affordability and Sustainability Fee and Medicaid Buy-Ir Fund		
Non-Newly Eligibles	\$214,245	\$0	\$42,849	\$0	\$171,396	80.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Parents/Caretakers 60% to 68% FPL	\$41,198	\$0	\$20,599	\$0	\$20,599	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund		
Community Based Long-Term Care Sub-Total	\$1,481,803,118	\$727,280,106	\$11,191,342	\$0	\$743,331,670				
Long-Term Care and Insurance									
Base Class I Nursing Facilities	\$777,338,371	\$388,669,185	\$0	\$0	\$388,669,186	50.00%			
Class II Nursing Facilities	\$7,546,862	\$3,773,431	\$0	\$0	\$3,773,431	50.00%			
PACE	\$301,922,653	\$150,961,326	\$0	\$0	\$150,961,327	50.00%			
Supplemental Medicare Insurance Benefit (SMIB)	\$239,096,540	\$134,802,629	\$0	\$0	\$104,293,911	43.62%	Approximately 17.20% of Total is State-Only & approximatly 05.16% is Federal-Only		
Health Insurance Buy-In	\$2,489,570	\$1,244,785	\$0	\$0	\$1,244,785	50.00%			
MAGI Parents/Caretakers to 133% FPL	\$12,298	\$0	\$1,230	\$0	\$11,068	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
MAGI Adults	\$4,375,629	\$0	\$437,563	\$0	\$3,938,066	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Fund		
Continuous Eligibility for Children	\$1,167	\$0	\$583	\$0	\$584	50.00%	CF: Healthcare Affordability and Sustainability Fee Fun		
Disabled Buy-In	\$102,300	\$0	\$53,330	\$0	\$48,970	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Bu in Fun.		
Non-Newly Eligibles	\$191,984	\$0	\$38,397	\$0	\$153,587	80.00%	CF: Healthcare Affordability and Sustainability Fee Fun		
MAGI Parents/Caretakers 60% to 68% FPL	\$26,909	\$0	\$13,454	\$0	\$13,455	50.00%	CF: Healthcare Affordability and Sustainability Fee Fun		
Long-Term Care and Insurance Sub-Total	\$1,333,104,283	\$679,451,356	\$544,557	\$0	\$653,108,370				

Exhibit A - Summary of Request

Calculation of Fund Splits FY 2022-23											
Item	Total Request	General Fund and General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds	FMAP	Notes				
Service Management											
Base Service Management	\$49,655,405	\$24,827,702	\$0	\$0	\$24,827,703	50.00%					
Base Accountable Care Collaborative	\$130,438,485	\$65,219,242	\$0	\$0	\$65,219,243	50.00%					
Tobacco Quit Line	\$1,285,726	\$0	\$857,151	\$0	\$428,575	33.33%	CF: Tobacco Education Fund				
SB 11-008: "Aligning Medicaid Eligibility for Children"	\$12,672,450	\$4,435,357	\$0	\$0	\$8,237,093	65.00%					
SB 11-250: "Eligibility for Pregnant Women in Medicaid"	\$628,575	\$220,001	\$0	\$0	\$408,574	65.00%					
MAGI Parents/Caretakers to 133% FPL	\$14,315,413	\$0	\$1,431,541	\$0	\$12,883,872	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability Fee Func				
MAGI Adults	\$70,363,142	\$0	\$7,036,314	\$0	\$63,326,828	90.00%	90% FFP January 1, 2020; CF: Healthcare Affordability and Sustainability  Fee Func				
Continuous Eligibility for Children	\$2,926,386	\$0	\$1,463,193	\$0	\$1,463,193	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund				
Disabled Buy-In	\$2,214,690	\$0	\$1,154,550	\$0	\$1,060,140	Variable	CF: Healthcare Affordability and Sustainability Fee Fund and Medicaid Buy in Fund				
Non-Newly Eligibles	\$3,123,138	\$0	\$624,628	\$0	\$2,498,510	80.00%	CF: Healthcare Affordability and Sustainability Fee Fund				
MAGI Parents/Caretakers 60% to 68% FPL	\$910,073	\$0	\$455,036	\$0	\$455,037	50.00%	CF: Healthcare Affordability and Sustainability Fee Fund				
Service Management Sub-Total	\$288,533,483	\$94,702,302	\$13,022,413	\$0	\$180,808,768						
FY 2022-23 Estimate of Total Expenditures for Medical Services to Clients	\$8,325,720,870	\$2,977,680,951	\$362,814,927	\$0	\$4,985,224,992						
Financing											
Upper Payment Limit Financing	\$9,295,763	(\$9,295,762)	\$9,295,763	\$0	\$9,295,762	Variable	CF: Certification of Public Expenditur				
Department Recoveries Adjustment	\$0	(\$32,093,560)	\$75,250,336	\$0	(\$43,156,776)	57.35%	CF: Department Recoverie				
Denver Health Outstationing	\$2,684,474	\$963,915	\$0	\$0	\$1,720,559	64.09%					
Healthcare Affordability and Sustainability Fee Supplemental Payments	\$1,312,194,249	\$0	\$656,097,124	\$0	\$656,097,125	50.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund				
Nursing Facility Supplemental Payments	\$127,937,754	\$0	\$63,968,877	\$0	\$63,968,877	50.00%	CF: Medicaid Nursing Facility Provider Fee Cash Fund				
Physician Supplemental Payments	\$17,699,869	(\$931,572)	\$9,315,721	\$0	\$9,315,720	50.00%	CF: Certification of Public Expenditur				
Hospital High Volume Inpatient Payment	\$10,100,529	(\$548,982)	\$5,159,689	\$0	\$5,489,822	Variable	CF: Certification of Public Expenditure				
Health Care Expansion Fund Transfer Adjustment	\$0	(\$57,992,327)	\$57,992,327	\$0	\$0	N/A	CF: Health Care Expansion Fund				
Intergovernmental Transfer for Difficult to Discharge Clients	\$1,400,000	\$0	\$700,000	\$0	\$700,000	50.00%	CF: Intergovernmental Transfe				
Denver Health Ambulance Payments	\$7,405,003	(\$389,737)	\$3,897,370	\$0	\$3,897,370	50.00%	CF: Certification of Public Expenditur				
University of Colorado School of Medicine Payment	\$155,996,320	\$0	\$45,389,025	\$32,609,135	\$77,998,160	50.00%	CF: Intergovernmental Transfer from Department of Higher Education RF: Department of Higher Education, Fee-for-service Contracts with Stat Institutions for Speciality Education Program				
Emergency Transportation Provider Payments	\$62,171,945	(\$3,486,461)	\$30,793,792	\$0	\$34,864,614	53.10%	CF: Certification of Public Expenditur				
Public School Health Services	(\$125,000)	(\$1,283,174)	\$0	\$1,158,174	\$0	N/A	RF: Public School Health Service				
Cash Funds Financing <sup>(1)</sup>	\$0	(\$27,641,771)	\$17,788,420	\$9,853,351	\$0	N/A	CF: Various, see Narrativ				
Financing Sub-Total	\$1,706,760,905	(\$132,699,432)	\$975,648,444	\$43,620,660	\$820,191,233						
Total Projected FY 2022-23 Expenditures <sup>(2)</sup>	\$10,032,481,775	\$2,844,981,519	\$1,338,463,371	\$43,620,660	\$5,805,416,225						
Definitions: FMAP: Federal Medical Assistance Percentage MA	GI: Modified Adjusted Gro	ss Income PACE: Program of	All-Inclusive Care for the I	Elderly ACA: Patient Protection	on and Affordable Care Act	of 2010 FPI	L: Federal Poverty Level FFP: Federal Financial Participation				

<sup>(1)</sup> This line adjusts for transfers from cash funds to the General Fund that are not broken out elsewhere. See Narrative for more information. (2) Of the General Fund total, \$84,491,394 is General Fund Exempt.

#### Exhibit B - Medicaid Caseload

						Fin	al Request									
				Official	Medicaid C	Caseload Actua	als and Proj	ection witho	ut Retroacti	vity						
Item	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
FY 2000-01 Actuals	33,135	5,092	46,386	-	23,515		-	-	109,816	-	12,474	6,174	-	9,065	7,597	253,254
FY 2001-02 Actuals		5,157	46,046	-	27,081	-	-	-	123,221	-	13,076	6,561	-	12,451	8,157	275,399
% Change from FY 2000-01	2.32%	4.76%	0.64%	-	22.34%	-	-	-	17.65%	-	6.45%	9.70%	-	1.39%	6.64%	12.32%
FY 2002-03 Actuals	34,704	5,431	46,647		40,798	-	-	47	169,311		13,967	7,823	-	4,084	8,988	331,800
% Change from FY 2001-02	2.32%	4.76%	0.64%	-	22.34%	-	-	-	17.65%		6.45%	9.70%	-	1.39%	6.64%	12.32%
FY 2003-04 Actuals	34,329 -1.08%	5,548 2.15%	46,789 0.30%		47,562 16.58%	-	-	105	195,279 15.34%		14,914	8,398 7.35%	-	4,793 17.36%	9,842 9,50%	367,559 10.78%
% Change from FY 2002-03			47,929			-	-	87	222,472		6.78% 15,795	5,984	-		9,50%	406,024
FY 2004-05 Actuals % Change from FY 2003-04	35,780 4.23%	6,082 9.63%	2,44%		57,140 20.14%	-	-	(0)	13.93%	-	5,91%	-28.74%	-	5,150 7.45%	-2.41%	10.46%
% Change from FY 2003-04 FY 2005-06 Actuals	36,207	6,042	47,855		58,885	-	-	188	214,158		16.460	5.119	-	6,212	11.092	402.218
% Change from FY 2004-05	1.19%	-0.66%	-0.15%	-	3.05%	-	-	116.09%	-3.74%	-	4.21%	-14.46%	-	20.62%	15.48%	-0.94%
FY 2006-07 Actuals	35,888	6,059	48,799		55,850			228	205,390		16,724	5,182		5,201	12,908	392,229
% Change from FY 2005-06	-0.88%	0.28%	1.97%		-5.15%			21.28%	-4.09%		1.60%	1.23%	_	-16.27%	16.37%	-2.48%
FY 2007-08 Actuals	36,284	6,146	49,933		53,473	-	_	270	204,022		17,141	6,288		4,191	14,214	391,962
% Change from FY 2006-07	1.10%	1.44%	2,32%	_	-4.26%	-	-	18.42%	-0.67%	_	2.49%	21.34%	_	-19.42%	10.12%	-0.07%
FY 2008-09 Actuals	37,619	6,447	51,355	-	61,874	_	-	317	235,129	-	18,033	6,976	-	3,987	15,075	436,812
% Change from FY 2007-08	3.68%	4.90%	2.85%	-	15.71%	-	-	17.41%	15.25%	-	5.20%	10.94%	-	-4.87%	6.06%	11.44%
FY 2009-10 Actuals	38,487	7,049	53,264	_	74,839	3,238	-	425	275,672	-	18,381	7,830	-	3,693	15,919	498,797
% Change from FY 2008-09	2.31%	9.34%	3.72%	-	20.95%		-	34.07%	17.24%	-	1.93%	12.24%	-	-7.37%	5.60%	14.19%
FY 2010-11 Actuals	38,921	7,767	56,285	-	81,114	27,167	-	531	302,410	-	18,393	7,868	-	3,213	17,090	560,759
% Change from FY 2009-10	1.13%	10.19%	5.67%	-	8.38%	7	-	24.94%	9.70%	-	0.07%	0.49%	-	-13.00%	7.36%	12.42%
FY 2011-12 Actuals	39,740	8,383	59,434	52	93,224	35,461	1,134	597	334,633	-	18,034	7,630	-	2,770	18,871	619,963
% Change from FY 2010-11	2.10%	7.93%	5.59%	-	14.93%	0	-	12.43%	10.66%	-	-1.95%	-3.02%	-	-13.79%	10.42%	10.56%
FY 2012-13 Actuals	40,827	9,051	61,920	888	99,392	41,545	10,634	623	359,843	8,236	17,777	8,024	344	2,684	21,206	682,994
% Change from FY 2011-12	2.74%	7.97%	4.18%	16		17.16%	8	115070	7.53%	-	-1.43%	5.16%	-	-3.10%	12.37%	10.17%
FY 2013-14 Actuals	41,836	9,853	64,424	2,560	,	47,082	87,243		399,032	25,345	18,267	13,160	1,057	2,481	23,378	860,957
% Change from FY 2012-13	2.47%	8.86%	4.04%	2	25.44%	13.33%	7	-10.27%	10.89%	2	2.76%	64.01%	2	-7.56%	10.24%	26.06%
FY 2014-15 Actuals	41,817	10,466	66,548	3,627	161,682	71,989	241,392	351	445,723	50,113	20,036	14,897	1,749		28,045	1,161,157
% Change from FY 2013-14	-0.05%	6.22%	3.30%	41.68%	29.68%	52.90%	176.69%	-37.21%	11.70%	1	9.68%	13.20%	1	9.71%	19.96%	34.87%
FY 2015-16 Actuals	42,403	10,529	68,800	6,217	163,342	86,964	320,374	322	467,193	59,501	19,935	14,413	1,759	2,649	32,585	1,296,986
% Change from FY 2014-15	1.40%	0.60%	3.38%	71.41%	1.03%	20.80%	32.72%	-8.26%	4.82%	18.73%	-0.50%	-3.25%	0.57%	-2.68%	16.19%	11.70%
FY 2016-17 Actuals % Change from FY 2015-16	43,941 3.63%	11,241 6,76%	67,619 -1.72%	6,251 0.55%	161,422 -1.18%	101,059 16,21%	347,848 8.58%	235 -27.02%	469,297 0.45%	64,907 9,09%	20,310 1.88%	13,567 -5.87%	1,968 11.88%	2,640 -0,34%	33,809 3,76%	1,346,114 3,79%
% Change from FY 2015-16  FY 2017-18 Actuals	45,907	11,797	67,531	8,175	179,853	74,610	352,607	-27.02% 155	438,772	64,346	21,473	10,125	2.229	2,809	34,828	1,315,217
% Change from FY 2016-17	43,907	4.95%	-0.13%	30.78%	11.42%	-26.17%	1.37%	-47.46%	-6.50%	-0.86%	5.73%	-25.37%	13.26%	6,40%	3.01%	-2.30%
FY 2018-19 Actuals	47,686	12,721	68,639	8,987	175,827	63,563	330,524	145	420,253	59,375	21,815	12,196	2.293	2,654	34,687	1,261,365
% Change from FY 2017-18	3.88%	7.83%	1.64%	9,93%	-2.24%	-14.81%	-6.26%	-6.45%	-4.22%	-7.73%	1.59%	20.45%	2.87%	-5.52%	-0.40%	-4.09%
FY 2019-20 Actuals	47,551	13.029	66,530	10,675	164.467	59,499	322,951	137	407,548	55,924	21.320	11.547	2.209	2,417	33,441	1,219,245
% Change from FY 2018-19	-0.28%	2.42%	-3.07%	18.78%	-6.46%	-6.39%	-2.29%	-5.52%	-3.02%	-5.81%	-2.27%	-5.32%	-3.66%	-8.93%	-3.59%	-3.34%
FY 2020-21 Projection	0.2070	13,435	65,964	14,580	172,515	81,695	381,763	144	438,020	65,834	20,887	13,150	3,448	3,953	34,990	1,358,679
% Change from FY 2019-20	1.58%	3.12%	-0.85%	36.58%	4.89%	37.30%	18.21%	5.11%	7.48%	17.72%	-2.03%	13,88%	56.09%	63.55%	4.63%	11.44%
FY 2021-22 Projection	48,558	13,669	69,462	13,742	204,182	80,208	405,854	144	427,055	65,926	21,100	14,443	3,508	3,483	35,269	1,406,603
% Change from FY 2020-21	0.53%	1.74%	5.30%	-5.75%	18.36%	-1.82%	6.31%	0.00%	-2.50%	0.14%	1.02%	9.83%	1.74%	-11.89%	0.80%	3.53%
FY 2022-23 Projection	50,169	14,143	71,157	15,305	245,688	83,255	454,361	145	454,905	73,738	21,472	16,166	3,652	3,611	37,047	1,544,812
% Change from FY 2021-22	3.32%	3.47%	2.44%	11.37%	20.33%	3.80%	11.95%	0.69%	6.52%	11.85%	1.76%	11.93%	4.10%	3.66%	5.04%	9.83%
FY 2020-21 Appropriation	61,658	17,000	83,905	14,501	204,569	80,379	403,669	168	510,371	72,241	27,464	14,039	2,759	3,111	42,067	1,537,901
Difference between the Total FY 2020-21		, and the second			ŕ	, and the same of			, i					, i		
Projection and Appropriation	(13,357)	(3,565)	(17,941)	79	(32,054)	1,316	(21,906)	(24)	(72,351)	(6,407)	(6,577)	(889)	689	842	(7,077)	(179,222)

#### Exhibit B - Medicaid Caseload Forecast

								Medicaid	Caseload F	Y 2009-10								
FY 2009-10	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2009	38,058	6,774	52,315	-	70,356	-	-	393	259,609	-	18,285	7,745	-	3,930	15,434	472,899	5,343	1.14%
August 2009	38,306	6,863	52,573	-	71,467	-	-	395	263,415	-	18,325	7,849	-	3,835	15,522	478,550	5,651	1.19%
September 2009	38,346	6,945	52,710	-		-	-	402	266,381	-	18,200	7,775	-	3,724	15,513	482,188	3,638	0.76%
October 2009	38,480	6,985	52,847	-	, , , , ,	-	-	406	270,514	-	-,	7,713	-	3,650	15,638	487,876	5,688	1.18%
November 2009	38,387	6,986	52,982	-	, -, - ,	-	-	418	272,453	-	17,992	7,674	-	3,644	15,743	490,236	2,360	0.48%
December 2009	38,410	7,025	53,000	-		-	-	411	275,867	-	18,371	7,627	-	3,632	15,846	495,309	5,073	1.03%
January 2010	38,452 38,432	7,047 7,049	53,255 53,298	-	,	-	-	416 431	279,000 279,898	-	18,400 18,467	7,796 7,779	-	3,610 3,550	15,954	500,333 502,194	5,024	1.01% 0.37%
February 2010 March 2010	38,432	7,049	53,298	-		-	-	431	283,625	-	18,486	7,779	-	3,768	16,076 16,212	502,194	1,861 7,006	1.40%
April 2010	38,397	7,132	53,904	-	80,192	-		449	285,746	-	18,486	8,054	-	3,768	16,212	512.978	3,778	0.74%
May 2010	38,754	7,212	54,164	-		18,253	-	455	285,740		18,651	8.039	_	3,615	16,285	527.027	14.049	2.74%
June 2010	38,900	7,326	54,493	-	72,608	20,607	-	466	285,778	-	18,678	7,903	_	3,522	16,495	526,776	(251)	-0.05%
	38,487	7,049		_	74,839	3,238	_	425			18,381	7,830		3,693	15,919	,	4,935	1.00%
Year-to-Date Average	38,48/	7,049	53,264	-	/4,839	3,238	-		275,672 Caseload F		18,381	/,830	-	3,093	15,919	498,797	4,935	1.00%
						MAGI		Medicald	Caseloau F	1 2010-11	1							
FY 2010-11	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	Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2010	39,382	7,395	54,740	-	, ,	21,446	-	471	287,674	-	18,628	7,909	-	3,492	16,539	531,445	4,669	0.89%
August 2010	38,648	7,492	55,032	-	,,,,,,,,	24,193	-	493	290,871	-	18,455	8,014	-	3,378	16,634	539,073	7,628	1.44%
September 2010	38,774	7,562	55,223	-	76,255	25,071	-	503	291,592	-	18,451	7,971	-	3,231	16,652	541,285	2,212	0.41%
October 2010	38,901	7,602	55,508	-		26,016	-	505	294,155	-	18,464	7,985	-	3,080	16,794	546,301	5,016	0.93%
November 2010	39,009	7,682	55,804	-	78,278	26,924	-	511	296,482	-	18,597	7,891	-	3,049	16,941	551,168	4,867	0.89%
December 2010	38,769	7,721	55,937	-	,	27,596	-	526	299,499	-	18,510	7,764	-	3,023	17,002	556,120	4,952	0.90%
January 2011	38,813 38,823	7,781 7,870	56,417	-	82,824 83,547	27,188 28,323	-	532 535	304,042 307.032	-	18,386 18,200	7,806	-	3,116	17,210 17,249	564,115 569,088	7,995 4,973	1.44% 0.88%
February 2011 March 2011	38,939	7,870	56,671 57,103	-		28,323	-	556	312,300	-	18,200	7,677 7,881	-	3,161 3,271	17,249	578.192	9,104	1.60%
April 2011	38,861	7,987	57,385	-	85,763	29,451	-	569	312,603	-		7,864	-	3,274	17,390	579,436	1,244	0.22%
May 2011	38,981	8,051	57,608	-		30,102	_	587	315,116	-	18,279	7,830	_	3,255	17,546	583,951	4,515	0.78%
June 2011	39,154	8,089	57,986	_		30,724		589	317,551		,	7,830	_	3,229	17,727	588,925	4,974	0.85%
Year-to-Date Average	38,921	7,767	56,285	-		27,167	_	531	302,410		18,393	7,868	_	3,213	17,090	560,759	5,179	0.94%
Teat-to-Date Average	30,721	7,707	30,203	-	01,114	27,107	-		Caseload F	V 2011 12	18,333	7,000	-	3,213	17,090	300,739	3,179	0.54 /6
	1					MAGI				Y 2011-12				I	1			
FY 2011-12	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	Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2011	39,341	8,133	58,294	-	87,556	31,920	-	587	319,065	-	18,125	7,810	-	3,089	17,923	591,843	2,918	0.50%
August 2011	39,537	8,222	58,712	-	/	32,462	-	586	322,779	-	18,084	7,786	-	2,973	18,046	597,705	5,862	0.99%
September 2011	39,600	8,280	58,937	-		33,152	-	590	325,673	-	18,119	7,628	-	2,774	18,156	602,910	5,205	0.87%
October 2011	39,697 39,789	8,328 8,343	59,159 59,298	-	. ,	33,838	-	592 602	328,632	-	18,096 18,077	7,558	-	2,657	18,314 18,584	608,533	5,623	0.93% 0.92%
November 2011 December 2011	39,789	8,343 8,355	59,298	-	, -,	34,915 34,886	-	606	332,183 336,053	-	18,077	7,371 7,333	-	2,543 2,591	18,584	614,146 620,799	5,613 6,653	1.08%
	39,843	8,333	59,384	-		34,886	-	603	336,033	-	17,968	7,333	-	2,591	18,798	620,799	(257)	-0.04%
	37,742			-	93,323	35,962	-	604	339,523	-	17,863	7,594	-	2,636	19,220	626,106	5,564	0.90%
January 2012 February 2012	30 800	× 401	59.635					004	227,243	_	17,003	1,374					2,204	
February 2012	39,800 39,849	8,401 8 445	59,635 59,847	- 51	. ,		_	604	341 274	_	17 930	7 734	_	2.852	19 466	632 511	6.405	1.02%
February 2012 March 2012	39,849	8,445	59,847	51	97,318	37,141	-	604 596	341,274 341,546	-	17,930 17,944	7,734 7,705	-	2,852	19,466 19,396	632,511	6,405 (1.812)	1.02%
February 2012 March 2012 April 2012	39,849 39,837	8,445 8,507	59,847 59,970	133	97,318 94,317	37,141 37,902	-	596	341,546	-	17,944	7,705		2,846	19,396	630,699	(1,812)	-0.29%
February 2012 March 2012	39,849	8,445	59,847		97,318 94,317 95,581	37,141	5,860 7,753								,			

#### Exhibit B - Medicaid Caseload Forecast

								Medicaid	Caseload F	Y 2012-13								
FY 2012-13	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2012	40,117	8,689	60,389	338	93,088	38,961	9,652	607	348,510	-	17,959	7,824	-	2,764	20,117	649,015	(2,107)	
August 2012	40,460	8,771	60,680	445	94,777	39,881	9,675	612	351,537	-	17,932	7,864	-	2,744	20,418	655,796	6,781	1.04%
September 2012	40,468	8,877	60,934	539	95,151	39,689	9,880	610	355,312	-	18,004	7,677	-	2,609	20,615	660,365	4,569	
October 2012	40,773	8,949 8,997	61,303	640 753	96,113 98,333	40,302 41,895	9,969	615 615	353,524 356,897	-	18,000 17,967	7,691 7,600	-	2,569 2,546	20,766 20,998	661,214	7,989	0.13% 1.21%
November 2012 December 2012	41,059 41,034	9,077	61,571 61,699	857	98,333	40,442	9,972 9,798	616	361,446	-	17,898	7,600	-	2,546	21,221	669,203 671,879	2,676	0.40%
January 2013	41,066	9,077	61,803	988	99,404	40,442	9,777	613	361,220	5,223	17,720	8,250	437	2,655	21,366	680,513	8,634	1.29%
February 2013	41,000	9,152	62,245	1,056	101,305	42,236	9,959	608	362,024	13,463	17,673	8,322	531	2,666	21,532	693,865	13,352	1.96%
March 2013	40,697	9,130	62,485	1,125	100,247	42,110	9,621	618	363,012	18,263	17,619	8,311	636	2,733	21,530	698,137	4,272	
April 2013	40,898	9,222	62,976	1,232	101,576	42,997	12,076	639	364,317	20,016	17,598	8,477	730	2,798	21,738	707,290	9,153	1.31%
May 2013	41,108	9,295	63,416	1,318	106,147	45,535	12,462	659	366,710	21,546	17,257	8,346	938	2,848	22,000	719,585	12,295	1.74%
June 2013	41,153	9,358	63,540	1,368	108,773	43,600	14,772	659	373,604	20,327	17,691	8,457	863	2,739	22,170	729,074	9,489	1.32%
Year-to-Date Average	40,827	9,051	61,920	888	99,392	41,545	10,634	623	359,843	8,236	17,777	8,024	344	2,684	21,206	682,994	6,496	0.95%
								Medicaid	Caseload F	Y 2013-14								
FY 2013-14	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2013	41,243	9,466	63,919	1,494	105,843	43,321	16,073	660	379,057	11,487	17,652	9,053	334	2,754	22,368	724,724	(4,350)	-0.60%
August 2013	41,540	9,538	64,281	1,616	106,672	45,336	17,388	648	382,925	8,984	17,659	9,219	186	2,562	22,539	731,093	6,369	0.88%
September 2013	41,696	9,641	64,309	1,692	110,929	43,247	20,951	645	394,462	4,348	17,619	9,240	105	2,511	22,690	744,085	12,992	1.78%
October 2013	41,861	9,709	64,151	2,200	111,274	37,094	19,168	639	382,709	11,153	17,675	13,079	549	2,392	22,299	735,952	(8,133)	-1.09%
November 2013	42,098	9,748	64,396	2,749	112,290	41,332	17,976	547	386,326	18,980	17,712	13,740	1,022	2,352	22,539	753,807	17,855	2.43%
December 2013	42,265	9,797	64,478	2,690	119,836	40,228	17,092	540	389,900	28,057	17,793	14,140	1,293	2,311	22,534	772,954	19,147	2.54%
January 2014	41,861	9,838	64,838	2,217	122,548	40,659	120,068	543	398,421	29,967	17,684	14,582	1,390	2,309	22,740	889,665	116,711	15.10%
February 2014	42,003	9,919	64,798	3,146	129,759	51,272	125,369	527 498	403,888	33,263	17,744	14,691	1,471	2,374	23,302	923,526	33,861	3.81% 5.79%
March 2014 April 2014	42,145 41,762	10,027 10,129	64,312 64,148	3,188 3,288	138,165 144,089	53,923 55,524	157,246 171,950	498	408,290 415,666	38,398 39,128	17,704 19,526	14,991 15,093	1,596 1,559	2,426 2,467	24,063 24,662	976,972 1,009,483	53,446 32,511	3.33%
May 2014	41,762	10,129	64,492	3,257	145,211	54,497	171,930	492	420,786	39,128	20.168	15,095	1,549	2,487	25,120	1,009,483	12,262	1.21%
June 2014	41,564	10,162	64,968	3,186	149,545	58,549	186,802	477	425,952	40,754	20,168	15,007	1,634	2,487	25,676	1,047,466	25,721	2.52%
Year-to-Date Average	41,836	9,853	64,424	2,560	124,680	47,082	87,243	559	399,032	25,345	18,267	13,160	1,057	2,481	23,378	860,957	26,533	
rear-to-Date Average	41,030	7,033	04,424	2,500	124,000	47,002	07,243		Caseload F		10,207	13,100	1,057	2,401	23,370	000,757	20,555	3.1470
FY 2014-15	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2014	41,551	10,346	65,459	3,065	153,837	60,981	194,454	472	431,203	41,550	20,190	15,038	1,672	2,551	25,963	1,068,332	20,866	1.99%
August 2014	42,513	10,350	65,785	2,971	156,343	62,711	202,825	463	436,077	42,750	20,213	15,436	1,800	2,494	26,347	1,089,078	20,746	
September 2014	42,643	10,362	66,054	2,925	159,740	63,847	210,970	439	438,991	44,001	20,124	15,386	1,854	2,474	26,787	1,106,597	17,519	
October 2014	41,763	10,355	66,009	2,927	160,707	65,552	218,403	424	442,075	45,249	20,187	14,938	1,769	2,533	27,229	1,120,120	13,523	1.22%
November 2014	41,918	10,341	66,343	3,023	158,375	66,811	222,465	425	442,141	46,654	20,140	14,691	1,733	2,444	27,601	1,125,105	4,985	0.45%
December 2014	41,927	10,404	66,441	3,556	162,727	70,288	237,045	396	446,354	47,275	20,056	14,542	1,675	2,541	27,944	1,153,171	28,066	2.49%
January 2015	41,392 41,334	10,395 10,532	66,758 66,651	3,772	160,406 161,480	76,807 78,910	247,056	379 368	444,669 446,886	53,548	19,951 19,932	14,590 14,643	1,772 1,795	2,811 2,775	28,226 28,158	1,172,532 1,194,129	19,361 21,597	1.68% 1.84%
February 2015 March 2015	41,334	10,532	66,974	4,112 4,226	161,480	/8,910 80,068	261,108 267,714	368	446,886	55,445 56,155	19,932	14,643	1,795	2,775	28,158	1,194,129	15,783	1.84%
April 2015	41,518	10,615	67,110	4,226	165,835	79,437	273,043	361	450,778	55,565	19,925	14,804	1,810	3,096	28,332	1,209,912	12,079	1.32%
May 2015	41,778	10,703	67,261	4,161	167,183	79,437	278,709	358	456,426	56,104	19,982	14,934	1,743	3,070	30,224	1,232,065	10,074	0.82%
June 2015	41,778	10,703	67,726	4,509	169,912	79,036	282,910	352	457,855	57,059	19,791	14,822	1,665	2,885	30,560	1,241,434	9,369	0.76%
Year-to-Date Average	41,817	10,365	66,548	3,627	161,682	71,989	241,392	400	445,723	50,113	20,036	14,897	1,749	2,722	28,045	1,161,206	16,164	
	,0.7	20,.00	20,010	2,027		,1,,0,	- 11,072		,, 25	, ,,,,,,,	20,000	2.,027	2,, 1)			-,101,200	10,104	11.10 /0

Exhibit B - Medicaid Caseload Forecast

								Medicaid	Caseload F	Y 2015-16								
FY 2015-16	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2015	41,661	10,437	72,760	5,670	169,316	79,502	287,183	344	454,996	56,220	19,578	14,627	1,596	2,774	30,877	1,247,541	6,107	0.49%
August 2015	41,909	10,423	71,167	9,733	169,140	81,001	293,155	342	457,343	57,355	19,676	14,466	1,615	2,699	31,244	1,261,268	13,727	1.10%
September 2015	42,134	10,348	68,765	10,175	169,127	82,010	297,680	342	461,317	58,330	19,776	14,204	1,614	2,635	31,278	1,269,735	8,467	0.67%
October 2015	41,817	10,190	68,576	6,030	167,734	82,642	302,362	336	466,623	58,336	19,814	13,139	1,568	2,491	31,293	1,272,951	3,216	0.25%
November 2015	42,456	10,429	69,113	5,539	162,975	85,784	310,294	324	466,734	59,640	19,936	14,428	1,743	2,605	31,903	1,283,903	10,952	0.86%
December 2015	42,628	10,451	68,813	5,717	163,088	87,548	320,093	318	469,009	59,867	19,975	14,252	1,846	2,616	32,143	1,298,364	14,461	1.13%
January 2016	42,301	10,462	67,571	5,311	162,764	88,891	327,653	314	470,109	59,934	19,987	14,399	1,811	2,593	33,921	1,308,021	9,657	0.74%
February 2016	42,504	10,531	67,298	5,393	162,650	89,610	331,622	310	470,758	59,950	19,963	14,381	1,846	2,631	33,939	1,313,386	5,365	0.41%
March 2016	42,733	10,664	67,979	5,424	163,417	90,244	335,451	311	472,221	60,614	20,028	14,619	1,856	2,722	33,442	1,321,725	8,339	0.63%
April 2016	42,778	10,749	67,828	5,192	161,967	90,644	340,862	308	472,964	60,790	20,133	14,675	1,846	2,675	33,478	1,326,889	5,164	0.39%
May 2016	42,900	10,788	67,842	5,152	155,252	92,385	347,731	308	472,199	61,169	20,196	14,884	1,870	2,707	33,693	1,329,076	2,187	0.16%
June 2016	43,015	10,876	67,891	5,265	152,679	93,307	350,396	304	472,050	61,808	20,162	14,883	1,893	2,635	33,813	1,330,977	1,901	0.14%
Year-to-Date Average	42,403	10,529	68,800	6,217	163,342	86,964	320,374	322	467,193	59,501	19,935	14,413	1,759	2,649	32,585	1,296,986	7,462	0.58%
								Medicaid	Caseload F	Y 2016-17								
FY 2016-17	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
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	(3,057)	-0.23%
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	10,772	0.81%
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	(3,789)	-0.28%
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	(2,769)	-0.21%
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	9,264	0.70%
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	2,306	0.17%
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	275	0.02%
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	(3,890)	-0.29%
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	13,680	1.02%
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	8,689	0.64%
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	6,645	0.49%
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	(3,163)	-0.23%
Year-to-Date Average	43,941	11,241	67,619	6,251	161,422	101,059	347,848	295	469,297	64,907	20,310	13,567	1,968	2,640	33,809	1,346,174	2,914	0.22%
FY 2017-18	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%	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2017	44,896	11,410	67,009	7,274	181,640	FPL 82,329	370,674	150	457,780	65,467	20,651	11,545	2,177	2,925	34,833	1,360,760	(5,180)	-0.38%
August 2017	45,233	11,410	67,009	7,274	182,123	83,011	374,722	145	457,780	66,362	20,804	11,069	2,177	2,923	35,078	1,366,880	6,120	0.45%
September 2017	45,431	11,486	66,918	7,462	182,123	82,088	376,011	132	457,326	66,778	20,804	10,343	2,119	2,937	35,078	1,366,880	(5,706)	-0.42%
October 2017	45,606	11,558	66,985	7,797	179,385	73,998	350,968	132	444,507	67,110	21,093	9,948	2,197	2,842	34,883	1,319,016	(42,158)	-3.10%
November 2017	45,824	11,643	67,142	7,797	179,383	71,489	350,968	149	441,219	66,946	21,305	9,948	2,197	2,716	34,883	1,313,234	(5,782)	-0.44%
December 2017	45,985	11,718	67,066	8,204	179,730	72,942	356,175	151	439,244	66,517	21,485	9,138	2,154	2,716	35,001	1,318,334	5,100	0.39%
January 2018	46,005	11,718	67,365	8,438	180,335	69,709	345,699	157	437,341	66,260	21,576	9,238	2,104	2,704	34,842	1,303,683	(14,651)	-1.11%
February 2018	46,003	11,860	67,688	8,663	180,333	70,071	345,064	165	433,460	64,494	21,701	9,238	2,202	2,704	34,868	1,298,809	(4,874)	-0.37%
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	2,216	2,763	34,817	1,294,260	(4,549)	-0.35%
April 2018	46,302	12,054	67,963	8,698	177,031	73,217	337,958	169	423,241	59,499	21,947	9,967	2,210	2,823	34,553	1,277,738	(16,522)	-1.28%
May 2018	46,534	12,034	68,152	8,842	177,031	72,831	338,829	165	423,241	58,572	22,153	10.082	2,363	2,930	34,463	1,276,946	(792)	-0.06%
June 2018	46,991	12,136	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	14.824	1.16%
Year-to-Date Average	45,907	11,797	67,531	8,175	. ,	74,610	352,607	155	438,772	64,346	, , , ,	10,125	2,403	2,809	34,828	1,315,217	(6,181)	-0.46%
Notes:	73,707	11,/9/	07,331	0,1/3	177,033	/4,010	332,007	133	730,772	07,340	21,4/3	10,123	2,223	2,009	37,040	1,313,217	(0,101)	-0.40 /0
Due to rounding, the av	erage monthly	totals may diffe	er slightly from	annual totals i	eported elsewh	ere.												
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Exhibit B - Medicaid Caseload Forecast

								Medicaid	Caseload F	Y 2018-19								
FY 2018-19	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
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	(610)	-0.05%
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	3,199	0.25%
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	1,459	0.11%
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	(11,958)	-0.92%
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	(14,631)	-1.14%
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	(6,934)	-0.55%
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	(8,311)	-0.66%
February 2019	47,571	12,675	68,711	9,249	173,809	61,050	327,212	148	416,362	60,720	21,794	11,977	2,312	2,580	34,608	1,250,778	(3,206)	-0.26%
March 2019	47,704	12,773	68,259	9,213	171,958	60,326	325,645	140	415,610	59,487	21,720	12,097	2,312	2,650	34,426	1,244,320	(6,458)	-0.52%
April 2019	47,704	12,818	67,927	9,255	170,750	59,944	317,866	131	414,766	56,610	21,706	12,220	2,184	2,706	34,273	1,230,860	(13,460)	-1.08%
May 2019	48,018	12,880	67,913	9,305	169,791	59,887	318,368	131	415,174	55,887	21,693	12,140	2,190	2,713	34,284	1,230,374	(486)	-0.04%
June 2019	48,125	12,994	67,901	9,415	169,089	59,246	320,219	131	414,330	55,169	21,705	12,112	2,239	2,665	33,999	1,229,339	(1,035)	-0.08%
Year to date Average	47,686	12,721	68,639	8,987	175,827	63,563	330,525	145	420,253	59,376	21,815	12,196	2,293	2,654	34,687	1,261,365	(5,203)	-0.41%
Notes:																		

Due to rounding, the average monthly totals may differ slightly from annual totals reported elsewhere.

. Due to founding, the av	erage mommy	totalo may um	i siigiitiy iroiii	umuu totuis i	eported else iii			Medicai	d Caseload FY	Y 2019-20								
FY 2019-20	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL	Monthly Growth	Monthly Growth Rate
July 2019	48,316	13,013	67,860	9,613	168,544	58,061	316,042	127	412,451	54,796	21,628	12,333	2,201	2,720	33,847	1,221,552	(8,822)	-0.72%
August 2019	48,446	12,992	67,557	9,583	167,960	57,931	318,314	131	410,883	54,394	21,674	11,967	2,127	2,531	34,059	1,220,549	(1,003)	-0.08%
September 2019	48,386	13,012	67,382	9,644	167,359	57,640	320,213	136	409,522	54,464	21,595	11,716	2,094	2,376	33,890	1,219,429	(1,120)	-0.09%
October 2019	48,434	12,986	67,105	9,740	165,851	58,277	319,577	146	407,413	55,221	21,599	11,490	2,075	2,386	33,914	1,216,214	(3,215)	-0.26%
November 2019	47,574	12,898	66,382	9,841	164,578	58,658	320,755	144	405,220	56,378	21,579	11,081	2,146	2,274	33,566	1,213,074	(3,140)	-0.26%
December 2019	47,575	12,914	66,059	10,140	161,286	59,126	319,312	136	404,097	56,938	21,585	10,832	2,129	2,219	33,218	1,207,566	(5,508)	-0.45%
January 2020	47,095	12,981	66,551	10,244	160,061	58,152	315,372	136	400,649	57,319	21,458	10,842	2,191	2,270	33,011	1,198,332	(9,234)	-0.76%
February 2020	46,391	13,005	66,189	10,277	159,654	57,851	315,302	131	398,833	56,886	20,978	10,763	2,187	2,249	32,739	1,193,435	(4,897)	-0.41%
March 2020	46,567	12,976	65,220	11,546	159,152	56,350	313,931	139	398,268	56,165	20,896	11,088	2,190	2,376	32,749	1,189,613	(3,822)	-0.32%
April 2020	46,928	13,042	65,016	13,004	164,601	58,902	327,329	136	406,330	53,847	20,928	11,807	2,112	2,374	33,080	1,219,436	29,823	2.51%
May 2020	47,372	13,205	66,253	12,220	167,303	63,964	340,281	141	415,595	56,473	20,955	12,221	2,417	2,495	33,409	1,254,304	34,868	2.86%
June 2020	47,528	13,325	66,783	12,252	167,257	69,076	348,982	144	421,306	58,208	20,960	12,424	2,639	2,732	33,815	1,277,431	23,127	1.84%
Year to date Average	47,553	13,002	66,507	10,532	164,214	58,628	320,584	137	406,296	55,716	21,352	11,467	2,170	2,388	33,407	1,213,955	2,175	0.18%

Exhibit C - History and Projections of Per Capita Costs

						Per Capita	Costs - Cash	Based								
Fiscal Year	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2000-01		\$12,003.09	\$9,720.35	-	\$3,774.54	-	-	-	\$1,762.52	-	\$2,464.84	\$5,102.62	-	\$4,073.91	\$1,029.73	\$5,593.34
FY 2001-02	,		\$10,099.20	-	\$3,848.75	-	-	-	\$1,790.01	-	\$2,539.49	\$5,173.99	-	\$3,162.19	\$995.28	\$5,580.33
% Change from FY 2000-01	9.15%	-0.99%	3.90%	-	1.97%	-	-	-	1.56%	-	3.03%	1.40%	-	-22.38%	-3.35%	-0.23%
FY 2002-03	,		\$11,071.22	-	\$3,425.30		-	30,399.56	\$1,346.59	-	\$2,689.77	\$5,435.44	-	\$11,932.93	\$882.68	\$4,977.91
% Change from FY 2001-02	-4.13%	0.22%	9.62%	-	-11.00%	-	-	-	-24.77%	-	5.92%	5.05%	-	277.36%	-11.31%	-10.80%
FY 2003-04		\$13,629.55	\$11,928.04	-	\$3,858.31	-	-	25,417.70	\$1,187.37	-	\$3,037.79	\$7,621.82	-	\$11,504.23	\$961.96	\$5,010.73
% Change from FY 2002-03	10.30%	14.44%	7.74%	-	12.64%	-	-	-	-11.82%	-	12.94%	40.22%	-	-3.59%	8.98%	0.66%
FY 2004-05		\$13,289.25	\$11,185.17	-	\$3,358.68	-	-	\$28,627.25	\$1,361.10	-	\$2,944.32	\$7,040.94	-	\$8,682.52	\$1,137.98	\$4,662.99
% Change from FY 2003-04	-1.12%	-2.50%	-6.23%	-	-12.95%	-	-	-	14.63%	-	-3.08%	-7.62%	-	-24.53%	18.30%	-6.94%
FY 2005-06		\$14,352.34	\$11,548.70	-	\$3,390.82		-	\$36,225.53	\$1,476.94	-	\$2,993.56	\$8,031.97	-	\$8,904.59	\$1,204.47	\$4,928.66
% Change from FY 2004-05	2.91%	8.00%	3.25%	-	0.96%		-	26.54%	8.51%	-	1.67%	14.08%	-	2.56%	5.84%	5.70%
FY 2006-07		\$14,870.06	\$11,712.50	-	\$3,664.68		-	\$24,376.09	\$1,608.92	-	\$3,210.70	\$9,371.52	-	\$10,470.57	\$1,313.15	\$5,222.55
% Change from FY 2005-06	2.61%	3.61%	1.42%	-	8.08%		-	-32.71%	8.94%	-	7.25%	16.68%	-	17.59%	9.02%	5.96%
FY 2007-08	,	\$16,382.42	\$13,078.77	-	\$3,872.69	-	-	\$26,305.08	\$1,780.61	-	\$3,739.87	\$8,670.42	-	\$12,797.32	\$1,333.66	\$5,681.77
% Change from FY 2006-07	3.64%	10.17%	11.67%	-	5.68%	-	-	7.91%	10.67%	-	16.48%	-7.48%	-	22.22%	1.56%	8.79%
FY 2008-09		\$17,762.70	\$14,251.48	-	\$3,858.15	-	-	\$22,261.37	\$1,836.99	-	\$3,748.13	\$8,702.15	-	\$14,858.01	\$1,254.95	\$5,742.83
% Change from FY 2007-08	6.50%	8.43%	8.97%	-	-0.38%	-	-	-15.37%	3.17%	-	0.22%	0.37%	-	16.10%	-5.90%	1.07%
FY 2009-10		\$15,862.64	\$13,373.23	-	\$3,355.09	689.29	-	\$20,511.28	\$1,632.88	-	\$3,536.01	\$8,401.86	-	\$12,655.02	\$1,213.77	\$4,975.87
% Change from FY 2008-09	-5.92%	-10.70%	-6.16%	-	-13.04%	-	-	-7.86%	-11.11%	-	-5.66%	-3.45%	-	-14.83%	-3.28%	-13.36%
FY 2010-11			\$14,635.16	-	\$3,519.43	2,316.20	-	\$19,033.37	\$1,711.49	-	\$4,014.76	\$8,894.53	-	\$14,661.32	\$1,428.00	\$5,063.72
% Change from FY 2009-10	4.53%	7.84%	9.44%	-	4.90%	2.36	-	-7.21%	4.81%	-	13.54%	5.86%	-	15.85%	17.65%	1.77%
FY 2011-12		\$16,955.03	\$14,209.99	8,877.60	\$3,311.46	\$2,423.80	2,185.53	\$17,216.60	\$1,569.28	-	\$3,783.82	\$8,354.70	-	\$15,148.44	\$1,298.38	\$4,717.85
% Change from FY 2010-11	-0.18%	-0.88%	-2.91%	-	-5.91%	0.05	-	-9.55%	-8.31%	-	-5.75%	-6.07%	-	3.32%	-9.08%	-6.83%
FY 2012-13		\$16,956.24	\$14,026.17	13,583.69	\$3,305.17	\$2,332.34	5,389.53	\$15,345.22	\$1,589.28	1,829.27	\$3,794.33	\$9,068.38	8,340.08	\$16,302.95	\$1,196.39	\$4,634.75
% Change from FY 2011-12	1.35%	0.01%	-1.29%	-	-0.19%	-3.77%	1.47	-10.87%	1.27%	-	0.28%	8.54%	-	7.62%	-7.86%	-1.76%
FY 2013-14	. ,	\$17,530.57	\$15,039.24	\$11,481.79		\$2,399.40	\$3,765.62	\$15,885.67	\$1,708.01	1,560.48	\$4,167.05	\$9,367.38	8,228.78	\$15,522.95	\$1,313.55	\$4,514.26
% Change from FY 2012-13	4.05%	3.39%	7.22%	(0.15)	-9.95%	2.88%	(0.30)	3.52%	7.47%	(0.15)	9.82%	3.30%	(0.01)	-4.78%	9.79%	-2.60%
FY 2014-15		\$18,735.69	\$15,295.11	\$7,186.24	\$3,015.26	\$2,473.13	\$3,874.08	\$14,511.89	\$1,807.89	\$1,478.91	\$4,193.20	\$10,491.56	\$9,453.25		\$1,112.16	\$4,318.64
% Change from FY 2013-14	7.26%	6.87%	1.70%	-37.41%	1.30%	3.07%	2.88%	-8.65%	5.85%	(0.05)	0.63%	12.00%	0.15	-4.05%	-15.33%	-4.33%
FY 2015-16			\$16,194.70	\$6,650.61	\$3,029.23	\$2,535.22	\$3,785.54	\$12,069.41	\$1,869.77	\$1,587.21	\$4,278.39	\$10,893.62	\$9,738.80		\$1,221.39	\$4,337.47
% Change from FY 2014-15	5.24%	4.81%	5.88%	-7.45%	0.46%	2.51%	-2.29%	-16.83%	3.42%	7.32%	2.03%	3.83%	3.02%	-0.20%	9.82%	0.44%
FY 2016-17		\$18,293.22	\$15,841.14	\$6,440.25	\$2,610.67	\$2,251.49	\$3,369.48	\$16,424.67	\$1,781.22	\$1,469.20	\$4,006.46	\$9,776.69	\$7,846.10		\$1,214.58	\$4,125.14
% Change from FY 2015-16	10.02%	-6.84%	-2.18%	-3.16%	-13.82%	-11.19%	-10.99%	36.09%	-4.74%	-7.44%	-6.36%	-10.25%	-19.43%	3.83%	-0.56%	-4.90%
FY 2017-18	,	\$19,876.85	\$18,599.03	\$7,571.35	\$3,060.26	\$2,838.12	\$3,832.79	\$19,630.33	\$2,087.71	\$1,733.99	\$4,700.88	\$12,038.30	\$9,280.43		\$1,253.68	\$4,800.53
% Change from FY 2016-17	4.72%	8.66%	17.41%	17.56%	17.22%	26.06%	13.75%	19.52%	17.21%	18.02%	17.33%	23.13%	18.28%	18.98%	3.22%	16.37%
FY 2018-19	,		\$19,903.76	\$7,802.41	\$2,878.96	\$2,638.53	\$3,810.42	\$15,387.10	\$2,137.19	\$1,659.58	\$4,900.30	\$11,331.24	\$8,839.13	\$16,077.50	\$1,392.64	\$5,000.93
% Change from FY 2017-18	-1.15%	6.99%	7.02%	3.05%	-5.92%	-7.03%	-0.58%	-21.62%	2.37%	-4.29%	4.24%	-5.87%	-4.76%	-12.44%	11.08%	4.17%
FY 2019-20		\$22,490.22	\$21,332.52	\$7,960.71	\$3,038.20	\$2,930.67	\$4,221.88	\$19,227.34	\$2,200.36	\$1,749.44	\$5,077.18	\$11,679.09	\$8,947.44		\$1,472.66	\$5,424.85
% Change from FY 2018-19	9.17%	5.75%	7.18%	2.03%	5.53%	11.07%	10.80%	24.96%	2.96%	5.41%	3.61%	3.07%	1.23%		5.75%	8.48%
FY 2020-21 Projection			\$24,170.92	\$7,952.01	\$3,193.22	\$3,097.59	\$4,203.17	\$23,653.72	\$2,298.71	\$1,785.96	\$5,427.58	\$12,329.41	\$9,674.72		\$1,487.13	\$5,448.28
% Change from FY 2019-20	-2.44%	-2.75%	13.31%	-0.11%	5.10%	5.70%	-0.44%	23.02%	4.47%	2.09%	6.90%	5.57%	8.13%	25.85%	0.98%	0.43%
FY 2021-22 Projection			\$24,342.80	\$8,312.53	\$3,019.78	\$2,997.01	\$4,000.61	\$20,975.04	\$2,346.88	\$1,808.90	\$5,541.82	\$11,933.92	\$9,722.73		\$1,541.41	\$5,415.24
% Change from FY 2020-21	3.20%	0.61%	0.71%	4.53%	-5.43%	-3.25%	-4.82%	-11.32%	2.10%	1.28%	2.10%	-3.21%	0.50%	-20.93%	3.65%	-0.61%
FY 2022-23 Projection			\$25,294.05	\$8,565.19	\$3,022.75	\$3,060.50	\$4,032.57	\$19,828.77	\$2,384.60	\$1,826.21	\$5,658.83	\$12,042.21	\$9,823.06		\$1,575.41	\$5,389.47
% Change from FY 2021-22	2.19%	2.59%	3.91%	3.04%	0.10%	2.12%	0.80%	-5.46%	1.61%	0.96%	2.11%	0.91%	1.03%	1.17%	2.21%	-0.48%
Notes:																

<sup>1.</sup> This exhibit does not include supplemental payments, outstationing payments, or upper payment limit financing.

<sup>2.</sup> See narrative for a description of events that alter trends.

Exhibit C - History and Projections of Per Capita Costs

					Per C	Capita Costs - A	djusted for	Payment D	elays							
Fiscal Year	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	Eligible Children (AFDC- C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2000-01	\$15,548.92	\$12,003.09	\$9,720.35	-	\$3,774.54	-	-	-	\$1,762.52	-	\$2,464.84	\$5,102.62	-	\$4,073.91	\$1,029.73	\$5,593.34
FY 2001-02	\$16,971.24	\$11,883.75	\$10,099.20	-	\$3,848.75	-	-	-	\$1,790.01	-	\$2,539.49	\$5,173.99	-	\$3,162.19	\$995.28	\$5,580.33
% Change from FY 2000-01	9.15%	-0.99%	3.90%	-	1.97%	-	-	-	1.56%	-	3.03%	1.40%	-	-22.38%	-3.35%	-0.23%
FY 2002-03	,	\$11,909.35		-	\$3,425.30	-	-	30,399.56	\$1,346.59	-	\$2,689.77	\$5,435.44	-	\$11,932.93	\$882.68	\$4,977.91
% Change from FY 2001-02	-4.13%	0.22%	9.62%	-	-11.00%	-	-	-	-24.77%	-	5.92%	5.05%	-	277.36%	-11.31%	-10.80%
FY 2003-04		\$13,629.55		-	\$3,858.31	-	-	25,417.70	\$1,187.37	-	\$3,037.79	\$7,621.82	-	\$11,504.23	\$961.96	\$5,010.73
% Change from FY 2002-03	10.30%	14.44%	7.74%	-	12.64%	-	-	(0.16)	-11.82%	-	12.94%	40.22%	-	-3.59%	8.98%	0.66%
FY 2004-05	\$17,743.75	\$13,289.25		-	\$3,358.68	-	-	\$28,627.25	\$1,361.10	-	\$2,944.32	\$7,040.94	-	\$8,682.52	\$1,137.98	\$4,662.99
% Change from FY 2003-04	-1.12%	-2.50%	-6.23%	-	-12.95%	-	-	0.13	14.63%	-	-3.08%	-7.62%	-	-24.53%	18.30%	-6.94%
FY 2005-06	\$18,260.97	\$14,352.34	\$11,548.70	-	\$3,390.82	-	-	\$36,225.53	\$1,476.94	-	\$2,993.56	\$8,031.97	-	\$8,904.59		\$4,928.66
% Change from FY 2004-05	2.91%	8.00%	3.25%	-	0.96%	-	-	26.54%	8.51%	-	1.67%	14.08%	-	2.56%	5.84%	5.70%
FY 2006-07	\$18,736.83	\$14,870.06	\$11,712.50		\$3,664.68	-	-	\$24,376.09	\$1,608.92	-	\$3,210.70	\$9,371.52	-	\$10,470.57	\$1,313.15	\$5,222.55
% Change from FY 2005-06	2.61%	3.61%	1.42%	-	8.08%	-	-	-32.71%	8.94%	-	7.25%	16.68%	-	17.59%	9.02%	5.96%
FY 2007-08	\$19,419.11	\$16,382.42	\$13,078.77	-	\$3,872.69	-	-	\$26,305.08	\$1,780.61	-	\$3,739.87	\$8,670.42	-	\$12,797.32	\$1,333.66	\$5,681.77
% Change from FY 2006-07	3.64%	10.17%	11.67%	-	5.68%	-	-	7.91%	10.67%	-	16.48%	-7.48%	-	22.22%	1.56%	8.79%
FY 2008-09	\$20,680.43	\$17,762.70	\$14,251.48	-	\$3,858.15	-	-	\$22,261.37	\$1,836.99	-	\$3,748.13	\$8,702.15	-	\$14,858.01	\$1,254.95	\$5,742.83
% Change from FY 2007-08	6.50%	8.43%	8.97%	-	-0.38%	-	-	-15.37%	3.17%	-	0.22%	0.37%	-	16.10%	-5.90%	1.07%
FY 2009-10 (DA)	\$19,767.99	\$16,303.29	\$13,773.18	-	\$3,484.92	952.90	-	\$21,192.52	\$1,691.68	-	\$3,669.73	\$8,704.60	-	\$13,125.32	\$1,225.15	\$5,116.67
% Change from FY 2008-09	-4.41%	-8.22%	-3.36%	-	-9.67%	-	-	-4.80%	-7.91%	-	-2.09%	0.03%	-	-11.66%	-2.37%	-10.90%
FY 2010-11 (DA)	\$20,027.85	\$16,705.85	\$14,256.68	-	\$3,399.65	\$2,284.78	-	\$18,488.13	\$1,657.89	-	\$3,881.13	\$8,593.25	-	\$14,120.76	\$1,417.39	\$4,938.48
% Change from FY 2009-10 (DA)	1.31%	2.47%	3.51%	-	-2.45%	1.40	-	-12.76%	-2.00%	-	5.76%	-1.28%	-	7.58%	15.69%	-3.48%
FY 2011-12	\$20,300.66	\$16,955.03	\$14,209.99	8,877.60	\$3,311.46	\$2,423.80	2,185.53	\$17,216.60	\$1,569.28	-	\$3,783.82	\$8,354.70	-	\$15,148.44	\$1,298.38	\$4,717.85
% Change from FY 2010-11 (DA)	1.36%	1.49%	-0.33%	-	-2.59%	0.06	-	-6.88%	-5.34%	-	-2.51%	-2.78%	-	7.28%	-8.40%	-4.47%
FY 2012-13		\$16,956.24	\$14,026.17	13,583.69	\$3,305.17	\$2,332.34	5,389.53	\$15,345.22	\$1,589.28	1,829.27	\$3,794.33	\$9,068.38	8,340.08	\$16,302.95	\$1,196.39	\$4,634.75
% Change from FY 2011-12	1.35%	0.01%	-1.29%	0.53	-0.19%	-3.77%	1.47	-10.87%	1.27%	-	0.28%	8.54%	-	7.62%	-7.86%	-1.76%
FY 2013-14			\$15,039.24	\$11,481.79	\$2,976.47	\$2,399.40	\$3,765.62	\$15,885.67	\$1,708.01	1,560.48	\$4,167.05	\$9,367.38	8,228.78	\$15,522.95		\$4,514.26
% Change from FY 2012-13	4.05%	3.39%	7.22%	(0.15)	-9.95%	2.88%	(0.30)	3.52%	7.47%	(0.15)	9.82%	3.30%	(0.01)	-4.78%	9.79%	-2.60%
FY 2014-15			\$15,295.11	\$7,186.24	\$3,015.26	\$2,473.13	\$3,874.08	\$14,511.89	\$1,807.89	\$1,478.91	\$4,193.20	\$10,491.56	\$9,453.25		\$1,112.16	\$4,318.64
% Change from FY 2013-14	7.26%	6.87%	1.70%	-37.41%	1.30%	3.07%	2.88%	-8.65%	5.85%	(0.05)	0.63%	12.00%	0.15	-4.05%	-15.33%	-4.33%
FY 2015-16		\$19,636.21		\$6,650.61	\$3,029.23	\$2,535.22	\$3,785.54	\$12,069.41	\$1,869.77	\$1,587.21	\$4,278.39	\$10,893.62	\$9,738.80			\$4,337.47
% Change from FY 2014-15	5.24%	4.81%	5.88%	-7.45%	0.46%	2.51%	-2.29%	-16.83%	3.42%	7.32%	2.03%	3.83%	3.02%	-0.20%	9.82%	0.44%
FY 2016-17		\$18,293.22	\$15,841.14	\$6,440.25	\$2,610.67	\$2,251.49	\$3,369.48	\$16,424.67	\$1,781.22	\$1,469.20	\$4,006.46	\$9,776.69	\$7,846.10		\$1,214.58	\$4,125.14
% Change from FY 2015-16	10.02%	-6.84%	-2.18%	-3.16%	-13.82%	-11.19%	-10.99%	36.09%	-4.74%	-7.44%	-6.36%	-10.25%	-19.43%	3.83%	-0.56%	-4.90%
FY 2017-18		\$19,876.85	\$18,599.03	\$7,571.35	\$3,060.26	\$2,838.12	\$3,832.79	\$19,630.33	\$2,087.71	\$1,733.99	\$4,700.88	\$12,038.30	\$9,280.43		\$1,253.68	\$4,800.53
% Change from FY 2016-17	4.72%	8.66%	17.41%	17.56%	17.22%	26.06%	13.75%	19.52%	17.21%	18.02%	17.33%	23.13%	18.28%		3.22%	16.37%
FY 2018-19				\$7,802.41	\$2,878.96	\$2,638.53	\$3,810.42	\$15,387.10	\$2,137.19	\$1,659.58	\$4,900.30	\$11,331.24	\$8,839.13			\$5,000.93
% Change from FY 2017-18	-1.15%	6.99%	7.02%	3.05%	-5.92%	-7.03%	-0.58%	-21.62%	2.37%	-4.29%	4.24%	-5.87%	-4.76%	-12.44%	11.08%	4.17%
FY 2019-20				\$7,960.71	\$3,038.20	\$2,930.67	\$4,221.88	\$19,227.34	\$2,200.36	\$1,749.44	\$5,077.18	\$11,679.09	\$8,947.44		\$1,472.66	\$5,424.85
% Change from FY 2018-19	9.17%	5.75%	7.18%	2.03%	5.53%	11.07%	10.80%	24.96%	2.96%	5.41%	3.61%	3.07%	1.23%		5.75%	8.48%
FY 2020-21 Projection			\$24,170.92	\$7,952.01	\$3,193.22	\$3,097.59	\$4,203.17	\$23,653.72	\$2,298.71	\$1,785.96	\$5,427.58	\$12,329.41	\$9,674.72			\$5,448.28
% Change from FY 2019-20	-2.44%	-2.75%	13.31%	-0.11%	5.10%	5.70%	-0.44%	23.02%	4.47%	2.09%	6.90%	5.57%	8.13%	25.85%	0.98%	0.43%
FY 2021-22 Projection				\$8,312.53	\$3,019.78	\$2,997.01	\$4,000.61	\$20,975.04	\$2,346.88	\$1,808.90	\$5,541.82	\$11,933.92	\$9,722.73			\$5,415.24
% Change from FY 2020-21	3.20%	0.61%	0.71%	4.53%	-5.43%	-3.25%	-4.82%	-11.32%	2.10%	1.28%	2.10%	-3.21%	0.50%	-20.93%	3.65%	-0.61%
FY 2022-23 Projection			\$25,294.05	\$8,565.19	\$3,022.75	\$3,060.50	\$4,032.57	\$19,828.77	\$2,384.60	\$1,826.21	\$5,658.83	\$12,042.21	\$9,823.06		\$1,575.41	\$5,389.47
% Change from FY 2021-22	2.19%	2.59%	3.91%	3.04%	0.10%	2.12%	0.80%	-5.46%	1.61%	0.96%	2.11%	0.91%	1.03%	1.17%	2.21%	-0.48%
Notes:	2.17/0	2.57/0	5.7170	5.04/0	0.10/0	2.12/0	0.0070	5.10/0	1.01/0	0.5070	2.11/0	0.7170	1.0370	1.17/0	2.21/0	0.1070

<sup>1.</sup> This exhibit does not include supplemental payments, outstationing payments, or upper payment limit financing.

See narrative for a description of events that alter trends.

<sup>3.</sup> The per capita costs reported here are adjusted for the two-week FY 2009-10 payment delay; that is, the claims which were delayed at the end of FY 2009-10 (and paid in FY 2010-11) are included in the FY 2009-10 totals and excluded from the FY 2010-11 totals.

Exhibit D - Cash Funds Report

#### **Cash Funds Report** FY 2020-21 FY 2021-22 FY 2022-23 Cash Fund Spending Base Spending **Base Spending** Change Request Request Change Request Change Authority Authority Authority Cash Funds \$99,764,518 (\$12,635,609) \$112,400,127 \$100,797,899 (\$11,602,228) \$112,400,127 (\$8,548,767 Certified Funds \$112,400,127 \$103,851,360 \$877,245,629 \$112,741,544 Healthcare Affordability and Sustainability Fee Cash Fund \$1,062,864,713 \$965,143,278 (\$97,721,435) \$877,633,060 \$839,275,111 (\$38,357,949) \$989,987,173 Medicaid Buy-In Fund \$5,124,696 \$4,666,833 (\$457,863) \$5,124,696 \$5,124,696 \$0 \$5,380,214 \$5,586,461 \$206,247 Tobacco Tax Cash Fund \$1,938,780 \$1,922,250 (\$16,530) \$1,938,780 \$1,887,960 (\$50,820) \$1,938,780 \$1,887,960 (\$50,820) Health Care Expansion Fund \$59,455,920 \$60,605,920 \$1,150,000 \$57,842,327 \$58,002,327 \$160,000 \$57,842,327 \$57,992,327 \$150,000 Breast and Cervical Cancer Fund \$782,399 \$1,072,852 \$290,453 \$784,026 \$1,047,782 \$263,756 \$784,026 \$996,884 \$212,858 \$522,017 \$1,656,303 \$2,178,320 \$1,656,303 \$1,541,757 (\$114,546) \$1,656,303 \$1,541,618 (\$114,685) Colorado Autism Treatment Fund \$56,631,750 \$4,084,118 \$56,631,750 \$63,968,877 \$7,337,127 Nursing Facility Fund \$60,232,880 \$60,769,581 \$536,701 \$60,715,868 Nursing Home Penalty Cash Fund \$250,000 \$250,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 HCPF Cash Fund \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$857,151 \$857,151 \$0 \$857,151 \$0 \$857,151 Tobacco Education Program Fund \$857,151 \$857,151 \$0 Department Recoveries Fund \$59,711,517 \$67,557,609 \$7,846,092 \$60,211,517 \$71,300,300 \$11,088,783 \$60,211,517 \$75,250,336 \$15,038,819 \$200,460 \$200,460 ICF-IID Provider Fee \$200,460 \$200,460 \$0 \$200,460 \$200,460 \$0 Adult Dental Fund \$27,110,954 \$33,104,365 \$5,993,411 \$25,937,270 \$34,253,963 \$8,316,693 \$25,937,270 \$35,642,764 \$9,705,494 Transfer from Denver Health \$700,000 \$700,000 \$0 \$700,000 \$700,000 \$0 \$700,000 \$700,000 \$0 Total Cash Funds \$1,393,285,900 \$1,298,793,137 (\$94,492,763) \$1,201,917,467 \$1,175,705,274 (\$26,212,193) \$1,201,785,554 \$1,338,463,371 \$136,677,817 Reappropriated Funds \$9,858,417 \$9,853,351 \$9,853,351 (6) Other Medical Services; (B) Old Age Pension State Medical Program \$9,858,417 \$0 \$9,858,417 (\$5,066)\$9,858,417 (\$5,066) \$1,158,174 \$1,108,692 (\$49,482) \$1,158,174 \$1,158,174 \$0 \$1,158,174 \$1,158,174 \$0 Public School Health Services Department of Higher Education, Fee-for-service Contracts with State Institutions for \$30,587,369 \$30,587,369 \$0 \$32,609,135 \$32,609,135 \$0 \$32,609,135 \$32,609,135 \$0 Speciality Education Programs Total Reappropriated Funds \$41,603,960 \$41,554,478 (\$49,482)\$43,625,726 \$43,620,660 (\$5,066) \$43,625,726 \$43,620,660 (\$5,066) Note: Calculation of letternote changes for FY 2020-21 can be found on page ED-2. Request amounts shown above for FY 2020-21 and FY 2021-22 represent the total letternote amount that would appear in the Long Bill.

Page ED-1

#### Exhibit D - Cash Funds Report

#### Cash Funds Spending Authority by Source of Authority FY 2020-21 SB 20-212 FY 2020-HB 20-1385 Use of HB 20-1360 FY 2020- | HB 20-1362 Nursing HB 20-1386 HAS Fee 21 Reimbursement HB 20-1361 Dental Spending Authority **Increased Medicaid** Total Transfer for GF offset 21 Long Bill Home Provider Rates for Telehealth Cap Reduction Match Services \$112,400,127 \$0 \$0 \$0 \$112,400,127 Certified Funds \$0 \$0 Healthcare Affordability and Sustainability Fee Cash Fund \$880,731,898 \$0 \$0 \$0 \$21,132,815 \$161,000,000 \$1,062,864,713 Medicaid Buy-In Fund \$5,124,696 \$0 \$0 \$0 \$5,124,696 \$0 \$0 \$0 \$0 \$1,938,780 \$0 \$0 \$0 \$1,938,780 Tobacco Tax Cash Fund Health Care Expansion Fund \$59,455,920 \$0 \$0 \$0 \$0 \$0 \$59,455,920 \$782,399 \$0 \$0 \$0 \$0 \$0 \$782,399 Breast and Cervical Cancer Fund \$1,656,303 \$1,656,303 \$0 \$0 \$0 \$0 \$0 Colorado Autism Treatment Fund \$56,631,750 \$0 \$0 \$3,601,130 \$0 \$60,232,880 Nursing Facility Fund \$0 Nursing Home Penalty Cash Fund \$250,000 \$0 \$0 \$0 \$0 \$0 \$250,000 \$857,151 \$0 \$0 \$0 \$0 \$0 \$857,151 Tobacco Education Program Fund \$59,711,517 \$0 \$0 \$0 \$0 \$0 \$59,711,517 Department Recoveries Fund ICF-IID Provider Fee \$200,460 \$0 \$0 \$0 \$0 \$0 \$200,460 (\$1,139,402) Adult Dental Fund \$28,250,356 \$0 \$0 \$0 \$0 \$27,110,954 \$700,000 \$0 \$0 \$0 \$700,000 Transfer from Denver Health \$0 \$0 HCPF Cash Fund \$0 \$0 \$0 \$0 \$0 \$0 \$0 Total Cash Funds \$1,208,691,357 **\$0** \$0 (\$1,139,402) \$24,733,945 \$161,000,000 \$1,393,285,900

## Exhibit D - Cash Funds Report **Revised Totals for Letternotes and Appropriation Clauses**

# FY 2020-21

FY 2020-21 Request	HB 20-1360 FY 2020- 21 Long Bill	HB 20-1362 Nursing Home Provider Rates	SB 20-212 FY 2020- 21 Reimbursement for Telehealth Services	HB 20-1361 Dental Cap Reduction	HB 20-1385 Use of Increased Medicaid Match	HB 20-1386 HAS Fee Transfer for GF offset	Total
Certified Funds	\$99,764,518	\$0	\$0	\$0	\$0	\$0	\$99,764,518
Healthcare Affordability and Sustainability Fee Cash Fund	\$783,010,463	\$0	\$0	\$0	\$21,132,815	\$161,000,000	\$965,143,278
Medicaid Buy-In Fund	<u>\$4,666,833</u>	\$0	\$0	\$0	\$0	\$0	\$4,666,833
Tobacco Tax Cash Fund	\$1,922,250	\$0	\$0	\$0	\$0	\$0	\$1,922,250
Health Care Expansion Fund	\$60,605,920	\$0	\$0	\$0	\$0	\$0	\$60,605,920
Breast and Cervical Cancer Fund	<u>\$1,072,852</u>	\$0	\$0	\$0	\$0	\$0	\$1,072,852
Colorado Autism Treatment Fund	\$2,178,320	\$0	\$0	\$0	\$0	\$0	\$2,178,320
Nursing Facility Fund	<u>\$57,168,451</u>	\$0	\$0	\$0	\$3,601,130	\$0	\$60,769,581
Nursing Home Penalty Cash Fund	\$250,000	\$0	\$0	\$0	\$0	\$0	\$250,000
Tobacco Education Program Fund	\$857,151	\$0	\$0	\$0	\$0	\$0	\$857,151
Department Recoveries Fund	\$67,557,609	\$0	\$0	\$0	\$0	\$0	\$67,557,609
ICF-IID Provider Fee	\$200,460	\$0	\$0	\$0	\$0	\$0	\$200,460
Adult Dental Fund	\$34,243,767	\$0	\$0	(\$1,139,402)	\$0	\$0	\$33,104,365
Transfer from Denver Health	\$700,000	\$0	\$0	\$0	\$0	\$0	\$700,000
HCPF Cash Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Cash Funds	\$1,114,198,594	\$0	\$0	(\$1,139,402)	\$24,733,945	\$161,000,000	\$1,298,793,137
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Cells in bold and underline from indicate a requested change from the appropriation. The font in the "Total" columns is intentionally left unchanged. Please note, this table shows the total change required to the letternotes and appropriation clauses and includes the incremental amounts from prior budget requests, if applicable.

Exhibit E - Summary of Total Requested Expenditure by Service Group

FY 2020-21	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Acute Care	\$153,536,331	\$112,408,426	\$633,343,526	\$98,338,292	\$521,454,602	\$240,668,962	\$1,536,702,771	\$3,380,126	\$868,742,290	\$102,598,164	\$62,383,335	\$159,915,314	\$32,829,716	\$85,024,615	\$18,460,076	\$4,629,786,546
Community Based Long-Term Care																
Base CBLTC	\$312,469,356	\$62,387,400	\$331,620,409	\$4,365,547	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$710,842,712
Hospice	\$7,228,032	\$2,356,416	\$45,766,370	\$2,017,183	\$159,341	\$23,996	\$726,274	\$0	\$9,658,630	\$697,937	\$3,439,012	\$1,093	\$431	\$0	\$0	\$72,074,715
Private Duty Nursing & Long-Term Home Health	\$54,167,915	\$14,318,436	\$345,178,642	\$9,123,567	\$878,158	\$75,299	\$3,586,318	\$0	\$56,272,034	\$3,684,432	\$43,606,433	\$0	\$0	\$0	\$42,798	\$530,934,032
Subtotal CBLTC	\$373,865,303	\$79,062,252	\$722,565,421	\$15,506,297	\$1,037,499	\$99,295	\$4,312,592	\$0	\$65,930,664	\$4,382,369	\$47,045,445	\$1,093	\$431	\$0	\$42,798	\$1,313,851,459
Long-Term Care																
Class I Nursing Facilities	\$545,288,592	\$60,077,922	\$124,000,470	\$96,018	\$312,048	\$0	\$4,180,857	\$0	\$0	\$0	\$62,322	\$8,273	\$0	\$0	\$0	\$734,026,502
Class II Nursing Facilities	\$777,517	\$319,924	\$5,455,316	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$6,552,757
PACE	\$205,764,428	\$28,962,647	\$12,893,092	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$247,620,167
Subtotal Long-Term Care	\$751,830,537	\$89,360,493	\$142,348,878	\$96,018	\$312,048	\$0	\$4,180,857	\$0	\$0	\$0	\$62,322	\$8,273	\$0	\$0	\$0	\$988,199,426
Insurance																
Supplemental Medicare Insurance Benefit	\$113,264,450	\$6,681,597	\$58,291,510	\$0	\$380,685	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$33,531,726	\$212,149,969
Heath Insurance Buy-In	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Subtotal Insurance	\$113,272,370	\$6,695,307	\$60,588,140	\$0	\$389,802	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$33,531,726	\$214,639,539
Service Management																
Single Entry Points	\$16,397,057	\$4,299,009	\$24,091,491	\$7,363	\$12,720	\$3,682	\$66,443	\$0	\$8,536	\$1,004	\$60,585	\$0	\$0	\$0	\$0	\$44,947,890
Disease Management	\$8,394	\$30,142	\$257,502	\$32,013	\$229,734	\$78,882	\$512,632	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
ACC and PIHP Administration	\$7,025,531	\$1,992,551	\$11,215,462	\$1,960,341	\$27,442,336	\$12,194,559	\$58,725,378	\$26,010	\$72,169,271	\$10,595,148	\$3,758,218	\$2,132,808	\$516,457	\$221	\$0	\$209,754,292
Subtotal Service Management	\$23,430,982	\$6,321,702	\$35,564,455	\$1,999,717	\$27,684,790	\$12,277,123	\$59,304,453	\$26,010	\$72,177,807	\$10,596,152	\$3,874,714	\$2,201,507	\$528,274	\$221	\$0	\$255,987,908
Medical Services Total	\$1,415,935,523	\$293,848,180	\$1,594,410,420	\$115,940,324	\$550,878,741	\$253,057,678	\$1,604,613,906	\$3,406,136	\$1,006,881,890	\$117,576,685	\$113,365,816	\$162,131,721	\$33,358,421	\$85,024,836	\$52,034,600	\$7,402,464,878
Caseload	48,301	13,435	65,964	14,580	172,515	81,695	381,763	144	438,020	65,834	20,887	13,150	3,448	3,953	34,990	1,358,679
Medical Services Per Capita	\$29,314.83	\$21,871.84	\$24,170.92	\$7,952.01	\$3,193.22	\$3,097.59	\$4,203.17	\$23,653.72	\$2,298.71	\$1,785.96	\$5,427.58	\$12,329.41	\$9,674.72	\$21,508.94	\$1,487.13	\$5,448.28
Financing	\$204,114,710	\$45,726,491	\$224,916,474	\$12,830,618	\$166,288,195	\$68,103,061	\$492,518,265	\$420,342	\$243,924,954	\$20,894,525	\$17,323,023	\$74,587,228	\$8,055,882	\$31,163,649	\$0	\$1,610,867,417
Grand Total Medical Services Premiums	\$1,620,050,233	\$339,574,671	\$1,819,326,894	\$128,770,942	\$717,166,936	\$321,160,739	\$2,097,132,171	\$3,826,478	\$1,250,806,844	\$138,471,210	\$130,688,839	\$236,718,949	\$41,414,303	\$116,188,485	\$52,034,600	\$9,013,332,295
Total Per Capita	\$33,540.72	\$25,275.38	\$27,580.60	\$8,832.03	\$4,157.13	\$3,931.22	\$5,493.28	\$26,572.76	\$2,855.59	\$2,103.34	\$6,256.95	\$18,001.44	\$12,011.11	\$29,392.48	\$1,487.13	\$6,633.89

Exhibit E - Summary of Total Requested Expenditure by Service Group

FY 2021-22	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Acute Care	\$147,499,527	\$109,910,483	\$666,012,998	\$95,731,636	\$586,770,956	\$227,048,850	\$1,548,990,803	\$2,993,664	\$858,893,179	\$103,249,705	\$63,836,613	\$169,918,320	\$33,508,073	\$59,238,878	\$18,709,676	\$4,692,313,361
Community Based Long-Term Care																
Base CBLTC	\$326,125,784	\$65,254,715	\$357,973,808	\$4,627,081	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$753,981,388
Hospice	\$5,319,794	\$2,547,246	\$51,204,318	\$2,020,029	\$200,372	\$25,031	\$820,345	\$0	\$10,005,187	\$742,579	\$3,691,135	\$1,275	\$466	\$0	\$0	\$76,577,777
Private Duty Nursing & Long-Term Home Health	\$57,532,673	\$15,235,123	\$364,735,560	\$9,713,853	\$937,578	\$80,804	\$3,827,420	\$0	\$59,877,072	\$3,921,198	\$45,415,879	\$0	\$0	\$0	\$45,645	\$561,322,805
Subtotal CBLTC	\$388,978,251	\$83,037,084	\$773,913,686	\$16,360,963	\$1,137,950	\$105,835	\$4,647,765	\$0	\$69,882,259	\$4,663,777	\$49,107,014	\$1,275	\$466	\$0	\$45,645	\$1,391,881,970
Long-Term Care																
Class I Nursing Facilities	\$562,034,449	\$61,922,920	\$127,808,534	\$98,967	\$321,631	\$0	\$4,309,251	\$0	\$0	\$0	\$64,236	\$8,527	\$0	\$0	\$0	\$756,568,515
Class II Nursing Facilities	\$851,614	\$350,413	\$5,975,208	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,177,235
PACE	\$225,799,734	\$31,782,743	\$14,148,493	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$271,730,970
Subtotal Long-Term Care	\$788,685,797	\$94,056,076	\$147,932,235	\$98,967	\$321,631	\$0	\$4,309,251	\$0	\$0	\$0	\$64,236	\$8,527	\$0	\$0	\$0	\$1,035,476,720
Insurance																
Supplemental Medicare Insurance Benefit	\$119,174,184	\$7,120,366	\$63,178,242	\$0	\$459,428	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$35,608,674	\$225,540,894
Heath Insurance Buy-In	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Subtotal Insurance	\$119,182,104	\$7,134,076	\$65,474,872	\$0	\$468,545	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$35,608,674	\$228,030,464
Service Management																
Single Entry Points	\$17,559,636	\$4,603,817	\$25,799,619	\$7,886	\$13,621	\$3,943	\$71,154	\$0	\$9,141	\$1,076	\$64,880	\$0	\$0	\$0	\$0	\$48,134,773
Disease Management	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
ACC and PIHP Administration	\$7,111,236	\$2,011,960	\$11,508,475	\$1,999,367	\$27,642,493	\$13,134,204	\$65,019,162	\$26,742	\$73,431,030	\$11,339,272	\$3,803,710	\$2,359,215	\$586,993	\$0	\$0	\$219,973,854
Subtotal Service Management	\$24,679,266	\$6,645,919	\$37,565,596	\$2,039,266	\$27,885,847	\$13,217,029	\$65,602,949	\$26,742	\$73,440,171	\$11,340,348	\$3,924,501	\$2,427,914	\$598,810	\$0	\$0	\$269,394,353
Medical Services Total	\$1,469,024,945	\$300,783,638	\$1,690,899,387	\$114,230,832	\$616,584,929	\$240,384,012	\$1,623,664,001	\$3,020,406	\$1,002,246,738	\$119,253,830	\$116,932,364	\$172,361,570	\$34,107,349	\$59,238,878	\$54,363,995	\$7,617,096,868
Caseload	48,558	13,669	69,462	13,742	204,182	80,208	405,854	144	427,055	65,926	21,100	14,443	3,508	3,483	35,269	1,406,603
Medical Services Per Capita	\$30,253.00	\$22,004.80	\$24,342.80	\$8,312.53	\$3,019.78	\$2,997.01	\$4,000.61	\$20,975.04	\$2,346.88	\$1,808.90	\$5,541.82	\$11,933.92	\$9,722.73	\$17,008.00	\$1,541.41	\$5,415.24
Financing	\$214,640,984	\$48,188,173	\$237,038,302	\$13,574,133	\$175,106,319	\$71,773,230	\$518,871,245	\$509,030	\$256,890,472	\$22,057,967	\$18,325,080	\$78,560,296	\$8,483,833	\$32,747,597	\$0	\$1,696,766,661
Grand Total Medical Services Premiums	\$1,683,665,929	\$348,971,811	\$1,927,937,689	\$127,804,965	\$791,691,248	\$312,157,242	\$2,142,535,246	\$3,529,436	\$1,259,137,210	\$141,311,797	\$135,257,444	\$250,921,866	\$42,591,182	\$91,986,475	\$54,363,995	\$9,313,863,529
Total Per Capita	\$34,673.30	\$25,530.16	\$27,755.29	\$9,300.32	\$3,877.38	\$3,891.85	\$5,279.08	\$24,509.97	\$2,948.42	\$2,143.49	\$6,410.31	\$17,373.25	\$12,141.16	\$26,410.13	\$1,541.41	\$6,621.53

Exhibit E - Summary of Total Requested Expenditure by Service Group

FY 2022-23	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Acute Care	\$159,117,094	\$117,235,975	\$706,367,924	\$111,045,362	\$712,595,624	\$240,277,054	\$1,748,538,809	\$2,848,240	\$931,672,479	\$116,933,397	\$66,142,124	\$191,923,495	\$35,244,754	\$62,127,203	\$20,210,452	\$5,222,279,986
Community Based Long-Term Care																
Base CBLTC	\$343,084,611	\$68,772,864	\$390,198,507	\$4,950,598	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$807,006,580
Hospice	\$3,003,618	\$2,820,339	\$56,131,007	\$2,407,449	\$258,005	\$27,803	\$982,771	\$0	\$11,404,770	\$888,801	\$4,019,448	\$1,467	\$499	\$0	\$0	\$81,945,977
Private Duty Nursing & Long-Term Home Health	\$61,026,439	\$16,187,234	\$385,023,290	\$10,327,010	\$999,326	\$86,527	\$4,077,953	\$0	\$63,621,438	\$4,167,119	\$47,285,622	\$0	\$0	\$0	\$48,603	\$592,850,561
Subtotal CBLTC	\$407,114,668	\$87,780,437	\$831,352,804	\$17,685,057	\$1,257,331	\$114,330	\$5,060,724	\$0	\$75,026,208	\$5,055,920	\$51,305,070	\$1,467	\$499	\$0	\$48,603	\$1,481,803,118
Long-Term Care																
Class I Nursing Facilities	\$580,962,964	\$64,008,395	\$132,112,943	\$102,300	\$332,463	\$0	\$4,454,380	\$0	\$0	\$0	\$66,399	\$8,814	\$0	\$0	\$0	\$782,048,658
Class II Nursing Facilities	\$895,472	\$368,459	\$6,282,931	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,546,862
PACE	\$250,888,056	\$35,314,083	\$15,720,514	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$301,922,653
Subtotal Long-Term Care	\$832,746,492	\$99,690,937	\$154,116,388	\$102,300	\$332,463	\$0	\$4,454,380	\$0	\$0	\$0	\$66,399	\$8,814	\$0	\$0	\$0	\$1,091,518,173
Insurance																
Supplemental Medicare Insurance Benefit	\$125,831,158	\$7,548,762	\$67,039,731	\$0	\$571,103	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$38,105,786	\$239,096,540
Heath Insurance Buy-In	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Subtotal Insurance	\$125,839,078	\$7,562,472	\$69,336,361	\$0	\$580,220	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$38,105,786	\$241,586,110
Service Management																
Single Entry Points	\$18,109,253	\$4,747,916	\$26,607,147	\$8,133	\$14,047	\$4,066	\$73,381	\$0	\$9,427	\$1,110	\$66,911	\$0	\$0	\$0	\$0	\$49,641,391
Disease Management	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
ACC and PIHP Administration	\$8,026,642	\$2,235,396	\$11,814,767	\$2,214,690	\$27,642,513	\$14,315,413	\$73,486,280	\$26,932	\$78,027,711	\$12,671,340	\$3,867,530	\$2,660,385	\$616,758	\$0	\$0	\$237,606,366
Subtotal Service Management	\$26,144,289	\$7,013,454	\$38,679,416	\$2,254,836	\$27,886,293	\$14,398,361	\$74,072,294	\$26,932	\$78,037,138	\$12,672,450	\$3,990,352	\$2,729,084	\$628,575	\$0	\$0	\$288,533,483
Medical Services Total	\$1,550,961,621	\$319,283,275	\$1,799,852,893	\$131,087,555	\$742,651,931	\$254,802,043	\$1,832,239,440	\$2,875,172	\$1,084,766,954	\$134,661,767	\$121,503,945	\$194,668,394	\$35,873,828	\$62,127,203	\$58,364,841	\$8,325,720,870
Caseload	50,169	14,143	71,157	15,305	245,688	83,255	454,361	145	454,905	73,738	21,472	16,166	3,652	3,611	37,047	1,544,812
Medical Services Per Capita	\$30,914.64	\$22,575.32	\$25,294.05	\$8,565.19	\$3,022.75	\$3,060.50	\$4,032.57	\$19,828.77	\$2,384.60	\$1,826.21	\$5,658.83	\$12,042.21	\$9,823.06	\$17,207.13	\$1,575.41	\$5,389.47
Financing	\$215,905,255	\$48,472,010	\$238,434,498	\$13,654,087	\$176,137,725	\$72,195,986	\$521,927,485	\$512,028	\$258,403,601	\$22,187,892	\$18,433,018	\$79,023,030	\$8,533,805	\$32,940,485	\$0	\$1,706,760,905
Grand Total Medical Services Premiums	\$1,766,866,876	\$367,755,285	\$2,038,287,391	\$144,741,642	\$918,789,656	\$326,998,029	\$2,354,166,925	\$3,387,200	\$1,343,170,555	\$156,849,659	\$139,936,963	\$273,691,424	\$44,407,633	\$95,067,688	\$58,364,841	\$10,032,481,775
Total Per Capita	\$35,218.18	\$26,002.59	\$28,644.86	\$9,457.34	\$3,739.66	\$3,927.67	\$5,181.27	\$23,360,00	\$2,952.64	\$2,127.11	\$6,517.31	\$16,930,59	\$12,159.81	\$26,330,53	\$1.575.41	\$6,494.30

					(	ash Based Actuals										
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-1:	2 \$75,155,191 2 \$78,805,339	\$61,049,927 \$65,882,971	\$443,766,632 \$441,467,295	\$398,462 \$11.438.155	\$301,104,198 \$316,833,427	\$82,998,921 \$92,095,552	\$2,393,150 \$55,270,434	\$10,272,492 \$9,558,376	\$509,353,569 \$548,721,374	\$0 \$14 144 638	\$49,175,549 \$46,515,535	\$63,317,628 \$72,164,144	\$0 \$2,846,306	\$41,938,165 \$43,756,602	\$5,279,710 \$6,211,623	\$1,646,203,594 \$1,805,711,771
FY 2012-1: FY 2013-1-	3 \$78,805,339 4 \$85,675,110	\$74,784,265		\$26,043,041	\$357,736,561	\$108,351,925	\$33,270,434 \$319,790,154	\$8,877,269	\$627,878,215	\$37,312,569	\$51,698,815	\$122,224,478			\$8,664,131	\$2,362,494,250
FY 2014-1:	5 \$95,567,853	\$85,483,775	\$500,691,236	\$21,605,937	\$470,241,709	\$171,201,576	\$906,500,652	\$5,087,139	\$729,537,416	\$67,945,745	\$56,793,953	\$155,110,673	\$16,403,019	\$40,514,564	\$8,801,588	\$3,331,486,835
FY 2015-1	6 \$111,364,853	\$86,107,634		\$35,297,880	\$475,749,516	\$211,345,770	\$1,167,658,452	\$3,847,398	\$783,239,283	\$85,468,099	\$57,929,504	\$155,773,423	\$16,985,317	\$39,369,481	\$14,591,949	\$3,782,445,393
FY 2016-1 FY 2017-1	7 \$106,075,443 8 \$126,193,589	\$78,577,110 \$98,060,577	\$474,531,470 \$591,181,109	\$33,281,608 \$51,031,201	\$401,912,496 \$527,455,758	\$216,356,793 \$203,548,722	\$1,122,454,953 \$1,292,890,664	\$3,829,098 \$2,946,908	\$741,180,436 \$821,500,691	\$84,324,401 \$100,895,831	\$55,056,770 \$67,577,283	\$131,399,088 \$120,921,305	\$15,255,372 \$20,485,004	\$40,584,431 \$51,563,548	\$12,435,005 \$13,079,499	\$3,517,254,474 \$4,089,331,689
FY 2017-1	9 \$128,083,508	\$103,145,930		\$58,472,526	\$480,353,432	\$158,121,334	\$1,203,469,458	\$2,202,429	\$792,870,689	\$87,237,080	\$67,677,694	\$136,554,559	\$19,967,867		\$17,747,353	\$3,901,069,730
FY 2019-21	0 \$135,949,976	\$104,413,749		\$69,396,445	\$470,412,101	\$163,823,451	\$1,299,533,964	\$2,590,904	\$770,893,197	\$84,741,213	\$61,773,647	\$133,013,423	\$19,423,076	\$41,307,280	\$17,806,895	\$3,982,131,992
Estimated FY 2020-2	1 \$153,536,331 2 \$147,499,527	\$112,408,426 \$109,910,483		\$98,338,292 \$95,731,636	\$521,454,602 \$586,770,956	\$240,668,962 \$227,048,850	\$1,536,702,771 \$1,548,990,803	\$3,380,126 \$2,993,664	\$868,742,290 \$858,893,179	\$102,598,164 \$103,249,705	\$62,383,335 \$63,836,613	\$159,915,314 \$169,918,320	\$32,829,716 \$33,508,073		\$18,460,076 \$18,709,676	\$4,629,786,546 \$4,692,313,361
Estimated FY 2021-2: Estimated FY 2022-2:	3 \$159,117,094	\$109,910,483		\$95,731,636 \$111,045,362	\$712,595,624	\$240,277,054	\$1,748,538,809	\$2,848,240	\$931,672,479	\$116,933,397	\$66,142,124	\$169,918,320 \$191,923,495			\$20,210,452	\$5,222,279,986
					Percent Cl	ange in Cash Based	Actuals									
	11-1-6 1011	Disabled Adults 60 to	Disabled Individuals		MAGI Parents/	MAGI Parents/		Post 6 Control	FP-21. Ch24	CD 11 000 PF-7.1		MAGUR	en 11 250 FF-711	No. Citien.		
ACUTE CARE	Adults 65 and Older (OAP-A)	64 (OAP-B)	to 59 (AND/AB)	Disabled Buy-In	Caretakers to 68% FPL	Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-1: FY 2013-1:	3 4.86% 4 8.72%	7.92%		2770.58% 127.69%	5.22% 12.91%	10.96%	2209.53% 478.59%	-6.95% -7.13%	7.73%	0.00%	-5.41% 11.14%	13.97%	0.00%		17.65%	9.69%
FY 2013-1: FY 2014-1:	5 11.55%	14.31%		-17.04%	31.45%	58.01%	183.47%	-7.13% -42.69%	16.19%	82.10%	9.86%		89.66%		1.59%	41.02%
FY 2015-1	6 16.53%	0.73%	7.39%	63.37%	1.17%	23.45%	28.81%	-24.37%	7.36%	25.79%	2.00%	0.43%	3.55%	-2.83%	65.79%	13.54%
FY 2016-1	7 -4.75%	-8.75%		-5.71% 53.33%	-15.52%	2.37%	-3.87%	-0.48%	-5.37%	-1.34% 19.65%	-4.96% 22.74%	-15.65% -7.97%			-14.78%	-7.01%
FY 2017-1: FY 2018-1*	8 18.97% 9 1.50%	24.80%		53.33% 14.58%	31.24% -8.93%	-5.92% -22.32%	15.18% -6.92%	-23.04% -25.26%	10.84%	19.65%	22.74%	-7.97% 12.93%	34.28% -2.52%		5.18% 35.69%	16.26% -4.60%
FY 2019-21	0 6.14%	1.23%	0.76%	18.68%	-2.07%	3.61%	7.98%	17.64%	-2.77%	-2.86%	-8.72%	-2.59%	-2.73%	6 -3.19%	0.34%	2.08%
Estimated FY 2020-2	1 12.94%	7.66%		41.71%	10.85%	46.91%	18.25%	30.46%	12.69%	21.07%	0.99%		69.02%		3.67%	16.26%
Estimated FY 2021-2:	2 -3.93%	-2.22% 6.66%		-2.65% 16.00%	12.53% 21.44%	-5.66% 5.83%	0.80% 12.88%	-11.43% -4,86%	-1.13% 8.47%	0.64% 13.25%	2.33% 3.61%	6.26%	2.07%	6 -30.33% 6 4.88%	1.35% 8.02%	1.35% 11.29%
Estimated FY 2022-2	3 7.88%	0.00%	0.00%	16.00%		Per Capita Cost	12.88%	-4.80%	8.4/76	13.23%	3.01%	12.93%	3.1876	4.8876	8.0276	11.29%
	l .					•						1		1	I I	
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-1:	2 \$1,891.17	\$7,282.59		\$7,662.73	\$3,229.90	\$2,340.57	\$2,110.36	\$17,206.85	\$1,522.13	\$0.00	\$2,726.82	\$8,298.51			\$279.78	\$2,655.33
FY 2012-1:	3 \$1,930.23	\$7,279.08		\$12,880.81	\$3,187.72	\$2,216.77	\$5,197.52	\$15,342.50	\$1,524.89	\$1,717.42	\$2,616.61	\$8,993.54	\$8,274.15	\$16,302.76	\$292.92	\$2,643.82
FY 2013-1: FY 2014-1:	4 \$2,047.88 5 \$2,285.38	\$7,590.00 \$8.167.76		\$10,173.06 \$5,956.97	\$2,869.24 \$2,908.44	\$2,301.34 \$2,378.16	\$3,665.51 \$3,755.31	\$15,880.62 \$14,493.27	\$1,573.50 \$1,636.75	\$1,472.19 \$1,355.85	\$2,830.18 \$2,834.60	\$9,287.57 \$10,412.21	\$8,182.40 \$9,378.51		\$370.61 \$313.84	\$2,744.03 \$2.869.11
FY 2014-1: FY 2015-1	6 \$2,626.34	\$8,178.14		\$5,677.64	\$2,912.60	\$2,430.27	\$3,644.67	\$11,948.44	\$1,676.48	\$1,436.41	\$2,905.92	\$10,807.84			\$447.81	\$2,916.33
FY 2016-1	7 \$2,414.04	\$6,990.22		\$5,324.21	\$2,489.82	\$2,140.90	\$3,226.85	\$16,294.03	\$1,579.34	\$1,299.16	\$2,710.82	\$9,685.20	\$7,751.71		\$367.80	\$2,612.89
FY 2017-1:	8 \$2,748.90	\$8,312,33		\$6,242.35	\$2,932.70 \$2,731.97	\$2,728.17 \$2,487.63	\$3,666.66 \$3,641.10	\$19,012.31 \$15,189.17	\$1,872.27 \$1,886.65	\$1,568.02 \$1,469.26	\$3,147.08 \$3,102.35	\$11,942.84 \$11,196.67			\$375.55 \$511.64	\$3,109.24 \$3,092.74
		00 100 00								\$1,469.26		\$11,196.67				
FY 2018-1	9 \$2,685.98	\$8,108.32		\$6,506.35 \$6,500.84						\$1.515.20		\$11 510 31	\$8 702 70			
FY 2018-1: FY 2019-2:	9 \$2,685.98 0 \$2,859.04 1 \$3,178.74	\$8,013.95 \$8,366.83	\$9,124.50 \$9,601.35	\$6,506.35 \$6,500.84 \$6,744.74	\$2,860.22 \$3,022.66	\$2,753.38 \$2,945.94	\$4,023.94 \$4,025.28	\$18,911.71 \$23,473.10	\$1,891.54 \$1,983.34	\$1,515.29 \$1,558.44	\$2,897.45 \$2,986.71	\$11,519.31 \$12,160.86	\$8,792.70 \$9,521.38	\$17,090.31 \$21,508.88	\$532.49 \$527.58	\$3,266.06 \$3,407.56
FY 2018-17 FY 2019-20 FE stimated FY 2020-2 Estimated FY 2020-2	9 \$2,685.98 0 \$2,859.04 1 \$3,178.74 2 \$3,037.59	\$8,013.95 \$8,366.83 \$8,040.86	\$9,124.50 \$9,601.35 \$9,588.16	\$6,500.84 \$6,744.74 \$6,966.35	\$2,860.22 \$3,022.66 \$2,873.76	\$2,753.38 \$2,945.94 \$2,830.75	\$4,023.94 \$4,025.28 \$3,816.62	\$18,911.71 \$23,473.10 \$20,789.33	\$1,891.54 \$1,983.34 \$2,011.20	\$1,558.44 \$1,566.15	\$2,986.71 \$3,025.43	\$12,160.86 \$11,764.75	\$9,551.90	\$17,090.31 \$21,508.88 \$17,008.00	\$532.49 \$527.58 \$530.49	\$3,266.06 \$3,407.56 \$3,335.92
FY 2018-1 FY 2019-2 Estimated FY 2020-2	9 \$2,685.98 0 \$2,859.04 1 \$3,178.74	\$8,013.95 \$8,366.83	\$9,124.50 \$9,601.35 \$9,588.16	\$6,500.84 \$6,744.74	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41	\$2,753.38 \$2,945.94 \$2,830.75 \$2,886.04	\$4,023.94 \$4,025.28 \$3,816.62 \$3,848.35	\$18,911.71 \$23,473.10	\$1,891.54 \$1,983.34	\$1,558.44	\$2,986.71	\$12,160.86 \$11,764.75	\$9,551.90	\$17,090.31 \$21,508.88 \$17,008.00	\$532.49 \$527.58	\$3,266.06 \$3,407.56
FY 2018-17 FY 2019-20 FE stimated FY 2020-2 Estimated FY 2020-2	9 \$2,685.98 0 \$2,859.04 1 \$3,178.74 2 \$3,037.59	\$8,013.95 \$8,366.83 \$8,040.86	\$9,124.50 \$9,601.35 \$9,588.16	\$6,500.84 \$6,744.74 \$6,966.35	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41	\$2,753.38 \$2,945.94 \$2,830.75	\$4,023.94 \$4,025.28 \$3,816.62 \$3,848.35	\$18,911.71 \$23,473.10 \$20,789.33	\$1,891.54 \$1,983.34 \$2,011.20	\$1,558.44 \$1,566.15	\$2,986.71 \$3,025.43	\$12,160.86 \$11,764.75	\$9,551.90	\$17,090.31 \$21,508.88 \$17,008.00	\$532.49 \$527.58 \$530.49	\$3,266.06 \$3,407.56 \$3,335.92
FY 2018-1 FY 2019-2 Estimated FY 2019-2 Estimated FY 2019-2 Estimated FY 2012-2 Estimated FY 2012-2  ACUTE CARE	9 \$2,685.98 0 \$2,859.04 1 \$3,178.74 2 \$3,037.59	\$8,013.95 \$8,366.83 \$8,040.86	\$9,124.50 \$9,601.35 \$9,588.16 \$9,926.87 Disabled Individuals to 59 (AND/AB)	\$6,500.84 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41	\$2,753.38 \$2,945.94 \$2,830.75 \$2,886.04 Thange in Per Capit MAGI Parents/ Caretakers 69% to 133% FPL	\$4,023,94 \$4,025,28 \$3,816,62 \$3,848,35 a Cost MAGI Adults	\$18,911.71 \$23,473.10 \$20,789.33	\$1,891.54 \$1,983.34 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC)	\$1,558.44 \$1,566.15 \$1,585.79 SB 11-008 Eligible Children	\$2,986.71 \$3,025.43 \$3,080.45 Foster Care	\$12,160.86 \$11,764.75 \$11,872.41 MAGI Pregnant Adults	\$9,551.90 \$9,650.81 SB 11-250 Eligible Pregnant Adults	\$17,090.31 \$21,508.88 \$17,008.00	\$532.49 \$527.58 \$530.49	\$3,266.06 \$3,407.56 \$3,335.92
FY 2018-1 FY 2019-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2022-2  ACUTE CARE  FY 2012-1	9 \$2,685,98 0 \$2,859,04 1 \$3,178,74 2 \$3,037,59 3 \$3,171,61 Adults 65 and Older (OAP-A)	\$8,013.95 \$8,366.83 \$8,040.86 \$8,289.31 Disabled Adults 60 to 64 (OAP-B)	\$9,124.50 \$9,601.35 \$9,588.16 \$9,926.87 Disabled Individuals to 59 (AND/AB)	\$6,500.84 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41 Percent ( MAGI Parents/ Caretakers to 68% FPI.	\$2,753.38 \$2,945.94 \$2,830.75 \$2,886.04 Change in Per Capit MAGI Parents/ Caretakers 69% to 133% FPL	\$4,023.94 \$4,025.28 \$3,816.62 \$3,848.35 a Cost MAGI Adults	\$18,911.71 \$23,473.10 \$20,789.33 \$19,643.03 Breast & Cervical Cancer Program -10.83%	\$1,891.54 \$1,983.34 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC)	\$1,558.44 \$1,566.15 \$1,585.79 SB 11-008 Eligible Children	\$2,986.71 \$3,025.43 \$3,080.45 Foster Care	\$12,160.86 \$11,764.75 \$11,872.41 MAGI Pregnant Adults 8.38%	\$9,551.90 \$9,650.81 SB 11-250 Eligible Pregnant Adults	\$17,090.31 \$21,508.88 \$17,008.00 \$17,207.13 Non-Citizens- Emergency Services	\$532.49 \$527.58 \$530.49 \$545.53 Partial Dual Eligibles	\$3,266.06 \$3,407.56 \$3,335.92 \$3,380.53 TOTAL
FY 2018-1 FY 2019-2 Full State of FY 2019-2 ACUTE CARE FY 2018-1 FY 2018-1	9 \$2,685.98 0 \$2,859.04 1 \$3,178.74 2 \$3,037.59 3 \$3,171.61	\$8,013.95 \$8,366.83 \$8,040.86 \$8,289.31 Disabled Adults 60 to	\$9,124.50 \$9,601.35 \$9,588.16 \$9,926.87 Disabled Individuals to 59 (AND/AB) -4.51% 5.87%	\$6,500.84 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41 Percent 6 MAGI Parents/ Caretakers to 68%	\$2,753.38 \$2,945.94 \$2,830.75 \$2,886.04 Thange in Per Capit MAGI Parents/ Caretakers 69% to 133% FPL	\$4,023,94 \$4,025,28 \$3,816,62 \$3,848,35 a Cost MAGI Adults	\$18,911.71 \$23,473.10 \$20,789.33 \$19,643.03 Breast & Cervical	\$1,891.54 \$1,983.34 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC)	\$1,558.44 \$1,566.15 \$1,585.79 SB 11-008 Eligible Children	\$2,986.71 \$3,025.43 \$3,080.45 Foster Care	\$12,160.86 \$11,764.75 \$11,872.41 MAGI Pregnant Adults 8.38% 3.27%	\$9,551.90 \$9,650.81 SB 11-250 Eligible Pregnant Adults	\$17,090.31 \$21,508.88 \$17,008.00 \$17,207.13 Non-Citizens- Emergency Services 6 7.68% 6 4.79%	\$532.49 \$527.58 \$530.49 \$545.53	\$3,266.06 \$3,407.56 \$3,335.92 \$3,380.53
FY 2018-1 FY 2019-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2022-2  ACUTE CARE  FY 2012-1	9 \$2,685,98 10 \$2,859,04 1 \$3,178,74 2 \$3,037,59 3 \$3,171,61 Adults 65 and Older (OAP-A) 3 \$2,07% 4 6,10% 5 11,60% 6 14,92%	\$8,01305 \$8,366.83 \$8,340.86 \$8,289.31 Disabled Adults 60 to 64 (OAP-B) -0.05% 4.27% 7.61% 0.13%	\$9,124,50 \$9,601,35 \$9,588,16 \$9,926,87 Disabled Individuals to 59 (AND/AB) -4,51% 5,87% -0,33% -0,33%	\$6,500.84 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In 68.10% -21.02% -41.44% -4.69%	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41 Percent 0 MAGI Parents/ Caretakers to 68% FPL -1,31% -9.99% 1.37%	\$2,753.38 \$2,945.94 \$2,830.75 \$2,886.04 Change in Per Capit MAGI Parents/ Caretakers 69% to 133% FPL -5.29% 3.82% 3.34% 2.19%	\$4,023,94 \$4,025,28 \$3,816,62 \$3,848,35 a Cost MAGI Adults 146,29% -29,48% -2,45% -2,25%	\$18.91.71 \$23,473.10 \$20,789.33 \$19,643.03 Breast & Cervical Cancer Program -10.83% 3.51% -8.74%	\$1,891.54 \$1,983.34 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC) 0.18% 3.19% 4.02%	\$1.588.44 \$1.566.15 \$1.585.79 SB 11-008 Eligible Children 0.00% -14.28% -7.90% 5.94%	\$2,986.71 \$3,025.43 \$3,080.45 Foster Care -4.04% \$.16% 0.16% 2.52%	\$12,169.86 \$11,764.75 \$11,872.41 MAGI Pregnant Adults 8.38% 3.27% 12.11%	\$9,551.90 \$9,650.81 SB 11-250 Eligible Pregnant Adults 0.00% -1.11% 14.62% 2.96%	\$17,090.11 \$21,508.88 \$17,008.00 \$17,207.13 Non-Citizens- Emergency Services \$7,68% \$4,79% \$4,417% \$4,411% \$4,015%	\$32.49 \$327.58 \$530.49 \$545.53 Partial Dual Eligibles 4.705 26.52% -15.32% 42.69%	\$3,266.05 \$3,407.56 \$3,335.92 \$3,380.53 TOTAL -0.43% 3,79% 4,56% 1,65%
PY 2018-1 FY 2019-2 Farinated PY 2012-2 Fatinated PY 2012-2 FY 2014-1 FY 2014-1 FY 2014-1 FY 2015-1 FY 2015-1	9 \$2,885 98 \$2,885 94 1 \$3,178.74 2 \$3,037.59 3 \$3,171.61 Adults 65 and Older (OAP-A) 3 \$2.07% 4 6.10% 5 11.60% 6 14.92% 7 8.88%	\$8,01305 \$8,366.83 \$8,040.86 \$8,289.31 Disabled Adults 60 to 64 (OAP-B) -0.05% 4.27% 7.61% 0.13%	\$9,124.50 \$9,601.35 \$9,588.16 \$9,926.87 Disabled Individuals to 59 (AND/AB) -4.51% 5.87% -0.33% -1.021% -1.021%	\$6,500.84 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In 68.10% -21.02% -41.44% -4.69% -6.22%	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41 Percent ( MAGI Parents/ Caretakers to 68% FPL -1.31% -9.99% -1.37% -0.14% -1.4.52%	\$2,753.38 \$2,945.94 \$2,830.75 \$2,880.07 \$1,2850.07 \$1,2850.07 \$1,2850.07 \$1,2850.07 \$1,2950.07 \$1,2950.07 \$1,2950.07 \$1,2950.07 \$1,19750.0	\$4023.94 \$4025.28 \$3.816.62 \$3.848.35 a Cost MAGI Adults 146.29% -29.48% -2.45% -2.45% -1.1.46%	\$18,911.71 \$23,473.10 \$20,789.33 \$19,643.03  Breast & Cervical Cancer Program -10.83% -3.51% -8.74% -17.56% 36.37%	\$1,891.54 \$1,983.34 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC) 0.18% 4.02% 4.02% 5.79%	\$1,588,44 \$1,566,15 \$1,585,79 \$B 11-008 Eligible Children 0.00% -14,28% -7,90% 5,94% 9,56%	\$2,986.71 \$3,025.43 \$3,080.45 Foster Care -4.04% \$1.16% 0.16% -2.52% -6.71%	\$12,160.86 \$11,764.75 \$11,872.41 MAGI Pregnant Adults 8.38% 3.27% 12,11% 4.38% 4.10,39%	\$9,551.90 \$9,650.81 \$B 11-250 Eligible Pregnant Adults 0.00% -1.11% 14.62% 2.96% -19.72%	\$17,090.31 \$21,508.88 \$17,008.00 \$17,207.13 Non-Citizens- Emergency Services 6 7.68% 6 -4.79% 6 -4.11% 6 -0.15%	\$32.49 \$227.58 \$30.49 \$545.53 Partial Dual Eligibles 4.70% 26.52% -15.32% 42.69% -17.87%	\$3,266.05 \$3,407.56 \$3,335.92 \$3,380.53 TOTAL -0.43% 3.79% 4.56% -10.40%
FY 2015-1 FY 2019-2 Estimated FY 2017-2 Estimated FY 2017-2 Estimated FY 2017-2 Estimated FY 2017-2  ACUTE CARE  FY 2017-1	9 \$2,685.08   \$2,685.08   \$2,889.04   \$3,178.41   \$3,177.61    Adults 65 and Older (OAP-A)   \$3 \$2.07%   \$4 6.10%   \$5 \$11.60%   \$6 \$14.92%   \$7 \$8.08%	\$8,013.05 \$8,366.83 \$8,240.86 \$8,289.31 Disabled Adults 60 to 64 (OAF-B) -0.05% 4.27% 7.61% -14.53% 1-14.53%	\$9,124,50 \$9,601,35 \$9,588.16 \$9,926.87 Disabled Individuals to 59 (AND/AB) -4,51% 5,87% -0,33% -10,21% 10,21% 24,74%	\$6,500,84 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In 68.10% -21,02% -41,44% -4,69% -6,22% -17,24%	\$2,860.22 \$3,022.66 \$2,873.76 \$2,900.41 Percent ( MAGI Parents/ Caretakers to 68% FPL -1.31% -9.99% 1.37% 0.14% 1-14.52%	\$2,753.38 \$2,945.94 \$2,830.75 \$2,885.04! Change in Per Capit MAGI Parents/ Caretakers 69% to 133% FPL \$5,29% 3,34% \$2,19% 4,1191% 4,1191%	\$4,023,94 \$4,025,28 \$3,846,35 <b>a Cost</b> MAGI Adults 146,29% 29,48% 2,45% -2,95% -11,46%	\$18.911.71 \$23.473.10 \$20,789.33 \$19,643.03 Breast & Cervical Cancer Program -10.83% -8.14% -17.55% 36.37%	\$1,891.54 \$1,983.34 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC) 0.18% 3.19% 4.02% 5.27% 5.57% 18.55%	\$1,588,44 \$1,566,15 \$1,585,79 \$1,585,79 \$1,585,79 \$1,585,79 \$1,585,79 \$1,90% \$1	\$2,986.71 \$3,025.41 \$3,080.45 \$3,080.45 Foster Care -4.04% \$1.6% 0.16% 0.16% -6.17% 16.09%	\$12,160,86 \$11,764.75 \$11,872.41  MAGI Pregnant Adults  8.38% 3.27% 12.11% 3.80% -10.39% 23.31%	\$9,551.90 \$9,650.81 \$B 11-250 Eligible Pregnant Adults 0.00% -1.11% 14.62% 2.96% -19.72%	\$17,090.11 \$21,508.88 \$17,008.00 \$17,207.13  Non-Citizens- Emergency Services 4.7,85% 4.4,179% 4.411% 5.0.15% 6.3,44% 6.3,44%	\$32.49 \$327.58 \$530.49 \$545.53 Partial Dual Eligibles 4.70% 26.52% 415.32% 42.69% 417.87% 2.11%	\$3,266 06 \$3,407.56 \$3,335.92 \$3,380.53 TOTAL -0.43% 4.56% 4.56% 16.5% 10.40% 19.00%
PY 2018-1 FY 2019-2 Farinated PY 2012-2 Fatinated PY 2012-2 FY 2014-1 FY 2014-1 FY 2014-1 FY 2015-1 FY 2015-1	S 2,685 98 0   S 2890 1   S 3,876 1   S 3,178.74   S 3,178.74   S 3,178.74   S 4,178.61   Adults 65 and Older (OAP-A)   1   1,169%   1,169	\$8,013.95 \$33,653.35 \$8,269.31 Disabled Adults 60 to 64 (OAP-B) 427% 427% 14,53% 14,53% 18,91% 2,24% 1,110%	\$9,124,50 \$9,601,35 \$9,588,16 \$9,926.87 Disabled Individuals to 50 (AND/AB) 4-5,15 5,87% -0,33% 10,21% 24,21% 24,21% 24,21% 24,21% 24,21% 3,35% 3,35%	\$6,500.84 \$6,744 \$6,06.35 \$7,255.64 Disabled Buy-In \$6,10% \$21,02% \$41,42% \$6,22% \$17,24% \$4,23% \$6,00.85 \$1,00	\$2,860,22 \$3,022.66 \$2,873.76 \$2,900.41 Percent MAGI Parents/ Caretakers to 68% FPL -131% -9.99%, 1.37% 0.145.52% -14.53% -6.84%, 4.65% -6.84% 4.65%	\$2,753.38 \$2,945 \$4 \$2,830.75 \$2,880.75 \$2,880.64 Change in Per Capi MAGI Parents/ Caretakers 69% to 133% FPL 3,82% 3,34% 2,19% 4,11915 4,82% 11,085	\$4023.94 \$4025.28 \$3.816.62 \$3.848.35 <b>a Cost</b> MAGI Adults 146.29% -29.48% -2.45% -1.1.46% -1.1.46% -1.1.16% -1.1.16% -1.1.16% -1.1.16% -1.1.16% -1.1.16% -1.1.16% -1.1.16% -1.1.16% -1.1.16%	\$18,911,71 \$23,473 \$20,789,33 \$19,643,03 \$19,643,03 \$19,643,03 Breast & Cervical Cancer Program -10,83% -3,51% -17,56% -3,037% -16,56% -20,11% -24,51%	\$1,891.54 \$1,983.4 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC) 0.18% 4.02% 2.43% 5.79% 0.77% 0.77%	\$1,558,44 \$1,566,15 \$1,585,79 \$1,585,79 \$1,585,79 \$1,000% \$1,42,8% \$1,900% \$1,	\$2,966.71 \$3,025.43 \$3,080.45 Foster Care -4.04% \$.16% 0.10% -6.71% 1.42% -6.60%	\$12,169.86 \$11,764.75 \$11,872.41 MAGI Pregnant Adults 8.38% 3.27% 12.11% 3.80% -10.33% 2.33% -2.33% 2.82% 2.83%	\$9,551.90 \$9,650.81 SB 11-250 Eligible Pregnant Adults 0.00% -1.11% 14.62% 2.96% -1.9,72% -1.9,72% -1.9,72% -1.9,72% -1.9,72%	\$17,090.31 \$21,508.88 \$17,008.00 \$17,207.13 Non-Citizens- Emergency Services \$ 7,68% \$ 4-4,17% \$ 4-4,17% \$ 6 -4,115% \$ 6 -4,115% \$ 6 -1,15% \$ 6 -1,1247% \$ 6 -1,1247%	\$33.249 \$327.58 \$330.49 \$545.53 Partial Dual Eligibles 4.70% 26.52% 415.32% 42.69% 417.87% 42.69% 41.78% 4.00% 4.00%	\$3,266.05 \$3,407.56 \$3,335.92 \$3,380.53 TOTAL -0.43% -0.43% -1.040% -1.040% -0.53% -0.53% -0.53% -0.53%
FY 2018-1	S2,685.98  S2,594  S3,178,74  S3,178,74  S3,171,61  Adults 65 and Older (OAP-A)  COPP  4 6,109  5 11,609  6 14,929  7 8,808  8 13,879  0 6,449  11,188	\$8,013.95 \$3,663.8 \$8,289.31 Disabled Adults 60 to 64 (OAP-B) 7,61% 4,27% 1,15% 1,15% 1,16% 4,16% 1,16% 4,16% 1,16% 4,16	\$0,124.50 \$3,601.35 \$9,538.16 \$9,588.16 \$9,588.16 to 59 (ANDIAB) 4,35% -0.33% -0.43% -	\$6.500.84 \$6.74.72 \$6.966.35 \$7.255.64 Disabled Buy-In 68.10% -21.02% -4.69% -6.29% -6.29% -0.08% -0.08%	\$2.860.22 \$3.0264 \$2.2073.76 \$2.200.41 Percent of MAGI Parents/ Caretakers to 68% FPL 1.31% 0.99% 0.14% 1.17% 4.69% 6.84% 5.68%	\$2,753.8 \$2,945.84 \$2,840.75 \$2,880.75 \$2,880.75 \$2,880.76 \$1,000.75 \$1,000.	\$4023.94 \$4025.28 \$3.816.62 \$3.848.35 <b>a Cost</b> MAGI Adults 146.29% 2.94%; 2.29% -11.46% -1.146	\$18.911.71 \$23.473.01 \$20,799.33 \$19,643.03 \$19,643.03  Breast & Cervical Cancer Program -10.83% -8.74% -8.74% -1.55% -1.55% -1.6.68% -20.11% -24.15% -24.15%	\$1,891,54 \$1,983,4 \$2,011,20 \$2,048,06 \$2,048,06 \$2,048,06 \$2,048,06 \$2,048,06 \$1,059,	\$1,558,44 \$1,566,15 \$1,585,79 \$1,585,79 \$B11-008 Eligible Children 1-14,28% -7,90% 5,94% 5,94% -9,56% -9,56% -3,30% -4,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -4,30	\$2,96.71 \$3,05.43 \$3,060.45 \$3,060.45 \$1,060.4	\$12,160.86 \$11,764.75 \$11,872.41 MAGI Pregnant Adults \$3.89 \$1.21.19 \$1.21.19 \$1.21.19 \$1.30 \$1.30 \$1.	\$9,551,90 \$9,650.81 \$B 11-250 Eligible Pregnant Adults 0.00% -1.11% 14.62% 2.96% 19,72% 18.56% 0.97% 0.97%	\$17,09.13 \$21,08.88 \$17,008.00 \$17,008.00 \$17,008.00 \$17,207.13 Non-Citizens- Emergency Services 4-4,79% 4-4,79% 4-4,79% 4-4,1	\$332.49 \$327.58 \$330.49 \$345.53 Partial Dual Eligibles 4.70% 26.53% 42.69% 42.69% 21.11% 4.08% 4.08% 4.08% 4.08%	\$3,266.06 \$3,407.56 \$3,315.02 \$3,380.53 TOTAL  -0.43% -0.45% -1.040% -1.040% -1.040% -1.053% -0.53% -0.53% -0.53% -0.43%
FY 2013-1  FY 2012-1  Farmated FY 2012-2  ACUTE CARE  FY 2013-1  FY 2013-1	0 \$2,685.98 0 \$2,890.0 \$2,890.0 \$3,870.0 \$3,178,74 \$3,178,74 \$3,171.61  Adults 65 and Older (OAP-A) \$4,171.60 \$5,171.60 \$5,171.60 \$6,140.0 \$7,580.00 \$1,160.	\$8,013.95 \$3,56.83 \$8,040.86 \$8,289.31 Disabled Adults 60 to 64 (OAP-B) 4.27% 7,61% 0.1355 14,53% 14,53% 14,53% 14,53% 14,43% 14	\$0,124.50 \$36,013.5 \$35,588.16 \$9,926.87 Disabled Individuals (aND/AB) -4.51% (aND/AB) -4.51% -0.33% -10.21% 0.27% 0.27% 0.27%	\$6,500.34 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In 68,10% -21,02% -41,44% -6,22% 17,24% -4,50%	\$3.860 22 \$3.02.66 \$2.873.76 \$2.90.41 Percent ( MAGI Parents/ Caretalen to 68% FPI. -1.31% 0.145.25% 1.37% 6.84% 4.65% 5.68% 4.69%	\$2,753.38 \$2345.94 \$2380.75 \$2,880.74 hange in Per Capit MAGI Parents Caretakers 69% to 133% FPI. 5.29% 3.32% 11.91% 4.82% 10.65% 6.99% 10.65% 6.99% 10.65%	\$4023.04 \$4025.35 \$3,816.62 \$3,816.62 AG Cost MAGI Adults 146.29% -24.48% -2.24.48% -2.24.48% -2.25% -1.12.60% -1.12	\$18,911,71 \$23,473,01 \$20,789.33 \$19,643.03  Breast & Cervical Cancer Program -10,85% -3,51% -8,74% -9,74% -10,50% -20,11% -24,12% -24,12% -1,145%	\$1,891.54 \$1,983.4 \$2,011.20 \$2,048.06 Eligible Children (AFDC-C/BC) 0.18% 4.02% 2.43% 5.79% 0.77% 0.77%	\$1,558.44 \$1,566.15 \$1,585.79 \$1,585.79 \$1,585.79 \$1,1008 Eligible Children 0,00% -14,28% -7,50% -9,56% -0,56% -0,30% -0,	\$2,986.71 \$3,025.81 \$3,080.45 \$3,080.45 Foster Care -4,04% 8,16% 0,16% 0,25% -6,71% 1,42% -6,66% 3,08% 1,30%	\$12,160.86 \$11,767.25 \$11,872.41 MAGI Pregnant Adults 3.27% 12.11% 1.38% 2.23% 2.23% 2.23% 5.57% 3.57%	\$9,551.90 \$9,650.81 \$8 11-250 Eligible Pregnant Adults -1,119% -1,119% -1,972% -1,972% -1,572%	\$17,090.31 \$21,008.00 \$17,008.00 \$17,008.00 \$17,007.13  Non-Citizens- Emergency Services 4,479% 4,479% 4,479% 4,479% 4,411% 4,419% 4,414,41% 4,414	\$32,248 \$27,288 \$30,49 \$545,53 Partial Dual Eligibles 4 4,70% 26,52% 41,532% 42,60% 11,87% 52,24% 40,00% 40	\$3,266.06 \$3,407.55 \$3,335.92 \$3,380.53 TOTAL -0.43% -0.43% -1.04% -1.04% -1.04% -0.23
FY 2018-1	S2,685.98  S2,594  S3,178,74  S3,178,74  S3,171,61  Adults 65 and Older (OAP-A)  COPP  4 6,109  5 11,609  6 14,929  7 8,808  8 13,879  0 6,449  11,188	\$8,013.95 \$3,663.8 \$8,289.31 Disabled Adults 60 to 64 (OAP-B) 7,61% 4,27% 1,15% 1,15% 1,16% 4,16% 1,16% 4,16% 1,16% 4,16	\$0,124.50 \$36,013.5 \$35,588.16 \$9,926.87 Disabled Individuals (aND/AB) -4.51% (aND/AB) -4.51% -0.33% -10.21% 0.27% 0.27% 0.27%	\$6.500.84 \$6.74.72 \$6.966.35 \$7.255.64 Disabled Buy-In 68.10% -21.02% -4.69% -6.29% -6.29% -0.08% -0.08%	\$2.860.25 \$3.802.05 \$2.873.76 \$2.900.41 PACE PROPERTY OF THE P	\$2,753.88 \$2,945.94 \$2,880.75 \$2,886.04 hange in Per Capit MAGI Parents' Geretaker 69% to 133% FPL 3,82% \$2,19% \$1,19% \$1,19% \$1,00% \$1	\$4023.94 \$4025.28 \$3.816.62 \$3.848.35 <b>a Cost</b> MAGI Adults 146.29% 2.94%; 2.29% -11.46% -1.146	\$18.911.71 \$23.473.01 \$20,799.33 \$19,643.03 \$19,643.03  Breast & Cervical Cancer Program -10.83% -8.74% -8.74% -1.55% -1.55% -1.6.68% -20.11% -24.15% -24.15%	\$1,891,54 \$1,983,4 \$2,011,20 \$2,048,06 \$2,048,06 \$2,048,06 \$2,048,06 \$2,048,06 \$1,059,	\$1,558,44 \$1,566,15 \$1,585,79 \$1,585,79 \$B11-008 Eligible Children 1-14,28% -7,90% 5,94% 5,94% -9,56% -9,56% -3,30% -4,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -3,30% -4,30	\$2,96.71 \$3,05.43 \$3,060.45 \$3,060.45 \$1,060.4	\$12,160.86 \$11,767.25 \$11,872.41 MAGI Pregnant Adults 3.27% 12.11% 1.38% 2.23% 2.23% 2.23% 5.57% 3.57%	\$9,551.90 \$9,650.81 \$8 11-250 Eligible Pregnant Adults -1.11% 14.62% -1.97.2% -1.57% -	\$17,090.31 \$21,008.00 \$17,008.00 \$17,008.00 \$17,007.13  Non-Citizens- Emergency Services 4,479% 4,479% 4,479% 4,479% 4,411% 4,419% 4,414,41% 4,414	\$332.49 \$327.58 \$330.49 \$345.53 Partial Dual Eligibles 4.70% 26.53% 42.69% 42.69% 21.11% 4.08% 4.08% 4.08% 4.08%	\$3,266.06 \$3,407.56 \$3,315.02 \$3,380.53 TOTAL  -0.43% -0.45% -1.040% -1.040% -1.040% -1.053% -0.53% -0.53% -0.53% -0.43%
FY 2013-1  FY 2012-1  Farmated FY 2012-2  ACUTE CARE  FY 2013-1  FY 2013-1	S2,685.98 0 \$2,890.11 1 \$3,178,74 1 \$3,178,74 2 \$1,077.50 3 \$3,177.61  Adults 65 and Older (OAP-A) 4 6.079.6 5 11.679.6 6 14.929.6 7 -8.089.8 11.879.6 6 12.244.415,11 1 11.188.2 4 4.415,11 1 4.415,11	SS 013 95 SS 360-SS SS 360-SS SS 360-SS SS 200-SS SS 200-SS SS 200-SS Disabled Adults 60 to 64 GAP-B) GOAP-B) GOAP-B GOAP	\$0,124.50 \$36,013.53 \$35,588.16 \$9,926.87 Disabled Individuals to 59 (AND/AB) 4.51% 4.51% 4.51% 4.0.27% 4.0.27% 4.0.27% 5.23% 4.0.27% 5.23	\$6,500.34 \$6,744.74 \$6,966.35 \$7,255.64 Disabled Buy-In 68,10% -21,02% -41,44% -6,22% 17,24% -4,50%	\$3,802 co \$3,802 co \$2,873.76 \$3,900 do \$4,802 co \$4,802	\$2,753.38 \$2,965.34 \$2,380.74 \$1,280.75 \$1,280.74 \$1,280.74 \$1,280.74 \$1,290.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200	\$4023.04 \$4025.35 \$3,816.62 \$3,816.62 AG Cost MAGI Adults 146.29% -24.48% -2.24.48% -2.24.48% -2.25% -1.12.60% -1.12	\$18,911,71 \$21,473 \$20,789.33 \$19,643.03  Breast & Cervical Cancer Program -10,83% -3,51% -8,76% -3,51% -8,76% -1,55% -20,11% -24,12% -24,12% -25,15%	\$1,891.54 \$1,983.54 \$1,983.61 \$2,048.05 \$2,048.05 \$2,048.05 \$2,048.05 \$1,095	\$1,558.64 \$1,566.15 \$1,585.70 SB 11-008 Eligible Children 0.00%, -14.28%, -7.90%, -9.50%, -0.40%, -0.	\$2,986.71 \$3,025.81 \$3,080.45 \$3,080.45 Foster Care -4,04% 8,16% 0,16% 0,25% -6,71% 1,42% -6,66% 3,08% 1,30%	\$12,160.86 \$11,767.25 \$11,872.41 MAGI Pregnant Adults 3.27% 12.11% 1.38% 2.23% 2.23% 2.23% 5.57% 3.57%	\$9.551.90 \$9.650.81  SB 11-250 Eligible Pregnant Adults  0.00% -1.11% 14.62% 2.90% -1.97.72% 1.97.72% 3.25% 0.37% 8.25% 0.37% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27% 8.27%	\$17,003.1 \$21,048.88 \$17,048.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$10,008.00 \$	\$32,248 \$27,288 \$30,49 \$545,53 Partial Dual Eligibles 4 4,70% 26,52% 41,532% 42,60% 11,87% 52,24% 40,00% 40	\$3,266.06 \$3,407.55 \$3,335.92 \$3,380.53 TOTAL -0.43% -0.43% -1.04% -1.04% -1.04% -0.23
FY 2019-1	0 \$2,685.98 0 \$2,865.98 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 2 \$3,075.93 2 \$3,171.61 4 \$4,075.93 2 \$2,079.1 1 \$1,879.9 1 \$	SS.013.95 SS.165.83 SS.289.31 Disabled Adults 60 to 64 (OAP-B)	\$0,124.50 \$3,603.53 \$35,588.16 \$9,926.87 Disabled Individuals to 59 (AND/AB) \$5,87% \$3,88% \$1,024.74% \$24,74% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25% \$3,25%	\$6,500.43 M \$6,744.14 \$6,966.15 \$7,255.64  Disabled Buy-In  68,10% -21,02% -4,69% -4,69% -6,22% -1,24% -6,23% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37%	\$2,860 25 \$3,022.66 \$2,2873.76 \$2,903.14 Percent 4 MAGI Parents' Caretalers to 68% FPL 131% 9,39% 1,145% 1,179% 4,68% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69% 4,69%	\$2,753.38 \$2,945.34 \$2,830.75 \$1,288.04 Change in Per Capit MAGI Parents/ 6,279 3,3826 2,195 4,195 4,195 4,527 4,5	\$4,023.04 \$4,025.35 \$3,816.62 \$3,848.35 14 Cost MAGI Adults 146,25% -29,48% -2,29% -2,29% -1,146% -1,1	\$18,911,71 \$23,473,01 \$20,789,33 \$19,643,03 \$19,643,03 Breast & Cervical Cancer Program -10,83% -3,51% -3,51% -1,7,56% -3,63% -1,1,56% -2,41,51% -2,41,51% -3,41,43% -3,51	\$1,891,54 \$1,983,44 \$2,011,20 \$2,048,05 \$2,048,06 Eligible Children (AFDC-C/BC) 3,19% 4,02% 4,02% 18,5% 0,2% 1,4% 4,1% 1,8% 1,8% 1,8% 1,8% 1,8% 1,8% 1,8% 1	\$1,558.45 \$1,566.15 \$1,585.79 \$B 11-008 Eligible Children -0.00% -1428% -7.90% -2.06% -0.00%	\$2,965.71 \$3,025.41 \$3,080.45 Foster Care  4.0.9% 4.0.9	\$12,160.80 \$11,764.75 \$11,872.41 MAGI Pregnant Adults \$3.80% \$2.21% \$1.21% \$2.31% \$2.33% \$2.3	\$9.551.90 \$9.650.81 \$8.650.81 \$8.650.81 \$1.1250 Eligible Pregnant Adults -1.1150 -1.11	\$17,09.01 \$21,09.08.88 \$17,008.00 \$17,207.13 Non-Citizens Emergency Services \$4,179.5 \$4,479.	\$32.40 \$32.7.81 \$530.40 \$545.53 Partial Dual Eligibles 4.70% 26.52% 4.26% 1.15.32% 4.26% 1.17.87% 2.11% 3.02% 3.03%	\$3,266.06 \$3,407.56 \$3,335.92 \$1,380.53  TOTAL  -0.43% -3.79% -4.56% -1.65% -1.04% -0.43% -1.04% -1.
FY 2019-2	S2,685.98 0 \$2,890.11 1 \$3,178,74 1 \$3,178,74 2 \$1,077.50 3 \$3,177.61  Adults 65 and Older (OAP-A) 4 6.079.6 5 11.679.6 6 14.929.6 7 -8.089.8 11.879.6 6 12.244.415,11 1 11.188.2 4 4.415,11 1 4.415,11	SS 013 95 SS 360-SS SS 360-SS SS 360-SS SS 200-SS SS 200-SS SS 200-SS Disabled Adults 60 to 64 GAP-B) GOAP-B) GOAP-B GOAP	\$0,124.50 \$36,013.51 \$39,058.16 \$39,058.16 \$39,058.16 \$19,060.16 \$10,060.16 \$	\$6,500.43 M \$6,744.14 \$6,966.15 \$7,255.64  Disabled Buy-In  68,10% -21,02% -4,69% -4,69% -6,22% -1,24% -6,23% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37% -1,37%	\$2,860 2 5 5,860 2 5 5,860 2 5 5,860 2 6 5 5,873.76 5 5,873.76 5 5,873.76 6 5 5 5,873.76 6 5 5 5,873.76 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	\$2,753.38 \$2,965.34 \$2,380.74 \$1,280.75 \$1,280.74 \$1,280.74 \$1,280.74 \$1,290.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200.74 \$1,200	\$4,023.04 \$4,025.35 \$3,816.62 \$3,848.35 14 Cost MAGI Adults 146,25% -29,48% -2,29% -2,29% -1,146% -1,1	\$18,911,71 \$21,473 \$20,789.33 \$19,643.03  Breast & Cervical Cancer Program -10,83% -3,51% -8,76% -3,51% -8,76% -1,55% -20,11% -24,12% -24,12% -25,15%	\$1,891.54 \$1,983.54 \$1,983.61 \$2,048.05 \$2,048.05 \$2,048.05 \$2,048.05 \$1,095	\$1,558.45 \$1,566.15 \$1,585.79  SB 11-008 Eligible Children	\$2,965.71 \$3,025.41 \$3,080.45 Foster Care  4.0.9% 4.0.9	\$12,169.8 \$11,764.75 \$11,872.41  MAGI Pregnant Adults  8.389; 3.27% 12,119% 4.239% 4.239% 4.239% 5.57% 0.92%  MAGI Pregnant Adults	\$9,55.90 \$9,65.91 \$8.11-250 Eligible Pregnant Adults 1-1115 1-1450-1-150 1-150	\$17,09.31 \$21,508.88 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$17,008.00 \$1,208	\$32.40 \$32.7.81 \$530.40 \$545.53 Partial Dual Eligibles 4.70% 26.52% 4.26% 1.15.32% 4.26% 1.17.87% 2.11% 3.02% 3.03%	\$3,266.06 \$3,407.56 \$3,335.92 \$1,380.53  TOTAL  -0.43% -3.79% -4.56% -1.65% -1.04% -0.43% -1.04% -1.
FY 2018-1	S2,685.98 0 \$2,269.19 1 \$3,178.74 1 \$3,178.74 2 \$1,077.61  Adults 65 and Older (OAP-A) 1 \$1,000.00 1 \$1,000.00 1 \$1,000.00 1 \$1,000.00 1 \$1,000.00 1 \$1,189.00 1 \$	SS.013.95 SS.06.35 SS.06.35 SS.06.05 SS.20.31 Disabled Adults 60 to 6 (OAP-B)	\$50,124.50 \$50,035.55 \$50,585.16	\$6,500.43 M \$6,744.54 \$6,966.35 \$7,255.64  Disabled Buy-In  68,10% -21,02% -4,60% -4,60% -4,60% -4,1	\$2,860 2 5 5,860 2 5 5,860 2 5 5,860 2 6 5 5,873.76 5 5,873.76 5 5,873.76 6 5 5 5,873.76 6 5 5 5,873.76 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	\$2,753.88 \$2,945.94 \$2,53.80.74 \$1,53.80.74 \$1,53.80.74 \$1,52.80.7	\$4.023.04 \$4.005.5 \$4.005.5 \$4.005.00 \$4.005.0	\$18,911,71 \$23,473,10 \$20,789,33 \$19,643,03 \$19,643,03 Breast & Cervical Cancer Program	\$1,891.54 \$1,983.54 \$1,983.54 \$2,041.20 \$2,048.06 Eligible Children (APDC-C/BC)  0.18%, 0.24%, 0.77%, 0.77%, 1.85%	\$1,558,44 \$1,566,15 \$1,585,79 \$1,585	\$2,986.71 \$3,025.31 \$3,080.45 Foster Care -4.05% 8.16% 0.16% 0.25% -6.71% 1.42% -6.60% 3.06% 1.82%	\$12,169.86 \$11,075.25 \$11,872.41  MAGI Pregnant Adults  \$3,279. \$1,3807. \$2,389. \$2,389. \$2,389. \$4,207. \$4,207. \$4,207. \$4,207. \$4,207. \$4,207. \$5,109.  MAGI Pregnant Adults	\$9,551.00 \$9,650.11 \$B 11-250 Eligible Pregnant Adults 14.1525 14.1525 15.555 1	\$17,09,31	\$32,20 \$327.81 \$330.40 \$345.51 \$350.40 \$4.00	\$3,260.66 \$3,407.55 \$3,135.92 \$3,330.53  TOTAL  -0.48% -0.39% -1.59% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -1.04% -0.35% -0.05% -0.
FY 2019-1	S2,685.98 0 \$2,890.1 1 \$3,178.74 1 \$3,178.74 2 \$5,077.3 3 \$3,171.61  Adults 65 and Older (OAP-A) 6 \$1,070.1 6 \$1,070.1 7 \$1,070.1 7 \$1,070.1 8 \$1,18.77,0 0 \$4,497.1 1 \$1,18.77,0 0 \$4,497.1 1 \$1,18.77,0 0 \$4,497.1 0 \$4,49	S801395 S3,663 S3,063,6 S3,203,1 S3,063,6 S3,203,1 Disabled Adults 60 to 64 (OAP-B)	S0/24.50   S0/013.51   S0/08.167   S0/08.167   S0/08.167   Disabled Individuals   -4.51%   -4.51%   -4.51%   -0.33% 	\$6,500.84 \$6,744.74 \$6,066.35 \$72.25.66 Disabled Buy-In  68,10% 41,44% 41,44% 42,44% 41,44% 42,54% 41,44% 42,54% 41,54% 41,54% 41,55% 42,55% 4	\$3,802.02 \$3,802.03 \$2,873.76 \$2,873.76 \$2,873.76 \$2,873.76 \$2,873.76 \$4,972	\$2,753.38 \$2,945.34 \$2,380.73 Change in Per Capit MAGI Parcapit MAGI Parcapit 3,32% 3,34% 2,19% 3,110.65% 3,110.65% 4,110.75 2,743.75 4,110.75 2,743.75 4,110.75 2,743.75 4,110.75 4,11	\$4,023.44 \$4,025.5 \$3,816.02 \$3,848.35 \$4,025.6	\$18,911.71 \$23,473 \$20,789.33 \$10,643.03 \$10	\$1,891.54 \$1,983.45 \$2,081.50 \$2,081.60 \$2,081.60 Eligible Children (APDC-CBC) \$3,1976. \$4,0256 \$4,0256. \$4,0256. \$5,7956. \$1,87556. \$1,4756. \$1,4756. \$1,87	\$1,558.45 \$1,566.15 \$1,585.79  SB 11-008 Eligible Children  0.00%; -1,12,35%; -1,25%; -2,56%; -2,56%; -2,56%; -3,13%;	\$2,965.74 \$3,05.74 \$3,080.45  Foster Care  -4.04% 8.16% 6.16% 6.16% 6.66% 1.30% 1.82% Foster Care	\$12,169.86 \$11,072,41  MAGI Pregnant Adults  \$1,38% \$2,79% \$2,31% \$2,31% \$2,31% \$2,33% \$2,33% \$2,33% \$2,33% \$3,30%	\$9,551.00 \$9,650.81 \$8 11-259 Eligible Pregnant Adults 1.111% 1.115% 1.1	\$17,003.1 \$21,508.88 \$17,008.00 \$	\$32.28 \$52.28 \$53.00 \$54.53 \$15.00 \$1	\$3,266.06 \$3,075 \$3,005 \$3,005  TOTAL  0.43% 4.56% 4.56% 1.65% 1.04% 5.10% 5.1
FY 2015-1	S2,685.98 0 \$2,269.10 1 \$2,269.10 1 \$3,178.74 1 \$3,178.74 2 \$1,077.61  Adults 65 and Older (O.Ar-A) 1 \$2,077.61 4 6.107.61 6 14.92% 6 14.92% 7 4.08% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 14.92% 6 15.87% 6 14.92% 6 15.87% 6 15.87% 6 15.87% 6 15.88% 6 5.88% 6 5.88% 6 5.88%	SS.013.95 SS.06.35 SS.06.35 SS.06.35 SS.00.35 SS.00.35 SS.00.35 SS.00.35 Disabled Adults of to della Control C	\$0,124.50 \$36,013.51 \$95,888.16 \$95,988.16 \$95,988.16 \$1,990 \$1,900 \$1,9	\$6,500.84 \$6,744.4 \$6,06.15 \$7,255.6  Disabled Buy-In  68,10% -21,02% -1,128% -4,23% -	\$2,860 22 \$3,022 66 \$2,873.76 \$2,903.102 66 \$2,873.76 \$2,903.102 66 \$2,873.76 \$2,903.102 68 \$4,003.1	\$2,753.38 \$2,965.34 \$2,380.74 \$1,280.75 \$1,280.75 \$1,280.76 \$1,280.76 \$1,295 \$1,295 \$1,295 \$1,195 \$1	\$4.023.04 \$4.025.05 \$5.816.62 \$5.816.62 \$1.86.05  MAGI Adults  146.29% \$2.86% \$2.29% \$3.11.49% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$4.07% \$5.08% \$4.023.04 \$5.02% \$5.02% \$5.02% \$5.02% \$5.02% \$5.02% \$6.02% \$6.02% \$6.02% \$6.02% \$6.02% \$6.02%	\$18,911,71 \$23,473,00 \$20,799,33 \$10,643,03	\$1,891.54 \$1,983.54 \$1,983.54 \$2,041.20 \$2,048.05 \$2,048.05 \$2,048.05 \$1,995.55 \$1,995.55 \$1,995.55 \$1,995.55 \$1,855	\$1,558,48 \$1,566,15 \$1,586,79 \$1,586,79 \$1,108 Eligible Children  0,00% 1-42,28% 1-42,28% 1-20,6% 20,6% 20,6% 20,6% 20,6% 20,6% 20,6% 21,25% 22,85% 22,85% 22,85% 23,5% 24,5% 24,5% 25,5% 25,5% 25,5% 25,5% 25,5% 25,5% 25,5% 25,5%	\$2,965.43 \$3,005.43 \$3,000.45  Foster Care  4.04%. 8.16%. 9.16%. 9.16%. 1.16%.	\$12,169.86 \$11,972.41  MAGI Pregnant Adults  1.27% 1.27% 1.27% 1.27% 1.27% 1.28% 1.27% 1.28% 1.29% 1.29% 1.20% 1.2	\$9,551.00 \$9,6581.00 \$9,6581.00 \$19,6592.00 \$10,00991.1199. 14.679. 2.99991.2999. 3.2999	\$17,090.31	\$32,20 \$327.88 \$310.49 \$345.55 \$310.49 \$445.55 4.705	\$3,266.06 \$3,407.55 \$3,135.92 \$5,330.55  TOTAL  40.45% 4.55%
PY 2018-1	S2,685.98 0 \$2,890.1 1 \$3,178.74 1 \$3,178.74 2 \$5,077.3 3 \$3,171.61  Adults 65 and Older (OAP-A) 6 \$1,070.1 6 \$1,070.1 7 \$1,070.1 7 \$1,070.1 8 \$1,18.77,0 0 \$4,497.1 1 \$1,18.77,0 0 \$4,497.1 1 \$1,18.77,0 0 \$4,497.1 0 \$4,49	S8.013.95 S3.06.38 S3.06.38 S3.00.38 S3.00.38 S3.00.38 S3.00.38 Disabled Adults 60 to 64 (OAP-B)	S0/24.50	\$6,500.84 \$6,744.74 \$6,066.35 \$72.25.66 Disabled Buy-In  68,10% 41,44% 41,44% 42,44% 41,44% 42,54% 41,44% 42,54% 41,54% 41,54% 41,55% 42,55% 4	\$3,802.02 \$3,802.03 \$2,873.76 \$2,873.76 \$2,873.76 \$2,873.76 \$2,873.76 \$4,972	\$2,753.38 \$2,945.35 \$2,580.73 Change in Per Capir MAGI Parents Caretakere 69% to 133% FPI 3,32% 3,34% 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915 4,622,53 4,11915	\$4,023.44 \$4,025 \$3,816.02 \$3,816.02 \$3,816.02 \$3,848.35  MAGI Adults  46,295 4,2456 4,2456 4,075 4,14,455 4,075 4	\$18,911.71 \$2,473.51 \$20,789.33 \$10,643.03 \$11,839.03 \$11,839.03	\$1,891.54 \$1,983.45 \$2,081.50 \$2,081.60 \$2,081.60 Eligible Children (APDC-CBC) \$3,1976. \$4,0256 \$4,0256. \$4,0256. \$5,7956. \$1,87556. \$1,4756. \$1,4756. \$1,87	\$1,558.45 \$1,566.15 \$1,585.79 \$1,885.79  SB 11-008 Eligible Children	\$2,965.74 \$3,025.43 \$3,080.45  Foster Care  -4.04%, 8.16%, 0.16%, -2.1%, -6.66%, 1.30%, 1.82%,  Foster Care  \$2,807.45 \$2,807.45 \$3,05%, 4.04%, 4.04%, 4.05%	\$12,169.86 \$11,072.41  MAGI Pregnant Adults  8.389; 3.279; 2.311,872.41  MAGI Pregnant Adults  8.389; 3.279; 3.2319; 4.329; 4.329; 4.329; 4.320; 5.579; 4.420; 6.425; 6.425; 6.425; 6.425; 6.577; 6.426; 6.42	\$9.551.00 \$9.650.81 \$8.811-250 Eligible Pregnant Adults	\$17,093.1 \$21,588.88 \$17,008.00 \$17,208.13 \$17,008.00 \$17,208.13  Non-Citizens- Emergency Services \$1,685% \$4,475% \$4,41176 \$4,41	\$32.28 \$52.28 \$53.00 \$54.53 \$15.00 \$1	\$3,266.06 \$3,407.50 \$3,308.53  TOTAL  -0.43%
FY 2015-1	0 \$2,685.98 0 \$2,865.98 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 1 \$3,178.74 1 \$4,1	SS 013.95 SS 36.05.85 SS 36.05.85 SS 28.03.10 Disabled Adults 60 to 64 (OAP-B)	\$0,124.50 \$3,003.53 \$3,588.15 \$9,588.16 \$9,588.16 \$1,589	\$6,500.83 \$6,744.43 \$6,046.35 \$7,285.64  Disabled Buy-In  68,1097. 41,4479. 42,10,278 42,279. 42,279. 42,279. 41,279.	\$3,802 co \$3,802 co \$2,873.76 \$3,900.41  MAG Percent / Carctakers to 68%  F1. 137%  -0.137%  -0.147%  -0.45%  -0.45%  MAG Percent / -0.17%  -0	\$2,753.88 \$2,945.94 \$2,580.73 \$2,580.07 \$1,580.00 \$1,580	\$4,023.04 \$4,005.5 \$3,846.35 \$1,816.62 \$3,848.35  MAGI Adults  146,25% 2,24% 2,24% 4,146% 4,77% 4,77% 4,77% 4,77% 4,77% 4,77% 5,185.5  MAGI Adults  MAGI Adults	\$18,911.71 \$23,473.71 \$23,473.71 \$23,779.33 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$11,643.03	\$1,891.54 \$1,983.54 \$1,983.54 \$2,048.05 \$2,048.05 \$2,048.05 \$2,048.05 \$1,059	\$1,558.41 \$1,566.45 \$1,586.79 \$1,586.79  SB 11-008 Eligible Children 0.00% -0.428% -0.50% -0.	\$2,965.74 \$3,025.43 \$3,080.45  Foster Care  -4.04% 8.16% 0.16% -5.25% -6.67% 1.30% 1.30% 1.82% 5.27% 4.04% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05% 3.05%	\$12,169.86 \$11,075.25 \$11,872.41  MAGI Pregnant Adults  \$3,38% \$1,27% \$1,117%	\$9,55.081 \$9,650.01 \$1,100.000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0000 \$1,110.0	\$17,09.31 \$21,568.88 \$17,008.00 \$17,207.13  Non-Citizens- Emergency Services 4,175 4,1175 4,1175 4,1475 4,1	\$32.40 \$22.28 \$330.40 \$544.53 4.795, 4.795, 4.795, 4.795, 4.795, 4.20	\$3,266.06 \$3,407.55 \$3,386.35  TOTAL  -0.4475 -3.37964.56961.6.4975 -1
FY 2018-1	S2,685.98 0 \$2,890.1 1 \$3,178.74 1 \$3,178.74 2 \$3,077.83 3 \$3,171.61  Adults 65 and Older (OAP-A) 4 \$6,075.6 5 \$11.607.6 5 \$14.927.7 6 \$6,075.6 6 \$14.927.7 6 \$6,075.6 6 \$14.927.7 6 \$6,075	SS.013.95 SS.06.35 SS.06.35 SS.06.35 SS.00.35 SS	\$50,124.50 \$50,035.15 \$50,588.16 \$50,588.16 \$50,588.16 \$50,588.16 \$50,588.16 \$50,588.16 \$50,588.16 \$50,598.16	\$6,500.43 M \$6,764.35 \$7,255.64  Disabled Buy-In  68,10% -21,02% -4,05% -4,45% -4,25%	\$2,860 2 5 5,860 2 6 5 5,860 2 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	\$2,753.88 \$2,945.38 \$2,340.75 \$2,330.00 hange in Per Capit \$2,330.00 MAGI Parents' Garciakers 69% to 133% FPI 3.34% \$2,95% \$3,44% \$2,195% \$4,11,975% \$4,11	\$4,023.04 \$4,025.3 \$3,846.32 \$1,846.35  MAGI Adults  140,29% -2-48% -2-48% -2-48% -2-48% -2-5,00% -2-5,00% -3-5	\$18,911,71 \$23,473,01 \$20,789,33 \$19,643,03 \$19,643,03 \$19,643,03 \$19,643,03 \$19,643,03 \$1,643,0	\$1,891.54 \$1,983.54 \$1,983.54 \$2,048.05 \$2,048.05 \$2,048.05 \$2,048.05 \$1,095.65 \$1,095	\$1,558.45 \$1,506.15 \$1,588.79  SB 11-008 Eligible Children Children 0,0095. 1-42,295. 1-42,295. 1-20,695. 20,695. 20,695. 20,695. 20,695. 1-10,255	\$2,965.43 \$3,005.43 \$3,000.45  Foster Care  -4,040; -8,160; -9,100; -1,409; -1	\$12,169.86 \$11,972.41  MAGI Pregnant Adults  \$.357. \$1,872.45  MAGI Pregnant Adults  \$.357. \$1,377. \$1	\$9,551.00 \$9,658.11-250 Eligible Pregnant Adults 1-115% 1-145% 1-125% 1-	S   17,09,01	\$32.40 \$32.7.81 \$310.40 \$345.53 \$310.40 \$445.53 4.705, 26.556, 4.705,	\$3,266.06 \$3,407.55 \$3,135.92 \$3,335.92 \$3,380.53  TOTAL  -0.43% -3.79% -4.56% -4.56% -1.65%
FY 2018-15	S2,685.98 0 \$2,295.19 1 \$3,178.74 1 \$3,178.74 2 \$1,017.85 3 \$3,178.61  Adults 65 and Older (O.A*-A) 3 \$2,077.61 4 6.107.61 6 14.92% 6 1.107.61 1 1.11.88 1 1.11.88 1 4.41% 4 4.11% 4 4.11% 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	SS 013 05	\$0,124.50 \$36,013.51 \$35,588.16 \$90,268.16 \$	\$6,500.34 \$6,744.47 \$6,66.35 \$7,285.61  Disabled Buy-la 68,1097 41,4495 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 43,1	\$3,860 22 \$3,022 66 \$2,873.76 \$2,873.76 \$3,000.41  MAGI Perent / Caretakers to 68%	\$2,753.38 \$2,945.34 \$2,53.67 \$2,580.07 \$1,580.	\$4.023.04 \$4.055 \$5.816.02 \$5.816.02 \$1.00  MAGI Adults  146.599 4.709 4	\$18,911.71 \$23,473.71 \$23,473.71 \$23,779.33 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,945.03	\$1,891.54 \$1,983.54 \$1,983.54 \$2,048.05 \$2,048.05 \$2,048.05 \$1,983.54 \$1,983	\$1,558,48 \$1,566,15 \$1,586,79 \$1,586,79 \$1,586,79 \$1,608 Eligible Children \$1,42,285, \$1	\$2,965.74 \$3,05.74 \$3,080.45  Foster Care  -4.04% 8.16% 8.16% 1.16% 1.16% 1.182% 1.25% 1.30% 1.82% 1.30% 1.3	\$12,169.875 \$11,872.41  MAGI Pregnant Adults  8.3899 3.2796 3.2796 3.209	\$9,551.00 \$9,6581.00 \$9,6581.00 \$B 11-250 Eligible Pregnant Adults 14,652- 14,652- 15,	S   1709.03	\$32.40 \$522.81 \$532.69 \$530.60 \$544.53 \$530.60 \$544.53 \$6.55	\$3,266.06 \$3,005 \$3,005 \$1,335.92 \$3,300.33  TOTAL  TOTAL  -0.48%
FY 2018-1	S2,685.98 0 S2,695.91 1 S2,685.98 0 S2,890.01 1 S3,178.74 1 S3,178.74 1 S3,177.61 1 S3,177	S8 013 95 S3.60.53 S3.60.50 S3.20.51 S3.00.50 S3.20.51 S3.00.50 S3.20.51 S3.00.50 G4 (OAP-B) S3.00.50	S0/24.50	\$6,500.84 \$6,744.74 \$6,066.35 \$72.85.66 Disabled Buy-In  68,10% 41,44% 41,44% 41,44% 42,25% 43,27% 41,57% 42,27% 43,27% 41,57% 4	\$3,802.00 \$3,803.00 \$2,873.76 \$2,873	\$2,753.38 \$2,945.33 \$2,345.34 \$2,326.07 hange in Per Capit hange in Per Capit MAGI Parents (aretakers 69% to 133% FPI 3.34% \$2,19% \$3,49% \$1,109% \$1,109% \$3,49% \$1,109% \$1,109% \$1,109% \$1,109% \$2,445% \$1,109% \$2,445% \$1,109% \$2,445% \$3,49% \$1,109% \$3,49% \$1,109%	\$4,023.44 \$4,025.5 \$3,816.02 \$3,816.02 \$3,816.02 \$3,816.02 \$1,000 \$146.295 \$24,455 \$24,455 \$4,025,455 \$11,055 \$4,025,455	\$18,911.71 \$2,473.51 \$20,789.33 \$10,643.03 \$	\$1,891.54 \$1,983.45 \$2,081.50 \$2,081.60 \$2,081.60 Eligible Children (APDC-CBC)  4.02% 4.02% 5.79% 1.40% 5.79% 1.44% 1.83% 4.83% 1.44% 4.83	\$1,558.45 \$1,566.15 \$1,585.79  \$1,1008 Eligible Children  0,009% 1-4,359% 1-4,359% 1-2,599% 1-3,317% 1-3,599% 1-3,317% 1-3,599% 1	\$2,965.74 \$3,05.74 \$3,05.45 \$3,080.45  Foster Care  4.04% 8.16% 9.53% 1.05% 1.05% 1.30% 1.82%  Foster Care  \$2,807.65 2.77% 4.04% 3.05%	\$12,169.86 \$11,972.41  MAGI Pregnant Adults  \$1,35%, \$2,35%, \$3,25%, \$3,25%, \$3,25%, \$4,25%, \$	\$9.551.00 \$9.650.81 \$11.250 Eligible Pregnant Adults 0.00% 1-11.11% 1-14.05% 1-2.96% 1-2.96% 1-2.96% 1-2.25% 1	\$17,908.18	\$32.28   \$32.28   \$32.28   \$32.28   \$35.28   \$35.00   \$34.53   \$35.00   \$34.53   \$35.00   \$34.53   \$35.00   \$34.53   \$35.00   \$35	\$3,266.06 \$3,00.53 \$3,00.53 \$3,30.53  TOTAL  0.43% 4.56% 4.56% 1.65% 1.04% 5.76% 5.77% 5.7
FY 2018-15	S2,685.98 0 \$2,290.1 1 \$3,178.74 1 \$3,178.74 2 \$1,017.85 3 \$3,171.61  Adults 65 and Older (O.Ar-A) 4 6.107 6 14.927 7 4.088 1 1.1877 1 1.11.87 1 1.11.87 1 4.415 1 4.415 1 5.22,890.01 2 4.445 2 6.85 3 6.85	S8 013 95 S3.60.53 S3.60.50 S3.20.51 S3.00.50 S3.20.51 S3.00.50 S3.20.51 S3.00.50 G4 (OAP-B) S3.00.50	S0/24.50	\$6,500.34 \$6,744.47 \$6,66.35 \$7,285.61  Disabled Buy-la 68,1097 41,4495 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 42,10,956 43,1	\$3,860.2 cs \$3,873.76 \$3,8	\$2,753.38 \$2,945.34 \$2,53.67 \$2,580.07 \$1,580.	\$4.023.04 \$4.055 \$5.816.02 \$5.816.02 \$1.00  MAGI Adults  146.599 4.709 4	\$18,911.71 \$23,473.71 \$23,473.71 \$23,779.33 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,643.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,845.03 \$10,945.03	\$1,891.54 \$1,983.45 \$2,081.50 \$2,081.60 \$2,081.60 Eligible Children (APDC-CBC)  4.02% 4.02% 5.79% 1.40% 5.79% 1.44% 1.83% 4.83% 1.44% 4.83	\$1,558,48 \$1,566,15 \$1,586,79 \$1,586,79 \$1,586,79 \$1,608 Eligible Children \$1,42,285, \$1	\$2,965.74 \$3,05.74 \$3,080.45  Foster Care  -4.04% 8.16% 8.16% 1.16% 1.16% 1.182% 1.25% 1.30% 1.82% 1.30% 1.3	\$12,166.86 \$11,972.41  MAGI Pregnant Adults  1.35% 1.37% 1.37% 1.37% 1.38% 1.3	\$9.551.00 \$9.650.11 \$B 11-250 Eligible Pregnant Adults 1.1050.11 1	S   1709.03	\$32.40 \$522.81 \$532.69 \$530.60 \$544.53 \$530.60 \$544.53 \$6.55	\$3,266.06 \$3,007.5 \$3,307.5 \$3,307.5 \$3,307.5 \$3,307.5 \$3,307.5 \$4,507.5 \$4

					Cur	rent Year Projectio	n									
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services		TOTAL
Percentage Selected to Modify Per Capita <sup>(1)</sup>	4.61%	0.82%	3.67%	4.23%	1.14%	2.22%	0.98%	0.00%	1.13%	1.61%	1.07%	1.11%	1.11%	1.239		*****
Estimated FY 2020-21 Base Per Capita	\$2,990.84	\$8,079.66	\$9,459.37 65.964	\$6,775.77 14.580	\$2,892.83 172.515	\$2,814.51 81.605	\$4,063.37 381.763	\$18,911.71	\$1,912.91	\$1,539.69 65.834	\$2,928.45 20.887	\$11,647.17 13.150	\$8,890.30	\$17,300.52	\$547.93	\$3,334.51 1.358.679
Estimated FY 2020-21 Elicibles Estimated FY 2020-21 Base Expenditure	\$144,460,563	\$108,550,232	\$623,977,883	\$98,790,727		\$229,931,394	\$1.551.244.321	\$2,723,286	\$837,892,838	\$101.363,951	\$61,166,535	\$153,160,286		\$68,388,956	\$19,172,071	\$4,530,533,364
Bottom Line Impacts				,					,		,					
Annualization of FY 2019-20 R-13 Community Provider Rate Increase (1.0% Across-the-Board)	\$86,862	\$69,950	\$408,593	\$39,654		\$107,233	\$816,153	\$1,494	\$537,698	\$59,161	\$45,897	\$92,607	\$13,542	\$28,937		\$2,645,577
Annualization of FY 2019-20 R-13 Community Provider Rate Increase (Targeted Maternity)	\$0 \$47 106	\$0 \$34.891	\$0 \$151,901	\$0 \$8,779		\$0 \$661	\$0 \$313.886	\$0 \$39		\$0 \$14,522	\$0 \$13.813			\$0 \$3,296		\$659,787 \$750.879
Annualization of FY 2019-20 R-13 Community Provider Rate Increase (Targeted Transportation)  Annualization of FY 2019-20 R-13 Community Provider Rate Increase (Other Targeted Rate Increases)	\$138	\$34,891	\$151,901	\$384		\$1,105	\$6,720	\$23		\$14,322 \$582	\$13,813 \$555	\$12,914	\$274 \$177	\$3,290		\$23,222
Annualization of FY 2019-20 R-13/JBC Action Community Provider Rate Increase (Cargeted Anesthesia)	(\$2,054)	(\$5,910)	(\$48,287)	(\$5,690)	(\$47,475)	(\$16,410)	(\$99,731)	(\$338)	(\$82,774)	(\$8,631)	(\$8,235)	(\$13,924)		(\$2,513		(\$344,592)
Annualization of FY 2019-20 R-13/JBC Action Community Provider Rate Increase (Targeted Lab and Pathology)	(\$36,366)	(\$165,738)	(\$777,224)	(\$56,012)	(\$2,237,085)	(\$624,451)	(\$3,930,800)	(\$5,184)	(\$580,331)	(\$116,350)	(\$102,029)	(\$639,690)		(\$20,093		(\$9,319,620)
Annualization of FY 2019-20 R-13/JBC Action Community Provider Rate Increase (Targeted Diabetes Test Strips)	(\$19,348) \$192,003	(\$8,454) \$100.933	(\$111,808) \$388,187	(\$4,484) \$22,315	(\$11,470) \$80,966	(\$3,989) \$20,562	(\$36,089) \$327,319	(\$44) \$76	(\$41,558) \$92,104	(\$4,445) \$6,953	(\$10,606) \$12,753	(\$696) \$19,793	(\$29) \$403	(\$5 \$2,481		(\$253,025) \$1,266,848
R-6 Local Administration Transformation - NEMT Annualization of FY 2019-20 R-12 Medicaid Enterprise Operations	(\$32,467)	(\$26,066)	(\$154,530)	(\$14.974)	(\$123,371)	(\$40,655)	(\$307.790)	(\$554)	(\$203.391)	(\$22,738)	(\$17,534)	(\$35,009)		(\$11,277		(\$999,998)
Annualization of FY 2018-19 R-10 Drug Cost Containment Initiatives	(\$2,953)	(\$12,429)	(\$84,099)	(\$6,092)	(\$53,269)	(\$31,517)	(\$152,015)	(\$155)	(\$55,489)	(\$12,733)	(\$10,396)	(\$3,909)	(\$425)	(\$1	(\$61)	(\$425,543)
Annualization of Set DME Rates According to Medicare	\$510,887	\$206,623	\$2,011,365	\$66,482	\$302,920	\$135,993	\$966,067	\$2,125	\$787,198	\$84,656	\$183,572	\$13,334		\$111		\$5,271,835
Annualization of FY 2017-18 R-8 Medicaid Savings Initiatives - PAR Savings	(\$1,955) (\$3,093,410)	(\$1,438) (\$1,626,179)	(\$8,685) (\$6,254,181)	(\$619) (\$359.519)	(\$7,433) (\$1,304,459)	(\$4,033) (\$331,285)	(\$20,698) (\$5,273,507)	(\$70) (\$1.221)		(\$1,486) (\$112,019)	(\$997) (\$205.469)	(\$2,415) (\$318.890)		(\$743 (\$39.975		(\$64,476)
Annualization of Accountable Care Collaborative Savings Annualization of HB 18-1322 Long Bill - 12 Month Supply of Contraceptives	(\$3,093,410)	(\$1,020,179)	(\$0,234,181)	(8339,319)		\$11.785	(\$5,273,307) \$78,229	(\$1,221)		(\$112,019)	(\$203,469)			(\$39,973		(\$20,410,513) \$118.849
Annualization of Estimated Impact of Increasing PACE Enrollment	(\$157,201)	(\$22,250)	(\$11,125)	\$0		\$0	\$0	S0	\$0	\$0	S0	\$0	\$0	\$0	\$0	(\$190,576)
Annualization of SB 18-266 Controlling Medicaid Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$2)	\$0	\$0	\$0	\$0	\$0	\$0	(\$2)
Reduction in Acute Care Expenditure Due to COVID-19 COVID-19 Utilization	\$5,981,540 \$10,479,581	\$4,469,948 \$3,926,130	\$17,246,788 \$15,527,905	\$3,351,196 \$502.697	\$29,986,581 \$15,570,409	\$11,002,739 \$12,323,206	\$18,786,753 \$57,117,643	\$776,570 \$6,960	\$55,916,788 \$6,792,124	\$5,023,926 \$951.062	\$2,260,353 \$978.802	\$8,420,558 \$4,386,101	\$4,099,031 \$110,718	\$7,171,443 \$16,587,031		\$174,494,214 \$145,352,172
Per Capita Dammer for New Enrollees	(\$163,754)	\$3,926,130	\$15,527,905	(\$1,473,789)		(\$6,401,083)	(\$23,248,203)	(\$28,907)	(\$6,623,124)	(\$2,006,140)	\$47,307	(\$1,257,722)		(\$5,663,338		(\$49,499,175)
Increase Conava	(\$155,280)	(\$79,441)	(\$298,149)	(\$53,073)	(\$492,778)	(\$123,027)	(\$1,000,718)	S0	\$0	\$0	\$0	\$0		\$0		(\$2,202,466)
R-6 Local Administration Transformation - NEMT	\$192,003	\$100,933	\$388,187	\$22,315	\$80,966	\$20,562	\$327,319	\$76		\$6,953	\$12,753	\$19,793		\$2,481		\$1,266,848
R-7 Pharmacy Pricing and Technology Request	(\$43,367)	(\$254,951) \$0	(\$1,669,962)	(\$211,439) \$0	(\$915,462) \$0	(\$313,188) \$0	(\$2,950,534) (\$4,500,000)	(\$3,148) \$0	(\$789,392) \$0	(\$151,776) \$0	(\$151,768) \$0	(\$37,350)	(40,000)	\$0 \$0		(\$7,499,549) (\$4,500,000)
Rocky Mountain Health Partner Prime Rate Reconciliation R-10 Provider Rate Adjustments	(\$1.218.882)	(\$950.621)	(\$5,526,844)	(\$631.870)	(\$4,305,393)	(\$1,500,334)	(\$4,300,000)	(\$26,584)	(\$7,352,846)	(\$877.155)	(\$572,186)	(\$1,218,259)	(\$194,255)	(\$504.033		(\$36,765,651)
FY 2020-21 Budget Request: R-15 Medicaid Recovery and Third Party Liability Modernization	(\$1,015,227)	(\$779,725)	(\$4,533,255)	(\$518,229)	(\$3,512,871)	(\$1,223,376)	(\$9,704,460)	(\$19,348)	(\$5,756,758)	(\$632,817)	(\$461,303)	(\$993,296)	(\$145,044)	(\$308,468		(\$29,737,153)
R-12 Work Number Verfication	(\$356,596)	\$0	(\$97,747)	(\$302,292)	(\$2,485,312)	\$0	(\$12,850,130)	(\$10,861)	(\$1,332,257)	\$0	\$0	(\$445,293)	\$0	(\$28,962		(\$18,101,324)
Reimbursement for Telehealth Services	\$8,820 (\$193,579)	\$57,827 (\$65,867)	\$247,171 (\$316,077)	\$16,167 (\$46,748)	\$583,661 (\$652,113)	\$256,334 (\$270,662)	\$827,608 (\$1,186,648)	\$1,929 (\$626)	\$1,680,239 \$0	\$175,822 \$0	\$79,246 \$0	\$138,174 (\$43,166)		\$3,537 (\$20		\$4,082,654 (\$2,782,500)
Adult Dental Benefit Cap Reduction (HB 20-1361) Client Over Utilization Program (COUP)	(\$193,579)	(\$65,867)	(\$316,077)	(\$46,748)	(\$652,113)	(\$270,662) (\$3,093)	(\$1,186,648) (\$3,128)	(8626)	(\$622)	(880)	(\$50)		(\$6,994)			(\$2,782,500)
Overcollection of Drug Rebates in FY 2016-17	(\$62,383)	(\$247,289)	(\$1,744,562)	(\$114,205)	(\$1,101,666)	(\$490,556)	(\$2,971,788)	(\$3,246)		(\$175,620)	(\$222,440)	(\$73,791)	(\$7,982)	(\$5	(\$21)	(\$8,358,549)
SUD Drug Rebate Elimination	\$59,654	\$370,996	\$2,418,906	\$315,237	\$1,429,767	\$553,303	\$4,262,193	\$4,498	\$1,242,254	\$231,734	\$218,918	\$61,553		\$141		\$11,177,979
Additional Payment Period in FY 2019-20 Fiscal Year	(\$1,923,820) \$9,075,768	(\$1,477,553) \$3,858,194	(\$8,590,368) \$9,365,643	(\$982,025) (\$452,435)	(\$6,656,775) \$22,398,035	(\$2,318,256) \$10,737,568	(\$18,389,632) (\$14,541,550)	(\$36,664) \$656,840	(\$10,908,866) \$30,849,452	(\$1,199,168) \$1,234,213	(\$874,155) \$1,216,800	(\$1,882,265) \$6,755,028	(\$274,855) \$2,175,962	(\$584,537 \$16,635,659		(\$56,350,923) \$99,253,182
Total Bottom Line Impacts Estimated FY 2020-21 Expenditure	\$153,536,331	\$112,408,426	\$633,343,526	\$98,338,292	\$521,454,602	\$240,668,962	\$1,536,702,771	\$3,380,126	\$868,742,290	\$1,234,213	\$62,383,335	\$159,915,314		\$85,024,615		\$4,629,786,546
Estimated FY 2020-21 Per Capita	\$3,178.74	\$8,366.83	\$9,601.35	\$6,744.74	\$3,022.66	\$2,945.94	\$4,025.28	\$23,473.10	\$1,983.34	\$1,558.44	\$2,986.71	\$12,160.86		\$21,508.88		\$3,407.56
% Change over FY 2019-20 Per Capita	11.18%	4.40%	5.23%	3.75%	5.68%	6.99%	0.03%	24.12%	4.85%	2.85%	3.08%	5.57%		25.85%		4.33%
	\$141,420,913	\$102,607,714	\$592,480,920	\$68,766,203		\$157,810,666 uest Year Projectio	\$1,240,234,236	\$2,779,087	\$773,803,038	\$93,232,089	\$60,178,699	\$128,398,558	\$20,472,999	\$55,616,865	\$18,699,183	\$3,908,984,296
ACUTE CARE	Adults 65 and Older	Disabled Adults 60 to	Disabled Individuals to 59	Disabled Buy-In	MAGI Parents/ Caretakers to 68%	MAGI Parents/ Caretakers 69% to	MAGI Adults	Breast & Cervical	Eligible Children	SB 11-008 Eligible	Foster Care	MAGI Pregnant	SB 11-250 Eligible	Non-Citizens-	Partial Dual Eligibles	TOTAL
	(OAP-A)	(OAP-B)	(AND/AB)		FPL	133% FPL		Cancer Program	(AFDC-C/BC)	Children		Adults	Pregnant Adults	Emergency Services		
Percentage Selected to Modify Per Capita <sup>(2)</sup>	4.61% \$3,325.28	0.82% \$8,435.44	3.67% \$9.953.72	4.23% \$7.029.99	1.14% \$3.057.12	2.22% \$3,011.34	0.98% \$4.064.73	-10.65% \$20,973.21	1.13% \$2.005.75	1.61% \$1,583.53	2.13% \$3.050.33	1.11% \$12.295.85	1.11% \$9,627.07	1.239 \$21,773,44		\$3,494.16
Estimated FY 2021-22 Base Per Capita  Estimated FY 2021-22 Elieibles	\$3,325.28 48,558	13,669	69,462	13,742	204.182	80,208	\$4,064.73 405.854	\$20,973.21	\$2,003.75 427.055	65,926	21,100	14.443	3,508	3.483		1,406,603
Estimated FY 2021-22 Engodes Estimated FY 2021-22 Base Expenditure	\$161,468,946	\$115,304,029	\$691,405,299	\$96,606,123	\$624,208,876	\$241,533,559	\$1,649,686,929	\$3,020,142		\$104,395,799	\$64,361,963	\$177,588,962		\$75,836,892		\$4,914,901,682
Bottom Line Impacts Annualization of FY 2018-19 R-10 Drue Cost Containment Initiatives	(\$5,906)	(\$24,857)	(\$168,198)	(\$12,184)		(\$63,033)	(\$304,030)	(\$309)		(\$25,466)	(\$20,790)	(\$7,818)		(\$3		(\$851,082)
Annualization of SB 19-195 Child and Youth Behavioral Health System Enhancements	(\$644.479)	\$0		\$0		\$0	\$0			\$0	\$756,867	\$0		\$0		\$9,600,000
Annualization of Estimated Impact of Increasing PACE Enrollment COVID-19 Utilization	(\$644,479)	(\$91,434) (\$4,309,865)	(\$45,717) (\$17,045,584)	\$0 (\$551.830)		\$0 (\$13.527.661)	\$0 (\$62.700.252)	\$0 (\$7,640)		\$0 (\$1,044,018)	(\$1,074,469)			\$0 (\$18,208,227		(\$781,630) (\$159,558,718)
Client Over Utilization Program (COUP)	(\$4,184)	(\$7,512)	(\$14,690)	(\$16,600)	(\$1,664)	(\$3,093)	(\$3,128)	\$0	(\$622)	(\$80)	(\$50)	(\$369)		\$0		(\$52,049)
FY 2020-21 Budget Request: R-15 Medicaid Recovery and Third Party Liability Modernization	(\$122,776)	(\$94,296)	(\$548,227)	(\$62,671)	(\$424,828)	(\$147,948)	(\$1,173,604)	(\$2,340)	(\$696,191)	(\$76,530)	(\$55,787)	(\$120,124)	(\$17,541)	(\$37,305	(\$16,081)	(\$3,596,249)
R-12 Work Number Verfication	(\$554,325) (\$580,738)	\$0 (\$197.601)	(\$151,947) (\$948,229)	(\$469,910) (\$140,245)	(\$3,863,394) (\$1,956,339)	\$0 (\$811.986)	(\$19,975,409) (\$3,559,945)	(\$16,883) (\$1,878)	(\$2,070,982) \$0	\$0 \$0	\$0 \$0		\$0 (\$20,981)	(\$45,021 (\$61		(\$28,138,342) (\$8,347,500)
Adult Dental Benefit Cap Reduction (HB 20-1361) Increase Copays	(\$465,839)	(\$238,323)	(\$948,229)	(\$140,243)	(\$1,936,339)	(\$369,080)	(\$3,339,943)	(\$1,878)	\$0	\$0 \$0	S0 S0	(\$129,497)		(361		(\$6,607,397)
R-7 Pharmacy Pricing and Technology Request	(\$63,927)	(\$375,818)	(\$2,461,648)	(\$311,676)	(\$1,349,459)	(\$461,661)	(\$4,349,307)	(\$4,639)	(\$1,163,622)	(\$223,728)	(\$223,717)	(\$55,056)	(\$8,204)	\$0	(\$2,427)	(\$11,054,889)
R-10 Provider Rate Adjustments	\$26,928	\$21,001	\$122,096	\$13,960	\$95,113	\$33,144	\$259,477	\$587	\$162,435	\$19,377	\$12,641	\$26,913	\$4,291	\$11,135	\$3,111	\$812,209
Reimbursement for Telehealth Services	\$8,820 \$0	\$57,827 \$0	\$247,169	\$16,167 \$0	\$583,660 \$0	\$256,334 \$0	\$827,608 \$4,500,000	\$1,929 \$0	\$1,680,236 \$0	\$175,823 \$0	\$79,246 \$0	\$138,173 \$0		\$3,538 \$0		\$4,082,650 \$4,500,000
Rocky Mountain Health Partner Prime Rate Reconciliation Per Canita Dammer for New Enrollees	(\$79,034)	(\$256,333)	(\$4,289,180)	\$0 \$714,643	(\$12,320,485)	\$425.841	(\$12,636,114)	\$3,196	\$2,726,098	(\$48,717)	(\$72,264)		(\$107,478)	\$1,677,883		(\$26,321,318)
SUD Drug Rebate Elimination	\$19,885	\$123,665	\$806,302	\$105,079	\$476,589	\$184,434	\$1,420,731	\$1,499	\$414,085	\$77,245	\$72,973	\$20,518	\$2,550	\$47		\$3,725,993
Total Bottom Line Impacts	(\$13,969,419)	(\$5,393,546)	(\$25,392,301)	(\$874,487)	(\$37,437,920)	(\$14,484,709)	(\$100,696,126)	(\$26,478)	\$2,327,613	(\$1,146,094)	(\$525,350)	(\$7,670,642)	(\$263,689)	(\$16,598,014		(\$222,588,321)
Estimated FY 2021-22 Expenditure	\$147,499,527 \$3,037.59	\$109,910,483 \$8,040,86	\$666,012,998 \$9.588.16	\$95,731,636 \$6,966.35	\$586,770,956 \$2,873,76	\$227,048,850 \$2,830.75	\$1,548,990,803 \$3,816,62	\$2,993,664 \$20,789,33	\$858,893,179 \$2,011.20	\$103,249,705 \$1,566.15	\$63,836,613	\$169,918,320 \$11,764.75	\$33,508,073 \$9.551.90	\$59,238,878 \$17,008,00		\$4,692,313,361 \$3,335,92
Estimated FY 2021-22 Per Capita % Cleanue over FY 2020-21 Per Capita	\$3,037.59	\$8,040.86	\$9,588.16	\$6,966.35 3.29%		\$2,830.75	\$3,816.62 -5.18%	\$20,789.33 -11.43%	\$2,011.20	\$1,566.15 0.49%	\$3,025.43	\$11,764.75		\$17,008.00		\$3,335.92
76 Change over FY 2020-21 Per Canita	·4.4476	-3.90%	=U.147a	3.29%	<b>−4.93</b> %	-3.91%	-3.18%	-11.4376	1.40%	0.49%	1.30%	-3.20%	0.32%	-20.937	U.33%	*2.10%

					0	ut Year Projection										
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Percentage Selected to Modify Per Capita <sup>0</sup>	4.61%	3.28%		4.23%	1.14%		0.98%	-5.33%	2.26%		2.13%	1.11%			2.90%	
Estimated FY 2022-23 Base Per Capita Estimated FY 2022-23 Elisible:	\$3,177.62	\$8,304.60 14.143		\$7,260.97 15,305	\$2,906.52 245.688	\$2,893.59 83,255	\$3,854.02 454.361	\$19,682.30 145	\$2,056.65 454,905	\$1,591.37 73,738	\$3,089.87 21,472	\$11,895.34 16,166		\$17,217.20 3.611	\$545.87 37.047	\$3,387.79 1.544.812
Estimated F1 2022-25 Enterblet Estimated FY 2022-23 Base Expenditure	\$159,418,541	\$117,452,174		\$111,126,882		\$240,905,835	\$1,751,115,097	\$2,853,934	\$935,579,340	\$117,345,104	\$66,344,401				\$20,223,073	\$5,233,494,969
Bottom Line Impacts																
FY 2020-21 Budget Request: R-15 Medicaid Recovery and Third Party Liability Modernization Reimbursement for Telehealth Service:	(\$96,356) (\$17,640)	(\$74,005) (\$115,654)		(\$49,186) (\$32,334)	(\$333,414) (\$1,167,321)	(\$116,113) (\$512,668)	(\$921,072) (\$1,655,216)	(\$1,836) (\$3,858)	(\$546,386) (\$3,360,475)	(\$60,062) (\$351,645)	(\$43,785) (\$158,492)				(\$12,621) \$0	(\$2,822,418) (\$8,165,304)
Annualization of Estimated Impact of Increasing PACE Enrollmen	(\$187,451)	(\$26,540)	(\$13,270)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$227,261)
Total Bottom Line Impacts Estimated FY 2022-23 Expenditure	(\$301,447) \$159,117,094	(\$216,199) \$117,235,975		(\$81,520) \$111,045,362	(\$1,500,735) \$712,595,624	(\$628,781) \$240,277,054	(\$2,576,288) \$1,748,538,809	(\$5,694) \$2,848,240	(\$3,906,861) \$931,672,479	(\$411,707) \$116,933,397	(\$202,277) \$66,142,124	(\$370,624) \$191,923,495			(\$12,621) \$20,210,452	(\$11,214,983) \$5,222,279,986
Estimated FY 2022-23 Per Capita	\$3,171.61	\$8,289.31	\$9,926.87	\$7,255.64	\$2,900.41	\$2,886.04	\$3,848.35	\$19,643.03	\$2,048.06	\$1,585.79	\$3,080.45	\$11,872.41	\$9,650.81	\$17,207.13	\$545.53	\$3,380.53
% Change over FY 2021-22 Per Capita	4.41%	3.09%	3.53%	4.15%	0.93%	1.95%	0.83%	-5.51%	1.83%	1.25%	1.82%	0.92%	1.04%	1.17%	2.84%	1.34%
	OAP-A	The Department kept t	he trend from the May requ	est based on the average	e growth rate from FY 20	015-16 to FY 2018-19.		MAGI Parents/ Caretakers 69% to 133% FPL	The Department kept th 2015-16 to FY 2018-19	se trend from the May requ	est based on the averag	ge growth rate from FY	Foster Care		e trend from the May reques n FY 2014-15 to FY 2018-19	
	OAP-B	The Department kept t	he trend from the May requ	est based a quarter of th	e average growth rate fro	m FY 2013-14 to FY 201	7-18.	MAGI Adults	The Department kept th from FY 2015-16 to FY	e trend from the May requ 2018-19.	est based on double the	e average growth rate	MAGI Pregnant Adults		e trend from the May reques n FY 2016-17 to FY 2018-19	
(1) Percentage selected to modify Per Capita amounts for Estimated FY 2020-21:	AND/AB	The Department select	ed a higher trend relative to	the May request based	on the average growth ra	te from FY 2014-15 to F	7 2018-19.	ВССР	See Narrative				SB 11-250 Eligible Pregnant Adults		e trend from the May reques I Pregnant Adults, as the De sopulations.	
	Disabled Buy-in	The Department kept t	he trend from the May requ	est based on the average	e growth rate from FY 20	017-18 to FY 2018-19.		Eligible Children (AFDC-C/BC)	The Department kept th from FY 2016-17 to FY	e trend from the May requ 2018-19.	est based on a quarter o	of the average growth	Non-Citizens Emergency Services	The Department kept th growth rate from FY 20	e trend from the May reques 14-15 to FY 2018-19.	thased on the average
	MAGI Parents/ Caretakers to 68% FPL	The Department kept t	he trend from the May requ	est based on the average	e growth rate from FY 20	015-16 to FY 2017-18.		SB 11-008 Eligible Children	The Department kept th 2016-17 to FY 2018-19	e trend from the May requ	est based on the averag	e growth rate from FY	Partial Dual Eligibles	The Department kept th growth rate from FY 20	e trend from the May reques 14-15 to FY 2017-18.	t based on the average
	OAP-A	The Department kept	the trend from the May requ	uest based on the averag	e growth rate from FY 20	015-16 to FY 2018-19.		MAGI Parents/ Caretakers 69% to 133% FPL	The Department kept th 2015-16 to FY 2018-19	e trend from the May requ	est based on the averag	e growth rate from FY	Foster Care		e trend from the May reques FY 2014-15 to FY 2018-19	
	OAP-B	The Department kept t	he FY 2020-21 growth tren	d from the May request	based a quarter of the av	erage growth rate from FY	7 2013-14 to FY 2017-18.	MAGI Adults	The Department kept th from FY 2015-16 to FY	e trend from the May requ 2018-19.	est based on double the	e average growth rate	MAGI Pregnant Adults	average growth rate from	e trend from the May reques 1 FY 2016-17 to FY 2018-19	Э.
(2) Percentage selected to modify Per Capita amounts for Estimated FY 2021-22:	AND/AB	The Department kept	the trend from the May requ	uest based on the averag	ge growth rate from FY 20	014-15 to FY 2018-19.		ВССР	See Narrative				SB 11-250 Eligible Pregnant Adults		e trend from the May reques I Pregnant Adults, as the De copulations.	
	Disabled Buy-in	The Department kept	the trend from the May requ	uest based on the averag	ge growth rate from FY 20	017-18 to FY 2018-19.		Eligible Children (AFDC-C/BC)		ne FY 2020-21 growth tren n FY 2016-17 to FY 2018-		based on a quarter of	Non-Citizens Emergency Services	The Department kept th growth rate from FY 20	e trend from the May reques 14-15 to FY 2018-19.	tbased on the average
	MAGI Parents/ Caretakers to 68% FPL	The Department kept	the trend from the May requ	uest based on the averag	ge growth rate from FY 20	015-16 to FY 2017-18.		SB 11-008 Eligible Children	The Department kept th 2016-17 to FY 2018-19	e trend from the May requ	est based on the average	ge growth rate from FY	Partial Dual Eligibles	The Department kept th growth rate from FY 20	e trend from the May reques 14-15 to FY 2017-18.	t based on the average
	OAP-A	The Department select	ed a trend based on the ave	rage growth rate from F	Y 2015-16 to FY 2018-19	9.		MAGI Parents/ Caretakers 69% to 133% FPL	The Department selecte 19.	d a trend based on the ave	rage growth rate from F	Y 2015-16 to FY 2018-	Foster Care	The Department selecte 2014-15 to FY 2018-19	d a trend based on the average	ge growth rate from FY
	OAP-B	The Department select	ed a trend based on the ave	rage growth rate from F	Y 2013-14 to FY 2017-1	8.		MAGI Adults	The Department selecte 2018-19.	d a trend based on double	the average growth rate	from FY 2015-16 to FY	MAGI Pregnant Adults	The Department selecte from FY 2016-17 to FY	d a trend based on half of the 2018-19.	e average growth rate
(3) Percentage selected to modify Per Capita amounts for Estimated FY 2022-23:	AND/AB	The Department select	ed a trend based on the ave	rage growth rate from F	Y 2014-15 to FY 2018-19	9.		ВССР	See Narrative			•	SB 11-250 Eligible Pregnant Adults		ry is tied to MAGI Pregnant nilar utilization within these	
	Disabled Buy-in	The Department select	ed a trend based on the gro	wth rate from FY 2017-	18 to FY 2018-19.			Eligible Children (AFDC-C/BC)	The Department selecte 2018-19.	d a trend based on half of	the average growth rate	from FY 2016-17 to FY	Non-Citizens Emergency Services	The Department selecte 2014-15 to FY 2018-19	d a trend based on the average	ge growth rate from FY
	MAGI Parents/ Caretakers to 68% FPL	The Department select	ed a trend based on the ave	rage growth rate from F	Y 2015-16 to FY 2017-1	8.		SB 11-008 Eligible Children	The Department selecte 19.	d a trend based on the ave	rage growth rate from F	Y 2016-17 to FY 2018-	Partial Dual Eligibles	The Department selecte 2014-15 to FY 2017-18	d a trend based on the average	ge growth rate from FY

### **Breast and Cervical Cancer Program Costs**

Fiscal Year	Total	Caseload	Per Capita	Percent Change
FY 2013-14	\$8,877,269	559	\$15,880.62	
FY 2014-15	\$5,087,139	351	\$14,493.27	-8.74%
FY 2015-16	\$3,847,398	322	\$11,948.44	-17.56%
FY 2016-17	\$3,829,098	235	\$16,294.03	36.37%
FY 2017-18	\$2,946,908	155	\$19,012.31	16.68%
FY 2018-19	\$2,202,429	145	\$15,189.17	-20.11%
FY 2019-20	\$2,590,904	137	\$18,911.71	24.51%
FY 2020-21 Estimate <sup>(1)</sup>	\$3,380,126	144	\$23,473.10	24.12%
FY 2021-22 Estimate <sup>(1)</sup>	\$2,993,664	144	\$20,789.33	-11.43%
FY 2022-23 Estimate <sup>(1)</sup>	\$2,848,240	145	\$19,643.03	-5.51%

<sup>(1)</sup> The FY 2020-21 through FY 2022-23 totals are calculated on page EF-2 and include bottom line impacts. Caseload totals are taken from Exhibit B.

Fiscal Year	Per Capita	Caseload	Total Funds	General Fund	Cash Funds (1)	Reappropriated Funds	Federal Funds	FFP
FY 2020-21 Estimate	\$23,473.10	144	\$3,380,126	\$0	\$1,183,044	\$0	\$2,197,082	65.00%
FY 2021-22 Estimate	\$20,789.33	144	\$2,993,664	\$0	\$1,047,782	\$0	\$1,945,882	65.00%
FY 2022-23 Estimate	\$19,643.03	145	\$2,848,240	\$0	\$996,884	\$0	\$1,851,356	65.00%

<sup>(1) 25.5-5-308 (9) (</sup>g), C.R.S. (2014). 100% of the State share is from the Breast and Cervical Cancer Prevention and Treatment Fund, 65.00% federal financial participation beginning October 1, 2016.

			Total Denta	al Expenditure fo	r Populations Elig	ible for Adult De	ntal Cash Fund F	unding								
TOTAL DENTAL EXPENDITURE  FY 2011-1	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-1 FY 2012-1	\$0 \$0 \$0	\$0 \$0		\$0 \$0		\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0
FY 2012-1 FY 2013-1	\$1,724,207	\$535,633		\$0 \$0		\$0	\$0 \$0	\$0	\$0 \$0	\$0	\$0 \$0	\$515.132	\$37,738	\$0 \$0	\$0 \$0	\$13,550,546
FY 2014-1	\$7,169,838	\$2,544,922		\$0		\$0	\$0	\$0	\$0	\$0	\$124,035	\$1,715,917	\$224,850	\$0	\$0	\$50,493,920
FY 2015-1	\$9,640,672	\$3,286,270	\$15,550,126	\$0	\$30,998,068	\$0	\$0	\$0	\$0	\$0	\$157,955	\$2,237,470	\$244,911	\$0	\$0	\$62,115,472
FY 2016-1 FY 2017-1	7 \$9,626,404 8 \$10,149,574	\$3,310,233 \$3,420,176	\$15,679,512 \$16,218,317	\$0 \$0		\$0 \$0	\$0 \$0	\$0 \$0		\$0 \$0	\$236,132 \$162,853	\$2,163,344 \$1,488,264	\$318,121 \$300,308	\$0 \$0	\$0 \$0	\$60,549,155 \$62,795,196
FY 2017-1 FY 2018-1	\$10,149,374	\$3,497,187	\$16,200,905	\$0 \$0	\$22,136,356	\$0	\$0 \$0	\$0		\$0	\$155,386	\$1,950,505	\$335,014	\$0 \$0	\$0 \$0	\$54,525,206
FY 2019-2	\$8,111,894	\$2,978,002	\$13,565,945	\$0		\$0	\$0	\$0		\$0	\$165,221	\$1,951,946	\$311,840	\$0	\$0	\$54,616,673
Estimated FY 2020-2	\$7,445,116	\$2,975,315	\$15,515,392	\$0	\$28,276,934	\$0	\$0	\$0		\$0	\$212,461	\$3,453,322	\$572,885	\$0	\$0	\$58,451,425
Estimated FY 2021-2	\$7,484,731	\$3,027,137	\$16,579,885	\$0		\$0	\$0 \$0	\$0	\$0	\$0	\$237,040	\$3,839,672	\$598,184	\$0	\$0	\$65,234,121
Estimated FY 2022-2	\$7,733,076	\$3,132,115			, ,	\$0	90	\$0		\$0	\$264,471	\$4,350,621	\$639,100	\$0	\$0	\$73,626,462
		Pe	rcent Change in T	otal Dental Expe	iditure for Popula	_	Adult Dental Cas								1	
TOTAL DENTAL EXPENDITURE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-1 FY 2013-1	0.00% 1 100.00%	0.00% 100.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00% 100.00%	0.00% 100.00%	0.00%	0.00%	0.00% 100.00%
FY 2013-1 FY 2014-1	315.83%	375.12%	281.56%	0.00%	252.15%	0.00%	0.00%	0.00%	0.00%	0.00%	100.00%	233.10%	495.82%	0.00%	0.00%	272.63%
FY 2015-1	34.46%	29.13%	32.99%	0.00%	14.72%	0.00%	0.00%	0.00%	0.00%	0.00%	27.35%	30.40%	8.92%	0.00%	0.00%	23.02%
FY 2016-1	-0.15%	0.73%		0.00%	-5.75%	0.00%	0.00%	0.00%	0.00%	0.00%	49.49%	-3.31%	29.89%	0.00%	0.00%	-2.52%
FY 2017-1 FY 2018-1	5.43%	3.32%		0.00%	6.30%	0.00%	0.00%	0.00%	0.00%	0.00%	-31.03% -4.59%	-31.21%	-5.60% 11.56%	0.00%	0.00%	3.71% -13.17%
FY 2018-1 FY 2019-2	0.99%	2.25%	-0.11%	0.00%	-28.72% 24.37%	0.00%	0.00%	0.00%	0.00%	0.00%	6.33%	31.06% 0.07%	-6.92%	0.00%	0.00%	-13.17% 0.17%
Estimated FY 2020-2	-8.22%	-0.09%		0.00%	2.71%	0.00%	0.00%	0.00%	0.00%	0.00%	28.59%	76.92%	83.71%	0.00%	0.00%	7.02%
Estimated FY 2021-2	0.53%	1.74%		0.00%	18.36%	0.00%	0.00%	0.00%	0.00%	0.00%	11.57%	11.19%	4.42%	0.00%	0.00%	11.60%
Estimated FY 2022-2	3.32%	3.47%	3.96%	0.00%	20.33%	0.00%	0.00%	0.00%	0.00%	0.00%	11.57%	13.31%	6.84%	0.00%	0.00%	12.86%
		Per	r Capita Cost for T	otal Dental Expe	nditure for Popula	itions Eligible for	Adult Dental Ca	sh Fund Funding	ţ							
TOTAL DENTAL EXPENDITURE	Adults 65 and Older	Disabled Adults	Disabled		MAGI Parents/	MAGI Parents/		Breast &	Eligible	SB 11-008		MAGI	SB 11-250	Non-Citizens-		
	(OAP-A)	60 to 64 (OAP-B)	Individuals to 59 (AND/AB)	Disabled Buy- In	Caretakers to 68% FPL	Caretakers 69% to 133% FPL	MAGI Adults	Cervical Cancer Program	Children (AFDC-C/BC)	Eligible Children	Foster Care	Pregnant Adults	Eligible Pregnant Adults	Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-1	(OAP-A) 2 \$0.00	(OAP-B) \$0.00	(AND/AB) \$0.00	In \$0.00	Caretakers to 68% FPL \$0.00	69% to 133% FPL \$0.00	\$0.00	Cancer Program \$0.00	Children (AFDC-C/BC) \$0.00	Eligible Children \$0.00	\$0.00	Pregnant Adults \$0.00	Pregnant Adults \$0.00	Emergency Services \$0.00	Eligibles \$0.00	\$0.00
FY 2012-1	(OAP-A) 2 \$0.00 3 \$0.00	(OAP-B) \$0.00 \$0.00	(AND/AB) \$0.00 \$0.00	\$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00	69% to 133% FPL \$0.00 \$0.00	\$0.00 \$0.00	Cancer Program \$0.00 \$0.00	Children (AFDC-C/BC) \$0.00 \$0.00	Eligible Children \$0.00 \$0.00	\$0.00 \$0.00	Pregnant Adults \$0.00 \$0.00	Pregnant Adults \$0.00 \$0.00	Emergency Services \$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00
FY 2012-1 FY 2013-1	(OAP-A) 2 \$0.00 3 \$0.00 4 \$41.21	\$0.00 \$0.00 \$54.36	\$0.00 \$0.00 \$47.57	\$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$61.54	69% to 133% FPL \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	Eligible Children \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$39.14	Pregnant Adults \$0.00 \$0.00 \$35.70	Services \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96
FY 2012-1 FY 2013-1 FY 2014-1	(OAP-A) 2 \$0.00 8 \$0.00 1 \$41.21 5 \$171.46	\$0.00 \$0.00 \$0.00 \$54.36 \$243.16	\$0.00 \$0.00 \$0.00 \$47.57 \$175.71	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$61.54 \$167.13	69% to 133% FPL \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC) \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91	\$0.00 \$0.00 \$0.00 \$39.14 \$115.19	\$0.00 \$0.00 \$35.70 \$128.56	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90
FY 2012-1 FY 2013-1	(OAP-A) 2 \$0.00 8 \$0.00 4 \$41.21	\$0.00 \$0.00 \$54.36	\$0.00 \$0.00 \$0.00 \$47.57 \$175.71 \$226.02	\$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$61.54	69% to 133% FPL \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	Eligible Children \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$39.14	Pregnant Adults \$0.00 \$0.00 \$35.70	Services \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 FY 2016-1 FY 2017-1	(OAP-A)  2 \$0.00  5 \$0.00  4 \$41.21  5 \$171.46  6 \$227.36  7 \$219.08  8 \$221.09	\$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92	\$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$240.16	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$172.67	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC) \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$152.94 \$116.32	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.46 \$146.99	Pregnant Adults \$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73	Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$200.96 \$196.95
FY 2012-1 FY 2013-1 FY 2014-1 FY 2016-1 FY 2016-1 FY 2017-1 FY 2017-1	(OAP-A)  2 \$0.00 8 \$0.00 4 \$41.21 5 \$171.46 6 \$227.36 7 \$219.08 8 \$221.09 9 \$214.94	\$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91	\$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$152.94 \$116.32 \$113.01	\$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$146.99 \$159.93	\$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73	Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$200.96 \$196.95 \$170.00
FY 2012-1 FY 2013-1 FY 2014-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2017-1 FY 2018-1 FY 2017-1 FY 2018-2	(OAP-A)  2 \$0.00 5 \$0.00 6 \$41.21 6 \$171.46 6 \$227.36 7 \$219.08 8 \$221.09 9 \$214.94 1 \$170.11	\$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10	\$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03 \$197.64	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$161.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90 \$156.58	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC) \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$152.94 \$116.32 \$113.01 \$120.16	\$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.46 \$146.99 \$159.93 \$160.05	Pregnant Adults  \$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00	Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$200.96 \$196.95 \$170.00 \$170.28
FY 2012-1 FY 2013-1 FY 2014-1 FY 2016-1 FY 2016-1 FY 2017-1 FY 2017-1	(OAP-A)  2 \$0.00 8 \$0.00 4 \$41.21 5 \$171.46 6 \$227.36 7 \$219.08 8 \$221.09 9 \$214.94	\$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91	\$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03 \$197.64	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$152.94 \$116.32 \$113.01	\$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$146.99 \$159.93	\$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73	Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$200.96 \$196.95 \$170.00
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 FY 2016-1 FY 2016-1 FY 2017-1 FY 2018-1 FY 2019-2 Estimated FY 2020-2	(OAP-A)  2 \$0.00 8 \$0.00 4 \$41.21 5 \$171.46 5 \$227.36 7 \$219.08 8 \$221.09 9 \$214.94 0 \$170.11 8 \$154.14	\$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10	\$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03 \$197.64 \$235.21 \$238.69	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90 \$156.58	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$152.94 \$116.32 \$113.01 \$120.16	\$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.46 \$146.99 \$159.93 \$160.05 \$262.61	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$166.15	Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$200.96 \$196.95 \$170.00 \$170.28
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2017-1 FY 2017-1 FY 2018-1 FY 2018-2 FY 2018-2 Estimated FY 2020-2 Estimated FY 2020-2	(OAP-A)  2 \$0.00  5 \$0.00  6 \$41.21  5 \$171.46  6 \$227.36  7 \$219.08  8 \$221.09  9 \$214.94  1 \$170.11  \$154.14  2 \$154.14	(OAP-B)  \$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10 \$221.46 \$221.46	\$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03 \$197.64 \$235.21 \$238.69	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90 \$156.58 \$163.91 \$163.91 \$163.91	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.	Children (AFDC-C/BC) \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$115.294 \$116.32 \$113.01 \$120.16 \$152.74	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.46 \$146.99 \$159.93 \$160.05 \$262.61 \$265.85	Pregnant Adults \$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$166.15	Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$200.96 \$170.00 \$170.28 \$183.69
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2017-1 FY 2017-1 FY 2018-1 FY 2018-2 FY 2018-2 Estimated FY 2020-2 Estimated FY 2020-2	(OAP-A)  2 \$0.00  5 \$0.00  6 \$41.21  5 \$171.46  6 \$227.36  7 \$219.08  8 \$221.09  9 \$214.94  1 \$170.11  \$154.14  2 \$154.14	(OAP-B)  \$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10 \$221.46 \$221.46	(AND/AB)  \$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03 \$1197.64 \$235.21 \$238.69 \$242.23	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90 \$156.58 \$163.91 \$163.91 \$163.91	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cancer Program \$0.00 \$0.	Children (AFDC-C/BC) \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$115.294 \$116.32 \$113.01 \$120.16 \$152.74	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.46 \$146.99 \$159.93 \$160.05 \$262.61 \$265.85	Pregnant Adults \$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$166.15	Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$200.96 \$170.00 \$170.28 \$183.69
FY 2012-1	(OAP-A)  2 \$0.00  5 \$0.00  5 \$41.21  5 \$171.46  5 \$227.36  5 \$219.08  6 \$221.09  5 \$170.11  5 \$154.14  2 \$154.14  Adults 65 and Older (OAP-A)  6 \$0.00%	(OAP-B)  \$0.00 \$50.00 \$54.36 \$243.16 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10 \$221.46 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)	(AND/AB)  \$0.00 \$0.00 \$47.57 \$175.71 \$175.71 \$226.02 \$231.88 \$2340.16 \$236.03 \$197.64 \$235.21 \$238.69 \$5242.23 ange in Per Capita  Disabled Individuals to 59 (AND/AB)	\$0.00 \$0.00	Caretakers to 68% FPL S0.00 S0.00 S0.00 S0.00 S0.1.54 S167.13 S189.77 S180.99 S172.67 S125.90 S156.58 S163.91 S163.91 S163.91 S163.91 Caretakers to 68% FPL 0.00%	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  \$0.00 \$0.00  \$0.00  \$0.00	\$0.00 \$0.00	Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Bound \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC)  \$0.00	Eligible Children \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$116.32 \$113.01 \$120.16 \$1270.41 \$170.41 \$190.13	Pregnant Adults  \$0.00 \$0.00 \$30.00 \$339.14 \$115.29 \$155.24 \$159.46 \$146.99 \$159.43 \$160.05 \$262.61 \$265.85 \$269.13	Pregnant Adults \$0.00 \$0.00 \$0.00 \$15.570 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$166.15 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults 0.00%	Emergency \$0.00	S0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.06 \$196.95 \$170.00 \$170.28 \$183.65 \$182.98
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2016-1 FY 2017-2 FY 2018-1 FY 2018-1 FY 2018-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2020-2 FY 2018-1 FY 2018-1 FY 2018-1 FY 2018-1 FY 2018-1	(OAP-A)  \$0.00 \$41.21 \$5171.46 \$5219.08 \$321.09 \$214.94 \$170.11 \$154.14 \$154.14  Adults 65 and Older (OAP-A) \$100.00%	(OAP-B)  \$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$288.92 \$274.91 \$234.10 \$221.46 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)  0.00%	(AND/AB)  \$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$2340.16 \$236.03 \$197.64 \$238.69 \$234.23 ange in Per Capita  Disabled Individuals to 59 (AND/AB)  0.00%	\$0.00 \$0.00	Caretakers to 68% FPL S0.00 S0.00 S61.54 S167.13 S189.77 S125.90 S172.67 S125.90 S165.91 S165.91 S165.91 MAGI Parents/ Caretakers to 68% FPL 0.00% 100.00%	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  \$0.00 \$0.00  For Populations E  MAGI Parents/ Caretakers 69% to 133% FPL  0.00% 0.00%	\$0.00 \$0.00	Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00 \$0	Eligible Children \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$152.94 \$116.32 \$113.01 \$120.16 \$152.74 \$170.41 \$190.13	Pregnant Adults \$0.00 \$0.00 \$39.14 \$115.24 \$115.24 \$146.05 \$159.46 \$146.05 \$262.61 \$262.61 \$265.85 \$269.13	Pregnant Adults \$0.00 \$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$156.01 \$170.52 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults 0.00% 100.00%	Emergency Services \$0.00	Eligibles  \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.96 \$200.96 \$196.95 \$170.00 \$170.28 \$183.69 \$183.65 \$182.98
FY 2012-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2016-1 FY 2016-1 FY 2017-1 FY 2018-1 FY 2018-1 FY 2018-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2020-2 FST 2018-2 Estimated FY 2021-2 FST 2018-1 FY 2018-1	(OAP-A)  2	(OAP-B)  \$0.00 \$50.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10 \$221.46 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)  0.00% 100.00% 347.31%	(AND/AB)  \$0.00 \$0.00 \$47.57 \$175.71 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03 \$197.64 \$235.21 \$238.69 \$242.23 ange in Per Capita Disabled Individuals to 59 (AND/AB)  0.00%	\$0.00 \$0.00	Caretakers to 68% FPL  \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$1172.67 \$125.90 \$156.58 \$163.91 \$163.91 \$163.91 MAGI Parents/ Caretakers to 68% FPL  0.00% 100.00% 171.58%	69% to 133% FPL  \$0.00	\$0.00 \$0.00	Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1.00 \$0	Eligible Children \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$94.70 \$152.94 \$116.32 \$113.01 \$120.16 \$152.74 \$170.41 \$190.13	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.46 \$146.99 \$159.33 \$160.05 \$262.61 \$265.85 \$269.13  MAGI Pregnant Adults  0.00% 100.00% 194.30%	Pregnant Adults \$0.00 \$0.00 \$15.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$136.05 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults 0.00% 100.00% 100.00% 100.00%	Emergency Services \$0.00	S0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$200.96 \$196.95 \$170.00 \$170.28 \$183.65 \$182.98
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2016-1 FY 2017-2 FY 2018-1 FY 2018-1 FY 2019-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2020-2 FY 2018-1	(OAP-A)  2 \$0.00 50.00 541.21 5171.46 5 \$27.36 7 \$219.08 8 \$221.09 0 \$214.94 2 \$154.14	(OAP-B)  \$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$288.92 \$274.91 \$234.10 \$221.46 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)  0.00%	(AND/AB)  \$0.00 \$0.00 \$47.57 \$175.71 \$175.71 \$226.02 \$231.88 \$240.16 \$236.03 \$197.64 \$235.21 \$238.69 \$242.23 ange in Per Capita Disabled Individuals to 59 (AND/AB)  0.00%	\$0.00 \$0.00	Caretakers to 68% FPL S0.00 S0.00 S61.54 S167.13 S189.77 S125.90 S172.67 S125.90 S165.91 S165.91 S165.91 MAGI Parents/ Caretakers to 68% FPL 0.00% 100.00%	69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  \$0.00 \$0.00  For Populations E  MAGI Parents/ Caretakers 69% to 133% FPL  0.00% 0.00%	\$0.00 \$0.00	Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00 \$0	Eligible Children \$0.00	\$0.00 \$0.00 \$0.00 \$68.91 \$152.94 \$116.32 \$113.01 \$120.16 \$152.74 \$170.41 \$190.13	Pregnant Adults \$0.00 \$0.00 \$39.14 \$115.24 \$115.24 \$146.05 \$159.46 \$146.05 \$262.61 \$262.61 \$265.85 \$269.13	Pregnant Adults \$0.00 \$0.00 \$0.00 \$35.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$156.01 \$170.52 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults 0.00% 100.00%	Emergency Services \$0.00	Eligibles  \$0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$200.96 \$196.95 \$170.00 \$170.28 \$183.69 \$183.65 \$182.98
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2017-2 FY 2018-2 FY 2018-2 FY 2018-2 FY 2018-2 FY 2018-2 Estimated FY 2018-2 Estimated FY 2018-2 Estimated FY 2018-2 FY 2018-2 FY 2018-2 FY 2018-2 FY 2018-2 FY 2018-3	(OAP-A)  2 \$0.00  50.00  541.21  5171.46  5 \$177.46  5 \$227.36  7 \$219.08  \$ \$221.09  5 \$214.94  5 \$170.11  5 \$154.14   Adults 65 and Older (OAP-A)  6 0.00%  6 100.00%  6 32.60%  6 32.60%  6 32.60%  7 \$3.64%	(OAP-B)  \$0.00 \$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)  0.00% \$47.31% \$28.36% \$28.36% \$28.36% \$28.36%	(AND/AB)  \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$2340.16 \$233.63 \$197.64 \$235.21 \$238.69 \$244.23 \$238.69 \$244.23 \$238.69 \$244.23 \$238.69 \$242.23 \$238.69 \$242.23 \$238.69 \$242.23 \$238.69 \$242.23 \$258.2	\$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.05 \$0.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90 \$155.58 \$163.91	69% to 133% FPL  \$0.00	\$0.00 \$0.00	Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00 \$0	Eligible Children \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$08.91 \$152.94 \$116.32 \$13.01 \$120.16 \$152.74 \$170.41 \$190.13	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.46 \$146.99 \$159.93 \$160.05 \$262.61 \$265.85 \$269.13  MAGI Pregnant Adults  0.00% 194.30% 100.00% 194.30% 34.77% 2.72%	Pregnant Adults \$0.00 \$0.00 \$1.000 \$1.000 \$1.28.56 \$1.39.23 \$1.61.65 \$1.34.73 \$1.34.61.0 \$1.36.01	Emergency \$0.00	S0.00	\$0.00 \$0.00 \$52.96 \$168.90 \$205.96 \$196.95 \$170.00 \$170.28 \$183.65 \$183.65 \$182.98 TOTAL
FY 2012-1 FY 2015-1 FY 2015-1 FY 2015-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2017-2 FY 2018-1 FY 2018-2 FY 2018-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2020-2 First and FY 2020-2 FY 2015-1	(OAP-A)  \$ 0.00  \$ 41.21  \$ 5171.46  \$ 527.36  \$ 521.99  \$ 214.94  \$ 5170.11  \$ 5154.14   Adults 65 and Older (OAP-A)  \$ 0.00%  \$ 100.00%  \$ 100.00%  \$ 100.00%  \$ 100.00%  \$ 13.60%  \$ 23.60%  \$ 0.92%  \$ 0.92%	(OAP-B)  \$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$234.10 \$221.46 \$221.46 \$221.46 \$0.00%  0.00% \$47.31% 28.36% 28.36% -5.55% -1.55%	(AND/AB)  \$0.00 \$0.00 \$47.57 \$175.71 \$22.62 \$231.88 \$240.16 \$236.03 \$197.64 \$238.69 \$242.23  nge in Per Capita  Disabled Individuals to 59 (AND/AB)  0.00% 2.693.7% 2.863% 2.863% 3.37% 3.57%	Source   S	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$61.54 \$167.13 \$189.77 \$180.99 \$172.67 \$125.90 \$155.58 \$163.91 \$163.91 \$163.91 \$163.91 \$164.91 \$165.91	69% to 133% FPL  \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00 \$0	Eligible Children \$0.00	\$0.00 \$0.00 \$68.91 \$94.70 \$152.94 \$116.32 \$113.01 \$120.16 \$152.74 \$170.41 \$190.13	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.19 \$155.24 \$159.34 \$160.05 \$262.61 \$265.85 \$269.13  MAGI Pregnant Adults  0.00% 100.00% 194.30% 34.77% 2.72% -7.82% 8.80%	Pregnant Adults \$0.00 \$0.00 \$0.00 \$155.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$156.15 \$170.52 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults	Emergency Services \$0.00	Eligibles  \$0.00 \$	\$0.00 \$0.00 \$168.90 \$200.96 \$196.95 \$170.00 \$170.28 \$183.65 \$182.98 TOTAL
FY 2012-1 FY 2015-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2016-1 FY 2017-1 FY 2016-1 FY 2017-1 FY 2018-1 FY 2018-1 FY 2018-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2020-2 FINAL DENTAL EXPENDITURE  TOTAL DENTAL EXPENDITURE  FY 2018-1	(OAP-A)  2	(OAP-B)  \$0.00 \$0.00 \$0.00 \$54.36 \$243.16 \$2312.12 \$294.48 \$288.92 \$274.91 \$221.46 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)  0.00% \$100.00% \$28.36% \$4.5.65% \$-5.18%	(AND/AB)  \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$2340.16 \$236.03 \$197.64 \$235.21 \$238.69 \$242.23 ange in Per Capita  Disabled Individuals to 59 (AND/AB)  0.00% \$2.863% \$2.59% \$3.37% \$3.37%	Source   S	Caretakers to 68% FPL S0.00 S0.00 S0.00 S0.00 S0.00 S0.154 S167.31 S189.77 S180.99 S172.67 S172.67 S125.90 S156.58 S163.91 S16	69% to 133% FPL  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00% \$0.00% \$0.00%	Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00 \$0	Eligible Children \$0.00	\$0,00 \$0,00 \$0,00 \$08.91 \$94.70 \$116.32 \$113.01 \$120.16 \$152.74 \$170.41 \$190.13 \$190.13	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.24 \$159.46 \$146.99 \$159.93 \$160.05 \$262.61 \$265.85 \$269.13  MAGI Pregnant Adults  0.00% \$100.00% \$245.85 \$25.25 \$25	Pregnant Adults \$0.00 \$0.00 \$15.70 \$128.56 \$139.23 \$161.65 \$134.73 \$144.10 \$136.00 \$136.00 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults 0.00% 100.00% 100.00% 1.61.0% 8.30% 1.61.0% 1.61.0% 4.44% 4.49%	Emergency Services \$0.00	Eligibles  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00 \$52.96 \$168.90 \$200.96 \$196.95 \$170.00 \$170.28 \$183.65 \$183.65 \$182.98 TOTAL 0.00% 100.00% 218.92% 21.41% -2.00% -13.68%
FY 2012-1 FY 2013-1 FY 2014-1 FY 2015-1 Estimated FY 2022-2  TOTAL DENTAL EXPENDITURE  TOTAL DENTAL EXPENDITURE  FY 2015-1 FY	(OAP-A)  \$0.00 \$41.21 \$5.00 \$41.21 \$5.17.46 \$5.219.08 \$5.221.09 \$214.94 \$170.11 \$154.14 \$154.14  Adults 65 and Older (OAP-A) \$100.00% \$100	(OAP-B)  \$0.00 \$0.00 \$54.36 \$243.16 \$312.12 \$294.48 \$289.92 \$274.91 \$221.46 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)  0.00% \$47.31% \$28.36% \$-5.65% \$-1.85% \$-5.18%	(AND/AB)  \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$2340.16 \$236.03 \$197.64 \$235.21 \$238.69 \$242.23 arge in Per Capita  Disabled Individuals to 59 (AND/AB)  0.00% \$269.37% \$2.59% \$2.59% \$1.72% \$1.72% \$1.72% \$1.72%	In \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.104 \$167.13 \$189.77 \$180.99 \$172.67 \$152.90 \$155.58 \$163.91 \$1	69% to 133% FPL  \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.000	Children (AFDC-C/BC)  \$0.00 \$0	Eligible Children \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$08.91 \$152.94 \$116.32 \$13.01 \$120.16 \$152.74 \$170.41 \$190.13 \$190.13 \$100.00%	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.9 \$155.24 \$159.46 \$146.99 \$159.93 \$160.05 \$262.61 \$265.85 \$269.13  MAGI Pregnant Adults  0.00% 194.30% 43.477% 2.72% 8.80% 0.08% 64.08%	Pregnant Adults \$0.00 \$0.00 \$15.70 \$128.56 \$139.23 \$161.65 \$134.73 \$146.10 \$136.00 \$156.65 \$170.52 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults 0.00% \$260.11% \$100.09% \$6.61% \$100.09% \$6.61% \$100.09% \$100.00% \$100.00% \$100.00% \$100.00% \$100.00% \$100.00% \$100.00% \$100.00% \$100.00% \$10	Emergency Services \$0.00	Eligibles  \$0.00 \$	\$0.00 \$0.00 \$52.96 \$168.90 \$205.96 \$196.95 \$170.00 \$170.28 \$183.65 \$183.65 \$182.98 TOTAL \$0.00% \$218.92% \$2.00% \$2
FY 2012-1 FY 2015-1 FY 2015-1 FY 2015-1 FY 2016-1 FY 2016-1 FY 2017-1 FY 2016-1 FY 2017-1 FY 2018-1 FY 2018-1 FY 2018-2 Estimated FY 2020-2 Estimated FY 2020-2 Estimated FY 2020-2 FINAL DENTAL EXPENDITURE  TOTAL DENTAL EXPENDITURE  FY 2018-1	(OAP-A)  2	(OAP-B)  \$0.00 \$0.00 \$0.00 \$54.36 \$243.16 \$2312.12 \$294.48 \$288.92 \$274.91 \$221.46 \$221.46 \$221.46 Percent Chai  Disabled Adults 60 to 64 (OAP-B)  0.00% \$100.00% \$28.36% \$4.5.65% \$-5.18%	(AND/AB)  \$0.00 \$0.00 \$47.57 \$175.71 \$226.02 \$231.88 \$231.88 \$240.16 \$235.03 \$197.64 \$2338.69 \$242.23 ange in Per Capita'  Disabled Individuals to 59 (AND/AB)  0.00% \$269.37% \$28.63% \$2.53.78% \$3.57% \$4.122% \$1.126.66%	Source   S	Caretakers to 68% FPL S0.00 S0.00 S0.00 S0.00 S0.00 S0.154 S167.31 S189.77 S180.99 S172.67 S172.67 S125.90 S156.58 S163.91 S16	69% to 133% FPL  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00% \$0.00% \$0.00%	Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00 \$0	Eligible Children \$0.00	\$0,00 \$0,00 \$0,00 \$08.91 \$94.70 \$116.32 \$113.01 \$120.16 \$152.74 \$170.41 \$190.13 \$190.13	Pregnant Adults  \$0.00 \$0.00 \$39.14 \$115.24 \$159.46 \$146.99 \$159.93 \$160.05 \$262.61 \$265.85 \$269.13  MAGI Pregnant Adults  0.00% \$100.00% \$245.85 \$25.25 \$25	Pregnant Adults \$0.00 \$0.00 \$15.70 \$128.56 \$139.23 \$161.65 \$134.73 \$144.10 \$136.00 \$136.00 \$170.52 \$175.00  SB 11-250 Eligible Pregnant Adults 0.00% 100.00% 100.00% 1.61.0% 8.30% 1.61.0% 1.61.0% 4.44% 4.49%	Emergency Services \$0.00	Eligibles  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00 \$52.96 \$168.90 \$200.96 \$196.95 \$170.00 \$170.28 \$183.65 \$183.65 \$182.98 TOTAL 0.00% 100.00% 218.92% 21.41% -2.00% -13.68%

FY 2013-14   100,0076   100,007	Adults 65 and Older (OAP-A)   Disabled Adults   Older (OAP-B)   Disabled Buy   In	y Partial Dual Eligibles TOTAL  50
## PATRICLES   19   50   50   50   50   50   50   50   5	FY 201-213	\$0 \$0 \$0 \$10,267, \$0 \$10,322, \$0 \$0 \$0 \$10,322, \$0 \$0 \$10,322, \$0 \$0 \$0 \$7,327, \$0 \$0 \$0 \$6,832, \$0 \$0 \$5,297, \$0 \$0 \$0 \$5,297, \$0 \$0 \$0 \$5,297, \$0 \$0 \$0 \$5,297, \$0 \$0 \$5,0 \$5,0 \$5,0 \$5,0 \$5,0 \$5,0 \$5
## PARTICIPATION   1,11,11,11,11,11,11,11,11,11,11,11,11,1	FY 201-14   \$1,523,204   \$458,063   \$2,656,198   \$0   \$5329502   \$0   \$0   \$0   \$0   \$0   \$0   \$363,972   \$27,898   \$1,293,878   \$142,66   \$2,251,111   \$0   \$5,933,070   \$0   \$0   \$0   \$0   \$0   \$0   \$0	\$0 \$ \$0 \$10,267. \$0 \$ \$0 \$10,322. \$0 \$ \$0 \$ \$10,322. \$0 \$ \$0 \$ \$57,327. \$0 \$ \$0 \$ \$5,833. \$0 \$ \$0 \$ \$7,227. \$0 \$ \$0 \$ \$5,839. \$0 \$ \$0 \$ \$6,883. \$0 \$ \$0 \$ \$6,883. \$0 \$ \$0 \$ \$6,889. \$0 \$ \$0 \$ \$6,859. \$0 \$ \$0 \$ \$6,859. \$0 \$ \$0 \$ \$6,722. \$0 \$ \$0 \$ \$7,445. \$0 \$ \$0 \$ \$8,366.
Part	FY 201-16   S1,293,888   S414,266   S2,251,111   S0   S5,93,3070   S0   S0   S0   S0   S0   S40,559   S350,446   S39,138	\$0 \$0 \$10,322,\$ \$0 \$0 \$7,327,\$ \$0 \$0 \$5,683,\$ \$0 \$0 \$5,297,\$ \$0 \$0 \$5,297,\$ \$0 \$0 \$5,297,\$ \$0 \$0 \$5,27,27,\$ \$0 \$0 \$5,724,\$ \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$5,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0 \$0,722,\$ \$0 \$0 \$0,722,\$ \$0 \$0 \$0,722,\$ \$0 \$0 \$0,722,\$ \$0 \$0 \$0
P   2015	FY 2015-16   \$918,640   \$291,759   \$1,629,371   \$0   \$4,196,565   \$0   \$0   \$0   \$0   \$236,261   \$237,239   \$27,681   \$1,520,271   \$0   \$3,898,656   \$0   \$0   \$0   \$0   \$0   \$0   \$24,636   \$209,906   \$29,324   \$0   \$1,520,271   \$0   \$3,898,656   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$	\$0
P   2016   Str.   Str	FY 2016-17 S902,830 S29,582 S1,522,771 S0 S3,898,656 S0 S0 S0 S0 S0 S24,636 S20,906 S29,324 FY 2017-18, S932,793 S306,643 S1,500,822 S0 S4,347,059 S0 S0 S0 S0 S0 S0 S0 S20,708 S156,727 S32,995 FY 2018-19 S961,345 S328,195 S1,515,555 S0 S4,205,776 S0 S0 S0 S0 S0 S0 S0 S0 S20,712 S186,839 S33,566 FY 2019-20 S949,118 S333,026 S1,455,673 S0 S3,894,579 S0 S0 S0 S0 S0 S0 S0 S0 S20,011 S178,054 S31,985 Estimated FY 2020-21 S946,881 S350,477 S144,115 S0 S4,432,791 S0 S0 S0 S0 S0 S0 S0 S0 S19,836 S20,213 S47,954 S186,849 S186,84	50
Propries   Section   Sec	FY 2018-19   \$961,345   \$238,195   \$51,515,555   \$0   \$4,205,776   \$0   \$0   \$0   \$0   \$0   \$20,112   \$186,839   \$33,366   \$1,455,673   \$0   \$3,894,579   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$	\$0
Property   1998   199	FY 2019-20   S049,118   \$333,026   \$1,455,673   \$0   \$33,894.579   \$0   \$0   \$0   \$0   \$0   \$20,011   \$175,054   \$31,985	\$0
Statistical Property	Estimated FY 2020-21   S951,530   S348,235   S1,385,244   S0   S3,783,254   S0   S0   S0   S0   S0   S0   S0   S	\$0 \$0 \$6,722, \$0 \$0 \$7,445, \$0 \$0 \$8,366,
Second   Property   Second	Estimated FY 2021-22 S946,88 S350,47 S1,444,115 S0 S4,42,791 S0 S0 S0 S0 S0 S19,836 S203,213 S47,954 S1,444 S1 S0 S5,279,830 S0 S0 S0 S0 S19,641 S225,185 S49,412 S1,444 S1 S225,185 S49,412 S1,444 S1 S1 S225,185 S49,412 S1 S225,185 S49,412 S1 S225,185 S1,444 S1 S225,185 S49,412 S1 S225,185 S1,444 S1 S225,185 S1 S245,444 S1	\$0 \$0 \$7,445, \$0 \$0 \$8,366,
Sample   S	Estimated FY 2022-23   \$968,767   \$359,233   \$1,464,414   \$0   \$5,279,830   \$0   \$0   \$0   \$0   \$0   \$0   \$0	\$0 \$0 \$8,366,
Patrice   Patr	Percent Charge in Emergency and Co-Occurring Expenditure for Populations Eligible for Adult Dental Cash Fund Funding  Adults 65 and Older (OAP-A) Disabled Adults (OAP-B) Disabled (OAP-B) Disabled (OAP-B) Disabled Buy Individuals to 59 (AND/AB) Disabled Buy Indindividuals to 59 (AND/AB) Disabled Buy Individuals to 59 (AND/AB)	IS- Partial Dual
### Adalts 65 and Older	Adults 65 and Older (OAP-A)	
## MAGE And The Concess of Part of of P	Adults 65 and Disabled Adults   Disabled Adults   Disabled Adults   Disabled Buys   Disabled B	
Part	FY 2012-13 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	Eligibles
FY 2014-15		0.00% 0.00%
Part		00% 0.00% 100. 00% 0.00% 0.
Property		0.00% 0.00% 0. 00% 0.00% -29.
Property		0.00% -6.
FY 2019-32		0.00% 6.
Stimute   FY 2012-12   0.25%   4.57%   4.88%   0.00%		0.00% -0.
Estimated FY 2021-22   0.49%   0.72%   4.25%   0.00%   17.17%   0.00		0.00% -5.
Estimated PY 2022-23   2.31%   2.42%   1.41%   0.00%   1.911%   0.00		0.00% -1.
Per Capita Cost for Emergency and Co-Occurring Expenditure for Populations Eligible for Adult Dental Cash Funding		0.00% 10.
Adults 65 and Older (OAP-A)   Disabled Adults   Disabled and Older (OAP-B)   Caretakers to 68% FPL		0.00% 12.
## Adults of Service   Caretakers to (OAP-A)   CoAP-B)   Caretakers to (OAP-B)	Per Capita Cost for Emergency and Co-Occurring Expenditure for Populations Eligible for Adult Dental Cash Fund Funding	
FY 201-12   S0.00	CO-OCCURRING EXPENDITURE  Older Older (OAP.A)	y Partial Dual TOTAL
Second No.   FY 2012-13   Store   St		.00 \$0.00 \$0
FY 2014-14   \$36.41   \$46.49   \$39.82   \$0.00   \$42.75   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$22.66   \$26.39		.00 \$0.00 \$0
FY 2015-16   S21.66   S27.71   S23.68   S0.00   S25.69   S0.00   S0.00   S0.00   S0.00   S0.00   S15.74   S16.46   S15.74		.00 \$0.00 \$40
FY 2016-17   S20.55   S26.32   S22.52   S0.00   S24.15   S0.00   S0.00   S0.00   S0.00   S0.00   S1.96   S15.47   S14.80	FY 2014-15 \$30.94 \$39.58 \$33.83 \$0.00 \$36.70 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$22.53 \$23.52 \$22.48	.00 \$0.00 \$34
FY 2017-18		.00 \$0.00 \$24
FY 2018-19   \$20.16   \$25.80   \$22.08   \$50.00   \$52.392   \$50.00   \$50.00   \$50.00   \$50.00   \$50.00   \$51.63   \$51.532   \$51.64   \$51.		00 \$0.00 \$2
FY 2019-20   S19-90   S26.18   S21.21   S0.00   S22.15   S0.00   S0.00   S0.00   S0.00   S0.00   S14.55   S14.35   S13.95		00 \$0.00 \$22 00 \$0.00 \$22
Estimated FY 2020-21   S19.70   S25.92   S21.00   S0.00   S21.93   S0.00   S0.00   S0.00   S0.00   S0.00   S14.40   S14.21   S13.81		00 \$0.00 \$2.
Estimated FY 2021-22   S19.50   \$25.66   \$20.79   \$0.00   \$21.71   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$14.26   \$14.07   \$13.67		00 \$0.00 \$2
Estimated FY 2022-23 \$19.31 \$25.40 \$20.58 \$0.00 \$21.49 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$14.12 \$13.93 \$13.53 \$  Percent Change in Per Capita Cost for Emergency and Co-Occurring Expenditure for Populations Eligible for Adult Dental Cash Fund Funding  Adults 65 and Older 60 to 64 Individuals to 59 Older 60 to 64 (Older 60 to 64) (Older 60 to 6		00 \$0.00 \$20
Adults 65 and Older 60 to 64 Older (OAR) (		.00 \$0.00 \$20
Adults 6s and Disabled Adults Disabled Buy- EMERGENCY AND CO-OCCURRING EXPENDITURE  Adults 6s and Disabled Adults Disabled Buy- Disabled Buy- In dividuals to 59 In Caretakers to 69% to 133%  MAGI Adults Caretakers to 69% to 133%  MAGI Adults Cervical Cancer Can		
Adults   FrE   Frogram   Adults	Estimated FY 2022-23 \$19.31 \$25.40 \$20.58 \$0.00 \$21.49 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$14.12 \$13.93 \$13.53	
	Estimated FY 2022-23 \$19.31 \$25.40 \$20.58 \$0.00 \$21.49 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$14.12 \$13.93 \$13.53 \$13	y Eligibles TOTAL
	Signated FY 2022-23   S19.31   S25.40   S20.58   S.000   S21.49   S.000   S.	y Eligibles TOTAL
	Estimated FY 2022-23   \$19.31   \$25.40   \$20.58   \$0.00   \$21.49   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$14.12   \$13.93   \$13.53	y Eligibles TOTAL
FY 2015-16 -29.99% -29.99% -30.00% 0.00% -30.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% -30.14% -30.02% -29.98%	Estimated FY 2022-23   S19.31   S25.40   S20.58   S.0.00   S21.49   S.0.00   S.0.0	Eligibles
	Estimated FY 2022-23   S19.31   S25.40   S20.58   S.0.00   S21.49   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S14.12   S13.93   S13.53	Y Eligibles TOTAL  100% 0.00% 0.00% 0.00%  100% 0.00% 100.  100% 0.00% -13.  100% 0.00% -29.
	September   Per   Capital   Fy 2022-23   Signated Fy 2022-23   S	Y Eligibles 101AL 10% 0.00% 0.00% 0. 10% 0.00% 100. 10% 0.00% -13. 10% 0.00% -29. 10% 0.00% -5.
	Estimated FY 2022-23   S19.31   S25.40   S20.58   S.0.00   S21.49   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S14.12   S13.93   S13.53	Y Eligibles 101AL  10% 0.00% 0.00% 0.  100% 0.00% 100.  00% 0.00% 1-13.  00% 0.00% -29.  00% 0.00% -5.  00% 0.00% 0.
	September   Process   September   Process   September   Process   September   Process   September   Process   September   Se	Y Eligibles 101AL  00% 0.00% 0.  00% 0.00% 100.  00% 0.00% 13.  00% 0.00% 23.  00% 0.00% 5.  00% 0.00% 0.00% 0.  00% 0.0
	Estimated FY 2022-23   S19.31   S25.40   S20.58   S.0.00   S21.49   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S.0.00   S14.12   S13.93   S13.53	Eligibles   TOTAL
Estimated F1 2021-22 $-1.0279$ $-1.0076$ $-0.0079$ $-1.0076$ $-0.0079$ $-0.0076$ $-0.0076$ $-0.0076$ $-0.0078$ $-0.$	Septemblitus   Sept	Y Eligibles 101AL  00% 0.00% 0.  00% 0.00% 100.  00% 0.00% 13.  00% 0.00% 23.  00% 0.00% 5.  00% 0.00% 0.00% 0.  00% 0.0

ADULT DENTAL CASH FUND-ELIGIBLE DENTAL SERVICES  FY 2011-12 FY 2013-14 FY 2013-14	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-	MAGI Parents/ Caretakers to	MAGI Parents/ Caretakers		Breast &	Eligible	SB 11-008		MAGI	SB 11-250	Non-Citizens-		
FY 2012-13 FY 2013-14	\$0				68% FPL	69% to 133% FPL	MAGI Adults	Cervical Cancer Program	Children (AFDC-C/BC)	Eligible Children	Foster Care	Pregnant Adults	Eligible Pregnant Adults	Emergency Services	Partial Dual Eligibles	TOTAL
FY 2013-14	60	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0	\$0 \$0
	\$0 \$201,003	\$0 \$77,570	\$0 \$499,282	\$0 \$0	\$0 \$2,343,854	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$151,160	\$0 \$9,840	\$0 \$0	\$0 \$0	\$3,282,709
FY 2014-15	\$5,875,980	\$2,130,656	\$9,441,853	\$0	\$21,088,324	\$0		\$0	\$0	\$0	\$83,476	\$1,365,471	\$185,532	\$0	\$0	\$40,171,292
FY 2015-16	\$8,722,032	\$2,994,511	\$13,920,755	\$0	\$26,801,503	\$0		\$0	\$0	\$0	\$131,694	\$2,000,231	\$217,230	\$0	\$0	\$54,787,956
FY 2016-17	\$8,723,574	\$3,014,401	\$14,156,741	\$0	\$25,316,753	\$0	\$0	\$0	\$0	\$0	\$211,496	\$1,953,438	\$288,797	\$0	\$0	\$53,665,199
FY 2017-18 FY 2018-19	\$9,216,781 \$9,288,509	\$3,113,533 \$3,168,991	\$14,717,495 \$14,685,350	\$0 \$0	\$26,708,645 \$17,930,580	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$142,145 \$135,274	\$1,331,537 \$1,763,666	\$267,313 \$301,448	\$0 \$0	\$0 \$0	\$55,497,449 \$47,273,819
FY 2018-19 FY 2019-20	\$9,288,509	\$3,168,991	\$14,685,350 \$12,110,272	\$0 \$0	\$17,930,580	\$0		\$0 \$0	\$0 \$0	\$0 \$0	\$135,274 \$145,210	\$1,776,892	\$301,448 \$279,855	\$0	\$0 \$0	\$47,757,228
Estimated FY 2020-21	\$8,634,781	\$3,357,093	\$18,240,974	\$0	\$31,692,667	\$0		\$0	\$0	\$0	\$192,431	\$3,743,019	\$602,305	\$0	\$0 \$0	\$66,463,270
Estimated FY 2021-22	\$8,098,306	\$3,208,802	\$18,298,367	\$0	\$34,277,328	\$0		\$0	\$0	\$0	\$217,205	\$3,983,521	\$606,286	\$0	\$0	\$68,689,815
Estimated FY 2022-23	\$8,324,765	\$3,305,294	\$18,934,583	\$0	\$40,233,497	\$0	\$0	\$0	\$0	\$0	\$244,830	\$4,472,498	\$645,744	\$0	\$0	\$76,161,211
		Per	cent Change in Ac	lult Dental Benef	it Expenditure wi	th State Share Pa	aid by the Adult D	ental Cash Fund								
ADULT DENTAL CASH FUND-ELIGIBLE DENTAL SERVICES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13 FY 2013-14	0.00% 100.00%	0.00%	0.00% 100.00%	0.00%	0.00% 100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00% 100.00%	0.00% 100.00%	0.00%	0.00%	0.00% 100.00%
FY 2013-14 FY 2014-15	2823.33%	2646.75%	1791.09%	0.00%	799.73%	0.00%	0.00%	0.00%	0.00%	0.00%	100.00%	803.33%	1785.49%	0.00%	0.00%	1123.72%
FY 2015-16	48.44%	40.54%	47.44%	0.00%	27.09%	0.00%	0.00%	0.00%	0.00%	0.00%	57.76%	46.49%	17.08%	0.00%	0.00%	36.39%
FY 2016-17	0.02%	0.66%	1.70%	0.00%	-5.54%	0.00%	0.00%	0.00%	0.00%	0.00%	60.60%	-2.34%	32.95%	0.00%	0.00%	-2.05%
FY 2017-18	5.65%	3.29%	3.96%	0.00%	5.50%	0.00%	0.00%	0.00%	0.00%	0.00%	-32.79%	-31.84%	-7.44%	0.00%	0.00%	3.41%
FY 2018-19	0.78%	1.78%	-0.22%	0.00%	-32.87%	0.00%	0.00%	0.00%	0.00%	0.00%	-4.83%	32.45%	12.77%	0.00%	0.00%	-14.82%
FY 2019-20 Estimated FY 2020-21	-22.89% 20.55%	-16.54%	-17.54%	0.00%	31.83% 34.08%	0.00%	0.00%	0.00%	0.00%	0.00%	7.34%	0.75%	-7.16% 115.22%	0.00%	0.00%	1.02% 39.17%
Estimated FY 2020-21 Estimated FY 2021-22	-6.21%	26.92% -4.42%	50.62% 0.31%	0.00%	34.08% 8.16%	0.00%	0.00%	0.00%	0.00%	0.00%	32.52% 12.87%	110.65% 6.43%	0.66%	0.00%	0.00%	39.17%
Estimated FY 2022-23	2.80%	3.01%	3.48%	0.00%	17.38%	0.00%	0.00%	0.00%	0.00%	0.00%	12.72%	12.27%	6.51%	0.00%	0.00%	10.88%
			Capita Cost for A	dult Dental Rene		ith State Share P	aid by the Adult I									
			Cupital Cost for 11	duit Dentai Dene	nt Expenditure "		I oy the reduct									
ADULT DENTAL CASH FUND-ELIGIBLE DENTAL SERVICES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FY 2012-13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FY 2013-14 FY 2014-15	\$4.80 \$140.52	\$7.87 \$203.58	\$7.75 \$141.88	\$0.00 \$0.00	\$18.80 \$130.43	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$46.38	\$11.49 \$91.66	\$9.31 \$106.08	\$0.00 \$0.00	\$0.00 \$0.00	\$12.83 \$134.37
FY 2014-15 FY 2015-16	\$140.32 \$205.69	\$203.38	\$202.34	\$0.00	\$150.45 \$164.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$46.38 \$78.95	\$138.78	\$106.08	\$0.00	\$0.00	\$134.37
FY 2016-17	\$198.53	\$268.16	\$209.36	\$0.00	\$156.84	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$136.98	\$143.98	\$146.75	\$0.00	\$0.00	\$178.11
FY 2017-18	\$200.77	\$263.93	\$217.94	\$0.00	\$148.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$101.53	\$131.51	\$119.92	\$0.00	\$0.00	\$174.06
FY 2018-19	\$194.78	\$249.11	\$213.95	\$0.00	\$101.98	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$98.38	\$144.61	\$131.46	\$0.00	\$0.00	\$147.39
FY 2019-20	\$150.21	\$207.92	\$176.43	\$0.00	\$134.43	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$105.61	\$145.69	\$122.05	\$0.00	\$0.00	\$148.90
Estimated FY 2020-21 Estimated FY 2021-22	\$178.77 \$166.78	\$249.88 \$234.75	\$276.53 \$263.43	\$0.00 \$0.00	\$183.71 \$167.88	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$138.34 \$156.15	\$284.64 \$275.81	\$174.68 \$172.83	\$0.00 \$0.00	\$0.00 \$0.00	\$208.87 \$193.38
Estimated FY 2021-22 Estimated FY 2022-23	\$165.93	\$233.70	\$266.10	\$0.00	\$163.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$176.01	\$276.67	\$176.82	\$0.00	\$0.00	\$189.28
			ige in Per Capita C								21,0101		2110100	-	-	2.0
					-	MAGI Parents/		D 6					SB 11-250			
ADULT DENTAL CASH FUND-ELIGIBLE DENTAL SERVICES	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	Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
FY 2013-14	100.00%	100.00%	100.00%	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100.00%	100.00%	0.00%	0.00%	100.00%
	2827.50%	2486.79% 39.70%	1730.71%	0.00%	593.78%	0.00%	0.00%	0.00%	0.00%	0.00%	100.00%	697.74%	1039.42%	0.00%	0.00%	947.31%
FY 2014-15	46 2001		42.61%	0.00%	25.80% -4.41%	0.00%	0.00%	0.00%	0.00%	0.00%	70.22% 73.50%	51.41% 3.75%	16.42% 18.83%	0.00%	0.00%	34.61% -1.53%
FY 2014-15 FY 2015-16	46.38%		3 /170/													
FY 2014-15 FY 2015-16 FY 2016-17	-3.48%	-5.71%	3.47% 4.10%	0.00%										0.00%	0.00%	
FY 2014-15 FY 2015-16			3.47% 4.10% -1.83%	0.00% 0.00% 0.00%	-5.32% -31.33%	0.00% 0.00%	0.00%	0.00% 0.00%	0.00% 0.00%	0.00% 0.00%	-25.88% -3.10%	-8.66% 9.96%	-18.28% 9.62%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	-2.27% -15.32%
FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2019-20	-3.48% 1.13% -2.98% -22.88%	-5.71% -1.58% -5.62% -16.53%	4.10% -1.83% -17.54%	0.00% 0.00% 0.00%	-5.32% -31.33% 31.82%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	-25.88% -3.10% 7.35%	-8.66% 9.96% 0.75%	-18.28% 9.62% -7.16%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	-2.27% -15.32% 1.02%
FY 2014-15 FY 2015-16 FY 2015-17 FY 2016-77 FY 2017-18 FY 2018-19 FY 2019-20 FStimated FY 2020-21	-3.48% 1.13% -2.98% -22.88% 19.01%	-5.71% -1.58% -5.62% -16.53% 20.18%	4.10% -1.83% -17.54% 56.74%	0.00% 0.00% 0.00% 0.00%	-5.32% -31.33% 31.82% 36.66%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	-25.88% -3.10% 7.35% 30.99%	-8.66% 9.96% 0.75% 95.37%	-18.28% 9.62% -7.16% 43.12%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	-2.27% -15.32% 1.02% 40.28%
FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2019-20	-3.48% 1.13% -2.98% -22.88%	-5.71% -1.58% -5.62% -16.53%	4.10% -1.83% -17.54%	0.00% 0.00% 0.00%	-5.32% -31.33% 31.82%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	-25.88% -3.10% 7.35%	-8.66% 9.96% 0.75%	-18.28% 9.62% -7.16%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	-2.27% -15.32% 1.02%

					Current Year	Projection										
CALCULATION OF ADULT DENTAL CASH FUND-ELIGIBLE DENTAL SERVICES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Total Dental	-9.39%	-5.40%	19.01%	0.00%	4.68%	0.00%	0.00%	0.00%	0.00%	0.00%	27.11%	64.08%	22.17%	0.00%	0.00%	
Total Dental Per Capita Trend Factor Estimated FY 2020-21 Total Dental Per Capita	\$154.14	\$221.46	\$235.21	\$0.00	\$163.91	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$152.74	\$262.61	\$166.15	\$0.00	\$0.00	\$183.69
Estimated FY 2020-21 Eligible Caseload	48,301	13,435	65,964	-	172,515	-	-	-	-		1,391	13,150	3,448	-	-	318,204
Estimated FY 2020-21 Total Dental Expenditure	\$7,445,116	\$2,975,315	\$15,515,392	\$0	\$28,276,934	\$0	\$0	\$0	\$0	\$0	\$212,461	\$3,453,322	\$572,885	\$0	\$0	\$58,451,425
Emman and Co. Occupies Double																
Emergency and Co-Occurring Dental Emergency and Co-Occurring Dental Per Capita Trend Factor	-1.00%	-1.00%	-1.00%	0.00%	-1.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-1.00%	-1.00%	-1.00%	0.00%	0.00%	
Estimated FY 2020-21 Emergency and Co-Occurring Dental Per Capita	\$19.70	\$25.92	\$21.00	\$0.00	\$21.93	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14.40	\$14.21	\$13.81	\$0.00	\$0.00	\$21.13
Estimated FY 2020-21 Eligible Caseload	48,301	13,435	65,964	-	172,515	-	-	-	-	-	1,391	13,150	3,448	-	-	318,204
Estimated FY 2020-21 Emergency and Co-Occurring Dental Expenditure	\$951,530	\$348,235	\$1,385,244	\$0	\$3,783,254	\$0	\$0	\$0	\$0	\$0	\$20,030	\$186,862	\$47,617	\$0	\$0	\$6,722,772
Bottom Line Impacts																
JBC \$1500 Dental Cap Raise	\$774,317	\$263,468	\$1,264,306	\$0	\$2,608,452	\$0				\$0	\$0	\$172,663	\$27,975	\$0	\$0	\$5,111,181
JBC Reduction of Dental Cap Raise from \$1500 to \$1000  Reduction in Acute Care Expenditure Due to COVID-19	(\$193,579) \$1,560,457	(\$65,867) \$532,412	(\$316,077) \$3.162.597	\$0 \$0	(\$652,113) \$5,242,648	\$0 \$0	\$0 \$0		\$0 \$0	\$0 \$0	\$0 \$0	(\$43,166) \$347,062	(\$6,994) \$56,056	\$0 \$0	\$0 \$0	(\$1,277,796) \$10,901,232
Total Bottom Line Impacts	\$2,141,195	\$730,013	\$4,110,826	\$0	\$7,198,987	\$0				S0	50	\$476,559	\$77,037	S0	S0	\$14,734,617
Adult Dental Benefit			. , .,.		,,								,			
Estimated FY 2020-21 Adult Dental Benefit Per Capita	\$134.44	\$195.54	\$214.21	\$0.00	\$141.98	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$138.34	\$248.40	\$152.34	\$0.00	\$0.00	\$208.87
Estimated FY 2020-21 Eligible Caseload  Estimated FY 2020-21 Adult Dental Benefit Expenditure	48,301 \$8,634,781	13,435 \$3,357,093	65,964 \$18,240,974	- 50	172,515 \$31,692,667	- \$0	- \$0	- 50	- S0	- \$0	1,391 \$192,431	13,150 \$3,743,019	3,448 \$602,305	- 50	- 50	318,204 \$66,463,270
Estimated F1 2020-21 Adult Detical Deticit Experiental	30,034,761	33,337,073	310,240,774	30	Request Year		30	30	30	30	3172,431	33,743,017	3002,303	30	30	300,403,270
						1		Donner 6					CD 11 250			
CALCULATION OF ADULT DENTAL CASH FUND-ELIGIBLE DENTAL SERVICES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Total Dental																
Total Dental Per Capita Trend Factor Estimated FY 2021-22 Total Dental Per Capita	0.00% \$154.14	0.00% \$221.46	1.48% \$238.69	0.00% \$0.00	0.00% \$163.91	0.00% \$0.00	0.00% \$0.00	0.00% \$0.00	0.00% \$0.00	0.00% \$0.00	11.57% \$170.41	1.23% \$265.85	2.63% \$170.52	0.00%	0.00% \$0.00	\$183.65
Estimated FY 2021-22 Total Dental Per Capita  Estimated FY 2021-22 Eligible Caseload	\$154.14 48.558	\$221.46 13.669	\$238.69 69.462	\$0.00	204.182	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	1.391	\$265.85 14.443	\$170.52 3.508	\$0.00	\$0.00	3183.65
Estimated FY 2021-22 Total Dental Expenditure	\$7,484,731	\$3,027,137		\$0	\$33,467,472	\$0				\$0	\$237,040	\$3,839,672	\$598,184	\$0		\$65,234,121
Emergency and Co-Occurring Dental Emergency and Co-Occurring Dental Per Capita Trend Factor	-1.00%	-1.00%	-1.00%	0.00%	-1.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-1.00%	-1.00%	-1.00%	0.00%	0.00%	
Estimated FY 2021-22 Emergency and Co-Occurring Dental Per Capita	\$19.50	\$25.66	\$20.79	\$0.00	\$21.71	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14.26	\$14.07	\$13.67	\$0.00	\$0.00	\$20.96
Estimated FY 2021-22 Eligible Caseload	48,558	13,669	69,462	-	204,182	-	-	-	-		1,391	14,443	3,508	-		355,213
Estimated FY 2021-22 Emergency and Co-Occurring Dental Expenditure	\$946,881	\$350,747	\$1,444,115	\$0	\$4,432,791	\$0	\$0	\$0	\$0	\$0	\$19,836	\$203,213	\$47,954	\$0	\$0	\$7,445,537
Bottom Line Impacts																
JBC \$1500 Dental Cap Raise	\$774,317	\$263,468	\$1,264,306	\$0	\$2,608,452	\$0	\$0	\$0	\$0	\$0	\$0	\$172,663	\$27,975	\$0	\$0	\$5,111,181
JBC Reduction of Dental Cap Raise from \$1500 to \$1000	(\$774,317)	(\$263,468)	(\$1,264,306)	\$0	(\$2,608,452)	\$0			\$0	\$0	\$0	(\$172,663)	(\$27,975)	\$0	\$0	(\$5,111,181)
Reduction in Acute Care Expenditure Due to COVID-19	\$1,560,457	\$532,412	\$3,162,597 \$3,162,597	\$0 \$0	\$5,242,648	\$0 \$0				\$0 \$0		\$347,062 \$347,062	\$56,056 \$56,056	\$0 \$0		\$10,901,232 \$10,901,232
Total Bottom Line Impacts  Adult Dental Benefit	\$1,560,457	\$532,412	\$3,162,597	30	\$5,242,648	50	30	30	30	30	30	\$347,062	\$50,050	30	30	\$10,901,232
Estimated FY 2021-22 Adult Dental Benefit Per Capita	\$134.64	\$195.80	\$217.90	\$0.00	\$142.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$156.15	\$251.78	\$156.85	\$0.00	\$0.00	\$193.38
Estimated FY 2021-22 Eligible Caseload	48,558	13,669	69,462	-	204,182	-	-	-			1,391	14,443	3,508	-	-	355,213
Estimated FY 2021-22 Adult Dental Benefit Expenditure	\$8,098,306	\$3,208,802	\$18,298,367	\$0	\$34,277,328 Out Year Pr		\$0	\$0	\$0	\$0	\$217,205	\$3,983,521	\$606,286	\$0	\$0	\$68,689,815
CALCULATION OF ADULT DENTAL CASH FUND-ELIGIBLE DENTAL SERVICES	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%	MAGI Adults	Breast & Cervical Cancer	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
						FPL		Program					Adults			
Total Dental Per Capita Trend Factor	0.00%	0.00%	1.48%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	11.57%	1.23%	2.63%	0.00%	0.00%	1
Estimated FY 2022-23 Total Dental Per Capita	\$154.14	\$221.46	\$242.23	\$0.00	\$163.91	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$190.13	\$269.13	\$175.00	\$0.00	\$0.00	\$182.98
Estimated FY 2022-23 Eligible Caseload	50,169	14,143	71,157	-	245,688	-	-	-	-	-	1,391	16,166	3,652	-	-	402,366
Estimated FY 2022-23 Total Dental Expenditure	\$7,733,076	\$3,132,115	\$17,236,400	\$0	\$40,270,679	\$0	\$0	\$0	\$0	\$0	\$264,471	\$4,350,621	\$639,100	\$0	\$0	\$73,626,462
Emergency and Co-Occurring Dental																
Emergency and Co-Occurring Dental Per Capita Trend Factor	-1.00%	-1.00%	-1.00%	0.00%	-1.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-1.00%	-1.00%	-1.00%	0.00%	0.00%	60
Estimated FY 2022-23 Emergency and Co-Occurring Dental Per Capita  Estimated FY 2022-23 Eligible Caseload	\$19.31 50.169	\$25.40 14.143	\$20.58 71,157	\$0.00	\$21.49 245.688	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14.12 1.391	\$13.93 16.166	\$13.53 3.652	\$0.00	\$0.00	\$20.79 402.366
Estimated FY 2022-23 Emergency and Co-Occurring Dental Expenditure	,	\$359,233	\$1,464,414	\$0	\$5,279,830	\$0	\$0	\$0	\$0	\$0	\$19,641	\$225,185	\$49,412	\$0	\$0	
Bottom Line Impacts  JBC \$1500 Dental Cap Raise	\$774,317	\$263,468	\$1,264,306	\$0	\$2,608,452	\$0	\$0	\$0	\$0	\$0	\$0	\$172,663	\$27,975	\$0	en.	\$5,111,181
JBC Reduction of Dental Cap Raise from \$1500 to \$1000	(\$774,317)	(\$263,468)	. , . ,	\$0	(\$2,608,452)	\$0				\$0	\$0	(\$172,663)	(\$27,975)	\$0	\$0	(\$5,111,181)
Reduction in Acute Care Expenditure Due to COVID-19	\$1,560,457	\$532,412	\$3,162,597	\$0	\$5,242,648	\$0	\$0	\$0	\$0	\$0	\$0	\$347,062	\$56,056	\$0	\$0	\$10,901,232
Total Bottom Line Impacts	\$1,560,457	\$532,412	\$3,162,597	\$0	\$5,242,648	\$0	\$0	\$0	\$0	\$0	\$0	\$347,062	\$56,056	\$0	\$0	\$10,901,232
Adult Dental Benefit Estimated FY 2022-23 Adult Dental Benefit Per Capita	\$134.83	\$196.06	\$221.65	\$0.00	\$142.42	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$176.01	\$255.20	\$161.47	\$0.00	\$0.00	\$189.28
Estimated F1 2022-23 Adult Dental Benefit Fet Capital Estimated FY 2022-23 Eligible Caseload	50,169	14,143	71,157	-	245,688	-	- 50.00	-	-	-	1,391	16,166	3,652	-	-	402,366
Estimated FY 2022-23 Adult Dental Benefit Expenditure	\$8,324,765	\$3,305,294	\$18,934,583	\$0	\$40,233,497	\$0	\$0	\$0	\$0	\$0	\$244,830	\$4,472,498	\$645,744	\$0	\$0	\$76,161,211

			Cash Fund - Fund	l Splits			
		J	FY 2020-21				
Eligibility Category	Caseload	Per Capita	FMAP	Total Funds (1)	General Fund	Adult Dental Fund	Federal Funds
Adults 65 and Older (OAP-A)	48,301	\$134.44	50.00%	\$8,634,781	\$0	\$4,317,390	\$4,317,391
Disabled Adults 60 to 64 (OAP-B)	13,435	\$195.54	50.00%	\$3,357,093	\$0	\$1,678,546	\$1,678,547
Disabled Individuals to 59 (AND/AB)	65,964	\$214.21	50.00%	\$18,240,974	\$0	\$9,120,487	\$9,120,487
MAGI Parents/Caretakers to 68% FPL	172,515	\$141.98	50.00%	\$31,692,667	\$0	\$15,846,333	\$15,846,334
Foster Care	1,391	\$138.34	50.00%	\$192,431	\$0	\$96,215	\$96,216
MAGI Pregnant Adults	13,150	\$248.40	50.00%	\$3,743,019	\$0	\$1,871,509	\$1,871,510
SB 11-250 Eligible Pregnant Adults	3,448	\$152.34	71.13%	\$602,305	\$0	\$173,885	\$428,420
Total	318,204	\$208.87		\$66,463,270	\$0	\$33,104,365	\$33,358,905
		Ì	FY 2021-22		•		
Eligibility Category	Caseload	Per Capita	FMAP	Total Funds (1)	General Fund	Adult Dental Fund	Federal Funds
Adults 65 and Older (OAP-A)	48,558	\$134.64	50.00%	\$8,098,306	\$0	\$4,049,153	\$4,049,153
Disabled Adults 60 to 64 (OAP-B)	13,669	\$195.80	50.00%	\$3,208,802	\$0	\$1,604,401	\$1,604,401
Disabled Individuals to 59 (AND/AB)	69,462	\$217.90	50.00%	\$18,298,367	\$0	\$9,149,183	\$9,149,184
MAGI Parents/Caretakers to 68% FPL	204,182	\$142.20	50.00%	\$34,277,328	\$0	\$17,138,664	\$17,138,664
Foster Care	1,391	\$156.15	50.00%	\$217,205	\$0	\$108,602	\$108,603
MAGI Pregnant Adults	14,443	\$251.78	50.00%	\$3,983,521	\$0	\$1,991,760	\$1,991,761
SB 11-250 Eligible Pregnant Adults	3,508	\$156.85	65.00%	\$606,286	\$0	\$212,200	\$394,086
Total	355,213	\$193.38		\$68,689,815	\$0	\$34,253,963	\$34,435,852
		I	FY 2022-23				
Eligibility Category	Caseload	Per Capita	FMAP	Total Funds (1)	General Fund	Adult Dental Fund	Federal Funds
Adults 65 and Older (OAP-A)	50,169	\$134.83	53.10%	\$8,324,765	\$0	\$3,904,315	\$4,420,450
Disabled Adults 60 to 64 (OAP-B)	14,143	\$196.06	53.10%	\$3,305,294	\$0	\$1,550,183	\$1,755,111
Disabled Individuals to 59 (AND/AB)	71,157	\$221.65	53.10%	\$18,934,583	\$0	\$8,880,319	\$10,054,264
MAGI Parents/Caretakers to 68% FPL	245,688	\$142.42	53.10%	\$40,233,497	\$0	\$18,869,510	\$21,363,987
Foster Care	1,391	\$176.01	53.10%	\$244,830	\$0	\$114,825	\$130,005
MAGI Pregnant Adults	16,166	\$255.20	53.10%	\$4,472,498	\$0	\$2,097,602	\$2,374,896
SB 11-250 Eligible Pregnant Adults	3,652	\$161.47	65.00%	\$645,744	\$0	\$226,010	\$419,734
Total	402,366	\$189.28		\$76,161,211	\$0	\$35,642,764	\$40,518,447
(1) Figures may not sum due to rounding.	-		•		•	<u> </u>	

						Cas	sh Based Actua	ls								
ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$332,196	\$2,736,142	\$29,681,347	\$3,181	\$5,332,883	\$1,369,338	\$51,852	\$45,428	\$4,356,981	\$0	\$8,441,242	\$76,112	\$0	\$0	\$0	\$52,426,7
FY 2012-13	\$227,134	\$1,750,998	\$19,898,570	\$84,657	\$3,831,667	\$1,085,249	\$1,625,465	\$45,947	\$3,866,964	\$0	\$5,970,754	\$34,100	\$0	\$0	\$0	\$38,421,5
FY 2013-14	\$282,005	\$1,757,115	\$20,280,399	\$245,383	\$5,504,911	\$1,214,763	\$6,440,111	\$27,008	\$5,079,647	\$0	\$5,561,277	\$127,504	\$0	\$0	\$0	\$46,520,
FY 2014-15	\$354,548 \$254,768	\$1,913,420 \$2,138,042	\$23,170,439 \$26,384,820	\$350,257 \$512,151	\$7,994,048 \$8,948,318	\$2,036,423	\$18,380,238 \$25,881,859	\$8,559 \$1,859	\$5,759,480 \$6,520,516	\$1,439,830 \$1,328,294	\$5,512,907	\$246,279 \$234,283	\$14,280 \$12,260	\$0 \$0	\$0 \$0	\$67,180, \$78,490,
FY 2015-16 FY 2016-17	\$259,232	\$2,138,042	\$20,384,820	\$512,151 \$503,378	\$7,886,521	\$1,193,397 \$2,413,652	\$25,638,231	\$1,839	\$5,604,379	\$1,328,294	\$5,079,981 \$3,824,278	\$234,283	\$12,280	\$0 \$0	\$0 \$0	\$78,490,
FY 2017-18	\$201,496	\$1,323,004	\$16,755,858	\$506,658	\$4,990,697	\$1,434,034	\$15,046,293	\$269	\$1,432,537	\$292,790	\$1,104,068	\$102,622	\$13,953	\$0	\$0 \$0	\$43,204,
FY 2018-19	\$179,281	\$1,204,921	\$16,828,944	\$499,396	\$4,160,594	\$1,074,259	\$14,588,981	\$8,509	\$1,203,837	\$227,192	\$886,389	\$125,888	\$546	\$0	\$0	\$40,988,
FY 2019-20	\$95,420	\$1,581,346	\$18,115,296	\$655,328	\$4,485,683	\$1,156,944	\$15,597,667	\$13,430	\$1,306,954	\$239,288	\$967,758	\$131,379	\$2,338	\$0	\$28	\$44,348,
						Percent Cha	nge in Cash Ba	sed Actuals			•					
ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	-31.63%	-36.00%	-32.96%	2561.41%	-28.15%	-20.75%	3034.82%	1.14%	-11.25%	0.00%	-29.27%	-55.20%	0.00%	0.00%	0.00%	-26.7
FY 2013-14	24.16%	0.35%	1.92%	189.86%	43.67%	11.93%	296.20%	-41.22%	31.36%	0.00%	-6.86%	273.92%	0.00%	0.00%	0.00%	21.0
FY 2014-15	25.72%	8.90%	14.25%	42.74%	45.22%	67.64%	185.40%	-68.31%	13.38%	100.00%	-0.87%	93.15%	100.00%	0.00%	0.00%	44.
FY 2015-16	-28.14%	11.74%	13.87% -9.73%	46.22%	11.94%	-41.40% 102.25%	40.81% -0.94%	-78.28% -78.53%	13.21%	-7.75%	-7.85%	-4.87%	-14.15% 57.28%	0.00%	0.00%	16. -6.
FY 2016-17 FY 2017-18	1.75% -22.27%	-5.97% -34.19%	-9./3%	-1.71% 0.65%	-11.87% -36.72%	-40.59%	-0.94%	-/8.53% -32.54%	-14.05% -74.44%	-20.01% -72.44%	-24.72% -71.13%	3.03% -57.49%	-27.64%	0.00%	0.00%	-6. -41.
	-22.2770								-15.96%	-22.40%	-19.72%	22.67%	-96.09%	0.00%	0.00%	-41.
	-11 03%	-8 93%	0.44%				-3 04%									
FY 2018-19 FY 2019-20	-11.03% -46.78%	-8.93% 31.24%	0.44% 7.64%	-1.43% 31.22%	-16.63% 7.81%	-25.09% 7.70%		3060.38% 57.83%	8.57%	5.32%	9.18%	4.36%	328.21%	0.00%	0.00%	8.2
FY 2018-19						7.70%									0.00%	
FY 2018-19					7.81%  MAGI Parents/	7.70%	6.91%								Partial Dual Eligibles	
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12	-46.78%  Adults 65 and Older (OAP-A)	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39	7.64%  Disabled Individuals to 59 (AND/AB)	31.22%  Disabled Buy-In  \$61.17	7.81%  MAGI Parents/ Caretakers to 68% FPL \$57.21	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62	6.91% er Capita Cost MAGI Adults \$45.72	57.83%  Breast & Cervical Cancer Program \$76.09	8.57%  Eligible Children (AFDC-C/BC)	5.32% SB 11-008 Eligible Children	9.18%  Foster Care \$468.07	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	0.00% Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL \$84
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13	-46.78%  Adults 65 and Older (OAP-A)  \$8.36 \$5.56	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36	31.22%  Disabled Buy-In  \$61.17  \$95.33	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12	6.91% er Capita Cost MAGI Adults \$45.72 \$152.86	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75	SB 11-008 Eligible Children	9.18% Foster Care \$468.07 \$335.87	MAGI Pregnant Adults \$9.98 \$4.25	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00	Partial Dual Eligibles \$0.00	**************************************
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56 \$6.74	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80	6.91% er Capita Cost MAGI Adults \$45.72 \$152.86 \$73.82	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31	8.57% Eligible Children (AFDC-C/BC) \$13.02 \$10.75 \$12.73	5.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00	9.18%  Foster Care  \$468.07 \$335.87 \$304.44	MAGI Pregnant Adults \$9.98 \$4.25 \$9.69	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00	8 TOTAL \$84 \$56 \$54
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15	-46.78%  Adults 65 and Older (OAP-A)  \$8.36 \$5.56 \$6.74 \$8.48	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33 \$182.82	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$3348.18	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29	6.91% er Capita Cost MAGI Adults \$45.72 \$152.86 \$73.82 \$76.14	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38	8.57%  Eligible Children (AFDC-C/BC) \$13.02 \$10.75 \$12.73 \$12.92	5.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$22.73	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15	4.36%  MAGI Pregnant Adults  \$9.98 \$4.25 \$9.69 \$16.53	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00	8. TOTAL \$84 \$56 \$55 \$55
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16	-46.78%  Adults 65 and Older (OAP-A)  \$8.36 \$5.56 \$6.74 \$8.48 \$6.01	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33 \$182.82 \$203.06	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$348.18 \$383.50	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72	6,91% er Capita Cost MAGI Adults \$45.72 \$152.86 \$73.82 \$76.14 \$80.79	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75 \$12.73 \$12.92 \$13.96	5.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$22.73	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15 \$254.83	4.36%  MAGI Pregnant Adults  \$9,98 \$4.25 \$9.69 \$16.53 \$16.25	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$0.00 \$8.16 \$6.97	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$8 TOTAL \$84 \$56 \$54 \$57 \$60
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56  \$6.74  \$8.48  \$6.01  \$5.90	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39  \$193.46  \$178.33  \$182.82  \$203.06  \$178.85	7.64%  Disabled Individuals to 59 (AND/AB) \$499.40 \$321.36 \$314.80 \$348.18 \$383.50 \$353.24	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86	7.70%  P MAGI Parents/ Caretakers 69% to 133% FPL \$25.12 \$25.80 \$28.29 \$13.72 \$23.88	6.91% er Capita Cost MAGI Adults \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$73.71	57.83%  Breast & Cervical Cancer Program  \$576.09 \$73.75 \$48.31 \$24.38 \$5.77 \$1.70	8.57% Eligible Children (AFDC-C/BC) \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$11.94	5.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$28.73 \$22.32 \$16.37	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30	4.36%  MAGI Pregnant Adults  \$9.98 \$4.25 \$9.69 \$16.53 \$16.25 \$17.79	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16 \$6.97 \$9.80	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00	\$84 \$56 \$54 \$57 \$60 \$54
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16	-46.78%  Adults 65 and Older (OAP-A)  \$8.36 \$5.56 \$6.74 \$8.48 \$6.01	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33 \$182.82 \$203.06	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$348.18 \$383.50	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72	6,91% er Capita Cost MAGI Adults \$45.72 \$152.86 \$73.82 \$76.14 \$80.79	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75 \$12.73 \$12.92 \$13.96	5.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$22.73	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15 \$254.83	4.36%  MAGI Pregnant Adults  \$9,98 \$4.25 \$9.69 \$16.53 \$16.25	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$0.00 \$8.16 \$6.97	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	8.2 TOTAL \$84 \$56 \$54 \$57 \$60 \$54 \$32
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2016-17 FY 2017-18	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56  \$6.74  \$8.48  \$6.01  \$5.90  \$4.39	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33 \$182.82 \$203.06 \$178.85 \$112.15	7.64%  Disabled Individuals to 59 (AND/AB) \$499.40 \$321.36 \$314.80 \$383.50 \$352.24 \$248.12	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53  \$61.98	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$227.75	7.70% P MAGI Parents/ Caretakers 69% to 133% FPI. \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$23.88 \$19.22	6.91% er Capita Cost MAGI Adults \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$73.71 \$42.67	57.83%  Breast & Cervical Cancer Program  \$76.09  \$73.75  \$48.31  \$24.38  \$5.77  \$1.70	8.57% Eligible Children (AFDC-C/BC) \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$11.94 \$3.26	5.32% SB 11-008 Eligible Children \$0.00 \$0.00 \$28.73 \$22.32 \$16.37 \$4.55	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42	4.36%  MAGI Pregnant Adults  \$9,98 \$4.25 \$9.69 \$16.53 \$16.25 \$17.79 \$10.14	328.21% SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$56.26	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	TOTAL
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	-46.78%  Adults 65 and Older (OAP-A)  \$8.36 \$5.56 \$6.74 \$8.48 \$6.01 \$5.90 \$4.39 \$3.376	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$118.33 \$182.82 \$203.06 \$118.85 \$112.15 \$94.72	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$334.88 \$338.50 \$352.24 \$248.12 \$245.18	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53  \$61.98  \$55.57	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$23.88 \$19.22 \$15.90 \$19.44	6,91% er Capita Cost MAGI Adults \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$73.71 \$42.67 \$44.14	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77 \$1.70 \$1.74 \$58.69 \$98.03	8.57% Eligible Children (AFDC-C/BC) \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$11.94 \$3.26 \$2.86	5.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$22.73 \$16.37 \$4.55 \$3.83	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63	4.36%  MAGI Pregnant Adults  \$9,98 \$4.25 \$9,69 \$116.53 \$16.25 \$17.79 \$10.14 \$10.32	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	8.2 TOTAL \$84 \$56 \$54 \$57 \$66 \$54 \$32 \$32
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	-46.78%  Adults 65 and Older (OAP-A)  \$8.36 \$5.56 \$6.74 \$8.48 \$6.01 \$5.90 \$4.39 \$3.376	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$118.33 \$182.82 \$203.06 \$118.85 \$112.15 \$94.72	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$334.88 \$338.50 \$352.24 \$248.12 \$245.18	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53  \$61.98  \$55.57	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66 \$27.27	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$23.88 \$19.22 \$15.90 \$19.44	6.91% er Capita Cost MAGI Aduts \$45.72 \$15.286 \$73.82 \$76.14 \$80.79 \$73.71 \$42.67 \$44.44 \$48.30	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77 \$1.70 \$1.74 \$58.69 \$98.03	8.57% Eligible Children (AFDC-C/BC) \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$11.94 \$3.26 \$2.86	5.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$22.73 \$16.37 \$4.55 \$3.83	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63	4.36%  MAGI Pregnant Adults  \$9,98 \$4.25 \$9,69 \$116.53 \$16.25 \$17.79 \$10.14 \$10.32	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	8.2 TOTAL \$84 \$56 \$54 \$57 \$66 \$54 \$32 \$32
FY 2018-19 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2017-18 FY 2017-18 FY 2017-18 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2012-13	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56  \$6.74  \$8.48  \$6.01  \$5.90  \$4.39  \$3.76  \$2.01  Adults 65 and Older (OAP-A)	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33 \$182.82 \$203.06 \$2178.85 \$112.15 \$94.72 \$121.37  Disabled Adults 60 to 64 (OAP-B)  -40.73%	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$3348.18 \$333.50 \$352.24 \$248.12 \$245.18 \$272.29  Disabled Individuals to 59 (AND/AB)  -35.65%	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53  \$61.98  \$55.57  \$61.39  Disabled Buy-In  55.84%	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66 \$27.27	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$23.88 \$19.22 \$16.90 \$19.94 Percent Cl MAGI Parents/ Caretakers 69% to 133% FPL -32.37%	6.91% er Capita Cost  MAGI Adults  \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$73.71 \$42.67 \$44.14 \$48.30 ange in Per Ca	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77 \$1.70 \$1.74 \$58.69 \$98.03  pita Cost  Breast & Cervical Cancer Program  -3.08%	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$3.26 \$2.86 \$3.21  Eligible Children (AFDC-C/BC)	\$3.2%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$228.73 \$22.32 \$16.37 \$4.55 \$3.83 \$4.28  SB 11-008 Eligible Children  0.00%	9.18% Foster Care \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63 \$45.39 Foster Care	4.36%  MAGI Pregnant Adults  \$9.98 \$4.25 \$9.69 \$16.53 \$16.25 \$17.79 \$10.14 \$10.32 \$11.38  MAGI Pregnant Adults	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24 \$1.06  SB 11-250 Eligible Pregnant Adults  0.00%	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  So.00  So.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles	\$8- \$56 \$55 \$55 \$55 \$55 \$53 \$33 \$33 \$32 \$55 \$55 \$55 \$55 \$55 \$55 \$55 \$55 \$55 \$5
FY 2018-19 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2013-14 FY 2013-14	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56  \$6.74  \$8.48  \$6.01  \$5.90  \$4.39  \$3.76  \$2.01  Adults 65 and Older (OAP-A)	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$1178.33 \$182.82 \$203.06 \$1178.85 \$112.15 \$94.72 \$121.37  Disabled Adults 60 to 64 (OAP-B)  -40.73% -7.82%	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$3348.18 \$3383.50 \$352.24 \$245.18 \$272.29  Disabled Individuals to 59 (AND/AB)  -3.5.65% -2.04%	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53  \$61.98  \$55.57  \$61.39  Disabled Buy-In  55.84%  0.55%	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66 \$27.27  MAGI Parents/ Caretakers to 68% FPL  -32.62%	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$16.90 \$19.44 Percent CP MAGI Parents/ Caretakers 69% to 133% FPL -32.37% -1.23%	6.91% er Capita Cost  MAGI Adults  \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$33.71 \$42.67 \$44.14 \$48.30 ange in Per Ca  MAGI Adults  234.34% -51.71%	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$55.77 \$11.70 \$11.74 \$58.69 \$98.03  pita Cost  Breast & Cervical Cancer Program  -3.08% -34.49%	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$11.94 \$3.26 \$2.86 \$3.21  Eligible Children (AFDC-C/BC)  -17.43% 18.42%	\$3.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$28.73 \$22.32 \$16.37 \$4.55 \$3.83 \$4.28  SB 11-008 Eligible Children  0.00% 0.00%	9.18%  Foster Care  \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63 \$45.39  Foster Care	4.36%  MAGI Pregnant Adults  \$9,98 \$4.25 \$9,69 \$16.53 \$16.25 \$17.79 \$10.14 \$10.32 \$11.38  MAGI Pregnant Adults  -57.41% 128.00%	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24 \$1.06  SB 11-250 Eligible Pregnant Adults  0.00% 0.00%	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  So.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles	\$8- \$55 \$55 \$55 \$66 \$55 \$33 \$33 \$34
FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2016-17 FY 2018-19 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2013-14 FY 2013-14 FY 2014-15	-46.78%  Adults 65 and Older (OAP-A)  \$8.36 \$5.56 \$6.74 \$8.48 \$6.01 \$55.90 \$4.39 \$3.76 \$2.01  Adults 65 and Older (OAP-A)  -33.49% -21.22% 25.82%	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.83 \$182.82 \$203.06 \$178.85 \$112.15 \$94.72 \$121.37  Disabled Adults 60 to 64 (OAP-B)  -40.73% -7.82% 2.52%	7.64%  Disabled Individuals to 59 (AND/AB) \$499.40 \$321.36 \$348.18 \$338.24 \$248.12 \$248.12 \$248.12 Disabled Individuals to 59 (AND/AB) -35.65% -2.04% -10.60%	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53  \$61.39  Disabled Buy-In  55.84%  0.55%  0.75%	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66 \$27.27  MAGI Parents/ Caretakers to 68% FPL  -32.62% 11.53%	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.6.12 \$25.12 \$22.80 \$28.29 \$13.72 \$23.88 \$19.22 \$15.90 \$19.44 Percent CI MAGI Parents/ Caretakers 69% to 133% FPL -32.37% -1.23% 9.65%	6.91% er Capita Cost  MAGI Aduts  \$45.72 \$15.286 \$73.82 \$76.14 \$80.79 \$73.71 \$42.67 \$44.14 \$48.30 ange in Per Ca  MAGI Aduts  234.34% -51.71% 3.14%	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77 \$1.70 \$1.74 \$58.69 \$98.03 pita Cost  Breast & Cervical Cancer Program  -3.08% -34.49% -49.53%	8.57%  Eligible Children (AFDC-C/BC) \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$31.94 \$3.26 \$3.21  Eligible Children (AFDC-C/BC) -17.43% 18.42% 18.42%	\$3.2%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$28.73 \$4.55 \$3.83 \$4.28  SB 11-008 Eligible Children  0.00% 100.00%	9.18%  Foster Care  \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63 \$45.39  Foster Care  -28.24% -9.36% -9.62%	4.36%  MAGI Pregnant Adults  \$9.98 \$4.25 \$9.69 \$16.53 \$16.53 \$11.38  MAGI Pregnant Adults  -57.41% 128.00% 70.59%	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24 \$1.06  SB 11-250 Eligible Pregnant Adults  0.00% 0.00% 100.00%	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  So.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00%	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles  0.00% 0.00%	888 \$88 \$55 \$55 \$55 \$65 \$65 \$65 \$65 \$65 \$65 \$65
FY 2018-19 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2017-18 FY 2017-18 FY 2017-18 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2012-13 FY 2013-14 FY 2013-15 FY 2013-15	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56  \$6.74  \$8.48  \$6.01  \$5.90  \$4.39  \$3.76  \$2.01  Adults 65 and Older (OAP-A)  -33.49%  21.22%  25.82%  -29.13%	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33 \$182.82 \$203.06 \$2178.85 \$112.15 \$94.72 \$121.37  Disabled Adults 60 to 64 (OAP-B)  -40.73% -7.82% 2.52% 11.07%	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$3348.18 \$3348.12 \$248.12 \$248.12 \$245.18 \$272.29  Disabled Individuals to 59 (AND/AB)  -35.65% -2.04% 10.60%	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$61.39  Disabled Buy-In  55.84%  0.55%  0.75%  -14.69%	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66 \$27.27  MAGI Parents/ Caretakers to 68% FPL  -32.62% 14.53% 11.98%	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$13.78 \$16.90 \$19.44 Percent Cl MAGI Parents/ Caretakers 69% to 133% FPL -32.37% -1.23% 9.65% -515.09%	6.91% er Capita Cost  MAGI Adults  \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$73.71 \$42.67 \$44.14 \$48.30 ange in Per Ca  MAGI Adults  234.34% \$51.71% \$1.17% \$1.17% \$1.17% \$1.11%	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77 \$1.70 \$1.74 \$58.69 \$98.03  pita Cost  Breast & Cervical Cancer Program  -3.08% -34.49% -34.93% -75.33%	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$3.26 \$2.86 \$3.21  Eligible Children (AFDC-C/BC)  -17.43% 18.42% 1.49% 8.05%	\$3.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$2.8.73 \$22.32 \$16.37 \$4.55 \$3.83 \$4.28  SB 11-008 Eligible Children  0.00% 0.00% 100.00% -22.31%	9.18%  Foster Care  \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63 \$45.39  Foster Care  -28.24% -9.36% -9.62% -7.39%	4.36%  MAGI Pregnant Adults  \$9.98 \$4.25 \$9.69 \$16.53 \$16.25 \$17.79 \$10.14 \$10.32 \$11.38  MAGI Pregnant Adults  -57.41% 128.00% 70.59% 1-1.69%	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24 \$1.06  SB 11-250 Eligible Pregnant Adults  0.00% 0.00% 100.00% 114.58%	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  So.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00% \$0.00% \$0.00% \$0.00%	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles  0.00% 0.00% 0.00%	\$8 \$55 \$55 \$55 \$66 \$55 \$33 \$33 \$33 \$37 \$77 \$44
FY 2018-19 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2013-14 FY 2013-14 FY 2013-14 FY 2015-16 FY 2015-16 FY 2015-16	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56  \$6.74  \$8.48  \$6.01  \$5.90  \$4.39  \$3.76  \$2.01  Adults 65 and Older (OAP-A)  -1.33.49%  -21.22%  -2.82%  -1.83%	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$118.85 \$112.15 \$94.72 \$121.37  Disabled Adults 60 to 64 (OAP-B)  -40.73% -7.82% 2.52% 11.07% -11.92%	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$3348.18 \$3383.50 \$352.24 \$248.12 \$245.18 \$272.29  Disabled Individuals to 59 (AND/AB)  -3.5.65% -2.04% 10.60% 10.14% -8.15%	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$82.38  \$80.53  \$61.98  \$55.57  \$61.39  Disabled Buy-In  0.5584%  0.75%  -14.69%  -2.25%	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66 \$27.27  MAGI Parents/ Caretakers to 68% FPL  48.26 48.86	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$16.90 \$19.44 Percent Ch MAGI Parents/ Caretakers 69% to 133% FPL -1.23% 9.65% 74.05%	6.91% er Capita Cost  MAGI Adults  \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$34.11 \$42.67 \$44.14 \$48.30 ange in Per Ca  MAGI Adults  234.34% -51.71% 3.14% 6.11% -8.76%	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$55.77 \$1.70 \$1.74 \$58.69 \$98.03 pita Cost  Breast & Cervical Cancer Program  -34.49% -49.53% -76.33% -70.54%	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75 \$12.92 \$13.96 \$11.94 \$3.26 \$2.86 \$3.21  Eligible Children (AFDC-C/BC)  -17.43% 18.42% 1.49% 8.05% -14.47%	\$3.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$28.73 \$22.32 \$16.37 \$4.55 \$3.83 \$4.28  SB 11-008 Eligible Children  0.00% 0.00% 100.00% -22.31%	9.18%  Foster Care  \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63 \$45.39  Foster Care  -28.24% -9.36% -9.62% -7.39% -26.11%	4.36%  MAGI Pregnant Adults  \$9,98 \$4.25 \$9,69 \$16.53 \$16.25 \$17.79 \$10.14 \$10.32 \$11.38  MAGI Pregnant Adults  -57.41% 128.00% 70.59% -1.69% 9,48%	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24 \$1.06  SB 11-250 Eligible Pregnant Adults  0.00% 0.00% 40.60%	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  So.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00%	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles  0.00% 0.00% 0.00% 0.00%	8.  TOTAL  \$84  \$56  \$55  \$66  \$54  \$32  \$32  \$36  TOTAL  -33.  -3.  -3.  -1.0.
FY 2018-19 FY 2019-20  ACUTE CARE  Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2017-18 FY 2017-18 FY 2017-18 FY 2019-20  ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)  FY 2012-13 FY 2013-14 FY 2013-15 FY 2013-15	-46.78%  Adults 65 and Older (OAP-A)  \$8.36  \$5.56  \$6.74  \$8.48  \$6.01  \$5.90  \$4.39  \$3.76  \$2.01  Adults 65 and Older (OAP-A)  -33.49%  21.22%  25.82%  -29.13%	31.24%  Disabled Adults 60 to 64 (OAP-B)  \$326.39 \$193.46 \$178.33 \$182.82 \$203.06 \$2178.85 \$112.15 \$94.72 \$121.37  Disabled Adults 60 to 64 (OAP-B)  -40.73% -7.82% 2.52% 11.07%	7.64%  Disabled Individuals to 59 (AND/AB)  \$499.40 \$321.36 \$314.80 \$3348.18 \$3348.12 \$248.12 \$248.12 \$245.18 \$272.29  Disabled Individuals to 59 (AND/AB)  -35.65% -2.04% 10.60%	31.22%  Disabled Buy-In  \$61.17  \$95.33  \$95.85  \$96.57  \$61.39  Disabled Buy-In  55.84%  0.55%  0.75%  -14.69%	7.81%  MAGI Parents/ Caretakers to 68% FPL  \$57.21 \$38.55 \$44.15 \$49.44 \$54.78 \$48.86 \$27.75 \$23.66 \$27.27  MAGI Parents/ Caretakers to 68% FPL  -32.62% 14.53% 11.98%	7.70% P MAGI Parents/ Caretakers 69% to 133% FPL \$38.62 \$26.12 \$25.80 \$28.29 \$13.72 \$13.78 \$16.90 \$19.44 Percent Cl MAGI Parents/ Caretakers 69% to 133% FPL -32.37% -1.23% 9.65% -515.09%	6.91% er Capita Cost  MAGI Adults  \$45.72 \$152.86 \$73.82 \$76.14 \$80.79 \$73.71 \$42.67 \$44.14 \$48.30 ange in Per Ca  MAGI Adults  234.34% \$51.71% \$1.17% \$1.17% \$1.17% \$1.11%	57.83%  Breast & Cervical Cancer Program  \$76.09 \$73.75 \$48.31 \$24.38 \$5.77 \$1.70 \$1.74 \$58.69 \$98.03  pita Cost  Breast & Cervical Cancer Program  -3.08% -34.49% -34.93% -75.33%	8.57%  Eligible Children (AFDC-C/BC)  \$13.02 \$10.75 \$12.73 \$12.92 \$13.96 \$3.26 \$2.86 \$3.21  Eligible Children (AFDC-C/BC)  -17.43% 18.42% 1.49% 8.05%	\$3.32%  SB 11-008 Eligible Children  \$0.00 \$0.00 \$2.8.73 \$22.32 \$16.37 \$4.55 \$3.83 \$4.28  SB 11-008 Eligible Children  0.00% 0.00% 100.00% -22.31%	9.18%  Foster Care  \$468.07 \$335.87 \$304.44 \$275.15 \$254.83 \$188.30 \$51.42 \$40.63 \$45.39  Foster Care  -28.24% -9.36% -9.62% -7.39%	4.36%  MAGI Pregnant Adults  \$9.98 \$4.25 \$9.69 \$16.53 \$16.25 \$17.79 \$10.14 \$10.32 \$11.38  MAGI Pregnant Adults  -57.41% 128.00% 70.59% 1-1.69%	328.21%  SB 11-250 Eligible Pregnant Adults  \$0.00 \$0.00 \$8.16 \$6.97 \$9.80 \$6.26 \$0.24 \$1.06  SB 11-250 Eligible Pregnant Adults  0.00% 0.00% 100.00% 114.58%	0.00%  Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  So.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00% \$0.00% \$0.00% \$0.00%	Partial Dual Eligibles  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles  0.00% 0.00% 0.00%	8.2 TOTAL \$84 \$56 \$54 \$57 \$60 \$54 \$32 \$32 \$32 \$32

						Ca	sh Based Actua	ls								
ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$247,234	\$2,036,348	\$22,090,057	\$2,367	\$3,968,947	\$1,019,116	\$38,590	\$33,809	\$3,242,641	\$0	\$6,282,313	\$56,646	\$0	\$0	\$0	\$39,018,06
FY 2012-13	\$137,883	\$1,062,951	\$12,079,518	\$51,391	\$2,326,031	\$658,805	\$986,746	\$27,892	\$2,347,458	\$0	\$3,624,574	\$20,700	\$0	\$0	\$0	\$23,323,94
FY 2013-14	\$157,476	\$981,199	\$11,324,876	\$137,026	\$3,074,024	\$678,342	\$3,596,254	\$15,082	\$2,836,550	\$0	\$3,105,500	\$71,200	\$0	\$0	\$0	\$25,977,52
FY 2014-15	\$185,085	\$998,864	\$12,095,682	\$182,845	\$4,173,139	\$1,063,075	\$9,595,050	\$4,468	\$3,006,626	\$751,636	\$2,877,907	\$128,565	\$7,455	\$0	\$0	\$35,070,39
FY 2015-16	\$131,042	\$1,099,723	\$13,571,293	\$263,430	\$4,602,656	\$613,836	\$13,312,590	\$956	\$3,353,892	\$683,221	\$2,612,938	\$120,506	\$6,306	\$0	\$0	\$40,372,38
FY 2016-17	\$113,902	\$883,364	\$10,465,321	\$221,176	\$3,465,203	\$1,060,518	\$11,265,001	\$175	\$2,462,468	\$466,836	\$1,680,322	\$106,058	\$8,472	\$0	\$0	\$32,198,81
FY 2017-18	\$110,961	\$728,558	\$9,227,193	\$279,009	\$2,748,300	\$789,700	\$8,285,762	\$148	\$788,876	\$161,235	\$607,993	\$56,512	\$7,684	\$0	\$0	\$23,791,93
FY 2018-19	\$97,194	\$653,226	\$9,123,506	\$270,738	\$2,255,590	\$582,390	\$7,909,151	\$4,613	\$652,638	\$123,168	\$480,540	\$68,248	\$296	\$0	\$0	\$22,221,29
FY 2019-20	\$48,662	\$806,444	\$9,238,313	\$334,200	\$2,287,578	\$590,010	\$7,954,390 nge in Cash Ba	\$6,849	\$666,511	\$122,031	\$493,530	\$67,000	\$1,193	\$0	\$14	\$22,616,72
						rercent Cha	ige iii Casii ba	seu Actuais							1	
ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	-44.23%	-47.80%	-45.32%	2071.14%	-41.39%	-35.36%	2457.00%	-17.50%	-27.61%	0.00%	-42.31%	-63.46%	0.00%	0.00%	0.00%	-40.22
FY 2013-14	14.21%	-7.69%	-6.25%	166.63%	32.16%	2.97%	264.46%	-45.93%	20.83%	0.00%	-14.32%	243.96%	0.00%	0.00%	0.00%	11.38
FY 2014-15	17.53%	1.80%	6.81%	33.44%	35.75%	56.72%	166.81%	-70.38%	6.00%	100.00%	-7.33%	80.57%	100.00%	0.00%	0.00%	35.00
FY 2015-16	-29.20%	10.10%	12.20%	44.07%	10.29%	-42.26%	38.74%	-78.60%	11.55%	-9.10%	-9.21%	-6.27%	-15.41%	0.00%	0.00%	15.12
FY 2016-17	-13.08%	-19.67%	-22.89%	-16.04%	-24.71%	72.77%	-15.38%	-81.69%	-26.58%	-31.67%	-35.69%	-11.99%	34.35%	0.00%	0.00%	-20.25
FY 2017-18 FY 2018-19	-2.58% -12.41%	-17.52% -10.34%	-11.83% -1.12%	26.15% -2.96%	-20.69% -17.93%	-25.54% -26.25%	-26.45% -4.55%	-15.43% 3016.89%	-67.96% -17.27%	-65.46% -23.61%	-63.82% -20.96%	-46.72% 20.77%	-9.30% -96.15%	0.00%	0.00%	-26.11
FY 2018-19 FY 2019-20	-12.41%	-10.34%	1.26%	-2.96%	1.42%		-4.55% 0.57%	3016.89% 48.47%	2.13%	-23.61%	-20.96% 2.70%	-1.83%	-96.15% 303.04%	0.00%	0.00%	-6.60' 1.78'
							er Capita Cost									
ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$6.22	\$242.91	\$371.67	\$45.52	\$42.57	\$28.74	\$34.03	\$56.63	\$9.69	\$0.00	\$348.36	\$7.42	\$0.00	\$0.00	\$0.00	
FY 2012-13	\$3.38	\$117.44	\$195.08	\$57.87	\$23.40	\$28.74 \$15.86	\$92.79	\$56.63 \$44.77	\$6.52	\$0.00	\$203.89	\$2.58	\$0.00	\$0.00	\$0.00	\$34.1
FY 2012-13 FY 2013-14	\$3.38 \$3.76	\$117.44 \$99.58	\$195.08 \$175.79	\$57.87 \$53.53	\$23.40 \$24.66	\$28.74 \$15.86 \$14.41	\$92.79 \$41.22	\$56.63 \$44.77 \$26.98	\$6.52 \$7.11	\$0.00 \$0.00	\$203.89 \$170.01	\$2.58 \$5.41	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$34.1 \$30.1
FY 2012-13 FY 2013-14 FY 2014-15	\$3.38 \$3.76 \$4.43	\$117.44 \$99.58 \$95.44	\$195.08 \$175.79 \$181.76	\$57.87 \$53.53 \$50.41	\$23.40 \$24.66 \$25.81	\$28.74 \$15.86 \$14.41 \$14.77	\$92.79 \$41.22 \$39.75	\$56.63 \$44.77 \$26.98 \$12.73	\$6.52 \$7.11 \$6.75	\$0.00 \$0.00 \$15.00	\$203.89 \$170.01 \$143.64	\$2.58 \$5.41 \$8.63	\$0.00 \$0.00 \$4.26	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$34.1 \$30.1 \$30.2
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16	\$3.38 \$3.76 \$4.43 \$3.09	\$117.44 \$99.58 \$95.44 \$104.45	\$195.08 \$175.79 \$181.76 \$197.26	\$57.87 \$53.53 \$50.41 \$42.37	\$23.40 \$24.66 \$25.81 \$28.18	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06	\$92.79 \$41.22 \$39.75 \$41.55	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97	\$6.52 \$7.11 \$6.75 \$7.18	\$0.00 \$0.00 \$15.00 \$11.48	\$203.89 \$170.01 \$143.64 \$131.07	\$2.58 \$5.41 \$8.63 \$8.36	\$0.00 \$0.00 \$4.26 \$3.58	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.9
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38 \$23.50	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.9 \$18.0
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38 \$23.50 \$23.93	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31 \$22.03	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45 \$0.13	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$62.9 \$34.1 \$30.1 \$30.2 \$31.1 \$23.9 \$18.0
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38 \$23.50	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.9 \$18.0
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 Percent Cl MAGI Parents/ Caretakers 69% to 133% FPL	\$92.79 \$41.22 \$39.75 \$41.55 \$41.55 \$32.38 \$23.50 \$23.93 \$24.63 ange in Per Ca	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer Program	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31 \$22.03	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60 \$5.80	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45 \$0.13	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.9 \$18.0 \$17.6
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20  ACUTE CARE Net Antipsychotic Drugs Expenditure	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02	\$117.44 \$99.58 \$99.58 \$104.45 \$78.58 \$61.76 \$51.35 \$61.90	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92 \$138.86 Disabled Individuals to \$59	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 Percent Cl MAGI Parents/ Caretakers 69% to 133%	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38 \$23.50 \$23.93 \$24.63 ange in Per Ca	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55 \$1.64	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07 \$2.18	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31 \$22.03 \$23.15	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60 \$5.80	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45 \$0.13 \$0.54	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.9 \$18.0 \$17.6
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2016-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20  ACUTE CARE  Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)  FY 2013-14	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02 Adults 65 and Older (OAP-A) -45.66%	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35 \$61.90 Disabled Adults 60 to 64 (OAP-B) -51.65%	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92 \$138.86 Disabled Individuals to \$59 (AND/AB) -47.51%	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13 \$31.31 Disabled Buy-In	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91 MAGI Parents/ Carctakers to 68% FPL -45.03% 5.38%	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 <b>Percent CI</b> MAGI Parents/ Caretakers 69% to 133% FPL	\$92.79 \$41.22 \$39.75 \$41.55 \$41.55 \$23.89 \$23.93 \$23.93 \$24.63 ange in Per Ca  MAGI Adults	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer Program -20.94%	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55 \$1.64 Eligible Children (AFDC-C/BC)	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07 \$2.18 \$B 11-008 Eligible Children	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$22.03 \$23.15 Foster Care	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60 \$5.80 MAGI Pregnant Adults	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$0.13 \$0.54 \$B 11-250 Eligible Pregnant Adults 0.00% 0.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.5 \$18.6 \$17.6 \$18.5
FY 2012-13 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-7 FY 2017-18 FY 2018-19 FY 2018-19 FY 2019-20  ACUTE CARE  Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate) FY 2013-14 FY 2013-14 FY 2014-15	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02 Adults 65 and Older (OAP-A) -45.66% 11.24%	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35 \$61.90 Disabled Adults 60 to 64 (OAP-B) -51.65% -4.165%	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92 \$138.86 Disabled Individuals to \$59 (AND/AB) -47.51% \$3.40%	\$57.87 \$33.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13 \$31.31 <b>Disabled Buy-In</b> 27.13% -7.50% -5.83%	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91 MAGI Parents/ Caretakers to 68% FPL -45.03% 4.66%	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 Percent Cl MAGI Parents' Caretakers 69% to 133% FPL -44.82% -9.14% 2.50%	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38 \$23.50 \$23.93 \$24.63 ange in Per Ca  MAGI Adults  172.67% 3.57%	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer Program -20.94% -39.74%	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55 \$1.64 Eligible Children (AFDC-C/BC) -32.719/ 9.05%	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07 \$2.18 \$B 11-008 Eligible Children	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31 \$22.03 \$23.15 Foster Care -41.47% -16.62% -15.51%	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60 \$5.80 MAGI Pregnant Adults -65.23% 19.69% 59.52%	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45 \$0.13 \$0.54 \$B 11-250 Eligible Pregnant Adults 0.00% 100.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.5 \$18.6 \$17.6 \$18.5
FY 2012-13 FY 2012-13 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20  ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)  FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02 Adults 65 and Older (OAP-A) -45.66% 11.24% -73.025%	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35 \$61.90 Disabled Adults 60 to 64 (OAP-B) -51.65% -15.21% 41.16% 9.44%	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92 \$138.86 Disabled Individuals to \$59 (AND/AB) -47.51% -9.89% 3.40% 8.53%	\$57.87 \$33.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13 \$31.31 Disabled Buy-In 27.13% -7.50% -5.83% -15.95%	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91 MAGI Parents/ Caretakers to 68% FPL -45.03% \$.38% 4.66% 9.18%	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 Percent CP MAGI Parents/ Caretakers 69% to 133% FPL -44.82% -9.14% -9.14% -5.2.20%	\$92.79 \$41.22 \$39.75 \$41.55 \$41.55 \$41.55 \$32.38 \$23.50 \$23.93 \$24.63 ange in Per Ca  MAGI Adults  172.67% -55.58% 4.53%	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer Program -20.94% -39.74% -52.82% -76.67%	\$6,52 \$7.11 \$6,75 \$7.18 \$5,25 \$1.80 \$1.55 \$1.64 Eligible Children (AFDC-C/BC) -32,71% 9.05% 6.37%	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07 \$2.18 \$B 11-008 Eligible Children 0.00% 0.00% -23.47%	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31 \$22.03 \$23.15 Foster Care -41.47% -16.62% -15.51%	\$2,58 \$5,41 \$8,63 \$8,36 \$7,82 \$5,58 \$5,60 \$5,80 MAGI Pregnant Adults -65,23% [109,69% 59,52% -3,13%	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45 \$0.13 \$0.54 \$ SB 11-250 Eligible Pregnant Adults \$0.00% \$0.00% \$0.00% \$0.00% \$0.150 \$0.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.5 \$18.6 \$17.6 \$18.5 <b>TOTAL</b>
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20  ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate) FY 2013-14 FY 2013-14 FY 2014-15	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02 Adults 65 and Older (OAP-A) -45.66% 11.24%	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35 \$61.90 Disabled Adults 60 to 64 (OAP-B) -51.65% -4.165%	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92 \$138.86 Disabled Individuals to \$59 (AND/AB) -47.51% \$3.40%	\$57.87 \$33.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13 \$31.31 <b>Disabled Buy-In</b> 27.13% -7.50% -5.83%	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91 MAGI Parents/ Caretakers to 68% FPL -45.03% 4.66%	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 Percent Cl MAGI Parents' Caretakers 69% to 133% FPL -44.82% -9.14% 2.50%	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38 \$23.50 \$23.93 \$24.63 ange in Per Ca  MAGI Adults  172.67% 3.57%	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer Program -20.94% -39.74%	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55 \$1.64 Eligible Children (AFDC-C/BC) -32.719/ 9.05%	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07 \$2.18 \$B 11-008 Eligible Children	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31 \$22.03 \$23.15 Foster Care -41.47% -16.62% -15.51%	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60 \$5.80 MAGI Pregnant Adults -65.23% 19.69% 59.52%	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45 \$0.13 \$0.54 \$B 11-250 Eligible Pregnant Adults 0.00% 100.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.5 \$18.6 \$17.6 \$18.5 <b>TOTAL</b>
FY 2012-13 FY 2012-13 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20  ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)  FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02 Adults 65 and Older (OAP-A) -45.66% 17.82% -30.25% -16.18% -6.56%	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35 \$61.90 Disabled Adults 60 to 64 (OAP-B) -51.65% -4.16% 9.44% -24.77% -21.40%	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92 \$138.86 Disabled Individuals to \$59 (AND/AB) -47.51% \$3.40% \$8.53% \$21.54%	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13 \$31.31 Disabled Buy-In 27.13% -7.50% -5.83% -15.95% -16.50% -3.53%	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91 MAGI Parents/ Caretakers to 68% FPL -45.03% 4.66% 9.18% -23.81%	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 Percent Cl MAGI Parents? Caretakers 69% to 133% FPL -44.82% 2.50% -52.20% 48.58% 0.86%	\$92.79 \$41.22 \$39.75 \$41.55 \$32.38 \$23.50 \$23.93 \$24.63 ange in Per Ca  MAGI Adults  172.67% 4.53% 4.53% -22.07% -22.1742%	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.74 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer Program -20.94% -39.74% -75.82% -76.67% -75.82% 28.38%	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55 \$1.64 Eligible Children (AFDC-C/BC) -32.71% 9.05% 6.37% -26.88% -65.71%	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07 \$2.18 \$B 11-008 Eligible Children 0.00% 100.00% -23.47% -37.37% -65.09%	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$28.31 \$22.03 \$23.15 Foster Care -41.47% -15.51% -8.75% -65.78%	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60 \$5.80 MAGI Pregnant Adults -65.23% 19.69% 59.52% -3.13% -6.46%	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$3.45 \$0.13 \$0.54 \$B 11-250 Eligible Pregnant Adults 0.00% 100.00% -15.96% 20.11%	\$0.00 \$0.00	\$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.9 \$18.6 \$17.6 \$18.5 TOTAL  -45.74  -45.74  -42.74  -42.74  -42.74  -42.74
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20  ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate) FY 2013-14 FY 2014-15 FY 2014-15 FY 2016-16	\$3.38 \$3.76 \$4.43 \$3.09 \$2.59 \$2.42 \$2.04 \$1.02 Adults 65 and Older (OAP-A) -45.66% 11.24% -30.25% -10.18%	\$117.44 \$99.58 \$95.44 \$104.45 \$78.58 \$61.76 \$51.35 \$61.90 Disabled Adults 60 to 64 (OAP-B) -15.21% -4.16% 9.44% -24.77%	\$195.08 \$175.79 \$181.76 \$197.26 \$154.77 \$136.64 \$132.92 \$138.86 Disabled Individuals to \$59 (AND/AB) -47.51% \$8.53% \$8.53% \$8.53%	\$57.87 \$53.53 \$50.41 \$42.37 \$35.38 \$34.13 \$30.13 \$31.31 Disabled Buy-In 27.13% -7.50% -5.83% -15.95% -16.50%	\$23.40 \$24.66 \$25.81 \$28.18 \$21.47 \$15.28 \$12.83 \$13.91 MAGI Parents/ Carctakers to 68% FPL -45.03% 5.38% 4.66% 9.18%	\$28.74 \$15.86 \$14.41 \$14.77 \$7.06 \$10.49 \$10.58 \$9.16 \$9.92 <b>Percent CL</b> <b>MAGI Parents/</b> <b>Caretakers</b> <b>69% to 133%</b> <b>FPL</b> -44.82% -9.14% 2.50% 48.85%	\$92.79 \$41.22 \$39.75 \$41.55 \$41.55 \$32.38 \$23.50 \$23.93 \$24.63 ange in Per Ca  MAGI Adults  172.67% -55.58% -4.53% -22.07%	\$56.63 \$44.77 \$26.98 \$12.73 \$2.97 \$0.95 \$31.81 \$49.99 pita Cost Breast & Cervical Cancer Program -20.94% -39.74% -52.82% -76.67%	\$6.52 \$7.11 \$6.75 \$7.18 \$5.25 \$1.80 \$1.55 \$1.64 Eligible Children (AFDC-C/BC) -32.71% 9.05% 6.37% -26.88%	\$0.00 \$0.00 \$15.00 \$11.48 \$7.19 \$2.51 \$2.07 \$2.18 \$B 11-008 Eligible Children 0.00% 0.00% 100.00% -23.47%	\$203.89 \$170.01 \$143.64 \$131.07 \$82.73 \$22.03 \$23.15 Foster Care -41.47% -16.62% -15.51% -3.688%	\$2.58 \$5.41 \$8.63 \$8.36 \$7.82 \$5.58 \$5.60 \$5.80 \$100.69% 100.69% 59.52% -6.46%	\$0.00 \$0.00 \$4.26 \$3.58 \$4.30 \$0.13 \$0.54 \$B 11-250 Eligible Pregnant Adults 0.00% 0.00% 100.00% 1-15.96% 20.11%	\$0.00 \$0.00	\$0.00 \$0.00	\$34.1 \$30.1 \$30.2 \$31.1 \$23.9 \$18.0 \$17.6 \$18.5 TOTAL -45.74 -11.65 0.10 3.008 -23.16

**Exhibit F - ACUTE CARE - Cash-Based Actuals and Projections** 

## Estimated Increase in Rebates Attributable to the Affordable Care Act

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Percentage Change <sup>(1)</sup>
FY 2011-12	\$3,079,979	\$3,164,919	\$3,074,020	\$3,278,629	\$10,999,080	-
FY 2012-13	\$2,844,435	\$2,078,580	\$3,217,760	\$1,876,367	\$12,597,547	14.53%
FY 2013-14	\$3,665,910	\$3,333,782	\$2,724,407	\$3,309,038	\$13,033,137	3.46%
FY 2014-15	\$3,163,574	\$3,658,125	\$3,515,812	\$5,159,840	\$15,497,352	18.91%
FY 2015-16	\$4,276,352	\$4,184,873	\$4,358,848	(\$1,453,415)	\$11,366,658	-26.65%
FY 2016-17	\$7,000,143	\$9,556,025	\$8,774,817	\$6,069,395	\$31,400,380	176.25%
FY 2017-18	\$4,151,969	\$6,248,080	\$5,152,235	\$8,844,886	\$24,397,170	-22.30%
FY 2018-19	\$14,504,107	\$2,799,166	\$3,733,360	\$11,996,889	\$33,033,522	35.40%
FY 2019-20	\$5,831,641	\$6,904,987	\$4,175,006	\$7,978,285	\$24,889,919	-24.65%
FY 2020-21(1)	\$6,222,480	\$7,367,762	\$8,723,839	\$8,723,839	\$31,037,919	24.70%
FY 2021-22(1)	\$8,739,202	\$9,312,700	\$9,886,198	\$10,766,421	\$38,704,521	24.70%
FY 2022-23 <sup>(1)</sup>	\$9,473,295	\$10,094,967	\$10,716,638	\$11,670,801	\$41,955,701	8.40%

<sup>(1)</sup> The estimated growth rate for FY 2020-21 and FY 2021-22 is based on annualized growth rate between the average quarterly drug rebate of FY 2019-20 Q1 and FY 2019-20 Q2. The estimated growth rate FY 2022-23 is equal to the average price increase in 2017 of 267 brand name and generic prescription drugs used to treat chronic and acute conditions.

**Exhibit F - ACUTE CARE - Cash-Based Actuals and Projections** 

# **Total Family Planning Expenditure**

Fiscal Year	Total Reported Expenditures	General Fund	Cash Funds	Federal Funds (90% FMAP)	Change	% Change
FY 2006-07	\$7,302,900	\$730,290	\$0	\$6,572,610	-	-
FY 2007-08	\$9,682,728	\$968,273	\$0	\$8,714,455	\$2,379,827	32.59%
FY 2008-09	\$13,069,942	\$1,306,994	\$0	\$11,762,948	\$3,387,215	34.98%
FY 2009-10	\$11,628,243	\$1,162,825	\$0	\$10,465,418	(\$1,441,700)	-11.03%
FY 2010-11	\$11,529,927	\$1,152,993	\$0	\$10,376,934	(\$98,316)	-0.85%
FY 2011-12	\$9,616,143	\$961,614	\$0	\$8,654,529	(\$1,913,784)	-16.60%
FY 2012-13	\$7,948,469	\$794,847	\$0	\$7,153,622	(\$1,667,674)	-17.34%
FY 2013-14	\$9,583,635	\$958,363	\$0	\$8,625,272	\$1,635,166	20.57%
FY 2014-15	\$11,582,466	\$1,158,247	\$0	\$10,424,219	\$1,998,831	20.86%
FY 2015-16	\$11,741,307	\$1,174,131	\$0	\$10,567,176	\$158,841	1.37%
FY 2016-17	\$4,933,998	\$474,497	\$18,903	\$4,440,598	(\$6,807,309)	-57.98%
FY 2017-18	\$16,066,065	\$1,587,314	\$19,292	\$14,459,459	\$11,132,067	225.62%
FY 2018-19	\$21,547,443	\$2,135,452	\$19,292	\$19,392,699	\$5,481,378	34.12%
FY 2019-20	\$17,101,730	\$1,690,881	\$19,292	\$15,391,557	(\$4,445,713)	-20.63%
FY 2020-21 Estimate	\$19,882,471	\$1,988,247	\$0	\$17,894,224	\$2,780,741	16.26%
FY 2021-22 Estimate	\$20,150,884	\$2,015,088	\$0	\$18,135,796	\$268,413	1.35%
FY 2022-23 Estimate	\$22,425,919	\$2,242,592	\$0	\$20,183,327	\$2,275,035	11.29%

<sup>1.</sup> FY 2016-17 actuals are currently understated as a result of an over payment of drug rebates.

<sup>2.</sup> Total reported expenditures for FY 2017-18 are restated due to previous reporting errors.

**Exhibit F - ACUTE CARE - Cash-Based Actuals and Projections** 

,	Total Expenditure for India	n Health Service	
Fiscal Year	Total Reported Expenditures: 100% FF	Change	% Change
FY 2005-06	\$840,371	-	-
FY 2006-07	\$899,521	\$59,150	7.04%
FY 2007-08	\$1,061,989	\$162,468	18.06%
FY 2008-09	\$1,534,327	\$472,338	44.48%
FY 2009-10 (DA)	\$1,536,532	\$2,205	0.14%
FY 2010-11 (DA)	\$1,672,353	\$135,821	8.84%
FY 2011-12	\$1,434,711	(\$237,642)	-14.21%
FY 2012-13	\$1,238,524	(\$196,187)	-13.67%
FY 2013-14	\$1,450,187	\$211,663	17.09%
FY 2014-15	\$4,281,827	\$2,831,640	195.26%
FY 2015-16	\$4,286,478	\$4,651	0.11%
FY 2016-17	\$3,571,625	(\$714,853)	-16.68%
FY 2017-18	\$5,983,465	\$2,411,840	67.53%
FY 2018-19	\$5,184,197	(\$799,268)	-13.36%
FY 2019-20	\$5,464,611	\$280,414	5.41%
FY 2020-21 Estimated Total	\$5,831,668	\$367,057	6.72%
FY 2021-22 Estimated Total	\$6,147,162	\$315,493	5.41%
FY 2022-23 Estimated Total		\$332,561	5.41%

<sup>1.</sup> Increase in expenditure in FY 2017-18 is primarily due to better tracking of Indian Health Services expenditure in the interChange.

<sup>2.</sup> Expenditure estimate includes anticipated savings to Acute Care from better coordination of services for clients eligible under Indian Health Services, which results in higher expenditure available for 100% federal match.

					FY	2015-16 July-E	ecember CORI	E Total Actuals								
ACUTE CARE	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	Eligible Children (AFDC-C/BC)		Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Physician Services & EPSDT	\$2,033,518	\$5,183,586	\$35,539,652	\$3,209,282	\$49,072,812	\$19,886,884	\$104,313,382	\$217,604	\$101,289,345		\$7,041,532	\$19,124,789	\$2,091,223	\$2,792,782	\$7,950	\$361,554,879
Emergency Transportation	\$824,476	\$557,785	\$2,576,186	\$97,511	\$1,334,536	\$300,871	\$4,681,067	\$648	\$1,362,799	\$117,835	\$231,931	\$303,669	\$24,433	\$52,457	\$27,722	\$12,493,926
Non-emergency Medical Transportation	\$1,589,776	\$866,318	\$3,302,586	\$79,912	\$494,929	\$75,641	\$1,393,587	\$3,034	\$562,865	\$52,412	\$123,323	\$64,149	\$2,231	\$474	\$36,746	\$8,647,983
Dental Services	\$5,197,986	\$1,780,025	\$11,056,147	\$1,207,633	\$18,599,543	\$8,343,521	\$32,898,633	\$37,720	\$73,625,842	\$12,497,355	\$3,350,957	\$1,265,350	\$115,841	\$240	\$1,177	\$169,977,970
Family Planning	\$185	\$0	\$14,751	\$2,057	\$214,720	\$102,535	\$228,273	\$0	\$116,227	\$20,082	\$10,092	\$35,750	\$1,783	\$459	\$0	\$746,914
Health Maintenance Organizations	\$3,792,103	\$5,588,084	\$31,823,902	\$1,333,193	\$37,693,431	\$18,754,609	\$55,978,852	\$32,182	\$19,636,631	\$2,156,843	\$229,115	\$6,137,172	\$597,340	\$0	\$0	\$183,753,457
Inpatient Hospitals	\$8,525,862	\$7,905,678 \$4,039,566	\$44,125,956 \$30,933,291	\$3,215,856 \$2,490,309	\$26,498,652 \$47,094,681	\$10,682,178 \$19,428,113	\$123,180,088	\$19,913 \$109,276	\$55,376,506 \$54,383,208	\$2,402,485 \$6,697,357	\$3,049,514 \$3,750,425	\$32,523,922 \$5,717,064	\$3,433,161 \$542,330	\$15,494,261 \$991,150	\$13,631 (\$693)	\$336,447,663 \$285,873,013
Outpatient Hospitals Lab & X-Ray	\$1,476,774 \$233,796	\$4,039,366	\$4,792,017	\$2,490,309	\$12,796,155	\$4,873,255	\$108,220,162 \$20,276,496	\$29,522	\$5,511,646	\$6,697,337	\$811,676	\$4,283,091	\$342,330 \$458,559	\$80,490	(\$90)	\$285,873,013 \$55,894,264
Durable Medical Equipment	\$10.912.493	\$4,040,538	\$32,017,568	\$942,562	\$4,117,584	\$1,395,845	\$11,789,966	\$25,411	\$10,545,429	\$930,356	\$2,662,811	\$161,971	\$30,055	\$1,777	\$28,712	\$79,603,078
Prescription Drugs	\$3,109,621	\$11,546,421	\$82,301,189	\$5,458,490	\$53,014,649	\$22,150,986	\$135,853,730	\$124,513	\$52,732,148	\$7,990,992	\$10,408,231	\$3,385,380	\$402,880	\$395	\$1,473	\$388.481.098
Drug Rebate	(\$1,651,136)	(\$6,130,882)	(\$43,700,020)	(\$2,898,331)	(\$28,149,547)	(\$11,761,659)	(\$72,135,174)	(\$66,113)	(\$27,999,546)	(\$4,243,031)	(\$5,526,529)	(\$1,797,558)	(\$213,920)	(\$210)	(\$782)	(\$206,274,438)
Rural Health Centers	\$32,831	\$130,521	\$642,538	\$64,308	\$1,635,088	\$814,166	\$2,295,000	\$682	\$3,934,167	\$399,245	\$174,180	\$324,606	\$29,550	\$5,092	\$0	\$10,481,974
Federally Qualified Health Centers	\$402,314	\$697,115	\$4,285,365	\$234,004	\$9,455,425	\$4,148,507	\$20,972,618	\$26,276	\$25,888,885	\$2,373,844	\$874,085	\$4,687,562	\$395,028	\$173,115	\$647	\$74,614,790
Co-Insurance (Title XVIII-Medicare)	\$13,461,566	\$2,414,632	\$9,829,933	\$1,006,633	\$1,373,401	\$17,389	\$171,146	\$3,008	\$9,608	\$1,073	\$11,396	\$30,451	\$19	\$1,046	\$6,354,416	\$34,685,717
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	,	\$0		\$0	\$0	\$0	\$0	\$0	\$1,255,515
Administrative Service Organizations - Services	\$53,644	\$95,686	\$1,756,128	\$10,864	\$251,549	\$54,698	\$156,248	\$0	\$568,256	\$0	\$41,156	\$145,766	\$56,902	\$0	\$247	\$3,191,144
Other Medical Services	\$125	\$93	\$682	\$38	\$481	\$202	\$1,141	\$3	\$750	\$84	\$72	\$142	\$15	\$36	\$12	\$3,876
Acute Home Health	\$2,902,569	\$1,385,442	\$6,532,763	\$192,324	\$610,513	\$178,281	\$2,449,807	\$544	\$1,007,039	\$23,396	\$455,268	\$101,429	\$15,490	\$0	\$0	\$15,854,865
Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$52,898,503	\$40,828,331	\$257,830,634	\$16,978,583	\$236,108,602	\$99,446,022	\$552,725,022	\$1,819,738	\$378,551,805	\$41,858,856	\$27,699,235	\$76,494,705	\$7,982,920	\$19,593,564	\$6,471,168	\$1,817,287,688
Caseload	42,101	10,380	69,866	7,144	166,897	83,081	301,795	334	462,670	58,291	19,793	14,186	1,664	2,637	31,456	1,272,294
Half -Year Per Capita	\$1,256.47	\$3,933.49	\$3,690.38	\$2,376.62	\$1,414.70	\$1,196.97	\$1,831.46	\$5,442.89	\$818.19	\$718.10	\$1,399.48	\$5,392.27	\$4,798.39	\$7,431.19	\$205.72	\$1,428.36
					FY	2015-16 Janua	ry-June CORE	Total Actuals								
								I otal /ictuals								
	Adults 65 and	Disabled Adults	Disabled				ing dunc contin						SD 11 250	Non Citizons		
ACUTE CARE	Adults 65 and Older	Disabled Adults 60 to 64	Disabled Individuals to 59	Disabled Buy-	MAGI Parents/ Caretakers to	MAGI Parents/ Caretakers 69%	MAGI Adults	Breast & Cervical Cancer	Eligible Children	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant	Non-Citizens- Emergency	Partial Dual Eligibles	TOTAL
	Older (OAP-A)	60 to 64 (OAP-B)	Individuals to 59 (AND/AB)	In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	(AFDC-C/BC)	Eligible Children		Adults	Eligible Pregnant Adults	Emergency Services	Eligibles	
Physician Services & EPSDT	Older (OAP-A) \$2,136,954	60 to 64 (OAP-B) \$5,348,889	Individuals to 59 (AND/AB) \$36,858,336	In \$3,241,713	MAGI Parents/ Caretakers to 68% FPL \$50,076,939	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946	MAGI Adults \$114,151,218	Breast & Cervical Cancer Program \$245,946	(AFDC-C/BC) \$108,185,897	Eligible Children \$9,866,976	\$7,495,898	Adults \$19,401,101	Eligible Pregnant Adults \$2,364,616	Emergency Services \$2,747,335	Eligibles \$13	\$385,493,777
Physician Services & EPSDT Emergency Transportation	Older (OAP-A) \$2,136,954 \$1,175,570	60 to 64 (OAP-B) \$5,348,889 \$829,017	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207	\$3,241,713 \$107,120	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175	MAGI Adults \$114,151,218 \$7,398,839	Breast & Cervical Cancer Program \$245,946 \$4,286	(AFDC-C/BC) \$108,185,897 \$2,274,140	\$9,866,976 \$185,006	\$7,495,898 \$313,873	Adults \$19,401,101 \$424,275	Eligible Pregnant Adults \$2,364,616 \$35,815	Emergency Services \$2,747,335 \$65,430	\$13 \$6,336	\$385,493,777 \$19,141,430
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029	\$3,241,713 \$107,120 \$83,791	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835	(AFDC-C/BC) \$108,185,897 \$2,274,140 \$778,826	\$9,866,976 \$185,006 \$62,931	\$7,495,898 \$313,873 \$148,885	\$19,401,101 \$424,275 \$76,858	### Register   ### Re	Services \$2,747,335 \$65,430 \$385	\$13 \$6,336 (\$392)	\$385,493,777 \$19,141,430 \$9,824,399
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989	\$3,241,713 \$107,120 \$83,791 \$675,122	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835 \$37,126	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173	\$9,866,976 \$185,006 \$62,931 \$12,028,188	\$7,495,898 \$313,873 \$148,885 \$3,410,937	\$19,401,101 \$424,275 \$76,858 \$1,152,679	\$2,364,616 \$35,815 \$1,473 \$136,238	Emergency Services \$2,747,335 \$65,430 \$385 \$105	\$13 \$6,336 (\$392) \$2,611	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835 \$37,126 \$0	(AFDC-C/BC) \$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854	\$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0	\$13 \$6,336 (\$392) \$2,611 \$0	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151	\$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226	\$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0	\$13 \$6,336 (\$392) \$2,611 \$0 \$0	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122	(AFDC-C/BC) \$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825	\$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452	Eligible Pregnant Adults  \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$0 \$15,542,187	\$13 \$6,336 (\$392) \$2,611 \$0 (\$3,558)	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$1,538,202	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$128,456	(AFDC-C/BC) \$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003	Eligible Children  \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801	Adults  \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$0 \$15,542,187 \$1,156,186	\$13 \$6,336 (\$392) \$2,611 \$0 \$0 (\$3,558) \$1,904	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$1,538,202 \$247,435	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$330,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$128,456 \$33,414	(AFDC-C/BC) \$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$6,212,964	Eligible Children  \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$748,385	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945	Adults \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$0 \$15,542,187 \$1,156,186 \$86,080	\$13 \$6,336 (\$392) \$2,611 \$0 (\$3,558) \$1,904	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$15,38,202 \$247,435 \$11,346,365	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472 \$3,862,034	Individuals to 59 (AND/AB) \$36,858.336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,019 \$4,900,093 \$33,924,411	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$892,301	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$4,466,275	MAGI Parents/ Caretakers 69% to 133% FPL \$23,71,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519 \$1,827,405	MAGI Adults \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$14,155,854	Breast & Cervical Cancer Program \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$128,456 \$33,414 \$27,463	(AFDC-C/BC) \$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$6,212,964 \$12,669,966	Eligible Children  \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$748,385 \$1,108,375	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$8\$8,945 \$2,826,527	Adults \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643	\$13 \$6,336 (\$392) \$2,611 \$0 (\$3,558) \$1,904 \$133 \$166,840	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,66,881 \$1,538,202 \$247,435 \$11,346,365 \$3,117,878	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093 \$33,924,411 \$91,851,848	In \$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$892,301 \$5,942,198	MAGI Parents/ Caretakers to 68% FPL 550,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$4,466,275 \$56,960,566	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$20,465,183 \$5,555,519 \$1,827,405 \$26,819,336	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$141,155,854 \$160,808,709	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$128,456 \$33,414 \$27,463 \$199,546	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$6,212,964 \$12,669,966 \$61,368,815	Eligible Children  \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$748,385 \$1,108,375 \$9,540,470	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$3,980,852	Eligible Pregnant Adults \$2,364,616 \$335,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130	\$13 \$6,336 (\$392) \$2,611 \$0 (\$3,558) \$1,904 \$133 \$166,840 \$536	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$18,47,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$1,538,020 \$247,435 \$1,1346,365 \$3,117,878 \$3,117,878 \$3,117,878	60 to 64 (OAP-B) \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491 \$(\$5,965,880)	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659)	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$892,301 \$5,942,198 \$(\$2,688,313)	MAGI Parents/ Caretakers to 68% FPL \$50,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,500 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$4,466,275 \$4,466,275 \$6,960,566 \$(\$25,741,271)	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519 \$1,827,405 \$26,819,336 \$(512,235,118)	MAGI Adults  \$114,151,218  \$7,398,839  \$1,803,835  \$31,288,772  \$686,662  \$67,899,601  \$136,457,298  \$104,658,055  \$22,606,208  \$14,155,854  \$160,808,709  \$(\$73,237,412)	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$558,122 \$128,456 \$33,414 \$27,463 \$199,546 (\$92,685)	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$6,212,964 \$12,669,966 \$61,368,815 \$62,7912,999	Eligible Children  \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$748,385 \$1,108,375 \$9,540,470 \$(\$4,347,858)	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 (\$5,354,679)	Adults \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$5,716,478 \$4,134,029 \$186,658 \$3,980,852 \$(\$1,812,094)	Eligible Pregnant Adults  \$2,364,616  \$35,815 \$1,473  \$136,238 \$9,922  \$837,731  \$3,821,630  \$6362,154  \$464,387  \$21,347  \$393,902  (\$176,524)	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130 \$477	\$13\$ \$6,336 (\$392) \$2,611 \$0 \$0 \$(\$3,558) \$1,904 \$133 \$166,840 \$536 (\$203)	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 \$202,605,248)
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$9,766,881 \$1,538,202 \$247,435 \$11,346,365 \$3,117,878 (S1,400,506) \$23,787	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,373,3648 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491 (\$5,955,880) \$116,682	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,019 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182	In \$3,241,713 \$107,120 \$83,791 \$675,122 \$3,349,136 \$2,635,997 \$336,816 \$892,301 \$5,942,198 \$2,688,313 \$2,533,942,198	MAGI Parents/ Caretakers to 68% FPL 550,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$4,466,275 \$56,960,566 (\$25,741,271) \$1,446,616	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519 \$1,827,405 \$26,819,336 (\$1,235,118) \$8,44,766	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,722 \$686,662 \$67,899,601 \$136,457,201 \$136,457,201 \$104,658,035 \$22,606,208 \$14,155,854 \$160,808,709 \$(\$73,237,412) \$2,480,550	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$1128,456 \$33,414 \$27,463 \$199,546 \$(\$92,685) \$(\$1,493)	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$62,12,64 \$12,669,966 \$61,368,815 \$27,912,999 \$3,868,429	Eligible Children \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$5,789,276 \$5,1108,375 \$9,540,470 \$5,347,385 \$3,447,385 \$3,447,885	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 (\$5,354,679) \$178,101	Adults \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$3,980,852 \$(\$1,812,094) \$333,384	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$33821,630 \$632,154 \$464,387 \$21,347 \$3393,902 (\$176,524) \$20,802	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130 \$53,534	\$13 \$6,336 (\$392) \$2,611 \$0 (\$3,558) \$1,904 \$133 \$166,840 \$536	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Perscription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers	Older (OAP-A) \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$1,538,202 \$247,435 \$11,346,365 \$3,117,878 (\$1,400,506) \$23,787 \$368,202	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472 \$13,139,491 (\$5,965,880) \$116,682 \$660,220	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182 \$3,982,722	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$92,310 \$5,942,198 \$2,688,313 \$25,332 \$157,334	MAGI Parents/ Caretakers to 68% FPL 55,876,339 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$50,836,607 \$12,905,701 \$14,466,275 \$56,960,566 \$25,741,271 \$1,446,615 \$8,653,754	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$5301,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519 \$1,827,405 \$26,819,336 (\$12,235,118) \$44,361,279	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$141,155,854 \$160,808,709 \$(\$73,237,412) \$2,480,550 \$20,935,703	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$558,122 \$128,456 \$33,414 \$27,463 \$199,546 (\$92,685) \$1,493 \$20,583	\$108,185,897 \$2,274,140 \$778,826 \$72,886,173 \$224,854 \$21,248,151 \$58,961,821 \$59,573,003 \$6,212,964 \$12,669,966 \$61,368,815 \$27,912,999 \$23,925,420	Eligible Children \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$56,789,276 \$748,385 \$110,307,355 \$5,540,470 \$(\$4,347,858) \$2,00,039	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 (\$5,354,679) \$178,101	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,7164,478 \$4,134,029 \$186,658 \$3,980,852 \$(51,812,094) \$333,884 \$4,461,111	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 \$(\$176,524) \$20,802 \$386,479	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130 \$47,156,186	\$13 \$6,336 (\$392) \$2,611 \$0 \$0 \$133 \$133 \$16,840 \$536 \$2233 \$0 \$6,348 \$1,904 \$133 \$16,840 \$1,904 \$1,	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182 \$71,201,370
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicary)	Older (OAP-A) \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$1,538,202 \$247,435 \$11,346,365 \$3,117,878 \$(5,400,506) \$23,787 \$368,202 \$16,148,720	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,87,33,548 \$4,670,029 \$779,472 \$3,862,034 \$13,139,491 \$(\$5,965,580) \$116,682 \$2,858,586	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182 \$3,982,722 \$11,212,033	In \$3,241,713 \$107,120 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$892,301 \$5,942,198 \$(25,688,813) \$25,332 \$157,334 \$1,151,483	MAGI Parents/ Caretakers to 68% FPL 550,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,995,970 \$4,466,275 \$50,900,566 \$25,741,271 \$1,446,616 \$8,653,754 \$1,599,187	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,195 \$1,827,405 \$26,819,336 \$1,827,405 \$26,819,336 \$1,827,405 \$26,819,336 \$1,827,405 \$26,819,336 \$1,827,405 \$26,819,336 \$1,827,405 \$26,819,336 \$1,827,405 \$26,819,336 \$1,827,405 \$26,819,336 \$1,765 \$1,765 \$1,765	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$14,155,854 \$160,808,709 \$73,237,412 \$2,480,550 \$20,935,703 \$189,252	Breast & Cervical Cancer Program  \$245,946  \$4,286  \$2,835  \$37,126  \$0  \$24,718  \$588,122  \$128,456  \$33,414  \$27,463  \$199,546  (\$92,685)  \$1,493  \$20,883  \$162	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$6,212,964 \$12,669,966 \$61,368,815 \$62,7912,999 \$3,868,429 \$1,010	Eligible Children \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,403 \$6,789,276 \$748,385 \$1,108,375 \$54,40,470 \$(54,347,858) \$341,674 \$2,080,039 \$1,139	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 \$(53,534,679) \$178,101 \$767,233 \$9,109	Adults \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$33,380,852 \$(51,812,094) \$333,384 \$4,461,111 \$48,488	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 \$(3176,524) \$20,802 \$386,479 \$335	Emergency Services \$2,747,335 \$65,430 \$385 \$0 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130 \$53,384 \$171,639	\$13 \$6,336 \$(392) \$2,611 \$0 \$(3392) \$2,611 \$0 \$(53,558) \$1,904 \$133 \$166,840 \$536 \$(5203) \$0 \$(5348) \$5,7946,737 \$1,7946,737 \$	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 \$(202,605,248) \$10,243,182 \$71,201,370 \$41,326,950
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Perscription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers	Older (OAP-A) \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$1,538,202 \$247,435 \$11,346,365 \$3,117,878 (\$1,400,506) \$23,787 \$368,202	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472 \$13,139,491 (\$5,965,880) \$116,682 \$660,220	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182 \$3,982,722	\$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$92,310 \$5,942,198 \$2,688,313 \$25,332 \$157,334	MAGI Parents/ Caretakers to 68% FPL 55,876,339 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$50,836,607 \$12,905,701 \$14,466,275 \$56,960,566 \$25,741,271 \$1,446,615 \$8,653,754	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$5301,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519 \$1,827,405 \$26,819,336 (\$12,235,118) \$44,361,279	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$141,155,854 \$160,808,709 \$(\$73,237,412) \$2,480,550 \$20,935,703	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$558,122 \$128,456 \$33,414 \$27,463 \$199,546 (\$92,685) \$1,493 \$20,583	\$108,185,897 \$2,274,140 \$778,826 \$72,886,173 \$224,854 \$21,248,151 \$58,961,821 \$59,573,003 \$6,212,964 \$12,669,966 \$61,368,815 \$27,912,999 \$23,925,420	Eligible Children \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,403 \$6,789,276 \$748,385 \$1,108,375 \$54,40,470 \$(54,347,858) \$341,674 \$2,080,039 \$1,139	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 (\$5,354,679) \$178,101	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,7164,478 \$4,134,029 \$186,658 \$3,980,852 \$(51,812,094) \$333,884 \$4,461,111	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 \$(\$176,524) \$20,802 \$386,479	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130 \$47,156,186	\$13 \$6,336 (\$392) \$2,611 \$0 \$0 \$133 \$133 \$16,840 \$536 \$2233 \$0 \$6,348 \$1,904 \$133 \$16,840 \$1,904 \$1,	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182 \$71,201,370
Physician Services & EPSDT  Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$2,47,435 \$11,346,320 \$2,47,435 \$11,346,320 \$2,3787 \$3,68,202 \$16,148,720 \$0	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,368 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491 \$5,965,880) \$116,682 \$660,220 \$2,858,586 \$0	Individuals to 59 (AND/AB) \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182 \$3,982,722 \$11,212,033	In \$3,241,713 \$107,120 \$83,791 \$107,120 \$83,791 \$675,122 \$83,491 \$655,122 \$3,549,136 \$2,635,997 \$336,816 \$892,301 \$5,942,198 \$(\$2,688,313) \$25,332 \$157,334 \$1,315,483 \$0	MAGI Parents/ Caretakers to 68% FPL 550,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$4,466,275 \$56,960,566 \$25,741,271) \$1,4466,275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,566 \$25,741,271) \$1,446,6275 \$56,960,760 \$1,446,6275 \$1,569,187 \$	MAGI Parents/ Caretakers 69% to 133% FPL  \$23,37% FPL  \$23,37% FPL  \$23,37% FPL  \$23,37% FPL  \$3,30,175  \$117,919  \$8,285,053  \$262,695  \$18,973,251  \$12,227,931  \$20,465,183  \$5,555,519  \$1,827,405  \$26,819,336  (\$12,235,118)  \$844,766  \$4,631,279  \$17,658  \$50	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$11,803,835 \$31,288,722 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$14,155,854 \$160,808,709 \$(\$73,237,412) \$2,480,520 \$20,935,703 \$189,252 \$0	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$1128,456 \$33,414 \$27,463 \$1199,546 (\$92,685) \$1,493 \$20,583 \$162 \$1,335,684	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$61,368,815 \$(\$27,912,999) \$3,868,429 \$33,925,420 \$10,103 \$1	Eligible Children \$9,866,976 \$1185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$748,385 \$1,108,375 \$9,540,470 \$(\$4,347,858) \$334,674 \$2,080,039 \$1,139 \$0	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 (\$5,354,679) \$178,010 \$767,233 \$9,109 \$0	Adults  \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$3,980,852 \$(\$1,812,094) \$333,384 \$4,461,111 \$44,488 \$50	Eligible Pregnant Adults  \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 (\$176,524) \$20,802 \$386,479 \$555	Emergency Services \$2,747,335 \$65,430 \$385 \$10,55 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$13,04 \$171,639 \$258 \$258 \$328 \$328 \$328 \$338 \$338 \$338 \$438 \$338 \$338 \$438 \$338 \$438 \$338 \$438 \$338 \$3	\$13 \$6,336 \$6,336 \$6,336 \$6,336 \$6,34	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$18,47,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182 \$71,201,370 \$41,326,950
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment Perscription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicare)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services	Older (OAP-A) \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$11,538,202 \$247,435 \$11,346,365 \$3,117,878 (\$1,400,506) \$23,787 \$368,202 \$16,148,720 \$36,972	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491 \$5,965,880 \$116,682 \$660,220 \$2,858,586	Individuals to 59 (AND/AB) \$36,858,336 \$35,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182 \$5,982,722 \$11,212,033 \$0 \$1,210,326	In \$3,241,713 \$107,120 \$107,120 \$83,791 \$675,122 \$83,44 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$892,301 \$5,942,198 \$(\$2,688,313) \$25,332 \$15,73,34 \$1,315,483 \$00 \$7,487	MAGI Parents/ Caretakers to 68% FPL   \$50,876,339   \$1,881,341   \$520,100   \$15,490,571   \$501,509   \$30,664,666   \$28,612,925   \$50,836,607   \$12,905,701   \$4,466,275   \$56,960,566   \$25,741,271)   \$1,446,616   \$8,653,754   \$1,569,187   \$1,569,187   \$1,569,187   \$1,73,368	MAGI Parents/ Caretakers 69% to 133% FPL 523,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519 \$18,27,405 \$26,819,336 (\$12,235,118) \$844,766 \$4,631,279 \$17,658 \$0 \$37,697 \$4	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$141,155,854 \$160,808,709 \$(\$73,237,412) \$2,480,550 \$20,935,703 \$189,252 \$107,687	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$128,456 \$33,414 \$27,463 \$199,546 (\$92,685) \$1,493 \$20,583 \$162 \$1,335,684 \$1,335,684	\$108,185,897 \$2,274,140 \$178,224,854 \$72,886,173 \$224,854 \$21,248,151 \$58,961,825 \$58,961,825 \$57,30,03 \$6,212,964 \$12,669,966 \$61,368,815 \$62,7912,999 \$3,868,429 \$33,925,420 \$10,103 \$931,642	Eligible Children \$9,866,976 \$185,006 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,409 \$2,777,403 \$6,789,276 \$748,385 \$1,108,375 \$9,540,470 \$1,084,347,858 \$341,674 \$2,080,039 \$1,139 \$0 \$0 \$0 \$50 \$(\$1)	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,640 \$3,976,840 \$858,945 \$2,826,527 \$11,797,000 \$11,797,000 \$173,101 \$176,233 \$9,109 \$28,365	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$3,380,852 \$(\$1,812,094) \$333,384 \$4,461,111 \$48,488 \$00 \$10,0463	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 \$(\$176,524) \$20,802 \$386,479 \$335 \$0 \$39,217	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130 \$47,156,186 \$47,156,186 \$47,156,186 \$5,384 \$171,639 \$258 \$0	\$13 \$6,336 (\$392) \$2,611 \$0 \$0 \$5,358 (\$3,558) \$1,904 \$133 \$166,840 \$1,536 (\$203) \$0 (\$3,589) \$5,946,737 \$0 \$1,71	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182 \$71,201,370 \$41,326,950 \$1,335,684 \$2,199,343
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicary)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services  Other Medical Services	Older (OAP-A) \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$3,43 \$5,655,692 \$9,766,881 \$1,538,202 \$247,435 \$11,346,365 \$3,117,878 \$3,147,878 \$3,68,202 \$16,148,720 \$16,148,720 \$36,972 \$36,972 \$36,972 \$36,972 \$36,972 \$36,972	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$11,475,645 \$992 \$1,4775,645 \$6,640,388 \$8,8733,3648 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491 \$5,965,5880 \$116,682 \$660,220 \$2,858,568 \$0 \$65,948 \$5,955,948	Individuals to 59 (AND/AB) \$36,858.336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,019 \$4,900,093 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182 \$3,982,722 \$11,212,033 \$0 \$1,210,326 (\$22)	In \$3,241,713 \$107,120 \$83,791 \$675,122 \$834 \$1,906,127 \$336,816 \$892,301 \$5,942,198 \$1,956,137,376,816 \$892,301 \$5,942,198 \$1,315,483 \$0 \$7,487 \$0	MAGI Parents/ Caretakers to 68% FPL 550,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$4,466,275 \$56,960,566 \$(35,741,271) \$1,446,616 \$8,653,754 \$1,569,96,566 \$173,368 \$173,368 \$(516)	MAGI Parents/ Caretakers 69% to 133% FPL \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$20,465,183 \$5,555,519 \$1,827,405 \$26,819,336 (\$12,235,118) \$44,766 \$44,631,279 \$17,658 \$37,697	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$104,155,854 \$160,808,709 \$(573,237,412) \$2,480,550 \$20,935,703 \$189,252 \$0 \$107,687 \$13	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$128,456 \$122,453 \$199,546 \$27,463 \$199,546 \$20,583 \$162 \$1,335,684 \$0 \$1	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,113 \$58,961,825 \$59,573,003 \$6,212,904 \$12,669,966 \$61,368,815 \$27,912,904 \$12,669,966 \$61,368,815 \$27,912,904 \$10,103 \$0,000 \$10,103 \$0,000 \$10,103 \$0,000 \$10,103 \$0,000 \$10,103 \$10,1	Eligible Children \$9,866,976 \$185,006 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$5,789,276 \$5,1108,375 \$9,540,470 (\$4,347,858) \$1,108,375 \$0,500,39 \$1,139 \$0 \$0 \$0,01 \$1,139 \$0 \$1,139	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 \$(55,354,679) \$178,101 \$767,233 \$9,109 \$0 \$28,365 \$0 \$28,365 \$0 \$0 \$28,365 \$0 \$0 \$28,365 \$0 \$0 \$0 \$28,365 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Adults  \$19,401,101 \$424,275 \$76,888 \$1,152,679 \$66,023 \$74,889,226 \$32,399,452 \$6,716,478 \$41,34,029 \$186,658 \$3,980,852 \$(51,812,094) \$333,384 \$4,461,111 \$48,488 \$0 \$100,463 \$100,463	Eligible Pregnant Adults  \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 \$386,479 \$20,802 \$386,479 \$50,802	Emergency Services \$2,747,335 \$65,430 \$385 \$0 \$10,542,187 \$1,156,186 \$86,080 \$13,0 \$13,0 \$13,0 \$171,639 \$25,384 \$171,639 \$25,584 \$171,639 \$25,584 \$171,639 \$25,584 \$171,639 \$25,584 \$171,639 \$25,584 \$171,639 \$25,584 \$171,639 \$25,584 \$171,639 \$25,584 \$25,58	\$13 \$6,336 \$6,336 \$6,346 \$6,340 \$6,345 \$6,346 \$6,340 \$6,345 \$6,346 \$6,345 \$6,34	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182 \$71,201,370 \$41,326,950 \$1,335,684 \$2,199,343
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicare)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services  Other Medical Services  Acute Home Health	Older (OAP-A)  \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,698 \$1,538,202 \$247,435 \$1,134,635 \$3,117,878 (\$1,400,500) \$23,787 \$368,202 \$16,148,720 \$0 \$36,972 \$2,138,232	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$8,733,648 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491 (\$5,965,880) \$116,682 \$660,220 \$2,858,586 \$65,948 \$65,948	Individuals to 59 (AND/AB)  \$36,858,336  \$3,910,207  \$3,667,029  \$8,960,989  \$32,234  \$37,054,466  \$46,570,133  \$32,487,919  \$4,900,931  \$31,924,411  \$91,851,848  (\$41,639,659)  \$556,182  \$3,982,722  \$11,212,033  \$0  \$1,210,326  \$4,346,933	In \$3,241,713 \$107,120 \$83,791 \$107,120 \$83,791 \$675,122 \$83,491 \$655,122 \$3,549,136 \$2,635,997 \$336,816 \$892,301 \$5,942,198 \$(\$2,688,313) \$25,332 \$157,334 \$1,315,483 \$0 \$7,487 \$00 \$130,774	MAGI Parents/ Caretakers to 68% FPL 550,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$4,466,277 \$556,960,566 \$25,741,271) \$1,446,616 \$8,653,754 \$1,569,187 \$0 \$173,368 \$173,368 \$173,368 \$173,368 \$12,075 \$12,075 \$1,075	MAGI Parents/ Caretakers 69% to 133% FPL  \$23,371.P4  \$5330,175  \$117,919  \$8,285,053  \$262,695  \$18,973,251  \$12,227,931  \$20,465,183  \$5,555,519  \$1,827,405  \$26,819,336  \$1,227,405  \$26,819,336  \$1,227,405  \$26,819,336  \$1,2235,118)  \$844,766  \$4,631,279  \$17,658  \$0  \$37,697  \$1,697	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,722 \$686,662 \$67,899,601 \$136,457,208 \$104,658,035 \$22,606,208 \$14,155,854 \$160,808,709 \$3,237,412 \$2,480,550 \$20,935,703 \$189,252 \$0 \$107,687 \$107,687	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$224,718 \$58,122 \$128,456 \$33,414 \$27,463 \$1199,546 (\$592,685) \$1,493 \$20,583 \$162 \$1,335,684 \$0 \$1 \$510	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$6,212,964 \$12,669,966 \$61,368,815 \$27,912,999 \$3,868,429 \$3,303,420 \$3,925,420 \$3,91,642 \$3,91,642 \$3,91,642	Eligible Children  \$9,866,976 \$1185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$7483,385 \$1,108,375 \$9,540,470 \$4,474,858) \$31,108,375 \$2,080,039 \$1,139 \$0 \$0 \$1,139	\$7,495,898 \$313,873 \$148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 (\$5,354,679) \$178,101 \$767,233 \$9,109 \$0 \$28,365 \$0 \$228,365	Adults  \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$3,980,852 \$(\$1,812,094) \$4,461,111 \$44,488 \$0 \$100,463 \$(\$2) \$119,737	Eligible Pregnant Adults  \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 (\$176,524) \$20,802 \$386,479 \$35 \$0 \$33,217 \$0 \$33,217	Emergency Services \$2,747,335 \$65,430 \$385 \$10,55 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$13,00 \$14,039 \$15,542,187 \$1,156,186 \$13,00 \$	\$13 \$6,336 \$6,336 \$6,336 \$6,336 \$6,348 \$6,358 \$6,358 \$6,346 \$6,340 \$6,346 \$6,340 \$6,346 \$6,340 \$6,348 \$6,34	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$18,47,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182 \$71,201,370 \$41,326,950 \$1,335,684 \$2,199,343 \$12,341,049
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Perscription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services Acute Home Health Presumptive Eligibility	Older (OAP-A)  \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$9,766,881 \$1,338,202 \$247,435 \$1,338,202 \$247,435 \$3,117,878 \$(\$1,400,506) \$23,787 \$23,877 \$368,202 \$16,148,720 \$36,972 \$2 \$2,138,232 \$2,138,232 \$51,318,232	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$4,770,029 \$749,472 \$3,862,034 \$13,139,491 (\$5,965,880) \$116,682 \$660,220 \$2,858,586 \$0 \$120,5313	Individuals to 59 (AND/AB)  \$36,858,336 \$3,910,207 \$3,667,029 \$8,960,989 \$32,234 \$37,054,466 \$46,570,133 \$32,487,919 \$4,900,993 \$33,924,411 \$91,851,848 (\$41,639,659) \$556,182 \$3,982,722 \$11,212,033 \$1,210,326 \$2,23 \$4,346,933 \$4,346,933	In \$3,241,713 \$107,120 \$107,120 \$83,791 \$675,122 \$83,44 \$1,906,172 \$3,549,136 \$2,635,997 \$336,816 \$892,301 \$5,542,198 \$(\$2,688,313) \$25,332 \$15,73,34 \$1,315,483 \$0 \$57,487 \$0 \$130,774 \$50 \$130,774 \$50	MAGI Parents/ Caretakers to 68% FPL   \$50,076,339   \$1,881,341   \$520,100   \$15,490,571   \$501,509   \$30,664,666   \$28,612,925   \$50,836,607   \$12,905,701   \$4,466,275   \$50,905,566   \$25,741,271)   \$1,4466,275   \$4,462,75   \$1,569,187    \$1,569,187    \$1,569,187   \$1,569,187    \$1,569,187    \$1,569,187    \$1,569,187    \$1,569,1	MAGI Parents/ Caretakers 69% to 133% FPL  \$23,371,946 \$530,175 \$117,919 \$8,285,053 \$2626,955 \$18,973,251 \$20,465,183 \$5,555,519 \$1,827,405 \$26,819,336 (\$12,235,118) \$844,766 \$46,31,279 \$17,658 \$37,697 \$4 \$167,049 \$80	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,298 \$104,658,035 \$22,606,208 \$141,155,854 \$160,808,709 \$(\$73,237,412) \$2,480,550 \$20,935,703 \$189,252 \$107,687 \$133 \$2,542,606 \$0	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$558,122 \$128,456 \$33,414 \$27,463 \$199,546 (\$92,685) \$1,493 \$20,583 \$162 \$1,335,684 \$1 \$510 \$510	\$108,185,897 \$2,274,140 \$178,2274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,151 \$58,961,825 \$59,573,003 \$6,212,964 \$12,669,966 \$61,368,815 \$621,912,999 \$33,868,429 \$33,868,429 \$33,91,642 \$60,000 \$10	Eligible Children  \$9,866,976 \$1185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$7483,385 \$1,108,375 \$9,540,470 \$4,474,858) \$31,108,375 \$2,080,039 \$1,139 \$0 \$0 \$1,139	\$7,495,898 \$313,873 \$1148,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,840 \$858,945 \$28,826,527 \$11,797,096 (\$5,354,679) \$178,101 \$767,233 \$9,109 \$0 \$28,365 \$0 \$218,985	\$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$7,489,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$3,980,858 \$3,980,858 \$3,980,452 \$1,812,094) \$333,384 \$4,461,111 \$48,488 \$0 \$100,463 \$100,463 \$119,737 \$119,737 \$119,737	Eligible Pregnant Adults  \$2,364,616  \$35,815 \$1,473 \$136,238  \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 \$(\$176,524) \$368,479 \$35,500 \$39,217 \$0 \$13,173 \$0	Emergency Services \$2,747,335 \$65,430 \$385 \$105 \$0 \$15,542,187 \$1,156,186 \$86,080 \$643 \$130 \$477 \$1,150,386 \$2,58 \$0 \$0 \$15,542,187 \$1,150,186 \$477 \$1,150,186 \$1,150	\$13 \$6,336 \$(\$392) \$2,611 \$0 \$0 \$5,358 \$(\$3,558) \$1,904 \$1,333 \$166,840 \$5,366 \$(\$203) \$0 \$(\$3,588) \$7,946,737 \$0 \$171 \$11 \$0 \$0	\$385,493,777 \$19,141,430 \$9,824,399 \$159,524,735 \$1,847,850 \$201,126,880 \$362,646,657 \$296,266,230 \$59,839,581 \$87,482,464 \$445,921,373 (\$202,605,248) \$10,243,182 \$71,201,370 \$41,326,950 \$1,335,684 \$2,199,343 (\$1) \$12,341,049 \$0
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services Acute Home Health Presumptive Eligibility	Older (OAP-A)  \$2,136,954 \$1,175,570 \$1,671,095 \$4,494,526 \$343 \$5,655,692 \$247,435 \$1,134,635 \$3,117,878 (S1,400,506) \$23,787 \$368,202 \$16,148,720 \$23,867 \$36,972 \$21,38,232 \$0 \$52,138,232 \$0 \$55,466,350 \$25,466,350 \$25,466,350 \$25,466,350 \$25,466,350 \$25,478,230 \$25,466,350 \$25,478,230	60 to 64 (OAP-B) \$5,348,889 \$829,017 \$888,829 \$1,475,645 \$992 \$6,640,388 \$4,670,029 \$749,472 \$3,862,034 \$13,139,491 (\$5,965,880) \$116,682 \$660,220 \$2,858,586 \$0 \$1,205,313 \$0 \$1,205,313	Individuals to 59 (AND/AB)  \$36,858.336  \$3,910,207  \$3,667,029  \$8,960,989  \$32,234  \$37,054,466  \$46,570,133  \$32,487,019  \$4,900,093  \$33,924,411  \$91,851,848  (\$41,639,659)  \$556,182  \$3,982,722  \$11,212,033  \$0  \$1,210,326  (\$2)  \$4,346,933	In \$3,241,713 \$107,120 \$83,701 \$675,122 \$834 \$1,906,172 \$33.6816 \$82,201 \$5,942,198 \$1,906,174,475 \$1,906,174	MAGI Parents/ Caretakers to 68% FPL 550,076,939 \$1,881,341 \$520,100 \$15,490,571 \$501,509 \$30,664,666 \$28,612,925 \$50,836,607 \$12,905,701 \$1,446,616 \$8,653,754 \$1,569,187 \$0 \$173,368 \$(516) \$622,076 \$622,076 \$623,74,914	MAGI Parents/ Caretakers 69% to 133% FPL 523,371,946 \$530,175 \$117,919 \$8,285,053 \$262,695 \$18,973,251 \$12,227,931 \$20,465,183 \$5,555,519 \$18,27,405 \$26,819,336 (\$12,235,118) \$844,766 \$4,631,279 \$17,658 \$0 \$37,697 \$4 \$167,049 \$111,899,748	MAGI Adults  \$114,151,218 \$7,398,839 \$1,803,835 \$31,288,772 \$686,662 \$67,899,601 \$136,457,208 \$104,658,035 \$22,606,208 \$104,658,035 \$22,606,208 \$104,558,703 \$14,155,854 \$160,808,709 \$132,347,412 \$2,480,550 \$20,935,703 \$189,252 \$0 \$107,687 \$13 \$2,542,606 \$0 \$614,933,430	Breast & Cervical Cancer Program  \$245,946 \$4,286 \$2,835 \$37,126 \$0 \$24,718 \$58,122 \$128,456 \$129,546 \$27,463 \$199,546 \$20,283 \$162 \$1,335,684 \$0 \$1 \$51,0 \$51,0 \$51,0 \$51,0 \$51,0 \$51,0 \$51,0 \$51,0 \$51,0	\$108,185,897 \$2,274,140 \$778,826 \$72,086,173 \$224,854 \$21,248,113 \$58,961,825 \$59,573,003 \$6,212,904 \$12,669,966 \$61,368,815 \$27,912,904 \$12,669,966 \$61,368,815 \$27,912,904 \$3,868,429 \$3,925,420 \$10,000 \$10	Eligible Children \$9,866,976 \$185,006 \$62,931 \$12,028,188 \$41,582 \$2,370,469 \$2,777,403 \$6,789,276 \$748,385 \$1,108,375 \$9,540,470 (\$4,347,858) \$341,674 \$2,080,039 \$1,139 \$0 \$0 (\$1) \$15,189 \$0 \$43,609,243 \$60,711	\$7,495,898 \$31,48,885 \$3,410,937 \$20,200 \$362,349 \$3,171,644 \$3,976,801 \$858,945 \$2,826,527 \$11,797,096 \$178,101 \$767,233 \$9,109 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$28,365 \$0 \$0 \$28,365 \$0 \$0 \$28,365 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Adults  \$19,401,101 \$424,275 \$76,858 \$1,152,679 \$66,023 \$74,889,226 \$32,399,452 \$6,716,478 \$4,134,029 \$186,658 \$33,384 \$4,341,341 \$48,488 \$0 \$100,463 \$100,463 \$(\$2) \$119,737 \$579,278,718	Eligible Pregnant Adults \$2,364,616 \$35,815 \$1,473 \$136,238 \$9,922 \$837,731 \$3,821,630 \$632,154 \$464,387 \$21,347 \$393,902 \$386,479 \$20,802 \$386,479 \$0 \$39,217 \$0 \$9,902,397	Emergency Services \$2,747,335 \$65,430 \$385 \$0 \$0 \$15,542,187 \$1,156,186 \$86,080 \$13,0 \$13,0 \$171,639 \$25,384 \$171,639 \$25,384 \$171,639 \$25,384 \$171,639 \$25,384 \$171,639 \$25,384 \$171,639 \$15,542,187 \$171,639 \$17	\$13 \$6,336 \$6,336 \$6,336 \$6,336 \$6,336 \$6,336 \$6,340 \$6,34	\$385,49 \$19,14 \$9,822 \$159,522 \$184 \$201,122 \$362,644 \$296,266 \$59,833 \$7,481 \$10,242 \$71,20 \$10,242 \$11,333 \$2,199 \$12,34

					FY	2016-17 July-D	ecember CORI	E Total Actuals								
ACUTE CARE	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	, ,	Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Physician Services & EPSDT	\$1,731,841	\$4,896,508	\$34,692,103	\$2,931,546	\$41,664,874	\$20,697,745	\$106,874,002	\$137,519	\$101,800,237	\$10,143,060	\$7,448,470	\$19,247,540	\$2,201,457	\$2,728,177	\$993	\$357,196,072
Emergency Transportation	\$854,277	\$589,232	\$2,756,743	\$120,989	\$1,162,478	\$386,359	\$5,593,214	\$1,489	\$1,543,796	\$145,150	\$211,097	\$332,451	\$21,995	\$41,876	\$310	\$13,761,456
Non-emergency Medical Transportation	\$1,853,700	\$1,002,505	\$3,798,845	\$108,088	\$492,505	\$102,877	\$2,240,998	\$1,155	\$740,134	\$71,645	\$125,265	\$90,183	\$3,866	\$1,974	\$0	\$10,633,740
Dental Services	\$5,184,765	\$1,732,613	\$10,528,124	\$910,362	\$16,842,094	\$9,601,171	\$36,189,970	\$34,176	\$75,886,232	\$13,425,791	\$3,531,679	\$1,288,190	\$140,862	\$123	\$2,847	\$175,298,999
Family Planning Health Maintenance Organizations	\$149 \$5,155,249	\$228 \$5,666,245	\$38,662 \$32,562,844	\$1,589 \$944.846	\$808,834 \$28,776,255	\$404,374 \$17,716,195	\$1,314,106 \$71,830,470	\$0 \$16,872	\$400,148 \$21,611,718	\$72,331 \$2,722,157	\$53,237 \$406,762	\$113,575 \$5,922,878	\$12,367 \$682.172	\$0 \$0	\$0 \$0	\$3,219,600 \$194,014,663
	\$5,155,249 \$8,547,797	\$5,666,245	\$32,562,844 \$45,253,758	\$944,846 \$4,295,043	\$28,776,255	\$17,716,195	\$140,565,223	\$16,872 \$103,508	\$21,611,718	\$2,722,157	\$406,762	\$5,922,878	\$682,172 \$2,680,308	\$14.182.177	(\$10,487)	\$194,014,663 \$361.213.985
Inpatient Hospitals Outpatient Hospitals	\$1,606,589	\$4,618,903	\$45,255,758	\$2,831,866	\$46,670,593	\$22,408,224	\$140,565,225	\$103,308	\$56,630,518	\$6,494,559	\$3,854,184	\$6,905,845	\$2,680,308	\$1,112,373	(\$10,487)	\$304,389,463
Lab & X-Ray	\$1,000,389	\$4,618,903	\$5,140,194	\$2,831,866	\$12,575,188	\$5,681,031	\$24,709,260	\$23,810	\$6,532,169	\$867,433	\$3,834,184	\$4,203,480	\$477,379	\$89,655	(\$1,157)	\$62,578,904
Durable Medical Equipment	\$11.685.187	\$4.097,356	\$35,554,014	\$1,102,764	\$4,472,344	\$2,121,763	\$16,130,335	\$10.925	\$13.091.318	\$1,234,413	\$2,984,999	\$245,501	\$14.950	\$89,033	\$208,533	\$92,954,402
Prescription Drugs	\$3,356,849	\$13,756,972	\$94,360,566	\$6,442,481	\$55,715,440	\$26,583,061	\$174,981,850	\$170,287	\$59,023,858	\$10,155,318	\$11.812.403	\$4,671,421	\$429,874	\$2,964	\$117	\$461,463,461
Drug Rebate	(\$2,078,460)	(\$8,517,905)	(\$58,425,233)	(\$3,988,991)	(\$34,497,330)	(\$16,459,434)	(\$108,343,514)	(\$105,437)	(\$36,545,802)	(\$6,287,868)	(\$7,313,886)	(\$2,892,404)	(\$266,165)	(\$1,835)	(\$73)	(\$285,724,337)
Rural Health Centers	\$22,424	\$108,401	\$550,757	\$21,291	\$1,281,884	\$839,234	\$2,404,923	\$1,238	\$3,851,346	\$401,251	\$168,382	\$362,340	\$24,029	\$5,695	\$0	\$10.043,195
Federally Qualified Health Centers	\$360,931	\$759,296	\$4,104,907	\$175,843	\$8,260,016	\$4,627,668	\$21,862,508	\$17,261	\$26,842,716	\$2,666,826	\$939,878	\$4,788,606	\$439,385	\$227,245	\$701	\$76,073,787
Co-Insurance (Title XVIII-Medicare)	\$11,976,655	\$2,402,869	\$8,416,066	\$1,343,170	\$1,088,577	\$21,365	\$160,898	\$0	\$2,745	\$40	\$4,712	\$22,035	\$34	\$0	\$6,284,081	\$31,723,247
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,460,341	\$0		\$0	\$0	\$0	\$0	\$0	\$1,460,341
Administrative Service Organizations - Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Medical Services	\$37	\$28	\$211	\$12	\$130	\$64	\$382	\$1	\$233	\$27	\$22	\$39	\$4	\$10	\$3	\$1,203
Acute Home Health	\$2,789,175	\$1,388,578	\$6,046,234	\$178,585	\$536,790	\$147,415	\$2,612,010	\$2,443	\$1,106,782	\$44,690	\$337,895	\$127,487	\$10,451	\$0	\$0	\$15,328,535
Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$53,310,136	\$40,970,862	\$257,284,364	\$17,786,644	\$212,496,459	\$106,229,783	\$617,746,760	\$1,986,578	\$399,252,087	\$44,981,789	\$28,939,809	\$72,275,941	\$7,493,250	\$18,390,434	\$6,485,820	\$1,885,630,716
Caseload	43,538	11,088	67,693	5,707	153,209	90,184	357,092	309	471,955	63,293	20,247	14,310	1,803	2,526	33,506	1,336,459
Half -Year Per Capita	\$1,224,44	\$3,695,17	\$3,800,74	\$3,116.73	\$1,386,97	\$1,177,93	\$1,729,94	\$6,425.59	\$845.95	\$710.70	\$1,429,37	\$5,050,73	\$4,156,76	\$7,281.42	\$193.57	\$1,410.92
man-real let Capita	\$ - ,== · · · ·	ψ5,075.17	\$5,000.74	\$5,110.75	91,500.77	91,177.75	\$1,729.94	\$0,423.39	\$643.93	\$710.70	\$1,727.57	\$5,050.75	34,130.70	97,201.12	\$175.57	\$1,110.72
Han - Fed Fer Capita		\$3,072.17	\$3,800.74	\$5,110.75	, ,	. ,	ry-June CORE	,	\$643.93	\$710.70	\$1,427.57	\$5,050.75	94,130.70	97,201.12	<b>4173.37</b>	\$1,110.52
nan-redi Pel Capita	Adults 65 and	Disabled Adults	Disabled		, ,	. ,	. ,	,			\$1,727.37		SB 11-250	Non-Citizens-		\$1,110.92
ACUTE CARE	Adults 65 and Older	Disabled Adults 60 to 64	Disabled Individuals to 59	Disabled Buy-	FY MAGI Parents/ Caretakers to	2016-17 Janua MAGI Parents/ Caretakers 69%	. ,	Total Actuals  Breast & Cervical Cancer	Eligible Children	SB 11-008	Foster Care	MAGI Pregnant	SB 11-250 Eligible Pregnant	Non-Citizens- Emergency	Partial Dual	TOTAL
	Adults 65 and	Disabled Adults	Disabled		FY MAGI Parents/	2016-17 Janua MAGI Parents/	ry-June CORE	Total Actuals  Breast &	Eligible Children		,		SB 11-250	Non-Citizens-		,
	Adults 65 and Older	Disabled Adults 60 to 64	Disabled Individuals to 59	Disabled Buy-	FY MAGI Parents/ Caretakers to	2016-17 Janua MAGI Parents/ Caretakers 69%	ry-June CORE	Total Actuals  Breast & Cervical Cancer	Eligible Children	SB 11-008	,	MAGI Pregnant	SB 11-250 Eligible Pregnant	Non-Citizens- Emergency	Partial Dual	,
ACUTE CARE	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy- In	FY MAGI Parents/ Caretakers to 68% FPL	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
ACUTE CARE  Physician Services & EPSDT	Adults 65 and Older (OAP-A) \$3,817,841	Disabled Adults 60 to 64 (OAP-B) \$4,654,676	Disabled Individuals to 59 (AND/AB) \$31,422,129	Disabled Buy- In \$3,655,994	MAGI Parents/ Caretakers to 68% FPL \$40,579,330	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988	MAGI Adults \$86,783,622	Total Actuals  Breast & Cervical Cancer Program  \$527,765	Eligible Children (AFDC-C/BC) \$85,520,506	SB 11-008 Eligible Children \$10,814,679	Foster Care \$7,562,456	MAGI Pregnant Adults \$14,010,743	SB 11-250 Eligible Pregnant Adults \$2,423,926	Non-Citizens- Emergency Services \$2,906,168	Partial Dual Eligibles \$32,745	TOTAL \$320,171,568
ACUTE CARE  Physician Services & EPSDT  Emergency Transportation	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429	FY  MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137	MAGI Adults  \$86,783,622 \$14,624,086	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735	SB 11-008 Eligible Children \$10,814,679 \$371,536	Foster Care \$7,562,456 \$613,467 \$157,917 \$3,480,811	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483	Non-Citizens- Emergency Services \$2,906,168 \$131,771	Partial Dual Eligibles \$32,745 \$991	TOTAL \$320,171,568 \$33,369,154
ACUTE CARE  Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589	FY  MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027	MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$3,744 \$27,222 \$0	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0	TOTAL \$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562	MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$11,616 \$3,744 \$27,222 \$0 \$5,381	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$3,201,809	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691)	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 (\$25,023)	TOTAL \$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$6,535,041	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$9,939,330	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$884,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381	MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$3,201,809 \$3,557,740	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 (\$25,023) (\$25)	TOTAL \$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$6,535,041 \$1,258,849	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$9,939,330 \$4,269,457	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$35,802,026	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771	MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$359,865	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$3,201,809 \$3,557,740 \$4,949,531	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538 \$3,107,142	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246 \$5,599,678	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002 \$790,031	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195 \$304,019	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 (\$25,023) (\$25,023)	TOTAL \$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpattent Hospitals Lab & X-Ray	Adults 65 and Older (OAP-A) \$1,084,106 \$4,444,030 \$4,333,626 \$762 \$5,312,214 \$6,535,041 \$1,258,849 \$227,642	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$9,939,330 \$4,269,457 \$717,061	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,880	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$5,767,453	MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003	Total Actuals  Breast & Cervical Cancer Program  \$527,765  \$1,616  \$3,744  \$27,222  \$0  \$5,381  \$122,836  \$359,865  \$49,808	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677 \$4,818,324	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$32,0180 \$33,557,740 \$4,949,531 \$1,421,697	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538 \$3,107,142 \$781,758	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246 \$5,699,678 \$3,209,857	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002 \$790,031 \$334,266	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195 \$304,019 \$66,008	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 (\$25,023) (\$25) \$286 \$25,736	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,945 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,433,626 \$762 \$5,312,214 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$5,933,330 \$42,69,457 \$717,061 \$33,62,045	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$33,880,931	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$554,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$120,027 \$19,273,381 \$23,552,771 \$5,767,453 \$3,343,436,406	ry-June CORE  MAGI Adults  \$86,783,622 \$14,624,086 \$31,30,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$2,744 \$27,222 \$0 \$5,531 \$152,836 \$359,865 \$49,808 \$18,244	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$11,872,810 \$183,725 \$63,391,956 \$47,282,677 \$4,818,324	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$32,057 \$3,257,740 \$4,949,531 \$1,421,697	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,754 \$5,699,678 \$3,209,857 \$184,917	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002 \$790,031 \$334,266 \$12,872	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195 \$304,019 \$66,008 \$40	Partial Dual Eligibles \$32,745 \$991 \$11,519,547 \$0 \$25,023 \$286 \$25,736 \$51,750	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$9,393,330 \$4,269,457 \$717,061 \$3,262,045 \$14,430,546	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$1,228,788 \$1,328,691 \$958,866 \$333,880 \$903,546 \$7,373,891	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$65,095,760	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL 525,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$5,767,453 \$3,436,406 \$44,895,683	my-June CORE  MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$169,779,650	Total Actuals  Breast & Cervical Cancer Program  \$\$27,765 \$1,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$359,865 \$49,808 \$18,244 \$180,275	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677 \$4,818,324 \$11,927,111 \$56,821,914	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$32,01,809 \$3,557,740 \$4,949,531 \$1,421,697 \$1,460,934 \$18,722,476	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471	MAGI Pregnant Adults  \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246 \$5,699,678 \$3,209,857 \$1,199,016 \$4,199,118	SB 11-250 Eligible Pregnant Adults \$2,242,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002 \$790,031 \$334,266 \$12,872 \$533,522	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195 \$304,019 \$66,008 \$40	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 \$25,023) \$286 \$25,736 \$51,750 \$139,357	TOTAL \$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,24 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 \$2,217,554)	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$9,939,330 \$4,269,457 \$717,061 \$3,262,045 \$1,430,546 \$13,239,21,21)	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,19 \$(\$3,890,689)	Disabled Buy- In  \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,880 \$903,546 \$533,380 \$903,546 \$(\$5,546,203)	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,233 \$27,828,568 \$33,802,026 \$10,705,380 \$4,528,752 \$6,095,760 (\$59,393,292)	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$5,767,453 \$3,436,406 \$4,895,083 \$48,95,083	magi Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$50,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$19,779,650	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$11,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$359,865 \$49,808 \$18,244 \$180,275 \$(\$145,122)	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,785 \$11,041,787,810 \$183,725 \$24,238,865 \$43,901,966 \$47,282,677 \$4,818,324 \$11,927,111 \$15,682,19,14 \$15,682,19,14 \$15,682,19,14	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,0879 \$3,557,740 \$4,949,531 \$1,421,697 \$1,460,934 \$1,8722,476 \$20,616,890)	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,607 \$4,554,538 \$3,107,142 \$781,753,471 \$2,659,924 \$11,763,471 \$(59,994,341)	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246 \$5,699,678 \$3,209,857 \$184,917 \$4,193,918 \$3,554,674)	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$493,324 \$2,760,002 \$790,031 \$334,266 \$12,872 \$533,522 \$533,522	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 \$(\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$39 \$455	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 (\$25,023) (\$25,033) \$286 \$25,736 \$51,750 \$13,93,57 (\$139,357	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531)
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$5,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 (\$2,917,554) \$16,560	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$5,939,333 \$4,269,457 \$717,061 \$3,262,045 \$14,430,546 (\$1,2392,121) \$83,3191	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,19,154 \$96,371,191 (\$83,890,689) \$404,907	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$903,546 \$73,73,891 \$(\$6,546,203) \$17,706	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$65,095,760 \$(\$59,393,292) \$951,256	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$054,678 \$9,523,559 \$120,027 \$120,027 \$120,027 \$19,273,381 \$23,552,771 \$5,767,453 \$3,343,6406 \$44,895,083 \$44,895,083 \$53,9450	ry-June CORE  MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$169,779,650 (S14,244,025) \$1,577,065	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$3,744 \$27,222 \$0 \$5,531 \$152,836 \$359,865 \$49,808 \$182,244 \$180,275 \$(\$145,122) \$2,2161	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$183,725 \$43,398,965 \$47,282,677 \$4,818,324 \$11,927,111 \$66,821,914 (\$58,993,941) \$2,723,834	SB 11-008 Eligible Children \$371,536 \$121,914 \$14,025,222 \$32,657 \$3,257,740 \$4,949,531 \$1,421,697 \$1,460,934 \$182,22476 \$182,22476 \$182,22476	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471 (\$9,94,341) \$153,461	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$54,648,754 \$5,699,678 \$3,209,857 \$184,917 \$4,193,918 \$(3,554,674) \$167,755	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$27,760,002 \$790,031 \$334,266 \$12,872 \$533,522 \$535,537 \$17,264	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$39 \$45 \$52,2464	Partial Dual Eligibles \$32,745 \$991 \$111 \$19,547 \$0 (\$25,023) (\$25,023) \$286 \$21,730 \$139,357 (\$193,255)	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531) \$7,200,137
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 (\$2,917,554) \$16,560 \$394,582	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$1,590,291 \$5,933,330 \$4,269,457 \$717,061 \$3,262,045 \$14,243,0546 (\$12,392,121) \$583,191 \$543,243	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 (\$83,890,689) \$404,907 \$2,862,521	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,880 \$903,546 \$7,373,891 \$(56,546,203) \$17,706	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$55,995,760 \$59,393,292) \$951,256 \$6,876,481	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL 525,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$5,767,453 \$3,436,406 \$44,895,083 (\$48,167,242) \$49,599,904	my-June CORE  MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,244 \$79,053,229 \$18,145,003 \$13,710,825 \$169,779,650 \$(\$141,244,025) \$15,5370,055	Total Actuals  Breast & Cervical Cancer Program  \$\$27,765 \$1,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$359,865 \$49,808 \$18,244 \$180,275 \$(\$145,122) \$2,161 \$10,251	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677 \$4,818,324 \$11,927,111 \$66,821,914 (58,993,941) \$2,723,834 \$11,656,3431	8B 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$32,01,809 \$3,557,740 \$4,949,531 \$14,21,697 \$1,421,697 \$20,616,890) \$423,123 \$858,936	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471 \$9,994,341) \$13,461 \$616,726	MAGI Pregnant Adults  \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246 \$5,699,678 \$3,209,857 \$184,917 \$4,193,918 \$(\$3,554,674) \$167,755 \$3,767,686	8B 11-250 Eligible Pregnant Adults \$2,242,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002 \$790,031 \$334,266 \$12,872 \$533,522 \$533,522 \$533,522 \$533,522 \$533,522	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$39 \$455 \$2,464 \$58,347	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 \$25,023) \$286 \$25,736 \$13,750 \$139,357 \$193,255)	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$530,641,466 (\$448,554,531) \$7,200,137 \$53,202,369
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare)	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,24 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 \$(2,917,554) \$16,560 \$394,582 \$10,900,635	Disabled Adults 60 to 64 (OAP-B) 54,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$9,939,330 \$4,269,457 \$717,061 \$3,262,045 \$14,30,546 \$14,349,542 \$1,367,426	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,194 \$96,371,94 \$404,907 \$2,862,521 \$5,227,531	Disabled Buy- In  \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$903,546 \$383,880 \$903,546 \$17,706 \$196,286 \$2,245,576	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,238 \$27,828,568 \$33,802,026 \$10,705,389 \$4,528,752 \$65,095,760 \$593,393,292 \$951,256 \$6,876,481 \$588,998	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$5,767,453 \$3,436,406 \$44,895,083 \$48,167,242 \$639,450 \$49,599,904 \$52,996	magi Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$50,087,748 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$169,779,650 \$15,304,200 \$15,330,420 \$15,330,420	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$11.616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$359,865 \$49,808 \$182,244 \$180,275 \$(\$145,122) \$2,161 \$10,251 \$10,251 \$1,571	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$71,872,810 \$183,725 \$24,238,865 \$47,282,677 \$4,818,271,111 \$658,931,941 \$56,821,914 \$1,563,431 \$1,563,431 \$33,599	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,087 \$3,557,740 \$4,949,531 \$14,21,697 \$1,460,934 \$1,872,476 \$20,616,890 \$423,123 \$85,936 \$4,902	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$4,554,538 \$3,107,142 \$781,753,471 \$1,763,471 \$153,461 \$161,726	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,648,555 \$23,019,246 \$5,699,678 \$3,209,857 \$184,917 \$4,193,918 \$3,525,4674 \$1,677,55 \$3,767,686 \$24,655	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$493,324 \$2,760,002 \$790,031 \$334,266 \$12,872 \$533,537 \$17,264	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 \$(\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$39 \$455 \$2,464 \$58,347 \$0	Partial Dual Eligibles \$32,745 \$911 \$11,547 \$0 (\$25,023) (\$25,023) \$286 \$25,736 \$513,750 \$139,357 \$193,255 \$2,525	\$320,171,568 \$333,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,654 \$484,554,631) \$7,200,137 \$53,202,369 \$26,854,416
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Titte XVIII-Medicare) Breast and Cervical Cancer Treatment Program	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 (S2,917,554) \$16,560 \$394,582 \$10,900,635 \$0	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$5,939,333 \$4,269,457 \$717,061 \$3,26,2045 \$14,430,546 (\$1,2392,121) \$83,31,91 \$543,243	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 (\$83,890,689) \$404,907 \$2,862,521 \$55,227,531	Disabled Buy- In  \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$73,73,891 \$(\$6,546,203) \$17,706 \$196,286 \$2,545,576 \$0	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$35,498,700 \$412,486 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$65,095,760 \$(\$59,393,292) \$951,256 \$6,876,481 \$588,998 \$8	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$120,027 \$19,273,381 \$23,552,771 \$5,767,453 \$3,343,4306 \$44,895,083 (\$41,67,242) \$639,450 \$4,959,904 \$52,996 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$6	ry-June CORE  MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$51,91,56,624 \$79,053,229 \$18,145,003 \$13,710,825 \$169,779,650 \$(\$14,244,025) \$1,597,005 \$1,530,420 \$19,830 \$19,830	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$3,744 \$27,222 \$0 \$0 \$5,531 \$1522,836 \$359,865 \$49,808 \$182,244 \$1,80,275 \$(\$145,122) \$2,161 \$10,251 \$1,571 \$674,680	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$183,725 \$43,238,656 \$47,282,677 \$4,818,324 \$11,927,111 \$66,821,914 (\$58,993,941) \$2,723,834 \$16,563,431 \$39,599 \$9	SB 11-008 Eligible Children \$371,536 \$121,914 \$14,025,222 \$32,657 \$3,257,740 \$4,949,531 \$1,421,697 \$1,1460,934 \$182,22476 \$88,936 \$4,931,23 \$888,936 \$4,902 \$50	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$35,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471 \$9,943,41) \$153,461 \$616,726 \$2,460 \$0	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$54,648,754 \$5,699,678 \$3,209,857 \$184,917 \$4,193,918 \$(3,554,674) \$167,755 \$3,767,686 \$24,565 \$6	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$27,760,002 \$790,031 \$334,266 \$12,872 \$533,522 \$5505,637) \$17,264 \$163,557 \$1,260 \$0	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$0 (\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$39 \$455 \$2,464 \$58,347 \$0 \$0	Partial Dual Eligibles \$32,745 \$991 \$111 \$19,547 \$0 \$25,023 \$286 \$25,736 \$139,357 \$139,357 \$0 \$25,897,067	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531) \$7,200,137 \$53,202,369 \$674,680
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Trile XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 (\$2,917,554) \$16,560 \$19,906,635 \$0 \$0	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$5,162,813 \$9,930,330 \$4,269,457 \$717,061 \$3,262,045 \$14,340,346 (\$12,392,121) \$83,191 \$543,243 \$1,367,426 \$0 \$50	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 (\$83,890,689) \$404,907 \$2,862,521 \$5,227,531	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,880 \$903,546 \$7373,891 \$(5,546,203) \$17,706 \$196,286 \$2,545,576 \$0	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$34,849,283 \$27,828,568 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$56,005,76,389 \$4,528,752 \$56,005,76,481 \$588,998 \$0 \$0	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$55,674,453 \$3,436,406 \$44,895,408 \$44,895,408 \$44,895,408 \$45,996 \$45,996 \$639,450 \$45,996 \$639,450	magladults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$169,779,605 \$(\$141,244,025) \$1,597,005 \$15,330,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,3	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$11,616 \$3,744 \$27,222 \$0 \$1,5381 \$122,836 \$132,836 \$18,244 \$180,275 \$2,161 \$10,251 \$1,571 \$1,571 \$5,74,680 \$6,808	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677 \$4,818,324 \$11,927,111 \$66,821,914 \$58,993,941) \$2,723,834 \$15,656,343,545 \$16,563,345 \$16,563,345 \$16,563,359 \$0	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$32,01,809 \$3,557,740 \$3,449,531 \$1,421,697 \$1,460,934 \$18,722,476 \$20,616,890 \$4,23,123 \$858,936 \$4,902 \$0 \$0 \$0 \$0 \$0	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$388,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471 \$153,461 \$516,726 \$2,460 \$0	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246 \$5,699,678 \$13,209,857 \$1184,917 \$4,193,918 \$3,554,674) \$167,755 \$3,767,686 \$24,565 \$0 \$0	BB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002 \$334,266 \$12,872 \$533,522 \$533,522 \$535,637) \$11,260 \$0 \$0	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$00 \$(\$591) \$18,707,195 \$304,019 \$66,008 \$40 \$339 \$455 \$2,464 \$58,347 \$0 \$0	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 \$(\$25,023) \$286 \$25,736 \$51,750 \$139,327 \$(\$193,255) \$0 \$5,897,067	\$320,171,568 \$333,369,154 \$15,395,802 \$163,672,899 \$1,284,99 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531) \$7,200,137 \$33,02,369 \$26,854,416 \$674,680
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Impatient Hospitals Outpattent Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$1,084,106 \$5,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 \$16,560 \$394,582 \$10,900,635 \$0 \$0	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$9,939,330 \$4,269,457 \$717,061 \$3,262,045 \$14,430,546 (\$12,392,121) \$83,191 \$544,243 \$1,367,426 \$50 \$51	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5.314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 (\$83,890,689) \$404,907 \$2,862,521 \$5,227,531 \$0 \$0 \$0	Disabled Buy- In  \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,380 \$903,546 \$7,373,891 \$(\$5,546,203) \$17,706 \$196,286 \$2,545,576 \$0 \$0	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$15,798,700 \$412,486 \$34,849,233 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$65,095,760 \$59,393,292 \$951,256 \$6,876,481 \$588,998 \$0 \$0	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,52 \$19,273,381 \$23,552,771 \$5,767,453 \$3,436,406 \$44,895,083 \$48,167,242 \$639,450 \$4,959,904 \$52,996 \$0 \$0 \$0 \$1	magi Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,030 \$13,710,825 \$16,9779,650 \$15,330,420 \$19,830 \$0 \$0	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$359,865 \$49,808 \$18,244 \$180,275 \$(\$145,122) \$2,161 \$10,251 \$1,571 \$674,680 \$0	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,785 \$24,238,785 \$4,281,877 \$4,818,377 \$4,818,371 \$11,927,111 \$65,829,3941 \$2,723,834 \$16,563,431 \$39,599 \$0 \$0 \$0	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,0870 \$3,201,870 \$4,949,531 \$14,21,697 \$1,460,934 \$18,722,6790 \$423,123 \$858,936 \$4,902 \$4,902 \$5,902 \$6	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$485,547 \$48,547 \$2,659,924 \$11,763,471 \$153,461 \$616,726 \$2,460 \$0 \$0 \$1	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$5,699,678 \$3,209,857 \$184,917 \$4,193,918 \$(33,554,674) \$167,755 \$3,767,686 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$37,856 \$18,5483 \$4,93,424 \$2,760,002 \$790,031 \$334,266 \$12,872 \$533,527 \$17,264 \$163,557 \$1,260 \$0 \$0	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$00 (\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$339 \$455 \$2,464 \$58,347 \$58,347 \$58,347	Partial Dual Eligibles \$32,745 \$991 \$111 \$19,547 \$0 (\$25,023) (\$25,023) \$28,66 \$51,750 \$139,357 (\$193,255) \$0 \$0 \$0 \$0 \$0 \$0	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531) \$7,200,137 \$53,202,369 \$26,854,416 \$674,680
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,214 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 (\$2,917,554) \$16,560 \$19,906,635 \$0 \$0	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$5,162,813 \$9,930,330 \$4,269,457 \$717,061 \$3,262,045 \$14,340,346 (\$12,392,121) \$83,191 \$543,243 \$1,367,426 \$0 \$50	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 (\$83,890,689) \$404,907 \$2,862,521 \$5,227,531	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,880 \$903,546 \$7373,891 \$(5,546,203) \$17,706 \$196,286 \$2,545,576 \$0	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,283 \$27,828,568 \$34,849,283 \$27,828,568 \$34,849,283 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$56,005,76,389 \$4,528,752 \$56,005,76,481 \$588,998 \$0 \$0	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$55,674,453 \$3,436,406 \$44,895,408 \$44,895,408 \$44,895,408 \$45,996 \$45,996 \$639,450 \$45,996 \$639,450	magladults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$169,779,605 \$(\$141,244,025) \$1,597,005 \$15,330,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,300,025 \$15,3	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$11,616 \$3,744 \$27,222 \$0 \$1,5381 \$122,836 \$132,836 \$18,244 \$180,275 \$2,161 \$10,251 \$1,571 \$1,571 \$5,74,680 \$6,808	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677 \$4,818,324 \$11,927,111 \$66,821,914 \$58,993,941) \$2,723,834 \$15,656,343,545 \$16,563,345 \$16,563,345 \$16,563,359 \$0	SB 11-008 Eligible Children \$371,536 \$121,914 \$14,025,222 \$32,657 \$3,257,740 \$4,949,531 \$1,421,697 \$1,1460,934 \$182,22476 (\$20,616,890) \$432,123 \$858,936 \$4,902 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$388,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471 \$153,461 \$516,726 \$2,460 \$0	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$6,468,755 \$23,019,246 \$5,699,678 \$13,209,857 \$1184,917 \$4,193,918 \$3,554,674) \$167,755 \$3,767,686 \$24,565 \$0 \$0	BB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$993,424 \$2,760,002 \$334,266 \$12,872 \$533,522 \$533,522 \$535,637) \$11,260 \$0 \$0	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$00 \$(\$591) \$18,707,195 \$304,019 \$66,008 \$40 \$339 \$455 \$2,464 \$58,347 \$0 \$0	Partial Dual Eligibles \$32,745 \$991 \$11 \$19,547 \$0 \$(\$25,023) \$286 \$25,736 \$51,750 \$139,327 \$(\$193,255) \$0 \$5,897,067	\$320,171,568 \$333,369,154 \$15,395,802 \$163,672,899 \$1,284,945,396 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531) \$7,200,137 \$33,202,369 \$26,854,416 \$674,680
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services Acute Home Health Presumptive Eligibility	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,24 \$6,535,041 \$1,258,849 \$2227,642 \$10,481,803 \$3,340,373 \$(2,917,554) \$15,560 \$0 \$0 \$0 \$3,3334,791 \$0 \$0 \$3,334,791 \$0	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$5,162,813 \$9,930,330 \$4,269,457 \$717,061 \$3,262,045 \$14,430,546 (\$12,392,121) \$83,191 \$543,243 \$1,367,426 \$0 \$0 \$1 \$1	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 \$(83,890,689) \$404,907 \$2,862,521 \$5,227,531 \$0 \$0 \$(\$1) \$5,135,321	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,380 \$903,546 \$7,373,991 \$(\$6,546,203) \$17,706 \$196,286 \$2,545,576 \$0 \$0 \$10,246 \$10,	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,323 \$27,828,568 \$34,849,328 \$412,486 \$34,849,329 \$510,705,389 \$4,528,752 \$55,005,705 \$55,035,752 \$55,035,76,481 \$588,998 \$0 \$0 \$0 \$444,664	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$55,767,453 \$3,436,406 \$44,895,083 \$44,895,083 \$44,895,083 \$45,459 \$639,450 \$630,450	magladus  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$16,779,636 \$1641,7244,025) \$15,330,420 \$199,830 \$0 \$0 \$1 \$21,195,855 \$15,2195,855 \$21,95,855	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$11,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$152,836 \$18,244 \$180,275 \$(\$145,122) \$2,161 \$10,251 \$1,571 \$674,680 \$0 \$0 \$2,223 \$0	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677 \$4,818,324 \$11,927,111 \$66,821,914 \$68,893,941) \$2,723,834 \$16,563,431 \$39,599 \$0 \$0 \$0 \$82,025 \$823,025	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$32,01,809 \$3,557,740 \$4,949,531 \$1,421,697 \$1,460,934 \$4,942,51 \$1,8722,476 \$(\$20,616,890) \$4,932,123 \$858,936 \$4,902 \$0 \$0 \$0 \$0 \$0 \$50	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471 \$153,461 \$516,726 \$2,460 \$0 \$0 \$1 \$1,562 \$2,460 \$0 \$1,562 \$1,562 \$1,562 \$1,562 \$1,563 \$	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$5,699,678 \$3,209,857 \$184,917 \$4,193,946 \$4,555,676,566 \$24,565 \$0 \$(\$1) \$110,433 \$10,435	BB 11-250 Eligible Pregnant Adults Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$93,342 \$2,760,002 \$790,031 \$334,266 \$12,872 \$533,522 \$(550,5637) \$17,264 \$163,557 \$1,260 \$0 \$0 \$0 \$7,407 \$50	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$00 (\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$339 \$455 \$2,464 \$58,347 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles  \$32,745 \$991 \$111 \$19,547 \$0 (\$25,023) (\$25,033) (\$25,536 \$28,6 \$25,736 \$51,750 \$0 (\$25,036) \$0 \$0 \$0 \$0	\$320,171,568 \$333,369,154 \$15,395,802 \$163,672,899 \$1,284,905 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,545,531) \$7,200,137 \$53,020,369 \$26,854,416 \$674,680 \$0 \$0 \$13,782,577
ACUTE CARE  Physician Services & EPSDT	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,533,626 \$762 \$531,2214 \$6,535,041 \$1,258,849 \$227,642 \$10,481,809 \$3,340,373 \$(2,917,554) \$16,560 \$394,582 \$10,906,635 \$0 \$0 \$0 \$3,334,791 \$10,560,637,79	Disabled Adults 60 to 64 (OAP-B)  \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$6,162,813 \$9,939,330 \$4,269,457 \$317,061 \$3,262,045 \$14,302,461 \$83,2191 \$83,191 \$543,243 \$0 \$0 \$1,367,426 \$0 \$1 \$1,584	Disabled Individuals to 59 (ANDIAB) \$31,422,129 \$53,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 (83,890,689) \$404,907 \$2,862,521 \$0 \$0 \$0 \$0 \$1,5135,321	Disabled Buy-In  \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,380 \$903,546 \$7,373,891 \$17,706 \$196,286 \$2,545,576 \$0 \$0 \$136,284	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$15,798,700 \$412,486 \$15,798,700 \$412,486 \$34,849,233 \$27,828,568 \$35,802,026 \$10,705,389 \$4,528,752 \$65,095,760 \$50,6876,481 \$588,998 \$0 \$0 \$0 \$4444,664 \$189,416,037	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,562 \$19,273,381 \$23,552,771 \$5,767,453 \$3,343,4306 \$44,895,083 (\$48,167,242) \$639,450 \$4,959,904 \$52,996 \$0 \$1,000 \$1,	ry-June CORE  MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$51,95,66,624 \$79,053,229 \$19,108,25 \$169,779,650 \$15,70,705 \$15,330,420 \$199,830 \$0 \$0 \$1 \$2,195,855	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$1,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$359,865 \$49,808 \$18,244 \$180,275 \$(\$145,122) \$2,161 \$10,251 \$1,571 \$674,680 \$0 \$2,223 \$0 \$1,842,520	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,785 \$42,832,857 \$4,818,327 \$4,818,321 \$11,927,111 \$65,829,3941 \$2,723,834 \$16,563,431 \$39,599 \$0 \$0 \$0 \$823,025 \$823,025 \$83,1928,349	SB 11-008 Eligible Children \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,0870 \$3,255,7,740 \$4,949,531 \$14,21,697 \$1,460,934 \$18,722,6790 \$423,123 \$858,936 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$485,547 \$48,547 \$2,659,924 \$11,763,471 \$153,461 \$616,726 \$2,460 \$0 \$1 \$254,532 \$0 \$2,6116,961	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$5,6468,755 \$23,019,246 \$5,699,678 \$3,209,857 \$184,917 \$4,193,918 \$(33,554,674) \$167,755 \$3,767,686 \$0 \$0 \$0 \$110,433 \$110,433	SB 11-250 Eligible Pregnant Adults \$2,423,926 \$37,856 \$37,856 \$183,483 \$493,424 \$2,760,002 \$790,031 \$334,266 \$142,872 \$533,527 \$17,264 \$163,557 \$1,260 \$0 \$0 \$7,407 \$0 \$7,762,122	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$00 (\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$339 \$455 \$2,464 \$58,347 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$22,193,997	Partial Dual Eligibles \$32,745 \$91 \$11 \$19,547 \$0 \$(\$25,023) \$28,66 \$25,736 \$51,750 \$139,357 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,949 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531) \$7,200,137 \$53,202,369 \$0 \$13,782,577 \$0 \$1,631,623,758
ACUTE CARE  Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services Acute Home Health Presumptive Eligibility	Adults 65 and Older (OAP-A) \$3,817,841 \$1,084,106 \$4,444,030 \$4,533,626 \$762 \$5,312,24 \$6,535,041 \$1,258,849 \$2227,642 \$10,481,803 \$3,340,373 \$(2,917,554) \$15,560 \$0 \$0 \$0 \$3,3334,791 \$0 \$0 \$3,334,791 \$0	Disabled Adults 60 to 64 (OAP-B) \$4,654,676 \$1,081,886 \$950,467 \$1,590,291 \$98 \$5,162,813 \$9,930,330 \$4,269,457 \$717,061 \$3,262,045 \$14,430,546 (\$12,392,121) \$83,191 \$543,243 \$1,367,426 \$0 \$0 \$1 \$1	Disabled Individuals to 59 (AND/AB) \$31,422,129 \$5,314,021 \$3,662,841 \$9,393,908 \$13,808 \$34,755,359 \$51,220,449 \$23,267,723 \$3,886,933 \$28,199,154 \$96,371,191 \$(83,890,689) \$404,907 \$2,862,521 \$5,227,531 \$0 \$0 \$(\$1) \$5,135,321	Disabled Buy- In \$3,655,994 \$164,919 \$185,722 \$404,429 \$4,589 \$1,228,788 \$3,880,691 \$958,866 \$383,380 \$903,546 \$7,373,991 \$(\$6,546,203) \$17,706 \$196,286 \$2,545,576 \$0 \$0 \$10,246 \$10,	FY MAGI Parents/ Caretakers to 68% FPL \$40,579,330 \$3,493,028 \$854,608 \$15,798,700 \$412,486 \$34,849,323 \$27,828,568 \$34,849,328 \$412,486 \$34,849,329 \$510,705,389 \$4,528,752 \$55,005,705 \$55,035,752 \$55,035,76,481 \$588,998 \$0 \$0 \$0 \$444,664	2016-17 Janua MAGI Parents/ Caretakers 69% to 133% FPL \$25,458,988 \$2,788,137 \$654,678 \$9,523,559 \$120,027 \$16,771,52 \$19,273,381 \$23,552,771 \$5,767,453 \$3,436,406 \$44,895,083 \$34,364,066 \$44,895,083 \$48,167,242 \$639,450 \$0 \$0 \$0 \$1 \$3,999,858 \$110,127,010	ry-June CORE  MAGI Adults  \$86,783,622 \$14,624,086 \$3,130,103 \$31,708,236 \$449,948 \$\$80,087,781 \$129,156,624 \$79,053,229 \$18,145,003 \$13,710,825 \$16,97,79,650 \$15,330,420 \$19,930 \$0 \$0 \$1 \$21,95,855 \$15,97,985	Total Actuals  Breast & Cervical Cancer Program  \$527,765 \$11,616 \$3,744 \$27,222 \$0 \$5,381 \$122,836 \$152,836 \$18,244 \$180,275 \$(\$145,122) \$2,161 \$10,251 \$1,571 \$674,680 \$0 \$0 \$2,223 \$0	Eligible Children (AFDC-C/BC) \$85,520,506 \$3,162,735 \$1,041,768 \$71,872,810 \$183,725 \$24,238,865 \$63,901,966 \$47,282,677 \$4,818,324 \$11,927,111 \$66,821,914 \$68,893,941) \$2,723,834 \$16,563,431 \$39,599 \$0 \$0 \$0 \$82,025 \$823,025	SB 11-008 Eligible Children  \$10,814,679 \$371,536 \$121,914 \$14,025,222 \$32,657 \$3,251,740 \$4,949,531 \$1,421,697 \$1,146(0,934 \$187,224,470 \$4,934,531 \$1,421,697 \$4,934,531 \$1,87,22,470 \$4,934 \$1,934,	\$7,562,456 \$613,467 \$157,917 \$3,480,811 \$17,562 \$385,076 \$4,554,538 \$3,107,142 \$781,758 \$2,659,924 \$11,763,471 \$153,461 \$516,726 \$2,460 \$0 \$0 \$1 \$1,562 \$2,460 \$0 \$1,562 \$1,562 \$1,562 \$1,562 \$1,563 \$	MAGI Pregnant Adults \$14,010,743 \$498,999 \$167,805 \$1,109,016 \$44,449 \$5,699,678 \$3,209,857 \$184,917 \$4,193,946 \$4,555,676,566 \$24,565 \$0 \$(\$1) \$110,433 \$10,435	BB 11-250 Eligible Pregnant Adults Adults \$2,423,926 \$37,856 \$2,051 \$185,483 \$4,838 \$93,342 \$2,760,002 \$790,031 \$334,266 \$12,872 \$533,522 \$(550,5637) \$17,264 \$163,557 \$1,260 \$0 \$0 \$0 \$7,407 \$50	Non-Citizens- Emergency Services \$2,906,168 \$131,771 \$18,143 \$39 \$00 (\$691) \$18,707,195 \$304,019 \$66,008 \$40 \$339 \$455 \$2,464 \$58,347 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles  \$32,745 \$991 \$111 \$19,547 \$0 (\$25,023) (\$25,033) (\$25,536 \$28,6 \$25,736 \$51,750 \$0 (\$25,036) \$0 \$0 \$0 \$0	\$320,171,568 \$33,369,154 \$15,395,802 \$163,672,899 \$1,284,396 \$214,435,396 \$364,457,582 \$230,656,150 \$50,540,815 \$80,838,329 \$503,641,466 (\$448,554,531) \$7,200,137 \$53,020,369 \$26,854,416 \$674,680 \$0 \$0 \$13,782,577

					FY	2017-18 July-Г	December CORI	Total Actuals								
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Physician Services & EPSDT	\$3,398,623	\$5,825,520	\$41,855,329	\$5,077,852	\$57,621,353	\$24,358,223	\$119,798,676	\$845,670	\$97,631,482	\$11,658,022	\$8,119,954	\$16,772,783	\$3,402,443	\$3,556,884	\$0	\$399,922,814
Emergency Transportation	\$550,874	\$662,056	\$3,520,205	\$119,351	\$2,700,438	\$806,970	\$10,478,657	\$4,203	\$2,017,833	\$264,289	\$402,334	\$316,995	\$42,460	\$75,680	\$0	\$21,962,345
Non-emergency Medical Transportation  Dental Services	\$3,349,260 \$5,488,017	\$1,632,982	\$6,115,620 \$8,708,038	\$318,187 \$1,031,514	\$1,379,838 \$23,397,043	\$399,695 \$9,835,558	\$4,905,618	\$21,333 \$18,192	\$1,685,498 \$58,067,531	\$152,886 \$8,579,805	\$231,899 \$2,725,826	\$236,025 \$1,365,565	\$5,558 \$277,847	\$44,762 \$836	\$0 \$0	\$20,479,161 \$167,661,521
Family Planning	\$5,488,017	\$1,458,437 \$0	\$8,708,038	\$1,031,514	\$23,397,043	\$9,835,538	\$46,707,312 \$207	\$18,192	\$58,067,531	\$8,579,805	\$2,725,826	\$1,363,363	\$277,847	\$836	\$0 \$0	\$167,661,521
Health Maintenance Organizations	\$5,587,362	\$6,216,833	\$32,743,763	\$1,459,491	\$32,860,315	\$10,764,804	\$84,121,138	\$0	\$23,184,875	\$2,521,435	\$270,568	\$5,795,041	\$1,121,444	\$0	(\$23,289)	\$206,623,780
Inpatient Hospitals	\$9,209,196	\$7,863,452	\$52,370,295	\$3,344,202	\$31,887,103	\$12,594,558	\$126,323,728	\$113,328	\$66,999,061	\$5,519,665	\$6,371,632	\$21,700,804	\$3,956,854	\$21,988,596	\$0	\$370,242,474
Outpatient Hospitals	\$1,202,383	\$4,442,681	\$25,478,450	\$67,121	\$41,448,901	\$17,187,957	\$89,142,780	\$416,538	\$45,101,566	\$5,751,559	\$3,539,774	\$4,720,812	\$963,749	\$1,126,773	\$0	\$240,591,044
Lab & X-Ray	\$212,772	\$800,186	\$4,260,541	\$315,857	\$15,215,711	\$5,386,089	\$22,025,223	\$27,080	\$4,456,796	\$1,138,677	\$786,356	\$4,342,231	\$209,341	\$209,776	\$0	\$59,386,636
Durable Medical Equipment	\$8,869,827	\$3,587,322	\$34,920,503	\$1,154,235	\$5,259,174	\$2,361,065	\$16,772,472	\$36,889	\$13,667,020	\$1,469,755	\$3,187,098	\$231,505	\$8,716	\$1,927	\$0	\$91,527,508
Prescription Drugs	\$3,155,833	\$13,832,002	\$97,408,283	\$8,769,312	\$67,157,482	\$27,447,639	\$182,198,644	\$155,392	\$53,940,174	\$9,921,983	\$10,310,230	\$3,218,371	\$468,584	\$3,013	\$0	\$477,986,942
Drug Rebate	(\$1,906,628)	(\$8,356,743)	(\$58,850,196)	(\$5,298,068)	(\$40,573,870)	(\$16,582,768)	(\$110,077,148)	(\$93,882)	(\$32,588,500)	(\$5,994,466)	(\$6,229,030)	(\$1,944,412)	(\$283,100)	(\$1,821)	\$0	(\$288,780,632)
Rural Health Centers	\$21,741	\$139,049	\$682,287	\$26,273	\$1,529,865	\$749,159	\$2,362,452	\$5,708	\$4,007,302	\$453,982	\$181,659	\$195,197	\$5,689	\$4,455	\$0	\$10,364,818
Federally Qualified Health Centers	\$768,922	\$1,160,162	\$5,802,768	\$327,968	\$13,807,432	\$6,049,055	\$27,352,565	\$19,625	\$34,971,065	\$3,533,922	\$1,188,961	\$4,847,920	\$133,444	\$48,104	\$0	\$100,011,913
Co-Insurance (Title XVIII-Medicare)	\$11,122,912	\$1,671,219	\$6,888,761	\$3,207,246	\$577,696	\$89,387	\$543,111	\$655	\$65,717	\$7,666	\$10,072	\$25,030	\$511	\$43	\$2,866,462	\$27,076,488
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0 \$0	\$0	\$0	\$0	\$0	(\$13,156)	\$0		\$0	\$0	\$0	\$0	\$0	(\$13,156)
Administrative Service Organizations - Services Other Medical Services	\$0 \$159	\$0 \$141	\$0 \$913	\$0 \$75	\$0 \$792	\$0 \$317	\$0 \$1,981	\$0 \$5	\$0 \$1,033	\$0 \$125	\$0 \$101	\$0 \$179	\$0 \$29	\$0 \$78	\$0 \$13	\$0 \$5,941
Other Medical Services Preventive Services	\$159 \$152,264	\$141 \$298,597	\$2,019,070	\$178,486	\$6,508,199	\$317 \$2,848,140	\$1,981	\$15,337	\$1,033 \$15,287,719	\$1,500,692	\$769,707	\$1,024,616	\$29 \$54,499	\$8,787	\$13 \$0	\$40,850,993
Acute Home Health	\$2,494,098	\$983,740	\$4,864,741	\$157,837	\$541.353	\$2,848,140	\$2,453,620	\$5,342	\$582,726	\$22,402	\$200,681	\$1,024,010	\$2,340	\$0,787	\$0	\$12,668,171
Presumptive Eligibility	\$2,494,098	\$983,740	\$4,804,741	\$137,837	\$541,555	\$231,103	\$2,455,020	\$3,342	\$382,720		\$200,081	\$120,128	\$2,340	\$0	\$0	\$12,008,171
Total	\$53,677,615	\$42,217,636	\$268,789,371	\$20,256,939	\$261,319,194	\$104.527.166	\$635,295,916	\$1,578,259			\$32,067,822	\$62,976,790	\$10,370,408	\$27,067,893	\$2,843,186	\$1,958,569,493
Caseload	45,496	11.554	67,033	7,681	180,688	77,643	363,133	144	448,699	66,530	21,047	10.274	2.162	2,825	34,992	1,339,900
Half -Year Per Capita	\$1,179,84	\$3,653.94	\$4,009,80	\$2,637.45	\$1,446,25	\$1,346,26	\$1,749,48	\$10,934.82	\$867.13	\$698.97	\$1,523.67	\$6,129.72	\$4,795.93	\$9,582.69	\$81.25	\$1,461.73
					FY	2017-18 Janua	ary-June CORE	<b>Total Actuals</b>								
	Adulte 65 and	Disabled Adults	Disabled				ary-June CORE						CD 11 250	N Citi		
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
	Older (OAP-A)	60 to 64 (OAP-B)	Individuals to 59 (AND/AB)	In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	(AFDC-C/BC)	Eligible Children		Adults	Eligible Pregnant Adults	Emergency Services	Eligibles	
Physician Services & EPSDT	Older (OAP-A) \$2,869,772	60 to 64 (OAP-B) \$5,159,336	Individuals to 59 (AND/AB) \$40,705,809	In \$4,470,879	MAGI Parents/ Caretakers to 68% FPL \$51,372,025	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554	MAGI Adults \$97,451,137	Breast & Cervical Cancer Program \$583,453	(AFDC-C/BC) \$103,616,698	Eligible Children \$11,461,730	\$9,205,596	Adults \$13,117,825	Eligible Pregnant Adults \$3,245,060	Emergency Services \$3,470,567	Eligibles \$0	\$365,584,441
Physician Services & EPSDT Emergency Transportation	Older (OAP-A) \$2,869,772 \$972,350	60 to 64 (OAP-B) \$5,159,336 \$995,110	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820	\$4,470,879 \$207,717	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083	MAGI Adults \$97,451,137 \$14,834,702	Breast & Cervical Cancer Program \$583,453 \$4,422	(AFDC-C/BC) \$103,616,698 \$3,262,281	\$11,461,730 \$394,072	\$9,205,596 \$668,218	Adults \$13,117,825 \$326,153	Eligible Pregnant Adults \$3,245,060 \$13,593	Emergency Services \$3,470,567 \$127,325	Eligibles \$0 \$0	\$365,584,441 \$31,676,659
Physician Services & EPSDT	Older (OAP-A) \$2,869,772	60 to 64 (OAP-B) \$5,159,336	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531	In \$4,470,879	MAGI Parents/ Caretakers to 68% FPL \$51,372,025	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554	MAGI Adults \$97,451,137	Breast & Cervical Cancer Program \$583,453	(AFDC-C/BC) \$103,616,698	Eligible Children \$11,461,730	\$9,205,596	Adults \$13,117,825	Eligible Pregnant Adults \$3,245,060	Emergency Services \$3,470,567	Eligibles \$0	\$365,584,441
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820	\$4,470,879 \$207,717 \$392,084	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364	MAGI Adults \$97,451,137 \$14,834,702 \$6,102,871	Breast & Cervical Cancer Program \$583,453 \$4,422 \$4,519	\$103,616,698 \$3,262,281 \$2,341,126	\$11,461,730 \$394,072 \$181,651	\$9,205,596 \$668,218 \$272,675	\$13,117,825 \$326,153 \$257,342	\$3,245,060 \$13,593 \$8,542	Services \$3,470,567 \$127,325 \$55,419	\$0 \$0 \$0	\$365,584,441 \$31,676,659 \$24,787,652
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$99,724,845	Breast & Cervical Cancer Program \$583,453 \$4,422 \$4,519 \$19,504	(AFDC-C/BC) \$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125	\$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964	\$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529	Eligible Pregnant Adults  \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240	\$0 \$0 \$0 \$0	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,224,268	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,500	Breast & Cervical Cancer Program \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949	(AFDC-C/BC) \$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442	\$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905 \$3,233,878	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957	\$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529 \$22,622,512	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,224,268 \$1,616,249	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,824,989	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$14,341,951 \$11,922,184	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$990,724,845 \$152,388,500 \$70,557,435	Breast & Cervical Cancer Program \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496	(AFDC-C/BC) \$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097	Eligible Children \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297	Adults \$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529 \$22,622,512 \$4,370,047	Eligible Pregnant Adults  \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$0 \$0 \$1,080	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,224,268 \$1,616,249 \$302,575	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,824,989 \$13,238,017	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$14,341,951 \$11,922,184 \$3,996,687	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,696	Breast & Cervical Cancer Program  \$5583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496 \$30,889	(AFDC-C/BC) \$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383	Eligible Children \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423	Adults \$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$0 \$10,680 \$10,680	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7,265,359	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,224,268 \$1,616,249 \$302,575 \$1,280,326	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,580,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,824,899 \$13,238,017 \$4,640,490	MAGI Parents/ Caretakers 69% to 133% FPL 518,854,554 \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$14,341,951 \$11,922,184 \$3,996,687 \$1,941,195	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,996 \$14,794,399	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496 \$30,889 \$28,375	(AFDC-C/BC) \$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,093 \$2,550,383 \$13,039,592	Eligible Children  \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733	Adults  \$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751 \$83,397,006
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7,265,359 \$3,099,965	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$10,6(19,385	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,224,268 \$1,1616,249 \$302,575 \$1,280,326 \$11,565,237	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815	MAGI Parents/ Caretakers 69% to 133% FPL \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$1,814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496 \$30,889 \$28,375 \$19,30,34	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499	Eligible Children \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638 \$12,932,277	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171	Adults \$13,117,825 \$326,153 \$257,342 \$362,785 \$63,48,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$10,680 \$10,680 \$5 \$0 \$628,481	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751 \$83,397,006 \$512,861,805
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray  Durable Medical Equipment Prescription Drugs Drug Rebate	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7,265,359 \$3,099,965 \$(\$1,006,011)	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,902,893 \$7,120,825 \$12,779,752 \$3,779,552 \$3,779,552 \$3,779,564 \$5,134,733 \$15,769,465 \$8,264,518)	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 (555,711,594)	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,242,68 \$1,616,249 \$302,575 \$1,280,326 \$11,565,237 \$(5,119,807)	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$36,616,996)	MAGI Parents/ Caretakers 69% to 133% FPL. \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$544 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$18,14 \$90,724,845 \$152,388,500 \$70,557,457 \$18,576,696 \$14,794,399 \$192,039,903 \$(5100,058,264)	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496 \$30,889 \$28,375 \$193,634 (\$102,097)	(AFDC-C/BC) \$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$30,711,037,	Eligible Children \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638 \$12,932,277 \$(\$6,838,230)	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 \$(\$5,671,653)	\$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529 \$2,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$(1,376,723)	Eligible Pregnant Aduts \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,780 \$212,806 \$6,806 \$451,350 (\$233,444)	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153)	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751 \$83,397,006 \$512,861,805 \$267,582,179)
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7265,359 \$3,099,965 (\$1,606,011) \$43,788	60 to 64 (OAP-B) \$5,150,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 (\$8,264,518) \$208,115	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 (\$55,711,594) \$922,422	\$4,470,879 \$207,717 \$207,717 \$320,84 \$1,422,540 \$0 \$1,884,2540 \$1,616,249 \$5,224,268 \$1,616,249 \$1,280,326 \$1,1865,237 \$4,7660	MAGI Parents/ Caretakers to 68% FPL 551,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,133 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$36,616,996) \$22,261,804	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$14,341,951 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 (\$13,918,759) \$11,595,684	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,576,696 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 (\$100,558,264) \$3,383,897	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$333,949 \$142,496 \$30,889 \$28,375 \$193,634 \$(102,097) \$10,274	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$50,0286	Eligible Children  \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$1,24 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638 \$1,293,277 \$(\$6,838,230) \$736,592	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 (\$5,671,653) \$248,500	\$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$5,348,529 \$22,622,512 \$4,370,047 \$138,542 \$2,696,371 \$(\$1,376,723) \$2,292,259	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$33,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 \$451,350 \$1,0552	Emergency Services \$3,470,567 \$127,325 \$55,419 \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 \$(\$15)	\$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751 \$83,397,006 \$512,861,805 \$(\$267,582,179) \$15,298,537
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$1,49,491 \$7,265,359 \$2,099,965 \$1,006,011) \$43,788	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,902,893 \$1,20,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 (\$8,264,518) \$208,115 \$1,044,105	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 (\$55,711,594) \$922,422	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,183,492 \$5,224,268 \$1,616,249 \$302,575 \$1,280,326 \$11,565,237 \$(56,119,807) \$47,060 \$358,456	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$32,034 \$35,648,175 \$39,289,913 \$35,5824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$36,616,996) \$2,261,804 \$10,552,884	MAGI Parents/ Caretakers 69% to 133% FPL \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$11,962,718 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759 \$13,959,684 \$4,163,349	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$18,1814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 (\$100,058,264) \$20,767,811	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$30,889 \$133,494 \$30,889 \$142,496 \$30,889 \$19,30,40 \$102,097) \$10,274 \$11,013	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,3799,125 \$1,091 \$23,799,125 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$6,600,286 \$23,690,411	Eligible Children  \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$124 \$2,429,905 \$32,333,878 \$6,397,639 \$1,221,872 \$1,468,638,230) \$736,592 \$2,409,248	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 (\$5,671,653) \$248,500	\$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$(\$1,376,723) \$292,259 \$2,937,199	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 (\$233,444) \$16,552 \$133,966	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153) \$7,304	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$47,924,751 \$83,397,006 \$512,861,805 \$(\$267,582,179) \$15,298,537 \$72,596,532
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicare)	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7,265,359 \$3,099,965 \$(1,606,011) \$43,788 \$895,427 \$27,955,214	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 \$(\$8,264,518) \$208,115 \$1,014,508	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$32,09,816 \$32,788,932 \$106,619,385 \$922,422 \$4,841,752 \$17,385,071	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,224,268 \$1,1616,249 \$302,575 \$1,280,326 \$11,365,237 \$47,060 \$358,456 \$3,368,376 \$3,368,376	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$36,616,996) \$2,261,804 \$10,552,884 \$1,703,674	MAGI Parents/ Caretakers 69% to 133% FPL 518,854,554 \$1,014,083 \$524,364 \$6,433,131 \$14,960,713 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759 \$1,059,684 \$4,163,349 \$1,163,449 \$1,163,449 \$1,163,449	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,874 \$1,814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,660 \$14,794,399 \$192,039,903 \$(5100,058,264) \$3,383,897 \$20,767,811 \$1,320,220	Breast & Cervical Cancer Program  \$5883,453 \$4,422 \$4,519 \$19,504 \$0 \$133,949 \$1142,496 \$30,889 \$28,375 \$193,634 (\$102,097) \$10,274 \$14,013 \$11,560	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$63,071,052 \$6,060,286 \$13,278	Eligible Children \$11,461,730 \$394,072 \$1818,651 \$17,308,066 \$124 \$2,429,005 \$3,233,878 \$6,937,639 \$1,221,872 \$1,468,638 \$1,203,277 \$(\$6,838,230) \$736,592 \$2,409,248 \$1,872	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 \$5,671,653) \$248,500 \$780,374 \$31,803	\$13,117,825 \$326,153 \$326,153 \$357,342 \$362,785 \$544 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$(\$1,376,25) \$292,259 \$292,259 \$34,525	Eligible Pregnant Adults  \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 (\$233,444) \$16,552 \$13,3966 \$1,333	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153) \$7,304 \$37,604 \$127	\$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$10,680 \$10,680 \$10,580 \$0 \$1352,893 \$0 \$352,893 \$8,802,144	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751 \$83,397,006 \$512,861,805 \$267,582,179) \$115,298,537 \$72,596,532 \$65,924,026
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$1,49,491 \$7,265,359 \$2,099,965 \$1,006,011) \$43,788	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,902,893 \$1,20,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 (\$8,264,518) \$208,115 \$1,044,105	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 (\$55,711,594) \$922,422	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,1883,492 \$5,224,268 \$1,616,249 \$302,575 \$1,280,326 \$11,565,237 \$(56,119,807) \$47,060 \$358,456	MAGI Parents/ Caretakers to 68% FPL \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$32,034 \$35,648,175 \$39,289,913 \$35,5824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$36,616,996) \$2,261,804 \$10,552,884	MAGI Parents/ Caretakers 69% to 133% FPL \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$11,962,718 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759 \$13,959,684 \$4,163,349	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$18,1814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 (\$100,058,264) \$20,767,811	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$30,889 \$133,494 \$30,889 \$142,496 \$30,889 \$19,30,40 \$102,097) \$10,274 \$11,013	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,3799,125 \$1,091 \$23,799,125 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$6,600,286 \$23,690,411	Eligible Children  \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$1,24 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638 \$1,293,2,277 (\$6,838,230) \$7376,592 \$2,409,248 \$18,722 \$50	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 (\$5,671,653) \$248,500	\$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$(\$1,376,723) \$292,259 \$2,937,199	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 (\$233,444) \$16,552 \$133,966	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153) \$7,304	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$47,924,751 \$83,397,006 \$512,861,805 \$(\$267,582,179) \$15,298,537 \$72,596,532
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7265,359 \$3,099,965 \$(\$1,006,011) \$43,788 \$895,427 \$27,955,214	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 (\$8,264,518) \$208,115 \$1,014,105 \$4,612,508	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 \$(55,711,594) \$922,442 \$4,841,752 \$17,385,071	\$4,470,879 \$207,717 \$207,717 \$320,84 \$1,422,540 \$0 \$1,884,2540 \$1,522,4268 \$1,616,249 \$302,575 \$12,80,326 \$11,565,237 (\$6,119,807) \$47,060 \$358,456 \$3,768,373 \$0	MAGI Parents/ Caretakers to 68% FPL  \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,173 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$(36,616,996) \$2,261,804 \$10,552,884 \$1,703,674	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$1,1960,713 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 \$1,059,684 \$4,163,349 \$156,477 \$7	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,576,696 \$14,794,399 \$192,039,903 \$(\$100,058,264) \$3,383,876,697 \$20,767,811 \$1,320,220 \$0	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$333,949 \$142,496 \$33,889 \$228,375 \$193,634 \$(102,097) \$10,274 \$14,013 \$1,500 \$(\$9,377)	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$6,060,286 \$23,690,411 \$132,278 \$50,283 \$50,285 \$	Eligible Children \$11,461,730 \$394,072 \$181,165 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638 \$12,932,277 (\$6,838,230) \$736,592 \$2,409,248 \$18,722 \$0 \$0	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 (\$5,671,653) \$248,600 \$780,374 \$31,803 \$31,803 \$31,803	Adults \$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$54 \$5,348,529 \$22,622,512 \$4,370,047 \$3138,542 \$2,696,371 \$(\$1,376,723) \$2,259 \$2,37,199 \$2,337,199 \$34,525 \$34,525	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 (\$233,444) \$1(,652) \$133,966 \$1,330 \$5,90	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153) \$1,340 \$1,	Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$10,680 \$50,50 \$628,481 \$52,893 \$(\$552,893) \$88,802,144	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$212,597,086 \$312,861,805 \$252,479 \$15,298,537 \$72,596,532 \$65,924,026 \$9,377)
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Federally Capting Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7,265,359 \$1,006,011) \$43,788 \$895,427 \$27,955,214 \$0 \$0	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,902,893 \$1,20,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 \$208,115 \$1,014,105 \$4,612,508 \$0	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 (\$55,711,594) \$922,422 \$4,841,752 \$17,385,071	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,492 \$5,224,268 \$1,616,249 \$302,575 \$11,565,237 \$6,119,807) \$47,060 \$3358,456 \$3,768,373 \$0 \$0	MAGI Parents/ Caretakers to 68% FPL  \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,5824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$(336,616,996) \$2,261,804 \$10,552,884 \$1,703,674 \$0 \$0	MAGI Parents/ Caretakers 69% to 133% FPL  \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$11,962,718 \$3,996,687 \$11,922,184 \$3,996,687 \$15,941,195 \$26,873,749 \$13,918,759 \$1,059,684 \$4,163,349 \$156,477 \$0 \$50	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 (\$100,058,264) \$33,38,897 \$20,767,811 \$1,320,220 \$0 \$0	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496 \$30,889 \$28,375 \$193,634 (\$102,097) \$10,274 \$14,013 \$1,560 (\$93,377) \$0	\$103,616,698 \$3,262,281 \$2,341,262 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,259,383 \$13,039,592 \$58,792,499 \$30,711,037 \$6,060,286 \$23,690,41 \$132,278 \$0	Eligible Children \$11,461,730 \$394,072 \$1811,615 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$63,397,639 \$11,221,872 \$1468,638 \$12,932,277 \$(\$6,838,230) \$736,592 \$2,409,248 \$18,722 \$0 \$0	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$60,43,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 \$5,671,653 \$248,500 \$780,374 \$31,803 \$0 \$0	\$13,117,825 \$326,153 \$257,342 \$362,785 \$544 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$1,376,723) \$292,259 \$2,993,7199 \$34,525 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$451,350 (\$233,444) \$16,552 \$1333,966 \$1,330 \$0	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153) \$7,304 \$37,604 \$127 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$55,280 \$224,445,333 \$422,637,858 \$47,924,751 \$83,397,006 \$512,861,805 \$(\$267,582,179) \$15,298,537 \$72,596,532 \$65,924,026 \$(\$9,377) \$0
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicare)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services  Other Medical Services	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7,265,359 \$3,099,965 \$1,606,011 \$43,788 \$895,427 \$27,955,214 \$0 \$0 \$0	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$3,179,536 \$601,566 \$3,134,733 \$15,769,465 \$28,264,518) \$208,115 \$1,014,105 \$0 \$0 \$20 \$20 \$20 \$20 \$20 \$20 \$20 \$20 \$	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 \$(\$55,711,594) \$922,422 \$4,841,752 \$17,385,071 \$0 \$0 \$51,336	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$1,822,540 \$5,224,268 \$1,188,362 \$5,224,268 \$1,1616,249 \$302,575 \$1,280,326 \$11,565,237 \$(56,119,807) \$47,060 \$358,456 \$3,768,373 \$0 \$0 \$1	MAGI Parents/ Caretakers to 68% FPL  \$51,372,025 \$3,680,813 \$1,536,408 \$2,034 \$35,548,175 \$39,289,913 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$(36,616,996) \$2,261,804 \$10,552,884 \$1,703,674 \$0 \$0 \$1,1411	MAGI Parents/ Caretakers 69% to 133% FPL 518,854,554 \$1,014,083 \$524,364 \$6,433,131 \$14,341,951 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759 \$1,059,684 \$4,163,349 \$156,477 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$433	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,874 \$1,814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 \$(5100,058,264) \$3,383,897 \$20,767,811 \$1,320,220 \$0 \$0 \$2,797	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$133,949 \$142,496 \$30,889 \$28,375 \$193,634 (\$102,097) \$10,274 \$14,013 \$1,560 (\$9,377) \$0 \$55	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$30,711,050 \$30,711,050 \$0,500 \$0,500 \$0,500 \$13,278 \$0,500 \$0,500 \$1,795	Eligible Children  \$11,461,730 \$394,072 \$1818,651 \$17,308,066 \$124 \$2,429,050 \$3,233,878 \$6,397,639 \$1221,872 \$1,468,638 \$12,932,277 \$(\$6,838,230) \$736,592 \$2,409,248 \$18,722 \$0 \$0 \$238	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 \$55,671,653) \$248,500 \$780,374 \$31,803 \$0 \$0 \$100	Adults \$13,117,825 \$326,153 \$326,153 \$257,342 \$362,785 \$544 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$(\$1,376,25) \$292,259 \$2,937,199 \$34,525 \$0 \$0 \$0	Eligible Pregnant Adults  \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 \$(233,444) \$16,552 \$133,966 \$1,330 \$0 \$0 \$50 \$538	Emergency Services \$3,3470,567 \$127,325 \$55,419 \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 \$15,304 \$17,304 \$127 \$0 \$0 \$0 \$1,240	\$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$11,080 \$10,680 \$12,080 \$0 \$628,481 \$352,893 \$0 \$628,481 \$352,893 \$0 \$0 \$352,893 \$0 \$0 \$352,893 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751 \$83,397,006 \$512,861,805 \$(267,582,179) \$15,298,537 \$72,596,532 \$65,924,026 \$8,894
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Services Other Medical Services Preventive Services	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7265,359 \$3,099,965 \$(51,606,011) \$43,788 \$895,427 \$27,955,214 \$0 \$0 \$0 \$1266,626	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 (\$8,264,518) \$208,115 \$1,014,105 \$4,612,508 \$0 \$225 \$276,711	Individuals to 59 (AND/AB) \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 (\$55,711,594) \$922,422 \$4,841,752 \$17,385,01 \$0 \$0 \$1,336	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,092 \$5,224,268 \$1,616,249 \$302,575 \$1,280,326 \$11,565,237 \$47,060 \$358,456 \$3,768,373 \$0 \$1,280,358 \$2,358,456 \$3,768,373 \$0 \$1,280,358 \$2,358,456 \$3,768,373 \$0 \$1,280,358 \$2,280,280 \$2,280 \$	MAGI Parents/ Caretakers to 68% FPL  \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,913 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$(35,616,996) \$1,261,804 \$10,552,884 \$1,703,674 \$0 \$0 \$1,141 \$5,671,499	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759 \$1,059,684 \$4,163,349 \$156,477 \$0 \$0 \$0 \$433 \$2,312,123	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,505 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 \$(\$10,058,264) \$3,383,836,76,76 \$13,20,220 \$0 \$0 \$0 \$2,797 \$9,242,392	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496 \$30,889 \$228,375 \$193,634 (\$102,097) \$10,274 \$14,013 \$1,560 (\$9,377) \$0 \$0 \$7,398	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$51,066,097 \$58,792,499 \$371,1037 \$6,060,286 \$23,690,411 \$132,278 \$0 \$0 \$1,295 \$1,266	Eligible Children \$11,461,730 \$394,072 \$181,615 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638 \$12,932,277 \$(56,588,230) \$736,592 \$2,409,248 \$18,722 \$0 \$0,987 \$238 \$901,987 \$555,294	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 (\$5,671,653) \$248,500 \$780,374 \$31,803 \$0 \$152 \$667,029	Adults \$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$54 \$5,348,529 \$22,622,512 \$4,370,047 \$3138,542 \$2,696,371 \$(\$1,376,723) \$34,525 \$0 \$0 \$0 \$10 \$10,0000000000000000000000	Eligible Pregnant Adults \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$33,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 (\$233,444) \$1(,655) \$133,966 \$1,330 \$0 \$0 \$0 \$5,00 \$1,330 \$0 \$5,00 \$1,340 \$1,05452 \$1,0542 \$1,05452 \$1,05452 \$1,05452 \$1,05452 \$1,05452 \$1,05452 \$1,0545	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153) \$13,044 \$37,604 \$127 \$0 \$0 \$0 \$1,240 \$1,240 \$13,042,552 \$13,042 \$13,042 \$13,042 \$13,042 \$14,042	Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$10,680 \$528,481 \$52,893 \$67 \$8,802,144 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,888 \$47,924,751 \$83,397,006 \$512,861,805 \$(\$267,582,179) \$15,298,537 \$772,596,532 \$65,924,026 \$8,894 \$34,824,253
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services Preventive Services Acute Home Health Presumptive Eligibility Total	Older (OAP-A) \$2,869,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7265,353 \$3,099,965 \$(\$1,006,011) \$43,788 \$895,427 \$27,955,214 \$0 \$0 \$126,626 \$4,015,337	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$601,566 \$3,134,733 \$15,769,465 (\$8,264,518) \$208,115 \$1,014,105 \$4,612,508 \$0 \$225 \$276,711 \$1,849,774	Individuals to 59 (AND/AB)  \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,234 \$59,271,773 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 (S55,711,594) \$922,422 \$4,841,752 \$17,385,071 \$0 \$0 \$1,935,861 \$1,952,861 \$7,635,914 \$0,90 \$300,741,174	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,822,540 \$1,822,4268 \$1,616,249 \$302,575 \$1,280,326 \$11,565,237 \$47,060 \$358,456 \$3,768,373 \$0 \$0 \$12,800,326 \$1,900,326	MAGI Parents/ Caretakers to 68% FPL  \$51,372,025 \$3,680,813 \$1,536,408 \$11,797,314 \$2,034 \$35,648,175 \$39,289,133 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$(36,616,996) \$2,261,804 \$10,552,884 \$1,703,674 \$0 \$0 \$0 \$1,141 \$5,671,499 \$945,946	MAGI Parents/ Caretakers 69% to 133% FPL \$18,854,554 \$1,014,083 \$524,364 \$6,433,131 \$54 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759) \$1,059,684 \$4,163,349 \$156,477 \$0 \$0 \$0 \$433 \$2,312,123 \$359,771 \$359,771	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,878 \$1,814 \$90,724,845 \$152,388,505 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 \$(510,058,264) \$3,383,879 \$20,767,811 \$1,320,220 \$0 \$0 \$2,797 \$9,242,392 \$3,958,656 \$615,891,689	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$0 \$133,949 \$142,496 \$30,889 \$228,375 \$119,634 \$(8102,097) \$10,274 \$14,013 \$1,560 \$(\$9,377) \$0 \$5 \$7,398 \$2,881 \$0 \$1,065,598	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$51,066,097 \$58,792,499 \$58,792,499 \$58,792,499 \$132,278	Eligible Children  \$11,461,730 \$394,072 \$181,651 \$17,308,066 \$1,24 \$1,24 \$2,429,905 \$2,323,878 \$6,397,639 \$1,221,872 \$1,468,638 \$1,293,277 \$16,838,230 \$736,592 \$2,409,248 \$18,722 \$0 \$0 \$0 \$23,8 \$901,987 \$55,294 \$59,987	\$9,205,596 \$668,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$10,884,171 (\$5,671,653) \$248,500 \$780,374 \$31,803 \$0 \$152 \$667,029 \$342,426 \$0 \$0 \$342,426	Adults \$13,117,825 \$326,153 \$257,342 \$362,785 \$54 \$54 \$5,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$3,152,920 \$34,525 \$0 \$0 \$0 \$216 \$739,219 \$133,451 \$0 \$56,153,226	Eligible Pregnant Adults  \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 (\$233,444) \$16,552 \$133,966 \$1,330 \$0 \$0 \$0 \$5,806 \$4,506 \$1,300 \$1,300 \$0 \$0 \$5,806 \$1,300 \$0 \$0 \$0 \$0 \$5,806 \$1,300 \$0 \$0 \$0 \$0 \$0 \$5,806 \$1,300 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Emergency Services \$3,470,567 \$127,325 \$55,419 (\$417) \$0 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 (\$153) \$137,304 \$37,604 \$127 \$0 \$87 \$8,803 \$1,126 \$8,803 \$1,126 \$8,803 \$1,126 \$8,803 \$1,126 \$8,803 \$1,126	Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,080 \$10,680 \$510,680 \$628,481 \$(\$352,893) \$677 \$8,802,144 \$0 \$0 \$0 \$0 \$59,087,286	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$5,280 \$224,445,333 \$422,637,858 \$47,924,751 \$83,397,006 \$512,861,805 (\$267,582,179) \$15,298,537 \$72,596,532 \$65,924,026 (\$9,377) \$0 \$8,843,24,253 \$20,932,497 \$34,824,253 \$20,932,497 \$20,932,497
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services Preventive Services Acute Home Health Presumptive Eligibility	Older (OAP-A) \$2,889,772 \$972,350 \$3,731,227 \$4,723,661 \$0 \$6,347,967 \$8,883,968 \$1,437,361 \$149,491 \$7,265,359 \$3,099,965 \$1,527,955,214 \$0 \$0 \$1,527,955,214 \$1,527,955,2	60 to 64 (OAP-B) \$5,159,336 \$995,110 \$1,902,893 \$1,981,972 \$0 \$7,120,825 \$12,779,752 \$3,779,536 \$3,379,536 \$3,3134,733 \$15,769,465 \$208,115 \$1,014,105 \$0 \$0 \$208,115 \$1,014,105 \$0 \$228,115 \$276,711 \$1,849,774	Individuals to 59 (AND/AB)  \$40,705,809 \$5,175,820 \$7,476,531 \$11,867,720 \$0 \$36,728,50 \$3,209,816 \$32,208,932 \$106,619,385 \$15,207,173 \$19,869,392 \$3,209,816 \$32,788,932 \$106,619,385 \$15,385,071 \$0 \$1,336 \$1,952,861 \$7,635,914	\$4,470,879 \$207,717 \$392,084 \$1,422,540 \$0 \$1,883,092 \$5,224,268 \$1,616,249 \$302,575 \$1,280,326 \$11,565,237 \$47,060 \$358,456 \$3,768,373 \$0 \$1,280,358 \$2,358,456 \$3,768,373 \$0 \$1,280,358 \$2,358,456 \$3,768,373 \$0 \$1,280,358 \$2,280,280 \$2,280 \$	MAGI Parents/ Caretakers to 68% FPL  \$51,372,025 \$3,680,813 \$1,536,408 \$2,034 \$35,548,175 \$39,289,913 \$35,824,989 \$13,238,017 \$4,640,490 \$70,314,815 \$(36,616,996) \$2,261,804 \$10,552,884 \$1,703,674 \$0 \$0 \$1,1411 \$5,671,499	MAGI Parents/ Caretakers 69% to 133% FPL 518,854,554 \$1,014,083 \$524,364 \$6,433,131 \$544 \$11,960,713 \$11,922,184 \$3,996,687 \$1,941,195 \$26,873,749 \$13,918,759 \$1,059,684 \$4,163,349 \$156,477 \$0 \$0 \$433 \$2,312,123 \$359,771	MAGI Adults  \$97,451,137 \$14,834,702 \$6,102,871 \$19,801,874 \$19,801,874 \$19,801,874 \$151,814 \$90,724,845 \$152,388,500 \$70,557,435 \$18,576,696 \$14,794,399 \$192,039,903 \$(5100,058,264) \$33,83,897 \$20,767,811 \$1,320,220 \$0 \$0 \$2,797 \$9,242,392 \$3,958,656 \$6	Breast & Cervical Cancer Program  \$583,453 \$4,422 \$4,519 \$19,504 \$0 \$133,949 \$142,496 \$30,889 \$28,375 \$193,634 \$(102,097) \$10,274 \$14,013 \$1,560 \$55 \$7,398 \$2,581 \$80	\$103,616,698 \$3,262,281 \$2,341,126 \$79,663,397 \$1,091 \$23,799,125 \$74,718,442 \$51,066,097 \$2,550,383 \$13,039,592 \$58,792,499 \$30,711,050 \$0,500,286 \$13,278 \$0,500,286 \$13,278	Eligible Children \$11,461,730 \$394,072 \$181,615 \$17,308,066 \$124 \$2,429,905 \$3,233,878 \$6,397,639 \$1,221,872 \$1,468,638 \$12,24,2932,277 \$(\$6,583,8,230) \$736,592 \$2,409,248 \$18,722 \$0 \$238 \$901,987 \$555,294 \$0 \$50 \$50 \$554,313,703 \$6,162	\$9,205,596 \$68,218 \$272,675 \$3,725,886 \$109 \$292,964 \$6,043,957 \$3,830,297 \$542,423 \$2,868,733 \$10,884,171 \$5,671,653) \$248,500 \$780,374 \$31,803 \$0 \$152 \$667,029 \$342,426	\$13,117,825 \$326,153 \$257,342 \$362,785 \$544 \$6,348,529 \$22,622,512 \$4,370,047 \$3,152,920 \$138,542 \$2,696,371 \$(1,376,72) \$292,259 \$293,71,199 \$0 \$0 \$1 \$1,525 \$1,52	Eligible Pregnant Adults  \$3,245,060 \$13,593 \$8,542 \$49,897 \$0 \$1,160,399 \$3,762,443 \$1,068,789 \$212,806 \$6,806 \$451,350 \$16,552 \$133,966 \$1,330 \$0 \$0 \$53 \$53 \$53 \$542,840 \$538 \$542,840	Emergency Services \$3,3470,567 \$127,325 \$55,419 \$40 \$1,240 \$19,942,552 \$703,897 \$138,626 \$886 \$503 \$(\$153) \$7,304 \$37,604 \$127 \$0 \$0 \$80 \$87 \$88,803 \$1,126	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$365,584,441 \$31,676,659 \$24,787,652 \$159,157,334 \$52,280 \$224,445,333 \$422,637,858 \$212,597,088 \$47,924,751 \$83,397,006 \$512,861,805 (\$267,582,179) \$15,298,537 \$72,596,532 \$65,924,026 \$8,894 \$34,824,253 \$20,932,497 \$0

					FY	2018-19 July-E	ecember COR	E Total Actuals	1							
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Physician Services & EPSDT	\$3,031,445	\$6,817,810	\$57,919,805	\$6,702,907	\$58,629,051	\$20,601,887	\$122,712,154	\$334,080	\$99,343,112	\$11,322,932	\$10,198,612	\$17,391,427	\$3,425,844	\$3,329,887	\$0	\$421,760,953
Emergency Transportation	\$670,129	\$746,926	\$3,556,522	\$152,291	\$2,430,381	\$573,988	\$9,996,574	\$1,129	\$1,922,806	\$249,115	\$446,860	\$328,931	\$11,287	\$97,485	\$0	\$21,184,424
Non-emergency Medical Transportation	\$4,258,871	\$2,238,851	\$8,610,481	\$494,969	\$1,795,922	\$456,098	\$7,260,332	\$1,681	\$2,042,986	\$154,223	\$282,880	\$439,034	\$8,930	\$55,036	\$0	\$28,100,294
Dental Services Family Planning	\$6,145,097 \$0	\$1,688,574 \$0	\$9,544,996 (\$107)	\$1,261,601 \$0	\$24,602,517 (\$13,617)	\$9,638,468 (\$8,748)	\$45,932,835 (\$30,554)	\$21,243 \$0	\$57,681,239 (\$7,310)	\$8,019,667 (\$2,269)	\$3,041,728 \$106	\$1,619,601 (\$1,212)	\$310,777 (\$181)	\$1,977 \$0	(\$44) \$0	\$169,510,276 (\$63,892)
Health Maintenance Organizations	\$6,699,286	\$7,489,096	\$36,619,257	\$2,011,922	\$31,357,896	\$8,090,899	\$84,753,679	\$14,644	\$20,004,277	\$2,256,275	\$657,612	\$7,372,888	\$1,413,241	\$2,819	(\$43,630)	\$208,700,161
Inpatient Hospitals	\$10,249,777	\$11,733,578	\$53,344,045	\$5,931,597	\$33,699,760	\$8,922,531	\$136,497,415	\$108,848	\$75,639,712	\$3,290,349	\$6,490,291	\$24.187.697	\$3,535,081	\$18,583,133	(\$43,030)	\$392,213,814
Outpatient Hospitals	\$1,216,641	\$4.024.013	\$24,879,480	\$3,557,413	\$34,838,626	\$12,370,599	\$74,878,308	\$361,509	\$40,429,521	\$5,107,535	\$3,403,649	\$4,579,588	\$944.860	\$604,579	\$0	\$211,196,321
Lab & X-Ray	\$216,529	\$963,310	\$4,750,142	\$363,268	\$15,139,725	\$4,401,116	\$23,979,304	\$31,734	\$4,228,247	\$1,045,013	\$687,722	\$4,617,868	\$254,942	\$130,884	\$0	\$60,809,804
Durable Medical Equipment	\$5,580,168	\$2,343,554	\$32,506,196	\$1,275,542	\$3,278,816	\$1,189,997	\$10,004,294	\$3,789	\$11,990,947	\$1,393,425	\$3,298,202	\$226,175	\$8,854	\$2,512	\$0	\$73,102,471
Prescription Drugs	\$2,659,395	\$15,260,412	\$106,436,354	\$11,140,298	\$66,992,148	\$23,974,890	\$182,615,015	\$196,513	\$49,085,048	\$10,304,531	\$8,996,669	\$3,876,459	\$429,961	\$92	\$494,256	\$482,462,041
Drug Rebate	(\$1,685,180)	(\$9,670,073)	(\$67,445,581)	(\$7,059,279)	(\$42,450,950)	(\$15,192,181)	(\$115,717,753)	(\$124,525)	(\$31,103,748)	(\$6,529,678)	(\$5,700,924)	(\$2,456,398)	(\$272,454)	(\$58)	(\$313,195)	(\$305,721,977)
Rural Health Centers	\$28,801	\$215,629	\$978,809	\$57,180	\$2,365,436	\$1,064,264	\$3,350,107	\$9,035	\$6,089,899	\$749,820	\$311,270	\$491,250	\$17,791	\$15,041	\$0	\$15,744,332
Federally Qualified Health Centers	\$839,662	\$1,297,069	\$6,069,099	\$417,487	\$12,638,831	\$4,787,198	\$26,171,449	\$13,241	\$30,226,631	\$3,165,775	\$1,069,371	\$4,871,649	\$135,797	\$35,580	(\$322)	\$91,738,517
Co-Insurance (Title XVIII-Medicare)	\$17,272,407	\$2,973,342	\$10,902,694	\$2,167,326	\$1,130,834	\$85,594	\$850,462	\$1,144	\$76,016	\$18,653	\$23,085	\$39,867	\$955	\$176	\$5,906,912	\$41,449,467
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Service Organizations - Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0
Other Medical Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Preventive Services	\$115,137	\$282,338	\$1,959,188	\$216,344	\$5,722,785	\$2,204,851	\$9,034,720	\$21,440		\$1,290,121	\$788,768	\$1,001,242	\$40,638	\$7,657	\$0	\$37,452,749
Acute Home Health	\$2,057,820	\$518,928	\$9,817,087	\$242,796	\$75,435	\$17,428	\$333,774	\$0	\$1,620,810	\$9,889	\$714,081	\$12,589	\$90	\$0	\$0	\$15,420,727
Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$59,355,985	\$48,923,357	\$300,448,467	\$28,933,662	\$252,233,596	\$83,178,879	\$622,622,115	\$995,505	\$384,037,713	\$41,845,376	\$34,709,982	\$68,598,655	\$10,266,413	\$22,866,800	\$6,043,977	\$1,965,060,482
Caseload	47,502	12,628	68,984	8,710	179,891	66,859	338,225	152	425,038	60,624	21,912	12,288	2,322	2,655	34,999	1,282,787
Half -Year Per Capita	\$1,249.54	\$3,874.35	\$4,355.31	\$3,322.02	\$1,402.15	\$1,244.10	\$1,840.85	\$6,542.20	\$903.54	\$690.24	\$1,584.09	\$5,582.42	\$4,422.32	\$8,613.27	\$172.69	\$1,531.87
					FY	2018-19 Janua	ry-June CORE	. LOTAL ACTUAIS								
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ACUTE CARE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
ACUTE CARE  Physician Services & EPSDT	Older	60 to 64	Individuals to 59		Caretakers to	Caretakers 69%	MAGI Adults \$84,802,328	Breast & Cervical Cancer			Foster Care \$9,422,270		Eligible Pregnant Adults	Emergency		TOTAL \$336,774,727
	Older (OAP-A)	60 to 64 (OAP-B)	Individuals to 59 (AND/AB)	In	Caretakers to 68% FPL	Caretakers 69% to 133% FPL		Breast & Cervical Cancer Program	(AFDC-C/BC)	Eligible Children		Adults	Eligible Pregnant	Emergency Services	Eligibles	
Physician Services & EPSDT	Older (OAP-A) \$1,562,427	60 to 64 (OAP-B) \$5,122,509	Individuals to 59 (AND/AB) \$43,941,358	\$4,376,787 \$334,057 \$549,503	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230	Caretakers 69% to 133% FPL \$13,989,152	\$84,802,328	Breast & Cervical Cancer Program \$488,355	(AFDC-C/BC) \$99,327,597	\$9,375,910 \$1,113,792 \$90,042	\$9,422,270	Adults \$14,711,181	Eligible Pregnant Adults \$2,772,526	Emergency Services \$2,795,873	Eligibles \$0	\$336,774,727
Physician Services & EPSDT Emergency Transportation	Older (OAP-A) \$1,562,427 \$1,077,253	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244	\$4,376,787 \$334,057 \$549,503 \$1,271,704	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230 \$10,566,061	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358	\$9,375,910 \$1,113,792 \$90,042 \$17,470,342	\$9,422,270 \$740,913 \$237,896 \$3,795,481	\$14,711,181 \$554,081 \$652,695 \$708,551	Eligible Pregnant Adults \$2,772,526 \$8,543 \$11,366 \$65,255	Emergency Services \$2,795,873 \$190,661	\$0 (\$943) (\$16) \$43	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282)	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230 \$10,566,061 (\$1,789)	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422)	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164)	\$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238)	\$14,711,181 \$554,081 \$652,695 \$708,551	Eligible Pregnant Adults \$2,772,526 \$8,543 \$11,366 \$65,255	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0	\$0 (\$943) (\$16) \$43 \$0	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 (\$4,634)
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146 \$76,694,094	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133)	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164) \$18,188,360	\$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477	Adults \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147	\$0 (\$943) (\$16) \$43 \$0 \$396	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 (\$4,634) \$191,659,624
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256 \$33,058,153	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146 \$76,694,094 \$144,449,636	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 \$18,188,360 \$72,193,828	\$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774	Adults \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,963	\$0 (\$943) (\$16) \$43 \$0 \$396	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 (\$4,634) \$191,659,624 \$404,857,382
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413 \$4,385,548	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231 \$2,495,745	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230 \$10,566,061 \$1,789\$ \$28,085,256 \$33,058,153 \$40,855,346	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146 \$76,694,094 \$144,449,636 \$82,713,711	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$151,906	(AFDC-C/BC) \$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164) \$18,188,368 \$72,193,828 \$51,547,113	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467	Adults  \$14,711,181  \$554,081  \$652,695  \$708,551  \$5  \$6,925,160  \$26,041,833  \$5,582,592	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739	\$0 (\$943) (\$16) \$43 \$0 \$396 \$0	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 (\$4,634) \$191,659,624 \$404,857,382 \$238,626,401
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413 \$4,385,548 \$1,393,357	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231 \$2,495,745 \$433,181	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,855,346 \$16,669,886	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146 \$76,694,094 \$144,449,636 \$82,713,711 \$31,913,606	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985	(AFDC-C/BC) \$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164) \$18,188,360 \$72,193,828 \$51,547,113 \$4,023,613	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$609,398	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$763,047	Adults \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022	Eligible Pregnant Adults \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813	\$0 (\$943) (\$16) \$43 \$0 \$396 \$0 \$0	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 (\$4,634) \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565 \$5,928,382	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413 \$4,385,548 \$1,393,357 \$2,682,912	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148	Caretakers to 68% FPL \$44,086,454 \$3,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,855,346 \$16,669,886 \$3,543,644	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$1,182,819	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146 \$76,694,094 \$144,449,636 \$82,713,711 \$31,913,606 \$11,460,741	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334	(AFDC-C/BC) \$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164) \$18,188,360 \$72,193,828 \$51,547,113 \$4,023,613 \$12,722,783	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,42 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$609,398 \$1,250,738	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$763,047 \$3,005,316	Adults  \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022 \$188,013	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321	Emergency Services \$2,795,873 \$190,661 \$556,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575	\$0 (\$943) (\$16) \$43 \$0 \$396 \$0 \$0 \$0	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 (\$4,634) \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565 \$5,928,382 \$2,495,894	60 to 64 (OAP-B) \$5,122,509 \$1,220,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446 \$108,913,841	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231 \$2,2495,745 \$433,181 \$1,391,148 \$11,767,875	Caretakers to 68% FPL S44,086,454 \$3,896,529 \$2,083,230 \$10,566,061 \$(\$1,789)\$ \$28,085,256 \$33,058,153 \$40,855,346 \$16,669,886 \$3,543,644 \$66,691,367	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$1,182,819 \$24,242,341	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146 \$76,694,094 \$144,449,636 \$82,713,711 \$31,913,606 \$114,60,741 \$185,095,615	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$2260,893	(AFDC-C/BC) \$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164) \$18,188,360 \$72,193,828 \$51,547,113 \$4,023,613 \$12,722,783 \$53,467,825	Eligible Children  \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$609,398 \$1,250,738 \$9,269,904	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$763,047 \$3,005,316 \$8,778,983	Adults  \$14,711,181  \$554,081  \$652,695  \$708,551  \$5  \$6,925,160  \$26,041,833  \$5,582,592  \$4,478,022  \$188,013  \$3,860,242	Eligible Pregnant Adults \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$383,352	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575 \$325	\$0 (\$943) (\$16) \$43 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$273,295	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 (\$4,634) \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172 \$492,552,996
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1222,053 \$300,565 \$5,928,382 \$2,495,894 \$2,280,239	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244 \$15,183,871)	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446 \$108,913,841 (\$98,200,579)	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231 \$433,181 \$1,391,148 \$11,767,875 \$(310,561,559)	Carctakers to 68% FPL 544,086,454 53,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,885,343,644 \$56,691,367 (\$60,377,658)	Caretakers 69% to 133% FPL 133% FPL 133% FPL (\$635,579) (\$116,568) \$4,972,254 (\$422,59,710,010 \$10,436,672 \$13,505,434 \$4,478,093 \$1,182,819 \$24,242,341 (\$21,896,242)	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146,499,494 \$144,449,636 \$82,713,711 \$31,913,606 \$11,460,741 \$185,095,615 \$(\$167,123,198)	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$260,893 (\$227,309)	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164) \$18,188,360 \$72,193,828 \$4,023,613 \$12,722,783 \$53,467,825 (\$47,779,346)	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$609,398 \$1,250,738 \$9,269,904 \$85,268,808	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$763,047 \$3,005,316 \$8,778,983 (\$7,972,007)	Adults  \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022 \$188,013 \$3,860,242 \$(3,494,629)	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$333,352 (3353,142)	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$4,147 \$15,93,963 \$1,071,739 \$154,813 \$575 \$325 (\$263)	\$0 (\$943) (\$16) (\$943) (\$16) (\$943) (\$16) (\$943) (\$16) (\$943) (\$940) (\$9	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172 \$492,552,996 (\$444,254,111)
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$1,45,281 \$1,222,053 \$3,300,565 \$5,5928,382 \$2,495,894 (\$2,280,239) \$45,497	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$4,384,4413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244 (S1,183,871) \$271,543	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446 \$108,913,841 (\$98,200,579) \$1,101,527	\$4,376,787 \$334,057 \$334,057 \$5,49,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 \$(\$10,561,559) \$79,016	Carctakers to 68% FPL 544,086,454 \$3,896,529 \$2,083,230 \$10,556,061 \$(\$1,789\$) \$28,085,256 \$33,058,256 \$33,058,346,456,691,367 \$(\$6,037,658) \$2,520,680 \$2,520,680	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$11,182,819 \$24,242,341 (\$21,896,242) \$11,886,003	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146,64,094 \$144,449,636 \$82,713,711 \$31,913,606 \$11,460,741 \$185,095,615 \$3,610,083	Breast & Cervical Cancer Program  \$48,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$260,893 \$227,309) \$77,215	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 \$2,164) \$18,188,360 \$72,193,828 \$51,547,113 \$4,023,613 \$12,722,783 \$53,467,825 \$84,041,144	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$609,398 \$1,250,738 \$9,269,904 (\$8,526,869) \$5730,446	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$763,005,316 \$8,778,983 (\$7,972,007) \$351,779	\$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022 \$188,013 \$3,860,242 \$3,494,629 \$652,827	Eligible Pregnant Adults \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$383,352 \$383,352 \$13,396	Emergency Services \$2,795,873 \$190,661 \$56,639 \$0 \$4,147 \$15,593,93 \$1,071,739 \$154,813 \$575 \$325 \$225 \$235 \$14,761	\$0 (\$943) (\$16) (\$	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$404,857,382 \$238,626,401 \$71,707,355,172 \$492,552,996 \$444,254,111 \$18,525,617
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565 \$5,928,382 \$2,495,894 \$2,280,239) \$45,497 \$1,031,491	60 to 64 (OAP-B) \$5,122,509 \$1,20,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$4,385,548 \$1,393,357 \$1,682,912 \$17,051,244 (\$15,183,871) \$2,71,543 \$1,149,132	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446 \$108,913,841 (\$98,200,579) \$1,101,527	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 (\$10,561,559) \$79,016	Carctakers to 68% FPL 544,086,454 53,896,529 \$2,083,230 \$10,566,061 (\$1,789) 528,085,256 533,058,153 540,855,346 516,669,886 \$3,543,644 566,691,367 (\$60,377,658) \$2,520,680 \$10,155,631	Caretakers 69% to 133% FPL 513,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$1,182,819 \$24,242,341 (\$21,896,242) \$1,086,003 \$3,786,988	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$144,449,636 \$82,713,111 \$31,913,606 \$11,460,741 \$185,095,615 (\$167,123,198) \$32,713,710,710,710,710,710,710,710,710,710,710	Breast & Cervical Cancer Program \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$260,893 (\$227,309) \$7,215 \$11,577	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 (\$2,164) \$18,188,360 \$72,193,825 \$51,547,113 \$4,023,613 \$11,2722,363 \$53,467,825 \$47,779,346 \$47,779,346	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,745 \$6,473,646 \$609,398 \$1,250,738 \$9,269,904 \$(\$8,526,868) \$730,446 \$2,417,928	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$7,993,774 \$3,929,467 \$763,047 \$3,005,316 \$8,778,983 (\$7,972,007) \$351,779 \$767,112	Adults  \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022 \$188,013 \$3,860,242 \$(\$3,494,629) \$4,033,437	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$383,352 (\$353,142) \$13,096 \$15,2,493	Emergency Services \$2,795,873 \$190,661 \$56,639 \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575 \$325 \$225 \$325 \$325 \$325 \$325 \$325 \$32	\$0 (\$943) (\$16) (\$943) (\$16) (\$943) (\$16) (\$943) (\$16) (\$94) (\$16)	\$33,6774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$45,4530,745 \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172 \$402,552,996 \$444,254,111 \$18,525,617 \$68,864,620
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicare)	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1222,053 \$300,565 \$5,928,382 \$2,495,894 \$2,280,239 \$45,497 \$1,031,491 \$29,694,736	60 to 64 (OAP-B) \$5,122,509 \$1,20,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244 (\$15,183,871) \$2,71,543 \$1,149,132 \$5,449,911	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446 \$108,913,841 (\$98,200,579) \$11,101,527 \$4,707,853 \$18,706,101	In \$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 \$10,561,559 \$79,016 \$455,363 \$3,376,233 \$3,376,233	Carctakers to 68% FPL 544,086,454 \$3,896,529 \$2,083,230 \$10,566,061 \$1,789\$ \$28,085,256 \$33,058,153 \$40,855,346 \$16,669,886 \$3,543,644 \$66,691,367 \$2,520,680 \$10,155,631 \$1,855,199	Caretakers 69% to 133% FPL \$13,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,003 \$1,182,819 \$24,242,341 \$21,886,242 \$1,086,003 \$3,786,988 \$165,993	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146,636 \$144,449,636 \$11,460,741 \$31,913,606 \$11,460,741 \$185,095,615 \$167,123,198] \$3,610,083 \$20,799,544 \$1,501,603	Breast & Cervical Cancer Program  \$448,355 \$2,787 (\$1,724) \$12,573 \$0 (\$1333) \$91,042 \$161,906 \$41,985 \$22,334 \$220,893 (\$227,34) \$5,7215 \$1,577 (\$1,067)	\$99,327,597 \$3,649,421 \$2,071,625 \$79,758,358 \$21,649 \$18,188,300 \$72,193,828 \$51,547,113 \$4,023,407,825 \$4,023,407,825 \$4,047,779,25 \$8,041,144 \$1,477,715 \$11,955	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$6,609,389 \$1,250,738 \$92,66,904 \$(\$8,526,868) \$730,446 \$2,417,928 \$43,874	\$9,422,270 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$763,047 \$3,005,316 \$8,778,983 \$7,772,007) \$351,779 \$767,112 \$37,881	\$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022 \$188,013 \$3,860,242 \$(33,494,629) \$652,827 \$4,033,437 \$3,833,333	Eligible Pregnant Adults \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$383,352 \$(3353,142) \$13,096 \$152,493 \$2,554	Emergency Services \$2,795,873 \$190,661 \$556,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$5575 \$325 \$14,761 (\$81,670) \$84	\$0 (\$943) (\$16) (\$	\$33,6,774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$4,634 \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172 \$492,552,996 \$444,254,111 \$18,525,617 \$68,864,620 \$71,716,395
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rual Health Centers Federally Qualified Health Centers Foolman Consumer (Tile XVIII-Medicare) Breast and Cervical Cancer Treatment Program	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$1,145,281 \$1,222,053 \$3,300,565 \$5,928,382 \$2,495,894 (\$2,280,239) \$45,497 \$1,031,491 \$29,694,736 \$0	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$0 \$6,926,113 \$4,384,4413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244 (35,183,871) \$271,543 \$1,149,132 \$5,419,911	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$108,913,841 (\$98,200,579) \$1,101,527 \$4,707,853 \$18,706,101	\$4,376,787 \$334,057 \$334,057 \$5,49,503 \$1,271,704 \$0 \$2,138,719 \$2,495,745 \$433,181 \$13,91,148 \$11,767,875 \$(\$10,561,559) \$79,016 \$455,363 \$3,676,233 \$0	Carctakers to 68% FPL 544,086,454 53,896,529 \$2,083,230 510,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,855,346 \$16,669,836 \$35,43,644 \$66,691,367 (\$60,377,658) \$2,2520,680 \$10,155,631 \$1,855,199 \$0	Caretakers 69% to 133% FPL 513,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$1,182,819 \$24,242,341 (\$21,896,242) \$1,086,003 \$3,786,988 \$165,993 \$0	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146,636 \$82,713,711 \$31,913,605 \$11,460,741 \$185,095,615 \$(5167,123,198) \$32,0799,544 \$1,501,603 \$20,799,544	Breast & Cervical Cancer Program  \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$51,042 \$161,906 \$41,985 \$22,334 \$260,893 (\$227,309) \$7,215 \$11,577 (\$1,067) \$60	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 \$2,164) \$18,188,360 \$72,193,828 \$51,547,113 \$12,722,783 \$53,467,825 \$47,779,346) \$8,041,144 \$19,477,715 \$19,955 \$51,955	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$6,9398 \$1,250,738 \$9,269,904 (\$8,526,869) \$730,446 \$2,417,928 \$43,874 \$50	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$3,005,316 \$8,778,983 (\$7,972,007) \$351,779 \$767,112 \$37,881 \$37,881	Adults \$14,711,181 \$554,081 \$554,081 \$55,085 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022 \$188,013 \$3,860,242 \$(\$3,494,629) \$5652,827 \$4,033,437 \$38,332 \$8,333	Eligible Pregnant Adults  \$2,772,526  \$8,543  \$11,366  \$65,255  \$1  \$1,356,144  \$3,594,523  \$1,254,089  \$146,997  \$8,321  \$383,352  (\$353,142)  \$13,096  \$152,493  \$2,554	Emergency Services \$2,795,873 \$190,661 \$56,639 \$0 \$4,147 \$15,593,93 \$1,071,739 \$154,813 \$575 \$225 \$225 \$(\$263) \$14,761 \$81,670)	\$0 (\$943) (\$16) (\$	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$191,659,624 \$404,857,882 \$238,626,401 \$71,707,935 \$77,355,727 \$492,552,996 \$444,254,111 \$18,525,296 \$574,355,735 \$18,525,625 \$71,716,395
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565 \$5,928,382 \$2,495,894 (\$2,280,239) \$45,497 \$1,031,491 \$29,694,736 \$0	60 to 64 (OAP-B) \$1,20,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$4,385,548 \$1,393,357 \$1,149,132 \$1,17,51,244 \$1,183,871) \$2,11,543 \$1,149,132 \$1,149,132 \$1,149,132 \$1,149,132 \$1,149,132	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$63,301,372 \$33,967,446 \$108,913,841 (\$98,200,579) \$11,101,527 \$4,707,853 \$18,706,101 \$0	In \$4,376,787\$ \$334,057\$ \$549,503 \$1,271,704 \$00 \$2,138,719 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 \$(\$10,561,559) \$79,016 \$455,363 \$3,676,233	Carctakers to 68% FPL 544,086,454 53,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,855,346 \$66,691,367 (\$60,377,658) \$2,520,680 \$10,155,631 \$1,855,199 \$0	Caretakers 69% to 133% FPL \$13,989,152 \$(\$635,579) \$(\$116,568) \$4,972,254 \$(\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$1,182,819 \$24,242,341 \$21,896,242 \$1,086,003 \$3,786,988 \$165,993 \$0 \$6	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$144,449,636 \$82,713,11 \$31,913,606 \$11,460,741 \$185,095,161 \$15,01,603 \$20,799,544 \$1,501,603 \$0 \$0	Breast & Cervical Cancer Program  \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$260,893 (\$227,309) \$7,215 \$11,577 (\$1,067) \$0 \$0	\$99,327,597 \$3,649,421 \$2,071,642 \$2,071,642 \$79,758,358 \$21,649 \$18,188,363 \$72,193,828 \$51,547,113 \$4,023,613 \$12,722,783 \$3,467,825 \$47,779,346) \$8,041,144 \$19,477,715 \$119,955 \$0	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$609,398 \$1,250,738 \$1,250,738 \$2,269,904 (\$8,526,868) \$730,446 \$2,417,928 \$43,874 \$0 \$0	\$9,422,270 \$740,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$763,047 \$3,902,467 \$763,047 \$3,912,007) \$351,779 \$767,112 \$37,881 \$0 \$0	Adults  \$14,711,181  \$554,081  \$652,695  \$708,551  \$5  \$6,925,160  \$26,041,833  \$5,582,592  \$188,013  \$3,860,242  \$(\$3,494,629)  \$652,827  \$4,033,332  \$0  \$0	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$5,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$383,352 (\$353,142) \$13,096 \$15,2493 \$2,554 \$0 \$0	Emergency Services \$2,795,873 \$190,661 \$56,639 \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575 \$325 \$223 \$14,761 \$84 \$0 \$0 \$84 \$1,670 \$1	\$0 (5943) (516) (5	\$33,6774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,375,172 \$492,552,677 \$68,864,620 \$71,716,395 \$0
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565 \$5,928,382 \$2,495,894 \$2,280,239 \$45,497 \$1,031,491 \$0 \$0 \$0 \$4,41	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$4,314,413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244 (\$15,138,371) \$271,543 \$1,149,132 \$0 \$0 \$34	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446 \$108,913,841 (\$98,200,579) \$1,101,527 \$4,707,853 \$18,706,101 \$0 \$0 \$0	In \$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 \$1,547,547,547,547,547,547,547,547,547,547	Carctakers to 68% FPL 544,086,454 \$3,896,529 \$2,083,230 \$10,566,061 \$12,566,061 \$28,085,256 \$33,058,153 \$40,855,346 \$35,436,44 \$66,691,367 \$50,377,658 \$2,520,680 \$10,155,631 \$1,855,199 \$0 \$0	Caretakers 69% to 133% FPL (133% FPL) (133% FPL) (133% FPL) (145,579) (116,568) (145,579) (116,568) (145,579) (116,568) (145,579) (145,5	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146,636 \$144,449,636 \$11,460,741 \$31,913,606 \$11,460,741 \$185,095,615 \$167,123,198] \$3,610,083 \$20,799,544 \$1,501,603 \$0 \$364	Breast & Cervical Cancer Program  \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$1333) \$91,042 \$161,906 \$41,985 \$22,334 \$260,893 \$(\$227,309) \$7,215 \$11,577 (\$1,067) \$0 \$0 \$1	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 \$2,164 \$18,188,300 \$72,193,828 \$51,547,113 \$4,023,407,415 \$4,023,407,415 \$4,023,407,415 \$19,477,715 \$119,955 \$0 \$221	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$600,398 \$1,250,738 \$9,269,904 \$(\$8,526,868) \$730,446 \$2,417,928 \$43,874 \$0 \$9	\$9,422,270 \$9,442,270 \$237,896 \$3,795,481 \$3,795,481 \$5,993,774 \$3,992,467 \$763,047 \$3,005,316 \$8,778,983 \$779,2007 \$351,779 \$767,112 \$37,881 \$0 \$0 \$24	Adults  \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,292,5160 \$26,041,833 \$5,582,592 \$188,013 \$3,860,242 \$(33,494,629) \$652,827 \$4,033,437 \$38,332 \$0 \$0 \$34	Eligible Pregnant Adults \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,4523 \$1,254,089 \$146,997 \$8,321 \$33,352 \$(353,142) \$13,096 \$152,493 \$2,554 \$0,000 \$0	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575 \$325 (\$263) \$14,761 (\$81,670) \$0 \$0 \$10	\$0 (\$943) (\$16) (\$	\$33,6774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$404,857,382 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172 \$18,525,617 \$68,864,620 \$0 \$0 \$1,707,635 \$71,716,395 \$11,215
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Services Other Medical Services Preventive Services	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$1,145,281 \$1,222,053 \$300,565 \$5,928,382 \$2,495,894 (\$2,280,239) \$45,497 \$1,031,491 \$29,694,736 \$0 \$0 \$1,541 \$1	60 to 64 (OAP-B) \$1,20,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$4,385,548 \$1,393,357 \$1,149,132 \$1,17,51,244 \$1,183,871) \$2,11,543 \$1,149,132 \$1,149,132 \$1,149,132 \$1,149,132 \$1,149,132	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$63,301,372 \$33,967,446 \$108,913,841 (\$98,200,579) \$11,101,527 \$4,707,853 \$18,706,101 \$0	In \$4,376,787\$ \$334,057\$ \$549,503 \$1,271,704 \$00 \$2,138,719 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 \$(\$10,561,559) \$79,016 \$455,363 \$3,676,233	Carctakers to 68% FPL 544,086,454 53,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,855,346 \$66,691,367 (\$60,377,658) \$2,520,680 \$10,155,631 \$1,855,199 \$0	Caretakers 69% to 133% FPL 513,989,152 (\$635,579) (\$116,568) \$4,972,254 (\$422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$1,182,819 \$24,242,341 (\$21,896,242) \$1,086,003 \$3,786,988 \$165,993 \$0 \$0 \$99 \$1,847,689 \$49 \$1,847,689	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146 \$76,694,094 \$144,449,636 \$82,713,1913,606 \$11,460,741 \$185,095,615 \$(5167,123,198) \$3,610,033 \$20,799,544 \$1,501,603 \$0 \$3,640,540 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603 \$1,501,603	Breast & Cervical Cancer Program  \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$260,893 (\$227,309) \$7,215 \$11,577 (\$1,067) \$0 \$0	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 \$2,164) \$18,188,360 \$18,188,360 \$12,722,783 \$51,547,113 \$12,722,783 \$53,467,825 \$47,779,346) \$19,477,715 \$19,955 \$0 \$0 \$22,430,222	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$609,398 \$1,250,738 \$1,250,738 \$2,269,904 (\$8,526,868) \$730,446 \$2,417,928 \$43,874 \$0 \$0	\$9,422,270 \$740,913 \$237,896 \$3,795,481 \$(£238) \$664,477 \$5,993,774 \$763,047 \$763,047 \$3,005,316 \$8,778,983 \$(\$7,972,007) \$351,779 \$767,112 \$37,881 \$0 \$0 \$24 \$842,997	Adults  \$14,711,181 \$554,081 \$554,081 \$55,085 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$4,478,022 \$188,013 \$3,860,242 \$(\$3,494,629) \$5652,827 \$4,033,437 \$38,332 \$0 \$0 \$0 \$34 \$463,757	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$5,255 \$1 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$383,352 (\$353,142) \$13,096 \$15,2493 \$2,554 \$0 \$0	Emergency Services \$2,795,873 \$190,661 \$56,639 \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575 \$325 \$223 \$14,761 \$84 \$0 \$0 \$84 \$1,670 \$1	\$0 (5943) (516) (5	\$33,6774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,375,172 \$492,552,677 \$68,864,620 \$71,716,395 \$0
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565 \$5,928,382 \$2,495,894 \$2,280,239 \$45,497 \$1,031,491 \$0 \$0 \$0 \$4,41	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$0,926,113 \$14,814,413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244 (35,183,871) \$277,433 \$1,149,132 \$5,419,911 \$0,000 \$0,000 \$1,000 \$	Individuals to 59 (AND/AB) \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$108,913,841 (\$98,200,579) \$11,101,527 \$4,707,853 \$18,706,101 \$0 \$0 \$240 \$1,923,337	In \$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$2,138,719 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 \$(\$10,561,559) \$79,016 \$455,363 \$3,676,233 \$0 \$0 \$20 \$186,379	Carctakers to 68% FPL 544,086,454 53,896,529 \$2,083,230 510,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,855,346 \$16,669,836 \$35,433,644 \$66,691,367 (\$60,377,658) \$12,520,680 \$10,155,631 \$1,855,199 \$0 \$0 \$144 \$4,356,835	Caretakers 69% to 133% FPL (133% FPL) (133% FPL) (133% FPL) (145,579) (116,568) (145,579) (116,568) (145,579) (116,568) (145,579) (145,5	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146,636 \$144,449,636 \$11,460,741 \$31,913,606 \$11,460,741 \$185,095,615 \$167,123,198] \$3,610,083 \$20,799,544 \$1,501,603 \$0 \$364	Breast & Cervical Cancer Program  \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$220,344 \$260,893 (\$227,309) \$7,215 \$11,577 (\$1,067) \$0 \$0 \$1 \$9,140 \$9,940	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 \$2,164 \$18,188,300 \$72,193,828 \$51,547,113 \$4,023,407,415 \$4,023,407,415 \$4,023,407,415 \$19,477,715 \$119,955 \$0 \$221	Eligible Children \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$6,9398 \$1,250,738 \$9,269,904 (\$8,526,869) \$730,446 \$2,417,928 \$43,874 \$50 \$50 \$50 \$52 \$534,1712	\$9,422,270 \$9,442,270 \$237,896 \$3,795,481 \$3,795,481 \$5,993,774 \$3,992,467 \$763,047 \$3,005,316 \$8,778,983 \$779,2007 \$351,779 \$767,112 \$37,881 \$0 \$0 \$24	Adults  \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,292,5160 \$26,041,833 \$5,582,592 \$188,013 \$3,860,242 \$(33,494,629) \$652,827 \$4,033,437 \$38,332 \$0 \$0 \$34	Eligible Pregnant Adults  \$2,772,526 \$8,843 \$11,366 \$65,255 \$11,356,144 \$3,594,523 \$1,254,089 \$1146,997 \$8,321 \$3383,352 (\$353,142) \$13,096 \$152,493 \$2,554 \$0 \$0 \$0 \$44	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,93 \$1,071,739 \$154,813 \$575 \$325 (\$263) \$14,761 (\$81,670) \$84 \$0 \$0 \$1,000 \$1,493	\$0 (\$943) (\$16) (\$	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$(9,634) \$191,659,624 \$404,875,382 \$238,626,401 \$71,707,935 \$71,707,935 \$71,707,935 \$71,707,355,172 \$492,552,996 \$444,254,111 \$68,864,620 \$71,716,395 \$0 \$0 \$1,215 \$40,070,047
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Drug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Preventive Services Acute Home Health	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$9,145,281 \$1,222,053 \$300,565 \$5,928,382 \$2,495,894 \$2,280,239) \$45,497 \$1,031,491 \$29,694,736 \$0 \$1,017,787 \$1,885,171	60 to 64 (OAP-B) \$1,20,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$14,814,413 \$4,385,548 \$1,393,357 \$2,5682,912 \$17,051,244 (\$15,183,871) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Individuals to 59 (AND/AB)  \$43,941,358 \$5,653,686 \$7,350,010 \$11,670,244 (\$282) \$33,383,189 \$62,206,253 \$63,31,372 \$33,967,446 \$108,913,841 (\$98,200,579) \$11,101,527 \$4,707,853 \$18,706,101 \$0 \$0 \$2,240 \$1,923,337 \$9,740,796	In \$4,376,787\$ \$334,950\$ \$549,503\$ \$1,271,704\$ \$0 \$5,247,231\$ \$2,495,745\$ \$433,181\$ \$1,391,148\$ \$11,767,875\$ \$79,016 \$455,363\$ \$3,676,233\$ \$0 \$20 \$186,379\$ \$240,365	Carctakers to 68% FPL 544,086,454 53,896,529 \$2,083,230 \$10,566,061 (\$1,789) \$28,085,256 \$33,058,153 \$40,855,346 \$16,669,886 \$3,543,644 \$66,691,367 (\$60,377,658) \$2,520,680 \$10,155,631 \$1,855,199 \$0 \$0 \$144 \$4,356,835 \$65,276	Caretakers 69% to 133% FPL (513,989,152 (8535,579) (8116,568) \$4,972,254 (8422) \$9,710,010 \$10,436,672 \$13,505,443 \$4,478,093 \$1,182,819 \$24,242,341 (\$21,896,242) \$1,086,003 \$0,086,086 \$165,993 \$0 \$90 \$14,847,689 \$16,105	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$144,449,636 \$82,713,11 \$31,913,606 \$11,460,741 \$185,095,161 \$15,01,603 \$0 \$0 \$1,501,603 \$0 \$3,610,603 \$0 \$0 \$1,501,603 \$0 \$0 \$1,501,603 \$0 \$1,501,603 \$0 \$1,501,603 \$0 \$1,501,603 \$1,501,603	Breast & Cervical Cancer Program  \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$133) \$91,042 \$161,906 \$41,985 \$22,334 \$2260,893 (\$227,309) \$7,215 \$11,577 (\$1,067) \$0 \$0 \$1 \$9,140 \$9,940	\$99,327,597 \$3,649,421 \$2,071,648 \$79,758,358 \$(\$2,164) \$18,188,363 \$72,193,828 \$51,547,113 \$4,023,613 \$12,722,783 \$53,467,825 \$47,779,346) \$8,041,144 \$19,477,155 \$0 \$0 \$22,430,222 \$1,721,295	Eligible Children  \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$1090 \$2,049,745 \$1,990,780 \$6,473,646 \$600,398 \$1,250,738 \$1,250,738 \$9,269,904 \$8,526,868) \$730,446 \$2,417,928 \$43,874 \$0 \$0 \$2,247,904 \$5,241,792 \$43,874	\$9,422,270 \$740,913 \$237,896 \$3,795,481 \$(\$238) \$664,477 \$5,993,774 \$3,005,316 \$8,778,983 \$(\$7,972,007) \$351,779 \$37,881 \$0 \$0 \$24 \$842,997	Adults  \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,925,160 \$26,041,833 \$5,582,592 \$188,013 \$3,860,242 \$(\$3,494,629) \$652,827 \$4,033,332 \$0 \$38,332 \$0 \$34,433,357 \$10,581	Eligible Pregnant Adults  \$2,772,526 \$8,843 \$11,366 \$8,5435 \$1,356,144 \$3,594,523 \$1,254,089 \$146,997 \$8,321 \$383,352 \$353,142 \$383,352 \$353,142 \$15,496 \$10,4	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575 \$325 (\$263) \$14,761 \$84 \$0 \$0 \$0 \$10 \$1,493 \$1,690 \$10 \$1,493 \$50	\$0 (5943) (516) (5	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$191,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172 \$402,552,966 \$444,254,111 \$18,525,617 \$68,864,620 \$71,716,395 \$0 \$1,215 \$40,070,047 \$15,346,186
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Coupatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicare)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services  Other Medical Services  Preventive Services  Acute Home Health  Presumptive Eligibility	Older (OAP-A) \$1,562,427 \$1,077,253 \$3,636,057 \$4,322,716 \$0 \$5,533,947 \$1,122,053 \$300,565 \$5,928,382 \$2,495,894 \$1,231,491 \$29,694,736 \$0 \$1,07,787 \$1,07,787 \$1,885,171	60 to 64 (OAP-B) \$5,122,509 \$1,200,690 \$1,873,258 \$1,882,935 \$0 \$6,926,113 \$4,314,413 \$4,385,548 \$1,393,357 \$2,682,912 \$17,051,244 (\$15,183,871) \$271,543 \$1,149,132 \$0 \$0 \$34 \$230,067 \$34 \$330,067 \$34 \$330,067	Individuals to 59 (AND/AB)  \$43,941,358  \$5,653,686  \$7,350,010 \$11,670,244  (\$282) \$33,383,189 \$62,206,253 \$23,428,003 \$6,301,372 \$33,967,446 \$108,913,841 \$(998,200,579) \$1,101,527 \$4,707,853 \$18,706,101 \$0 \$0 \$240 \$1,923,337 \$9,740,796	\$4,376,787 \$334,057 \$549,503 \$1,271,704 \$0 \$5,247,231 \$2,495,745 \$433,181 \$1,391,148 \$11,767,875 \$10,561,555 \$10,561,555 \$0 \$0 \$1,562,562 \$0 \$1,562,562 \$0 \$1,562,562	Carctakers to 68% FPL 544,086,454 \$3,896,529 \$2,083,230 \$10,566,061 \$12,566,061 \$12,566,061 \$12,566,061 \$12,566,061,367 \$16,669,886 \$13,443,644 \$66,691,367 \$10,155,631 \$1,855,199 \$1,444 \$4,356,835 \$1,444 \$4,356,835 \$65,276 \$60,377,658 \$1,444 \$4,356,835 \$65,276 \$60,377,678 \$1,444 \$4,356,835 \$1,444 \$4,356,835 \$65,276 \$60	Caretakers 69% to 133% FPL (133% FPL) (133% FPL) (133% FPL) (145,579) (116,568) (145,579) (116,568) (145,579) (116,568) (145,579) (145,5	\$84,802,328 \$15,864,695 \$7,577,597 \$18,035,140 \$146,636 \$144,449,636 \$11,460,741 \$31,913,606 \$11,460,741 \$185,095,615 \$185,095,615 \$10,709,544 \$1,501,603 \$0 \$0 \$3,610,603 \$1,501,603 \$3,610,603 \$1,501,603 \$1,50	Breast & Cervical Cancer Program  \$488,355 \$2,787 (\$1,724) \$12,573 \$0 (\$1333) \$91,042 \$161,906 \$161,906 \$522,334 \$260,893 \$7,215 \$11,577 (\$1,067) \$0 \$0 \$1 \$9,140 \$9,140 \$0 \$0	\$99,327,597 \$3,649,421 \$2,071,682 \$79,758,358 \$(\$2,164) \$18,188,300 \$72,193,828 \$51,547,113 \$4,023,407 \$4,023,407 \$4,023,407 \$14,027,407 \$14,027,407 \$19,955 \$0 \$22,430,222 \$1,721,295 \$0	Eligible Children  \$9,375,910 \$1,113,792 \$90,042 \$17,470,342 \$109 \$2,049,745 \$1,990,780 \$6,473,646 \$600,398 \$1,250,738 \$9,269,904 \$(\$8,526,868) \$730,446 \$2,417,928 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$0	\$9,422,270 \$9,440,913 \$237,896 \$3,795,481 (\$238) \$664,477 \$5,993,774 \$3,929,467 \$763,047 \$3,005,316 \$8,778,983 \$(\$7,972,007) \$351,779 \$767,112 \$37,881 \$0 \$0 \$0 \$0 \$24 \$842,997 \$700,818	Adults  \$14,711,181 \$554,081 \$652,695 \$708,551 \$5 \$6,292,5160 \$26,041,833 \$5,582,592 \$188,013 \$3,860,242 \$(33,494,629) \$652,827 \$4,033,437 \$38,332 \$0 \$0 \$34 \$463,757 \$10,581 \$10,581	Eligible Pregnant Adults  \$2,772,526 \$8,543 \$11,366 \$65,255 \$1 \$1,356,4523 \$1,254,089 \$146,997 \$8,321 \$33,352 \$(353,142) \$13,096 \$152,493 \$0 \$0 \$0 \$4 \$14,854 \$53	Emergency Services \$2,795,873 \$190,661 \$56,639 (\$912) \$0 \$4,147 \$15,593,963 \$1,071,739 \$154,813 \$575 \$325 (\$263) \$14,761 (\$81,670) \$0 \$10 \$1,493 \$0	\$0 (\$943) (\$16) (\$	\$336,774,727 \$33,650,586 \$26,071,667 \$154,530,745 \$154,530,745 \$11,659,624 \$404,857,382 \$238,626,401 \$71,707,935 \$77,355,172 \$492,552,996 \$444,254,111) \$18,525,617 \$68,864,620 \$71,716,395 \$0 \$1,215 \$40,070,047 \$15,346,186

					FY	2019-20 July-Г	December CORE	Total Actuals								
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Physician Services & EPSDT	\$1,888,676	\$6,501,175	\$55,497,551	\$6,717,989	\$50,339,588	\$16,980,000	\$109,134,288	\$204,858	\$126,225,461	\$15,608,073	\$11,500,494	\$15,468,097	\$2,595,280	\$3,557,057	\$0	\$422,218,586
Emergency Transportation	\$354,636	\$503,454	\$2,212,264	\$99,660	\$1,372,746	\$335,419	\$12,251,342	\$651	\$1,976,272	\$178,400	\$276,746	\$420,925	\$75,368	\$4,673,042	\$0	\$24,730,927
Non-emergency Medical Transportation  Dental Services	\$3,383,569 \$5,558,610	\$1,945,736 \$1,958,473	\$7,353,563 \$11,215,797	\$446,561 \$1,658,782	\$1,595,153 \$19,466,744	\$294,486 \$7,521,216	\$6,392,357 \$35,163,802	(\$2,293) \$19,702	\$1,389,166 \$69,263,437	\$48,410 \$12,588,940	\$201,063 \$3,889,253	\$316,847 \$1,454,110	\$17,675 \$198,620	\$0 \$942	\$0 \$0	\$23,382,292 \$169,958,428
Family Planning	\$0,558,610	\$1,938,473	\$311,213,797	\$1,038,782	\$1,864	\$1,789	\$4,707	\$19,702	\$2,047	\$345	\$138	\$46	\$198,020	\$0	\$0	\$11,248
Health Maintenance Organizations	\$8,427,216	\$7,275,036	\$34,471,699	\$2,620,554	\$28,164,289	\$10,856,561	\$81,487,904	\$0	\$21,905,951	\$2,423,176	\$953,599	\$7,367,936	\$1,402,142	\$3,004	\$0	\$207,359,069
Inpatient Hospitals	\$12,171,241	\$11,533,003	\$45,582,472	\$6,315,900	\$34,084,810	\$9,999,280	\$156,798,997	\$104,800	\$63,372,329	\$2,987,972	\$1,652,226	\$26,049,918	\$3,663,149	\$10,605,240	\$0	\$384,921,337
Outpatient Hospitals	\$1,456,663	\$5,614,301	\$29,311,791	\$3,817,573	\$45,201,993	\$15,749,918	\$98,820,433	\$495,926	\$57,407,333	\$8,352,650	\$5,107,213	\$7,421,952	\$1,067,740	\$2,854,781	\$0	\$282,680,268
Lab & X-Ray	\$225,875	\$1,390,393	\$6,303,807	\$428,251	\$22,585,391	\$6,490,222	\$37,658,556	\$59,824	\$3,737,257	(\$484,901)	\$835,154	\$5,595,084	\$920,846	(\$384,918)	\$0	\$85,360,842
Durable Medical Equipment	\$6,011,738	\$2,941,909	\$35,778,464	\$1,434,356	\$3,739,861	\$1,510,498	\$12,172,896	\$14,828	\$13,351,549	\$1,350,338	\$3,122,796	\$192,382	\$32,395	\$736	\$0	\$81,654,746
Prescription Drugs	\$2,939,798	\$17,282,674	\$113,203,598	\$13,977,161	\$68,123,383	\$24,909,275	\$196,723,845	\$213,368	\$59,738,983	\$10,231,467	\$10,288,054	\$2,892,821	\$377,266	\$10	\$111,623	\$521,013,325
Physician Administered Drugs Drug Rebate	\$1,215,507 (\$1,582,386)	\$2,027,945 (\$9,302,633)	\$12,226,484 (\$60,933,370)	\$1,948,215 (\$7,523,396)	\$9,086,528 (\$36,668,334)	\$3,681,038 (\$13,407,755)	\$24,812,747 (\$105,889,274)	\$354,471 (\$114,848)	\$4,010,296 (\$32,155,317)	\$792,056 (\$5,507,226)	\$458,882 (\$5,537,684)	\$1,282,678 (\$1,557,100)	\$174,224 (\$203,068)	\$94,693 (\$5)	\$605,653 (\$60,083)	\$62,771,418 (\$280,442,478)
Rural Health Centers	\$57,197	\$336,685	\$1,256,195	\$7,323,396) \$79,144	\$3,158,163	\$1,362,756	\$4,774,848	(\$114,848)	\$7,871,060	\$889,075	\$464,909	\$1,480,061	(\$203,068)	\$9,745	(\$60,083)	\$21,528,382
Federally Qualified Health Centers	\$1.038.065	\$1,360,715	\$5,752,012	\$517,761	\$11,392,603	\$3,958,084	\$22,951,906	\$18,907	\$23,888,817	\$887,543	\$1.029.485	\$5,288,807	\$770,001	\$405,933	\$0	\$79,260,639
Co-Insurance (Title XVIII-Medicare)	\$27,029,634	\$4,488,779	\$14,432,612	\$3,171,416	\$1,411,114	\$126,515	\$1,125,582	(\$372)	\$0		\$11,261	\$44,717	\$742	\$5,699	\$9,224,392	\$61,075,040
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Service Organizations - Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0
Other Medical Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0
Preventive Services	(\$23,331)	(\$107,531)	(\$139,594)	(\$32,678)	(\$3,221,984)	(\$1,241,058)	(\$4,465,016)	(\$7,314)	(\$4,157,932)		(\$267,686)	(\$678,653)	\$6,542	(\$18,371)	\$0	(\$16,361,270)
Acute Home Health	\$1,907,131	\$571,104	\$9,921,561	\$299,907	\$67,832	\$15,464	\$309,471	\$0	\$2,201,080	\$312,923	\$719,917	\$10,150	\$1,629	\$0	\$0	\$16,338,169
Presumptive Eligibility	\$0 \$72,059,841	\$0 \$56,321,218	\$0 \$323,447,220	\$0 \$35,977,157	\$0 \$259,901,745	\$0 \$89,143,708	\$0 \$690,229,394	\$0 \$1,364,623	\$0 \$420,027,788	\$0 \$48,655,524	\$0 \$34,705,821	\$0 \$73,050,778	\$0 \$10,886,979	\$0 \$21,807,587	\$0 \$9,881,586	\$0 \$2,147,460,968
Total Caseload	\$72,059,841 48,122	\$56,321,218 12,969	\$323,447,220	9,760	\$259,901,745 165,930	\$89,143,708 58.282	319,036	\$1,364,623	\$420,027,788 408,264	55,365	\$34,705,821	\$73,050,778	2.129	\$21,807,587	33,749	1,216,397
Half -Year Per Capita	\$1,497.45	\$4,342.70	\$4,823,43	\$3,686.12	\$1,566,34	\$1,529.52	\$2,163,49	\$9,985.05	\$1.028.81	\$878.81	\$1,606.01	\$6,313.90	\$5,114,46	\$9.020.10	\$292.80	\$1,765.43
Hall-Teal Tel Capita	31,497.43	34,342.70	\$4,023.43	\$3,000.12					\$1,020.01	\$676.61	\$1,000.01	\$0,515.90	33,114.40	37,020.10	\$272.00	\$1,705.45
								Total Actuals								
							ry- June CORE	Total Actuals	1				1 1			
ACUTE CARE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
ACUTE CARE  Physician Services & EPSDT	Older	60 to 64	Individuals to 59		MAGI Parents/ Caretakers to	MAGI Parents/ Caretakers 69%		Breast & Cervical Cancer			Foster Care \$11,317,106		Eligible Pregnant	Emergency		TOTAL \$395,520,393
	Older (OAP-A)	60 to 64 (OAP-B)	Individuals to 59 (AND/AB)	In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	(AFDC-C/BC)	Eligible Children	\$11,317,106 \$406,189	Adults	Eligible Pregnant Adults	Emergency Services	Eligibles	
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446	\$6,351,317 \$228,816 \$669,354	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633	MAGI Adults \$100,208,406 \$15,186,092 \$7,600,983	Breast & Cervical Cancer Program \$163,934 \$6,668 \$273	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413	\$11,810,003 \$246,211 \$71,043	\$11,317,106 \$406,189 \$221,547	\$12,616,246 \$490,719 \$252,088	### Register   ### Re	Services \$3,676,871 \$6,517,459 \$511	\$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591	\$6,351,317 \$228,816 \$669,354 \$1,164,324	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050	MAGI Adults \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249	Breast & Cervical Cancer Program \$163,934 \$6,668 \$273 \$13,829	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111	\$11,810,003 \$246,211 \$71,043 \$8,836,101	\$11,317,106 \$406,189 \$221,547 \$2,729,889	\$12,616,246 \$490,719 \$252,088 \$1,020,700	\$2,233,610 \$74,832 \$6,618 \$139,424	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662	\$0 \$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591	\$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050	MAGI Adults \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0	Breast & Cervical Cancer Program \$163,934 \$6,668 \$273 \$13,829 \$0	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$69)	\$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0	\$0 \$0 \$0 \$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69)
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121	\$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0 \$3,118,831	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097	MAGI Adults \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420	Breast & Cervical Cancer Program \$163,934 \$6,668 \$273 \$13,829 \$0 \$0	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$69) \$20,915,673	\$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424	\$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0 \$3,118,831 \$6,203,518	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125	MAGI Adults \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,849	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$69) \$20,915,673 \$82,624,369	\$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$2,763,584	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526	Eligible Pregnant Adults  \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$926,766	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,11 \$58,943,424 \$19,708,448	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0 \$3,118,831 \$6,203,518 \$2,959,680	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,429 \$160,862,849 \$73,961,160	Breast & Cervical Cancer Program \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$256,326	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$69) \$20,915,673 \$82,624,369 \$37,368,425	Eligible Children  \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$2,763,584 \$5,169,690	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205	Adults  \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361	Eligible Pregnant Adults  \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424	\$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0 \$3,118,831 \$6,203,518	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125	MAGI Adults \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,849	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$69) \$20,915,673 \$82,624,369	\$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$2,763,584	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526	Eligible Pregnant Adults  \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$926,766 \$166,486	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$886,960	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$17,50,242 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451	MAGI Adults \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,849 \$73,961,160 \$26,612,239	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$256,326 \$32,048	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$69) \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202	Eligible Children  \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$2,763,584 \$5,169,690 (\$328,464)	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205 \$606,035	Adults  \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443 \$391,434	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 (\$407,874)	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$926,766 \$166,486 \$5,813,088	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$50 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762 \$1,529,352	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$33,21,945	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$66,459,420 \$160,862,849 \$73,961,160 \$26,612,239 \$11,645,485	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$136,372 \$256,326 \$32,048 \$13,709 \$205,401 \$576,604	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$50,915,673 \$20,915,673 \$82,624,369 \$2,671,202 \$12,964,793 \$55,958,663 \$4,251,575	Eligible Children \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$2,763,584 \$5,169,690 (\$328,464) \$1,223,717 \$11,313,805	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,091,139 \$439,430	Adults  \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383 \$181,402	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443 \$391,434 \$333,179 \$333,652 \$230,1186	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 \$407,874 \$1,954	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Physician Administered Drug Rebate	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$8,192,542 \$9,110,486 \$926,766 \$166,486 \$5,813,088 \$2,619,026 \$1,240,420 \$1,240,420 \$1,240,420 \$1,240,420 \$1,888,311)	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,995,255 \$9,972,080 \$4,130,782 \$880,960 \$2,805,807 \$17,247,297 \$17,247,297 \$12,435,256)	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,112 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729)	In \$6,351,317 \$228,816 \$228,816 \$69,354 \$1,164,324 \$50 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762 \$1,529,352 \$15,334,121 \$2,400,257 \$(\$11,055,861)	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$3,321,945 \$65,012,450 \$9,232,066 \$(\$46,873,805)	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,60 \$26,553,248 \$4,153,722 \$151,143,124	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,499 \$73,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$(27,072,240) \$(2144,126,988)	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$256,326 \$32,048 \$13,709 \$205,401 \$576,604 \$(\$148,093)	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$20,915,673 \$20,915,673 \$82,624,369 \$37,368,425 \$271,202 \$12,964,793 \$55,958,663 \$42,51,575 \$40,346,049	Eligible Children \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$0,\$2,483,774 \$2,763,584 \$5,169,690 (\$328,464) \$1,223,717 \$11,313,805 \$774,229 (\$8,157,224)	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,091,139 \$439,430 \$7,275,685)	Adults \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,56 \$23,933,526 \$5,163,361 \$3,379,383 \$1814,402 \$2,837,197 \$1,195,161 \$(\$2,045,612)\$	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443 \$391,434 \$331,179 \$333,652 \$231,186 \$221,186 \$221,186	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 \$407,874) \$19,54 \$12,879 \$108,827 \$19,286)	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 (\$374,467,718)
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Physician Administered Drugs  Drug Rebate  Rural Health Centers	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$166,486 \$5,261,9026 \$1,240,420 (\$1,888,311) \$2,888,319,528	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807 \$17,247,297 \$19,981,172 \$12,435,259) \$22,825,827	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618	\$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762 \$1,529,325 \$1,529,334,121 \$2,400,257 \$(\$1,055,861) \$76,039	MAGI Parents/ Caretakers to 68% FPL  \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$13,425,542 \$565,012,450 \$9,232,066 \$46,873,805) \$2,409,877	MAGI Parents/ Caretakers 69% to 133% FPL. \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 \$1,144,822 \$1,144,822 \$1,185,490	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$16,082,849 \$73,961,160 \$26,612,239 \$16,645,485 \$119,899,464 \$27,072,240 \$(\$144,126,988) \$3,952,684	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$2526,326 \$32,048 \$13,709 \$205,401 \$576,604 \$(\$148,093) \$5,734	\$3,106,282 \$1,257,413 \$48,617,111 \$6,69 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,203 \$35,958,663 \$4,251,575 \$40,346,049 \$33,369,25	Eligible Children  \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$7,675,584 \$5,169,690 (\$328,464) \$1,223,717 \$11,313,805 \$774,229 (\$8,157,224) \$591,977	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205 \$606,035 \$32,290,042 \$10,091,139 \$439,430 (\$7,275,685) \$215,369	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383 \$181,402 \$2,837,197 \$1,195,161 \$2,045,612 \$844,683	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443 \$391,434 \$331,79 \$333,5652 \$201,186 (\$242,005) (\$154,706)	Emergency Services \$3,676,871 \$5,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 (\$407,874) \$11,954 \$12,879 \$108,827 (\$9,286) \$7,790	\$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 (\$374,467,718) \$13,545,788
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Physician Administered Drugs  Drug Rebate  Rural Health Centers  Federally Qualified Health Centers	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$166,486 \$5,813,088 \$2,619,026 \$1,240,420 (\$1,888,311) \$28,481 \$492,479	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$13,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$885,90 \$2,805,807 \$17,247,297 \$1,989,172 \$1,98	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,494 \$9,7872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618	In \$6,351,317 \$228,816 \$69,354 \$1,164,324 \$0 \$1,164,324 \$0 \$1,164,324 \$0 \$1,164,324 \$0 \$1,164,324 \$0 \$1,164,324 \$0 \$1,529,352 \$1,529,352 \$15,334,121 \$2,400,257 \$(\$11,055,861) \$76,039 \$444,990 \$444,990	MAGI Parents/ Carctakers to 68% FPL 543,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$2,8325,638 \$35,085,174 \$31,967,358 \$15,422,53,321,945 \$65,012,450 \$9,232,606 (\$46,873,805) \$2,409,877 \$8,804,545 \$8,804,545	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 (\$19,144,822) \$1,085,490	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,849 \$73,961,160 \$26,612,293 \$11,645,485 \$199,899,464 \$27,072,204 (\$144,126,988) \$3,952,684 \$18,550,884	Breast & Cervical Cancer Program \$ \$163,934 \$ \$6,668 \$273 \$ \$13,829 \$ \$0 \$ \$0 \$ \$136,372 \$256,326 \$ \$32,048 \$ \$13,709 \$205,401 \$ \$576,640 \$ \$57,344 \$ \$15,5988 \$ \$15,988	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$48,617,111 \$509 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,267 \$12,964,793 \$4,251,575 \$40,346,049 \$33,396,925 \$(\$1,904,718)	Eligible Children \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$2,763,584 \$5,169,690 \$323,846,4 \$1,223,717 \$11,313,805 \$774,229 \$(\$8,157,224) \$5,19,977 \$615,982	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,091,139 \$439,430 (\$7,275,685) \$215,369 \$106,905	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383 \$181,402 \$2,837,197 \$1,195,161 \$2,045,612 \$844,683 \$3,343,2473	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443 \$331,79 \$335,652 \$201,186 \$(\$242,005) \$(\$154,706) \$540,512	Emergency Services \$3,676.871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 \$407,879 \$12,879 \$12,879 \$10,882,779 \$12,879 \$12,879 \$10,827 \$12,879 \$10,827 \$12,879 \$10,827 \$10,9286 \$17,790	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 (\$374,467,718) \$13,545,788
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Physician Administered Drugs Physician Administered Drugs Corner Rural Health Centers Federally Qualified Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare)	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$926,766 \$166,486 \$2,619,026 \$1,240,420 \$1,240,420 \$1,240,420 \$1,240,420 \$2,8481 \$492,479 \$25,705,053	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,959,255 \$9,972,080 \$4,130,782 \$880,960 \$2,805,807 \$17,247,297 \$1,989,172 \$12,435,256 \$225,827 \$997,378	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,11 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618 \$3,871,235 \$13,872,235	In \$6,351,317 \$228,816 \$69,354 \$1,164,324 \$50 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762 \$1,529,352 \$15,334,121 \$2,400,257 \$(311,055,861) \$76,039 \$448,990 \$3,334,711	MAGI Parents/ Caretakers to 68% FPL 543,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$3,321,945 \$65,012,450 \$9,232,066 \$9,232,066 \$546,873,805) \$2,409,877 \$8,804,545 \$1,361,567	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 \$1,188,490 \$1,085,490 \$3,13,369 \$1,141,662	\$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,499 \$73,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 \$144,126,988) \$3,952,684 \$18,550,884 \$11,93,774	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$256,326 \$32,048 \$13,709 \$205,401 \$\$576,604 \$\$(\$148,093) \$5,734 \$15,988 \$(\$72)	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,793 \$55,958,663 \$4,251,575 \$40,346,049 \$3,396,925 \$19,947,118 \$123,450	Eligible Children \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$0,\$24,83,774 \$2,763,584 \$5,169,690 (\$328,464) \$1,222,717 \$11,313,805 \$774,229 (\$81,572,224) \$591,977 \$615,982 \$17,169	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,091,139 \$439,430 \$(\$7,275,685) \$215,369 \$106,905	Adults \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383 \$1818,402 \$2,837,197 \$1,195,161 \$(\$2,045,612) \$844,683 \$3,432,073 \$21,264	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0,51 \$774,843 \$2,741,573 \$707,443 \$391,434 \$331,179 \$333,652 \$2,01,186 \$(\$242,005) \$(\$154,706) \$4,959	Emergency Services \$33,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 (\$407,874) \$1,954 \$12,879 \$108,827 (\$9,286) \$7,790 \$309,508 \$6,178	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 (\$374,467,718) \$13,545,788 \$39,595,129 \$57,071,745
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning Health Maintenance Organizations  Health Maintenance Organizations  Durable Medical Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment Prescription Drugs  Physician Administered Drugs  Drug Rebate Rural Health Centers  Federally Qualified Health Centers  Co-Insurance (Title XVIII-Medicare)  Breast and Cervical Cancer Treatment Program	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$166,486 \$5,2619,026 \$1,240,420 (\$1,888,311) \$492,479 \$25,705,053 \$0	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0,572,595,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807 \$17,247,297 \$19,89,172 \$12,435,259 \$22,827 \$997,378 \$3,992,483 \$3,992,483	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618 \$3,871,235 \$13,828,937	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$50 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762 \$1,529,352 \$(51,05,861) \$76,039 \$448,990 \$3,334,711 \$5,000 \$50 \$60	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$3,321,945 \$65,012,450 \$9,232,066 \$(\$46,873,805) \$2,409,877 \$8,804,545 \$1,361,567	MAGI Parents/ Caretakers 69% to 133% FPL.  \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 \$(\$19,144,822) \$1,085,490 \$3,313,369 \$141,662	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$13,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 (\$14,126,98) \$3,352,684 \$18,550,884 \$1,193,774	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$2526,326 \$32,048 \$13,709 \$205,401 \$576,604 (\$148,093) \$5,734 \$15,988 \$(\$72)	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$569 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,793 \$42,515,75 \$43,346,045 \$3,369,425 \$1,904,718 \$123,450	Eligible Children \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$50,248,774 \$2,763,584 \$5,169,690 \$1223,717 \$11,313,805 \$774,229 \$(8,81,57,224) \$517,169 \$50 \$774,29	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$913,324 \$485,907 \$606,035 \$3,290,042 \$10,091,139 \$439,430 \$7,275,685 \$106,905 \$1166,905 \$18,436	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$7,356,456 \$23,933,526 \$25,163,361 \$3,379,883 \$181,402 \$2,837,197 \$1,195,161 \$2,045,612 \$844,683 \$3,432,073 \$21,264	Eligible Pregnant Adults \$2,233,610 \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$3707,443 \$391,434 \$331,79 \$333,652 \$201,186 \$220,159 \$540,512 \$4,959 \$59	Emergency Services \$3,676,871 \$5,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 \$407,874) \$1,954 \$12,879 \$108,827 \$7,790 \$309,508 \$6,178	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 \$119,307,378 \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 \$374,467,718) \$13,545,788 \$39,595,129 \$57,071,745
Physician Services & EPSDT Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Physician Administered Drugs Physician Administered Drugs Corner Rural Health Centers Federally Qualified Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare)	Older (OAP-A) \$1.542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$926,766 \$164,486 \$5,813,088 \$2,619,026 \$11,240,420 \$1,888,311) \$28,481 \$492,479 \$25,705,053 \$0 \$0	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,959,255 \$9,972,080 \$4,130,782 \$880,960 \$2,805,807 \$17,247,297 \$1,989,172 \$12,435,256 \$225,827 \$997,378	Individuals to 59 (AND/AB)  \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,108,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618 \$3,871,235 \$13,828,937 \$0 \$0	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0.00 \$1,164,324 \$0.00 \$1,164,324 \$0.00 \$1,164,324 \$0.00 \$1,529,352 \$1,529,352 \$15,334,121 \$2,400,257 \$(\$11,055,861) \$76,039 \$448,990 \$3,334,711 \$0.00 \$0.0	MAGI Parents/ Caretakers to 68% FPL 543,527,453 \$2,091,912 \$1,750,242 \$13,664,252 \$2,8325,638 \$35,085,174 \$31,967,358 \$31,967,358 \$31,967,358 \$32,2945 \$65,012,450 \$9,232,066 \$46,873,805) \$2,409,877 \$8,804,545 \$1,361,567 \$0	MAGI Parents/ Caretakers 69% to 133% FPL \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 \$1,188,490 \$1,085,490 \$3,13,369 \$1,141,662	\$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,499 \$73,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 \$144,126,988) \$3,952,684 \$18,550,884 \$11,93,774	Breast & Cervical Cancer Program \$163,934 \$6,668 \$273 \$13,829 \$0 \$13,829 \$0 \$136,372 \$256,326 \$32,048 \$13,709 \$205,401 \$576,601 \$576,601 \$575,601 \$575,988 \$672,980 \$60	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,793 \$55,958,663 \$4,251,575 \$40,346,049 \$3,396,925 \$19,947,118 \$123,450	Eligible Children \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$2,483,774 \$2,763,584 \$5,169,690 \$(323,464) \$1,223,717 \$11,313,805 \$774,229 \$(88,157,224) \$51,7169 \$0 \$0 \$0	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$0 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,091,139 \$439,430 (\$7,275,685) \$215,369 \$106,905 \$18,436 \$0	Adults \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383 \$1818,402 \$2,837,197 \$1,195,161 \$(\$2,045,612) \$844,683 \$3,432,073 \$21,264	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0,51 \$774,843 \$2,741,573 \$707,443 \$391,434 \$331,179 \$333,652 \$2,01,186 \$(\$242,005) \$(\$154,706) \$4,959	Emergency Services \$33,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 (\$407,874) \$1,954 \$12,879 \$108,827 (\$9,286) \$7,790 \$309,508 \$6,178	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 (\$69) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 (\$374,467,718) \$13,545,788 \$39,595,129 \$57,071,745 \$0
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Physician Administered Drugs  Physician Administered Drugs  Collaboration Proceedings  Proceedings of the Medical Equipment  Prescription Drugs  Physician Administered Drugs  Orug Rebate  Rural Health Centers  Federally Qualified Health Centers  Federally Qualified Health Centers  Colnsurance (Title XVIII-Medicare)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$166,486 \$5,2619,026 \$1,240,420 (\$1,888,311) \$492,479 \$25,705,053 \$0	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$13,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807 \$17,247,297 \$1,989,172 \$1,247,297 \$1,989,172 \$1,243,256 \$2,25,827 \$997,378 \$3,992,483 \$0 \$0	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618 \$3,871,235 \$13,828,937	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$50 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762 \$1,529,352 \$(51,05,861) \$76,039 \$448,990 \$3,334,711 \$5,000 \$50 \$60	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$3,321,945 \$65,012,450 \$9,232,066 \$(\$46,873,805) \$2,409,877 \$8,804,545 \$1,361,567	MAGI Parents/ Caretakers 69% to 133% FPL  \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 \$(\$19,144,822) \$1,085,490 \$3,313,369 \$141,662 \$0 \$0	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$160,862,849 \$73,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 \$2144,126,988) \$3,952,684 \$11,93,774 \$0 \$0	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$2526,326 \$32,048 \$13,709 \$205,401 \$576,604 (\$148,093) \$5,734 \$15,988 \$(\$72)	(AFDC-C/BC) \$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$699 \$320,915,673 \$82,624,369 \$37,368,425 \$2,671,200 \$12,964,793 \$42,515,575 (\$40,346,049) \$33,368,225 \$4,251,575 (\$40,346,049) \$33,368,225 \$33,368,225 \$4,251,575 \$40,346,049 \$33,368,225 \$33,368,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$33,68,225 \$34,28,28,28 \$34,28,28 \$34,28,28 \$35,6	Eligible Children  \$11,810,003 \$246,211 \$246,211 \$5,1043 \$8,836,101 \$0 \$0 \$2,483,774 \$2,763,584 \$5,169,690 (\$328,464) \$1,223,717 \$11,313,805 \$774,229 \$8,177,224) \$591,977 \$615,982 \$17,169 \$0 \$0 \$0 \$0 \$(\$33)	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$913,324 \$485,907 \$606,035 \$3,290,042 \$10,091,139 \$439,430 \$7,275,685 \$106,905 \$1166,905 \$18,436	Adults  \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$00 \$50 \$7,356,65 \$23,933,526 \$5,163,361 \$3,379,383 \$1814,402 \$2,837,197 \$1,195,161 \$(\$2,045,612) \$844,683 \$3,432,073 \$21,264 \$0 \$0 \$0 \$(\$66)	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443 \$331,179 \$335,652 \$201,184 \$(\$242,005) \$(\$154,706) \$540,512 \$4,959 \$0	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 \$41,954 \$11,854 \$12,879 \$108,827 \$1,954 \$51,879 \$108,827 \$1,954 \$1,2,879 \$2,2,879 \$2,2,879 \$3,2,9,2,879 \$3,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 \$119,307,378 \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 \$374,467,718) \$13,545,788 \$39,595,129 \$57,071,745
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services Family Planning  Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment Prescription Drugs Physician Administered Drugs Physician Administered Drugs Prescription Engise Prescription Engise Prescription Drugs Orug Rebate Rural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$926,766 \$166,486 \$2,619,026 \$1,240,420 \$1,240,420 \$1,240,420 \$1,240,420 \$2,619,026 \$1,240,420	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807 \$17,247,297 \$1,989,172 \$12,435,256 \$225,827 \$997,378 \$0 \$0 \$0 \$0 \$0 \$1,374,691 \$1,374	Individuals to 59 (AND/AB) \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618 \$3,871,235 \$13,828,937 \$0 \$0 \$0 \$0 \$0 \$1	In \$6,351,317 \$228,816 \$228,816 \$69,354 \$1,164,324 \$50 \$3,118,831 \$6,203,518 \$2,959,680 \$424,762 \$1,529,352 \$15,334,121 \$2,400,257 \$(311,055,861) \$76,039 \$3,434,711 \$0 \$0 \$0 \$(\$50)\$	MAGI Parents/ Caretakers to 68% FPL   \$43,527,453   \$2,091,912   \$1,750,242   \$13,664,222   \$0   \$28,325,638   \$35,985,174   \$31,967,358   \$15,422,542   \$3,321,945   \$65,012,450   \$9,232,066   \$(\$46,873,805)   \$2,409,877   \$8,804,545   \$0   \$0   \$0   \$0   \$0   \$(\$290)	MAGI Parents/ Caretakers 69% to 133% FPL  \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,936 \$26,553,248 \$4,153,722 \$1,085,490 \$3,313,369 \$141,662 \$0 \$0 \$00 \$(\$106)	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$16,862,492 \$73,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 \$(\$144,126,988) \$3,952,684 \$18,550,884 \$1,93,774 \$0 \$0 \$0	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$256,326 \$32,048 \$13,709 \$205,401 \$576,604 \$(\$148,094) \$5,734 \$15,988 \$(\$72) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,793 \$55,958,663 \$4,251,575 \$40,346,049 \$13,345,045 \$123,450 \$0 \$0 \$0 \$1,456,456	Eligible Children  \$11,810,003 \$246,211 \$246,211 \$5,1043 \$8,836,101 \$0 \$0 \$2,483,774 \$2,763,584 \$5,169,690 (\$328,464) \$1,223,717 \$11,313,805 \$774,229 \$8,177,224) \$591,977 \$615,982 \$17,169 \$0 \$0 \$0 \$0 \$(\$33)	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$913,324 \$485,907 \$606,035 \$3,290,042 \$10,091,139 \$439,430 \$215,369 \$106,905 \$18,436 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Adults  \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$00 \$50 \$7,356,65 \$23,933,526 \$5,163,361 \$3,379,383 \$1814,402 \$2,837,197 \$1,195,161 \$(\$2,045,612) \$844,683 \$3,432,073 \$21,264 \$0 \$0 \$0 \$(\$66)	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0,512 \$707,443 \$331,434 \$331,434 \$331,439 \$333,652 \$201,186 \$(242,005) \$(\$154,706) \$540,512 \$4,959 \$0 \$0 \$(\$9)	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,620,889 \$2,474,239 (\$407,874) \$11,874 \$112,879 \$108,827 (\$9,286) \$7,790 \$309,508 \$6,178 \$0 \$0 \$0 \$(\$18)	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$19,307,378 \$(\$69) \$212,718,284 \$408,675,878 \$199,857,124 \$58,468,881 \$78,683,921 \$193,574,597 \$66,512,956 \$374,457,174,597 \$66,512,956 \$374,457,174,597 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,174,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,517 \$67,517,
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Physician Administered Drugs  Drug Rebate  Rutal Health Centers  Federally Qualified Health Centers  Co-Insurance (Trile XVIII-Medicare)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services  Other Medical Services  Preventive Services	Older (OAP-A) \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$166,486 \$5,2619,026 \$1,240,420 (\$1,888,311) \$2,619,026 \$1,240,420 (\$1,888,311) \$2,619,026 \$1,240,420 (\$1,888,311) \$2,619,026 \$1,240,420 (\$1,888,311) \$2,619,026 \$1,240,420 (\$1,888,311) \$2,619,026 \$1,240,420 (\$1,888,311) \$2,619,026 \$1,020,	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0,575,95,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807 \$17,247,297 \$19,89,172 (\$12,435,259) \$22,827 \$997,378 \$3,992,483 \$0,000 \$0,0	Individuals to 59 (AND/AB)  \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618 \$3,871,235 \$13,828,937 \$0 \$0 \$60 \$(\$423)	In \$6,351,317 \$228,816 \$699,354 \$1,164,324 \$0 \$1,164,324 \$0 \$1,164,324 \$2,203,518 \$2,959,680 \$424,762 \$1,529,352 \$15,334,121 \$2,400,257 \$(31,055,861) \$76,039 \$448,990 \$3,334,711 \$0 \$0 \$0 \$(\$52),051,052,053 \$1,	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$3,321,945 \$65,012,450 \$9,232,066 \$(\$46,873,805) \$2,409,877 \$8,804,545 \$1,361,567 \$0 \$0 \$0 \$(\$290) \$(\$5,034,337)	MAGI Parents/ Caretakers 69% to 133% FPL.  \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 \$1,085,490 \$3,313,369 \$141,662 \$0 \$0 \$0 \$100 \$1,991,456]	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$13,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 \$(\$14,126,98) \$3,352,684 \$11,93,774 \$0 \$0 \$(\$18),500,884 \$1,93,774 \$1,93,774 \$1,93,774 \$1,93,774 \$1,93,774 \$1,93,774 \$1,93,774 \$1,93,774 \$1,93,774 \$1,93,774	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,327 \$2526,326 \$32,048 \$13,709 \$205,401 \$576,604 (\$148,093) \$5,734 \$15,988 (\$72) \$0 \$0 \$0 (\$2) \$(\$10,328)	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 (\$699 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,793 \$55,958,663 \$4,251,575 (\$40,346,049) \$33,306,925 (\$1,904,718) \$123,450 \$0 (\$451) \$123,450 \$0 (\$451) \$1,041,1874	Eligible Children \$11,810,003 \$246,211, \$71,043 \$8,836,101 \$0, \$2,483,774 \$2,763,584 \$5,169,690 \$323,846,4 \$1,223,717 \$11,313,805 \$774,229 \$81,7169,592 \$17,169 \$0, \$0, \$0,000,000,000,000,000,000,000,	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,091,139 \$439,430 \$57,275,685 \$106,905 \$18,436 \$0 \$0 \$(\$42) \$(\$366,650)	Adults  \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$33,79,383 \$181,402 \$2,837,197 \$1,195,161 \$(\$2,045,612) \$844,683 \$3,432,073 \$21,264 \$0 \$0 \$(\$(5),122,118)	Eligible Pregnant Adults  \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$3707,443 \$391,434 \$331,79 \$333,5652 \$201,186 (\$242,005) (\$154,706) \$540,512 \$4,959 \$0 \$0 (\$9)	Emergency Services \$3,676,871 \$5,517,459 \$511 \$662 \$0 \$2,311 \$6,420,889 \$2,474,239 (\$407,874) \$1,954 \$12,879 \$108,827 (\$9,286) \$7,790 \$309,508 \$6,178 \$0 \$0 \$1,544 \$1,544 \$1,545	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 (\$374,467,718) \$13,545,788 \$39,595,129 \$57,071,745 \$0 \$0 \$2,478 \$1,520,
Physician Services & EPSDT  Emergency Transportation  Non-emergency Medical Transportation  Dental Services  Family Planning  Health Maintenance Organizations  Inpatient Hospitals  Outpatient Hospitals  Lab & X-Ray  Durable Medical Equipment  Prescription Drugs  Physician Administered Drugs  Drug Rebate  Rual Health Centers  Federally Qualified Health Centers  Federally Qualified Health Centers  Co-Insurance (Trile XVIII-Medicare)  Breast and Cervical Cancer Treatment Program  Administrative Service Organizations - Services  Other Medical Services  Preventive Services  Acute Home Health  Presumptive Eligibility  Total	Older (OAP-A)  \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0 \$8,192,542 \$9,110,486 \$166,486 \$526,766 \$1164,480 \$2,619,026 \$1,240,420 \$2,240,420	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807 \$17,247,297 \$19,891,172 (\$12,435,256) \$20,000	Individuals to 59 (AND/AB)  \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 (\$80,718,729) \$859,618 \$3,871,235 \$13,828,937 \$0 \$0 (\$423) (\$881,505) \$3,041,762 \$0 \$284,381,075	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$0 \$1,164,324 \$0 \$1,164,324 \$2,203,518 \$2,959,680 \$424,762 \$1,529,352 \$15,334,121 \$2,400,257 \$(31,055,861) \$76,039 \$448,990 \$3,334,711 \$0 \$0 \$0 \$10,000 \$10	MAGI Parents/ Caretakers to 68% FPL \$43,527,453 \$2,091,912 \$1,750,242 \$13,664,222 \$0 \$28,325,638 \$35,085,174 \$31,967,358 \$15,422,542 \$3,321,945 \$65,012,450 \$9,232,066 \$(\$46,873,805) \$2,409,877 \$8,804,545 \$1,361,567 \$0 \$0 \$0 \$(\$290) \$(\$5,034,357) \$25,558 \$0 \$210,094,096	MAGI Parents/ Caretakers 69% to 133% FPL.  \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,690 \$26,553,248 \$4,153,722 \$(\$19,144,822) \$1,085,490 \$3,313,369 \$141,662 \$0 \$0 \$100 \$1,450,1450 \$4,196 \$0,574,074,251	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$16,682,849 \$73,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 \$(\$14,126,988) \$3,952,684 \$11,93,774 \$0 \$0 \$(\$1819) \$(\$7,641,351) \$92,475 \$0 \$606,221,247	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$13,627 \$2526,326 \$32,048 \$13,709 \$205,401 \$576,604 (\$148,093) \$5,734 \$15,988 \$(\$72) \$0 \$0 \$0 \$(\$\$2) \$(\$\$10,328) \$0 \$0 \$1,268,390	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$48,617,111 \$509 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,793 \$55,958,663 \$4,251,575 \$40,346,049 \$37,368,425 \$1,2964,793 \$1,2964,793 \$1,2964,793 \$1,2964,793 \$1,2964,793 \$1,2964,718 \$1,23,450 \$1,2964,718 \$1,23,450 \$1,2964,718 \$1,2964,	Eligible Children \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$50 \$2,48,377 \$2,763,584 \$5,169,690 \$12,23,717 \$11,313,805 \$774,229 \$8,157,2240 \$17,169 \$0 \$0 \$0 \$1,323,4640 \$1,233,717 \$1,313,805 \$174,629 \$1,169	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,901,303 \$439,430 \$57,275,685 \$106,905 \$18,436 \$0 \$0 \$236,749 \$0 \$27,068,895	\$12,616,246 \$490,719 \$252,088 \$1,020,700 \$0 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383 \$181,402 \$2,837,197 \$1,195,161 \$2,045,612 \$344,683 \$3,432,073 \$21,264 \$0 \$0 \$(\$56)6) \$(\$1,122,118) \$1,128 \$0 \$59,557,593	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0 \$1,475,844 \$2,741,573 \$707,443 \$331,434 \$331,434 \$331,179 \$333,652 \$201,186 \$2242,005) \$540,512 \$4,959 \$0 \$0 \$90 \$(\$61,804) \$429 \$0 \$8,428,170	Emergency Services \$3,676,871 \$5,17,459 \$511 \$662 \$0 \$2,311 \$6420,889 \$2,474,239 (\$407,874) \$1,954 \$12,879 \$108,827 (\$9,286) \$7,790 \$309,508 \$6,178 \$6 \$0 \$(\$18),891 \$(\$31,848) \$0 \$0 \$19,091,053	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 \$(569) \$212,718,284 \$408,675,878 \$199,857,142 \$58,468,881 \$78,683,921 \$519,374,597 \$66,512,956 \$374,467,718) \$39,595,129 \$57,071,745 \$0 \$0 \$2,478) \$2,478) \$3,595,129 \$57,071,745 \$0 \$0 \$1,834,701,009
Physician Services & EPSDT  Emergency Transportation Non-emergency Medical Transportation Dental Services Family Planning Health Maintenance Organizations Inpatient Hospitals Outpatient Hospitals Outpatient Hospitals Lab & X-Ray Durable Medical Equipment Prescription Drugs Physician Administered Drugs Physician Administered Drugs Prescription Drugs Aural Health Centers Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program Administrative Service Organizations - Services Other Medical Services Preventive Services Preventive Services Acute Home Health Presumptive Eligibility	Older (OAP-A)  \$1,542,608 \$327,972 \$4,872,912 \$3,901,535 \$0  \$8,192,542 \$9,104,6486 \$926,766 \$166,486 \$2,619,026 \$1,240,420 \$(\$1,888,31) \$28,481 \$492,479 \$25,705,053 \$0 \$0 \$(\$75) \$(\$91,185)	60 to 64 (OAP-B) \$5,810,643 \$602,653 \$2,730,979 \$1,374,691 \$0 \$7,595,255 \$9,972,080 \$4,130,782 \$886,960 \$2,805,807 \$17,247,297 \$1,989,172 \$12,435,256 \$225,827 \$997,378 \$0 \$0 \$3,997,483 \$0 \$1,500,400,400,400,400,400,400,400,400,400	Individuals to 59 (AND/AB)  \$49,682,455 \$2,674,948 \$8,475,446 \$7,872,591 \$0 \$34,107,121 \$58,943,424 \$19,708,448 \$4,202,679 \$34,477,758 \$111,954,262 \$12,281,047 \$859,618 \$3,871,235 \$13,828,937 \$0 \$0 \$0 \$(\$423) \$(\$881,505) \$3,041,762	In \$6,351,317 \$228,816 \$669,354 \$1,164,324 \$50 \$1,18,831 \$6,203,518 \$2,959,680 \$444,762 \$1,529,352 \$15,334,121 \$2,400,257 \$(311,055,861) \$76,039 \$448,990 \$3,334,711 \$0 \$(550) \$(512,034) \$10,469 \$0 \$0	MAGI Parents/ Caretakers to 68% FPL   \$43,527,453   \$2,091,912   \$1,750,242   \$13,664,222   \$0   \$28,325,638   \$35,985,174   \$31,967,358   \$15,422,542   \$3,321,945   \$65,012,450   \$9,232,066   \$(\$46,873,805)   \$2,409,877   \$8,804,545   \$0   \$0   \$0   \$0   \$0   \$(\$290)   \$(\$5,034,357)   \$5,558   \$6   \$0	MAGI Parents/ Caretakers 69% to 133% FPL  \$15,239,282 \$475,360 \$278,633 \$5,280,050 \$0 \$11,772,097 \$9,392,125 \$11,430,261 \$4,409,451 \$1,381,602 \$1,085,490 \$26,553,248 \$4,153,722 \$1,085,490 \$3,313,369 \$0 \$0 \$0 \$0 \$0 \$0 \$1,691,456) \$4,196	MAGI Adults  \$100,208,406 \$15,186,092 \$7,600,983 \$24,692,249 \$0 \$86,459,420 \$16,862,492 \$73,961,160 \$26,612,239 \$11,645,485 \$199,899,464 \$27,072,240 \$(\$144,126,988) \$3,952,684 \$18,550,884 \$18,550,884 \$(\$143,550,884) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0,57,641,351) \$92,475 \$0,641	Breast & Cervical Cancer Program  \$163,934 \$6,668 \$273 \$13,829 \$0 \$0 \$136,372 \$256,326 \$32,048 \$13,709 \$205,401 \$576,604 \$(\$148,094) \$5,734 \$15,988 \$(\$72) \$0 \$0 \$0 \$0 \$0 \$0 \$5,704 \$1,504 \$1,508 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$131,340,457 \$3,106,282 \$1,257,413 \$48,617,111 \$20,915,673 \$82,624,369 \$37,368,425 \$2,671,202 \$12,964,793 \$55,958,663 \$4,251,575 \$40,346,049 \$13,3450 \$0 \$0 \$0 \$1,161,874 \$36,211,874 \$36,211,874 \$1,161,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874 \$36,211,874	Eligible Children  \$11,810,003 \$246,211 \$71,043 \$8,836,101 \$0 \$0 \$2,483,774 \$2,763,584 \$5,169,690 (\$328,464) \$1,222,717 \$11,313,805 \$774,229 (\$81,572,24) \$591,977 \$615,982 \$17,169 \$0 \$0 \$0 \$0 \$(\$33) \$(\$1,513,825) \$513,350	\$11,317,106 \$406,189 \$221,547 \$2,729,889 \$913,324 \$485,907 \$3,633,205 \$606,035 \$3,290,042 \$10,091,139 \$439,430 \$215,369 \$106,905 \$18,436 \$0 \$0 \$0 \$3 \$3 \$3 \$3 \$3 \$3 \$3 \$3 \$3 \$3	Adults  \$12,616,246 \$490,719 \$252,088 \$1,020,700 \$00 \$7,356,456 \$23,933,526 \$5,163,361 \$3,379,383 \$1818,402 \$2,837,197 \$1,105,161 \$(\$2,045,612) \$844,683 \$3,432,073 \$21,264 \$0 \$0 \$(\$66) \$(\$1,122,118) \$1,128 \$1,128	Eligible Pregnant Adults \$2,233,610 \$74,832 \$6,618 \$139,424 \$0,512 \$707,443 \$391,434 \$331,79 \$335,652 \$201,186 \$(5242,005) \$(\$154,706) \$540,512 \$4,959 \$0 \$0 \$590 \$50 \$50,804)	Emergency Services \$3,676,871 \$6,517,459 \$511 \$662 \$0 \$2,311 \$6,620,819 \$6,420,819 \$1,954 \$11,879 \$108,827 \$2,979 \$309,508 \$6,178 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$395,520,393 \$32,436,114 \$28,188,041 \$119,307,378 \$(\$69) \$212,718,284 \$408,675,878 \$199,875,142 \$58,468,881 \$778,683,921 \$519,374,597 \$66,512,956 \$374,467,718) \$13,545,788 \$339,595,129 \$57,071,745 \$0 \$0 \$0 \$0 \$2,478) \$(\$26,031,733) \$5,246,760

## Exhibit G - COMMUNITY-BASED LONG-TERM CARE Summary

					FY 20	020-21 Commu	nity-Based Lon	g-Term Care l	Request							
FY 2020-21	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
HCBS Waivers	\$312,469,356	\$62,387,400	\$331,620,409	\$4,365,547	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$710,842,712
Private Duty Nursing	\$4,993,460	\$751,593	\$71,102,740	\$350,057	(\$20,592)	(\$10,296)	(\$51,479)	\$0	\$2,903,413	\$175,028	\$22,763,996	\$0	\$0	\$0	\$0	\$102,957,920
Long-Term Home Health	\$49,174,455	\$13,566,843	\$274,075,902	\$8,773,510	\$898,750	\$85,595	\$3,637,797	\$0	\$53,368,621	\$3,509,404	\$20,842,437	\$0	\$0	\$0	\$42,798	\$427,976,112
Hospice	\$7,228,032	\$2,356,416	\$45,766,370	\$2,017,183	\$159,341	\$23,996	\$726,274	\$0	\$9,658,630	\$697,937	\$3,439,012	\$1,093	\$431	\$0	\$0	\$72,074,715
Total Community-Based Long-Term Care	\$373,865,303	\$79,062,252	\$722,565,421	\$15,506,297	\$1,037,499	\$99,295	\$4,312,592	\$0	\$65,930,664	\$4,382,369	\$47,045,445	\$1,093	\$431	\$0	\$42,798	\$1,313,851,459
	-				FY 20	021-22 Commu	nity-Based Lon	g-Term Care l	Request							
FY 2021-22	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
HCBS Waivers	\$326,125,784	\$65,254,715	\$357,973,808	\$4,627,081	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$753,981,388
Private Duty Nursing	\$5,086,159	\$765,545	\$72,422,699	\$356,555	(\$20,974)	(\$10,487)	(\$52,435)	\$0	\$2,957,313	\$178,278	\$23,186,590	\$0	\$0	\$0	\$0	\$104,869,243
Long-Term Home Health	\$52,446,514	\$14,469,578	\$292,312,861	\$9,357,298	\$958,552	\$91,291	\$3,879,855	\$0	\$56,919,759	\$3,742,920	\$22,229,289	\$0	\$0		\$45,645	\$456,453,562
Hospice	\$5,319,794	\$2,547,246	\$51,204,318	\$2,020,029	\$200,372	\$25,031	\$820,345	\$0	\$10,005,187	\$742,579	\$3,691,135	\$1,275	\$466	\$0	\$0	\$76,577,777
Total Community-Based Long-Term Care	\$388,978,251	\$83,037,084	\$773,913,686	\$16,360,963	\$1,137,950	\$105,835	\$4,647,765	\$0	\$69,882,259	\$4,663,777	\$49,107,014	\$1,275	\$466	\$0	\$45,645	\$1,391,881,970
					FY 20	022-23 Commu	nity-Based Lon	g-Term Care l	Request							
FY 2022-23	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
HCBS Waivers	\$343,084,611	\$68,772,864	\$390,198,507	\$4,950,598	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0		\$0	\$807,006,580
Private Duty Nursing	\$5,180,215	\$779,703	\$73,762,005	\$363,149	(\$21,362)	(\$10,681)	(\$53,404)	\$0		\$181,575	\$23,615,377	\$0	\$0	4.0	\$0	\$106,808,579
Long-Term Home Health	\$55,846,224	\$15,407,531	\$311,261,285	\$9,963,861	\$1,020,688	\$97,208	\$4,131,357	\$0		\$3,985,544	\$23,670,245	\$0	\$0		\$48,603	\$486,041,982
Hospice	\$3,003,618	\$2,820,339	\$56,131,007	\$2,407,449	\$258,005	\$27,803	\$982,771	\$0		\$888,801	\$4,019,448	\$1,467	\$499	\$0	\$0	\$81,945,977
Total Community-Based Long-Term Care	\$407,114,668	\$87,780,437	\$831,352,804	\$17,685,057	\$1,257,331	\$114,330	\$5,060,724	\$0	\$75,026,208	\$5,055,920	\$51,305,070	\$1,467	\$499	\$0	\$48,603	\$1,481,803,118

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   |   |  | Casi   | h Based Actuals   
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HCBS WAIVERS	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)
   | Disabled Buy-In   | MAGI Parents/<br>Caretakers to 68%<br>FPL  | MAGI Parents/<br>Caretakers 69% to<br>133% FPL   | MAGI Adults   
  | Breast & Cervical<br>Cancer Program  | Eligible Children<br>(AFDC-C/BC)   | SB 11-008 Eligible<br>Children   
   | Foster Care   | MAGI Pregnant<br>Adults  | SB 11-250 Eligible<br>Pregnant Adults  
   | Non-Citizens-<br>Emergency Services  | Partial Dual Eligibles  | TOTAL  
  |
| FY 2011-12   | \$117,679,185   |   | \$130,652,872   
   | \$0   | \$8,548  | \$20,511   | \$0   
  | \$0  | \$7,404  | S0   
   | \$111,354   | \$0  | \$0  
   | \$0  | \$260,261   | \$272,008,186  
  |
| FY 2012-13   | \$125,361,271   |   | \$142,882,126   
   | \$47,542  | \$16,956   | \$39,770   | \$7,746   
  | \$0  | \$17,013   | \$0  
   | \$69,174  | \$0  | \$0  
   | \$0  | \$221,261   | \$293,492,008  
  |
| FY 2013-14   | \$144,155,003   |   | \$162,371,250   
   | \$771,736   | \$205,171  | \$30,048   | \$339,106   
  | \$0  | \$264,157  | \$0  
   | \$169,103   | \$35   | \$0  
   | \$0  | \$888,063   | \$338,954,751  
  |
| FY 2014-15   | \$153,119,541<br>\$166,057,738  |   | \$171,957,958<br>\$184,903,859  
   | \$1,583,713<br>\$2,098,863  | \$663,480<br>\$352,648   | \$108,582<br>\$42,535  | \$1,394,432<br>\$1,716,796  
  | \$0<br>\$0   | \$993,001<br>\$1,008,304   | \$953<br>\$2,152   
   | \$288,135<br>\$157,427  | \$29,231<br>\$34,316   | \$0<br>\$0   
   | \$1,164<br>\$0   | \$984,351<br>\$888 293  | \$364,217,450<br>\$394,019,725   
  |
| FY 2015-16<br>FY 2016-17   | \$166,057,738   |   | \$184,903,859<br>\$185,020,240  
   | \$2,098,863<br>\$2,510,268  | \$352,648<br>\$333.517   | \$42,535<br>\$32,557   | \$1,716,796   
  | S0<br>S0   |  |  
   | \$157,427<br>\$82.643   | \$34,316<br>\$2,552  | S0<br>S0   
   | \$0<br>\$0   | \$888,293<br>\$545.091  | \$394,019,725<br>\$442,917,216   
  |
| FY 2016-17<br>FY 2017-18   | \$215,180,339<br>\$260,493,211  |   | \$185,020,240   
   | \$2,510,268   | \$333,317  | \$32,337   | \$1,404,076   
  | S0   |  |  
   | \$82,643<br>\$0   | \$2,332<br>\$0   | S0   
   | \$0<br>\$0   | \$343,091   | \$442,917,216<br>\$515,418,984   
  |
| FY 2017-18<br>FY 2018-19   | \$260,473,263   |   | \$262,008,510   
   | \$3,626,782   | S0   | \$0  | \$1,370   
  | \$0<br>\$0   |  |  
   | \$0   | \$0  | S0   
   | \$0  | \$0<br>\$0  | \$578,386,236  
  |
| FY 2019-20   | \$320,030,084   |   | \$270 329 806   
   | \$4.704.084   | \$0  | \$0  | \$77,179  
  | SO.  |  |  
   | \$36 302  | SO.  | \$0  
   | \$0  | SO.   | \$661.251.452  
  |
| Estimated FY 2020-21   | \$312,469,356   | \$62,387,400  | \$331,620,409   
   | \$4,365,547   | S0   | \$0  | S0  
  | \$0  | \$0  | S0   
   | \$0   | \$0  | S0   
   | \$0  | \$0   | \$710,842,712  
  |
| Estimated FY 2021-22   | \$326,125,784   |   | \$357,973,808   
   | \$4,627,081   | S0   | \$0  | \$0   
  | \$0  | \$0  |  
   | \$0   | \$0  | S0   
   | \$0  | S0  | \$753,981,388  
  |
| Estimated FY 2022-23   | \$343,084,611   | \$68,772,864  | \$390,198,507   
   | \$4,950,598   | \$0  | \$0  | \$0   
  | \$0  | \$0  | \$0  
   | \$0   | \$0  | \$0  
   | \$0  | \$0   | \$807,006,580  
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   |   |  | Percent Chan   | ge in Cash Based Actua  
  | als  |  |  
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| HCBS WAIVERS   | Adults 65 and Older<br>(OAP-A)  | Disabled Adults 60 to<br>64<br>(OAP-B)  | Disabled Individuals to<br>59<br>(AND/AB)   
   | Disabled Buy-In   | MAGI Parents/<br>Caretakers to 68%<br>FPL  | MAGI Parents/<br>Caretakers 69% to<br>133% FPL   | MAGI Adults   
  | Breast & Cervical<br>Cancer Program  | Eligible Children<br>(AFDC-C/BC)   | SB 11-008 Eligible<br>Children   
   | Foster Care   | MAGI Pregnant<br>Adults  | SB 11-250 Eligible<br>Pregnant Adults  
   | Non-Citizens-<br>Emergency Services  | Partial Dual Eligibles  | TOTAL  
  |
| FY 2012-13   | 6.53%   |   | 9.36%   
   | 100.00%   | 98.36%   | 93.90%   | 100.00%   
  | 0.00%  | 129.78%  | 0.00%  
   | -37.88%   | 0.00%  | 0.00%  
   | 0.00%  | -14.98%   | 7.90%  
  |
| FY 2013-14   | 14.99%  |   | 13.64%  
   | 1523.27%  | 1110.02%   | -24.45%  | 4277.82%  
  | 0.00%  | 1452.68%   | 0.00%  
   | 144.46%   | 100.00%  | 0.00%  
   | 0.00%  | 301.36%   | 15.49%   
  |
| FY 2014-15   | 6.22%   |   | 5.90%   
   | 105.21%   | 223.38%  | 261.36%  | 311.21%   
  | 0.00%  | 275.91%  |  
   | 70.39%  | 83417.14%  | 0.00%  
   | 100.00%  | 10.84%  | 7.45%  
  |
| FY 2015-16   | 8.45%   |   | 7.53%   
   | 32.53%  | -46.85%  | -60.83%  | 23.12%  
  | 0.00%  | 1.54%  |  
   | -45.36%   | 17.40%   | 0.00%  
   | -100.00%   | -9.76%  | 8.18%  
  |
| FY 2016-17   | 29.58%  |   | 0.06%   
   | 19.60%  | -5.42%<br>-100.00%   | -23.46%<br>-100.00%  | -18.22%<br>-99.90%  
  | 0.00%  | -26.35%<br>-100.00%  | 166.82%<br>-100.00%  
   | -47.50%<br>-100.00%   | -92.56%<br>-100.00%  | 0.00%  
   | 0.00%  | -38.64%<br>-100.00%   | 12.41%<br>16.37%   
  |
| FY 2017-18   | 21.06%  |   | 13.43%  
   | 34.24%<br>7.63%   | -100.00%<br>0.00%  | -100.00%   | -100.00%  
  | 0.00%  | -100.00%   |  
   | -100.00%<br>0.00%   | -100.00%   | 0.00%  
   | 0.00%  | -100.00%  |  
  |
| FY 2018-19<br>FY 2019-20   | -0.01%  |   | 24.85%  
   | 29.70%  | 0.00%  | 0.00%  | -100.00%  
  | 0.00%  | 0.00%  |  
   | 100.00%   | 0.00%  | 0.00%  
   | 0.00%  | 0.00%   | 12.22%<br>14.33%   
  |
| FY 2019-20<br>Estimated FY 2020-21   | -2.36%  |   | 22.67%  
   | -7.20%  | 0.00%  | 0.00%  | -100.00%  
  | 0.00%  | 0.00%  |  
   | -100.00%  | 0.00%  | 0.00%  
   | 0.00%  | 0.00%   | 7.50%  
  |
| Estimated FY 2020-21<br>Estimated FY 2021-22   | 4.37%   |   | 7.95%   
   | 5.99%   | 0.00%  | 0.00%  | 0.00%   
  | 0.00%  | 0.00%  |  
   | 0.00%   | 0.00%  | 0.00%  
   | 0.00%  | 0.00%   | 6.07%  
  |
| Estimated FY 2021-22<br>Estimated FY 2022-23   | 5.20%   |   | 9.00%   
   | 6.99%   | 0.00%  | 0.00%  | 0.00%   
  | 0.00%  | 0.00%  |  
   | 0.00%   | 0.00%  | 0.00%  
   | 0.00%  | 0.00%   | 7.03%  
  |
| Estimated F 1 2022-23  | 2.20/6  | 5.0770  | 2.0070  
   | 0.557/4   | 0.0070   |  | r Capita Cost   
  | 0.0079   | 0.007  | 0.0074   
   | 0.0076  | 0.00/9   | 0.0070   
   | 0.0076   | 0.0079  | 7.0070   
  |
|  |   | Disabled Adults 60 to   | Disabled Individuals to   
   |   | MAGI Parents/  | MAGI Parents/  |   
  |  |  |  
   |   |  |  
   |  |   |  
  |
| HCBS WAIVERS   | Adults 65 and Older<br>(OAP-A)  | 64<br>(OAP-B)   | 59<br>(AND/AB)  
   | Disabled Buy-In   | Caretakers to 68%<br>FPL   | Caretakers 69% to<br>133% FPL  | MAGI Adults   
  | Breast & Cervical<br>Cancer Program  | Eligible Children<br>(AFDC-C/BC)   | SB 11-008 Eligible<br>Children   
   | Foster Care   | MAGI Pregnant<br>Adults  | SB 11-250 Eligible<br>Pregnant Adults  
   | Non-Citizens-<br>Emergency Services  | Partial Dual Eligibles  | TOTAL  
  |
| FY 2011-12   | \$2,961.23  |   | \$2,198.29  
   | \$0.00  | \$0.09   | \$0.58   | \$0.00  
  | \$0.00   | \$0.02   | \$0.00   
   | \$6.17  | \$0.00   | \$0.00   
   | \$0.00   | \$13.79   | \$438.75   
  |
| FY 2012-13   | \$3,070.55  |   | \$2,307.53<br>\$2.520.35  
   | \$53.54   | \$0.17   | \$0.96   | \$0.73  
  | \$0.00   | \$0.05   | \$0.00   
   | \$3.89  | \$0.00   | \$0.00   
   | \$0.00   | \$10.43   | \$429.71   
  |
FY 2013-14	\$3,445.72	\$3,020.51
   |   |  |  |   
  |  |  |  
   |   |  |  
   |  |   |  
  |
| FY 2014-15   |   |   |   
   | \$301.46  | \$1.65   | \$0.64   | \$3.89  
  | \$0.00   | \$0.66   |  
   | \$9.26  | \$0.00   | \$0.00   
   | \$0.00   | \$37.99   | \$393.70   
  |
|  | \$3,661.66  |   | \$2,583.97  
   | \$436.65  | \$4.10   | \$1.51   | \$5.78  
  | \$0.00   | \$2.23   | \$0.02   
   | \$14.38   | \$1.96   | \$0.00   
   | \$0.43   | \$37.99<br>\$35.10  | \$393.70<br>\$313.67   
  |
| FY 2015-16   | \$3,916.18  | \$3,491.01  | \$2,583.97<br>\$2,687.56  
   | \$436.65<br>\$337.60  | \$4.10<br>\$2.16   | \$1.51<br>\$0.49   | \$5.78<br>\$5.36  
  | \$0.00<br>\$0.00   | \$2.23<br>\$2.16   | \$0.02<br>\$0.04   
   | \$14.38<br>\$7.90   | \$1.96<br>\$2.38   | \$0.00<br>\$0.00   
   | \$0.43<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26   | \$393.70<br>\$313.67<br>\$303.80   
  |
| FY 2015-16<br>FY 2016-17   |   | \$3,491.01<br>\$3,296.63  | \$2,583.97  
   | \$436.65  | \$4.10   | \$1.51   | \$5.78  
  | \$0.00   | \$2.23   | \$0.02<br>\$0.04   
   | \$14.38   | \$1.96   | \$0.00   
   | \$0.43   | \$37.99<br>\$35.10  | \$393.70<br>\$313.67   
  |
| FY 2015-16<br>FY 2016-17<br>FY 2017-18   | \$3,916.18<br>\$4,897.03  | \$3,491.01<br>\$3,296.63<br>\$3,534.33  | \$2,583.97<br>\$2,687.56<br>\$2,736.22  
   | \$436.65<br>\$337.60<br>\$401.58  | \$4.10<br>\$2.16<br>\$2.07   | \$1.51<br>\$0.49<br>\$0.32   | \$5.78<br>\$5.36<br>\$4.04  
  | \$0.00<br>\$0.00<br>\$0.00   | \$2.23<br>\$2.16<br>\$1.58   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07   | \$1.96<br>\$2.38<br>\$0.19   | \$0.00<br>\$0.00<br>\$0.00   
   | \$0.43<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03   
  |
| FY 2015-16<br>FY 2016-17<br>FY 2017-18<br>FY 2018-19   | \$3,916.18<br>\$4,897.03<br>\$5,674.37  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56  | \$2,583.97<br>\$2,687.56<br>\$2,736.22<br>\$3,107.61  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21  | \$4.10<br>\$2.16<br>\$2.07<br>\$0.00   | \$1.51<br>\$0.49<br>\$0.32<br>\$0.00   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.23<br>\$2.16<br>\$1.58<br>\$0.00   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07<br>\$0.00   | \$1.96<br>\$2.38<br>\$0.19<br>\$0.00   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89   
  |
| FY 2015-16<br>FY 2016-17<br>FY 2017-18   | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30  | \$2,583,97<br>\$2,687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56  | \$4.10<br>\$2.16<br>\$2.07<br>\$0.00<br>\$0.00   | \$1.51<br>\$0.49<br>\$0.32<br>\$0.00<br>\$0.00   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.23<br>\$2.16<br>\$1.58<br>\$0.00<br>\$0.00   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07<br>\$0.00<br>\$0.00   | \$1.96<br>\$2.38<br>\$0.19<br>\$0.00<br>\$0.00   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00<br>\$0.00  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89<br>\$458.54   
  |
| FY 2015-16<br>FY 2016-17<br>FY 2017-18<br>FY 2018-19<br>FY 2019-20<br>Estimated FY 2020-21   | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65  | \$2,583,97<br>\$2,687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20<br>\$4,063.28  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66  | \$4.10<br>\$2.16<br>\$2.07<br>\$0.00<br>\$0.00<br>\$0.00   | \$1.51<br>\$0.49<br>\$0.32<br>\$0.00<br>\$0.00<br>\$0.00   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00<br>\$0.24  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.23<br>\$2.16<br>\$1.58<br>\$0.00<br>\$0.00   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07<br>\$0.00<br>\$0.00<br>\$1.70   | \$1.96<br>\$2.38<br>\$0.19<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00<br>\$0.00<br>\$0.00  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89<br>\$458.54   
  |
| FY 2015-16<br>FY 2016-17<br>FY 2017-18<br>FY 2018-19<br>FY 2018-19   | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65<br>\$4,773.92  | \$2,583.97<br>\$2,687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20<br>\$4,063.28<br>\$5,027.29  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42  | \$4.10<br>\$2.16<br>\$2.07<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$1.51<br>\$0.49<br>\$0.32<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00<br>\$0.24<br>\$0.00<br>\$0.00<br>\$0.00  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.23<br>\$2.16<br>\$1.58<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07<br>\$0.00<br>\$0.00<br>\$1.70   | \$1.96<br>\$2.38<br>\$0.19<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00<br>\$0.00<br>\$0.00  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89<br>\$458.54<br>\$542.35   
  |
| FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 FY 2019-20 FStimated FY 2002-21 FStimated FY 2002-21  | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25<br>\$6,49.21<br>\$6,716.21   | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65<br>\$4,773.92  | \$2,583.97<br>\$2,687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20<br>\$4,063.28<br>\$5,027.29<br>\$5,153.52  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42<br>\$336.71  | \$4.10<br>\$2.16<br>\$2.07<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$1.51<br>\$0.49<br>\$0.32<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00<br>\$0.24<br>\$0.00  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2,23<br>\$2,16<br>\$1,58<br>\$0,00<br>\$0,00<br>\$0,00<br>\$0,00   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07<br>\$0.00<br>\$0.00<br>\$1.70<br>\$0.00<br>\$0.00   | \$1.96<br>\$2.38<br>\$0.19<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89<br>\$458.54<br>\$542.35<br>\$523.19   
  |
| FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 FY 2019-20 FStimated FY 2002-21 FStimated FY 2002-21  | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25<br>\$6,469.21<br>\$6,716.21<br>\$6,838.56  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65<br>\$4,773.92  | \$2,583.97<br>\$2,687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20<br>\$4,063.28<br>\$5,027.29<br>\$5,153.52<br>\$5,483.62<br>Disabled Individuals to<br>59   
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42<br>\$336.71  | \$4.10<br>\$2.16<br>\$2.07<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$1.51<br>\$0.49<br>\$0.32<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00<br>\$0.24<br>\$0.00<br>\$0.00<br>\$0.00  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.23<br>\$2.16<br>\$1.58<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07<br>\$0.00<br>\$0.00<br>\$1.70<br>\$0.00<br>\$0.00   | \$1.96<br>\$2.38<br>\$0.19<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89<br>\$458.54<br>\$542.35<br>\$523.19   
  |
| FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2018-20 FStimmated PY 2018-20 FStimmated PY 2018-22 FStimmated PY 2018-23 HCBS WAIVERS   | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25<br>\$6,469.21<br>\$6,716.21<br>\$6,838.56  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65<br>\$4,773.92<br>\$4,862.67<br>Disabled Adults 60 to<br>64<br>(OAP-B)  | \$2,583.97<br>\$2,687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20<br>\$4,063.28<br>\$5,027.29<br>\$5,153.52<br>\$5,483.62<br>Disabled Individuals to<br>\$9<br>(AND/AB)  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42<br>\$336.71<br>\$323.47  | \$4.10 \$2.16 \$2.07 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  MAGI Parents/ Caretakers to 68% FFIL   | \$1.51 \$0.49 \$0.32 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Percent Ch MAGI Parents/ Caretakers 69% to 133% FPL   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00<br>\$0.24<br>\$0.00<br>\$0.00<br>\$0.00<br>mge in Per Capita Cost  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.23<br>\$2.16<br>\$1.58<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.02<br>\$0.04<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$14.38<br>\$7.90<br>\$4.07<br>\$0.00<br>\$0.00<br>\$1.70<br>\$0.00<br>\$0.00<br>\$0.00   | \$1.96<br>\$2.38<br>\$0.19<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$Digital of the pregnant Adults  
   | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00  | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89<br>\$458.54<br>\$542.35<br>\$523.19<br>\$536.03<br>\$522.40   
  |
| FY 203-1-6 FY 304-1-7 FY 304-1-7 FY 304-1-8 FY 304-1-8 FY 304-1-8 FY 304-2-8 FY 304-2-8 Februard FY 304-2-2 Februard FY 304-2-2 HCBS WAIVERS FY 304-1-8  | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25<br>\$6,492.21<br>\$6,716.21<br>\$6,838.56<br>Adults 65 and Older<br>(OAP-A)  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,613.65<br>\$4,773.22<br>\$4,826.67<br>Disabled Adults 60 to<br>64<br>(OAP-B)  | \$2.583.97<br>\$2.687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20<br>\$4,063.28<br>\$5,027.29<br>\$5,153.52<br>\$5,483.62<br>Disabled Individuals to<br>\$9<br>(AND/AB)  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42<br>\$336.71<br>\$323.47<br>Disabled Buy-In   | \$4.10 \$2.16 \$2.07 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  | \$1.51 \$0.49 \$0.32 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1.00 \$0.00 \$0.00 \$0.00 \$1.00 | \$5.78 \$5.36 \$4.04 \$0.00 \$0.00 \$0.04 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 MAGI Adults  
  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.23 \$2.16 \$1.58 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00 \$1.00  |
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  | \$0.00  | \$0.43<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$37.99 \$35.10 \$27.26 \$16.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles -24.37%   | \$393.70<br>\$313.67<br>\$303.80<br>\$329.03<br>\$391.89<br>\$458.43<br>\$523.19<br>\$536.03<br>\$522.40   
  |
| FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2019-20 Estimated PY 2017-22 Estimated PY 2017-22 FST 2017-22 FST 2017-23 FY 2017-12 FY 2017-13 FY 2017-13 FY 2017-13  | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25<br>\$6,469.21<br>\$6,716.21<br>\$6,716.21<br>\$0,838.56  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65<br>\$4,773.92<br>\$4,862.67<br>Disabled Adults 60 to 64<br>(OAP-B)<br>\$4,177.92<br>\$4,862.67   | \$2.583.97<br>\$2.587.56<br>\$2.796.22<br>\$3.107.61<br>\$5.3817.20<br>\$4.063.28<br>\$5.027.29<br>\$5.155.52<br>\$5.485.62<br>Disabled Individuals to<br>\$9<br>(AND/AB)<br>4.97%  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42<br>\$336.71<br>\$323.47<br>Disabled Buy-In<br>100.00%<br>463.06%   | \$4.10 \$2.16 \$2.07 \$0.00   | \$1.51 \$0.49 \$0.32 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Percent Ch MAGI Parents/ Caretakers 69% to 133% FPL \$-33.33%   | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>mge in Per Capita Cost<br>MAGI Adults   
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  | \$0.00  | \$0.43 \$0.00   | \$37.99<br>\$35.10<br>\$27.26<br>\$16.12<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00  | \$193.70 \$313.67 \$303.80 \$329.03 \$391.89 \$448.43 \$452.35 \$523.19 \$536.03 \$572.40  
  |
| FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2017-18 FY 2018-20 FX 2018-20 FY 2018-18 FY 2018-18  | \$3,916.18<br>\$4,887.03<br>\$5,674.37<br>\$5,564.27<br>\$6,740.25<br>\$6,740.25<br>\$6,740.21<br>\$6,716.21<br>\$6,838.56<br>Adults 65 and Older<br>(OAP-A)<br>12.23%<br>6.27%   | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65<br>\$4,773.92<br>\$4,862.67<br>Disabled Adults 60 to<br>64<br>(OAP-B)<br>\$4,177,02<br>\$4,643.65<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,000.00<br>\$4,  | \$2.583.97<br>\$2.687.56<br>\$2,736.22<br>\$3,107.61<br>\$3,817.20<br>\$4,063.28<br>\$5,027.29<br>\$5,153.52<br>\$5,483.62<br>Disabled Individuals to<br>\$9<br>(AND/AB)<br>\$9,22%<br>\$2.52%  
   | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42<br>\$336.71<br>\$323.47<br>Disabled Buy-In<br>100.00%<br>463.06%   | \$4.10 \$2.16 \$2.17 \$0.00 | \$1.51 \$0.49 \$0.32 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Percent Ch  MAGI Parents' Caretakers 69% to 133% FPL 33.33% [FPL 135.94%  | \$5.78<br>\$5.36<br>\$4.04<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>MAGI Adults<br>\$100.09%<br>432.88%<br>48.59%   
  | \$0.00%   | \$2.23<br>\$2.16<br>\$1.58<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$1.00<br>\$0.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00 |
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  |
| FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-18 FY 2016-18 FY 2016-20 FY 2016-20 Framework FY 2016-20 Framework FY 2016-20 Framework FY 2016-20   | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.25<br>\$6,459.21<br>\$6,716.21<br>\$6,716.21<br>\$6,838.56<br>Adults 65 and Older<br>(OAP-A)<br>3.69%<br>6.27%<br>6.27%   | \$3,491.01<br>\$3.296.63<br>\$3,534.33<br>\$4,109.56<br>\$5,071.30<br>\$4,643.65<br>\$4,773.92<br>\$4,862.67<br>Disabled Adults 60 to 64<br>(OAP-B)<br>\$-1.17%<br>\$-1.17%<br>\$-1.170.110.110.110.110.110.110.110.110.11  | \$2.583.97<br>\$2.587.56<br>\$2.796.22<br>\$3.107.61<br>\$3.817.20<br>\$4.063.28<br>\$5.027.29<br>\$5.155.52<br>\$5,485.62<br>Disabled Individuals to<br>\$9<br>(AND/AB)<br>4.97%<br>2.25%<br>4.47%  
  | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.66<br>\$440.66<br>\$299.42<br>\$336.71<br>\$323.47<br><b>Disabled Buy-In</b><br>100.00%<br>463.06%<br>44.85%  | \$4.10 \$2.16 \$2.17 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1.00 \$0.00 \$1.00 | \$1.51 \$0.49 \$0.32 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Percent Ch MAGI Parents 65.25% 61.335% FPL 65.52% 61.539%  |
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\$393.70<br>\$313.67<br>\$303.80<br>\$379.03<br>\$31.88<br>\$488.54<br>\$542.53<br>\$523.19<br>\$522.40<br>TOTAL<br>-2.06%<br>-8.38%<br>-2.033%<br>-2.033%<br>-3.38%<br>-2.033%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%<br>-3.38%   |
| FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2017-18 FY 2018-20 Februard FY 2018-20 Februard FY 2018-22 Februard FY 2018-22 Februard FY 2018-22 Februard FY 2018-23 FY 2018-18   | \$3,916.18<br>\$4,887.03<br>\$5,574.37<br>\$5,564.27<br>\$6,730.25<br>\$6,409.21<br>\$6,716.21<br>\$6,838.56<br>Adults 65 and Older<br>(OAP-A)<br>12.22%<br>6.27%<br>6.95%<br>25.05%  | \$3,491.01<br>\$3,296.63<br>\$3,534.33<br>\$4,109.56<br>\$4,673.92<br>\$4,643.65<br>\$4,773.92<br>\$4,862.67<br>Disabled Adults 60 to 64<br>(OAP-B)<br>\$1,17%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,11%<br>\$1,   | \$2.5837.6<br>\$2.786.22<br>\$3.107.61<br>\$3.817.30<br>\$3.817.30<br>\$5.027.89<br>\$5.027.39<br>\$5.173.9<br>\$5.483.62<br>Disabled Individuals to<br>\$9<br>(AND/AB)<br>\$9.22%<br>\$1.22%<br>\$1.22%<br>\$1.22%<br>\$1.22%<br>\$1.22%<br>\$1.22%   
  | \$436.65<br>\$337.60<br>\$401.58<br>\$412.21<br>\$403.56<br>\$440.66<br>\$299.42<br>\$336.71<br>\$100.00%<br>463.06%<br>443.06%<br>443.06%<br>443.06%   | \$4.10 \$2.16 \$2.07 \$3.00 \$3.000 \$3.000 \$5.000  | \$1.51 \$0.49 \$0.32 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Percent Ch MAGI Parents' Caretakere 69% to 133% FPL 1334% FPL 1354% FPL 467.55%   |
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\$2.23<br>\$2.16<br>\$2.16<br>\$3.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00 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\$393.70<br>\$313.67<br>\$203.80<br>\$329.01<br>\$329.01<br>\$359.80<br>\$359.80<br>\$458.84<br>\$458.84<br>\$523.10<br>\$535.03<br>\$523.01<br>\$523.01<br>\$523.01<br>\$523.01<br>\$535.03<br>\$523.01<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.03<br>\$535.0   |
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\$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,730.25<br>\$6,469.21<br>\$6,716.21<br>\$0,49.24<br>\$0,49.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29.24<br>\$0,29 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\$436.65<br>\$37.66<br>\$401.58<br>\$401.58<br>\$402.56<br>\$400.65<br>\$400.66<br>\$299.42<br>\$336.71<br>\$100.00%<br>\$43.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66<br>\$40.66 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| \$14.38<br>\$7.70<br>\$4.07<br>\$0.00<br>\$0.00<br>\$1.70<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$1.00<br>\$0.00<br>\$1.00<br>\$1.00<br>\$0.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00<br>\$1.00 | \$1.96 \$2.18 \$0.19 \$0.00   | \$0.00 | \$0.43 \$0.00  | \$37.99<br>\$37.90<br>\$52.26<br>\$16.12<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0 | \$193,70<br>\$103,80<br>\$103,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,80<br>\$193,8 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| FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2017-18 FY 2018-20 FEstimated FY 2017-22 FEstimated FY 2017-22 FESTIMATED FY 2017-22 FESTIMATED FY 2017-22 FESTIMATED FY 2017-23 FY 2017-18  | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,780.25<br>\$6,409.21<br>\$6,716.21<br>\$6,388.56<br>Adults 65 and Older<br>(OAP-A)<br>12.27%<br>6.27%<br>6.27%<br>6.25%<br>15.27%<br>15.27%<br>15.27%<br>15.27%   | \$3,491.01<br>\$129.65<br>\$4,09.55<br>\$4,09.55<br>\$4,07.30<br>\$4,07.30<br>\$4,07.30<br>\$4,07.30<br>\$4,00.26<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1,17.30<br>\$1, | \$2,583.97 \$2,583.97 \$2,583.97 \$2,776.22 \$3,107.61 \$3,817.20 \$4,807.85 \$4,907.85 \$5,107.39 \$5,107.39 \$5,107.39 \$5,107.39 \$6,107.39
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\$5.78<br>\$5.36<br>\$4.04<br>\$5.00<br>\$5.00<br>\$5.00<br>\$5.00<br>\$5.00<br>\$5.00<br>\$5.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00<br>\$6.00 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  |
| FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-20  | \$3.916.18 \$3.916.18 \$4.9870.5 \$4.9870.5 \$4.9870.5 \$4.9870.5 \$5.64.2 \$5   | \$3,94.01 \$13,96.6 \$13,96.6 \$1,35.4,33 \$4,10,95.6 \$5,071,30 \$4,643,65 \$4,773,92 \$4,773,92 \$1,876,66 \$4,773,92 \$1,876,66 \$4,773,92 \$4,773,   | \$2,583.97<br>\$2,687.56<br>\$2,776.22<br>\$3,107.61<br>\$3,817.20<br>\$4,603.25<br>\$5,602.75<br>\$5,483.62<br>\$5,483.62<br>\$5,602.75<br>\$5,483.62<br>\$5,602.75<br>\$5,483.62<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602.75<br>\$5,602 | \$436.65<br>\$37.65<br>\$401.58<br>\$401.58<br>\$403.56<br>\$403.56<br>\$400.65<br>\$299.42<br>\$336.71<br>\$323.47<br>Disabled Buy-In<br>100.00%<br>44.85%<br>42.86%<br>18.95%<br>22.16%<br>22.10%   | \$4.10 \$2.16 \$2.07 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1.00 \$0.00 \$1.00 | \$1.51 \$0.49 \$0.20 \$0.00   | 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| FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2017-18 FY 2018-20 FEstimated FY 2017-22 FEstimated FY 2017-22 FESTIMATED FY 2017-22 FESTIMATED FY 2017-22 FESTIMATED FY 2017-23 FY 2017-18  | \$3,916.18<br>\$4,897.03<br>\$5,674.37<br>\$5,462.26<br>\$6,780.25<br>\$6,409.21<br>\$6,716.21<br>\$6,388.56<br>Adults 65 and Older<br>(OAP-A)<br>12.27%<br>6.27%<br>6.27%<br>6.25%<br>15.27%<br>15.27%<br>15.27%<br>15.27%   | \$3,491.01 \$13,964.05 \$13,964.05 \$1,51,514.33 \$4,102.54 \$5,571.30 \$4,643.65 \$4,773.92 \$4,840.65 \$4,773.92 \$1,1774.06 \$1,11   | \$2,583.97 \$2,583.97 \$2,583.97 \$2,776.22 \$3,107.61 \$3,817.20 \$4,807.85 \$4,907.85 \$5,107.39 \$5,107.39 \$5,107.39 \$5,107.39 \$6,107.39
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\$14.38<br>\$7.70<br>\$4.07<br>\$0.00<br>\$1.70<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$1.70<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00 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\$393,70<br>\$310,80<br>\$320,30<br>\$320,30<br>\$348,54<br>\$42,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52,31<br>\$52, |

						Current Year Pro	jections by Eligibility (	ategory								
HCBS WAIVERS	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Elderly, Blind and Disabled Waiver	\$295,146,407	\$52,381,690	\$203,977,851	\$3,384,834	\$0	\$0		\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$554,890,782
Community Mental Health Supports Waiver	\$10,933,013	\$7,059,951	\$32,773,625	\$60,993	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$50,827,582
Children's Home-and Community-Based Waiver	\$0	\$0	\$63,966,450	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	\$0	\$0	\$0	\$0	\$63,966,450
Consumer Directed Attendant Support-State Plan	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	\$0	\$0	\$0	\$0	\$0
Brain Injury Waiver	\$5,287,406	\$2,675,786	\$24,101,327	\$19,250	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	\$0	S0	\$32,083,769
Children with Autism Waiver	\$0	S0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	\$0	\$0	\$0
Children with Life Limiting Illness Waiver	\$0	\$0	\$689,867	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$689,867
Spinal Cord Injury Waiver	\$1,102,530	\$269,973	\$6,111,289	\$900,470	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	\$0	\$8,384,262
Estimated FY 2020-21 Total Expenditure	\$312,469,356	\$62,387,400	\$331,620,409	\$4,365,547	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	\$0	\$0	\$710,842,712
						Request Year Pro	ejections by Eligibility	ategory								
HCBS WAIVERS	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Elderly Blind and Disabled Waiver	\$307,581,655	\$54,588,660	\$212,571,943	\$3,527,445	SO.	\$0	SO SO	S0	02	SO SO	\$0	\$0	) S0	\$0	S0	\$578,269,703
Community Mental Health Supports Waiver	\$11,496,946	\$7,424,108	\$34,464,112	\$64,139	S0	\$0	SO.	S0	\$0	SO.	\$0	SO	) S0	\$0	S0	\$53,449,305
Children's Home-and Community-Based Waiver		S0	\$76,863,437	\$0	S0	\$0	SO.	S0	\$0	SO.	\$0	SO	) S0	\$0	S0	\$76,863,437
Consumer Directed Attendant Support-State Plan	\$0	S0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	SO.
Brain Injury Waiver	\$5,805,204	\$2,937,827	\$26,461,580	\$21,135	S0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$35,225,746
Children with Autism Waiver	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	\$0	\$0	\$0	\$0	\$0
Children with Life Limiting Illness Waiver	\$0		\$728,488	\$0	\$0			\$0	\$0	S0				\$0	\$0	\$728,488
Spinal Cord Injury Waiver	\$1,241,979	\$304,120	\$6,884,248	\$1,014,362	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$9,444,709
Estimated FY 2021-22 Total Expenditure	\$326,125,784	\$65,254,715	\$357,973,808	\$4,627,081	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$753,981,388
	•					Out Year Proje	ections by Eligibility Ca	tegory					•			
HCBS WAIVERS	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Elderly, Blind and Disabled Waiver	\$323,132,239	\$57,348,530	\$223,319,066	\$3,705,784	\$0	\$0		\$0	\$0							\$607,505,619
Community Mental Health Supports Waiver	\$12,142,718		\$36,399,928	\$67,742	\$0	\$0					\$0	\$0				\$56,451,501
Children's Home-and Community-Based Waiver	\$0			\$0	\$0	\$0					\$0					\$92,718,198
Consumer Directed Attendant Support-State Plan	\$0			\$0	\$0											\$0
Brain Injury Waiver	\$6,396,969		\$29,159,001	\$23,290	\$0							\$0				\$38,816,561
Children with Autism Waiver	\$0		\$0	\$0	\$0	\$0					\$0	\$0				\$0
Children with Life Limiting Illness Waiver	\$0		\$771,851	\$0	\$0	\$0			\$0		\$0	\$0				\$771,851
Spinal Cord Injury Waiver	\$1,412,685		\$7,830,463	\$1,153,782	\$0							\$0				\$10,742,850
Estimated FY 2022-23 Total Expenditure	\$343,084,611	\$68,772,864	\$390,198,507	\$4,950,598	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$807,006,580
Definitions: HCRS: Home- and Community-Based Services																

Part				Cash Based Actuals by	Waiver					
1		Disabled Waiver	Supports Waiver	Community-Based Waiver	Attendant Support-State Plan <sup>(1)</sup>		Waiver	Limiting Illness Waiver		
Color										
Color	FY 2012-13 FY 2013-14	\$279,658,921			\$2,001,977	\$14 184 077			\$1,773,572	\$338.954.751
Column   C										
STATE   STAT	FY 2015-16									
	FY 2016-17	\$364,380,354	\$38,195,913	\$16,895,299	(\$1,224,402)	\$20,667,950	\$566,699	\$717,215	\$2,718,188	\$442,917,216
Column   C					\$1,088,619					
Marie   Mari										
Ministry										
MICHANITYSIS   SAMPLE   SAMP						\$32,083,769				
Part										
High Natives	Estimated FY 2022-23	\$607,505,619	\$56,451,501			\$38,816,361	50	\$7/1,851	\$10,742,850	\$807,006,580
1.00	HCBS WAIVERS	Elderly, Blind and Disabled Waiver	Community Mental Health Supports Waiver		Attendant Support-State	Brain Injury Waiver	Children with Autism Waiver	Children with Life Limiting Illness Waiver	Spinal Cord Injury Waiver	TOTAL
1.00	EV 2012 12	7.65%	9.16%	70.93%	-23 10%	2.00%	-13.40%	21 19%	100.00%	7 90%
CENTAL   CASE	FY 2012-13 FV 2013-14	15.10%				10.38%		7.00%		15.49%
Property   1, 10   1		6.25%	6.49%	34.69%	10.36%	17.38%	-7.10%	113.72%	-0.82%	7.45%
March   11	FY 2015-16	8.13%				15.08%		35.75%		
Part	FY 2016-17		6.93%							12.41%
Property										
Common   C	FY 2018-19									
Comment   March   Ma										
Commany March   Marc										
HCS WAYES   Part   HCS Wayes   Hospital   HCS Wayes   Hospital   HCS Wayes	Estimated FY 2021-22									
RICH WAIVES	Estimated FY 2022-2:	3.00%	3.02%			10.19%	0.00%	3.9376	13.7476	7.03%
Part	HCRS WAIVERS	Elderly, Blind and		Children's Home-and	Consumer Directed	Brain Injury Waiyer				TOTAL
Part		Disabled Waiver	Supports Waiver	Community-Based Waiver			Waiver	Limiting Illness Waiver	Waiver <sup>(3)</sup>	
Part		18,491	2,522	1,118	36	223	55	151	N/A	22,596
Colored   France										
Part										
PY 2016-17   1.277	FY 2014-13			1,100	N/A N/A		49			26,043
No.		22,770	3,049	1,180	N/A	371	46	152		28,087
Property		23,827					35	157	109	29,468
Second   Property										
Element   F 2012-22   20,000   3,367   2,247   0   373   0   137   220   3,365	FY 2018-19	24,424	3,498	1,645	N/A	498	N/A	169	156	30,390
RCB WAIVERS	FY 2018-19 FY 2019-20	24,805		1,645 1,726		508		169 171		30,390 30,865
RCB WAIVERS	FY 2019-2( Estimated FY 2020-2)	24,805 25,366	3,477 3,516	1,726 1,880	N/A 0	508 534	N/A 0	171 177	178 195	30,865 31,668
Elderly, Billed and Disabled Waiver   Community Based Waiver   Commun	FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-27	24,805 25,366 26,003	3,477 3,516 3,627	1,726 1,880 2,047	N/A 0 0	508 534 573	N/A 0 0	171 177 187	178 195 213	30,865 31,668 32,650
March   March   March   Suppress   March   Suppre	FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-27	24,805 25,366 26,003	3,477 3,516 3,627	1,726 1,880 2,047 2,229	N/A 0 0 0	508 534 573	N/A 0 0	171 177 187	178 195 213	30,865 31,668
Second   Property   Property   Second   Property   Second   Property   Second   Se	FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-27	24,805 25,366 26,003 26,656	3,477 3,516 3,627 3,742	1,726 1,880 2,047 2,229 Percent Change in Enro	N/A 0 0 0 0	508 534 573	N/A 0 0 0	171 177 187 198	178 195 213 233	30,865 31,668 32,650
Second   Property   Property   Second   Property   Second   Property   Second   Se	FY 2019-26 Estimated FY 2011-25 Estimated FY 2011-25 Estimated FY 2022-23 HCBS WAIVERS	24,805 25,366 26,003 26,656 Elderly, Blind and Disabled Waiver	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver	1,726 1,880 2,047 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver	N/A 0 0 0 0 Ilment Consumer Directed Attendant Support-State Plan <sup>(5)</sup>	508 534 573 615 Brain Injury Waiver	N/A 0 0 0 0 Children with Autism Waiver <sup>(5)</sup>	171 177 187 187 198 Children with Life Limiting Illness Waiver <sup>69</sup>	178 195 213 233 Spinal Cord Injury	30,865 31,668 32,650 33,673
FY 2015-16   1.25%   0.99%   7.83%   NA   0.45%   -14.27%   0.77%   7.55%   1.54%	FY 2019-26 Estimated FY 2021-25 Estimated FY 2021-25 Estimated FY 2022-25 HCBS WAIVERS	24,805 25,366 26,003 26,656 Elderly, Blind and Disabled Waiver	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver  6.58%	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver 0.63%	N/A  0 0 0 Illiment  Consumer Directed Attendant Support-State Plan <sup>(3)</sup> -8.33%	508 534 573 615 Brain Injury Waiver	N/A 0 0 0 Children with Autism Waiver <sup>(2)</sup>	171 177 187 198 Children with Life Limiting Illness Walver <sup>6</sup>	178 195 213 233 Spinal Cord Injury Waiver <sup>(3)</sup> N/A	30,865 31,668 32,650 33,673 TOTAL
FY 2016-17   S.798	FY 2019-26  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  HCBS WAIVERS  FY 2012-15  FY 2012-15  FY 2012-15	24,805 25,366 26,003 26,003 26,656 Elderly, Blind and Disabled Waiver 4,03% 6,57%	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18%	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver  0.63% -7.55%	N/A  0 0 0 0 Ilment  Consumer Directed Attendant Support-State Plan <sup>(2)</sup> -8.33% -6.06%	508 534 573 615 Brain Injury Walver 6.28% 8.86%	N/A 0 0 0 0 Children with Autism Waiver <sup>(3)</sup> -9.09% 4.00%	171 177 187 187 198 Children with Life Limiting Illness Waiver <sup>16</sup> 13.25% -2.92%	178 195 213 233 Spinal Cord Injury Waiver <sup>(3)</sup> N/A #VALUE!	30,865 31,668 32,650 33,673  TOTAL  N/A 6,16%
FY 2017-18	FY 2012-25  Estimated FY 2021-25  Estimated FY 2021-25  Estimated FY 2022-25  HCBS WAIVERS  FY 2013-15  FY 2013-16  FY 2013-17  FY 2013-16	24,805 52,366 26,003 26,656  Elderly, Blind and Disabled Waiver 4,035% 6,57% 4,19%	3.477 3.516 3.627 3.742  Community Mental Health Supports Waiver 6.58% 8.1876 3.382%	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver 0,63% -7,56% 5,77%	N/A 0 0 0 0 Illment  Consumer Directed Attendant Support-State Plan <sup>(5)</sup> -8.33% -6.60% N/A	508 334 573 615 Brain Injury Walver 6.28% 8.86% 18.99%	N/A 0 1 0 0 0 0 0 Children with Autism Waiver <sup>(1)</sup> -9.09% 4.00% 2.08%	171 177 187 198 Children with Life Limiting Illness Waiver <sup>40</sup> 13,25% -2,25% -2,21,69%	178. 195 213 223 Spinal Cord Injury Waiver <sup>(3)</sup> N/A #VALUE: N/A	30,865 31,668 32,650 33,673 TOTAL N/A 6,16% 4,16%
Problem   Prob	FY 2019-26  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  HCBS WAIVERS  FY 2013-16  FY 2014-15  FY 2014-15  FY 2014-15  FY 2014-15	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4,03% 4,19% 4,19% 1,25%	3.477 3.516 3.627 3.742  Community Mental Health Supports Waiver  6.58% 8.18% 3.82% 0.99%	1,726. 1,880 2,047 2,249 Percent Change in Euro Children's Home-and Community-Based Waiver  0,63% 7,56% 5,77% 5,82%	NNA 0 0 0 0 Ilment  Consumer Directed Attendant Support-State Plan <sup>(2)</sup> -8.33% -6.06% N/A N/A	508 334 573 615  Brain Injury Waiver 6.28% 8.86% 18.99% 9.45%	N/A 0 0 0 0 0 0 Children with Autism Waiver <sup>(5)</sup> -9.09% -4.00% 2.08% -14.29%	171 177 187 189 188 Children with Life Limiting Illness Walver <sup>40</sup> 13.25% -2.25% -2.1.69% 0.77%	178 195 213 233  Spinal Cord Injury Waiver <sup>5)</sup> N/A #VALUE! N/A -7.55%	30,855 31,658 32,650 33,673 TOTAL N/A 6.16% 4.16%
Find   F   2019-20   1.50%   4.00%   4.92%   NA   2.01%   NA   1.18%   1.40%   1.50%   1.50%   1.50%   1.25%	FY 2012-25  Financiar Ty 2012-25  Financiar Ty 2012-25  Financiar Ty 2012-27  Financiar Ty 2012-27  Financiar Ty 2012-27  FY 2012-17  FY 2012-17  FY 2012-17  FY 2012-17  FY 2012-17  FY 2013-17  FY 2013-17  FY 2013-17	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Waiver  4.03% 6.57% 4.19% 1.25% 5.29%	3.477 3.516 3.627 3.742  Community Mental Health Supports Waiver 6.58% 8.18% 9.382% 9.48% 7.48%	1,726 1,880 2,047 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver  0,63% -7,56% 5,77% 7,82% 15,43%	NNA 0 0 0 0 0 Ilment  Consumer Directed Attendant Support-State Plan <sup>(3)</sup> -8.33% -6.06% N/A N/A N/A N/A	508 334 573 615 Brain Injury Walver 6.28% 8.86% 18.99% 9.45% 9.45%	N/A  0  0  0  0  Children with Autism Waiver <sup>(2)</sup> -9.09% -4.00% -2.08% -14.29% -9.52% -9.52%	171 177 187 187 198 Children with Life Limiting Illness Walver <sup>10</sup> 13.25% -2.25% -2.21.69% 0.77% 16.03%	178 195 213 233 233 Spinal Cord Injury Waiver <sup>(3)</sup> N/A #VALUE N/A 7-7.55% 57.14%	30,855 31,658 32,650 33,673  TOTAL  NIA 6.10% 4.10% 6.15% 6.25%
Statissic   FV 200-1   Common   Statissic   FV 200-1   Common	FY 2019-26  Estimated FY 2011-25  Estimated FY 2011-25  Estimated FY 2012-25  HCBS WAIVERS  FY 2012-11  FY 2013-14  FY 2014-15  FY 2014-15  FY 2014-15  FY 2015-15  FY 2015-15  FY 2015-15  FY 2015-15	24,805 25,366 26,003 26,056  Elderly, Blind and Disabled Walver 4,078 4,198 4,198 1,25% 5,20% 4,64%	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,53% 6,53% 8,18% 3,32% 7,48%	1,726 1,830 2,047 2,047 2,229 Percent Change in Enror Children's Home-and Community-Based Walver  0,6375 7,7505 7,7505 7,7825 1,5475 1,5475 8,9856	NNA 0 0 0 llment Consumer Directed Attendant Support-State Plan <sup>(3)</sup> -8.33% -6.06% NNA NNA NNA NNA NNA	508 534 573 615 Brain Injury Walver 6.20%, 8.80%, 18.90%, 19.45%, 10.42%,	N/A  0  0  0  0  Children with Autism Waiver <sup>20</sup> -9.09%  4.00%  2.08%  14.29%  9.523, 2.31%	171 177 187 187 198 Children with Life Limiting Illness Waiver <sup>6</sup> 13.25% 2.166% 0.77% 16.03% 3.29%	178 195 213 223  Spinal Cord Injury Waiver <sup>5)</sup> NA  VALUE NA 7.55% 57.14% 41.55%	30,855 31,658 32,650 33,673  TOTAL  NIA 6.10% 4.10% 6.15% 6.25%
Statissical FV 2021-22   2.51%   3.10%   8.88%   0.00%   7.30%   0.00%   5.65%   9.23%   3.10%   3.1	FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-27  Estimated FY 2012-27  Estimated FY 2012-27  HCBS WAIVERS  FY 2012-15	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4.03% 6.57% 4.19% 1.25% 5.25% 4.64% 4.19%	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18% 0,99% 7,48% 3,27% 2,21% 2,21%	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver  0,63% -7,56% 5,77% 7,82% 15,43% 8,98% 10,25%	NNA   0   0   0   0   0   0   0   0   0	508 534 573 615 Brain Injury Walver 6.28% 8.86% 1.84% 1.1042% 1.64% 1.66% 1.66%	N/A  0  0  0  Children with Autism Waiver <sup>(2)</sup> -9.09% -4.00% -14.29% -14.29% -23.91% N/A	171 177 187 198 Children with Life Limiting Illness Walver <sup>10</sup> 13.25% -2.25% -2.21.69% -0.77% 16.03% 13.20%	178 195 213 233 233 Spinal Cord Injury Waiver <sup>(3)</sup> N/A #VALUE! N/A 7-7.55% 57.14% 41.59% 43.12%	30,865 31,668 32,650 33,673  TOTAL  NIA 6.10% 4.10% 6.22% 6.22% 4.24% 4.24%
Second Second Principle	FY 2019-26  Estimated FY 2011-22  Estimated FY 2011-22  Estimated FY 2012-22  HCBS WAIVERS  FY 2012-13  FY 2013-14  FY 2014-15  FY 2014-15  FY 2015-15	24,805 25,366 26,003 26,056 Elderly, Blind and Disabled Waiver 4,03% 4,10% 4,125% 5,22% 5,22% 1,55% 1,55% 2,26% 2,26%	3,477 3,316 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18% 3,82% 7,48% 1,74% 2,91% -0,66%	1,726 1,830 2,047 2,047 2,229 Percent Change in Euror Children's Home-and Community-Based Walver  0,63% 7,75% 5,77% 1,54% 1,54% 8,98% 10,25%	NiA   0   0   0   0   0   0   0   0   0	508 334 373 615  Brain Injury Walver  6.28%, 8.86%, 1.99%, 1.042%, 1.65%, 1.65%, 2.0	N/A  0  0  0  Children with Autism Waiver <sup>2)</sup> -9.09%  4.00%  2.08%  14.29%  9.52%  N/A  N/A	171 177 187 187 198  Children with Life Limiting Illness Waiver <sup>1</sup> 1 3.25% 2.216% 2.216% 16.03% 1.60% 7.64% 1.18%	178   193   213   223   233   233   233   233   234   234   234   234   235	30,865 31,668 32,569 33,673  TOTAL  N/A 6.10% 4.10% 6.25% 6.25% 1.55% 1.55% 2.26% 2.26%
Elderly, Bilad and Disabled Waver   Community Mental Health Disabled Waver   Community-Based Waver   Community-Based Waver   Community-Based Waver   Community-Based Waver   Community-Based Waver   Children with Autism   Children with Linding Illness Waver   Waiver   Children with Linding Illness Waver   Children with	FY 2019-26  Estimated FY 2011-25  Estimated FY 2011-25  Estimated FY 2011-25  Estimated FY 2012-25  HCBS WAIVERS  FY 2011-16  FY 2011-16  FY 2011-17  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4.03% 6.57% 4.19% 5.20% 5.20% 5.21% 6.51% 6.51% 6.55% 6	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,5595 6,5595 3,2795 7,4895 2,9195 2,1096 1,1276 1,1276 3,31696	1,726 1,830 2,047 1,830 2,047 2,229 Percent Change in Enror Children's Home-and Community-Based Walver  0,6375 7,7505 5,775 7,825 15,4375 10,2395 10,2395 4,925 8,9395 4,925 8,825 8	NiA   0   0   0   0   0   0   0   0   0	508 334 373 615  Brain Injury Waiver  6.20%, 8.80%, 18.90%, 10.42%, 16.63%, 16.65%, 2.01%, 2.	N/AA 0 0 0 0 0 0 Children with Autism Waiver <sup>5)</sup> -9.00% 2.08% 14.29% 14.29% 15.21,114.29% 16.23,116,114.29% 17.31,114.29% 18.31,114.29% 18.31,114.29% 19.53,	171 177 187 187 198  Children with Life Limiting Illness Waiver 16 2, 297% 2, 216% 6, 0.77% 16, 0.78% 7, 645% 1, 185% 3, 151% 5, 655%	178 195 213 223 223 Spinal Cord Injury Waiver <sup>5)</sup> NA **NALUE** **NAULE** **N	30,865 31,658 32,650 33,673  TOTAL  NIA 6,610% 410% 420% 622% 429% 429% 43,13% 1,54%
HCBS WAIVERS   Liberty, Island and Disable Wave   Community-Heave	FY 2019-26  Estimated FY 2011-25  Estimated FY 2011-25  Estimated FY 2011-25  Estimated FY 2012-25  HCBS WAIVERS  FY 2011-16  FY 2011-16  FY 2011-17  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4.03% 6.57% 4.19% 5.20% 5.20% 5.21% 6.51% 6.51% 6.55% 6	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,5595 6,5595 3,2795 7,4895 2,9195 2,1096 1,1276 1,1276 3,31696	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Walver  0,639 7,756% 7,756% 5,77% 15,45% 15,45% 4,27% 4,27% 8,88% 8,88% 8,88%	NNA	508 334 373 615  Brain Injury Waiver  6.20%, 8.80%, 18.90%, 10.42%, 16.63%, 16.65%, 2.01%, 2.	N/AA 0 0 0 0 0 0 Children with Autism Waiver <sup>5)</sup> -9.00% 2.08% 14.29% 14.29% 15.21,114.29% 16.23,116,114.29% 17.31,114.29% 18.31,114.29% 18.31,114.29% 19.53,	171 177 187 187 198  Children with Life Limiting Illness Waiver 16 2, 297% 2, 216% 6, 0.77% 16, 0.78% 7, 645% 1, 185% 3, 151% 5, 655%	178 195 213 223 223 Spinal Cord Injury Waiver <sup>5)</sup> NA **NALUE** **NAULE** **N	30,855 31,658 32,650 33,673  TOTAL  N/A 6.16% 4.16% 6.0% 1.55% 1.55% 1.55% 2.26% 2.26% 2.26%
Section   Sect	FY 2019-26  Estimated FY 2011-25  Estimated FY 2011-25  Estimated FY 2011-25  Estimated FY 2012-25  HCBS WAIVERS  FY 2011-16  FY 2011-16  FY 2011-17  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4.03% 6.57% 4.19% 5.20% 5.20% 5.21% 6.51% 6.51% 6.55% 6	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,5595 6,5595 3,2795 7,4895 2,9195 2,11295 1,1276 1,1276 3,31696	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Walver  0,639 7,756% 7,756% 5,77% 15,45% 15,45% 4,27% 4,27% 8,88% 8,88% 8,88%	NNA	508 334 373 615  Brain Injury Waiver  6.20%, 8.80%, 18.90%, 10.42%, 16.63%, 16.65%, 2.01%, 2.	N/AA 0 0 0 0 0 0 Children with Autism Waiver <sup>5)</sup> -9.00% 2.08% 14.29% 14.29% 15.21,114.29% 16.23,116,114.29% 17.31,114.29% 18.31,114.29% 18.31,114.29% 19.53,	171 177 187 187 198  Children with Life Limiting Illness Waiver 16 2, 297% 2, 216% 6, 0.77% 16, 0.78% 7, 645% 1, 185% 3, 151% 5, 655%	178 195 213 223 223 Spinal Cord Injury Waiver <sup>5)</sup> NA **NALUE** **NAULE** **N	3,865 31,658 32,650 33,673  TOTAL  N/A 6,16% 4,16% 4,16% 6,22% 4,22% 4,15% 1,1
Section   Sect	FY 2012-25  Estimated FY 2022-25  Estimated FY 2022-25  HCBS WAIVERS  FY 2013-1  FY 2014-1  FY 2014-1  FY 2014-1  FY 2015-1  FY 2015-1  FY 2015-1  FY 2015-1  FY 2015-1  FY 2015-1  Estimated FY 2022-25	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4,03% 4,19% 4,19% 5,29% 4,16% 5,25% 5,25% 5,25% 5,25% 5,25% 5,25% 5,25% 5,25% 5,25% 5,25%	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18% 3,22% 7,48% 2,91% 1,12% 1,12% 3,17% 3,17% Community Mental Health	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver  0,637 7,756% 5,777% 15,437% 16,437% 16,257%	NiA   0   0   0   0   0   0   0   0   0	598 334 573 615  Brain Injury Walver  6.22% 8.86% 18.99% 10.42% 16.63% 16.65% 2.10%	N/A   0   0   0   0   0   0   0   0   0	171 177 187 187 198 Children with Life Limiting Illness Waiver <sup>10</sup> 13.25% -2.92% -2.11.09% -0.77% -16.03% -7.64% -3.34% -5.85% -5.85%	178   195   2213   223   223   223   223   223   223   223   223   223   224   224   225	3,865 31,658 32,650 33,673  TOTAL  N/A 6.16% 4.16% 4.25% 4.29% 3.13% 5.260% 3.13% 3.13%
FY 201-14 [9.85   2.62   965   31   240   35   88   51   22,344   FY 201-15   19,795   2.719   1,065   NA   273   34   81   53   384   FY 201-16   20,507   2.835   1,116   NA   310   NA   107   49   25,065   FY 201-17   19,885   2.788   1,116   NA   300   NA   107   49   25,065   FY 201-17   19,885   2.788   1,116   NA   300   NA   126   55   33,414   FY 201-18   2.788   1,116   NA   300   NA   126   55   33,414   FY 201-18   2.788   2.788   1,116   NA   300   NA   126   55   33,414   FY 201-18   2.788   2.788   2.788   2.788   2.788   FY 201-18   2.788   2.788   2.788   2.788   2.788   FY 201-18   2.788   2.788   2.788   2.788   FY 201-18   2.788   2.788   2.788   2.788   FY 201-18   2.788   2.788   2.788   FY 201-18   2.788   2.788   FY 201-18   2.788   FY 201-18   2.788   2.788   FY 201-18   FY 201-1	FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-27  Estimated FY 2012-27  Estimated FY 2012-27  HCBS WAIVERS  HCBS WAIVERS  FY 2012-11  FY 2012-11  FY 2012-11  FY 2012-11  FY 2012-11  FY 2012-12  Estimated FY 2012-22  Estimated FY 2012-22  HCBS WAIVERS	24,805 25,366 26,003 26,003 26,055  Elderly, Blind and Disabled Walver  4,035% 4,195%	3,477 3,516 3,627 3,742  Community Mental Health Supports Walver  6,58% 8,18% 3,52% 1,09% 3,17% 4,06% 1,12% 1,12% 3,16% 3,17%	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Walver  0,635 7,755 5,775 5,775 1,2475	NNA   0   0   0   0   0   0   0   0   0	508 334 573 615  Brain Injury Walver  6.28% 8.80% 18.99% 15.09% 15.09% 2.01% 7.30% 7.33%  Brain Injury Walver	N/A   0   0   0   0   0   0   0   0   0	171 177 187 198 Children with Life Limiting Illness Walver <sup>10</sup> 13.25% 2.25% 2.166% 3.20% 3.20% 1.185% 5.56% 5.88% Children with Life Limiting Illness Walver	178 193 213 223 233  Spinal Cord Injury Waiver <sup>(i)</sup> N/A #VALUE A No. 2, 2, 2, 2, 2, 3, 3, 4, 1, 5, 6, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	30,855 31,658 32,650 33,673  TOTAL  NIA 6.16% 4.10% 4.20% 4.20% 4.22% 4.22% 3.13% 5.31% 5.31% 5.31%
FY 2015-16 20.507 2.835 1,136 N/A 319 N/A 107 49 25.065 FY 2016-17 19.885 2.788 1,136 N/A 303 N/A 107 55 3.2434 FY 2017-18 22.641 3.095 1,376 N/A 300 N/A 141 103 2.7,76 FY 2017-19 22.85 3,127 1,378 N/A 422 N/A 137 130 2.7,76 FY 2018-19 22.744 3,133 1,485 N/A 499 N/A 141 166 28.12 FStattand FY 2002-17 23.502 3,70 1,618 0 507 0 159 173 29.22 FStattand FY 2017-27 24,092 3,373 1,761 0 544 0 168 189 30,122	FY 2019-26  First and FY 2012-27  Editated FY 2012-27  Editated FY 2012-27  Editated FY 2012-27  HCBS WAIVERS  HCBS WAIVERS  FY 2012-18  Editated FY 2012-27  Editated FY 2012-27  Formated FY 2012-27  Formated FY 2012-27  FY 2012-18  HCBS WAIVERS	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4.03% 4.19% 5.29% 5.29% 5.251% 5.251% 5.251% 5.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251% 6.251%	3,477 3,516 3,627 3,742  Community Mental Health Supports Walver  6,58% 8,18% 3,82% 7,48% 1,12% 1,291% 1,12% 3,10% 3,17%  Community Mental Health Supports Walver 2,287 2,287	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Walver  0,635 7,765 5,775 1,545	NNA	508 334 573 615  Brain Injury Walver  6.28% 8.86% 18.99% 10.42% 15.99% 15.99% 7.33%  Brain Injury Walver	N/A  0 0 0 0 0 Children with Autism Waiver  -0.00% 4.00% 2.08% 14.29% 9.52% 1.14.29% 0.00% 0.00% Children with Autism Waiver  Children with Autism Waiver	171 177 187 1887 198  Children with Life Limiting Illness Waiver <sup>10</sup> 13.25% 2.25% 2.167% 16.035% 1.18% 5.65% 5.88%  Children with Life Limiting Illness Waiver 79 90	178 195 213 223 233 Spinal Cord Injury Waiver <sup>(b)</sup> N/A #VALUE: N/A 7.55% 57.14% 43.19% 44.19% 4.19% 9.25% 9.25% 9.39% Spinal Cord Injury Waiver <sup>(b)</sup>	30,865 31,668 32,650 33,673  TOTAL  N/A 6.169 4.169 6.229 1.1549 6.231 1.1549 6.231 1.1549 6.231 1.1549 6.231 1.1549 6.231 1.1549 6.231 1.1549 6.231 1.1549 6.2321 6.2531 1.1549 6.2321 6.2531
FY 2016-17   19.85   2.78   1,16   NA   30   NA   12   55   54.34	FY 2012-2  FY 2012-2  Financial FY 2012-2  Februard FY 2012-2  Februard FY 2012-2  Februard FY 2012-2  Februard FY 2012-2  HCBS WAIVERS  FY 2013-1  FY 2013-2  Februard FY 2012-2  FEBRUARD FY 2013-2  FY 2013-1	24,805 25,366 26,003 26,656 Elderly, Blind and Disabled Walver  4,03% 4,04% 4,	3,477 3,316 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18% 9,19% 9,19% 1,27% 1	1,726 1,880 2,047 2,239 Percent Change in Earo Children's Home-and Community-Based Waiver  6,63% 3,50% 5,77% 7,82% 1,543% 8,98% 1,025% 4,02% 4,0	NiA   0   0   0   0   0   0   0   0   0	508 334 573 615 615 615 616 617 618 618 618 618 618 618 618 618 618 618	N/A	171 187 187 198  Children with Life Limiting Illness Waiver 10 13.245%, 23.25%, 23.266%, 32.96%, 11.87%, 3.56%, 5.56%, 5.58%, Children with Life Limiting Illness Waiver 79 9 9 88	178   178	30,865 31,668 32,650 33,673  TOTAL  N/ 6,167 4,167 1,199 4,107 4,107 3,1
FY 2017-18   22.61   3.05   1.376   NA   300   NA   141   103   27.765	FY 2012-25  Brismated FY 2022-25  Editated FY 2022-25  Editated FY 2022-25  Editated FY 2022-25  HCBS WAIVERS  FY 2013-16  FY 2014-17	24,805 25,366 26,003 26,656  Elderly, Blind and Disabled Walver  4.03% 4.19% 5.29% 4.19% 5.29% 5.29% 5.25% 5.25% 6.25% 6.25% 6.25% 6.25% 6.15% 6	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18% 3,32% 7,48% 3,12% 1	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Walver  0,635 7,765 7,7565 1,74	NNA   0   0   0   0   0   0   0   0   0	508 334 573 615  Brain Injury Walver  6.28% 8.80% 18.90% 10.43% 10.43% 5.150% 7.30% 7.30% 8.733%  Brain Injury Walver	N/A  0  0  0  0  Children with Autism Waiver  -9.09%  4.400%  9.52%  9.52%  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/	171 177 187 187 198 Children with Life Limiting Illness Waiver <sup>10</sup> 13.25% 2.202% 2.16.67% 16.035% 3.295% 3.395% 3.35% 5.65% 5.88% Children with Life Limiting Illness Waiver 79 90 88 88	178   195   223	30,865 31,668 32,650 33,673  TOTAL  N// 6.167 4.167 4.167 4.252 4.252 3.367 3.169 3.169 4.252 4.
FY 2018-10 22.26 3.1.7 1.378 NA 42 NA 13.7 1.30 27.49 FY 2019-20 22.74 3.133 1.485 NA 459 NA 411 166 28.1213 1.485 NA 459 NA 451 166 28.1213 1.485 NA 451	FY 2012-25  First and FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  Estimated FY 2012-25  HCBS WAIVERS  FY 2012-15  Estimated FY 2012-25  Estimated FY 2012-25	2,4,805 25,366 26,003 26,656 Elderly, Blind and Disabled Walver  4,035% 6,575% 1,275% 1,275% 1,255% 2,251% 2,251% 1,260% 1,251% 1,260% 1,251% 1,260% 1,251% 1,260% 1,251% 1,260% 1,251% 1,260% 1,251% 1,260% 1,251% 1,260%	3,477 3,316 3,627 3,742  Community Mental Health Supports Waiver  6,58% 8,18% 1,09% 1,748% 1,29% 1,29% 1,12%	1,726 1,830 2,047 2,239 Percent Change in Earo Children's Home-and Community-Based Walver	NiA   0   0   0   0   0   0   0   0   0	508 334 573 615  Brain Injury Walver  6.28% 8.86% 9.46% 10.42% 10.42% 15.09% 2.01% 5.12% 2.01% 7.33%  Brain Injury Walver	N/A    0   0   0   0   0   0   0   0   0	171 187 187 1887 198  Children with Life Limiting Illness Waiver <sup>10</sup> 2-2-2-3-3 2-2-3-3 3-20-3-4 1.187-5 5.657-5 5.8857-5 Children with Life Limiting Illness Waiver 2-9-9-9-9-9-8-8-8 8-8-8-8-1-107	178 195 213 223 Spinal Cord Injury Waitver <sup>(9)</sup> N/A  **VALUE  7. 55% 41.55% 52.14% 41.55% 9.23% 9.23% 9.23% 10.39%  Spinal Cord Injury Waitver <sup>(9)</sup> N/A  N/A  N/A  SJ  3 3 4 9	30,865 31,668 32,650 33,673 33,673  TOTAL  N// 6,616 6,167 6
FY 2019-20 22.744 3.133 1.485 N/A 459 N/A 141 166 28.12 Estimated FY 2020-21 23.502 3.,270 1.618 0 507 0 159 177 29.225 Estimated FY 2020-22 24.092 3.373 1.761 0 544 0 168 189 30.127	FY 2012-25  Brismated FY 2012-25  Edinated FY 2012-25  HCBS WAIVERS  FY 2012-15  Edinated FY 2012-25  HCBS WAIVERS  HCBS WAIVERS	2,4,805  25,366  26,003  26,656  Elderly, Blind and Disabled Walver  4,03%  4,03%  4,19%  5,29%  4,19%  5,29%  2,51%  2,51%  Elderly, Blind and Disabled Walver  12,108  Elderly, Blind and Disabled Walver  12,108  12,108  14,109  15,109  17,108  18,432  19,435  19,435  19,795  20,567  19,835	3,477 3,516 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18% 3,22% 1,12% 1	1,726	NNA	508 334 573 615  Brain Injury Walver  6.28% 8.80% 18.90% 10.42% 10.42% 20.75 2	NiA   0   0   0   0   0   0   0   0   0	171 177 187 187 198 Children with Life Limiting Illness Waiver <sup>10</sup> 2.125% 2.125% 2.125% 2.1325% 2.155% 3.325% 3.35% 5.65% 5.88% Children with Life Limiting Illness Waiver 29 90 88 81 107 126	178 195 213 223 233 Spinal Cord Injury Waiver <sup>10</sup> N/A #VALUE! N/A -7.55% 43.12% 43.12% 43.12% 9.23% 14.10% 9.23% 9.39% Spinal Cord Injury Waiver <sup>20</sup> N/A N/A N/A N/A SA	30,865 31,668 32,650 33,673  TOTAL  N// 6.6169 4.165 4.165 4.165 4.22 4.422 3.133 1.566 2.22 5.23 5.24 2.24 2.24 2.24 2.24 2.24 2.24 2.24
Statistical FY 2009-21   23,502   3,703   1,618   0   507   0   159   173   29,225	FY 2012-25  First and FY 2012-27  Folianted FY 2012-27  Folianted FY 2012-27  Folianted FY 2012-27  FOLIANT AND	2,4,805 25,366 26,003 26,003 26,656  Elderly, Blind and Disabled Walver  4,075 4,175	3,477 3,516 3,627 3,742  Community Mental Health Supports Walver  6,58% 8,18% 5,32% 7,48% 1,27% 1,27% 1,12%	1,726 1,880 2,047 2,249 Percent Change in Earo Children's Home-and Community-Based Walver  0,635 3,535 3,535 4,525	NNA   0   0   0   0   0   0   0   0   0	508 334 573 615  Brain Injury Walver  6.28% 8.86% 18.99% 19.99% 10.42% 10.42% 10.42% 10.42% 10.42% 10.43% 1	NiA   0   0   0   0   0   0   0   0   0	171 187 187 198  Children with Life Limiting Illness Walver <sup>10</sup> 1.182 2.025% 2.1695% 3.209% 3.209% 3.209% 3.209% 4.1189% 5.669% Children with Life Limiting Illness Walver 79 90 88 8.10 8.10 8.10 8.10 8.10 8.10 8.10	178 193 213 223 233  Spinal Cord Injury Waiver <sup>(t)</sup> N/A  #VALUE: N. No. 41.506 41.506 43.12% 44.10% 9.35% 9.35% 9.35% 9.35% N/A  Spinal Cord Injury Waiver <sup>(t)</sup> N/A  N/A  N/A  N/A  Si 3 3 3 3 3 3 5 5 5 103	30,865 31,668 32,2650 33,673  TOTAL  N// 6.167 4.169 4.169 4.170 4
Estimated FY 2021-22 24,092 3,373 1,761 0 544 0 168 189 30,127	FY 2012-25  First and FY 7021-25  Financed FY 2022-25  HCBS WAIVERS  HCBS WAIVERS  FY 2013-16  FY 2014-15  FY 2014	2,4,805  25,366  26,003  26,656  Elderly, Blind and Disabled Walver  4,03%  4,03%  4,19%  5,29%  4,15%  2,21%	3,477 3,316 3,627 3,742  Community Mental Health Supports Waiver 6,58% 8,18% 3,82% 6,09% 7,48% 2,01% 1,121% 3,17%  Community Mental Health Supports Waiver 2,287 2,21% 2,21% 3,22% 2,21% 3,22% 2,21% 3,22% 2,21% 3,23% 3,23% 3,23% 3,23% 3,23% 3,23% 3,30% 3,30% 3,30% 3,31%	1,726 1,880 2,047 2,229 Percent Change in Enro Children's Home-and Community-Based Waiver  0,635 7,756% 5,777% 15,435% 16,255% 8,865% 16,255% 8,865% 16,255% 1	NNA	508 334 573 615  Brain Injury Walver  6.22% 8.80% 18.90% 10.42% 10.42% 10.45% 10.45% 20.75% 2	NiA   0   0   0   0   0   0   0   0   0	171 177 187 187 198 Children with Life Limiting Illness Waiver <sup>10</sup> 1.3 25% 2.1 69% 2.1 69% 3.3 19% 3.5 19% 3.5 19% 5.65% 5.88% Children with Life Limiting Illness Waiver  79 90 90 90 91 91 107 1167 1167 1167 117 117 117 117 117 117	178   178   179	30,865 31,668 32,650 33,673  TOTAL  N// 6.6169 4.1616 1.549 6.222 4.422 3.133 1.260 2.2607 3.135 1.260 2.2607 2.2769
	FY 2012-25  First and FY 2012-27  Editated FY 2012-27  Editated FY 2012-27  Editated FY 2012-27  Editated FY 2012-27  HCBS WAIVERS  FY 2012-11  FY 2012-11  FY 2012-11  FY 2012-12  FY 2012-12  FY 2012-12  FY 2012-12  FY 2012-12  Editated FY 2012-27  Editated FY	2,4,805 25,366 26,003 26,003 26,656  Elderly, Blind and Disabled Walver  4,035 4,193	3,477 3,516 3,627 3,742  Community Mental Health Supports Walver  6,58% 8,18% 5,32% 5,24% 1,24% 1,12%	1,726	NNA   0   0   0   0   0   0   0   0   0	508 334 573 615  Brain Injury Walver  6.28% 8.86% 18.99% 10.42% 15.09% 2.01% 7.33% Brain Injury Walver 2.20% 2.23% 2.24% 2.25%	NiA	171 187 187 1887 198  Children with Life Limiting Illness Walver <sup>10</sup> 3.29% 2.169% 3.20% 3.20% 3.20% 3.25% 4.188% 5.66% 5.65% Children with Life Limiting Illness Walver 79 90 88 8.87 8.87 8.87 90 126 126 137 127 126	178 193 213 223 233  Spinal Cord Injury Waiver <sup>(t)</sup> N/A 5VALUE: N. No. 41.506 41.506 43.12% 44.106 9.35% 9.39%  Spinal Cord Injury Waiver <sup>(t)</sup> N/A 14.10% 14.10% 14.10% 15.10%	30,865 31,668 32,650 33,673  TOTAL  N// 6.167 4.169 4.179 4.279 4.279 4.279 3.131 1.260 3.109 3.132  TOTAL  20,518 22,288 23,3466 24,660 25,660 27,768 27,769 28,128
	FY 2012-25  First and FY 2012-25  Finance FY 2012-25  Finance FY 2012-25  FINANCE FY 2012-25  FY 2012-15  FY 2012-	2,4,805 2,5,366 2,6003 2,6053 2,6656  Elderly, Blind and Disabled Walver  4,03% 4,13% 4,13% 4,13% 4,64% 5,29% 2,51% 1,55% 2,51% 1,55	3,477 3,316 3,327 3,742  Community Mental Health Supports Waiver  6,58% 6,58% 3,82% 7,48% 6,29% 1,12%	1,726 1,830 2,047 2,047 2,279 Percent Change in Earor Children's Home-and Community-Based Waiver 3,505, 5,775 7,8375 8,8955 1,54356 8,925, 8,895, 10,255 8,895, 10,255 11,255 11,	NNA	508 334 573 615 615 616 617 618 618 618 618 618 618 618 618 618 618	NiA   0   0   0   0   0   0   0   0   0	171 187 187 1887 198  Children with Life Limiting Illness Walver <sup>10</sup> 3.20% 3.20% 3.20% 1.18% 3.20% 7.64% 3.20% 1.18% 5.56% 5.58% Children with Life Limiting Illness Walver  Children with Life Limiting Illness Walver 190 88 81 107 126 126 127 128 129 120 120 121 121 121 121 121 121 125	178 195 213 223 Spinal Cord Injury Waitver <sup>20</sup> NAA  **VALUE!* NAA 7.55% 41.50% 43.12% 14.10% 9.35% 9.35% 9.35% 9.35% 14.40% 14.40% 15.50% 9.35%	30,865 31,668 32,650 33,673  TOTAL  N// 6,107 4,

			Percent Change in Uti	lizers					
HCBS WAIVERS	Elderly, Blind and Disabled Waiver	Community Mental Health Supports Waiver	Children's Home-and Community-Based Waiver	Consumer Directed Attendant Support-State Plan <sup>(3)</sup>	Brain Injury Waiver	Children with Autism Waiver <sup>(3)</sup>	Children with Life Limiting Illness Waiver <sup>(4)</sup>	Spinal Cord Injury Waiver <sup>(3)</sup>	TOTAL
FY 2012-	3 7.17%	10.38%	-2.70%	-8.33%	6.89%	-17.25%	13.92%	N/A	N/A
FY 2013-	4 5.71%	5.03%	2.88%	-6.06%	6.66%	-2.20%	-2.22%	N/A	N/A
FY 2014-	5 1.59%	2.55%	10.36%	N/A	13.69%	-2.54%	-7.95%	3.92%	N/A
FY 2015-	6 3.90%	4.28%	6.67%	N/A	16.99%	N/A	32.10%	-7.55%	N/A
FY 2016-	7 -3.31%	-1.67%	0.00%	N/A	-5.04%	N/A	17.76%	12.24%	N/A
FY 2017-	8 13.86%	11.01%	21.13%	N/A	28.71%	N/A	11.90%	87.27%	N/A
FY 2018-	9 -1.57%	1.03%	0.15%	N/A	13.33%	N/A	-2.84%	26.21%	-0.97%
FY 2019-	0 2.06%	0.19%	7.76%	N/A	3.85%	N/A	2.92%	27.69%	2.29%
Estimated FY 2020-	1 3.33%	4.37%	8.96%	N/A	10.46%	N/A	12.77%	4.22%	3.91%
Estimated FY 2021-	2.51%	3.15%	8.84%	N/A	7.30%	N/A	5.66%	9.25%	3.07%
Estimated FY 2022-	3 2.51%	3.17%	8.92%	N/A	7.35%	N/A	5.95%	9.52%	3.11%
			Per Utilizer Cost			•	•		
HCBS WAIVERS	Elderly, Blind and Disabled Waiver	Community Mental Health Supports Waiver	Children's Home-and Community-Based Waiver	Consumer Directed Attendant Support-State Plan <sup>(3)</sup>	Brain Injury Waiver	Children with Autism Waiver <sup>(3)</sup>	Children with Life Limiting Illness Waiver	Spinal Cord Injury Waiver <sup>(3)</sup>	TOTAL
FY 2011-	2 \$13,123,53	\$11,339.86	\$3,246.96	\$96,157.86	\$59,820,03	\$23,776,44	\$2,163,42	N/A	\$13,066.01
FY 2012-	3 \$13,182.26	\$11,214.24	\$5,704.04	\$80,665.97	\$57,130.86	\$24,883.11	\$2,301.46	N/A	\$13,169.94
FY 2013-	4 \$14,352.45	\$12,038.18	\$8,395.63	\$75,201.19	\$59,124.96	\$21,962.70	\$2,518.55	\$34,775.92	\$14,395.43
FY 2014-	5 \$15,011.68	\$12,500.31	\$10,246.01	N/A	\$61,042.38	\$20,935.37	\$5,847.83	\$33,190.04	\$15,146.70
FY 2015-	6 \$15,623.46	\$12,598.35	\$11,054.99	N/A	\$60,048.73	N/A	\$6,009.25	\$40,294.37	\$15,719.92
FY 2016-	7 \$18,324.38	\$13,700.11	\$14,872.62	N/A	\$68,211.06	N/A	\$5,692.18	\$49,421.60	\$18,194.85
FY 2017-	8 \$18,484.45	\$13,355.34	\$18,426.52	N/A	\$56,808.82	N/A	\$5,395.55	\$54,936.17	\$18,561.62
FY 2018-	9 \$20,643.31	\$14,484.24	\$27,424.95	N/A	\$59,230.20	N/A	\$4,895.25	\$52,420.25	\$21,032.99
FY 2019-	0 \$23,051.98	\$15,773.92	\$34,218.46	N/A	\$60,390.77	N/A		\$50,116.87	\$23,508.66
Estimated FY 2020-		\$15,543.60	\$39,534.27	N/A	\$63,281.60	N/A		\$48,463.94	\$24,319.78
Estimated FY 2021-	2 \$24,002.56	\$15,846.22	\$43,647.61	N/A	\$64,753.21	N/A	\$4,336.24	\$49,972.01	\$25,026.77
Estimated FY 2022-	3 \$24,598.36	\$16,221.70	\$48,341.08	N/A	\$66,466.71	N/A	\$4,336.24	\$51,897.83	\$25,978.84
			Percent Change in Per Uti	lizer Cost					
HCBS WAIVERS	Elderly, Blind and Disabled Waiver	Community Mental Health Supports Waiver	Children's Home-and Community-Based Waiver	Consumer Directed Attendant Support-State Plan <sup>(3)</sup>	Brain Injury Waiver	Children with Autism Waiver	Children with Life Limiting Illness Waiver <sup>(3)</sup>	Spinal Cord Injury Waiver <sup>(3)</sup>	TOTAL
FY 2012-	3 0.45%	-1.11%	75.67%	N/A	-4.50%	4.65%	N/A	N/A	N/A
FY 2013-	4 8.88%	7.35%	47.19%	N/A	3.49%	-11.74%	N/A		N/A
FY 2014-	5 4.59%	3.84%	22.04%	N/A	3.24%	-4.68%	132.19%	-4.56%	N/A
FY 2015-	6 4.08%	0.78%	7.90%	N/A	-1.63%	N/A	2.76%	21.41%	N/A
FY 2016-	7 17.29%	8.75%	34.53%	N/A	13.59%	N/A	-5.28%	22.65%	N/A
FY 2017-	8 0.87%	-2.52%	23.90%	N/A	-16.72%	N/A	-5.21%	11.16%	N/A
FY 2018-	9 11.68%	8.45%	48.83%	N/A	4.26%	N/A	-9.27%	-4.58%	13.31%
FY 2019-	0 11.67%	8.90%	24.77%	N/A	1.96%	N/A	-4.11%	-4.39%	11.77%
Estimated FY 2020-	1 2.42%	-1.46%	15.53%	N/A	4.79%	N/A	-7.57%	-3.30%	3.45%
Estimated FY 2021-	2 1.66%	1.95%	10.40%	N/A	2.33%	N/A	-0.06%	3.11%	2.91%
Estimated FY 2022-	3 2.48%	2.37%	10.75%	N/A	2.65%	N/A	0.00%	3.85%	3.80%

			Current Year Projec	41					
			Current Year Projec	uon					
HCBS WAIVERS	Elderly, Blind and Disabled Waiver	Community Mental Health Supports Waiver	Children's Home-and Community-Based Waiver	Consumer Directed Attendant Support-State Plan (3)(6)	Brain Injury Waiver	Children with Autism Waiver <sup>(7)</sup>	Children with Life Limiting Illness Waiver	Spinal Cord Injury Waiver	TOTAL
FY 2019-20 Enrollment (2)	24,805	3,477	1,726	N/A	508	N/A	171	178	30,865
Enrollment Trend Selected (4)	2.26%	1.12%	8.92%	0.00%	5.12%	0.00%	3.51%	9.55%	2.60%
FY 2020-21 Estimated Enrollment	25,366	3,516	1.880	0	534	0	177	195	31,668
Bottom Line Impacts									
Total Bottom Line Impacts	0	0	0	0	0	0	0	0	0
FY 2020-21 Enrollment	25,366	3,516	1,880	0	534	0	177	195	31,668
FY 2020-21 Conversion Factor	92.65%	92.99%	86.04%		94.97%		89.81%	88.92%	92.30%
Estimated FY 2020-21 Average Monthly Utilizers	23,502	3,270	1,618	0	507	0	159	173	29,229
FY 2019-20 Cost Per Utilizer	\$23,051.98	\$15,773.92	\$34,218.46	N/A	\$60,390.77	N/A	\$4,694.29	\$50,116.87	\$23,508.66
Percentage Selected to Modify Cost Per Utilizer (5)	1.50%	-0.78%	18.45%	0.00%	1.77%	0.00%	-3.15%	-3.89%	2.87%
FY 2020-21 Estimated Cost Per Utilizer	\$23,397.76	\$15,650.88	\$40,531.77	\$0.00	\$61,459.69	\$0.00	\$4,546.42	\$48,167.32	\$24,183.82
Estimated FY 2020-21 Base Expenditure	\$549,894,156	\$51,178,378	\$65,580,404	\$0	\$31,160,063	\$0	\$722,881	\$8,332,946	\$706,868,828
Bottom Line Impacts									
Colorado Choice Transitions	(\$513,193.08)	(\$48,373)	\$0	\$0	(\$27,132)	\$0	\$0		(\$596,842)
FY 2019-20 53 Weekly Payment Periods	(\$7,312,376)	(\$732,207)	(\$702,791)	\$0	(\$447,759)	\$0	(\$17,044)	(\$129,498)	(\$9,341,675)
FY 2019-20 Adult Day Targeted Rate Increase	\$387,500	\$38,151	\$31,833	\$0	\$22,052	\$0	\$565	\$5,740	\$485,841
FY 2019-20 Respite Targeted Rate Increase	\$2,581,977	\$254,205	\$0	\$0	\$146,935	\$0	\$0		\$3,021,364
FY 2019-20 Behavioral Therapy Targeted Rate Increase	\$129,450	\$12,745	\$0	\$0	\$7,366	\$0	\$0		\$151,479
FY 2019-20 Long Bill Personal Care & Homemaker Rate Increase	\$8,663	S0	\$0	\$0	\$0	\$0			\$8,663
SB 19-238 Personal Care & Homemaker Rate Increase	\$9,044,298	\$0	\$0	\$0	\$0	\$0	\$0		\$9,178,274
Reimbursement for TeleHealth Services	\$8,446,665	\$831,605	\$0	\$0	\$480,683	\$0			\$9,884,076
Brain Injury SLP Rate Change	\$0	\$0	\$0	\$0	\$1,150,308	\$0			\$1,150,308
SB 20-212 Telehealth	\$643,068	\$63,312	\$52,828	\$0	\$36,596	\$0	\$0		\$805,330
COVID Emergency Spending	(\$6,956,755)	(\$685,897)	(\$572,840)	\$0	(\$397,064)	\$0		(\$102,973)	(\$8,725,712)
Local Minimum Wage	\$3,527,211	\$347,267	\$0	\$0	\$200,727	\$0			\$4,127,455
FY 2020-21 1% ATB Provider Rate Decrease	(\$4,105,093)	(\$404,161)	(\$337,230)	\$0	(\$233,613)	\$0	(\$5,984)	(\$60,810)	(\$5,146,891)
R-13 Long-Term Care Utilization Management CDASS	(\$291,146)	(\$27,443)	(\$28,218)	\$0	(\$15,393)	\$0	(\$368)	(\$4,620)	(\$367,188)
R-13 Long-Term Care Utilization Management IHSS	(\$593,643)	\$0	(\$57,536)	\$0	\$0	\$0	\$0		(\$660,599)
Total Bottom Line Impacts	\$4,996,626	(\$350,796)	(\$1,613,954)	\$0	\$923,706	S0	(\$33,014)		\$3,973,884
Estimated FY 2020-21 Expenditure	\$554,890,782	\$50,827,582	\$63,966,450	S0	\$32,083,769	S0	\$689,867	\$8,384,262	\$710,842,712
Estimated FY 2020-21 Per Utilizer	\$23,610.36	\$15,543.60	\$39,534.27	N/A	\$63,281.60	N/A		\$48,463.94	\$24,319.78
% Change over FY 2019-20 Utilizer	2.42%	-1.46%	15.53%	N/A	4.79%	N/A	-7.57%	-3.30%	3.45%

			Request Year Projec	tion					
HCBS WAIVERS	Elderly, Blind and Disabled Waiver	Community Mental Health Supports Waiver	Children's Home-and Community-Based Waiver	Consumer Directed Attendant Support-State Plan <sup>(6)</sup>	Brain Injury Waiver	Children with Autism Waiver <sup>(7)</sup>	Children with Life Limiting Illness Waiver	Spinal Cord Injury Waiver	TOTAL
Estimated FY 2020-21 Enrollmen	t 25,366	3,516	1,880	0	534	0	177		31,668
Enrollment Trend Selected <sup>(c</sup> FY 2021-22 Estimated Enrollmen	2.51% t 26,003	3.17% 3,627	8.88% 2,047	0.00%	7.30% 573	0.00%	5.65% 187	9.23% 213	3.10% 32,650
F Y 2021-22 Estimated Enrollmen  Bottom Line Impacts	20,003	3,027	2,047		3/3		187	213	32,030
Total Bottom Line Impact	s 0			0	0	0	0	0	0
FY 2021-22 Enrollmer Estimated FY 2021-22 Conversion Factor	t 26,003 r 92.65%	3,627 92,99%	2,047 86.04%	0	573 94.97%	0	187 89.81%	213 88.92%	32,650 92.27%
FY 2021-22 Conversion Factor FY 2021-22 Average Monthly Utilizer	24.092			0		0			30,127
FY 2020-21 Cost per Utilize	\$23,610.36	\$15,543.60		N/A		N/A	\$4,338.79	\$48,463.94	\$24,319.78
Percentage Selected to Modify Cost Per Utilizer (	1.50%	1.33% \$15.750.33	10.69%	0.00%	1.77%	0.00%	0.00%	3.02%	2.74%
FY 2021-22 Estimated Cost Per Utilize Estimated FY 2021-22 Base Expenditur	\$23,964.52 \$577,353,216		\$43,760.48 \$77.062,205	N/A S0	\$64,401.68 \$35,034,514	N/A S0	\$4,338.79 \$728,917	\$49,927.55 \$9,436,307	\$24,985.60 \$752,741,022
Bottom Line Impact	9577955,210	900,120,000	\$77,002,203	30	403,404,514	30	3723,727	33,430,307	
Colorado Choice Transition	s (\$1,280,302)	(\$120,681)	\$0	\$0	(\$67,689)	\$0	\$0	(\$20,316)	(\$1,488,988)
FY 2019-20 53 Weekly Payment Period	s \$0	\$0	\$0	\$0	\$0	\$0	\$0	so	\$0
FY 2019-20 Adult Day Targeted Rate Increas	80	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FY 2019-20 Respite Targeted Rate Increas	s0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FY 2019-20 Behavioral Therapy Targeted Rate Increas	e \$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0
FY 2019-20 Long Bill Personal Care & Homemaker Rate Increas	e \$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0
SB 19-238 Personal Care & Homemaker Rate Increase	e \$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0
Brain Injury SLP Rate Chang	g \$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0
SB 20-212 Telehealt	\$643,068	\$63,312	\$52,828	\$0	\$36,596	\$0	\$0	\$9,526	\$805,330
COVID Emergency Spendin	g \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Local Minimum Wag	\$5,179,419	\$509,933	\$0	\$0	\$294,750	\$0	\$0	\$76,724	\$6,060,826
FY 2020-21 1% ATB Provider Rate Decreas	(\$340,085)	(\$32,056)	(\$32,961)	\$0	(\$17,980)	\$0	(\$429)	(\$5,396)	(\$428,908)
R-13 Long-Term Care Utilization Management CDAS:	(\$1,029,769.08)	(\$97,065)	\$0	\$0	(\$54,444)	\$0	\$0		(\$1,197,619)
R-13 Long-Term Care Utilization Management IHS:	s (\$2,255,844) s \$916,487	\$0 \$323,442	(\$218,635.65) (\$198,768)	\$0 \$0	\$0 \$191,232	\$0 \$0	\$0 (\$429)		(\$2,510,275) \$1,240,366
Total Bottom Line Impact Estimated FY 2021-22 Expenditur	s 5916,487 s 5578,269,703	\$53,449,305	\$76,863,437	S0	\$35,225,746	S0	\$728,488	\$9,444,709	\$1,240,366 \$753,981,388
Estimated FY 2021-22 Per Utilize	\$24,002.56	\$15,846.22	\$43,647.61	N/A	\$64,753.21	N/A	\$4,336.24	\$49,972.01	\$25,026.77
% Change over FY 2020-21 Per Utilize	1.66%	1.95%		N/A	2.33%	N/A	-0.06%	3.11%	2.91%
	1	1	Out Year Projection	on				1	
HCBS WAIVERS	Elderly, Blind and Disabled Waiver	Community Mental Health Supports Waiver	Children's Home-and Community-Based Waiver	Consumer Directed Attendant Support-State	Brain Injury Waiver	Children with Autism Waiver (7)	Children with Life Limiting Illness Waiver	Spinal Cord Injury Waiver	TOTAL
		• • • • • • • • • • • • • • • • • • • •		Plan <sup>(6)</sup>					
Estimated FY 2021-22 Enrollmer	t 26,003	3,627	2,047	0	573	0	187		32,650
Enrollment Trend Selected (	2.51%	3,627 3.17%	2,047 8.89%	0 0.00%	7.33%	0.00%	187 5.88%	9.39%	3.13%
		3,627	2,047	0		0	187		
Enrollment Trend Selected <sup>6</sup> FY 2022-23 Estimated Enrollmen Bottom Line Impact Total Bottom Line Impact	2.51% t 26,656	3,627 3.17% 3,742	2,047 8.89% 2,229	0 0.00% 0	7.33% 615	0 0.00% 0	187 5.88% 198 0	9.39% 233 0	3.13% 33,673 0
Enrollment Trend Selected  FY 2022-23 Estimated Enrollment Bottom Line Impact Total Bottom Line Impact Fy 2022-23 Enrollment Fy 2022-23 Enrollment	2.51% t 26,656 s 0 t 26,656	3,627 3.17% 3,742 0 3,742	2,047 8.899% 2,229 0 2,229	0 0.00% 0	7.33% 615 0 615	0 0.00% 0	187 5.88% 198 <b>0</b> 198	9.39% 233 0 233	3.13% 33,673 0 33,673
Envoluent Trent Selected	2.51% t 26,656	3,627 3.17% 3,742	2,047 8.899% 2,229 0 2,229	0 0.00% 0	7.33% 615	0 0.00% 0	187 5.88% 198 0	9.39% 233 0	3.13% 33,673 0
Envoluent Trent Selected   F	2.51% t 26,656 s 0 26,656 r 92,65% 24,697 c \$24,002.56	3,627 3,17% 3,742 0 3,742 92,99% 3,480 \$15,846.2	2,047 8.89% 2,229 0 2,229 86,04% 1,918 \$43,647.61	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 N/A	7.33% 615 0 615 94.97% \$84 \$64,753.21	0 0.00% 0 0 0 0 0	187 5.88% 198 0 198 89.81% 178 \$4,336.24	9.39% 233 0 233 88.92% 207 \$49,972.01	3.13% 33,673 0 33,673 92.25% 31,064 \$25,026.77
Enrollment Treat Selected  FY 2022-21 Estimated Enrollment  Botton Line Impact  Tend Botton Line Impact  FY 2022-31 Estimated Enrollment  FY 2022-31 Estimated FY 2022-31 Estimated FY 2022-32 Estimated Utilizer  FY 2022-32 Estimated Utilizer  FY 2022-32 Cost per Utilizer  FY 2022-32 Cost per Utilizer  Percentage Selected to Modify Per Utilizer	2.51% 26,656 0 26,656 1 26,656 2 92,65% 2 24,097 524,002.56 1.50%	3,627 3,17% 3,742 0 3,742 9,2,99% 3,480 \$15,846.22 1,133%	2,047 8,89% 2,229 0 2,229 86,04% 1,918 \$43,647.61	0 0.00% 0 0 0 0 0 0 N/A 0.00%	7.33% 615 0 615 94.97% 584 \$64,753.21 1.77%	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 89.81% 178 \$4,336.24	9.39% 233  0 233 88.92% 207 \$49,972.01	3.13% 33,673 0 33,673 92.25% 31,064 \$25,026.77 -4.24%
Envoluent Trent Selected	2.51% 26,656  0 1 26,656 92,65% 24,667 524,002.56 1.50% 524,362 524,362.66	3,627 3,17% 3,742 0 3,742 92,99% 3,480 \$15,846,22 1,33% \$16,956,97	2,047 8,899% 2,229 0 2,229 86,049% 1,918 \$43,647.61 10,699%	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 615 0 615 94.97% \$ \$84 \$ \$64,753.21 1.77%	0 0.00% 0 0 0 0 0	187 5.88% 198 0 198 89.81% 178 \$4,336.24 0.00% \$4,336.24	9.39% 233 0 233 88.92% 297 \$49,972.01 3.02% \$51,481.16	3.13% 33,673 0 33,673 92,25% 31,056 425,026,77 42,42% \$33,965.88
Envoluent Trent Selected	2.51% 26.656 1 26.656 2 26.65% 2 24.697 524,002.56 1 52.400.56 1 52.45% 6 5601,683,132	3,627 3,17% 3,742 0 3,742 2,29% 3,480 515,846,22 13,337 516,966,97 555,878,256	2,047 8,89% 2,229 0 2,229 8,6,04% 1,918 543,647,61 1,06,69% 543,313,54 592,666,370	0 0.00% 0 0 0 0 0 0 N/A/A 0.00% S8.00 S8.00	7.33% 615 0 615 94.97% \$84 \$64,753.21 1.579,74 338,485,215	0 0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 89.81% 178 \$4,336,24 0.00% \$4,336,24 \$771,851	9,39% 233 0 233 88,92% 207 \$49,972.01 3,02% \$51,481.16	3.13% 33.673 0.073 32.25% 31.064 \$25,026.77 43.245/8 \$800,140,424
Favolment Trend Selected FY 202-25 Estimated Expense FY 202-25 Estimated Expense Total Bottom Line Impact Total Bottom Line Impact For 102-25 Estimated Expense Finance Financ	2.51% 26.656  0 22.65% 24.697 52.4,097 6 1.50% \$ \$4,097 \$ \$24,097 \$ \$24,097 \$ \$24,002.60 \$ \$601,683,132	3,627 3,17% 3,742 0 3,742 2,59% 3,549 515,846,22 1,33% 316,956,97 \$55,878,256	2,047 8,89% 2,229 0 2,229 8,04% 1,918 \$43,547,51 10,69% \$48,313,54 \$92,665,370 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 615 9.45% \$4.45% \$4.45% \$1.753.21 \$58,898,215	0 0 0.00% 0 0.00% 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 89.81% 178 54,336.24 0.00% 54,336.24 5771,851	9.39% 233 0 233 88.92% 207 \$49,972.01 3.02% \$51,481.16 \$10,656,600	3.13% 33.673 0 33.673 92.25% 31.064 525.026.77 4.24% \$23.065.98 \$800,140,424
Enrollment Trend Selected   PF 202-23 Estimated Explainate   FF 302-23 Estimated Explainate   FF 202-23 Estimated Utilizer   FF 202-23 Estimated Utilizer   FF 202-23 Estimated Utilizer   FF 302-23 Estimated Explainated Explainate   FF 302-23 Estimated Explainated Explai	2.51% 26.656 1 26.656 2 26.65% 2 24.697 524,002.56 1 52.400.56 1 52.45% 6 5601,683,132	3,627 3,17% 3,742 0 3,742 2,59% 3,549 515,846,22 1,33% 316,956,97 \$55,878,256	2,047 8,89% 2,229 0 2,229 86,04% 1,918 \$43,547,61 10,09% \$48,313,54 \$92,665,370 50 50	0 0.00% 0 0 0 0 0 0 N/A/A 0.00% S8.00 S8.00	7.33% 615 0 615 94.97% \$84 \$64,753.21 1.579,74 338,485,215	0 0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 89.81% 178 \$4,336,24 0.00% \$4,336,24 \$771,851	9.39% 233 0 233 88.92% 207 \$49,972.01 3.02% \$51,481.16 \$10,656,600	3.13% 33.673 0 33.673 92.25% 31.964 525.026.77 42.265/98 \$800,140,424
Envoluent Treat Selected F FY 202-23 Estimated Express  Total Bottom Line Impacts  First 202-23 Estimated Express F FY 202-23 Estimated Express F FY 202-23 Estimated Express F FY 202-23 Estimated F FY 202-23 Estimated F FY 202-23 Estimated Express F FY 202-23 Express F FY 202-24 Express F FY 202-25 SWedyl-Fywared Express F FY 202-20 Adult Day Transfeld Rate Increase FY 202-20 Adult Day Transfeld Rate Increase FY 202-20 Adult Day Transfeld Rate Increase FY 202-20 Express F	2,51% 26,656  0 0  26,656  22,65% 22,65% 22,65% 24,607.56  524,002.56  524,382,00  500  500  500  500  500	3,627 3,1792 3,742  0 3,742  2,9796 3,4898 3,15,846,22 1,3398 5,15,846,22 5,55,878,256 5,50 5,50 5,50 5,50 5,50 5,50 5,50 5,	2,047 8,89% 2,229 0 2,229 86,04% 1,918 54,547,61 10,69% 592,665,370 50 50 50 50 50 50 50 50 50 5	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% (1.5%) (1.	0 0 000% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 88.81% 178 84.336.24 0.00% 54.336.24 5771,851 50 50 50	9,39% 233 0 0 233 88,92% 267 949,972.01 3,02% SS1,481,16 S10,656,600 S0 S0 S0	3.13%13 3.673 3.673 3.6233 3.6233 5.200 5.
Enrollment Trend Selected	2,51% 26,656  26,656  26,656  22,655  24,697  524,092,656  1,50%  524,382,60  5601,883,126  50  50  50  50  50	3,627 3,17% 3,742  0 3,742  2,29% 3,486,22 1,33% 516,86,27 555,878,256 50 50 50 50	2,047 8,89% 2,229 0 2,239 86,04% 1,918 34,313,44 92,665,39 59 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33%2 6.15 0 6.15 9.497% 584 4.56,753.21 1.77% 56,599.34 533,485.315 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 108 108 108 80.81% 178 43.36.24 0.00% 54.336.24 5771.851 50 50 50 50	9.39% 233 8.8 227 549,972.01 3.02% \$51,481.16 510,656,600 \$0 \$0 \$0 \$0 \$0	3.13% 33.673 33.673 33.673 33.673 33.667 33.064 32.20% 32.
Enrollment Trend Selected	2,51% 26,656  0 0 26,556 22,65% 22,65% 24,607 532,002,56 1,50% 532,382,60 500,683,132 500 500 500 500 500 500	3,627 3,17% 3,742  0 3,742 2,29% 3,480 3,15846,22 1,33% 516,956,97 \$55,878,256  50 50 50 50 50 50	2,047 8,89% 2,729  0 2,729  8,804% 1,918 \$4,547,54 10,69% \$48,313,54 \$97,665,370  50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% (7.	0 0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 8.89.81% 178 8.43.36.24 0.00% \$4.336.24 5771,851 \$0 \$0 \$0 \$0 \$0 \$0	9,39% 233 8,52% 9,000 323 3,000 8,000 9,00	3.13%3 3.074 3.074
Favolument Treat Selection  FY 2022-25 Estimated Extending  FY 2022-25 Estimated Extending  Total Bottom Line Impact  Total Bottom Line Impact  Total Bottom Line Impact  For 2022-25 Enrollment  Estimated FY 2022-25 Enrollment  For 2022-25 Enrollment  For 2022-25 Enrollment  For 2022-25 Enrollment  FY 2022-20 Enrollment	2,51% 26,656  26,656  26,656  22,655  24,697  524,092,656  1,50%  524,382,60  5601,883,126  50  50  50  50  50	3,627 3,17% 3,742  0 3,742 2,29% 3,480 3,15846,22 1,33% 516,956,97 \$55,878,256  50 50 50 50 50 50	2,047 8,89% 2,229 0 0 2,239 86,04% 1,918 343,647,81 10,60% 59 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33%2 6.15 0 6.15 9.497% 584 4.56,753.21 1.77% 56,599.34 533,485.315 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 108 108 108 80.81% 178 43.36.24 0.00% 54.336.24 5771.851 50 50 50 50	9,3% 223  0 223  8,82% 207  \$49,972.01  3.02% \$51,656,600  90  90  90  90  90  90  90  90  90	3.13/3/3 33,673 0 3.3,673 32.23/5/3 31,064 52,026.77 4.245/8 520,06.77 4.245/8 520,144,124 530 530 530 530 530 530 530 530 530 530
Favolument Trend Selected   FY 2022-25 Estimated Experiment  Return Line Impact  Total Bottom Line Impact  Total Bottom Line Impact  Total Bottom Line Impact  Fy 2022-25 Envirolem  Estimated Fy 2022-25 Envirolem  Finaturated Fy 2022-25 Envirolem  For 2022-25 Envirolem  Fry 2022-25 Envirolem  Fy 2022-25 Envirolem  Fy 2022-25 Envirolem  Fy 2022-25 Envirolem  Proceedings Selected to Modify Per Unitor  Fy 2022-25 Estimated Cest Fy 2022-25 Envirolem  Fy 2022-25 Estimated Cest Fy 2022-25 Extended Cest F	2.5111/2002 26,6356  0	3,627 3,17% 3,742  0 3,742  2,29% 3,486  315,846,22  1,35% 550  550  500  500  500  500  500  5	2,047 8,89% 2,229 0 0 2,229 86,04% 1,918 343,647,81 10,60% 59 59 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33%26 6.155 0 0 6.155 9.497%2 584 84 564,753.21 1.77%26 565,599.34 533,485,315 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 108 108 108 80.81% 178 5.83% 178 5.83% 5.43.36.24 5.771.851 5.50 5.50 5.50 5.50 5.50 5.50 5.50 5.	9,39% 223  0 223  88,22% 207  \$49,972.01  3.02% \$51,485,16  \$10,656,600  9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	3.13%3 33,673 0 33,673 32,25%5 31,064 52,026,77 42,24%5 521,065,98 5800,140,424 50 50 50 50 50 50 50 50 50 50 50 50 50
Envoluent Trend Selected  Fry 202-23 Estimated Engine  Total Bottom Line Impact  Total Bottom Line Impact  Total Bottom Line Impact  Fry 202-23 Envolved Impact  Entimated Fry 202-23 Envolved Impact  Entimated Fry 202-23 Envolved Impact  Entimated Fry 202-23 Envolved Impact  Fry 202-20 Solved Fry Parent Period  Fry 202-20 Adult Day Taracted Rate Increas  Fry 202-20 Adult Day Taracted Rate Increas  Fry 202-20 Engola Bit Personal Care & Homemarker Rate Increas  Fry 202-20 Engola Bit Personal Care & Homemarker Rate Increas  SB 19-228 Personal Care & Homemarker Rate Increas  SB 19-228 Personal Care & Homemarker Rate Increas  SB 20-221 Telebella	2.51% 26.656  0.0  0.0  26.556  22.65% 22.65% 22.65% 23.480,26  32.480,26  32.480,26  30.00  30.	3,627 3,17% 3,742 4 4 4 4 5,742 5,742 5,742 5,742 5,745 5,74	2,047 8,89% 2,299  6 6 6 3,272 2,239  3,045 4,647,64  54,647,64  548,313,44  548,313,45  50 50 50 50 50 50 50 50 50 50 50 50 5	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% (1.5%) (1.	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88%  9 19 19 10 10 10 10 10 10 10 10 10 10 10 10 10	9,39% 233 88,92% 90 10 13,302% 14,977.01 13,02% 50 10,656,600 50 50 50 50 50 50 50 50 50 50 50 50 5	3.13%3 3.673
Favolument Trend Selected   FY 202-22 Estimated Experiment   FY 202-23 Estimated Experiment   For the Research of Private   Fo	2.5111/2002 26,6556  0 26,6556 92,6576 24,6077 524,002,566 1,5070 524,362,260 5324,362,260 5301,6831,132 530 530 530 530 530 530 530 530 530 530	3,627 3,17% 3,742 0 3,742 2,29% 3,480 5,15,46,22 1,33% 516,66,07 555,878,266 550 550 550 550 550 550 550 550 550 5	2,047 8,89% 2,229 0 2,229 0 2,229 86,04%,64 1,918 \$41,647.61 10,09% \$43,113.54 \$92,665,70 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 615 615 615 94,97% 584 584,753,21 1.77% 585,899,34 581,485,215 50 90 90 90 90 90 90 90 90 90 90 90 90 90	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 108 108 108 80.81% 618 80.81% 54.336.24 0.00% 54.336.24 5771.851 500 500 500 500 500 500 500 500 500 5	9,39% 223  0 233 88,92% 207 549,972.01 3,02% 551,481.16 510,656,600 50 50 50 50 50 50 50 50 50 50 50 50 5	3.13/3/3 33,673 0 3.3,673 3.2,25% 3.1,064 525,026.77 4.2,965/98 5800,140,424 500 500 500 500 500 500 500 50
Envoluent Trend Selected  Fry 202-23 Estimated Engine  Total Bottom Line Impact  Total Bottom Line Impact  Total Bottom Line Impact  Fry 202-23 Envolved Impact  Entimated Fry 202-23 Envolved Impact  Entimated Fry 202-23 Envolved Impact  Entimated Fry 202-23 Envolved Impact  Fry 202-20 Solved Fry Parent Period  Fry 202-20 Adult Day Taracted Rate Increas  Fry 202-20 Adult Day Taracted Rate Increas  Fry 202-20 Engola Bit Personal Care & Homemarker Rate Increas  Fry 202-20 Engola Bit Personal Care & Homemarker Rate Increas  SB 19-228 Personal Care & Homemarker Rate Increas  SB 19-228 Personal Care & Homemarker Rate Increas  SB 20-221 Telebella	2.5111/2016 26,6556  0 26,6556 22,6576 24,6977 524,002,256 51,5570 524,382,269 5601,683,132 50 50 50 50 50 50 50 50 50 50 50 50 50	3,627 3,179 3,774 3,774  0 3,742 9,299% 3,480 515,846,22 1,339% 516,866,07 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,8% 2,247 0 0 2,229 8,60,4%,67 1,918 543,647,61 10,0% 550 550 550 550 550 550 550 550 550 5	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% (1.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 108 108 108 108 80.81% 4.316.24 0.00% 54.336.24 5771.851 500 500 500 500 500 500 500 500 500 5	9,3% 233  0 233 88,92% 207 \$49,972.01 3,02% \$51,481.16 \$10,656,600  50 90 90 90 90 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$5	3.13/3/3 33,673 0 3.3,673 3.2,25% 3.1,064 525,026.77 4.2,965/98 5800,140,624 580,140,624 580,140,624 580,140,624 580,140,624 580,140,624 580,530 580,53
Envoluent Trend Selection  Fry 202-23 Estimated Engine  Fry 202-23 Estimated Engine  Total Bottom Line Impact  Total Bottom Line Impact  Fry 202-23 Envolved Impact  Envolved Impact  Envolved Impact  Envolved Impact  Fry 202-20 Sow deck Provende Pariod  Fry 202-20 Sow deck Provende Pariod  Fry 202-20 Adult Day Taracted Rate Increase  Fry 202-20 Envolved Impact Impact  Fry 202-20 Envolved Impact Impact  Fry 202-20 Envolved Impact  Envolved Impact  Envolved Impact Impact  Fry 202-21 Telebald  COVID Envolved Impact  Envolved Impact  Envolved Impact  Fry 202-21 Telebald  Envolved Impact  Envolved I	2.5119/10 26.656 2 26.656 2 26.656 2 26.656 2 26.656 2 26.650 2 26.650 2 26.002.56 2 30.002.56 2 30.00	3,627 3,17% 3,742  0 0 3,742 2,29% 3,540 3	2,047 8,89% 2,229 0 0 0 2,239 8,00% 8,00% 8,1,07,01 10,00% 9,00,00 9,00 9,00 9,00 9,00 9,00 9	0 0.00% 0.00	7.33% (1.5%) (1.	0 0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 80.81% 5.43.324 5.43.324 5.43.324 5.5	9,3% 213  0 213  88,92% 39,72,10  \$4,97,72,07  \$5,97,72,07  \$5,1,87,16  \$5,1,8	3.13/3/3 33.673 33.673 33.673 33.673 33.673 33.673 32.25% 33.673
Favolument Trend Selected   FFY 2022-23 Estimated Enterprise   FFY 2022-25 Estimated Enterprise   FFY 202-25 Estimated En	2.51% 26,655   0	3,627 3,179 3,742 0 0 3,742 2,29% 3,480 515,846,22 1,33% 516,96,97 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,89% 2,2729 0 0 2,2239 1,918 5,1,647,61 1,0,69% 543,131,54 592,665,370 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00%	7.33% (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 108 108 108 108 8081% 178 84336.24 0.00% \$4,336.24 \$771,851 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50	9,39% 223  0 233 88,92% 207 \$49,972.01 3,02% \$51,481.16 \$10,656,600 \$0 90 90 90 90 90 90 90 90 90 90 90 90 90	3.13/3/3 33,673 0 3.3,673 29,23% 3.1,064 525,026.77 4.2,965,98 5800,140,624 50 50 50 50 50 50 50 50 50 50
Envoluent Trend Selection  Fry 202-23 Estimated Engine  Fry 202-23 Estimated Engine  Total Bottom Line Impact  Total Bottom Line Impact  Fry 202-23 Envolved Impact  Envolved Impact  Envolved Impact  Envolved Impact  Fry 202-20 Sow deck Provende Pariod  Fry 202-20 Sow deck Provende Pariod  Fry 202-20 Adult Day Taracted Rate Increase  Fry 202-20 Envolved Impact Impact  Fry 202-20 Envolved Impact Impact  Fry 202-20 Envolved Impact  Envolved Impact  Envolved Impact Impact  Fry 202-21 Telebald  COVID Envolved Impact  Envolved Impact  Envolved Impact  Fry 202-21 Telebald  Envolved Impact  Envolved I	2.51% 26,655   0	3,627 3,179 3,742 0 0 3,742 2,29% 3,480 515,846,22 1,33% 516,96,97 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,89% 2,2729 0 0 2,2239 1,918 5,1,647,61 1,0,69% 543,131,54 592,665,370 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% (15) 615 615 94.97% (15) 94.97% (15) 95.94.97% (15) 95.94.97% (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.35 (15) 9	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 80.81% 5.43.324 5.43.324 5.43.324 5.5	9,3% 213  0 213  88,92% 39,72,10  \$4,97,72,07  \$5,97,72,07  \$5,1,87,16  \$5,1,8	3.13/3/3 3.673  0 33.673  0 2.35% 3.1,044 325,066.77 4.2,24% \$23,965,98 \$800,140,424  \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$5
Favolution Trend Selection  FY 2022-25 Estimated Extending  FY 2022-25 Estimated Extending  FY 2022-25 Estimated Uniter  Total Botton Line Impact  For 1922-25 Estimated Uniter  For 1922-25 Estimated Uniter  For 1922-25 Estimated Uniter  FY 2022-25 Estimated Conference  FY 2022-20 Estimated Conference  FY 2022-20 SI Weekly Promosed Period  FY 2022-20 Selection Through Transport Research  FY 2022-20 Selection Transport Research  FY 2022-20	2.5111/2002 26.656 26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.656 20.26.6566 20.26.6566 20.26.65666 20.26.6566666666666666666666666666666666	3,627 3,17% 3,17% 3,742  0 3,742 9,29% 3,480 5,15,846,22 1,33% 5,16,66,97 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,89% 2,2729 0 0 2,2739 86,04%,47 1,918 1,918 541,547,51 10,69% 550,370 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00%   0.00	7.33% (15) 615 615 94.97% (15) 94.97% (15) 95.94.97% (15) 95.94.97% (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.35 (15) 9	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	877,881	9,39% 233  0 233 88,92% 207,201 3,02% 551,481,16 510,656,600 50 50 50 50 50 50 50 50 50 50 50 50 5	3.13/3/3 33,673 33,673 92,25% 31,064 52,066,77 4.26% 520,067,77 4.26% 520,067,77 520,067,70 50 50 50 50 50 50 50 50 50 50 50 50 50
Environment Treed Selected	2.51%; 2.65%  26,65%  26,65%  22,65%  24,697  524,002.56  1.59%  524,382,00  500  500  500  500  500  500  500	3,627 3,17% 3,17% 3,742 0 3,742 92,99% 3,480 515,846,22 1,33% 516,965,97 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,89% 2,2729 0 0 2,2739 86,04%,47 1,918 1,918 541,547,51 10,69% 550,370 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% (15) 615 615 94.97% (15) 94.97% (15) 95.94.97% (15) 95.94.97% (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.35 (15) 9	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 108 108 198 8081% 178 84336,24 0.00% \$4,336,24 \$771,851 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$0	9.39% 233  0 233 88.92% 207 549,972.01 3.02% 551,481.16 510,656,600 50 50 50 50 50 50 50 50 50 50 50 50 5	3.13/3/3 3.673  0 33.673  0 2.35% 3.1,044 325,066.77 4.2,24% \$23,965,98 \$800,140,424  \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$5
From the Property of the Prope	2.51%; 26,655.  0 0 26,556. 92,65%. 24,607. \$24,002.56. 1.59%. \$24,362.00 \$501,683,132 \$501,683,132 \$500 \$500 \$500 \$500 \$500 \$500 \$500 \$50	3,627 3,17% 3,742  0 3,742  0,29% 3,486,22  13,356,23  13,366,32  53,566,32	2,047 8,89% 2,2729 0 0 2,2739 86,04%,47 1,918 1,918 541,547,51 10,69% 550,370 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% (15) 615 615 94.97% (15) 94.97% (15) 95.94.97% (15) 95.94.97% (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.34 (15) 95.95.97.35 (15) 9	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 108 108 198 8081% 178 84336,24 0.00% \$4,336,24 \$771,851 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$00 \$0	9.39% 233  0 233 88.92% 207 549,972.01 3.02% 551,481.16 510,656,600 50 50 50 50 50 50 50 50 50 50 50 50 5	3.13/3/3 3.673  0 33.673 9.2 25% 3.1,06.475 \$25,06.475 \$4.2,96.598 \$800,140,424 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50
Favore the control of	2.51%; A 26.656   26.	3,627 3,179 3,742  6 6 7 3,742  5 2,295 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	2,047 8,89% 2,229 0 0 0 2,229 8,009% 8,009% 8,009% 8,1,007,01 10,009% 9,000 9,	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 61515  0 0 6157 9.497% 5848 586,753.21 1.77% 585,899.34 581,855,15 593 593 593 593 593 593 593 593 593 59	0 0 0.00% 0.	187 5.88% 198 0 0 198 8 58.81% 5.83% 54.33.624 5.83% 5	9,39% 223  0 223  88,22% 207  \$49,972.01  3,027* \$49,972.01  3,027* \$51,481.16  \$10,656.600  \$90  \$90  \$90  \$90  \$90  \$90  \$90	3.13/3/3 3.673  0 33.673 9.2 25% 3.1,06.475 \$25,06.475 \$4.2,96.598 \$800,140,424 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50
Few and the company of the company o	2.51% 26,655   0	3,627 3,179 3,742  6 6 7 3,742  5 2,295 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	2,047 8,89% 2,229  0 2,229 8,04% 1,918 341,647,81 1,069% 93,048 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81 93,047,81	0 0.00%   0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 7.33% 8.6155 9.097% 9.09	0 0 00%, 00%, 00%, 00%, 00%, 7,33%	187 5.88% 198 108 108 108 108 108 108 108 108 108 10	9,39% 223  0 223  88,22% 207  \$49,972.01  3,027* \$49,972.01  3,027* \$51,481.16  \$10,656.600  \$90  \$90  \$90  \$90  \$90  \$90  \$90	3.13/3/3 3.673  0 3.36/73  9.2.25% 3.1,064 \$52,026,77  4.24/4/4 \$52,026,77  52,965,98  \$800,140,424  \$50  \$50  \$50  \$50  \$50  \$50  \$50  \$5
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Favore the company of	2.51% (2.6.656 ) 26.656 ) 26.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 27.65% (2.6.656 ) 28.65% (2.6.6	3,627 3,17% 3,17% 3,742  0 3,742 92,99% 3,480 515,846,22 1,33% 516,95,97 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,89% 2,229 0 2,229 8,049 8,049% 1,918 343,647,81 1,069% 343,313,44 592,665,379 50 50 50 50 50 50 50 50 50 50 50 50 50	0 0.00%   0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 615  0 615  0 9.07% 584  584,753.21  1.77% 586,898,34  338,885,315  30  30  30  30  30  30  30  30  30  3	000%, 0.0	187 5.88% 198 108 108 108 80.81% 1788 54.336.24 0.00% 54.336.24 5771.851 500 500 500 500 500 500 500 500 500 5	9,39% 223  0 233 88,62% 297 549,972.01 3,02% 551,485,16 516,666,669 50 50 50 50 50 50 50 50 50 50 50 50 50	3.13% 3.3,673 3.3,673 3.3,673 3.3,673 3.2,25%, 3.1,064 5.25,06.77 4.2,4% 5.25,06.77 4.2,965,98 5.20,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1
Enrolment Trend Selection FY 2012-23 Estimated Enrolme FY 2012-23 Estimated Enrolme FY 2012-24 Estimated Enrolment FY 2012-25 Estimated Enrolment FY 2012-25 Estimated Enrolment Final Enrolment Final Enrolment FY 2012-25 Estimated Enrolment Final Enrolment FY 2012-25 Estimated Enrolment FY 2012-25 Estimated Enrolment FY 2012-25 Estimated Controlment Controlment FY 2012-25 Estimated Controlment FY 2012-25 Estimated Controlment	2.51%; Acceptable of the control of	3,627 3,17% 3,17% 3,742  0 3,742 92,99% 3,480 515,846,22 1,33% 516,95,97 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,89% 2,229 6 0 2,229 8,005% 8,005% 8,005% 9,005% 9,005% 9,006,5,70 9,006 9,00	0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 615  0 615 94.97% 5848 \$64,753.21 1.77% \$65,899.34 \$338,485,215 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	187 5.88% 198 0 198 89.81% 198 189.81% 198.81%	9,39% 223  0 233 88,62% 297 549,972.01 3,02% 551,485,16 516,666,669 50 50 50 50 50 50 50 50 50 50 50 50 50	3.13% 3.3,673 3.3,673 3.3,673 3.3,673 3.2,25%, 3.1,064 3.2,206,77 4.2,206,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,65,78 5.20,7
Favore the company of	2.51% 26,655   0	3,627 3,17% 3,17% 3,742  0 3,742 92,99% 3,480 515,846,22 1,33% 516,95,97 555,878,256 50 50 50 50 50 50 50 50 50 50 50 50 50	2,047 8,89% 2,229 6 0 2,229 8,005% 8,005% 8,005% 9,005% 9,005% 9,006,5,70 9,006 9,00	0 0.00%   0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7.33% 615  0 615 94.97% 5848 \$64,753.21 1.77% \$65,899.34 \$338,485,215 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	000%, 0.0	187 5.88% 198 108 108 108 80.81% 1788 54.336.24 0.00% 54.336.24 5771.851 500 500 500 500 500 500 500 500 500 5	9,39% 223  0 233 88,62% 297 549,972.01 3,02% 551,485,16 516,666,669 50 50 50 50 50 50 50 50 50 50 50 50 50	3.13% 3.3,673 3.3,673 3.3,673 3.3,673 3.2,25%, 3.1,064 5.25,06.77 4.2,4% 5.25,06.77 4.2,965,98 5.20,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1

# Exhibit G - COMMUNITY BASED LONG-TERM CARE - HCBS WAIVERS Average Monthly Enrollment Utilization Adjustment

	HCBS Waive	rs Average Monthly	Enrollment vs. Aver	age Monthly Waiver	Utilizers				
	Fiscal Year	Elderly, Blind and Disabled Wavier (HCBS-EBD)	Community Mental Health Supports Waiver (HCBS-CMHS)	Children's Home- and Community- Based Waiver (HCBS - CHCBS)	Consumer Directed Attendant Support- State Plan (HCBS-1915(i) CDASS) <sup>(4)</sup>	Brain Injury Waiver (HCBS-BI)	Children with Autism Waiver (HCBS-CWA) <sup>(4)(5)</sup>	Children with Life Limiting Illness Waiver (HCBS-CLLI)	Spinal Cord Injury Waiver (HCBS-SCI) <sup>(4)</sup>
	Average Monthly Enrollment (1)	19,237	2,688	1,125	33	237	50	171	N/A
FY 2012-13	Average Monthly Waiver Utilizers (2)	18,432	2,524	938	33	225	36	90	N/A
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	95.82%	93.91%	83.38%	100.00%	94.90%	71.17%	52.63%	70.00%
	Average Monthly Enrollment (1)	20,500	2,908	1,040	31	258	48	166	51
FY 2013-14	Average Monthly Waiver Utilizers (2)	19,485	2,652	965	31	240	35	88	51
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	95.05%	91.18%	92.79%	100.00%	92.98%	72.50%	53.01%	100.00%
	Average Monthly Enrollment (1)	21,358	3,019	1,100	N/A	307	49	130	53
FY 2014-15	Average Monthly Waiver Utilizers (2)	19,795	2,719	1,065	N/A	273	34	81	53
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	92.68%	90.07%	96.82%	100.00%	88.84%	69.22%	62.31%	100.00%
	Average Monthly Enrollment (1)	21,625	3,049	1,186	N/A	336	42	131	49
FY 2015-16	Average Monthly Waiver Utilizers (2)	20,567	2,835	1,136	N/A	319	N/A	107	49
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	95.11%	92.99%	95.78%	100.00%	94.97%	64.68%	81.68%	100.00%
	Average Monthly Enrollment (1)	22,770	3,277	1,369	N/A	371	46	152	77
FY 2016-17	Average Monthly Waiver Utilizers (2)	19,885	2,788	1,136	N/A	303	N/A	126	55
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	87.33%	85.08%	82.98%	100.00%	81.67%	54.35%	82.89%	71.43%
	Average Monthly Enrollment (1)	23,827	3,399	1,492	N/A	427	35	157	109
FY 2017-18	Average Monthly Waiver Utilizers (2)	22,641	3,095	1,376	N/A	390	N/A	141	103
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	95.02%	91.06%	92.23%	100.00%	91.33%	N/A	89.81%	94.50%
	Average Monthly Enrollment (1)	24,424	3,498	1,645	N/A	498	N/A	169	156
FY 2018-19	Average Monthly Waiver Utilizers (2)	22,285	3,127	1,378	N/A	442	N/A	137	130
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	91.24%	89.39%	83.77%	N/A	88.76%	N/A	81.07%	83.33%
	Average Monthly Enrollment (1)	24,805	3,477	1,726	N/A	508	N/A	171	178
FY 2019-20	Average Monthly Waiver Utilizers (2)	22,744	3,133	1,485	N/A	459	N/A	141	166
	Average Monthly Utilizers as a Percentage of Average Monthly Enrollment	91.69%	90.11%	86.04%	N/A	90.35%	N/A	82.46%	82.36%
•	FY 2020-21 Selected Average Monthly Utilizers Conversion Factor (3)	92.65%	92.99%	86.04%	N/A	94.97%	N/A	89.81%	88.92%
	FY 2021-22 Selected Average Monthly Utilizers Conversion Factor (3)	92.65%		86.04%		94.97%	N/A	89.81%	
Deficience HCDC, Herre	FY 2022-23 Selected Average Monthly Utilizers Conversion Factor (3)	92.65%	92.99%	86.04%	N/A	94.97%	N/A	89.81%	88.92%

Definitions: HCBS: Home- and Community-Based Services; PAR: Prior Authorization; HIPAA: Health Insurance Portability and Accountability Act of 1996

<sup>(1)</sup> Average Monthly Enrollment is defined by the average number of active PARs, for each waiver, per month.
(2) Average Monthly Waiver Utilizers is defined by the average number of clients with a paid claim, for each waiver, per month of service.

<sup>(3)</sup> The selected FY 2020-21, FY 2021-22, FY 2022-23 Average Monthly Utilizer Conversion Factor for all waivers is an average of the two previous fiscal year actuals. See narrative for more detail.

<sup>(4)</sup> N/A - Wavier ended operation on 1/1/2019.

<sup>(5)</sup> Waiver ended operation 6/30/2018

ļ					F	Y 2018-19 July -	December CORE	Total Actuals								
HCBS WAIVERS	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
HCBS - Elderly, Blind, and Disabled	\$87,300,379	\$16,962,573	\$68,978,227	\$1,154,334	\$237,051	\$21,206	\$820,984	\$0	\$21,663	\$0	\$53,046	\$2,552	\$0	\$0	\$334,329	\$175,886,344
HCBS - Community Mental Health Services	\$3,234,032	\$2,673,943	\$13,062,242	\$50,086	\$10,695	\$0	\$114,245	\$0	\$0	\$0	\$8,181	\$0	\$0	\$0	\$79,681	\$19,233,105
Children's Home-and Community-Based Waiver	\$0	\$0	\$7,192,996	\$38,925	\$0	\$0	\$0	\$0	\$502,686	\$2,422	\$475	\$0	\$0	\$0	\$0	\$7,737,504
HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support	\$0 \$303,521	\$0 \$58,974	\$0 \$239,819	\$0 \$4.014	\$0 \$824	\$0 \$74	\$0 \$2.854	\$0 \$0	\$0 \$75	\$0 \$0	\$0 \$184	\$0 \$9	\$0 \$0	\$0 \$0	\$0 \$1,162	\$0
HCBS - Consumer Directed Attendant Support HCBS - Brain Injury	\$303,321 \$447.254	\$58,974 \$997.491	\$239,819 \$8.192,375	\$4,014	\$824 \$1,619	\$/4 \$0	\$2,854 \$9,468	\$0 \$0	\$/5	\$0 \$0	\$184 \$0	\$9 \$0	\$0 \$0	\$0 \$0	\$1,162 \$21,124	\$611,510 \$9,679,224
HCBS - Children with Autism	\$447,234 \$0	\$997,491	\$219.026	\$3,784	\$1,619	\$0 \$0		\$0 \$0	\$47.445	\$1.446	\$448	\$0 \$0	\$0 \$0	\$0 \$0	\$21,124	\$272.149
HCBS - Children with Life Limiting Illness	\$0	\$0	\$327.761	\$780	\$0	\$0	\$0	\$0 \$0	\$21.738	\$1,107	\$5,428	\$0 \$0	\$0 \$0	\$0	\$0	\$356.814
HCBS - Spinal Cord Injury	\$174.899	\$27,332	\$1,195,123	\$11.564	\$0	\$0	\$32,897	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,441,815
Total	\$91,460,085	\$20,720,313	\$99,407,569	\$1,273,380	\$250,189	\$21,280	\$980,448	\$0	\$593,607	\$4,975	\$67,762	\$2,561	\$0	\$0	\$436.296	\$215,218,465
Caseload	43,538	11,088	67,693	5,707	153,209	90,184	357,092	309	471,955	63,293	20,247	14,310	1,803	2,526	33,506	1,336,459
Half -Year Per Capita	\$2,100.68	\$1,868.77	\$1,468.50	\$223.13	\$1.63	\$0.24	\$2.75	\$0.00	\$1.26	\$0.08	\$3.35	\$0.18	\$0.00	\$0.00	\$13.02	\$161.04
						FY 2018-19 Janu	ary - June CORE	Total Actuals								
HCBS WAIVERS	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
HCBS - Elderly, Blind, and Disabled	\$112,381,662	\$14,033,617	\$60,388,671	\$1,177,315	\$72,529	\$11,176	\$325,733	\$0	\$665	\$0	\$13,480	\$0	\$0	\$0	\$89,162	\$188,494,010
HCBS - Community Mental Health Services	\$8,201,096	\$1,776,096	\$8,863,803	\$62,896	\$11,654	\$175	\$31,947	\$0	\$0	\$0	(\$1)	\$0	\$0	\$0	\$15,142	\$18,962,808
Children's Home-and Community-Based Waiver	\$0	\$0 \$0	\$9,019,731 \$0	\$1,297	\$0 \$0	\$0	\$0 \$0	\$0	\$135,267	\$800	\$700	\$0	\$0	\$0	\$0 \$0	\$9,157,795 \$0
HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support	(\$1,201,560)	(\$106,711)	\$0 (\$510,519)	\$0 (\$11,940)	(\$824)	\$0 (\$74)		\$0 \$0	\$0 (\$75)	\$0 \$0	\$0 (\$184)	\$0 (\$9)	\$0 \$0	\$0 \$0	\$0 (\$1,162)	(\$1.835.912)
HCBS - Consumer Directed Attendant Support	\$3,926,227	\$622,421	\$6,378,978	\$1,638	(\$824)	(\$74) \$0	\$53,840	\$0 \$0	(\$73)	\$0 \$0	(\$184)	(39) \$0	\$0 \$0	\$0 \$0	\$5,653	\$10.988.726
HCBS - Children with Autism	\$3,920,227	\$022,421	\$284.658	\$3,710	\$0	\$0		\$0 \$0	\$6,225	(\$33)	(\$10)	\$0 \$0	\$0 \$0	\$0	\$0,055	\$294,550
HCBS - Children with Life Limiting Illness	\$0	\$0	\$352,435	\$189	\$0	\$0	\$0	\$0	\$6,881	\$0	\$896	\$0	\$0	\$0	\$0	\$360,401
HCBS - Spinal Cord Injury	\$413,049	\$11,665	\$834,914	\$1,783	\$0	\$0	\$14,962	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,276,373
Total	\$123,720,474	\$16.337.088	\$85,612,671	\$1.236.888	\$83,328	\$11,277	\$423,628	\$0	\$148,963	\$767	\$14,881	(\$9)	\$0	\$0	\$108,795	\$227,698,751
Caseload	44,344	11,395	67,545	6,796	169,635	111,935	338,605	280	466,639	66,520	20,373	12,825	2,133	2,754	34,112	1,355,890
Half -Year Per Capita										,				,		
Hait - Year Per Capita	\$2,790.01	\$1,433.77	\$1,267.49	\$182.01	\$0.49	\$0.10	\$1.25	\$0.00	\$0.32	\$0.01	\$0.73	(\$0.00)	\$0.00	\$0.00	\$3.19	\$167.93
Haii - Year Per Capita	\$2,790.01	\$1,433.77	\$1,267.49	\$182.01			\$1.25 December CORE		\$0.32	\$0.01	\$0.73	(\$0.00)	\$0.00	\$0.00	\$3.19	\$167.93
Hall-Year Per Capita  HCBS WAIVERS	Adults 65 and Older (OAP-A)	S1,433.77  Disabled Adults 60 to 64 (OAP-B)	S1,267.49  Disabled Individuals to 59 (AND/AB)	Disabled Buy- In					\$0.32 Eligible Children (AFDC-C/BC)	\$0.01 SB 11-008 Eligible Children	\$0.73	(\$0.00)  MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	\$167.93
HCBS WAIVERS	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	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL	December CORE	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
	Adults 65 and Older	Disabled Adults 60 to 64	Disabled Individuals to 59	Disabled Buy-	MAGI Parents/ Caretakers to	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133%	December CORE	Total Actuals  Breast & Cervical Cancer	Eligible Children	SB 11-008 Eligible Children		MAGI Pregnant	SB 11-250 Eligible Pregnant	Non-Citizens- Emergency	Partial Dual	
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled	Adults 65 and Older (OAP-A) \$115,943,555	Disabled Adults 60 to 64 (OAP-B) \$17,629,254	Disabled Individuals to 59 (AND/AB) \$68,501,594	Disabled Buy- In \$1,440,188	MAGI Parents/ Caretakers to 68% FPL	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles \$0	TOTAL \$203,515,954
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$0	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$12,225,164 \$11,271,816 \$0	Disabled Buy- In \$1,440,188 \$58,549 \$0 \$0	MAGI Parents/ Caretakers to 68% FPL \$0 \$0 \$0	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL \$0 \$0 \$0 \$0	MAGI Adults  \$1,363  \$0  \$0  \$0	Breast & Cervical Cancer Program  \$0 \$0 \$0 \$0 \$0 \$0	Eligible Children (AFDC-C/BC) \$0 \$0 \$0	SB 11-008 Eligible Children  S0 S0 S0 S0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults \$0 \$0 \$0	Non-Citizens- Emergency Services  \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles \$0 \$0 \$0	TOTAL \$203,515,954 \$20,292,570 \$11,271,816 \$0
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0 \$0 \$380,823	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$0 \$57,904	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$12,225,164 \$11,271,816 \$60 \$224,997	Disabled Buy- In \$1,440,188 \$58,549 \$0 \$0 \$4,730	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL  \$0 \$0 \$0 \$0	MAGI Adults  \$1,363  \$0  \$0  \$0  \$0	Breast & Cervical Cancer Program  \$0 \$0 \$0 \$0 \$0 \$0	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  S0 S0 S0 S0 S0	\$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  S0 S0 S0 S0 S0 S0	Non-Citizens- Emergency Services  \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles \$0 \$0 \$0 \$0 \$0	TOTAL \$203,515,954 \$20,292,570 \$11,271,816 \$0 \$668,454
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services. Children's Hone-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Health BCBS - Heal	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0 \$0 \$380,823 \$3,620,029	Disabled Adults 60 to 64 (OAP-B)  \$17,629,254 \$2,553,240 \$0 \$0 \$57,904 \$365,176	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$12,225,164 \$11,271,816 \$0 \$224,997 \$5,739,664	Disabled Buy- In  \$1,440,188  \$558,549  \$0  \$0  \$4,730  \$0	MAGI Parents/ Caretakers to 68% FPL \$0 \$0 \$0 \$0 \$0	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL  S0 S0 S0 S0 S0 S0	MAGI Adults  \$1,363  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	Breast & Cervical Cancer Program  S0 S0 S0 S0 S0 S0 S0 S0	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0 \$0	\$B 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  S0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency Services  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles \$0 \$0 \$0 \$0 \$0	TOTAL \$203,515,954 \$20,292,570 \$11,271,816 \$0 \$668,454 \$9,724,869
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Brain Injury HCBS - Children with Autism	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0 \$0 \$380,823 \$3,620,029 \$0	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$0 \$57,904 \$365,176 \$6	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$12,225,164 \$11,271,816 \$0 \$224,997 \$5,739,664 \$316,174	Disabled Buy- In \$1,440,188 \$58,549 \$0 \$4,730 \$0	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Adults  \$1,363 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Breast & Cervical Cancer Program  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  S0 S0 S0 S0 S0 S0 S0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  S0 S0 S0 S0 S0 S0 S0	Non-Citizens- Emergency Services  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$0 \$668,454 \$9,724,869 \$316,174
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Brain Injury HCBS - Children with Aulism HCBS - Children with Life Limiting Illness	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$0	Disabled Adults 60 to 64 (OAP-B)  \$17,629,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$0	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$12,225,164 \$11,271,816 \$0 \$224,997 \$5,739,664 \$316,174 \$392,137	Disabled Buy- In  \$1,440,188 \$558,549 \$0 \$0 \$4,730 \$0 \$0 \$0	MAGI Parents/ Caretakers to 68% FPL 50 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL  S0	MAGI Adults  \$1,363 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Breast & Cervical Cancer Program  S0	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  S0	Non-Citizens- Emergency Services  S0 S0 S0 S0 S0 S0 S0 S0 S0	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$0 \$668,454 \$9,724,869 \$316,174
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Hone-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0 \$3,80,823 \$3,620,029 \$0 \$667,906	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$0 \$57,904 \$365,176 \$0 \$63,038	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$11,2275,164 \$11,271,816 \$0 \$224,997 \$5,739,664 \$316,174 \$392,137 \$2,134,968	Disabled Buy- In  \$1,440,188  \$58,549  \$0  \$0  \$4,730  \$0  \$0  \$3,889	F MAGI Parents/ Caretakers to 68% FPL \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  S0	MAGI Adults  \$1,363 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Breast & Cervical Cancer Program  S0	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	MAGI Pregnant Adults  50 50 50 50 50 50 50 50 50 50 50 50 50	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency Services  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles  50 50 50 50 50 50 50 50 50 50 50 50 50	\$203,515,954 \$20,292,570 \$11,271,816 \$0 \$668,454 \$9,724,869 \$316,174 \$392,137 \$2,869,801
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Brain Injury HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$0	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$0 \$63,038 \$20,668,612	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$12,225,164 \$11,271,816 \$0 \$224,997 \$5,739,664 \$316,174 \$392,137	Disabled Buy- In  \$1,440,188 \$558,549 \$0 \$0 \$4,730 \$0 \$0 \$0	### MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July - MAGI Parents/ Caretakers 69% to 133% FPL  S0	MAGI Adults  \$1,363 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Breast & Cervical Cancer Program  S0	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$B 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency Services \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$00 \$668,454 \$9,724,869 \$316,174 \$392,137 \$2,869,807 \$249,051,975
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Hone-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Caseload	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$667,906 \$126,067,930 44,54,946	Disabled Adults 60 to 64 (OAP-B)  \$17,629,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$0,3038 \$26,68,612 \$11,554	Disabled Individuals to 59 (AND)/AB)  \$68,501,594  \$12,225,164  \$11,271,816  \$0  \$224,997  \$5,739,664  \$316,174  \$392,137  \$21,34,968  \$10,806,514  67,033	Disabled Buy- In  \$1,440,188 \$58,549 \$0 \$0 \$4,730 \$0 \$50 \$50 \$3,889 \$1,507,356 \$7,681	F MAGI Parents/ Caretakers to 68% FPL \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  S0 S0 S0 S0 S0 S0 S0 S0 T7,643	MAGI Adults  \$1,363 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,363 \$1,363 363,133	Breast &   Cervical Cancer   Program   S0   S0   S0   S0   S0   S0   S0   S	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$11-008 Eligible Children \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	MAGI Pregnant Adults  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	\$B 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency Services   \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203.515.954 \$20.292,570 \$11.271,816 \$0.5668,454 \$9.724,89 \$316,174 \$392,137 \$2.869,801 \$249,051,775
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Brain Injury HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total	Adults 65 and Older (OAP-A) \$115,943,555 \$5,455,617 \$0 \$3380,823 \$3,620,029 \$0 \$67,06 \$126,607,930	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$0 \$63,038 \$20,668,612	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$11,271,816 \$11,271,816 \$224,997 \$5,739,664 \$316,144 \$316,144 \$32,134,968 \$108,806,514	Disabled Buy- In  \$1,440,188 \$558,549 \$0 \$4,730 \$0 \$0 \$50 \$53,889 \$1,507,356	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  S0 S0 S0 S0 S0 S0 S0 T0 S0	MAGI Adults  \$1,363  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	Total Actuals	Eligible Children (AFDC-C/BC) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$B 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency Services \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$00 \$668,454 \$9,724,869 \$316,174 \$392,137 \$2,869,801 \$249,051,925
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Sprian lipiny HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Sprianl Cord Injury Total Caseload Half - Year Per Capita	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$667,906 \$126,067,930 45,496 \$2,770,98  Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)  \$17,629,254 \$2,553,240 \$0 \$0 \$57,904 \$365,176 \$0 \$63,038 \$20,668,612 \$1,788.87	Disabled Individuals to 59 (AND)/AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$0 \$224,997 \$5,739,664 \$316,174 \$392,134,968 \$10,806,514 \$67,033 \$1,503.83 \$1,503.	Disabled Buy-In  \$1,440,188 \$58,549 \$0 \$0 \$4,730 \$0 \$0 \$3,889 \$1,507,368 \$196,26	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  S0	Foster Care	MAGI Pregnant Adults  50 50 50 50 50 50 50 50 50 50 50 50 50	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency Services  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203.515.954 \$20.292.570 \$11.271,816 \$0.5668,454 \$9.724.89 \$316,174 \$392,137 \$2,869,801 \$249,051,775 \$1,339,900 \$185.87
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Elderly, Blind, and Disabled HCBS - Elderly, Blind, and Disabled	Adults 65 and Older (OAP-A)  \$115,435,555   \$5,435,617   \$0   \$380,823   \$3,620,029   \$0   \$667,906   \$126,067,930   \$2,770,98    Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$63,038 \$20,668,612 \$1,554 \$1,788.87  Disabled Adults 60 to 46 (OAP-B) \$17,141,065	Disabled Individuals to 59 (AND/AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$224,997 \$5,739,664 \$316,174 \$339,137 \$2,134,968 \$100,806,514 \$7,033 \$1,503.83  Disabled Individuals to 59 (AND/AB)	Disabled Buy- In  \$1,440,188 \$558,549 \$0 \$4,730 \$0 \$0 \$50 \$1,507,356 \$7,681 \$196,26	MAGI Parents/ Caretakers to 68% FPL  S0 MAGI Parents/ Caretakers to 68% FPL	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  S0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Solution   Solution	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency Services  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$688,454 \$9,724,869 \$316,174 \$392,137 \$2,869,810 \$135,91775 \$1,339,900 \$185,87
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Brain Injury HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Half-Year Per Capita HCBS - WAIVERS HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$0 \$67,030 45,496 \$126,067,930 45,496 \$2,770,98	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$57,904 \$3365,176 \$0 \$63,038 \$20,668,612 11,554 \$1,788,87  Disabled Adults 60 to 64 (OAP-B) \$17,141,065 \$2,718,150	Disabled Individuals to 59 (AND/AB) \$68,501,594 \$12,225,164 \$11,271,816 \$11,271,816 \$224,997 \$5,739,664 \$316,174 \$392,137 \$2,134,968 \$100,806,514 67,033 \$1,503,83 Disabled Individuals to 59 (AND/AB) \$69,487,751 \$13,250,125	Disabled Buy- In  \$1,440,188 \$58,549 \$0 \$4,730 \$0 \$0 \$1,507,356 7,681 \$196,26  Disabled Buy- In  \$1,489,160 \$64,161	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Carctakers 69% to 133% FPL  S0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens-   Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$0.0 \$0.0 \$668,454 \$9,724,869 \$316,174 \$332,137 \$2,869,801 \$139,900 \$185,87  **TOTAL** \$214,990,572 \$21,042,212
HCBS WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Children with Lord Injury Total Caseload Half - Year Per Capita  HCBS - Selective Health Services HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver	Adults 65 and Older (OAP-A)  \$115,943,555   \$5,455,617   \$0   \$380,823   \$3,620,029   \$0   \$667,906   \$126,067,930   \$2,770.98    Adults 65 and Older (OAP-A)  \$126,872,589   \$5,009,776	Disabled Adults 60 to 64 (OAP-B)  \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$63,038 \$20,668,615 \$1,788.87  Disabled Adults 60 to 64 (OAP-B) \$17,141,065 \$2,718,150	Disabled Individuals to 59 (AND/AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$224,997 \$5,739,644 \$316,174 \$392,137 \$2,134,968 \$10,806,514 67,033 \$1,503,83  Disabled Individuals to 59 (AND/AB)  \$69,487,751 \$13,250,125 \$14,088,3079	Disabled Buy- In  \$1,440,188 \$588,549 \$0 \$4,730 \$0 \$0 \$3,889 \$1,507,356 \$1,507,356 \$1,616 \$1,489,160 \$64,161 \$564,161	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Solution   Solution	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$11,271,816 \$9,724,849 \$316,174 \$392,137 \$2,869,801 \$14,039,1775 \$185,87 \$10,042,051,775 \$185,87
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Persons Living with AIDS HCBS - Children with Life Limiting Illness HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Half - Year Per Capita  HCBS - WAIVERS  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$0 \$667,000 \$126,067,930 45,496 \$2,770,98  Adults 65 and Older (OAP-A) \$126,872,589 \$5,097,76 \$0 \$0	Disabled Adults 60 to 64 (OAP-B) \$17,29,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$0 \$520,668,612 \$11,554 \$1,788.87  Disabled Adults 60 to 64 (OAP-B) \$27,1141,065 \$2,718,150 \$0 \$0	Disabled Individuals to 59 (AND/AB) 5(8,8,51,594 512,225,164 511,271,816 512,245,997 55,739,664 5316,174 5392,137 52,134,966 5100,806,514 67,033 51,503.83   Disabled Individuals to 59 (AND/AB) 569,487,751 513,250,125 514,083,079 50	Disabled Buy- In  \$1,440,188 \$558,549 \$0 \$4,730 \$0 \$0 \$0,50 \$1,507,356 7,681 \$196,26  Disabled Buy- In  \$1,489,160 \$64,161 \$0 \$0	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Adults  \$1,363 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,363 \$31,363 \$30,30 \$1,363 \$4,303 \$4,303 \$1,363 \$5,000 \$1,363 \$1	Total Actuals	Eligible Children (AFDC-C/BC)  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$0.0 \$668,454 \$9,724,869 \$316,174 \$392,137 \$2,869,801 \$249,051,775 1,339,900 \$185,87  TOTAL \$214,990,572 \$21,042,212 \$14,083,079
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Hone-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support HCBS - Spinal Cord Injury HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Half - Year Per Capita  HCBS - HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services. Children's Hone-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$667,906 \$126,067,930 \$45,496 \$2,770,98  Adults 65 and Older (OAP-A) \$126,872,589 \$5,009,776 \$0 \$0 \$0 \$25,0792	Disabled Adults 60 to 64 (OAP-B)  \$17,629,254 \$2,553,240 \$0 \$0 \$57,904 \$365,176 \$0 \$63,038 \$20,668,612 \$1,788,87  Disabled Adults 60 to 64 (OAP-B) \$51,141,065 \$2,718,150 \$0 \$52,32,541	Disabled   Individuals to 59 (AND)/AB   \$68,501,594   \$12,225,164   \$11,271,816   \$68,501,594   \$12,225,164   \$11,271,816   \$90   \$224,997   \$5,739,664   \$316,174   \$392,137   \$21,345,968   \$10,806,514   \$67,033   \$1,503,83   \$1,503	Disabled Buy- In  \$1,440,188 \$58,549 \$0 \$4,730 \$0 \$3,889 \$1,507,356 7,566 Disabled Buy- In  \$1,489,160 \$64,161 \$60 \$50 \$50	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents' Caretakers 69% to 133% FPL  S0	MAGI Adults	Breast &   Cervical Cancer   Program   S0   S0   S0   S0   S0   S0   S0   S	Eligible Children (AFDC-C/BC)  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203.515.954 \$20,292.570 \$11,271,816 \$1,271,
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Life Limiting Illness HCBS - Children's Home-and Community-Based Waiver HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support	Adults 65 and Older (OAP-A) \$115,435.55 \$55,435.617 \$0 \$380,823 \$3,620,029 \$5,667,906 \$126,067,930 \$2,770.98  Adults 65 and Older (OAP-A) \$126,872,589 \$5,009,776 \$250,792 \$1,759,536	Disabled Adults 60 to 64 (OAP-B) \$17,429,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$63,038 \$20,668,612 \$17,88.87  Disabled Adults 60 to 46 (OAP-B) \$17,141,065 \$2,718,150 \$0 \$0 \$32,241 \$1,903,349	Disabled Individuals to 59 (AND/AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$224,997 \$5,739,664 \$316,174 \$339,137 \$2,134,968 \$100,806,514 \$7,033 \$1,503.83  Disabled Individuals to 59 (AND/AB) \$69,487,751 \$13,250,125 \$14,083,079 \$1,083	Disabled Buy- In  S1,440,188  S58,549  S0  S4,730  S0  S0  S1,889  S1,507,356  T,681  S196,26  Disabled Buy- In  S1,489,160  S64,161  S64,161  S0  S0  S2,890  S2,890  S52,890	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  S0 FP 2019-20 Janu MAGI Parents/ Caretakers 69% to 133% FPL  S0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$668,454 \$9,724,869 \$316,174 \$392,137 \$2,869,801 \$249,051,775 \$1,339,900 \$185,87 \$70TAL
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services. Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Spinal Cord Injury HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Half - Year Per Capita  HCBS - Bernal Home HCBS - Bernal HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$667,906 \$126,067,930 45,496 \$2,770,98  Adults 65 and Older (OAP-A) \$126,872,889 \$5,009,776 \$0 \$0 \$250,792 \$1,759,536	Disabled Adults 60 to 64 (OAP-B)  \$17,629,254 \$2,553,240 \$0 \$0 \$557,904 \$365,176 \$0 \$63,038 \$20,668,612 \$1,788,87  Disabled Adults 60 to 64 (OAP-B) \$57,141,065 \$2,718,150 \$0 \$332,541 \$1,193,349	Disabled Individuals to 59 (AND)AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$0 \$224,997 \$5,739,664 \$316,174 \$392,137 \$52,134,968 \$10,806,514 \$10,806,514 \$11,503,83 \$1,50	Disabled Buy- In  \$1,440,188 \$58,549 \$0 \$0,54,730 \$0,90 \$3,889 \$1,507,586 \$196,26  Disabled Buy- In  \$0,90 \$4,89,160 \$54,461 \$0,90 \$2,890 \$54,749 \$54,749	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ S0	MAGI Adults	Breast &   Cervical Cancer   Program   S0   S0   S0   S0   S0   S0   S0   S	Eligible Children (AFDC-C/BC)  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  S0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  50 50 50 50 50 50 50 50 50 50 50 50 50	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203.515.954 \$20,292.570 \$11,271.816 \$0 \$668,454 \$9,724.89 \$316,174 \$39,173 \$2,869,801 \$14,990,5175 \$1,339,900 \$185.87 \$10,042.212 \$11,042.212 \$14,083,079 \$420,165 \$12,430,571 \$243,571
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Life Limiting Illness HCBS - Children's Home-and Community-Based Waiver HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support	Adults 65 and Older (OAP-A) \$115,435.55 \$55,435.617 \$0 \$380,823 \$3,620,029 \$5,667,906 \$126,067,930 \$2,770.98  Adults 65 and Older (OAP-A) \$126,872,589 \$5,009,776 \$250,792 \$1,759,536	Disabled Adults 60 to 64 (OAP-B) \$17,429,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$63,038 \$20,668,612 \$17,88.87  Disabled Adults 60 to 46 (OAP-B) \$17,141,065 \$2,718,150 \$0 \$0 \$32,241 \$1,903,349	Disabled Individuals to 59 (AND/AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$224,997 \$5,739,664 \$316,174 \$339,137 \$2,134,968 \$100,806,514 \$7,033 \$1,503.83  Disabled Individuals to 59 (AND/AB) \$69,487,751 \$13,250,125 \$14,083,079 \$1,083	Disabled Buy- In  S1,440,188  S58,549  S0  S4,730  S0  S0  S1,889  S1,507,356  T,681  S196,26  Disabled Buy- In  S1,489,160  S64,161  S64,161  S0  S0  S2,890  S2,890  S52,890	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  S0 FPL S0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	SB 11-008 Eligible Children  S0	Foster Care	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$668,454 \$9,724,869 \$316,174 \$392,137 \$2,869,801 \$249,051,775 \$1,339,900 \$185,87 \$70TAL
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Life Limiting Illness HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Half - Year Per Capita  HCBS - Berant Living with AIDS HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Community Mental Support HCBS - Persons Living with AIDS HCBS - Community Detail Support HCBS - Brain Injury HCBS - Children with Autism HCBS - Children with Altism HCBS - Children with Life Limiting Illness	Adults 65 and Older (OAP-A)  \$115,943,555   \$5,455,617   \$0   \$380,823   \$0   \$0   \$667,906   \$126,067,930   \$2,770.98    Adults 65 and Older (OAP-A)  \$126,872,589   \$5,009,776   \$5,009,776   \$5,009,776   \$6,009   \$1,759,536   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$	Disabled Adults 60 to 64 (OAP-B) \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$60 \$63,038 \$20,668,612 \$1,788.87  Disabled Adults 60 to 64 (OAP-B) \$17,141,065 \$2,718,150 \$0 \$30 \$30 \$30,364 \$30,378 \$30,578 \$30,388 \$30,688,612 \$30,788,87	Disabled Individuals to 59 (AND/AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$11,271,816 \$11,271,816 \$11,271,816 \$11,271,816 \$11,271,816 \$10,806,514 \$10,806,514 \$10,806,514 \$10,806,514 \$10,806,514 \$10,806,514 \$10,806,514 \$13,250,125 \$14,083,135 \$14,083,135	Disabled Buy- In  \$1,440,188 \$588,549 \$0 \$4,730 \$0 \$0 \$5,389 \$1,507,356 \$196,26  Disabled Buy- In  \$1,489,160 \$64,161 \$64,161 \$2,890 \$54,749 \$0 \$50 \$50	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  S0 FPL S0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens- Emergency   Services   S0   S0   S0   S0   S0   S0   S0   S	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$0 \$668,454 \$9,722,869,801 \$249,051,775 \$1,339,00 \$185,87 \$10,00 \$11,00 \$140,00 \$140,00 \$140,00 \$140,00 \$140,00 \$124,00 \$
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Life Limiting Illness HCBS - Children with Life Limiting Illness HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Half-Year Per Capita  HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Fersons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support HCBS - Children with Life Limiting Illness HCBS - Children with Lutism HCBS - Children with Lutism	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0 \$0 \$126,067,930 45,496 \$2,770,98  Adults 65 and Older (OAP-A) \$126,872,589 \$5,099,776 \$0 \$250,792 \$1,759,536 \$0 \$0 \$5250,792	Disabled Adults 60 to 64 (NAP-B) 52,553,240 \$0 \$52,553,240 \$0 \$557,904 \$365,176 \$0 \$63,038 \$20,668,612 \$11,554 \$1,788.87  Disabled Adults 60 to 64 (OAP-B) \$17,141,065 \$2,718,150 \$0 \$0 \$32,541 \$1,093,49 \$0 \$40,820 \$21,025,925 \$12,041	Disabled Individuals to 59 (AND/AB)  \$68,501,594 \$12,225,164 \$11,271,816 \$12,225,164 \$316,174 \$316,174 \$330,137 \$21,34,968 \$100,806,514 67,033 \$11,503.83  Disabled Individuals to 59 (AND/AB) \$69,487,751 \$13,250,125 \$14,083,079 \$133,942 \$9,522,937 \$243,351 \$348,635 \$1,963,700 \$19,053,520 \$68,028	Disabled Buy- In  \$1,440,188 \$558,549 \$0 \$4,730 \$0 \$0 \$0,50 \$1,507,356 7,681 \$196,26  Disabled Buy- In  \$1,489,160 \$64,161 \$0 \$2,890 \$554,749 \$0 \$0 \$2,251,516	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Adults	Total Actuals	Eligible Children (AFDC-C/BC)  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens-   Emergency	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203,515,954 \$20,292,570 \$11,271,816 \$90 \$668,454 \$9,724,869 \$316,174 \$392,137 \$2,869,801 \$135,87 \$135,87 \$214,990,572 \$21,042,212 \$14,083,079 \$12,436,571 \$249,051,775 \$21,042,212 \$14,083,079 \$12,430,571 \$12,43
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support HCBS - Children with Life Limiting Illness HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury Total Caseload Half - Year Per Capita  HCBS - Biderly, Blind, and Disabled HCBS - Community Mental Health Services Children's Home-and Community-Based Waiver HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support HCBS - Consumer Directed Attendant Support HCBS - Spinal Cord Injury Services - Children with Autism HCBS - Children with Life Limiting Illness HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury	Adults 65 and Older (OAP-A)  \$115,943,555 \$5,455,617 \$0 \$380,823 \$3,620,029 \$0,5667,906 \$126,067,930 45,496 \$2,770,98  Adults 65 and Older (OAP-A) \$126,872,589 \$5,009,776 \$250,097,765 \$0 \$250,097,765 \$126,872,589 \$5,009,776 \$250,097,765 \$126,872,589 \$5,009,776 \$250,097,765 \$126,872,589 \$1,759,536 \$0 \$0 \$1,759,536 \$0 \$1,759,536 \$1,344,252,588 \$1,344,252,588	Disabled Adults 60 to 64 (OAP-B) \$17,629,254 \$2,553,240 \$0 \$57,904 \$365,176 \$0 \$63,038 \$20,668,612 \$1,788.87  Disabled Adults 60 to 64 (OAP-B) \$17,141,065 \$2,718,150 \$32,541 \$1,093,349 \$0 \$0 \$40,820 \$21,055,925	Disabled   Individuals to 59 (AND/AB)	Disabled Buy- In  \$1,440,188 \$58,549 \$0 \$4,730 \$0 \$0 \$3,889 \$1,507,356 7,356 \$196,26  Disabled Buy- In  \$1,489,160 \$64,161 \$2,80 \$2,80 \$5,4749 \$0 \$0 \$1,802,476 \$1,802,476	MAGI Parents/ Caretakers to 68% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Y 2019-20 July- MAGI Parents/ Caretakers 69% to 133% FPL  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Adults	Breast &   Cervical Cancer	Eligible Children (AFDC-C/BC)  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	SB 11-008 Eligible Children  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Foster Care  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	MAGI Pregnant Adults  50 50 50 50 50 50 50 50 50 50 50 50 50	SB 11-250 Eligible Pregnant Adults  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Non-Citizens-   Emergency	Partial Dual Eligibles  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$203.515.954 \$20.292.570 \$11.271.816 \$9.724.899 \$316.174 \$9.724.899 \$316.174 \$392.137 \$2.869.801 \$249.051.775 \$1.339.900 \$185.87 \$14.083.975 \$214.990.572 \$21.042.212 \$14.083.051 \$14.083.051 \$14.083.051 \$12.430.571 \$243.351 \$243.351 \$243.351 \$243.851 \$243.851 \$243.852 \$27.88.624

Column   C							Private Duty !	Nursing Total Expendit	ure by Fiscal Year								
Property (S. Marce) (S	PRIVATE DUTY NURSING		64	to 59	Disabled Buy-In	Caretakers to 68%	Caretakers 69% to	MAGI Adults				Foster Care				Partial Dual Eligibles	TOTAL
Property   1985   1986   198					\$0												\$31,144,15
Property	FY 2012-13																\$36,846,9
Part																	
Property   15   15   15   15   15   15   15   1							\$0										\$61,498,9
PRIVATE RETYNENG    \$150,000   \$10																	\$87,079.4
PRIVATE DETYNISHS   \$1,000																	\$90,576,
																	\$95,953,
PRIVATE RETYNESING   Maile 65 and Gard   Control   Con																	\$102,263,3
Principle   1,000																	\$102,957,
## PRIVATE PATT NURSHAN:    Math 5 and 7 cm   Math 5 and 7 cm   Math 5 and 7 cm   Math 5 cm   Math 6 c																	
## PRIVATE RET Y NESSNG    Private	Estimated FY 2022-23	\$5,180,215	\$779,703	\$73,762,005	\$363,149	(\$21,362)					\$181,575	\$23,615,377	\$0	\$0	\$0	\$0	\$106,808,
Property	PRIVATE DUTY NURSING		64	to 59	Disabled Buy-In	Caretakers to 68%	MAGI Parents/ Caretakers 69% to		Breast & Cervical	Eligible Children		Foster Care				Partial Dual Eligibles	TOTAL
Property   19   19   19   19   19   19   19   1	FY 2012-13																18.
PRIVATE DET NESSING																	44.2
PRIVATE DITY NURSING																	15.7
Fig.																	18.0 19.9
Principle   4,300   5,200   5,000   4,700   4,700   4,700   5,200   4,700   5,200   4,700   5,200   4,700   5,200   4,700   5,200   4,700   5,200   4,700   5,200   4,700   5,200   4,700   5,200   4,700   4,700   5,200   4,700																	4.0
PRIVATE DUTY NURSING																	5.9
Estimate   P 2002   0 , 0 , 0 , 0 , 0 , 0 , 0 , 0 , 0 , 0																	6.5
PRIVATE DLTY NURSING   1876																	0.6
PRIVATE DUTY NURSING    Adabs \$6 and Older   O	Estimated FY 2021-22	1.86%	1.86%	1.86%	1.86%	1.86%	1.86%	1.86%	0.00%	1.86%	1.86%	1.86%	0.00%	0.00%	0.00%	0.00%	1.8
PRIVATE DUTY NURSING   Adults   Stand Older   OAP-A    Contact   OAP-A    Contact   OAP-A    Contact   C	Estimated FY 2022-23	1.85%	1.85%	1.85%	1.85%	1.85%	1.85%	1.85%	0.00%	1.85%	1.85%	1.85%	0.00%	0.00%	0.00%	0.00%	1.85
FY 2012-13	PRIVATE DUTY NURSING		64	to 59	Disabled Buy-In	Caretakers to 68%	Caretakers 69% to	MAGI Adults				Foster Care				Partial Dual Eligibles	TOTAL
FY 2013-14   \$72.66   \$74.77   \$548.64   \$10.08   \$50.00   \$50.00   \$50.00   \$50.00   \$50.00   \$50.00   \$51.00   \$5   FY 2015-16   \$55.04   \$57.18   \$571.94   \$595.19   \$82.83   \$50.00   \$50.0	FY 2011-12	\$46.12													and game, and and		
FY 2014-1 S 504 6 \$42.17 \$595.19 \$52.28 \$50.00 \$50.															\$0.00		\$50.
FY 2015-16 562-41 S77.18 5719-40 S89-90 S0.00 S0		\$57.91	\$61.55	\$393.12	\$20.81	\$0.00	\$0.00	\$0.00	\$0.00	\$2.97	\$0.70	\$477.59	\$0.00	\$0.00	\$0.00 \$0.00	\$0.00	\$53
FY 2016-17 \$737.81 \$33.82 \$58.85 \$58.29 \$50.00 \$50.	FY 2013-14	\$57.91 \$72.66	\$61.55 \$74.57	\$393.12 \$548.64	\$20.81 \$109.68	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.50	\$0.00 \$0.00	\$2.97 \$8.45	\$0.70 \$0.02	\$477.59 \$564.43	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$1.10	\$53 \$61
FY 2017-18   \$117.48   \$310.35   \$891.44   \$153.89   \$50.7   \$50.0   \$50.0   \$51.22   \$35.25   \$897.88   \$50.00	FY 2013-14 FY 2014-15	\$57.91 \$72.66 \$50.46	\$61.55 \$74.57 \$42.17	\$393.12 \$548.64 \$595.19	\$20.81 \$109.68 \$82.83	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.50 \$0.17	\$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64	\$0.70 \$0.02 \$0.54	\$477.59 \$564.43 \$576.64	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00	\$53 \$61 \$52
FY 2018-19	FY 2013-14 FY 2014-15 FY 2015-16	\$57.91 \$72.66 \$50.46 \$62.41	\$61.55 \$74.57 \$42.17 \$57.18	\$393.12 \$548.64 \$595.19 \$719.04	\$20.81 \$109.68 \$82.83 \$89.99	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.50 \$0.17 \$0.13	\$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33	\$0.70 \$0.02 \$0.54 \$3.24	\$477.59 \$564.43 \$576.64 \$575.39	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00	\$53 \$61 \$52 \$55
FY 2019-20   S104-29   S573-48   S1.061-53   S32.22   S10.19   S32.22   S10.19   S32.22   S10.19   S32.22   S10.19   S32.22   S10.19   S32.22   S10.19   S32.23   S10.23   S35.94   S1.077-09   S24.01   S10.23   S35.94   S1.077-09   S24.01   S10.23   S35.94   S1.077-09   S24.01   S10.23   S35.94   S1.077-09   S24.01   S10.23   S10.22   S10.24   S10.24   S55.01   S1.02-02   S25.95   S1.010   S1.03   S1.03   S1.03   S1.03   S1.02   S10.03   S1.02-02   S10.02-02   S10.02-0	FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59	\$477.59 \$564.43 \$576.64 \$575.39 \$459.96	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00	\$53 \$61 \$52 \$55 \$64
Estimated FY 2021-22   \$104.74   \$56.01   \$1.042.62   \$25.95   \$(50.10)   \$(50.13)   \$(50.13)   \$(50.13)   \$50.00   \$56.02   \$2.20   \$1.098.89   \$50.00	FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56 \$891.14	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.17	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.30	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.22	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52	\$477.59 \$564.43 \$576.64 \$575.39 \$459.96 \$697.68	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$53 \$61 \$52 \$55 \$64 \$68 \$76
Estimated PY 2022-29   \$103.25   \$55.13   \$51.05   \$52.35   \$51.05   \$52.35   \$50.09   \$50.00   \$50.	FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$112.16	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35 \$35.64	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56 \$891.14 \$961.41	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.10 \$0.07	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.03 \$0.03 \$0.03	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$0.27	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.22 \$10.49	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52 \$0.06 \$3.12	\$477.59 \$564.43 \$576.64 \$575.39 \$459.96 \$697.68 \$870.25	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$53 \$61 \$52 \$55 \$64 \$68 \$76 \$83
Private Duty Nursing   Private Duty Nursing Nursing   Private Duty Nursing Nursing Nursing Nursing Nursing Nursing Nursing Nursing Nurs	FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-19	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$112.16 \$104.29 \$103.38	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35 \$35.64 \$57.34	\$393.12 \$548.64 \$559.19 \$719.04 \$568.56 \$891.14 \$961.41 \$1,061.53 \$1,077.90	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$24.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.17 \$0.07 \$0.10 \$0.10	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.30 \$0.30 \$0.03 \$0.03	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$(\$0.17) \$(\$0.13)	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.22 \$10.49 \$7.07 \$6.63	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52 \$0.06 \$3.12 \$2.66	\$477.59 \$356.43 \$576.64 \$375.39 \$459.96 \$697.68 \$870.25 \$1,060.37 \$1,089.86	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$53 \$61 \$52 \$55 \$64 \$68 \$76 \$83 \$75
PRIVATE DUTY NURSING  Adults 65 and Older  (OAP-A)  (OAP-B)  (OAP-	PY 2013-14 PY 2014-15 PY 2014-15 PY 2015-16 PY 2016-17 PY 2017-18 PY 2017-18 PY 2017-19 FY 2017-01 Estimated PY 2020-21 Estimated PY 2020-21	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$112.16 \$104.29 \$103.38 \$104.74	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35 \$35.64 \$57.34 \$55.94	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56 \$891.14 \$1,061.53 \$1,077.90 \$1,042.62	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$24.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.17 \$0.07 \$0.10 \$0.12 \$0.12	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.30 \$0.33 \$0.03 \$0.10 \$0.13)	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$0.17 \$0.13 \$0.03	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.22 \$10.49 \$7.07 \$6.63 \$6.92	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52 \$0.06 \$3.12 \$2.66	\$477.59 \$364.43 \$576.64 \$575.39 \$459.96 \$697.68 \$870.25 \$1.060.57 \$1,089.86 \$1,098.89	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$50. \$53. \$61. \$52. \$55. \$64. \$68. \$76. \$83. \$75.
## Adults 5s and Older (OAP-s)	PY 2013-14 PY 2014-15 PY 2014-15 PY 2015-16 PY 2016-17 PY 2017-18 PY 2017-18 PY 2017-19 FY 2017-01 Estimated PY 2020-21 Estimated PY 2020-21	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$112.16 \$104.29 \$103.38 \$104.74	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35 \$35.64 \$57.34 \$55.94	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56 \$891.14 \$1,061.53 \$1,077.90 \$1,042.62	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$24.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.17 \$0.07 \$0.10 \$0.12 \$0.12	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.30 \$0.03 \$0.10 \$0.13 \$0.13	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$0.17) \$0.13) \$0.13)	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.25 \$10.49 \$7.07 \$6.63 \$6.92 \$6.62	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52 \$0.06 \$3.12 \$2.66	\$477.59 \$364.43 \$576.64 \$575.39 \$459.96 \$697.68 \$870.25 \$1.060.57 \$1,089.86 \$1,098.89	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$53. \$61. \$52. \$55. \$64. \$68. \$76. \$83.
PY 2012-13 25.56% 281.82% 12.76% 100.00% 0.00% 0.00% 0.00% 0.00% 165.00% 100.00% 0.0	PY 2013-14 PY 2014-15 PY 2014-15 PY 2015-16 PY 2016-17 PY 2017-18 PY 2017-18 PY 2017-19 FY 2017-01 Estimated PY 2020-21 Estimated PY 2020-21	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$112.16 \$104.29 \$103.38 \$104.74	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35 \$35.64 \$57.34 \$55.94	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56 \$891.14 \$1,061.53 \$1,077.90 \$1,042.62	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$24.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.17 \$0.07 \$0.10 \$0.12 \$0.12	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.30 \$0.03 \$0.10 \$0.13 \$0.13	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$0.17) \$0.13) \$0.13)	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.25 \$10.49 \$7.07 \$6.63 \$6.92 \$6.62	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52 \$0.06 \$3.12 \$2.66	\$477.59 \$364.43 \$576.64 \$575.39 \$459.96 \$697.68 \$870.25 \$1.060.57 \$1,089.86 \$1,098.89	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$53 \$61 \$52 \$55 \$64 \$68 \$76 \$83 \$75 \$75
FY 2013-14 25.47% 21.15% 39.56% 427.05% 0.00% 0.00% 100.00% 100.00% 184.51% 97.14% 18.18% 0.00% 0.00% 0.00% 100.00% 1- FY 2014-15 30.55% 43.45% 35.59% 20.81% 8.64% 0.00% 0.00% 0.00% 0.00% 1.25.5% 0.00% 1.18.6% 50.00% 0.22% 0.00% 0.00% 0.00% 0.00% 0.00% 1.00.00% 1- FY 2015-10 23.68% 35.59% 20.81% 8.64% 0.00% 0.00% 0.00% 0.00% 1.18.6% 50.00% 0.22% 0.00% 0.00% 0.00% 0.00% 0.00% 1.00.00% 1.18.6% 1.18.6% 1.1.0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 1.18.6% 1.1.0.0.0% 0.00%	FY 2013-14 FY 2014-15 FY 2014-15 FY 2016-17 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2018-19 Estimated FY 2018-25 Estimated FY 2018-25	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$104.29 \$103.38 \$104.74 \$103.25	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35 \$35.64 \$57.34 \$55.94 \$56.01 \$55.13	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56 \$891.14 \$1,061.53 \$1,077.90 \$1,042.62 \$1,036.61	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$133.89 \$73.44 \$32.22 \$24.01 \$25.95 \$23.73	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.10 \$0.10 \$0.10 \$0.12 \$0.10 \$0.12 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.30 \$0.30 \$0.30 \$0.10) \$0.13) Private Duty Neursis/ Caretakers 69% to	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$0.17) \$0.13) \$(\$0.13) \$(\$0.13) \$(\$0.12) Per Capita Cost Perce	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Boreast & Cervical	\$2.97 \$8.45 \$16.64 \$16.33 \$112.35 \$18.22 \$10.49 \$7.07 \$6.63 \$6.92 \$6.62	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52 \$0.06 \$3.12 \$2.66 \$2.70 \$2.46	\$477.59 \$564.43 \$576.64 \$575.39 \$459.96 \$697.68 \$870.25 \$1,060.57 \$1,089.86 \$1,098.89 \$1,099.84	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 MAGI Pregnant	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$53 \$61 \$22 \$55 \$64 \$68 \$76 \$33 \$75 \$74
FY 2014-15 - 30.5% - 43.45% - 84.8% - 24.48% - 0.00% - 0.00% - 66.00% - 0.00% - 0.00% - 96.2% - 260.00% - 2.16% - 0.00% - 0.00% - 0.00% - 0.00% - 100.00% - 100.00% - 100.00% - 100.00% - 100.00% - 1.86% - 90.00% - 0.22% - 0.00% - 0	FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-19 FY 2017-19 FY 2017-19 FY 2018-19 FY 2019-19 FStimated FY 2021-22 Estimated FY 2022-23  PRIVATE DUTY NURSING	\$37.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$1104.29 \$103.38 \$104.74 \$103.25	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.55 \$35.64 \$57.34 \$55.94 \$55.91 \$55.13	\$393.12 \$548.64 \$595.19 \$719.04 \$568.56 \$891.14 \$961.41 \$1,061.53 \$1,077.90 \$1,042.62 \$1,036.61	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$24.01 \$25.95 \$23.73	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.17 \$0.07 \$0.12 \$0.12 \$0.19 \$0.19 \$0.00 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.03	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.00 \$0.37 \$0.27 \$0.13) \$0.00 \$0.37 \$0.27 \$0.13) \$0.13) \$0.13) \$0.13) \$0.13)	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Booling by Fiscal Ye  Breast & Cervical Cancer Program	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.22 \$10.49 \$7.07 \$6.63 \$6.92 \$6.62 ar	\$0.70 \$0.02 \$0.54 \$3.24 \$2.59 \$3.52 \$0.06 \$3.12 \$2.66 \$2.70 \$2.46	\$477.59 \$564.43 \$576.64 \$575.39 \$459.96 \$607.68 \$870.25 \$1.069.37 \$1,089.86 \$1,099.84	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$7.00 \$7.00 \$7.00 \$7.00 \$7.00 \$7.00 \$7.00 \$7.00	\$33 \$61 \$32 \$35 \$64 \$68 \$76 \$83 \$75 \$74 \$69
FY 2015-16 23.68% 33.59% 20.81% 8.64% 0.00% 0.00% -23.53% 0.00% 1-1.86% 500.00% -0.22% 0.00% 0.00% 0.00% 0.00% 0.00% 1.00 FY 2015-17 1082.23% 48.85% 2-0.93% 4.33% 0.00% 0.00% 100.00% 0.00% 1.00 0.00% 2.437% 2.00 6% 2.00 6% 0.00% 0.00% 0.00% 0.00% 0.00% 1.00 0.00% 1.00 0.00% 1.00 0.00% 1.00 0.00% 1.00 0.00% 0.00	FY 2013-15 FY 2014-15 FY 2014-15 FY 2014-16 FY 2016-17 FY 2017-18 FY 2017-19 FY 2017-20 Feitimeted FY 2020-21 Feitimeted FY 2020-22 Feitimeted FY 2020-22 Friender FY 2020-22 Friender FY 2020-22 Friender FY 2020-22 Friender FY 2020-23 FRIENDER FY 2020-23 FRIENDER FY 2020-23	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$112.16 \$104.29 \$103.28 \$104.74 \$103.25 \$404.74 \$103.25	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$30.35 \$35.64 \$57.34 \$55.93 \$55.13 \$55.13 \$55.13	\$393.12 \$548.64 \$595.19 \$719.04 \$568.36 \$891.14 \$1,061.53 \$1,079.00 \$1,042.62 \$1,036.61 Disabled Individuals to 59 (AND/AB)	\$20.81 \$199.68 \$82.83 \$89.99 \$84.29 \$153.89 \$32.22 \$24.01 \$25.95 \$23.73 Disabled Buy-In	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.17 \$0.07 \$(\$0.10) \$(\$0.12) \$(\$0.20) \$0.00 \$MAGI Parents' Caretakers to 68% FPL	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.30 \$0.30 \$0.30 \$0.10) \$0.13 \$0.13 \$0.13 Private Day Nursing MAGI Parents/ Caretakers 69% to 133% FPL	\$0.00 \$0.50 \$0.17 \$0.13 \$0.03 \$0.37 \$0.27 \$0.27 \$0.17) \$0.13 \$0.017) \$0.17) \$0.13) \$0.17) \$0.13) \$0.19 Per Capita Cost Perce  MAGI Adults	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.22 \$10.49 \$7.07 \$6.63 \$6.92 \$6.62 ar Eligible Children (AFDC-C/BC)	\$0.70 \$0.02 \$0.54 \$1.32 \$2.59 \$3.32 \$0.06 \$1.12 \$2.06 \$2.26 \$2.46	\$417.59 \$544.3 \$576.64 \$573.39 \$459.96 \$607.68 \$870.25 \$1,060.57 \$1,090.57 \$1,090.89 \$1,090.89 \$1,090.89	\$0,00 \$0,00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$1.10 \$0.00	\$33 \$61 \$32 \$35 \$44 \$68 \$76 \$83 \$75 \$74 \$69
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-19 FY 2017-19 FY 2017-19 FY 2018-19 FY 2018-19 FY 2018-19 FINANCE FY 2018-19 FINANCE FY 2018-19 FRIVATE DUTY NURSING  FY 2013-14 FY 2013-14	\$57.91 \$72.6 \$50.46 \$50.46 \$62.41 \$773.83 \$117.45 \$112.16 \$104.29 \$103.38 \$104.74 \$104.74 \$104.74 \$104.74 \$105.25	\$61.55 \$74.57 \$42.17 \$57.18 \$33.38 \$33.35 \$33.564 \$57.34 \$55.94 \$56.01 \$55.10  Disabled Adults 60 to 64 (OAP-B)  281.82% 21.15%	\$393.12 \$348.64 \$395.19 \$79.04 \$588.56 \$588.56 \$10.61.33 \$1,007.90 \$1,042.62 \$1,036.61 Disabled Individuals to 59 (AND/AB)	\$20.81 \$109.68 \$82.83 \$82.83 \$84.29 \$153.89 \$73.44 \$52.22 \$24.01 \$25.95 \$23.73 <b>Disabled Buy-In</b>	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.50 \$0.17 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$0.17) \$0.13 \$0.07 \$0.17) \$0.13) \$0.170 \$0.13) \$0.170 \$0.100 \$0.170 \$0.10	\$0.00 \$0.00	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$10.49 \$7.07 \$6.63 \$6.92 \$6.62 ar Eligible Children (AFDC-C/BC) \$5.00%	\$0.70 \$0.02 \$0.02 \$0.54 \$3.24 \$3.25 \$3.06 \$3.12 \$2.20 \$2.20 \$2.46 \$3.12 \$2.20 \$2.46	\$417.59 \$544.3 \$576.64 \$575.30 \$459.96 \$459.96 \$459.96 \$570.25 \$1,069.37 \$1,089.89 \$1,099.84	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$1.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Partial Dual Eligibles 0.00%	\$33 \$61 \$52 \$55 \$64 \$68 \$76 \$33 \$75 \$74 \$69 TOTAL
PY 2017-18	FY 2013-15 FY 2014-15 FY 2014-15 FY 2014-16 FY 2016-17 FY 2017-17 FY 2017-20 FE stimated FY 2021-22 FE stimated FY 2022-23 FE stimated FY 2022-23 FY 2017-20 FY 2017-20 FY 2017-21 FY 2017-21 FY 2017-21 FY 2017-21 FY 2017-21	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.25 \$112.16 \$104.29 \$103.38 \$103.38 \$103.25 Adults 65 and Older (OAP-A) 25.56% 25.47% 30.55%	\$61.55 \$74.57 \$42.17 \$57.18 \$13.382 \$13.382 \$13.50 \$15.64 \$57.34 \$55.94 \$55.94 \$55.94 \$0.0A7-B) \$21.1596 \$21.1596 \$4.44458	\$393.12 \$348.64 \$595.19 \$719.04 \$568.56 \$801.14 \$1,061.41 \$1,061.53 \$1,077.90 \$1,036.61 Disabled Individuals to \$9 (ANDAB)	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$24.01 \$25.95 \$23.73 Disabled Buy-In	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.07 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12 \$0.12	\$0,00 \$0,00	\$0.00 \$0.50 \$0.17 \$0.13 \$0.13 \$0.00 \$0.37 \$0.27 \$0.13 \$0.01 \$0.13 \$0.10 \$0.13 \$0.12	\$0,00 \$0,00	\$2.97 \$8.48 \$16.64 \$16.63 \$12.83 \$12.83 \$10.49 \$7.07 \$6.63 \$6.62 \$6.62 \$1.02 \$	\$0.70 \$0.02 \$0.02 \$0.54 \$3.34 \$2.59 \$0.06 \$3.12 \$2.66 \$2.46 \$1.1008 Eligible Children	\$477.99 \$564.43 \$576.64 \$575.39 \$489.96 \$697.88 \$870.25 \$1,069.89 \$1,099.84	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0,00 \$1.10 \$0,00	\$53 \$66 \$53; \$55; \$66 \$66 \$76 \$83; \$77; \$77; \$77; \$77; \$74; \$66 \$76 \$17; \$18; \$17; \$18; \$18; \$18; \$18; \$18; \$18; \$18; \$18
FY 2015-19 4-59% 174-39% 789% 5-228% 5-88.22% 9-00.09% 2-20.39% 0.09% 4-24.39% 98.30% 24.37% 0.00% 0.00% 0.00% 0.00% 10 FY 2010-20 7-022% 68.89% 10.41% 5-51.39% 242.88% 4-33.33% 41.29% 0.00% 0.00% 510.00% 21.37% 0.00% 0.00% 0.00% 0.00% 0.00% 10 Estimated FY 2020-21 9.87% 2-24.49% 1.54% 2-25.48% 20.00% 30.00% 0.00% 0.00% 4-22.39% 0.00% 0.00% 4-22.39% 1.47% 2.76% 0.00% 0.	FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FINITE PROBLEM Estimated FY 2017-20 Estimated FY 2017-20 FINITE DUTY NURSING  FY 2017-16 FY 2017-16 FY 2017-15 FY 2017-15 FY 2017-15	\$57.91 \$72.6 \$50.46 \$6.241 \$727.83 \$117.25 \$112.16 \$103.29 \$103.38 \$103.38 \$103.32 \$103.25 \$10	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$33.82 \$33.55 \$55.54 \$55.54 \$55.50 \$55.50 \$55.50 \$55.50 \$55.50 \$55.13	\$393.12 \$486.44 \$595.19 \$719.04 \$568.56 \$801.41 \$1,061.53 \$1,077.90 \$1,042.62 \$1,036.61 Disabled Individuals to 59 (AND/AS) \$1,027.90 \$1,036.61	\$20.81 \$190.82 \$82.83 \$82.83 \$84.29 \$153.89 \$153.89 \$12.44 \$32.22 \$2.401 \$25.95 \$23.73 Disabled Buy-In	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.03 \$0.03 \$0.03 \$0.03 \$0.03) \$(\$0.13) \$(\$0.13) \$Private Duty Nursing MAGI Parents' Cartelaers 69% to 133% FPL \$0.00% \$0.00% \$0.00%	\$0,00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.30 \$0.77 \$0.27 \$0.27 \$0.13) \$(\$0.13) \$(\$0.13) \$(\$0.12) Per Capita Cost Perce MAGI Adults \$0.00% \$0.00% \$0.00% \$0.00%	\$0,00 \$0,00	\$2.97 \$8.45 \$16.64 \$16.31 \$13.25 \$18.22 \$10.49 \$10.49 \$5.07 \$6.63 \$6.62 \$6.62 \$1.82	\$0.70 \$0.02 \$0.34 \$3.34 \$2.59 \$0.06 \$3.12 \$2.66 \$2.70 \$2.46 \$1.008 Eligible Children	\$417.59 \$544.3 \$576.64 \$575.30 \$459.96 \$459.96 \$459.96 \$570.25 \$1.060.37 \$1.060.37 \$1.089.80 \$1.099.84	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$1.10 \$0.00	\$5: \$66 \$5: \$6: \$66 \$77 \$7: \$7: \$7: \$6: \$7: \$1: \$1: \$1: \$1: \$1: \$1: \$1: \$1: \$1: \$1
Estimated FY 200-21 4-87% -2-44% 1.54% -25-48% 20.00% 30.00% -23.53% 0.00% -6.22% -14.74% 2.76% 0.00% 0.00% 0.00% 0.00% 0.00% -5.22% -14.74% 2.76% 0.00% 0.00% 0.00% 0.00% 0.00% -5.22% -14.74% 0.76% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% -5.22% 0.00%	FY 2013-15 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-20 Estimated FY 2021-22 Estimated FY 2021-22 FEMINATE DUTY NURSING  FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2014-15 FY 2016-17	\$57.91 \$72.66 \$50.46 \$62.41 \$73.83 \$117.45 \$112.16 \$10.25	\$61.55 \$74.57 \$42.17 \$42.17 \$57.18 \$133.82 \$130.55 \$15.64 \$57.34 \$55.94 \$55.94 \$55.94 \$64 (OAP-B) \$21.159 \$21.159 \$43.859 \$43.859 \$43.859 \$43.859 \$43.859	\$393.12 \$348.64 \$595.19 \$719.04 \$568.56 \$891.14 \$1.06.141 \$1.06.15 \$1.07.79	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$24.01 \$25.95 \$23.73 Disabled Buy-In 100.00% 427.05% 427.05% 427.05% 427.05% 427.05% 427.05% 427.05% 427.05% 427.05% 427.05% 427.05%	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.07 \$0.10	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.03 \$0.03 \$0.03 \$0.03 \$0.03 \$0.13) \$0.13) \$Private Duty Nursing MAGI Parents' Carteksers 69% to 133% FPL \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.30 \$0.77 \$0.27 \$0.13 \$0.00 \$0.37 \$0.27 \$0.13) \$0.12) Per Capita Cost Perce MAGI Adults \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005 \$0.0005	\$0,00 \$0,00	\$2.97 \$8.45 \$16.64 \$16.53 \$12.35 \$12.35 \$10.40 \$7.07 \$6.63 \$6.62 \$	\$0.70 \$0.02 \$0.02 \$0.34 \$3.34 \$2.39 \$0.06 \$0.06 \$2.06 \$2.46 \$3.11-08 Eligible Children 100.00% \$77.14% \$200.00% \$0.000%	\$477.99 \$564.43 \$576.64 \$575.39 \$489.96 \$697.88 \$870.25 \$1,069.98 \$1,099.84  Foster Care  9,66% 18,18% -0,22% -0,22% -0,22% -2,006%	\$0,00 \$0,00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$1.10 \$5.00	\$55 \$65 \$55 \$65 \$66 \$66 \$77 \$77 \$77 \$77 \$77 \$77 \$17 \$17 \$17 \$17
Estimated FY 2021-22 1.32% 0.13% -3.27% 8.08% -16.67% 0.00% 0.00% 0.00% 4.37% 1.50% 0.83% 0.00% 0.00% 0.00% 0.00% -	FY 2013-15 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-20 Estimated FY 2021-22 Estimated FY 2021-22 FY 2017-20 FY	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$117.45 \$103.25 \$1	\$61.55 \$74.57 \$42.17 \$57.18 \$43.17 \$57.18 \$53.82 \$33.54 \$57.27 \$57.18	\$393.12 \$348.64 \$3595.19 \$719.04 \$568.56 \$501.41 \$106.141 \$106.141 \$106.151 \$106.141 \$106.151 \$106.141 \$106.151 \$106.141 \$106.151 \$106.141	\$20.81 \$109.68 \$82.83 \$89.90 \$84.29 \$153.89 \$73.44 \$32.22 \$24.05 \$25.75	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.07 \$0.07 \$0.07 \$0.07 \$0.09	\$0.00 \$0.00	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.17 \$0.13 \$0.00 \$0.37 \$0.27 \$0.17 \$0.13 \$0.10 \$0.13 \$0.10 \$0.13 \$0.10 \$0.13 \$0.10 \$0.13 \$0.10 \$0.13 \$0.10 \$0.13 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.00 \$0.10 \$0.10 \$0.00 \$0.10	\$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,000 \$	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.82 \$10.40 \$10.	\$0.70 \$0.02 \$0.34 \$3.34 \$2.39 \$0.06 \$3.12 \$2.60 \$2.70 \$2.46 \$1.00.00%; \$1.00.00%; \$2.00 \$2.10 \$2.00 \$3.12 \$3	\$417.59 \$544.3 \$576.64 \$575.30 \$489.96 \$5870.25 \$1,060.36 \$1,000.3	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$1.10 \$0.00	\$55 \$65 \$55 \$55 \$66 \$66 \$77 \$77 \$77 \$77 \$77 \$17 \$14 \$14 \$14 \$15 \$15 \$15 \$15 \$15 \$15 \$15 \$15 \$15 \$15
	FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2017-18 FINITED TY 2017-18 FY 2017-18	\$57.91 \$72.6 \$50.46 \$6.24 \$737.83 \$117.45 \$112.16 \$103.29 \$103.38 \$104.74 \$103.25 \$103	\$61.55 \$74.57 \$42.17 \$57.18 \$33.82 \$33.55 \$35.64 \$57.54 \$55.94 \$55.91 \$55.13  Disabled Adults 60 to 64 (OAP-B) \$281.82% \$43.45% \$4.45% \$4.45% \$1.74.89%	\$393,12 \$448 \$595,19 \$719,04 \$568,56 \$801,41 \$1,061,61 \$1,0779 \$1,042,62 \$1,036,61  Disabled Individuals to 59 \$(AND/AB) \$1,2766, \$8,48% \$20,93% \$1,039,000 \$1,042,62 \$1,036,61	\$20.81 \$109.68 \$82.83 \$89.99 \$84.29 \$153.89 \$73.44 \$32.22 \$2.401 \$25.95 \$23.73 Disabled Buy-In Disabled Buy-In 427.05% 427.05% 427.05% 427.05% 5.6.33% 8.6.33%	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.07 \$0.07 \$0.10	\$0.00 \$0.00	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.30 \$0.77 \$0.13 \$0.00 \$0.37 \$0.27 \$0.13) \$(\$0.13) \$(\$0.13) \$(\$0.12) Per Capita Cost Perce MAGI Adults \$0.00% \$	\$0,00 \$0,00	\$2.97 \$8.45 \$16.64 \$16.53 \$12.35 \$18.25 \$10.40 \$7.70 \$6.63 \$6.92 \$6.62 \$6.92 \$	\$0.70 \$0.02 \$0.34 \$13.24 \$2.29 \$0.06 \$3.12 \$2.66 \$2.70 \$2.46 \$1.00 \$2.70 \$2.46 \$1.00 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70 \$2.46 \$2.70	\$417.59 \$544.3 \$576.64 \$475.39 \$489.96 \$597.88 \$870.25 \$1,060.39 \$1,089.86 \$1,098.86 \$	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$1.10 \$5.00	\$33 \$616 \$616 \$52 \$52 \$55 \$55 \$56 \$66 \$38 \$38 \$38 \$57 \$57 \$77 \$75 \$75 \$75 \$75 \$75 \$75 \$75
Estimated FY 2022-23 -1.42% -1.57% -0.58% -8.55% -10.00% 0.00% -7.69% 0.00% -4.34% -8.89% 0.09% 0.00% 0.00% 0.00% 0.00% -0.00%	FY 2013-15 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-20 Estimated FY 2021-22 Estimated FY 2021-22 FEMINATE DUTY NURSING  FY 2012-13 FY 2013-16 FY 2014-15 FY 2014-15 FY 2015-16 FY 2016-17 FY 2015-18 FY 2016-17 FY 2018-19 F	\$57.91 \$72.66 \$50.46 \$62.41 \$737.83 \$112.16 \$103.23 \$103.33 \$103.34 \$103.25 \$1	\$61.55 \$74.57 \$42.17 \$57.18 \$13.82 \$33.54 \$57.59 \$57.18 \$57.18 \$57.18 \$57.18 \$57.18 \$57.18 \$57.19 \$5	\$393.12 \$348.64 \$595.19 \$719.04 \$568.56 \$891.14 \$1,001.05 \$1,002.0	\$20.81 \$109.68 \$82.83 \$89.90 \$84.29 \$153.89 \$73.44 \$32.22 \$24.05 \$25.75 \$25.05	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.07 \$0.07 \$0.07 \$0.07 \$0.07 \$0.09	\$0.00 \$0.00	\$0.00 \$0.50 \$0.17 \$0.13 \$0.00 \$0.37 \$0.07 \$0.27 \$0.27 \$0.27 \$0.13 \$0.00 \$0.37 \$0.27 \$0.13 \$0.13 \$0.10 \$0.13 \$0.10 \$0.13 \$0.10 \$0.13 \$0.13 \$0.10 \$0.13	\$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,000	\$2.97 \$8.45 \$16.64 \$16.33 \$12.35 \$18.82 \$10.40 \$1.63 \$1.82 \$10.40 \$1.60 \$1.80	\$0.70 \$0.02 \$0.34 \$3.34 \$2.39 \$0.06 \$3.12 \$3.25 \$3.06 \$2.70 \$3.25 \$3.26 \$3.27 \$3.246 \$3.27 \$3.27 \$3.246 \$3.27	\$417.59 \$544.3 \$576.64 \$575.30 \$489.96 \$5870.25 \$1,060.36 \$570.25 \$1,060.36 \$1,000.36	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$1.10 \$5.00	\$33 \$61 \$32 \$32 \$35 \$64 \$65 \$65 \$76 \$75 \$75 \$75 \$65 \$65 \$65 \$65 \$65 \$65 \$65 \$65 \$65 \$6

PRIVATE DUTY NURSING  Registered Nursing (RN)  Registered Nursing (RN)  Licensed Practical Nursing (RN) Group (LI (LPN))  Practical Nursing (RN) Fractical Nursing (RN) Practical Nursi	PN) and	TOTAL
FY 2011-12 \$19,803,988 \$7,090,613	\$4,249,552	\$31,144,153
	\$5,379,370	\$36,846,961
	\$6,931,782	\$53,154,903
	\$8,248,619 \$8,630,099	\$61,498,982 \$72,609,335
	38,030,099	\$87,079,492
	311,518,885	\$90,576,446
	314,114,746	\$95,953,404
	316,950,447	\$102,263,351
	318,624,125	\$102,957,920
	319,560,422 320,524,732	\$104,869,243 \$106,808,579
Private Duty Nursing (PDN) Percent Change in Cost Per Service Per Fiscal Year  Private Duty Nursing (PDN) Percent Change in Cost Per Service Per Fiscal Year	520,524,732	\$100,808,379
PRIVATE DUTY NURSING Registered Nursing (RN) Licensed Practical Nursing (LPN) Registered Nursing (RN) Group (LI Blended RN/LPN)	PN) and	TOTAL
FY 2012-13 21.80% 3.59%	26.59%	18.31%
FY 2013-14 47.60% 44.56%	28.86%	44.26%
FY 2014-15 15.60% 13.87% FY 2015-16 23.17% 9.85%	19.00% 4.62%	15.70% 18.07%
FY 2015-10 23.17% 75.57% FY 2016-17 17.41% 24.08%	28.32%	19.93%
FY 2017-18 4,02% 4,02%	4.02%	4.02%
FY 2018-19 7.38% -10.44%	22.54%	5.94%
FY 2019-20 5.23% 4.02%	20.09%	6.58%
Estimated FY 2020-21 -1.23% -0.78%	9.87%	0.68%
Estimated FY 2021-22 1.41% 0.00%  Estimated FY 2022-23 1.39% 0.00%	5.03% 4.93%	1.86% 1.85%
Private Duty Nursing (PDN) Average Utilizers Per Month Per Service Per Fiscal Year (5)  Private Duty Nursing (PDN) Average Utilizers Per Month Per Service Per Fiscal Year (5)	4.73/0	1.0370
PRIVATE DUTY NURSING  Registered Nursing (RN)  Registered Nursing (RN)  Licensed Practical Nursing (RN) orou (LPN)  Registered Nursing (RN) orou (Practical Nursing (RN))  Blended RN/LPN <sup>(1)(3</sup> Blended RN/LPN <sup>(1)(3</sup>	PN) and	TOTAL <sup>(4)</sup>
PRIVATE DUTY NURSING Registered Nursing (RN) Licensed Fractical Nursing (LPN) Practical Nursing Group (LI Blended RN/LPN <sup>(I)(S)</sup> FY 2011-12 183 116	PN) and 3)	TOTAL <sup>(4)</sup>
PRIVATE DUTY NURSING   Registered Nursing (RN)   Licensed Fractical Nursing Group (LI	PN) and 33 51	221 268
Registered Nursing (RN)	PN) and 3) 33 51 57	221 268 369
Registered Nursing (RN)   Licensed Fractional Nursing (Group (LIPN)   Practical Nursing Group (LIPN)   Blended RN/LPN <sup>()()()</sup>   Blended RN/LPN <sup>()()()</sup>   Blended RN/LPN <sup>()()()</sup>	PN) and 3) 33 51 57 66	221 268 369 458
Registered Nursing (RN)   Licensed Fractical Nursing Group (LI	9) 33 51 57 66 68	221 268 369 458 504
Registered Nursing (RN)   Licensed Fractical Nursing Group (LI	PN) and 33 51 57 66 68 72 81	221 268 369 458 504 569 637
Registered Nursing (RN)   Licensed Fractional Nursing Group (LI Blended RN/LPN <sup>(U)</sup>   Blended RN/LPN <sup>(U)</sup>	PN) and 33 51 57 66 68 72 81 97	221 268 369 458 504 569 637 680
Registered Nursing (RN)	PN) and 5)  33 51 57 66 68 72 81 97	221 268 369 458 504 569 637 680
Registered Nursing (RN)	9PN) and 33 51 57 66 68 72 81 97 110 118	221 268 369 458 504 569 637 680 696
Registered Nursing (RN)	PN) and 33 51 57 66 68 72 81 97 110 118	221 268 369 458 504 569 637 680 696 710
Registered Nursing (RN)	9PN) and 33 51 57 66 68 72 81 97 110 118	221 268 369 458 504 569 637 680 696
PRIVATE DUTY NURSING   Registered Nursing (RN)   Licensed Fractical Nursing Group (LIPN)   Blended RN/LPN <sup>(DS)</sup>	PN) and  33 51 57 66 68 72 81 97 110 118 122 126	221 268 369 458 504 569 637 680 696 710
PRIVATE DUTY NURSING   Registered Nursing (RN)   Licensed Practical Nursing Group LL	PN) and  33  51  57  66  68  72  81  110  118  122  126  pp/Licensed PN) and  9  N/A	221 268 369 458 504 569 637 680 696 7710 7718 726
Registered Nursing (RN)	PN) and  33  31  51  57  66  68  72  81  97  110  118  122  126  pt/Licensed PN) and N/A	221 268 369 458 504 569 637 680 696 710 718 726
PRIVATE DUTY NURSING   Registered Nursing (RN)   Licensed Practical Nursing Group (LIPN)   Blended RN/LPN <sup>(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(</sup>	PN) and  33  51  57  66  68  72  81  97  110  118  122  126  126  P/Licensed PN) and  N/A  N/A  N/A  N/A	221 268 369 458 504 569 637 680 710 718 726  TOTAL <sup>(4)</sup>
Registered Nursing (RN)	PN) and  33  51  57  66  68  72  81  110  118  122  126  p/Licensed PN) and  b  N/A  N/A  N/A  N/A  3.03%	221 268 369 458 504 569 637 680 6710 718 726  TOTAL <sup>(4)</sup>
Registered Nursing (RN)	PN) and  33  51  57  66  68  72  81  97  110  118  122  126  126  P/Licensed PN) and  N/A  N/A  N/A  N/A	221 268 369 458 504 569 637 680 710 718 726  TOTAL <sup>(4)</sup>
PRIVATE DUTY NURSING   Registered Nursing (RN)   CLPN   CLPN   Blended RN/LPN   Blended R	PN) and  33  51  57  66  68  72  81  97  110  118  122  126  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/	221 268 369 458 504 569 637 680 696 710 718 726  TOTAL <sup>(4)</sup> 21.30% 37.41% 24.40% 9.98% 12.83% 11.98%
PRIVATE DUTY NURSING   Registered Nursing (RN)   Licensed Practical Nursing Group (LI Blended RN/LPN <sup>(1)(1)</sup>   Blended RN/LPN <sup>(1)(2)</sup>	PN) and  33  51  57  66  68  72  81  97  110  118  122  126  P/Licensed P)  N/A  N/A  N/A  N/A  303%  5.59%  12.81%  19.75%  13.40%	221 268 369 458 504 569 637 680 696 710 718 726  TOTAL <sup>(4)</sup> 21.30% 37.41% 24.40% 9.98% 11.98% 6.75% 6.75%
PRIVATE DUTY NURSING   Registered Nursing (RN)   Licensed Practical Nursing (Group (LPN)   Blended RN/LPN <sup>(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(</sup>	PN) and  33  51  57  66  68  72  81  97  110  118  122  126  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/	221 268 369 458 504 569 637 680 696 710 718 726  TOTAL <sup>(4)</sup> 21.30% 37.41% 24.40% 9.98% 11.88% 6.75%

	Per Utilizer Per Service Per Fiscal Year			
PRIVATE DUTY NURSING	Registered Nursing (RN)	Licensed Practical Nursing (LPN)	Registered Nursing (RN) Group/Licensed Practical Nursing Group (LPN) and Blended RN/LPN <sup>(1)(3)</sup>	TOTAL
FY 2011-12	\$108,219	\$61,126	N/A	\$140,871
FY 2012-13	\$108,171	\$58,297	N/A	\$137,403
FY 2013-14 FY 2014-15	\$113,030	\$58,666 \$53,738	N/A \$124,979	\$144,247 \$134,155
FY 2015-16	\$103,415 \$121,869	\$55,341	\$124,979	\$134,133 \$144,019
FY 2016-17	\$125,529	\$63,775	\$154,236	\$153,084
FY 2017-18	\$120,226	\$58,703	\$142,208	\$142,192
FY 2018-19	\$120,011	\$57,500	\$145,513	\$141,108
FY 2019-20	\$125,159	\$61,152	\$154,095	\$146,930
Estimated FY 2020-21 Estimated FY 2021-22	\$121,878 \$121,878	\$60,673 \$60,673	\$157,832 \$160,331	\$145,011 \$146,057
Estimated FY 2021-22 Estimated FY 2022-23	\$121,878	\$60,673	\$162,895	\$147,119
	ge in Cost Per Utilizer Per Service Per Fiscal		,,,,,,,	4.1.,
PRIVATE DUTY NURSING	Registered Nursing (RN)	Licensed Practical Nursing (LPN)	Registered Nursing (RN) Group/Licensed Practical Nursing Group (LPN) and Blended RN/LPN <sup>(1)(3)</sup>	TOTAL
FY 2012-13	-0.04%	4.63%	N/A	-2.46%
FY 2013-14	4.49%	0.63%	N/A	4.98%
FY 2014-15	-8.51%	-8.40%	N/A 1.55%	-7.00%
FY 2015-16 FY 2016-17	17.84% 3.00%	2.98% 15.24%	1.55% 21.53%	7.35% 6.29%
FY 2010-17 FY 2017-18	-4.22%	-7.95%	-7.80%	-7.12%
FY 2018-19	-0.18%	-2.05%	2.32%	-0.76%
FY 2019-20	4.29%	6.35%	5.90%	4.13%
Estimated FY 2020-21	-2.62%	-0.78%	2.42%	-1.31%
Estimated FY 2021-22	0.00%	0.00%	1.58%	0.72%
Estimated FY 2022-23	s Per Utilizer Per Service Per Fiscal Year	0.00%	1.60%	0.73%
PRIVATE DUTY NURSING	Registered Nursing (RN)	Licensed Practical Nursing (LPN)	Registered Nursing (RN) Group/Licensed Pr (LPN) and Blended RN/LF	
FY 2011-12	2.875	2.231		4,990
FY 2012-13	2,952	2,316		4,172
FY 2013-14	3,001	2,519		4,622
FY 2014-15				
	2,943	2,202		4,470
FY 2015-16	2,953	2,202 2,118		4,470 3,657
FY 2016-17		2,202 2,118 1,969		4,470
FY 2016-17 FY 2017-17 FY 2017-19	2,953 2,853 2,553 2,901	2,202 2,118 1,969 1,773 1,968		4,470 3,657 4,212 4,340 4,411
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20	2,953 2,853 2,553 2,901 2,758	2,202 2,118 1,969 1,773 1,968 1,856		4,470 3,657 4,212 4,340 4,411 3,672
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 FY 2019-20 Estimated FY 2020-21	2,953 2,853 2,553 2,901 2,758 2,706	2,202 2,118 1,969 1,773 1,968 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22	2,953 2,853 2,553 2,901 2,758 2,706 2,706	2,202 2,118 1,969 1,773 1,968 1,856 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2018-19 FY 2019-20 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2022-23	2,953 2,853 2,553 2,901 2,758 2,706 2,706	2,202 2,118 1,969 1,773 1,968 1,856 1,856 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2018-19 FY 2019-20 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2022-23	2,953 2,853 2,553 2,901 2,758 2,706 2,706	2,202 2,118 1,969 1,773 1,968 1,856 1,856 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2018-19 FY 2019-20 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2022-23	2,953 2,853 2,553 2,901 2,758 2,706 2,706	2,202 2,118 1,969 1,773 1,968 1,856 1,856 1,856	Registered Nursing (RN) Group/Licensed Pr (LPN) and Blended RN/LI	4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group
FY 2016-11   FY 2017-18   FY 2018-19   FY 2018-19   FY 2018-19   FY 2018-19   FY 2018-19   FY 2019-20   FS timated FY 2020-21   FS timated FY 2021-23   FS timated FY 2021-23   FS timated FY 2021-23   Private Duty Nursing (PDN) Percent Change   PRIVATE DUTY NURSING   FY 2012-13   FY 2012-1	2,953 2,853 2,253 2,901 2,706 2,706 2,706 2,706 ge in Units Per Utilizer Per Service Per Fiscal Registered Nursing (RN)	2,202 2,118 1,969 1,773 1,968 1,856 1,856 1,856 1,856 1,856  Licensed Practical Nursing (LPN) 3,81%		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739  actical Nursing Group N(1) -16,39%
FY 2016-11   FY 2016-12   FY 2017-18   FY 2018-19   FY 2018-19   FY 2018-19   FY 2018-19   FY 2019-20   FY	2,953 2,853 2,951 2,758 2,706 2,706 2,706 2,706 ge in Units Per Utilizer Per Service Per Fiscal  Registered Nursing (RN) 2,66% 1,66%	2,202 2,118 1,969 1,773 1,968 1,856 1,856 1,856 1,856 1,856 1,856 1,856 1,856 3,81% 4,856 4,857		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group N(1) -16.39%
FY 2016-11   FY 2017-18   FY 2018-19   FY 2018-19   FY 2018-19   FY 2018-19   FY 2018-19   FY 2018-20   FY	2,953 2,853 2,951 2,553 2,901 2,758 2,706 2,706 2,706 2,706 ge in Units Per Utilizer Per Service Per Fiscal Registered Nursing (RN) 2.68% 1.66% 1.66%	2,202 2,118 1,969 1,773 1,968 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group N(1) -16,39% 10,79% -3,29%
FY 2016-15	2,953 2,853 2,951 2,253 2,901 2,706 2,706 2,706 2,706 2,706 2,706 2,706 Registered Nursing (RN)  2,68% 1,66% 1,133% 0,33%	2,202 2,118 1,969 1,773 1,968 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group N(1) -16,39% 10,79% -3,29% -18,19% -18,19%
FY 2016-17 FY 2016-19 FY 2018-19 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2022-23 Private Duty Nursing (PDN) Percent Chang  PRIVATE DUTY NURSING  FY 2012-13 FY 2013-14 FY 2014-15	2,953 2,853 2,951 2,553 2,901 2,758 2,706 2,706 2,706 2,706 ge in Units Per Utilizer Per Service Per Fiscal Registered Nursing (RN) 2.68% 1.66% 1.66%	2,202 2,118 1,969 1,773 1,968 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group N(1) -16,39% 10,79% -3,29%
FY 2016-17 FY 2016-17 FY 2018-19	2,953 2,853 2,2553 2,201 2,758 2,706 2,706 2,706 2,706 2,706 2,706 2,706 2,106 2,106 2,106 3,106 4,103 4,105	2,202 2,118 1,969 1,773 1,968 1,856 1,956		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group N(1) -16,399 -18,199 -15,189 3,049 1,649
FY 2016-17 FY 2016-17 FY 2018-19	2,953 2,853 2,951 2,553 2,901 2,706 2,706 2,706 2,706 ge in Units Per Utilizer Per Service Per Fiscal Registered Nursing (RN) 2.68% 1.66% 1.66% 1.103% 1.133% 1.133% 4.339% 4.339% 4.439%	2,202 2,118 1,969 1,773 1,968 1,856 1,856 1,856 1,856 1,856 1,856 2,861 1,856		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group N(1) -16,399 -18,199 15,189 3,049 1,6475 -16,759
FY 2016-17 FY 2016-17 FY 2018-19	2,953 2,853 2,2553 2,201 2,758 2,706 2,706 2,706 2,706 2,706 2,706 2,706 2,106 2,106 2,106 3,106 4,103 4,105	2,202 2,118 1,969 1,773 1,968 1,856 1,956		4,470 3,657 4,212 4,340 4,411 3,672 3,699 3,719 3,739 actical Nursing Group N(1) -16,39% 10,79% -18,19% 115,18%

Cu	urrent Year Projection			
PRIVATE DUTY NURSING	Registered Nursing (RN)	Licensed Practical Nursing (LPN)	Registered Nursing (RN) Group/Licensed Practical Nursing Group (LPN) and Blended RN/LPN <sup>(1)</sup>	TOTAL
FY 2018-19 Average Paid Utilizers Per Month	559	251	110	696
Utilizer Trend Selected (5)	1.43%	0.00%	2.96%	2.06%
FY 2020-21 Estimated Average Paid Utilizers Per Month	567	251	113	710
Total Bottom Line Impacts	0	0	0	0
FY 2020-21 Estimated Average Paid Utilizers Per Month	567	251	113	710
FY 2018-19 Average Paid Units Per Utilizer Per Year	2,758	1,856	3,672	
Percentage Selected to Modify Per Client Utilization (6)	-1.89%	0.00%	0.73%	
FY 2020-21 Estimated Average Paid Units Per Utilizer	2,706	1,856	3,699	
FY 2019-20 Average Paid Rate Per Unit	45.49	\$33.02	\$28.50	
Unit Average Paid Rate Trend Selected	-1.00%	-1.00%	-1.00%	
FY 2020-21 Average Paid Rate Per Unit	\$45.04	\$32.69	\$28.22	
Estimated FY 2020-21 Base Expenditure	\$69,104,962	\$15,228,833	\$18,624,125	\$102,957,920
Sottom Line Impacts	507,101,702	\$15,220,000	01030213120	0102,757,720
Total Bottom Line Impacts	SO.	\$0	S0	S0
Estimated FY 2020-21 Expenditure	\$69,104,962	\$15,228,833	\$18,624,125	\$102,957,920
Estimated FY 2020-21 Per Utilizer Cost	\$121.878.24	\$60,672.64	\$164.815.27	\$145,011.15
% Change Over FY 2019-20 Per Utilizer Cost	-2.62%	-0.78%	6.96%	-1.31%
	equest Year Projection	0.7070	0.7070	1.5170
PRIVATE DUTY NURSING	Registered Nursing (RN)	Licensed Practical Nursing (LPN)	Registered Nursing (RN) Group/Licensed Practical Nursing Group (LPN) and Blended RN/LPN <sup>(1)</sup>	TOTAL
FY 2020-21 Estimated Average Paid Utilizers Per Month	567	251	113	710
Utilizer Trend Selected (5)	1.41%	0.00%	1.36%	1.10%
FY 2021-22 Estimated Average Paid Utilizers Per Month	575	251	115	718
Bottom Line Impacts				
Total Bottom Line Impacts	0	0	0	0
FY 2021-22 Estimated Average Paid Utilizers Per Month	575	251	115	718
FY 2020-21 Average Paid Units Per Utilizer Per Year	2,706	1,856	3,699	
Percentage Selected to Modify Per Client Utilization (6)	0.00%	0.00%	0.54%	
FY 2021-22 Estimated Average Paid Units Per Utilizer	2,706	1,856	3,719	
FY 2020-21 Average Paid Rate Per Unit	\$45.04	\$32.69	\$28.22	
Adjustment to Increase Average Paid Rate to Actual Rate	0.00%	0.00%	0.00%	
FY 2021-22 Estimated Average Paid Rate Per Unit	\$45.04	\$32.69	\$28.22	
Estimated FY 2021-22 Base Expenditure	\$70,079,988	\$15,228,833	\$19,560,422	\$104,869,243
Bottom Line Impacts	, ,	, , , ,		. ,,
Total Bottom Line Impacts	\$0	\$0	\$0	\$0
		\$15,228,833	\$19,560,422	\$104,869,243
Estimated FY 2021-22 Expenditure	\$70,079,988			
Estimated FY 2021-22 Expenditure Estimated FY 2021-22 Per Utilizer Cost	\$70,079,988 \$121,878.24	\$60,672.64	\$170,090.63	\$146,057.44

Out Yo	ar Projection			
PRIVATE DUTY NURSING	Registered Nursing (RN)	Licensed Practical Nursing (LPN)	Registered Nursing (RN) Group/Licensed Practical Nursing Group (LPN) and Blended RN/LPN <sup>(1)</sup>	TOTAL
FY 2021-22 Estimated Average Paid Utilizers Per Month	575	251	115	718
Utilizer Trend Selected (5)	1.39%	0.00%	1.31%	1.06%
FY 2022-23 Estimated Average Paid Utilizers Per Month	583	251	117	726
Bottom Line Impacts				
Total Bottom Line Impacts	0	0	0	0
FY 2022-23 Estimated Average Paid Utilizers Per Month	583	251	117	726
FY 2021-22 Average Paid Units Per Utilizer Per Year	2,706	1,856	3,719	
Percentage Selected to Modify Per Client Utilization (6)	0.00%	0.00%	0.54%	
FY 2022-23 Estimated Average Paid Units Per Client	2,706	1,856	3,739	
FY 2021-22 Average Paid Rate Per Unit	\$45.04	\$32.69	\$28.22	
Unit Paid Rate Trend Selected	0.00%	0.00%	0.00%	
FY 2022-23 Estimated Average Paid Rate Per Unit	\$45.04	\$32.69	\$28.22	
Estimated FY 2022-23 Base Expenditure	\$71,055,014	\$15,228,833	\$20,524,732	\$106,808,579
Bottom Line Impacts				
Total Bottom Line Impacts	\$0	\$0	\$0	\$0
Estimated FY 2022-23 Expenditure	\$71,055,014	\$15,228,833	\$20,524,732	\$106,808,579
Estimated FY 2022-23 Per Utilizer Cost	\$121,878.24	\$60,672.64	\$175,425.06	\$147,119.25
% Change Over FY 2021-22 Per Utilizer Cost	0.00%	0.00%	3.14%	0.73%
(1) RN Group/LPN Group and Blended RN/LPN Services are forecasted individually, but due to small cells sizes, the three services are grouped tog				
(2) Presented information regarding the utilizer per service is derived from the average number of clients with a paid claim per month. The Department of the control of th	nt believes this to be an accurate representation	of utilizers for PDN services as of	lients typically continue services once a need is	identified.
(3) N/A - Rows cannot be displayed due to the Health Insurance Portability and Accountability Act of 1996 (HIPAA).				
(4) Since clients can access multiple services, the total average utilizers per month does not reflect the sum of the services but rather the total average				1.43%, 1.41%, 1.39%
(5) Percentages Selected to Modify Utilizers	RN LPN			0.00%, 0.00%, 0.00%
(5) Percentages Selected to Modify Utilizers for FY 2020-21 through FY 2022-23	Blended & Group			
101 F 1 2020-21 unough F 1 2022-25	Total PDN Utilizers			case 2.06%, 1.10%, 1.06%
	RN			-1.89%, 0.00%, 0.00%
(6) Percentages Selected to Modify Units Per Utilizer	LPN			0.00%, 0.00%, 0.00%
for FY 2020-21 through FY 2022-23	Blended & Group			0.73%, 0.54%, 0.54%

						Long-Term Hon	e Health Total Expend	liture by Fiscal Year								
LONG-TERM HOME HEALTH	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$19,241,801	\$5,960,470	\$112,026,204	\$0	\$70,804	\$21,256	\$0	\$205	\$3,621,831	\$0		\$374		\$0		\$151,221,421
FY 2012-13 FY 2013-14	\$21,401,061 \$26,251,582	\$7,062,994 \$8,030,921	\$115,530,465 \$130,369,940	\$368,744 \$1,316,824	\$151,443 \$235,386	\$4,862 \$18,678	\$0 \$172.588	\$840 \$2,446	\$3,609,745 \$7,825,402	\$0 \$244.287	\$10,404,821 \$11,792,931	\$1,690 \$1,213	S0 S0	\$0 \$0		\$158,630,532 \$186.515.195
FY 2013-14 FY 2014-15	\$26,251,582 \$28,375,632	\$8,030,921	\$130,369,940 \$139,389,238	\$1,316,824	\$235,386 \$310,179	\$18,678 \$69,594	\$1,72,588	\$2,446 \$0	\$7,825,402 \$18,387,951	\$244,287 \$725,506	\$11,792,931 \$12,889,124	\$1,213 \$6,903	S0 S0			\$186,515,195 \$212,577,453
FY 2015-16	\$31,647,015	\$8,813,402	\$157,177,050	\$2,237,376	\$468,105	\$34,319	\$2,001,772	\$0	\$22,807,220	\$1,195,443	\$13,045,361	\$9,226	\$0	\$0		\$239,436,289
FY 2016-17	\$39,750,102	\$8,739,054	\$173,793,283	\$2,904,097	\$583,453	\$242,459	\$2,827,143	\$0	\$28,451,344	\$2,333,066	\$14,000,869	\$13,497	\$1,036	\$0	\$0	\$273,639,403
FY 2017-18 FY 2018-19	\$48,628,171 \$45,614,951	\$8,428,469 \$10,166,037	\$201,637,564 \$231,040,432	\$4,424,728 \$5,658,015	\$766,240 \$617.155	\$151,912 \$49,609	\$3,479,504 \$3,038,174	\$0 \$0	\$31,770,989 \$41,004,505	\$2,906,178 \$2,717,319	\$15,106,259 \$16,987,453	\$12,651 \$12,720	02	\$0 \$0	\$16,814 \$0	\$317,329,479 \$356,906,370
FY 2018-19 FY 2019-20	\$46,515,314	\$10,166,037	\$251,040,432 \$259,354,693	\$8,298,369	\$853,523	\$98,195	\$3,452,075	\$0 \$0	\$50,493,731	\$3,331,204	\$19,723,404	\$12,720 \$5,393	\$1,550	S0		\$404,967,375
Estimated FY 2020-21	\$49,174,455	\$13,566,843	\$274,075,902	\$8,773,510	\$898,750	\$85,595	\$3,637,797	\$0	\$53,368,621	\$3,509,404	\$20,842,437	\$0		\$0		\$427,976,112
Estimated FY 2021-22	\$52,446,514	\$14,469,578	\$292,312,861	\$9,357,298	\$958,552	\$91,291	\$3,879,855	\$0	\$56,919,759	\$3,742,920	\$22,229,289	\$0		\$0		\$456,453,562
Estimated FY 2022-23	\$55,846,224	\$15,407,531	\$311,261,285	\$9,963,861	\$1,020,688	\$97,208	\$4,131,357	\$0	\$60,609,436	\$3,985,544	\$23,670,245	\$0	\$0	\$0	\$48,603	\$486,041,982
						.ong-Term Home Healt	Total Expenditure Pe	rcent Change by Fiscal	Year							
LONG-TERM HOME HEALTH	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	11.22%	18.50%	3.13%	100.00%	113.89%	-77.13%	0.00%	309.76%	-0.33%	0.00%	2.51%	351.87%	0.00%	0.00%		4.90%
FY 2013-14 FY 2014-15	22.66% 8.09%	13.70%	12.84%	257.11% 47.78%	55.43% 31.77%	284.16% 272.60%	100.00% 673.61%	191.19% -100.00%	116.79% 134.98%	100.00% 196.99%	13.34%	-28.22% 469.08%	0.00%	0.00%	169.53% -89.02%	17.58% 13.97%
FY 2014-15 FY 2015-16	11.53%	-3.30%	12.76%	14.97%	50.91%	-50.69%	49.93%	0.00%	24.03%	64.77%	1.21%	33.65%	0.00%	0.00%	-89.02%	12.63%
FY 2016-17	25.60%	-0.84%	10.57%	29.80%	24.64%	606.49%	41.23%	0.00%	24.75%	95.16%	7.32%	46.29%	100.00%	0.00%	0.00%	14.28%
FY 2017-18	22.33%	-3.55%	16.02%	52.36%	31.33%	-37.35%	23.07%	0.00%	11.67%	24.56%	7.90%	-6.27%	-100.00%	0.00%	100.00%	15.97%
FY 2018-19 FY 2019-20	-6.20% 1.97%	20.62% 26.30%	14.58% 12.26%	27.87% 46.67%	-19.46% 38.30%	-67.34% 97.94%	-12.68% 13.62%	0.00%	29.06% 23.14%	-6.50% 22.59%	12.45% 16.11%	0.55% -57.60%	0.00% 100.00%	0.00%	-100.00% 0.00%	12.47%
FY 2019-20 Estimated FY 2020-21	5.72%	5,66%	5.68%	5.73%	5.30%	-12.83%	5 38%	0.00%	5 69%	5.35%	5.67%	-37.60%	-100.00%	0.00%	100.00%	5.68%
Estimated FY 2021-22	6.65%	6.65%	6.65%	6.65%	6.65%	6.65%	6.65%	0.00%	6.65%	6.65%	6.65%	0.00%	0.00%	0.00%	6.65%	6.65%
Estimated FY 2022-23	6.48%	6.48%	6.48%	6.48%	6.48%	6.48%	6.48%	0.00%	6.48%	6.48%	6.48%	0.00%	0.00%	0.00%	6.48%	6.48%
						Long-Term Hor	ne Health Per Capita C	Costs by Fiscal Year								
LONG-TERM HOME HEALTH	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$484.19	\$711.02	\$1,884.88	\$0.00	\$0.76	\$0.60	\$0.00									
FY 2012-13 FY 2013-14	\$524.19 \$627.49	\$780.36	\$1,865.80					\$0.34	\$10.82	\$0.00	\$562.84	\$0.05	\$0.00	\$0.00		\$243.92
FY 2013-14 FY 2014-15				\$415.25	\$1.52	\$0.12	\$0.00	\$1.35	\$10.03	\$0.00	\$585.30	\$0.21	\$0.00	\$0.00	\$4.43	\$232.26
		\$815.07	\$2,023.62	\$514.38	\$1.89	\$0.40	\$1.98	\$1.35 \$4.38	\$10.03 \$19.61	\$0.00 \$9.64	\$585.30 \$645.59	\$0.21 \$0.09	\$0.00 \$0.00	\$0.00 \$0.00	\$4.43 \$10.82	\$232.26 \$216.64
FY 2014-15 FY 2015-16	\$678.57 \$746.34					\$0.40 \$0.97 \$0.39	\$1.98 \$5.53 \$6.25	\$1.35 \$4.38 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82	\$0.00	\$585.30 \$645.59 \$643.30 \$654.39	\$0.21 \$0.09 \$0.46 \$0.64	\$0.00	\$0.00	\$4.43	\$232.26
FY 2015-16 FY 2016-17	\$678.57 \$746.34 \$904.62	\$815.07 \$870.86 \$837.06 \$777.43	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18	\$514.38 \$536.53 \$359.88 \$464.58	\$1.89 \$1.92 \$2.87 \$3.61	\$0.40 \$0.97 \$0.39 \$2.40	\$1.98 \$5.53 \$6.25 \$8.13	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.53	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28
FY 2015-16 FY 2016-17 FY 2017-18	\$678.57 \$746.34 \$904.62 \$1,059.28	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18 \$2,985.85	\$514.38 \$536.53 \$359.88 \$464.58 \$541.25	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26	\$0.40 \$0.97 \$0.39 \$2.40 \$2.04	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94 \$45.16	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36 \$703.50	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99 \$1.25	\$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.48	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28 \$241.28
FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	\$678.57 \$746.34 \$904.62 \$1,059.28 \$956.57	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46 \$799.15	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18 \$2,985.85 \$3,366.02	\$514.38 \$536.53 \$359.88 \$464.58 \$541.25 \$629.58	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.51	\$0.40 \$0.97 \$0.39 \$2.40 \$2.04 \$0.78	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94 \$45.16 \$45.77	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36 \$773.50	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99 \$1.25 \$1.04	\$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.53	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.48 \$0.00	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28 \$241.28 \$282.95
FY 2015-16 FY 2016-17 FY 2017-18	\$678.57 \$746.34 \$904.62 \$1,059.28	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18 \$2,985.85	\$514.38 \$536.53 \$359.88 \$464.58 \$541.25	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26	\$0.40 \$0.97 \$0.39 \$2.40 \$2.04	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94 \$45.16	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36 \$703.50	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99 \$1.25	\$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.48	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28 \$241.28
FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-19 FY 2016-19 FY 2016-17 FY 2016-17 FY 2016-17 FIRST FY 2016-1	\$678.57 \$746.34 \$904.62 \$1,059.28 \$956.57 \$978.22 \$1,018.08 \$1,080.08	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46 \$799.15 \$985.49 \$1,009.81 \$1,058.57	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18 \$2,985.85 \$3,366.02 \$3,898.31 \$4,154.93	\$514.38 \$536.53 \$359.88 \$464.58 \$541.25 \$629.58 \$777.36 \$601.75	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.51 \$5.19	\$0.40 \$0.97 \$0.39 \$2.24 \$0.78 \$1.65 \$1.05	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.53	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94 \$45.16 \$45.77 \$59.57 \$53.31 \$56.77	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36 \$778.71 \$925.11 \$997.87 \$1,053.52	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99 \$1.25 \$1.04 \$0.47 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.00 \$0.00 \$0.70 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.48 \$0.00 \$0.00 \$1.22 \$1.22	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28 \$241.28 \$282.95 \$332.15 \$314.99
FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21	\$678.57 \$746.34 \$904.62 \$1,059.28 \$956.57 \$978.22 \$1,018.08	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46 \$799.15 \$985.49	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18 \$2,985.85 \$3,366.02 \$3,898.31 \$4,154.93	\$514.38 \$536.53 \$359.88 \$464.58 \$541.25 \$629.58 \$777.36	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.51 \$5.19 \$5.21 \$4.69 \$4.15	\$0.40 \$0.97 \$0.39 \$2.40 \$2.04 \$0.78 \$1.65 \$1.05 \$1.14	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.53 \$9.53	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94 \$45.16 \$45.77 \$59.57 \$53.31	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36 \$773.50 \$778.71 \$925.11 \$997.87	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99 \$1.25 \$1.04 \$0.47 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.53 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.48 \$0.00 \$0.00 \$1.22	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28 \$241.28 \$282.95 \$332.15 \$314.99
FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-19 FY 2016-19 FY 2016-17 FY 2016-17 FY 2016-17 FIRST FY 2016-1	\$678.57 \$746.34 \$904.62 \$1,059.28 \$956.57 \$978.22 \$1,018.08 \$1,080.08	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46 \$799.15 \$985.49 \$1,009.81 \$1,058.57	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18 \$2,985.85 \$3,366.02 \$3,898.31 \$4,154.93	\$514.38 \$536.53 \$359.88 \$464.58 \$541.25 \$629.58 \$777.36 \$601.75	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.51 \$5.19 \$5.21 \$4.69 \$4.15	\$0.40 \$0.97 \$0.39 \$2.24 \$0.78 \$1.65 \$1.05	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.53 \$9.53	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94 \$45.16 \$45.77 \$59.57 \$53.31 \$56.77	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36 \$778.71 \$925.11 \$997.87 \$1,053.52	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99 \$1.25 \$1.04 \$0.47 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.00 \$0.00 \$0.70 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.48 \$0.00 \$0.00 \$1.22 \$1.22	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28 \$241.28 \$282.95 \$332.15 \$314.99
FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-19 FY 2016-19 FY 2016-17 FY 2016-17 FY 2016-17 FIRST FY 2016-1	\$678.57 \$746.34 \$904.62 \$1,059.28 \$956.57 \$978.22 \$1,018.08 \$1,080.08	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46 \$799.15 \$985.49 \$1,009.81 \$1,058.57	\$2,023.62 \$2,094.57 \$2,284.55 \$2,570.18 \$2,985.85 \$3,366.02 \$3,898.31 \$4,154.93	\$514.38 \$536.53 \$359.88 \$464.58 \$541.25 \$629.58 \$777.36 \$601.75	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.51 \$5.19 \$5.21 \$4.69 \$4.15	\$0.40 \$0.97 \$0.39 \$2.40 \$2.04 \$0.78 \$1.65 \$1.05 \$1.14	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.53 \$9.53	\$1.35 \$4.38 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28	\$0.00 \$9.64 \$14.48 \$20.09 \$35.94 \$45.16 \$45.77 \$59.57 \$53.31 \$56.77	\$585.30 \$645.59 \$643.30 \$654.39 \$689.36 \$778.71 \$925.11 \$997.87 \$1,053.52	\$0.21 \$0.09 \$0.46 \$0.64 \$0.99 \$1.25 \$1.04 \$0.47 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.00 \$0.00 \$0.70 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.48 \$0.00 \$0.00 \$1.22 \$1.22	\$232.26 \$216.64 \$183.07 \$184.61 \$203.28 \$241.28 \$282.95 \$332.15 \$314.99
FY 2013-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-20 Estimated FY 2028-21 Estimated FY 2022-23 Estimated FY 2022-23 LONG-TERM HOME HEALTH	\$678.57 \$746.34 \$904.62 \$1,059.28 \$995.57 \$978.22 \$1,018.08 \$1,080.08 \$1,113.16	\$815.07 \$870.86 \$837.06 \$777.43 \$714.46 \$799.15 \$1,009.81 \$1,088.57 \$1,088.64 Disabled Adults 60 to 64 (OAP-B)	\$2,023.62 \$2,04.57 \$2,284.55 \$2,570.18 \$2,985.85 \$3,366.02 \$3,898.31 \$4,154.93 \$4,208.24 \$4,374.28 Disabled Individuals to 59 (AND/AB)	\$514.38 \$536.33 \$339.88 \$4464.82 \$629.58 \$677.36 \$601.75 \$680.93 \$651.03	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.51 \$5.19 \$5.21 \$4.69 \$4.15  MAGI Parents/ Caretakers to 68% FPL 100.00%	\$0.40 \$0.97 \$0.97 \$0.39 \$2.40 \$2.44 \$0.78 \$1.65 \$1.65 \$1.14 \$1.17 Long-Term Heme Heal MAGI Parents/ Caretakers 69% to 133% FPL \$80.00%	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.50 \$9.50 \$9.09 \$0.00 \$4.00	\$1.35 \$4.38 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28 \$133.28 \$133.24 \$130.00 \$121.84 \$130.00 \$121.85 \$130.00 \$130.	\$0.00 \$9.64 \$14.48 \$20.09 \$3.5.94 \$45.16 \$45.77 \$59.57 \$53.31 \$56.77 \$54.05 \$58.10 \$58	\$385.30 \$645.59 \$643.30 \$654.39 \$684.30 \$703.50 \$778.71 \$925.11 \$997.87 \$1,053.52 \$1,102.40	\$0.21 \$0.99 \$0.46 \$0.04 \$0.99 \$1.25 \$1.04 \$0.47 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0,00 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.00 \$0.48 \$0.00 \$1.22 \$1.22 \$1.23 \$1.31	\$312.26 \$183.07 \$184.61 \$203.28 \$241.28 \$282.95 \$332.15 \$314.63 TOTAL
FY 2013-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-20 Estimated FY 2002-12 Estimated FY 2022-23 LONG-TERM HOME HEALTH  FY 2013-14 FY 2013-14 FY 2013-14 FY 2013-14 FY 2013-14	\$678.57 \$746.34 \$904.62 \$1.059.28 \$956.57 \$978.22 \$1,018.08 \$1,080.08 \$1,113.16 Adults 65 and Older (OAP-A) \$2,25% \$1,975%	S815.07 S870.86 S837.06 S837.06 S777.43 S714.66 S799.15 S985.49 S1.009.81 S1.089.41 Disabled Adults 60 64 (OAP-B) 9.75% 4.45%	\$2,023.62 \$2,094.57 \$2,284.55 \$2,5701.8 \$2,985.85 \$3,366.02 \$3,898.11 \$4,154.93 \$4,154.93 \$4,274.28 Disabled Individuals to 59 (AND/AB) -1.01%	\$514.38 \$536.33 \$1559.88 \$464.125 \$629.58 \$601.75 \$600.73 \$651.03	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.31 \$5.21 \$4.49 \$4.49 \$4.15 MAGI Parents/ Caretakers to 68% FPL	\$0.40 \$0.97 \$0.39 \$2.40 \$2.04 \$0.78 \$1.05 \$1.105 \$1.17 Long-Term Home Heal MAGI Parents/ Caretakers 69% to 133% FPL \$0.00%	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.53 \$9.53 \$9.59 \$1.00	\$1.35 \$4.38 \$0.00	\$10.03 \$19.61 \$41.25 \$48.22 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28 \$133.24 car (AFDC-C/BC) 95.51%	\$0.00 \$9.64 \$14.48 \$20.09 \$35.54 \$45.16 \$45.17 \$59.57 \$59.57 \$54.05  SB 11-008 Eligible Children 0.00%	\$585.30 \$645.59 \$643.30 \$643.30 \$644.30 \$649.36 \$770.50 \$778.71 \$925.11 \$997.87 \$1,102.40	\$0.21 \$0.09 \$0.46 \$0.46 \$0.59 \$1.25 \$1.04 \$0.47 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	\$4,43 \$1082; \$5,99 \$5,00 \$0,00 \$0,00 \$1,00 \$1,22 \$1,20 \$1,31 Partial Dual Eligibles	\$232.26 \$216.45 \$183.07 \$184.01 \$202.28 \$202.28 \$222.25 \$332.15 \$314.63 \$707AL
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-19 FY 2018-20 Estimated FY 2026-12 Estimated FY 2026-12 Estimated FY 2021-22 Estimated FY 2021-23 FY 2018-14 FY 2018-14 FY 2018-14 FY 2018-14	\$678.57 \$746.34 \$904.62 \$1,059.28 \$1956.57 \$978.22 \$1,018.00 \$1,113.16 Adults 65 and Older (OAP-A) \$8,26% \$1,174% \$8,26%	\$815.07 \$870.86 \$837.06 \$777.43 \$7714.46 \$799.15 \$988.40 \$1,009.81 \$1,009.81 \$1,089.41 Disabled Adults 60 to 64 (OAP-B) \$4,45% \$4,45% \$6,84% \$6,84%	\$2,023.62 \$2,094.57 \$2,284.55 \$2,578.18 \$2,284.55 \$2,578.18 \$2,985.85 \$3,366.02 \$3,369.31 \$4,154.93 \$4,154.93 \$4,074.28 Disabled Individuals to 59 (AND/AB) \$4,000.00	\$514.38 \$536.33 \$359.88 \$454.35 \$629.38 \$777.36 \$601.75 \$680.75 \$680.75 \$100.00% \$23.87% \$43.87% \$43.87%	\$1.89 \$1.92 \$2.87 \$2.87 \$3.61 \$4.26 \$3.51 \$5.10 \$5.21 \$4.60 \$4.15  MAGI Parents' Caretakers to 68% FPL 100.00% 24.34%	\$0.40 \$9.97 \$0.39 \$2.40 \$0.78 \$1.65 \$1.65 \$1.105 \$1.17  Long-Term Home 1 MAGI Parents/ Caretakers 69% to 133% FPL \$80.00% 233.33%	\$1.98 \$5.53 \$8.13 \$9.87 \$9.87 \$9.19 \$10.69 \$9.53 \$9.56 \$9.09 th Per Capita Cost Per MAGI Adults	\$1.35 \$4.18 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.32 \$ear (AFDC-C/BC)	\$0.00 \$9.64 \$14.48 \$20.09 \$35.54 \$45.16 \$45.16 \$45.17 \$59.37 \$53.31 \$53.31 \$56.77 \$54.05  SB 11-008 Eligible Children 0.00% 100.00% \$50.21%	\$585.30 \$645.59 \$643.30 \$643.30 \$6843.90 \$689.36 \$778.71 \$925.11 \$997.87 \$1,102.40	\$0.21 \$0.09 \$0.46 \$0.04 \$0.99 \$1.25 \$1.04 \$0.47 \$0.00	\$0.00 \$0.00	\$0,00 \$0,00	\$4,43 \$10.82; \$30.99; \$30.00 \$30.00 \$30.00 \$30.00 \$1.22; \$1.22 \$1.29 \$1.31	\$232.26 \$216.46 \$183.07 \$184.61 \$203.28 \$242.28 \$322.55 \$332.15 \$314.63 ************************************
FY 2013-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-20 Estimated FY 2002-12 Estimated FY 2022-23  LONG-TERM HOME HEALTH  FY 2013-14 FY 2013-14 FY 2014-15 FY 2013-14	\$678.57 \$746.48 \$904.62 \$1,059.28 \$956.57 \$978.22 \$1,018.08 \$1,108.08 \$1,113.16 Adults 65 and Older (OAP-A) \$8.26% \$1,14% \$1,14%	S815.07 S870.86 S837.06 S837.06 S771.4.46 S790.15 S985.49 S1.008.87 S1.008.87 S1.088.41 Disabled. Adults 60 to 64 (OAP-B) 9.75% 4.445% 6.84%	\$2,023.62 \$2,094.57 \$2,284.55 \$2,5701.8 \$2,985.85 \$3,366.02 \$3,898.11 \$4,154.93 \$4,154.93 \$4,274.28 Disabled Individuals to 59 (AND/AB) -1.01%	\$514.38 \$536.33 \$1559.88 \$464.125 \$629.58 \$601.75 \$600.73 \$651.03	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.31 \$5.21 \$4.49 \$4.49 \$4.15 MAGI Parents/ Caretakers to 68% FPL	\$0.40 \$0.97 \$0.39 \$2.40 \$2.04 \$0.78 \$1.05 \$1.105 \$1.17 Long-Term Home Heal MAGI Parents/ Caretakers 69% to 133% FPL \$0.00%	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.53 \$9.53 \$9.59 \$1.00	\$1.35 \$4.38 \$0.00	\$10.03 \$19.61 \$41.25 \$48.22 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28 \$133.24 car (AFDC-C/BC) 95.51%	\$0.00 \$9.64 \$14.48 \$20.09 \$35.54 \$45.16 \$45.17 \$59.57 \$59.57 \$54.05  SB 11-008 Eligible Children 0.00%	\$585.30 \$645.59 \$643.30 \$643.30 \$644.30 \$649.36 \$770.50 \$778.71 \$925.11 \$997.87 \$1,102.40	\$0.21 \$0.09 \$0.46 \$0.46 \$0.59 \$1.25 \$1.04 \$0.47 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	\$4,43 \$1082; \$5,99 \$5,00 \$0,00 \$0,00 \$1,00 \$1,22 \$1,20 \$1,31 Partial Dual Eligibles	\$232.26 \$216.46 \$183.07 \$184.61 \$203.28 \$242.28 \$322.55 \$332.15 \$314.63 ************************************
FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-19 FE stimated FY 2008-17 Fe stimated FY 2008-17 Fe stimated FY 2008-17 Fe stimated FY 2008-18 FY 2018-18 FY 2018-17 FY 2018-17 FY 2018-17	\$678.57 \$746.34 \$904.62 \$1,509.28 \$956.57 \$978.22 \$1,018.08 \$1,103.08 \$1,113.16 \$2,000.00 \$1,000	S815.07 S870.86 S837.06 S837.06 S837.06 S774.46 S790.15 S985.49 S1.009.81 S1.009.81 S1.009.41 Disabled Adults 60 to 64 (OAP-8) 9.75% 4.45% 6.84% -7.12% -8.10% -8.1	\$2.023.62 \$2.094.57 \$2.284.55 \$2.576.88 \$2.586.88 \$2.985.88 \$3.868.31 \$4.194.93 \$4.194.93 \$4.208.24 \$4.374.28 Disabled Individuals to \$4.008.24 \$4.374.28 \$4.374.28 \$4.374.28	\$514.38 \$356.33 \$359.88 \$464.58 \$621.25 \$621.25 \$601.2	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.51 \$5.19 \$5.21 \$4.60 \$4.11 \$6.11 \$1.00,00% \$2.43,40% \$2.78% \$4.45 \$4.45 \$4.45 \$4.45 \$4.43% \$4.4	\$0.40 \$0.97 \$0.39 \$2.24 \$0.20 \$1.65 \$1.65 \$1.14 \$1.75 \$1.17	\$1.98 \$5.53 \$6.25 \$8.13 \$9.87 \$9.19 \$10.69 \$9.50 \$9.90 MAGI Adults 0.00% 179.29% 130.08% 30.08%	\$1.35 \$4.18 \$0.00	\$10.03 \$19.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28 \$133.24 \$7.20 \$1.05 \$1.	\$0.00 \$9.64 \$14.48 \$20.09 \$35.54 \$45.16 \$45.77 \$59.37 \$53.31 \$56.77 \$54.05  SB 11-008 Eligible Children  0.00% \$52.1% \$52.2% \$52.1% \$52.1% \$53.37	\$585.30 \$645.59 \$643.30 \$645.93 \$6843.90 \$6843.90 \$689.36 \$778.71 \$925.11 \$997.87 \$1,053.52 \$1,102.40  Foster Care  3.99% 0.35% 0.35% 1.03% 5.34% 5.34%	\$0.21 \$0.09 \$0.46 \$0.46 \$0.99 \$1.25 \$1.104 \$0.47 \$0.00 \$0.00 \$0.00 \$0.00 \$1.00 \$0.00 \$0.00 \$1.00 \$0.00 \$0.00 \$1.00 \$0.00 \$1.00 \$0.00 \$1.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.03 \$0.53 \$0.00	\$0,00 \$0,00	\$4.43 \$10.82 \$0.99 \$0.00 \$0.00 \$0.00 \$1.22 \$1.20 \$1.31 Partial Dual Eligibles \$0.00 \$0.00 \$1.22 \$1.20 \$1.31	\$232.26 \$216.45 \$18.80 \$18.80 \$203.28 \$203.28 \$224.51 \$332.15 \$332.15 \$332.45
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-19 FY 2018-19 FY 2018-20 Estimated FY 2020-12 Estimated FY 2020-12 Estimated FY 2020-12 Estimated FY 2021-22 Estimated FY 2021-23 FY 2018-14 FY 2018-14 FY 2018-14 FY 2018-16 FY 2018-17 FY 2018-17 FY 2018-18 FY 2018-18 FY 2018-18	\$678.57 \$746.34 \$904.62 \$11.05.92 \$15.05.92 \$1.05.08 \$15.08.08 \$1.08.08 \$1.108.08 \$1.108.08 \$1.113.16 \$0.08.09 \$1.113.16 \$1.08.09 \$1.113.16 \$1.08.09 \$1.113.16 \$1.113.	S815.07 S870.86 S837.06 S837.06 S837.06 S774.46 S790.15 S985.40 S1,009.81 S1,058.57 S1,089.41 Disabled Adults 60 to 64 (OAP-B) 4.45% 4.45% 6.84% -3.88% -3.88% -3.10% -1.15%	\$2,023.62 \$2,004.75 \$2,284.55 \$2,570.18 \$2,570.18 \$3,360.20 \$3,898.31 \$4,208.24 \$4,374.28 Disabled Individuals to 59 (ANDIAB) \$4,000.20 \$4,000.00	\$514.38 \$336.33 \$359.88 \$464.25 \$629.88 \$777.36 \$601.75 \$680.93 \$651.03	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.31 \$5.19 \$5.19 \$4.60 \$4.15  MAGI Parents' Caretakers to 68% FPL \$4.49% \$4.48% \$4.48% \$4.48% \$4.48% \$1.8.01%	\$0.40 \$0.97 \$2.40 \$2.20 \$2.20 \$1.65 \$1.65 \$1.14 \$1.75 \$1.14 \$1.65 \$1.14	\$1.98 \$5.53 \$8.13 \$9.87 \$9.13 \$9.87 \$10.69 \$9.53 \$9.56 \$0.75 MAGI Adults \$0.00% \$10.00% \$13.02	\$1.35 \$4.18 \$0.00	\$10.03 \$19.61 \$41.25 \$48.22 \$60.63 \$72.41 \$113.38 \$133.24 \$133	\$0.00 \$9.64 \$14.48 \$2.00 \$3.54 \$4.577 \$4.577 \$5.677	\$383.30 \$455.90 \$643.30 \$643.30 \$6543.30 \$689.36 \$778.71 \$922.17 \$1,052.32 \$1,052.40  Foster Care  3.99%, 1.030%, 1.1,2%%, 1.1,2%%, 1.2,5%%, 1.0,5%	\$0.21 \$0.09 \$0.46 \$0.46 \$0.95 \$1.25 \$1.04 \$0.09 \$0.00 \$0.00 \$0.00 \$0.00 \$1.04 \$0.00 \$0.00 \$0.00 \$1.04 \$0.00 \$0.00 \$0.00 \$1.04 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.00 \$0.53 \$0.00	\$0.00 \$0.00	\$4.43 \$10.82; \$0.99; \$0.00 \$0.00 \$0.00 \$0.00 \$1.20;	\$232.26 \$216.4 \$183.07 \$184.61 \$203.28 \$241.28 \$232.95 \$331.4.99 \$334.63 \$314.63 \$314.63
FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-19 FS 2018-20 Estimated FY 2002-12 Estimated FY 2012-12 Estimated FY 2012-13 FY 2012-13 FY 2013-14 FY 2013-14 FY 2013-14 FY 2018-19 FY 2018-19 FY 2018-19 FY 2018-19	\$678.57 \$746.34 \$904.62 \$1,509.28 \$956.57 \$978.22 \$1,018.08 \$1,103.08 \$1,113.16 \$2,000.00 \$1,000	S815.07 S870.86 S837.06 S837.06 S837.06 S771.4.46 S790.13 S10.09.81 S1.009.81 S1.009.8	\$2,023.62 \$2,094.75 \$2,284.55 \$2,570.18 \$2,586.85 \$3,566.31 \$4,154.95 \$4,74.28 Disabled Individuals to 59 (AND/AB) -1,015, \$4,540.92 (AND/AB) -1,015, \$4,540	\$514.38 \$336.33 \$339.88 \$444.38 \$441.25 \$629.38 \$777.36 \$680.93 \$651.0	\$1.89 \$1.92 \$2.87 \$3.81 \$4.26 \$3.51 \$5.10	\$0.40 \$0.97 \$0.39 \$2.40 \$2.240 \$2.20 \$3.105 \$1.105	\$1.98 \$5.53 \$8.13 \$9.87 \$9.10 \$116.60 \$9.55 \$1.00 \$1.0	\$1.35 \$4.38 \$0.00	\$10.03 \$10.61 \$41.25 \$48.82 \$60.63 \$72.41 \$97.57 \$123.90 \$121.84 \$133.28 \$133.24 \$7.00 \$1.	\$0.00 \$9.64 \$14.48 \$20.09 \$35.54 \$45.16 \$45.77 \$59.37 \$53.31 \$56.77 \$54.05  SB 11-008 Eligible Children  0.00% \$78.89% \$78.89% \$13.34 \$1.35%	\$585.30 \$645.59 \$643.30 \$643.30 \$684.39 \$689.36 \$778.71 \$925.11 \$997.87 \$1,053.52 \$1,102.40 \$1,039% \$1	\$0.21 \$0.09 \$0.46 \$0.46 \$0.50.46 \$0.99 \$1.125 \$1.104 \$0.47 \$0.00 \$0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.03 \$0.53 \$0.00	\$0.00 \$0.00	\$4.43 \$10.82; \$0.99 \$0.00 \$0.00 \$0.00; \$122; \$120 \$1.31 Partial Dual Eligibles \$0.00, \$0.00; \$1.22; \$1.20; \$1.21 \$1.31	\$232.26 \$216.4 \$183.07 \$184.61 \$203.28 \$241.28 \$321.5 \$331.459 \$334.63 \$344.63 \$346.67 \$35.67
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-19 FY 2018-19 FY 2018-20 Estimated FY 2020-12 Estimated FY 2020-12 Estimated FY 2020-12 Estimated FY 2021-22 Estimated FY 2021-23 FY 2018-14 FY 2018-14 FY 2018-14 FY 2018-16 FY 2018-17 FY 2018-17 FY 2018-18 FY 2018-18 FY 2018-18	\$678.57 \$746.34 \$904.62 \$11.05.92 \$15.05.92 \$1.05.08 \$15.08.08 \$1.08.08 \$1.108.08 \$1.108.08 \$1.113.16 \$0.08.09 \$1.113.16 \$1.08.09 \$1.113.16 \$1.08.09 \$1.113.16 \$1.113.	S815.07 S870.86 S837.06 S837.06 S837.06 S774.46 S790.15 S985.40 S1,009.81 S1,058.57 S1,089.41 Disabled Adults 60 to 64 (OAP-B) 4.45% 4.45% 6.84% -3.88% -3.88% -7.12%	\$2,023.62 \$2,004.75 \$2,284.55 \$2,570.18 \$2,570.18 \$3,360.20 \$3,898.31 \$4,208.24 \$4,374.28 Disabled Individuals to 59 (ANDIAB) \$4,000.20 \$4,000.00	\$514.38 \$336.33 \$359.88 \$464.25 \$629.88 \$777.36 \$601.75 \$680.93 \$651.03	\$1.89 \$1.92 \$2.87 \$3.61 \$4.26 \$3.31 \$5.19 \$5.19 \$4.60 \$4.15  MAGI Parents' Caretakers to 68% FPL \$4.49% \$4.48% \$4.48% \$4.48% \$4.48% \$1.8.01%	\$0.40 \$0.97 \$2.40 \$2.20 \$2.20 \$1.65 \$1.65 \$1.14 \$1.75 \$1.14 \$1.65 \$1.14	\$1.98 \$5.53 \$8.13 \$9.87 \$9.13 \$9.87 \$10.69 \$9.53 \$9.56 \$0.75 MAGI Adults \$0.00% \$10.00% \$13.02	\$1.35 \$4.18 \$0.00	\$10.03 \$19.61 \$41.25 \$48.22 \$60.63 \$72.41 \$113.38 \$133.24 \$133	\$0.00 \$9.64 \$14.48 \$2.00 \$3.54 \$4.577 \$4.577 \$5.677	\$383.30 \$455.90 \$643.30 \$643.30 \$6543.30 \$689.36 \$778.71 \$922.17 \$1,052.32 \$1,052.40  Foster Care  3.99%, 1.030%, 1.1,2%%, 1.1,2%%, 1.2,5%%, 1.0,5%	\$0.21 \$0.09 \$0.46 \$0.46 \$0.95 \$1.25 \$1.04 \$0.09 \$0.00 \$0.00 \$0.00 \$0.00 \$1.04 \$0.00 \$0.00 \$0.00 \$1.04 \$0.00 \$0.00 \$0.00 \$1.04 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.53 \$0.00 \$0.53 \$0.00	\$0.00 \$0.00	\$4.43 \$10.82; \$0.99; \$0.00 \$0.00 \$0.00 \$0.00 \$1.20;	\$232.26 \$216.4 \$183.07 \$184.61 \$203.28 \$241.28 \$232.95 \$331.4.99 \$334.63 \$314.63 \$314.63

			Long-Term Home Health (I	.THH) Cost Per Service Per Fisca	l Year					
LONG-TERM HOME HEALTH	Physical Therapy (for 0-21 years LTHH)	Occupational Therapy (for 0-21 years LTHH)	Speech and Language Therapy (for 0-21 years LTHH)	Registered Nursing/Licensed Practical Nurse	Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First Visit of Day	Registered Nursing Brief Second or More Visit of Day	Telehealth <sup>(1)</sup>	Total
FY 2011-12 FY 2012-13	\$3,626,606	\$3,445,533	\$3,374,158	\$21,937,994	\$73,088,478	\$37,825,587	\$5,154,767	\$2,767,782	\$516	\$151,221,421
FY 2012-13 FY 2013-14	\$3,971,740 \$5,478,336	\$3,817,229 \$5,769,444	\$3,511,343 \$5,772,910	\$22,312,471 \$30,601,689	\$77,554,316 \$89,319,042	\$37,883,991 \$41,228,516	\$6,436,658 \$6,162,682	\$3,134,580 \$2,167,316	\$8,204 \$15,260	\$158,630,532 \$186,515,195
FY 2013-14 FY 2014-15	\$6,426,151	\$7,074,775	\$5,772,910 \$8,909,669	\$33,134,389	\$89,319,042 \$99,806,644	\$46,746,258	\$7,699,746	\$2,760,029	\$19,792	\$212,577,453
FY 2015-16 FY 2016-17	\$7,082,199 \$7,566,236	\$8,236,854 \$10,175,849	\$10,558,321 \$16,371,130	\$35,763,694 \$37,740,979	\$115,697,949 \$135,690,548	\$50,321,320 \$54,661,018	\$8,713,140 \$8,756,039	\$3,056,070 \$2,677,286	\$6,742 \$319	\$239,436,289 \$273,639,403
FY 2016-17 FY 2017-18	\$7,366,236 \$8,774,284	\$10,175,849	\$18,984,993	\$43,766,815	\$157,355,301	\$63,388,357	\$8,756,039 \$10,154,054	\$3,104,749	\$370	\$2/3,639,403 \$317,329,479
FY 2018-19 FY 2019-20	\$10,314,592 \$12,617,269	\$14,633,158 \$19,337,144	\$24,876,369 \$79,954,561	\$44,827,430	\$180,487,512 \$205,739,428	\$68,276,174 \$73,146,768	\$10,385,973 \$12,364,825	\$3,105,084 \$3,613,102	\$78 \$5.795	\$356,906,370 \$404,967,375
FY 2019-20 Estimated FY 2020-21	\$12,617,269 \$13.624,831	\$19,337,144 \$21,519,548	\$29,954,561 \$35,204,640	\$48,188,483 \$48,611,300	\$205,/39,428 \$217,121,717	\$/3,146,/68 \$75,679,882		\$3.509.279	\$5,795 \$10,757	\$404,967,375 \$427,976,112
Estimated FY 2021-22	\$14,304,305	\$24,409,122	\$38,989,314		\$235,957,662	\$78,003,394	\$12,694,158 \$12,687,260	\$3,507,267	\$10,848	\$456,453,562
Estimated FY 2022-23	\$15,027,976	\$26,058,321	\$43,202,711 LTHH Percent Change	\$48,603,616 in Cost Per Service Per Fiscal Ye	\$256,452,463 ar	\$80,485,142	\$12,692,187	\$3,508,718	\$10,848	\$486,041,982
LONG-TERM HOME HEALTH	Physical Therapy (for 0-21 years LTHH)	Occupational Therapy (for 0-21 years LTHH)	Speech and Language Therapy (for 0-21 years LTHH)	Registered Nursing/Licensed Practical Nurse	Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First Visit of Day	Registered Nursing Brief Second or More Visit of Day	Telehealth	Total
FY 2012-13	9.52%	10.79%	4.07%	1.71%	6.11%	0.15%	24.87%	13.25%	1489.92%	4.90%
FY 2013-14 FY 2014-15	37.93% 17.30%	51.14% 22.62%	64.41% 54.34%	37.15% 8.28%	15.17%	8.83% 13.38%	-4.26% 24.94%	-30.86% 27.35%	86.01% 29.70%	17.58%
FY 2015-16	10.21% 6.83%	16.43%	18.50% 55.05%		15.92%	7.65%	13.16%	10.73%	-65.94%	12.63% 14.28%
FY 2016-17 FY 2017-18	6.83% 15.97%	23.54% 15.97%	55.05% 15.97%	5.53% 15.97%	17.28% 15.97%	8.62% 15.97%		-12.39% 15.97%	-95.26% 15.97%	14.28% 15.97%
FY 2018-19	17.55%	24.00%	31.03%	2.42%	14.70%	7.71%	2.28%	0.01%	-78.93%	12.47%
FY 2019-20	22.32%	32.15%	20.41%	7.50%	13.99%	7.13%	19.05%	16.36%	7329.49%	13.47%
Estimated FY 2020-21 Estimated FY 2021-22	7.99% 4.99%	11.29%	17.53% 10.75%	0.88%	5.53% 8.68%	3.46%	2.66%	-2.87% -0.06%	85.63% 0.85%	5.68%
Estimated FY 2022-23	5.06%	6.76%	10.81%	0.04%	8.69%	3.18%		0.04%	0.00%	6.48%
			LTHH Average Utilizers Pe	er Month Per Service Per Fiscal Y	ear <sup>(2)</sup>					
LONG-TERM HOME HEALTH	Physical Therapy (for 0-21 years LTHH)	Occupational Therapy (for 0-21 years LTHH)	Speech and Language Therapy (for 0-21 years LTHH)	Registered Nursing/Licensed Practical Nurse	Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First Visit of Day	Registered Nursing Brief Second or More Visit of Day	Total <sup>©</sup>	
FY 2011-12	596	637	530		2,938	2,009	271	137		5,586 5,933
FY 2012-13 FY 2013-14	655 913	691 1,015	556 899	2,723 3,092	3,093 3,324	2,132 2,285	368 339	152		6.862
FY 2014-15	1,080	1,249	1,352		3,644	2,581	393	142		7,693
FY 2015-16 FY 2016-17	1,176 1,366	1,451	1,616 2,192		3,869 4,201	2,734 3,023	414 426	155 174		8,290 9,290
FY 2017-18	1,533	2,134	2,894	3,939	4,799	3,577	499	201		10.957
FY 2018-19 FY 2019-20	1,725	2,399	3,526 4.287	3,642 3,581	5,103 5,372	3,839 4.038	454 507	182 185		11,829 12,947
FY 2019-20 Estimated FY 2020-21	2,000	3,046	4,287 5,213		5,5/2	4,038 4,291	535	185		14,023
Estimated FY 2021-22	2.313	3,923	5,776	3,714	6,014	4,425	535	185		14,694
Estimated FY 2022-23	2,430	4,188		3,714 tilizers Per Month Per Service Per		4,564	535	185		15,275
	1	<u> </u>	JIHH Percent Change Average U	tilizers Per Month Per Service Per	riscai Year					
LONG-TERM HOME HEALTH	Physical Therapy (for 0-21 years LTHH)	Occupational Therapy (for 0-21 years LTHH)	Speech and Language Therapy (for 0-21 years LTHH)		Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First Visit of Day	Registered Nursing Brief Second or More Visit of Day	Total <sup>(7)</sup>	2018/
FY 2012-13 FY 2013-14	9.90% 39.39%	8.48% 46.89%	4.91% 61.69%	6.45% 13.55%	5.28% 7.47%	6.12% 7.18%	35.79% -7.88%	10.95% -23.68%		15.65%
FY 2014-15	18.29%	23.05%	50.39%	4.62%	9.63%	12.95%	15.93%	22.41%		12.11%
FY 2015-16 FY 2016-17	8.89% 16.16%	16.17%	19.53% 35.64%	2.53%	6.17%	5.93% 10.57%	5.34% 2.90%	9.15%		7.76%
FY 2017-18	12.19%	22.26% 20.30%	32.01%							12.06%
FY 2018-19 FY 2019-20	12.56%			16.82%	8.58% 14.23%	18.33%	17.21%	12.26% 15.42%		12.06%
	120000	12.42%	21.84%	16.82% -7.55%	14.23% 6.35%	18.33% 7.32%	17.21% -9.06%	15.42% -9.17%		12.06% 17.95% 7.95%
Estimated FY 2020-21	15.95% 10.10%	12.42% 26.96% 13.49%	21.84% 21.60% 21.60%	16.82%	14.23%	18.33%	17.21%	15.42%		12.06% 17.95% 7.95% 9.45% 8.31%
Estimated FY 2021-22	15.95% 10.10% 5.00%	12.42% 26.96% 13.49% 13.48%	21.84% 21.60% 21.60% 10.79%	16.82% -7.55% -1.67% 3.71% 0.00%	14.23% 6.35% 5.27% 5.81% 5.80%	18.33% 7.32% 5.19% 6.27% 3.17%	17.21% -9.06% 11.65% 5.52% 0.00%	15.42% -9.17% 1.42% 0.00% 0.00%		12.06% 17.95% 7.95% 9.45% 8.31%
	15.95% 10.10%	12.42% 26.96% 13.49%	21.84% 21.60% 21.60% 10.79% 10.80%	16.82% -7.55% -1.67% 3.71% 0.00%	14.23% 6.35% 5.27% 5.81%	18.33% 7.32% 5.19% 6.27%	17.21% -9.06% 11.65% 5.52% 0.00%	15.42% -9.17% 1.42% 0.00%		12.06% 17.95% 7.95% 9.45%
Estimated FY 2021-22	15.95% 10.10% 5.00%	12.42% 26.96% 13.49% 13.48%	21.84% 21.60% 21.60% 10.79% 10.80%	16.82% -7.55% +1.67% 3.71% 0.00% 0.00%	14.23% 6.35% 5.27% 5.81% 5.80%	18.33% 7.32% 5.19% 6.27% 3.17%	17.21% -9.06% 11.65% 5.52% 0.00%	15.42% -9.17% 1.42% 0.00% 0.00%	Total	12.06% 17.95% 7.95% 9.45% 8.31%
Estimated FY 2021-22 Estimated FY 2022-33  LONG-TERM HOME HEALTH  FY 2011-12	15,95% 10.10% 5.00% 5.10% Flysical Therapy (for 0-21 years LTHH)	12.42% 26.96% 13.45% 6.76% Occupational Therapy (for 0-21 years LTHH)	21.84% 21.60% 21.60% 10.79% 10.79% LTHH Cost Per Util Speech and Language Therapy (for 6-21 years LTHH) \$6,366.34	16.82% 27.53% 37.57% 16.7% 37.75% 0.00% 0.00% izer Per Service Per Fiscal Year Registered Nursing/Licensed Practical Nurse 88.576.23	14.23% 6.35% 5.27% 5.81% 5.80% 1.80%	18.33% 7.33% 5.19% 6.27% 3.12% 4.14% Home Health Aid Extended	17,21% 9,00% 11,65% 11,65% 5,52% 0,00% 0,00% Registered Nursing Brief First Visit of Day \$\$19,021,28\$	15.42% 9.17% 1.42% 0.00% 0.00% 0.00% 0.00% Registered Nursing Brief Second or More Visit of Day \$20,202.79	Tetal	12,06% 17,95% 7,95% 9,45% 8,31% 4,78% 3,95%
Estimated FY 2021-22 Estimated FY 2022-23  LONG-TERM HOME HEALTH  FY 2011-12 FY 2011-12	15.95% 10.10% 5.00% 5.10% Physical Therapy (for 0-21 years LTHH) \$6,084.91	12.42% 26.96% 13.49% 13.48% 6.76% Occupational Therapy (for 0-21 years LTHH) 55.409.00	21,84% 21,60% 21,60% 21,60% 10,70% 10,70% LTHH Cost Per Util Speech and Language Therapy (for 0-21 years LTHH) \$63,65.34	16.82%	14.23% 6.35% 6.35% 5.27% 5.27% 5.80% 5.80% 6.58% 6.58% 5.80% 5.80% 5.80% 5.80% 5.80% 5.80% 5.80% 5.80%	18.33% 7.32% 5.19% 6.27% 3.12% 3.14% Home Health Aid Extended	17.21% 9.000% 19.000% 11.65% 1.165% 0.00% 0.00% 0.00% Registered Nursing Brief First Visit of Day \$19.021.28 \$17.400.92	15.42% -9.17% -1.42% -1.42% -0.00% -0	Total	12.0%; 11.95%; 11.95%; 9.45%; 9.445%; 8.31%; 4.75%; 13.95%; 527,971.50 526,716.23; 527,182.33
Entimated FY 2021-23	15.95% 10.10% 5.00% 5.10% Physical Therapy (for 0-21 years LTHH) 56.084.91 56.006.37 56.000.37	12.42% 26.96% 13.49% 13.48% 6.76%  Occupational Therapy (for 6-21 years LTHH) \$5,409.00 \$55,524.21 \$5,684.18 \$5,664.15	21.84% 21.60% 21.60% 21.60% 10.70% 10.80% LTHI Cost Pr Util  Speech and Language Therapy (for 0-21 years LTHH) 55.365.34 56.313.37 56.421.48	16.82% 7.55% 1.167% 1.167% 0.00% 0.00% 0.00% izer Per Service Per Fiscal Year Registered Nursing/Licensed Practical Nurse 88,576.23 88,194.08 98,897.05	14.23% 6.35% 5.27% 5.27% 5.81% 5.80% 5.80% 6.58%	18.33% 7.32% 5.59% 6.27% 1.12% 3.14% Home Health Aid Extended \$18.828.07 \$17.769.23 \$18.93.11 \$18.81.11.68	17,21% 9,000% 19,000% 11,65% 1,165% 0,00% 0,00% 0,00% Registered Nursing Brief First Visit of Day \$19,021,28 \$17,400,92 \$181,779,00 \$19,502,3	15.42% -9.17% -1.42% -0.00% -0	Total	12.0%; 11.95%; 11.95%; 9.34%; 9.44%; 8.31%; 4.75%; 1.95%; 527.01.50 526.716.23 527.16.23 527.16.23
Estimated FY 2021-22	15.05% 10.10% 5.00% 5.00% Physical Therapy (for 0-21 years 1.THH) 55.084.91 55.008.73 55.008.73 55.008.73	12.42% 26.90% 13.87% 13.47% 13.48% 6.76% Occupational Therapy (for 0-21 years LTHH) SS,409.00 SS,524.21 SS,684.18 SS,684.35 SS,684.35 SS,685.65	21.84% 21.60% 21.60% 21.60% 10.79% 10.80% 1.08% 1.THH Cost Per Util Speech and Language Therapy (for 0-21 years LTHH) 56,366.34 56,315.37 56,421.48 56,589.99	16.82%	14.23% 6.35%	18.33% 7.32% 5.19% 6.27% 3.12% 3.14% Home Health Aid Extended 518.928.07 517.769.23 518.04.11 518.11.08 518.42.05	1721s; 3-0695, 116595, 5-5275, 0.0095,	15.42% 9-17% 1-42% 0.00% 0	Total	12.0%; 11.95%; 1.95%; 9.45%; 8.31%; 4.75%; 3.39%; 5.21,071.50 526,716.23; 527,631.81 528,882.25
Estimated FY 2021-22 Estimated FY 2022-23  LONG-TERM HOME HEALTH  PY 2011-22  FY 2011-02  FY 2011-07  FY 2011-07	15,99%, 10,10%, 5,00%, 5,10%, 5,10%, Physical Therapy (for 6-21 years LTHI) 56,061.73 56,061.73 58,062.73 58,062.28 53,538.97 53,538.97 53,538.97	12.42% 26.90% 13.87% 13.87% 13.87% 15.48% 6.70%  Occupational Therapy (for 0-21 years LTHH) \$5.409.00 \$5.53-21 \$5.684.18 \$5.695.05 \$5.75.01 \$5.75.01 \$5.75.01	2   84%   2   2160%   2   2160%   2   260%   10.79%   10.79%   1.THH Cost For Cull Speech and Language Therapy (for 0-21 years LTHH) 55,316,34 36,315,37 56,422,48 57,366,5316 57,366,5316 57,366,556 56,560,88	16.82% -1.735% -1.67% -1.735% -1.67% -1.71% -1.71% -1.70%	1 123% 6.35% 5.27% 5.38% 5.80% 5.80% 5.80% 5.80% 5.21,876.80 5.21,876.80 5.21,876.80 5.27,289.11 5.27,289.11 5.27,289.11	18.33% 7.32% 5.19% 6.27% 3.12% 1.16% Home Health Aid Extended 518.2807 517.709.23 518.9311 318.111.08 318.411.07 318.709.17 318.709.	172115	15.42%  -9.17% -9.17% -9.17% -0.00% -	Total	12.0% 17.95% 7.95% 9.45% 8.31% 4.75% 3.35% \$2.70,1.50 \$2.70,1.50 \$2.70,1.50 \$2.70,1.50 \$2.70,1.50 \$2.70,1.50 \$2.70,1.50
Estimated FY 2021-32	15.99%. 10.10%. 5.00%. 5.10%. 5.10%. Physical Therapy (for 6-21 years 1.THH) 50.084.91 50.003.73 50.003.74 50.003.75 53.725.47 53.725.47 53.725.77 53.725.77	12.42% 26.90% 13.49% 13.49% 6.70% 14.48% 6.70% 9.52421 9.534970 9.53421 9.534970 9.53421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421 9.534970 9.535421	2184% 2160% 2160% 10.75% 10.75% 10.75% 1.THH Cost Per Cult Speech and Language Therapy (for 9-21 years LTHH) 5,515,373 5,612,373 5,612,373 5,613,3	1.6.82%	14.23% 6.35% 5.27% 5.27% 5.81% 5.80% 5.80% 1.80%	18.33% 7.32% 5.31% 6.27% 3.32% 3.34% Home Health Aid Extended 518.828.07 517.70.23 518.605.75 518.605.75 518.707.70 517.70.21 518.707.71 517.71.10 517.71.10 517.71.10 517.71.10 517.77.10 517.77.10	1721s,	15.42% -9.17% -0.17% -0.10% -0.00% -0	Total	12.09% 17.95% 7.95% 9.45% 8.45% 8.45% 1.35
Estimated FY 2021-22 Estimated FY 2022-23  LONG-TERM HOME HEALTH  PY 2011-22  FY 2011-02  FY 2011-07  FY 2011-07	15,99%, 10,10%, 5,00%, 5,10%, 5,10%, Physical Therapy (for 6-21 years LTHI) 56,061.73 56,061.73 58,062.73 58,062.28 53,538.97 53,538.97 53,538.97	12.42% 26.90% 13.89% 13.89% 13.89% 6.70%  Occupational Therapy (for 0-21 years LTHH) \$5.409.00 \$5.524.21 \$5.648.18 \$5.664.35 \$5.529.35 \$5.529.35 \$5.529.35 \$5.529.35 \$5.529.35	2   84%   2   2160%   2   2160%   2   260%   10.79%   10.79%   1.THH Cost For Cull Speech and Language Therapy (for 0-21 years LTHH) 55,316,34 36,315,37 56,422,48 57,366,5316 57,366,5316 57,366,556 56,560,88	1.6.82%	H 123% 6.35% 6.35% 5.27% 5.27% 5.36% 5.36% 5.36% 5.36% 5.36% 5.36% 5.36% 5.36% 5.36% 5.35%	18.33% 7.32% 8.50% 3.12% 1.12% Home Health Aid Extended 518.828.07 517.706.23 518.818.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75	17 21%	15.42%  -9.17% -9.17% -9.17% -0.00% -	Tetal	12 (26%) 17 (25%) 7 (25%) 8 (2
Entimated FY 2021-22 Entimated FY 2022-23  LONG-TERM HOME HEALTH  PY 2011-12  FY 2011-13  FY 2015-14  FY 2015-14  FY 2015-16  FINITIAL FY 2015-16  Entimated FY 2012-16  Entimated FY 2012-16	15.99%, 10.10%, 5.00%, 5.10%, 7.10%, Physical Therapy (for 6-1) years LTHI) 56.006.07, 56.006.07, 56.006.07, 56.006.07, 56.002.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.03	12.42% 20.90%, 13.49%, 13.49%, 13.49%, 6.70%  Occupational Therapy (for 0-21 years LTHI)  \$5.409.00 \$5.534.11 \$5.534.13 \$5.564.13 \$5.576.10 \$5.5736.10 \$5.5736.10 \$5.5736.10 \$5.5736.20 \$5.	21845/2 21.60% 21.60% 21.60% 21.60% 21.60% 21.60% 21.60% 21.60% 25.60% 2	1.6.82% - 1.75% - 1.67% - 1.75% - 1.67% - 3.71% - 0.00% - 1.00	14 22% 6 35% 5 32% 5 32% 5 38%	18.33% 7.732% 7.32% 5.19% 6.27% 3.12% 3.12% 1.10	172115	15.42%  -9.17% -1.42% -0.00% -	Tetal	12,00% 1735% 735% 3,15% 4,75% 3,55%
Estimated FY 2021-22	15.99%, 10.10%, 5.00%, 5.10%, 10.10%, 5.00%, 5.10%, 10	12.42% 26.90% 13.89% 13.89% 13.89% 6.70%  Occupational Therapy (for 0-21 years LTHH) \$5.409.00 \$5.524.21 \$5.648.18 \$5.664.35 \$5.529.35 \$5.529.35 \$5.529.35 \$5.529.35 \$5.529.35	2   84%   2   21.60%   2   21.60%   2   26.00%   10.70%   10.70%   10.70%   1.THH Cost Per Gill   Speech and Language Therapy (for 9-21 years LTHH)   5,516.51   5,51	16.82% -1.75% -1.25% -1.27% -1	H 123% 6 35% 5 35%	18.33% 7.32% 8.50% 3.12% 1.12% Home Health Aid Extended 518.828.07 517.706.23 518.818.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75 518.88.05.75	172115	15.42% 9-17% 1-42% 0.00%, 0.00	Total	12 (26%) 17 (25%) 7 (25%) 8 (2
Entimated FY 2021-22 Entimated FY 2022-23  LONG-TERM HOME HEALTH  PY 2011-12  FY 2011-13  FY 2015-14  FY 2015-14  FY 2015-16  FINITIAL FY 2015-16  Entimated FY 2012-16  Entimated FY 2012-16	15.99%, 10.10%, 5.00%, 5.10%, 7.10%, Physical Therapy (for 6-1) years LTHI) 56.006.07, 56.006.07, 56.006.07, 56.006.07, 56.002.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.03	12.42% 20.90%, 13.49%, 13.49%, 13.49%, 6.70%  Occupational Therapy (for 0-21 years LTHI)  \$5.409.00 \$5.534.11 \$5.534.13 \$5.564.13 \$5.576.10 \$5.5736.10 \$5.5736.10 \$5.5736.10 \$5.5736.20 \$5.	2   84%   2   21.60%   2   21.60%   2   26.00%   10.70%   10.70%   10.70%   1.THH Cost Per Gill   Speech and Language Therapy (for 9-21 years LTHH)   5,516.51   5,51	1.6.82% - 1.75% - 1.67% - 1.75% - 1.67% - 3.71% - 0.00% - 1.00	H 123% 6 35% 5 35%	18.33% 7.732% 7.32% 5.19% 6.27% 3.12% 3.12% 1.10	172115	15.42%  -9.17% -1.42% -0.00% -	Teal	12,00% 1735% 735% 3,15% 4,75% 3,55%
Entimated FY 2021-22	15.99%, 10.10%, 5.00%, 5.10%, 7.10%, Physical Therapy (for 6-1) years LTHI) 56.006.07, 56.006.07, 56.006.07, 56.006.07, 56.002.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.02.28, 56.03	12.42% 20.90%, 13.49%, 13.48%, 6.76%  Occupational Therapy (for 0-21 years LTHII)  SS.409.00 SS.524.21 SS.684.18 SS.684.58 SS.694.78 SS.786.10 SS.	2   84%   2   21.60%   2   21.60%   2   26.00%   10.70%   10.70%   10.70%   1.THH Cost Per Gill   Speech and Language Therapy (for 9-21 years LTHH)   5,516.51   5,51	16.82%   1-7.55%   1-7.5	H 123% 6 35% 5 35%	18.33% 7.732% 7.32% 5.19% 6.27% 3.12% 3.12% 1.10	172115	15.42%  -9.17% -1.42% -0.00% -	Total	12.069 17.959 7.859 7.859 8.17
Entimated FY 2021-22 Entimated FY 2021-23  LONG-TERM HOME HEALTH  PY 2011-15 PY 2011-15 PY 2011-16 Entimated FY 2011-25 Entimated FY 2012-25 Entimated PY 2012-25 Entimated PY 2012-25	15.95%. 10.10%. 5.00%. 5.00%. 5.10%.  Physical Therapy (for 621 years 1711H) 5.0,084.91 \$6,063.73 \$6,003.7	12.42% 26.90% 13.80% 13.80% 13.80% 13.80% 13.80% 13.80% 15	2   848/5   21.60%	16.82%	1423% 6.35% 5.25% 5.25% 5.38% 5.38% 5.38% 1.38% 1.38% 1.3845%	1833% 732% 732% 732% 732% 732% 732% 732% 7	172115	15.42%      1.542%      1.42%      1.42%      1.60%      1.		12.06/1 17359-5 17359-
Entimated FY 2021-22	15 95%. 16.10%. 5.00%. 5.10%. Physical Therapy (for 6-21) years LTHH) 56,063.73 56,063	12.42% 20.90%, 13.49%, 13.48%, 6.76%  Occupational Therapy (for 0-21 years LTHII)  SS.409.00 SS.524.21 SS.684.18 SS.684.58 SS.694.78 SS.786.10 SS.	21845/2 216076 216076 216076 216076 216076 216076 217076 2	16.82%	1 1 22%	18.33% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 8.32% 8.318,23207 8.317,769,23 8.318,032,37 8.31	172115 - 9.0059, - 9.0059, - 11.6575, - 9.0059, - 9.5275, - 0.0076	15.42%  -9.17% -1.42% -0.00% -		12,000 173559 73559 73559 3,557 3,557 3,557 3,557 3,557 3,557 3,575 3,57
Estimated FY 2021-22	15.93%. 16.10%. 3.00%. 5.10%. Physical Therapy (for 0-21 years LTHH) 56,063.73 56,063.	12.42% 22.95%, 13.89%, 13.89%, 13.48%, 6.70%, 13.48%, 6.70%, Occupational Therapy (for 6-21 years LTHII) 5.564.218 5.564.218 5.564.318 5	2   84%-2   21.60%-2	16.82%	Home Health Aid Basic  Home Health Aid Basic  \$23,000,000,000,000,000,000,000,000,000,0	18.33% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 8.32% 8.318,23207 8.317,769,23 8.318,032,37 8.31	172115 - 9.0059, - 9.0059, - 11.6575, - 9.0059, - 9.5275, - 0.0076	15.42%      1.542%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.42%      1.44%      1.		12.069 17.359 7.3559 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.357 3.37 3.3
Entimated FY 2021-22 Entimated FY 2021-23  LONG-TERM HOME HEALTH  FY 2011-12  FY 2011-12  FY 2012-13  FY 2013-14  FY 2013-15  FINAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY A	15 95%. 16.10%. 5.00%. 5.10%. Physical Therapy (for 621) years LTHI) 5.004.01 5.004.01 5.004.01 5.004.01 5.005.03.72 5.000.03.77 5.000.03.	12.42% 20.90%, 13.49%, 13.49%, 13.45%, 6.75%  Occupational Therapy (for 0-21 years LTHH)  \$5,409.00 \$5,524.21 \$5,644.18 \$5,736.10 \$5,524.21 \$6,099.27 \$6,181.71 \$6,223.60 \$6,222.14  Occupational Therapy (for 0-21 years LTHH)  2.15%, 2.25%, 2	2   814%   2   21.60%   2   21.60%   2   21.60%   2   21.60%   2   21.60%   2   21.60%   2   21.60%   2   21.60%   2   21.60%   2   2   2   2   2   2   2   2   2   2	16.82%	14 23%	18.33% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 7.32% 18.6	172115  - 0.005% - 0.	15.42%  -9.17% -9.17% -9.17% -9.17% -9.17% -9.17% -9.17% -9.14% -		12.06/s 17.55% 7.35% 3.51% 3.5
Estimated FY 2021-22	15.99% 10.10% 5.00% 5.00% 10.10% Physical Therapy (for 6-21 years LTHH) 5.00.63.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03 5.00.03.73 5.00.03 5.0	12.42% 20.90%, 13.89% 13.89% 13.48% 6.70% 13.48% 6.70% 13.48% 6.70% 14.48% 15.40% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 1	2   184%   2   21.60%   2   160%   2   160%   2   160%   3   160%   3   160%   4   160%   5   160%	16.82%   1-1.00   1	1 1 22%	18.33% 7.732% 7.32% 7.32% 7.32% 7.32% 7.31% 1.32	172115	15.42%      1.542%      1.627%		12 (60%) 17 (75%) 17 (75%) 17 (75%) 18
Entimated FY 2021-23  Entimated FY 2021-23  Entimated FY 2021-23  LONG-TERM HOME HEALTH  PY 2011-14  FY 2011-15  FY 2011-15  FY 2011-16	15.95%. 10.10%. 5.00%. 5.00%. 5.10%. Physical Therapy (for 621 years 17HH) 5.008.49. 5.008.37. 5.009.37. 5	12.42% 20.90%, 13.89%, 13.89%, 13.89%, 13.89%, 13.48%, 6.70%, 13.48%, 14.48%, 15.60%, 15.60%, 15.60%, 15.60%, 15.60%, 15.60%, 15.60%, 15.70%,	2   84%   2   21.60%   2   21.60%   2   21.60%   2   10.70%   10.70%   10.70%   10.70%   1.THH Cost Per Gill   5   5   5   5   5   5   5   5   5   5   5	16.82%	1423% 6.35% 6.35% 5.27% 5.38% 5.38% 5.38% 5.38% 1.38%	1831% 732% 732% 732% 732% 732% 732% 732% 732	172115  - 0.0055	15.42%   1.54%   1.5		12 (26%) 173956 173956 173957 173956 173957
Estimated FY 2021-22	15.99% 10.10% 5.00% 5.00% 10.10% Physical Therapy (for 6-21 years LTHH) 5.00.63.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03.73 5.00.03 5.00.03.73 5.00.03 5.0	12.42% 20.90%, 13.89% 13.89% 13.48% 6.70% 13.48% 6.70% 13.48% 6.70% 14.48% 15.40% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 15.524.21 15.64% 1	2   184%   2   21.60%   2   160%   2   160%   2   160%   3   160%   3   160%   4   160%   5   160%	16.82%	1 1 22%	18.33% 7.732% 7.32% 7.32% 7.32% 7.32% 7.31% 1.32	172115  - 0.0055	15.42%      1.542%      1.627%		12,00% 17359

### Exhibit G - COMMUNITY BASED LONG-TERM CARE - LONG-TERM HOME HEALTH Cash Based Actuals and Projections by Service

		LTHH Units Per Ut	ilizer Per Service Per Fiscal Year							
LONG-TERM HOME HEALTH	Physical Therapy (for 0-21 years LTHH)	Occupational Therapy (for 0-21 years LTHH)	Speech and Language Therapy (for 0-21 years LTHH)	Registered Nursing/Licensed Practical Nurse	Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First Visit of Day	Registered Nursing Brief Second or More Visit of Day		
FY 2011-12 FY 2012-13	60	54	58	92	750	1,900	292 268	443		
	60	55	58		757					
FY 2013-14 FY 2014-15	56 54	52	55 54	99 100	753 749	1,690 1,664	259 272	381 386		
FY 2014-15 FY 2015-16	54	51			749 813		2/2	380		
FY 2015-16 FY 2016-17	55	52			864			377		
FY 2017-18	51	95		167	903	1,654	285	308		
FY 2018-19	51	51			942					
FY 2019-20	52	53			1,007			375		
Estimated FY 2020-21 Estimated FY 2021-22	52 52	52	52 52	120 120	1,015 1,043	1,567 1,567	320 320	368 368		
Estimated FY 2021-22	52	52	52	120	1,043		320			
		LTHH Percent Change in Uni	its Per Utilizer Per Service Per Fis	cal Year		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
LONG-TERM HOME HEALTH	Physical Therapy	Occupational Therapy	Speech and Language Therapy (for 0-21 years LTHH)	Registered Nursing/Licensed	Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First	Registered Nursing Brief		
FY 2012-13	(for 0-21 years LTHH)	(for 0-21 years LTHH)	(for 0-21 years LTHH)	Practical Nurse	0.93%	-5 53%	Visit of Day	Second or More Visit of Day		
FY 2013-14	-6.67%	-5.45%	-5.17%	12.50%	-0.53%	-5.85%	-3.36%	-15.52%		
FY 2014-15	-3.57%	-1.92%	-1.82%	1.01%	-0.53%	-1.54%	5.02%	1.31%		
FY 2015-16	0.00%	0.00%	0.00%	4.00%	8.54%	0.90%	6.99%	0.78%		
FY 2016-17	1.85%	1.96%	-3.70%	4.81%	6.27%	2.68%	3.44%	-3.08%		
FY 2017-18 FY 2018-19	-7.27% 0.00%	82.69% -46.32%	1.92%	53.21% -31.14%	4.51% 4.32%	-4.06% -4.41%	-5.32% 8.42%	-18.30% 5.19%		
FY 2019-20	1 96%	3 92%	-3.64%	6.09%	6 90%	0.76%	5 50%	15.74%		
Estimated FY 2020-21	0.00%	-1.89%	-1.89%	-1.64%	0.79%	-1.63%	-1.84%	-1.87%		
Estimated FY 2021-22	0.00%	0.00%	0.00%	0.00%	2.76%	0.00%	0.00%	0.00%		
Estimated FY 2022-23	0.00%	0.00%			2.68%	0.00%	0.00%	0.00%		
				Current Year						
LONG-TERM HOME HEALTH	Physical Therapy (for 0-21 years LTHH)	Occupational Therapy (for 0-21 years LTHH)	Speech and Language Therapy (for 0-21 years LTHH)	Registered Nursing/Licensed Practical Nurse	Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First Visit of Day	Registered Nursing Brief Second or More Visit of Day	Telehealth <sup>(1)</sup>	Total
FY 2018-19 Average Utilizers Per Month	2 000	3.046	4.287	3 581	5,372	4.038	507	185	N/A	12.947
F Y 2018-19 Average Utilizers Per Month  Litilizer Trend Selected <sup>(4)</sup>	10.10%	13.49%	21.60%		5.81%	6.27%		0.00%	N/A	8.31%
FY 2020-21 Estimated Average Utilizers Per Month	2,202	3,457	5,213	3.714	5.684		535	185	N/A	14.023
Bottom Line Impacts	, and the second	.,				, i				,
Total Bottom Line Impacts	0	0	0	0		0	0	0	N/A	0
FY 2020-21 Estimated Average Utilizers Per Month	2,202	3,457			5,684	4,291			N/A	14,023
FY 2018-19 Average Units Per Utilizer Per Year	52	53	53	122	1,007	4,291 1,593	326	375	N/A N/A	14,023
FY 2018-19 Average Units Per Utilizer Per Year  Percentage Selected to Modify Units Per Utilizer <sup>(5)</sup>	52 0.00%	53 -1.89%	53 -1.89%	122 -1.64%	1,007 0.79%	4,291 1,593 -1.63%	326 -1.84%	375 -1.87%	N/A N/A N/A	14,023
FY 2018-19 Average Units Per Utilizer Per Year  Percentage Selected to Modify Units Per Utilizer <sup>(5)</sup> FY 2020-21 Estimated Average Units Per Utilizer	52 0.00% 52	53 -1.89% 52	53 -1.89% 52	122 -1.64% 120	1,007 0.79% 1,015	4,291 1,593 -1.63% 1,567	326 -1.84% 320	375 -1.87% 368	N/A N/A	14,023
FY 2018-19 Aerage Luits Pet Unliuer Per Year  Percentage Selected to Modify Luits Per Unliuer  FY 2019-20 Average Paid Rate Per Unit  Luit Average Paid Rate Per Luit  Luit Average Paid Rate Per Luit  Luit Average Paid Rate Trend Selected	52 0.00% 52 \$120.19 -1.00%	53 -1.89% 52 \$120.92 -1.00%	53 -1.89% 52 \$131.18 -1.00%	122 -1.64% 120 \$110.22 -1.00%	1,007 0.79% 1,015 \$38.03 +1.00%	4,291 1,593 +1,637 1,567 \$11,37 +1,00%	326 -1.84% 320 \$74.93 -1.00%	375 -1.87% 388 \$52.09 -1.00%	N/A N/A N/A N/A N/A N/A	14,023
FY 2018-19 Average Units Per Utilizer Pe Year Processing Selected Mondify Units Per Utilizer Pi FY 2020-21 Estimated Average Units Per Utilizer FY 2020-21 Estimated Average Units Per Utilizer FY 2019-20 Average Pital Rate Per Utilizer Unit Average Pital Rate Per Utilizer FY 2020-21 Average Pital Rate Per Utilizer FY 2020-21 Average Pital Rate Per Utili	52 0.00% 52 \$120.19 -1.00% \$118.99	53 -1.89% 52 \$120.92 -1.00% \$119.71	53 -1.89% 52 \$131.18 -1.00% \$129.87	122 -1.64% 120 \$110.22 -1.00% \$109.12	1,007 0.79% 1,015 \$38.03 -1.00% \$37.65	4,291 1,593 -1,63% 1,567 \$11,37 -1,00% \$11,26	326 -1.84% 320 \$74.93 -1.00% \$74.18	375 -1.87% 368 \$52.09 -1.00% \$51.57	N/A N/A N/A N/A N/A N/A N/A	
FY 2018-19 Average Units Per Utilizer Fer Year Percentage Scleect Monthly Units Per Utilizer FY 2008-21 Estimated Average Units Fer Utilizer FY 2008-21 Estimated Average Units Fer Utilizer FY 2008-21 Average Pail Rate Fer Utilizer FY 2008-21 Average Pail Rate Fer Utilizer EY 2008-21 Average Pail Bate Fer Utilizer EX 2008-21 Average Pail Bate Fer Utilizer	52 0.00% 52 \$120.19 -1.00%	53 -1.89% 52 \$120.92 -1.00%	53 -1.89% 52 \$131.18 -1.00%	122 -1.64% 120 \$110.22 -1.00% \$109.12	1,007 0.79% 1,015 \$38.03 +1.00%	4,291 1,593 +1,637 1,567 \$11,37 +1,00%	326 -1.84% 320 \$74.93 -1.00% \$74.18	375 -1.87% 388 \$52.09 -1.00%	N/A N/A N/A N/A N/A N/A	14,023 5428,123,700
FY 2018-19 Average Units Per Utilizer Pe Year Processing Selected Modify Units Per Utilizer P FY 2020-21 Estimated Average Units Per Utilizer FY 2019-20 Average Paid Rate Per Utilizer FY 2019-20 Average Paid Rate Per Utilizer Unit Average Paid Rate Per Utilizer FY 2020-21 Average Paid Rate Per Unit Estimated FY 2020-21 Base Expenditure Estimated FY 2020-21 Base Expenditure Estimated FY 2020-21 Base Expenditure	52 0.00% 52 \$120.19 -1.00% \$118.99 \$13,624,831	53 -1.89% 52 \$120,92 -1.00% \$119.71 \$21,519,548	53 -1.89% 52 \$131.18 -1.00% \$129.87 \$35,204,640	122 -1.64% 120 \$110.22 -1.00% \$199.12 \$48,632,602	1,007 0,79% 1,015 \$38.03 -1,00% \$37.65 \$217,212,639	4,291 1,593 1,637 1,567 11,37 1,100% 11,26 575,712,206	326 -1.84% 320 574-93 -1.00% 574.18 \$12,699,616	375 -1.87% 368 \$52.09 -1.00% \$51.57 \$3,510,886	N/A N/A N/A N/A N/A N/A N/A N/A S6,732	\$428,123,700
FY 2018-19 Average Units Per Utilizer Per Year Proceeding Selected Modify Units Per Utilizer FY 2020-21 Estimated Average Units Per Utilizer FY 2020-22 Average Plate Ruse Text Utilizer FY 2020-23 Average Plate Ruse Text Utilizer Units Average Plate Ruse Text Utilizer Estimated FY 2020-21 Base Exposition Estimated FY 2020-21 Base Exposition Estimated Parage Units Impair Estimated Units Impair Estimated Parage Units Inspection  Association of the Selection Units Inspection Units Inspection Units Inspection Units Inspect Units	52 0.00% 52 \$120.19 -1.00% \$118.99 \$13,624,831	53 -1.89% 52 \$120.92 -1.00% \$119.71 \$21,519,548	53 -1.89% 52 531.18 -1.00% 5129.87 \$35,204,640	122 -1.64% 120 \$110.22 -1.00% \$189.12 \$48,632,602	1,007 0.79% 1,015 \$38.03 -1,00% \$37.65 \$217,212,639	4,291 1,593 -1,637 1,547 511,247 -1,00% 511,26 575,712,206	326 -1.84% 329 320 \$74.93 -1.00% \$74.93 -1.00% \$74.81 \$74.81 \$12,699,616	375 -1.87% 368 \$52.09 -1.00% \$51.57 \$3,510,886	N/A N/A N/A N/A N/A N/A N/A	\$428,123,700 \$4,025
FY 2018-19 Average Units Per Utilizer Pe Year Processing Selected Modify Units Per Utilizer FY 2029-21 Estimated Average Units Per Utilizer FY 2029-21 Estimated Average Units Per Utilizer FY 2019-20 Average Pital Rate Per Utilizer Unit Average Pital Rate Per Utilizer FY 2029-21 Average Pital Rate Per Utili Estimated FY 2029-21 Base Expenditure Bettem Line Impact Telebenille Expenditure Adjustment Telebenille Expenditure Adjustment Telebenille Expenditure Adjustment Telebenille Expenditure Adjustment	52 0.00% 52 \$120.19 -1.00% \$118.99 \$13,624,831	53 -1.89% 52 \$120,92 -1.00% \$119.71 \$21,519,548	53 -1.89% 52 5331.18 -1.00% 5129.87 535,204.640	122 -1.64% 120 \$110.22 -1.00% \$10.22 -1.00% \$109.12 \$48.632,602 \$0 (\$21,302)	1,007 0,79% 1,015 \$38.03 -1,00% \$37.65 \$217,212,639	4,291 1,593 1,637 1,567 11,37 1,100% 11,26 575,712,206	326 -1.84% 329 320 \$74.93 -1.00% \$74.93 -1.00% \$74.81 \$74.81 \$12,699,616	375 -1.87% 368 \$52.09 -1.00% \$51.57 \$3,510,886	N/A N/A N/A N/A N/A N/A N/A S6,732	\$428,123,700
FY 2018-19 Average Units Per Utilizer Per Year Proceeding Selected Modify Units Per Utilizer FY 2020-21 Estimated Average Units Per Utilizer FY 2020-22 Average Plate Ruse Text Utilizer FY 2020-23 Average Plate Ruse Text Utilizer Units Average Plate Ruse Text Utilizer Estimated FY 2020-21 Base Exposition Estimated FY 2020-21 Base Exposition Estimated Parage Units Impair Estimated Units Impair Estimated Parage Units Inspection  Association of the Selection Units Inspection Units Inspection Units Inspection Units Inspect Units	52 0.00% 52 \$120.19 1.1.00% \$118.99 \$13,624,831 90 90	53 1.89% 52 \$120.92 1.100% \$119.71 \$21,519,548 50 50 50	53 1.89% 52 \$13.1.8 1.100% \$131.18 1.100% \$131.29,57 \$35,204,640  \$50 \$50 \$50	122 1.64% 120 \$110.22 1.10.07 \$110.22 1.10.07 \$199.12 \$48,62,602  \$90 (\$21,302) \$0 (\$21,302)	1,007 0,79% 1,015 \$38.03 1,100% \$37.65 \$217,212,639 \$90,9223 \$90 \$90,922 \$90,922	4.291 1.593 1.635 1.635 1.567 S137 1.005 S1137 1.005 S1126 S75,712,366 S9 (\$32,234) \$9 (\$32,234)	326 1.84% 320 574-93 1-1.00% 574.18 \$12,699,616 (55,458) 50	375 -1.87% 368 -52.09 -1.100% \$51.87 -5.351.87 -5.351.886 -5.360 -6.3607 -6.3607 -6.3607 -6.3607 -6.3607 -6.3607 -6.3607 -6.3607 -6.3607 -6.3607 -6.3607	N/A N/A N/A N/A N/A N/A N/A S6,732 \$4,025 \$0 \$0 \$3	\$428,123,700 \$4,025 (\$151,613) \$0 (\$147,588)
FY 2018-19 Average Units Per Utilizer Per Year Percentage Selected Modify Units Per Utilizer FY 2028-21 Estimated Average Units Per Utilizer FY 2028-21 Estimated Average Units Per Utilizer FY 2029-20 Average Plat Rate Per Utilizer Units Average Plat Rate Per Utilizer FY 2028-21 Average Plat Rate Per Utilizer Estimated FY 2028-21 Have Expositions Continued FY 2028-21 Expositions Con	\$2 0.00% \$22 \$12.00% \$111.99 \$115.024433 \$0 \$0 \$0 \$15.024433	53 1,899°52 52 520°52 519.71 5119.71 521,519,548 50 50 50 50 51,119,548	53 1.89% 52 52 5.1.10% 513.118 513.247 513.247 535.244.640 50 50 50 50 50 50 50 51,100% 51	122 1.164% 1.164% 1.190 1.100%	1,007 0,79% 1,015 S18,03 1,00% S37,65 S217,212,89 S0 (590,922) S0 (590,922) S117,121,71	4.291 4.291 1.593 1.593 1.635 1.567 5.11.375 5.11.375 5.11.26 5.75,712.266 (52.234) (52.234) (52.234) 5.75,77,875	326  1.84% 329  320  320  3210  574.93  574.18  512,699.616  50  (55,458)  (55,458)  \$12,694.816	375. 375. 3876. 3876. 3872.09 3873.07 3873.10.886. 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00	N/A N/A N/A N/A N/A N/A N/A N/A S-6,732 S-6,732 S-0 S-0 S-0 S-1,025 S-	\$428,123,700 \$4,025 (\$151,613) \$0 (\$147,588)
FY 2018-19 Average Units Per Utilizer Fe Year Percentage Selected Modify Units Per Utilizer FY 2008-21 Estimated Average Unit Fer Utilizer FY 2008-21 Estimated Average Unit Fer Utilizer FY 2008-21 Average Paid Rate Fe Utilizer FY 2008-21 Average Paid Rate Fe Utilizer Estimated FY 2008-21 Rate Expenditure Batton Lite Impacts Batton Lite Impacts To 2018-10 Res Depositioner Annualization of FY 2018-16 Res Principant Directed Programs Expansion* Z 2018-10 Res Australe Modeled Avisions Initiatives - PAR Savings Estimated FY 2008-21 Expenditure Estimated FY 2008-21 Expenditure Estimated FY 2008-21 Expenditure Estimated FY 2008-21 Expenditure	52 0.00% 52 52 512.019 -1.00% 5118.99 513.624,831 50 50 50 50 51,524,831 5,157,48	33 1.89% 32 32 32 32 32 32 3.100% 3.100% 3.119.71 321.519.548 30 30 30 30 31.19.548 30 30 30 30 30 30 30 30 30 30 30 30 30	53 1.89% 52 52 52 53 1.10% 1.00% 53 53 53 53 50 50 50 50 53 53 54 56 57 53 57 57 57 57 57 57 57 57 57 57 57 57 57	122 1-1.64% 129 120 120 1-1.00% 1310.22 1-1.00% 1310.22 1-1.00% 1310.22	1,007 0,79% 1,015 318,03 1,100% 337,65 \$37,65 \$5217,212,639 \$0 (\$99,922; \$0 (\$99,922; \$217,111,177 \$38,198.75	4.291 1.593 1.593 1.635 1.567 S137 1.005 S137 1.005 S137 1.005 S137 S107 S107 S107 S107 S107 S107 S107 S10	326 329 320 320 320 1.00% 514939 1.00% 55449 55448 512,699,616 50 (5,5458) (5,5458) 512,694,158 512,694,158	375.  1.876. 368. \$52.00 \$1.00%. \$51.00%. \$51.00%. \$51.00%. \$51.00%. \$50.00. \$51.00%	N/A N/A N/A N/A N/A N/A N/A S6,732 \$4,025 \$0 \$0 \$1,0757 N/A	\$428,123,700 \$4,025 (\$151,613) \$0 (\$147,588) \$427,976,112 \$30,519.8
FY 2018-19 Average Units Per Utilizer Per Year Percentage Selected Modify Units Per Utilizer FY 2028-21 Estimated Average Units Per Utilizer FY 2028-21 Estimated Average Units Per Utilizer FY 2029-20 Average Plat Rate Per Utilizer Units Average Plat Rate Per Utilizer FY 2028-21 Average Plat Rate Per Utilizer Estimated FY 2028-21 Have Expositions Continued FY 2028-21 Expositions Con	\$2 0.00% \$22 \$12.00% \$111.99 \$115.024433 \$0 \$0 \$0 \$15.024433	53 1,899°52 52 520°52 519.71 5119.71 521,519,548 50 50 50 50 51,119,548	53 1.89% pt. 1 52 52 53.118 pt. 1 1.00% pt. 1 513.24 pt. 1 535,24,640 pt. 1 50 50 50 50 535,24,640 pt. 1 535,24,640 pt. 1 545,240 pt.	122 1.1649; 1.1649; 1.107, 1.1009; 1.1	1,007 0,79% 1,015 S18,03 1,00% S37,65 S217,212,89 S0 (590,922) S0 (590,922) S117,121,71	4.291 1.593 1.593 1.635 1.567 S137 1.005 S137 1.005 S137 1.005 S15,712,366 S23,234 S30 (S23,234) S50 S51,72,72,86	326 1.184% 329 320 1.100% 574.93 574.18 512.699,616 50 (5,54.88) 53.93 5	375. 375. 3876. 3876. 3872.09 3873.07 3873.10.886. 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00 3870.00	N/A N/A N/A N/A N/A N/A N/A N/A S-6,732 S-6,732 S-0 S-0 S-0 S-1,025 S-	\$428,123,700 \$4,025 (\$151,613) \$0 (\$147,588)
FY 2018-19 Average Units Per Utilizer Fe Year Percentage Selected Modify Units Per Utilizer FY 2008-21 Estimated Average Unit Fer Utilizer FY 2008-21 Estimated Average Unit Fer Utilizer FY 2008-21 Average Paid Rate Fe Utilizer FY 2008-21 Average Paid Rate Fe Utilizer Estimated FY 2008-21 Rate Expenditure Batton Lite Impacts Batton Lite Impacts To 2018-10 Res Depositioner Annualization of FY 2018-16 Res Principant Directed Programs Expansion* Z 2018-10 Res Australe Modeled Avisions Initiatives - PAR Savings Estimated FY 2008-21 Expenditure Estimated FY 2008-21 Expenditure Estimated FY 2008-21 Expenditure Estimated FY 2008-21 Expenditure	52 0.00% 52 52 512.019 -1.00% 5118.99 513.624,831 50 50 50 50 51,524,831 5,157,48	33 1.89% 32 32 32 32 32 32 3.100% 3.100% 3.119.71 321.519.548 30 30 30 30 31.19.548 30 30 30 30 30 30 30 30 30 30 30 30 30	53 1.89% pt. 1 52 52 53.118 pt. 1 1.00% pt. 1 513.24 pt. 1 535,24,640 pt. 1 50 50 50 50 535,24,640 pt. 1 535,24,640 pt. 1 545,240 pt.	122 1.164% 1.200 1.510,22 1.100% \$110,22 1.100% \$100,22 1.100% \$100,22 (\$21,00%) (\$21,00%) (\$21,00%) \$13,088,66 \$13,088,66 \$13,088,66 \$2,74%	1,007 0,79% 1,015 318,03 1,100% 337,65 \$37,65 \$5217,212,639 \$0 (\$99,922; \$0 (\$99,922; \$217,111,177 \$38,198.75	4.291 1.593 1.593 1.635 1.567 S137 1.005 S137 1.005 S137 1.005 S15,712,366 S23,234 S30 (S23,234) S50 S51,72,72,86	326 1.184% 329 320 1.100% 574.93 574.18 512.699,616 50 (5,54.88) 53.93 5	375.  1.876. 368. \$52.00 \$1.00%. \$51.00%. \$51.00%. \$51.00%. \$51.00%. \$50.00. \$51.00%	N/A N/A N/A N/A N/A N/A N/A S6,732 \$4,025 \$0 \$0 \$1,0757 N/A	\$428,123,700 \$4,025 (\$151,613) \$0 (\$147,588) \$427,976,112 \$30,519 \$8
FY 2018-19 Average Units Per Utilizer Per Year Percentage Selected Modify Units Per Utilizer FY 2020-21 Estimated Average Units Per Utilizer FY 2020-22 Estimated Average Units Per Utilizer FY 2019-20 Average Place Per Utilizer Land Control Contro	\$2 0.00% \$3 \$1.2009 \$1.2009 \$1.2009 \$1.4009 \$1.4009 \$1.4009 \$1.4004 \$9 \$9 \$1.1000 \$1.1	3 5 3 4 5 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	53 -1.30% 52 -1.31% 53:18 -1.31% 53:24,444 -1.30% 50 -1.	122 1.16/9% 1.16/9% 1.18/9% 1.	1,007 0,79% 1,015 518,01 1,007 1,015 518,01 1,007 517,21,007 50,0	4.919 1.593 1.635/5 1.5567 1.1577 1.1	326  -1.84% 320  \$1.40% \$1.40% \$1.40% \$1.26%	375 3.1.579 3.88 \$52.09 1.0079 \$50.1.4079 \$5	NA A	\$428,123,700 \$4,025 \$131,6131 \$131 \$131 \$130 \$(\$147,588) \$422,796,112 \$333,193,8 \$-2,435,6
FY 2018-19 Average Units Per Utilizer Per Year Percentage Selected Modify Units Per Utilizer FY 2028-12 Estimated Average Units Per Utilizer FY 2028-12 Estimated Average Units Per Utilizer FY 2019-20 Average Plate Rate Per Utilizer Unit Average Plate Rate Per Utilizer FY 2028-12 News Expositions Estimated FY 2028-12 New Expositions Estimated FY 2028-12 New Expositions Estimated FY 2028-12 New Expositions Estimated FY 2028-12 News Expositions Total Beston Line Impacts Estimated FY 2028-12 Rependiture  Estimated FY 2028-13 Rependiture  Estimated FY 2028-13 Per Utilizer Cost  LONG-TERM HOME HEALTH  FY 2028-21 Estimated Average Utilizer Cost	\$23 0.00% \$3 \$1,200% \$2,200% \$3,200% \$3,200% \$3,200% \$3,200% \$4,000% \$	53 -1,30% 52 -1,30% 52 -1,30% 51 -1,30% 51 -1,30% 51 -1,30% 50 -1,	53 -1.80% 52 -1.3118 -1.10% 531.18 -1.10% 535.284,648 -50 -50 -50 -50 -50 -50 -50 -50 -50 -50	122 1.16/15,	1,007 0,79% 1,015 9,5800 1,000	4.919 1.593 1.63% 1.5867 51.137 1.40% 51.126 51.271,2366 52.712,236 52.2243 52.2243 53.57,57,58,58 57,57,58,68 1.264%	326  -1.84% 320  \$1.40% \$1.40% \$1.40% \$1.26%	375 3.1579 3.88 \$52.09 1.0079 \$53.07 \$53.150 \$	NAA	\$428,123,700 \$4,025 \$1316,133 \$131,033
FY 2018-19 Average Units Per Utilizer Per Year Percentase Selected Modify Units Per Utilizer FY 2029-12 Entimated Average Units Per Utilizer FY 2029-12 Average Pail Rate Per Utilizer FY 2019-20 Average Pail Rate Per Utilizer Unit Average Pail Rate Per Utilizer FY 2019-20 Average Pail Rate Per Utilizer Fatimated FY 2029-12 Base Expositions Entimated FY 2029-12 Base Expositions Telected Expositions Telected Expositions Telected Expositions Annualization of FY 2019-14 Ref Participant Directed Programs Expositions Total Boston Line Impress Entimated FY 2020-12 Expositions Estimated FY 2020-12 Expositions Extensive FY 2020-12 Expositions Extensive FY 2020-12 Expositions Extensive FY 2020-12 Expositions LONG-TERM HOME HEALTH FY 2020-12 Estimated Average Utilizer Cost Uniform Front Selected <sup>40</sup> Utilizer Trend Selected <sup>40</sup> Utilizer Trend Selected <sup>40</sup> Vi 2011-12 Estimated Average Utilizers Per Month Utilizer Trend Selected <sup>40</sup>	\$2 0.00% \$2 \$1,20% \$2,20% \$1,10% \$118,70% \$118,70% \$11,00% \$11	33 -1.89% \$2 -1.00% \$130.02 -1.00% \$119.71 \$21.519.548  50 -0.00 -	33 -1.89% 32.8 -1.818, 18.118, 18.128,	122 1.164%, 120 1.164%, 120 1.164%, 1310.22 1.100%, 1509.12 1.200%, 1521.000	1,007 0,79% 1,015 5,88.01 -1,00% S\$13,01 -1,00% S\$17,415,00 (590,022) (590,022) S\$17,11,1717 S\$18,198,75 -0,20% Home Health Aid Basic	4.591 1.593 1.6367 1.597 1.157 1.157 1.117 1.107	326  -1.84% 338  \$74.01  -1.00% \$1.10% \$1.20	375 3-1375 3-88 \$52.90 1.5076 \$53.91 \$53.97 \$53.18,856 \$9 \$53.97 \$53.89,279 \$53.89,279 \$53.89,279 \$53.89,279 \$53.89,279 \$53.89,279 \$53.89,279 \$53.89,279 \$53.89,279	NAA	\$428,123,700 \$4325,123,700 (515,613)
FY 2018-19. Average Units Per Utilizer Per Year Percentage Selected Modify Units Per Utilizer FY 2028-21 Estimated Average Units Per Utilizer FY 2028-22 Estimated Average Units Per Utilizer FY 2019-20 Average Plant Rare Per Utilizer Unit Average Plant Rare Ford Selected Unit Average Plant Rare Ford Selected Units Average Plant Rare Ford Selected Estimated FY 2028-21 Blant Exposition Estimated FY 2028-21 Blant Expositions Estimated FY 2028-21 Blant Expositions Estimated PY 2028-21 Blant Expositions To Estimated PY 2028-21 Blant Expositions Ford Boston Line Impacts Estimated FY 2028-21 Expositions Estimated PY 2028-21 Expositions Estimated PY 2028-21 Expositions Line Department Code LONG-TERM HOME HEALTH LY 2028-21 Estimated Average Utilizers Per Month Unities Proof Selected <sup>(1)</sup> FY 2021-22 Estimated Average Utilizers Per Month Unities Proof Selected <sup>(2)</sup> FY 2021-22 Estimated Average Utilizers Per Month Unities Proof Selected <sup>(3)</sup> FY 2021-22 Estimated Average Utilizers Per Month Unities Proof Selected <sup>(4)</sup> FY 2021-22 Estimated Average Utilizers Per Month Buttons Line Engage Per Month	\$2 0.00% \$2 \$1,00% \$2,00% \$1,00% \$1,00% \$1,00% \$0,0	33 -1.89% -2.22 -1.00% -3.10.70% -3.10.70% -3.10.70% -3.00	33 -1.89% 32 -1.89% 5131.18 -1.00% 5152.07.00 -1.00% 50 -0.00% 50	122 1.169% 1.169% 1.100% \$110.22 1.100% \$10.22 1.100% \$10.22 \$10.	1,007 0,79% 1,015 \$1,007 1,015 \$1,007 1,007 \$1,007	4.919 1.939 1.6393 1.6393 1.6393 1.5367 1.317 1.	326  -1.84% 338  \$1.84% \$1.20% \$1.40% \$1.20%	7375  -1.5776  -3.68  -5.200  -1.0076  -5.51.27  -5.51.200  -5.51.	NA N	\$428,123,790 \$4,025 \$3151,633 \$3151,633 \$4127,838 \$4227976,112 \$303,192,435  Total
FY 2018-19 Average Units Per Utilizer Per Year Percentage Selected Modify Units Per Utilizer FY 2020-21 Estimated Average Units Per Utilizer FY 2020-21 Estimated Average Units Per Utilizer FY 2020-21 Estimated Average Units Per Utilizer FY 2020-21 Average Paid Base Fee Units Estimated FY 2020-21 Base Expenditure Battom Line Impacts Battom Line Impacts To Defend the Selection of FY 2015-16 Re. 7 Participant Directed Programs Expansion* To Wardington of FY 2015-16 Re. 7 Participant Directed Programs Expansion* To Monitor Units Per U	\$2 0.00% \$1 \$1,00% \$2,00% \$1,0	33 -1,39% \$120,22 \$120,22 \$120,22 \$130,22 \$130,23 \$130	53 -1,30% -52,31,318 -53,318 -	122 1.16/19, 16/	1,007 0,79% 1,018 SS8,01 SS8,02 SS7,05 SS12,12,09 SS12,	4.391 1.593 1.63% 1.63% 1.597 3.11.72 1.597 5.11.72 1.597 5.71.72,366 5.72.71.72,366 5.72.71.72,366 5.72.72,366 6.72.72 1.72.7	326.  -1.84%, 1.	375 3-1879 3-1879 3-1879 3-1807 3-180	NAA	\$428,123,700 \$4,025 \$5151,613 \$131,613 \$131,613 \$131,613 \$131,613 \$131,706,113 \$10,19,58 \$2,43%  Total  14,023 4,79% 1,60%
FY 2018-19 Average Units Per Utilizer Fe Year Percentage Selected Modify Units Per Utilizer FY 2029-12 Estimated Average Units Per Utilizer FY 2029-12 Estimated Average Units Per Utilizer FY 2019-20 Average Plat Rate Per Utilizer Unit Average Plat Rate Per Utilizer FY 2029-13 Average Plat Rate Per Utilizer FY 2029-13 Average Plat Rate Per Utilizer Estimated Programs Expansions Estimated Programs Administration Annualization of FY 2018-18 Re. Participant Directed Programs Expansions Annualization of FY 2018-18 Re. Participant Directed Programs Expansions Fy 2018-18 Re. Associated Modificial Sestion Institutes - PAR Sessions Food Bottom Line Impacts Estimated FY 2020-21 Exponditure Estimated FY 2020-21 Exponditure  Estimated FY 2020-21 Per Utilizer Cost  LONG-TERM HOME HEALTH  FY 2020-21 Estimated Average Utilizers Per Month Utilizer Time Selectors  LONG-TERM HOME HEALTH  FY 2020-21 Estimated Average Utilizers Per Month Utilizer Time Selectors  Total Bettinn Line Impacts  Total Betinn Line Impacts  FY 2021-22 Estimated Average Utilizers Per Month	\$2 0.00% \$2 0.00% \$2 \$120.10 1.00% \$118.00 \$118.00 9 9 9 9 \$3 \$11,024,831 \$5,157.64 1.92% [for 0-21 years 1.Till1)  2.202 2.00% \$2 2.313	33 -1,89% 32 -1,89% 32 -1,100% 310,71 -1,100% 310,71 -1,100% 30 -1	33 -1.89% 32 -1.89% 313.18 -1.00% 313.18 -1.00% 30 -1.00	122 1-164% 1280 1-164% 1310-22 1-164% 1310-22 1-164% 1310-22 1-164% 1300 (SS1302) (SS1302) (SS1302) (SS1302) (SS1302) (SS1302) (SS1308) (S	1,007 0,79% 1,815 5,5801 1,407% 5,517,416,007 5,517,416,007 5,517,416,007 6,900,923 5,112,12,177 5,518,19,57 4,20% Home Health Aid Basic 5,644 5,544 6,014	4.191 1.593 1.6367 1.5367 1.1376 1.13	326  1.84% 328  \$328  \$74.91  1.00% \$514.85  \$0.00  (\$5.45%)  \$0.00  (\$5.45%)  \$0.00	7375  -1.8776  -368  -5.209  -1.0076  -5.51.677  -5.51.678  -5.51.678  -5.51.678  -5.51.678  -5.51.678  -5.51.678  -5.51.678  -5.51.678  -6.51.	NA N	\$428,123,790 \$4,025 \$3151,633 \$3151,633 \$4127,838 \$4227976,112 \$303,192,435  Total
FY 2018-19 Average Units Per Unitser Per Year Percentage Selected Modify Units Per Unitser* FY 2020-21 Entimated Average Units Per Unitser FY 2020-21 Entimated Average Units Per Unitser FY 2020-21 Entimated Average Units Research FY 2020-21 Average Pad Base Fye Units Entimated FY 2020-21 Base Expenditure Bottom Line Dopacts Technologies Angular Average Pad Base Fye Units Entimated FY 2020-21 Base Expenditure Bottom Line Dopacts Technologies Angular Adjustment* Technologies Entimated Average Unitser Annualization of FY 2015-18 & F. Participant Directed Programs Expansion* FY 2016-19 & As Deposition Adjustment* Technologies Company Company Company Expansion* Technologies Company Company Company Expansion* Technologies Company	\$2 0,00% \$3 \$1,00% \$2,10% \$1,00% \$1,00% \$1,00% \$1,00% \$1,00% \$0,00% \$1,0	33 -1,39% \$120,22 \$120,22 \$120,22 \$130,22 \$130,23 \$130	53 -1.80% 52 -1.80% 53:18 -1.80% 53:18 -1.80% 53:28 -1.80% 53:38 -1.80	122 1.16/95,	1,007 0,79% 1,015 9,5800 1,000	4.391 1.593 1.63% 1.63% 1.597 3.11.72 1.597 5.11.72 1.597 5.71.72,366 5.72.71.72,366 5.72.71.72,366 5.72.72,366 6.72.72 1.72.7	326  -1.84% 320  -1.84% 320  -1.40% 51.40% 51.26% 5	375 3-1,579 3-88 \$52.09 1.0079 \$55.07 \$55.157 \$55.1580 \$(\$5,007) \$55.00,279 \$	NAA	\$428,123,700 \$4,025 \$3151,613 \$431,700 \$417,700 \$117,501 \$117,000
FY 2018-19 Average Units Par Utilizer Per Year Processae Section Modify Units Per Utilizer FY 2029-21 Estimated Average Units Per Utilizer FY 2029-21 Estimated Average Units Per Utilizer FY 2029-22 Average Paid Rate Per Utilizer Units Per 2029-22 Average Paid Rate Per Utilizer FY 2029-23 Average Paid Rate Per Utilizer Per Month Lord Average Paid Rate Per Utilizer Per West Estimated FY 2029-21 Estimated Paid Section Programs Expansion Association of FY 2029-21 Estimated Programs Expansion Association of FY 2029-21 Estimated Programs Expansion Association of FY 2029-21 Estimated Programs Expansion Ford Boston Line Impacts Estimated FY 2029-21 Payed Units Per Utilizer Cost School Cost Py 2029-20 Per Utilizer Cost LONG-TERM HOME HEALTH  FY 2020-21 Estimated Average Utilizers Per Month Uniter Trend Selection Ford Month Average Utilizers Per Month FY 2020-22 Estimated Average Utilizers Per Month FY 2020-22 Average Units Per Utilizer Per Month FY 2020-23 Average Units Per Utilizer Per West FY 2020-23 Estimated West Per Utilizer Per West FY 2020-23 Estimated Per Utilizer Per West FY 2020-24 Estimated Per Per Per Per Per Utilizer Per West FY 2020-24 Estimated Per Utilizer Per West FY 2020-25 Estimated Per	\$2 0.00% \$2 \$1,00% \$1,10% \$118,00% \$118,00% \$118,00% \$118,00% \$0 \$0 \$0 \$1,00% \$1,10% \$0 \$1,10% \$1,10	\$ 53 \$ -1,30% \$ 25 \$ 1,20,22 \$ 1,20,22 \$ 1,20,22 \$ 1,20,22 \$ 2,20 \$ 2,20,22 \$ 3,20,22	33 -1.89% 32 -1.89% 53:18:18:18:18:18:18:18:18:18:18:18:18:18:	122 1.164% 1.200 1.164% 1.200 1.164% 1.200 1.100% 1.200% 1	1,007 0,79% 1,015 5,88.01 1,007% 5,88.01 1,007% 5,97.02 5,97.0	4.191 1.593 1.6367 1.517	326  1.84% 320  321  320  \$74.91  574.91  \$32.07% \$1.84% \$1.85% \$	7375  -1.8776  -8.88  -5.209  -1.0076  -5.51.57  -5.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.886  -5.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.51.51.886  -5.5	NAA	\$428,123,700 \$4,025 \$3151,613 \$431,700 \$417,700 \$117,501 \$117,000
FY 2018-19 Average Units Per Unitser Per Year Percentage Selected Modify Units Per Unitser* FY 2020-21 Estimated Average Units Per Unitser FY 2020-22 Estimated Average Units Per Unitser FY 2020-22 Estimated Average Units Per Unitser FY 2020-22 Estimated Average Units Fer Unitser FY 2020-22 Estimated FY 2020-22 Hase Expenditure FY 2021-19 Est 2020-21 Hase Expenditure FY 2021-19 Est 2020-21 Hase Expenditure FY 2021-19 Estimated Modified Service Institutes - FAR Service Ford Institute FY 2020-22 Hase Expenditure FY 2021-19 Estimated Modified Service Institutes - FAR Service FY 2020-22 Estimated Average Unities Fer Month Uniter From Selected* FY 2020-22 Estimated Average Unities Fer Month Estimated FY 2020-22 Estimated Average Unities Fer Month Estimated FY 2020-22 Estimated Average Unities Fer Month	\$2 0,00% \$3 \$1,00% \$2,10% \$1,00% \$1,00% \$1,00% \$1,00% \$1,00% \$0,00% \$1,0	3 3 4 3 2 4 3 2 4 3 2 4 3 2 3 2 3 2 3 2	53 -1.80% 52 -1.80% 53:18 -1.80% 53:18 -1.80% 53:28 -1.80% 53:38 -1.80	122 1.169% 1.169% 1.109	1,007 0,79% 1,015 9,5800 1,000	4.191 1.593 1.6393 1.6393 1.6393 1.6393 1.5307 511.236 557.12,366 57.12,366	326  1.84% 320  1.84% 321  320  574.91  574.91  574.91  574.91  574.92	375 3-1,579 3-88 \$52.09 1.0079 \$55.07 \$55.157 \$55.1580 \$(\$5,007) \$55.00,279 \$	NAA	\$428,123,700 \$4,025 \$3151,613 \$431,700 \$417,700 \$117,501 \$117,000
FY 2018-19 Average Units Per Unitser Per Year Percentage Selected Modelly Chair Per Unitser FY 2029-22 Estimated Average Units Per Unitser FY 2029-22 Estimated Average Units Per Unitser FY 2029-22 Estimated Average Units Per Unitser Unit Average Parl Rate Trees Selected Estimated FY 2029-13 Hase Exposition Annualization of FY 2018-16 Ref. "Participant Directed Programs Exposition" Annualization of FY 2018-16 Ref. "Participant Directed Programs Exposition" Tool Bottom Line Impacts Tool Bottom Line Impacts Estimated FY 2029-12 Expositione Estimated FY 2029-12 Expositione Comment FY 2029-12 Per Unitser Cost  LONG-TERM HOME HEALTH  LY 2029-21 Estimated Average Unitsers Fer Month Unitser Tread Selected" FY 2021-12 Estimated Average Unitsers Fer Month Unitser Tread Selected" FY 2021-12 Estimated Average Unitsers Fer Month Unitser Tread Selected" FY 2021-12 Estimated Average Unitsers Fer Month Total Restorm Line Impacts FY 2021-12 Internated Average Unitsers Fer Month FY 2021-12 Average Units Fer Unitser Fer Wooth FY 2021-12 Average Units Fer Unitser	\$2 0.00% \$2 \$1.00% \$2.20% \$3.20.10 \$3.10.20% \$3.10.20% \$3.10.20% \$9 9 9 9 \$1.00% \$1.10.20% \$1.10.20% \$1.10.20% \$2.20% \$2.20% \$2.213 \$6 \$2.213 \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00%	3 5 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	33 -1.89% 32 -1.89% 3131.18 -1.00% 3152.04.00 -1.00% 30	122 1.169% 1.169% 1.109% 1.100	1,007 0,79% 1,015 \$1810 1,007 1,015 \$1810 1,007 \$17,71,717 \$1,717	4.1919 1.593 1.635% 1.5367 51.137 51.137 51.137 51.13689 51.2668 51.2668 51.2668 51.2668 51.2668 51.2668 51.2668 61.2668 61.2668 61.2668 61.2668 61.2668 61.2668 61.2668 61.26688 61.26	326  -1.84% 338  -1.84% 329  -1.84% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 575.93  -1.00%	7375  -1.5776  -368  -552.09  -1.0076  -551.07  -551.08  -551.07  -551.08  -551.07  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08	NAA N/A N/A N/A N/A N/A N/A N/A N/A N/A	\$428,123,700 \$4,025 \$3151,613 \$431,700 \$417,700 \$117,501 \$117,000
FY 2018-19 Average Uniter Per Uniter Per Year Percentage Selected Model Vallet per Uniter Per Year PY 2020-12 Testimated Average Uniter Per Uniter Per Year PY 2020-12 Testimated Average Uniter Per Uniter Per Year PY 2020-12 Average Paid Rate Per Uniter Per Year Estimated PY 2020-12 Hose Expenditure Bottom Line Impacts Bottom Line Impacts Testimated PY 2020-13 Have Expenditure Bottom Line Impacts Testimated PY 2020-13 Have Expenditure Annualization of FY 2015-16 R. Printiquant Directed Programs Expansion* QP 2016-10 R. R. Average Uniter Per Vision Per Visi	\$2 0.00% \$1 \$1,00% \$1,0	33 -1,89% \$23 -1,89% \$190,02 \$	33 -1.39% -1.39% -1.39% -1.31%	122 1.16/19, 16/	1,007 0,79% 1,018 SS8.03 SS8.03 SS7.05 SS8.05 SS7.05 SS8.05 SS7.05 SS8.05 SS8.0	4.391 1.593 1.635% 1.597 1.1377 1.1377 1.1377 1.1377 1.1377 1.1376 1.1377 1.137	326.  1.84%, 1.8	375 3-1879 3-187	NAA	\$428,123,700 \$4,025 \$3151,613 \$131,025 \$131,003 \$141,003 \$141,005 \$14,003 \$14,003 \$14,003 \$14,004
FY 2018-19 Average Units Per Unitser Per Year Percentage Selected Mondfy Units Per Unitser FY 2029-21 Estimated Average Units Per Unitser FY 2029-22 Estimated Average Units Per Unitser FY 2029-22 Estimated Average Units Per Unitser Data Average Unitser Per Unitser Data Data Departs Ty 2018-19 RA Selected Mondfund Savings Institutes - FAR Savings Total Rotton Line Inspirate Fertilised FY 2029-19 Free Unitser Cost Total Rotton Line Inspirate Fertilised FY 2029-19 Free Unitser Cost Ty 2029-20 Free Unitser Cost UNITSER DATA DATA DATA DATA DATA DATA DATA DAT	\$2 0.00% \$2 \$1.00% \$2.20% \$3.20.10 \$3.10.20% \$3.10.20% \$3.10.20% \$9 9 9 9 \$1.00% \$1.10.20% \$1.10.20% \$1.10.20% \$2.20% \$2.20% \$2.213 \$6 \$2.213 \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00%	3 5 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	33 -1.89% 32 -1.89% 3131.18 -1.00% 3152.04.00 -1.00% 30	122 1.16/19, 16/	1,007 0,79% 1,015 \$1810 1,007 1,015 \$1810 1,007 \$17,71,717 \$1,717	4.1919 1.593 1.635% 1.5367 51.137 51.137 51.137 51.13689 51.2668 51.2668 51.2668 51.2668 51.2668 51.2668 51.2668 61.2668 61.2668 61.2668 61.2668 61.2668 61.2668 61.2668 61.26688 61.26	326  -1.84% 338  -1.84% 329  -1.84% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 574.93  -1.00% 575.93  -1.00%	7375  -1.5776  -368  -552.09  -1.0076  -551.07  -551.08  -551.07  -551.08  -551.07  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08  -551.08	NAA N/A N/A N/A N/A N/A N/A N/A N/A N/A	\$428,123,700 \$4,025 \$3151,613 \$431,700 \$417,700 \$117,501 \$117,000
FY 2016-19 A Average Uniter Per Visure PY 2020-21 Estimated Average Uniter Per Visure FY 2020-21 Estimated Average Uniter Per Visure FY 2020-21 Estimated Average Uniter Per Visure FY 2020-21 Average Paid Rate Per Uniter FY 2020-21 Average Paid Rate Per Uniter FY 2020-21 Average Paid Rate Per Uniter Formation of FY 2016-19 Rate Expenditors Button Line Impacts Formation of FY 2016-19 Rate Expenditors Annualization of FY 2016-19 Rate Expenditors Formation of FY 2017-19 Rate FY 2017-19	\$2 0.00% \$3 \$1.00% \$1.0	33 -1,39% \$120,22 \$120	33 -1.30% 32.1 -1.30% 32.1 -1.30% 33.1 -1.30% 33.5 -1.30% 30.0 -1.	122 1.16/19, 16/	1,007 0,79% 1,018 9,88.01 5,70.6 5,88.02 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 5,71.2,639 6,7	4.591 1.593 1.6395 1.6395 1.6397 5.11.737 1.61075 5.11.737 5.11.737 5.11.737 5.11.736 5.75.71.736 5.75.71.736 5.75.71.736 5.75.71.736 5.75.71.736 5.75.71.736 5.75.71.736 5.75.71.736 5.75.71.736 5.75.71.736 6.75	326  -1.84% 320  -	375 3-1379 3-1379 3-1379 3-1379 3-1407	NAA	\$428,123,700 \$4,025 (3114,103) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04) (3117,04)
PY 2018-19 Abernge Units Por Unitser Per Year Percentane Selected would would be under the processor of the	\$2 0.00% \$2 \$1,00% \$13,00% \$118,00% \$118,00% \$118,00% \$9 \$9 \$9 \$13,004,831 \$5,157,40% \$1	33 3-1,89% 32 3-1,89% 32 3-1,60% 319,71 321,515,46 30 30 30 30 30 30 30 32 31,519,48 30,219 30 40 40 30 30 30 30 30 30 30 30 30 30 30 30 30	33 -1.89% 32.18 -1.80% 313.18 -1.80% 313.18 -1.80% 30 -1	122 1-1649; 1-	1,007 0,79% 1,815 5,850 1,107% 5,850 5,850 5,950 5,950 5,950 6,950	4.191 1.593 1.6357 1.1375 1.13	326  -1.84% 328  -1.84% 329  -1.84% 574.01  -1.00% 574.01  -1.00% 574.02  -1.00%	7375  -1.8776  -3.88  -5.200  -1.0076  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -6.51	NAA	\$428,123,700 \$4,025 (\$151,013) (\$
FY 2018-19 Average Uniter Per Uniter Per Year Percentage Selected Mondfy Units Per Uniter* FY 2020-21 Entimated Average Units Per Uniter* FY 2020-22 Entimated Average Units Per Uniter* FY 2020-21 Entimated Average Units Per Uniter* FY 2020-21 Average Paid Rate Per Uniter* FY 2020-21 Average Paid Rate Per Units* Entimated FY 2020-21 Base Expenditure Buttom Line Impacts Teledealth Expenditure Adoutment*  Per 2020-21 Entimated Average Units Per Units* Annualization of FY 2015-18 R. FY Participant Directed Program Expansion* Part Delevant Description of Per 2015-18 R. FY Participant Directed Program Expansion* Part Delevant Units Per Units Pe	\$2 0.00% \$2 \$1.00% \$2.20% \$1.0	33 3-1,39% 32 3-1,39% 32 3-1,39% 33 30 30 30 30 30 30 31 32 31,51,52,48 30 30 30 30 30 30 30 30 30 30 30 30 30	33 -1.80% 32 -1.80% 31.18 -1.80% 31.18 -1.80% 30 -1.80%	122 1.169% 1.169% 1.109	1,007 0,79% 1,015 SSS01 1,005 SSS01 1,005 SSS17,212,639 (590,522) SSS0,107	4.391 1.593 1.63% 1.63% 1.587 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 51.12,76 61.12,76	326  -1.84% 320  -1.84% 320  -1.40% 514.01  512,099,416  -0.50% 515.00	375 3-1,579 3-	NAA	\$428,123,700 \$4,025 \$3131,031 \$131,032 \$41,032
FY 2018-19 Average Units Per Unitser Per Year Percentage Selected Modify Units Per Unitser FY 2029-21 Estimated Average Units Per Unitser FY 2029-22 Estimated Average Units Per Unitser FY 2029-22 Average Data Rase Per Unitser Unit Average Park Rase Treed Selected FY 2029-23 Average Park Rase Freed Selected FY 2029-23 Average Unitser Per Unitser Button Line Departs Estimated Pr 2029-23 Average Unitser Per Unitser FY 2029-23 Average Unitser Selected FY 2029-23 Average Unitser Selected FY 2029-23 Average Unitser Selected FY 2029-24 Expenditure Estimated FY 2029-21 Expenditure Estimated FY 2029-21 Expenditure Estimated PY 2029-21 Estimated Average Unitiene Per Month Estimated PY 2029-21 Estimated Average Unitiene Pr PY 2029-21 Estimated Average Unitiene Per Month FY 2029-21 Estimated Average Unitiene Per Voer Percentage Selected Machine Desire Pr 2020-21 Average Units Per Uniter FY 2020-21 Estimated Average Units Per Uniter Estimated PY 2020-21 Estimated Per 2020-21 Estimated Pr 2020-21 Estimated Estimate Estimated Estim	\$2 0.00% \$2 \$1,00% \$13,00% \$118,00% \$118,00% \$118,00% \$9 \$9 \$9 \$13,004,831 \$5,157,40% \$1	33 3-1,89% 32 3-1,89% 32 3-1,60% 319,71 321,515,46 30 30 30 30 30 30 30 32 31,519,48 30,219 30 40 40 30 30 30 30 30 30 30 30 30 30 30 30 30	33 -1.89% 32.18 -1.80% 313.18 -1.80% 313.18 -1.80% 30 -1	122 1-1649; 1-	1,007 0,79% 1,815 5,850 1,107% 5,850 5,850 5,950 5,950 6,950	4.191 1.593 1.6357 1.1375 1.13	326  -1.84% 328  -1.84% 329  -1.84% 574.01  -1.00% 574.01  -1.00% 574.02  -1.00%	7375  -1.8776  -3.88  -5.200  -1.0076  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -5.51.510  -6.51	NAA	\$428,123,700 \$4,025 \$51,025
FY 2018-19 Average Units Per Utilizer Per Year Percentas Selected Model Vallet Per Utilizer FY 2009-11 Editanted Average Units Per Utilizer FY 2009-12 Editanted Average Units Per Utilizer FY 2009-12 Average Pad Bate Fer Utilizer FY 2009-11 Average Pad Bate Fer Utilizer Editanted FY 2009-12 Base Expenditure Batton Line Impacts Batton Line Impacts Batton Line Impacts Batton Line Impacts Data Selection (Pr V) 15-16 E. T. Pericipant Directed Program Expansion* O 2016-19 E. R. Average Vallet Selection (Program Expansion* O 2016-19 E. R. Average Model Medical Selection Initiatives - FAM Sesting  Editanted FY 2009-11 Expenditure Editanted FY 2009-11 Expenditure Fallitanted FY 2009-11 Expenditure Fallitanted FY 2009-12 Fey United Costs To Change Oner FY 2019-20 Per Utilizer Cost  LONG-TERM HOME HEALTH  TY 2009-21 Editanted Average United Per Month Batton Line Impacts Ty 2010-12 Editanted Average United Per Vene Pr 2010-12 Editanted Average United Per Vene Trail Bettom Line Impacts Ty 2009-12 Editanted Average United Per Vene Facenting Selected In Pag United Costs Alphanous Line Impacts Ty 2009-12 Editanted Average United Per Vene Facenting Selected In Model Units Per Vene Texture Selected Im Model Units Per Vene Application Line Impacts Ty 2009-12 Editanted Average United Per Vene Facenting Selected Im Model Units Per United Adjustment to Increase Average Battle Fer Units Editional Expansion Technology 100-11-11 Expansion December Decembe	\$23 0.00% \$12 0.00% \$12 0.00% \$130.00%	\$ 53 \$ -1, 89% \$ 52 \$ 130,52 \$ 130,52 \$ 131,57,73 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$ 131,57 \$	33 -1, 189%	122	1,007 0,79% 1,015 SSS00	4.191 1.593 1.45% 1.597 1.1577 1.1177	326.  1.84%, 1.8	375 3-1879 3-187	NAA	\$428,123,700 \$4,025 (S151,013) (S151,013) (S151,013) (S151,013) (S151,014) (S
PY 2016-19 Aberage Units Per Unitser Per Year Percentan Selected No Modify Units Per Unitser* PY 3020-21 Editanted Average Units Per Unitser* PY 3020-23 Access pad Rate Per Unitser* Unit Average That Rate Treed Selected Unit Average That Rate Treed Selected Unit Average That Rate Treed Selected Editation Intelligence Adjustment The Selected Se	\$2 0.00% \$2 \$1.00% \$2.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$3.00% \$4.00% \$4.00% \$5.0	33 3-1,89% 32 3-1,30% 30 30 30 30 30 30 30 30 30 30 30 30 30	33 -1.89% 32.18 -1.80% 33.18 -1.10% 35.204.60 -1.10% 30	122 1.169% 1.169% 1.169% 1.100	1,007 0,79% 1,015 SSS01 1,015 SSS01 SSS17,112,679 SSS17,112,679 SSS17,112,679 SSS17,112,679 SSS17,112,679 SSS17,112,777 SSS18,100,77 SS	4.491 1.593 1.635% 1.5367 5.11.216 5.15.27 5.11.216 5.11.	326  -1.84% 330  -1.84% 320  -1.07% 321  -	375 3-13-77 3-88 5-52-90 1-1077 5-53-14-77 5	NAA	\$428,123,706 \$4,025 \$131,103 \$131,033 \$131,033 \$131,033 \$131,033 \$131,033 \$131,033 \$131,033 \$131,033 \$14,033 \$14,034 \$

### Exhibit G - COMMUNITY BASED LONG-TERM CARE - LONG-TERM HOME HEALTH Cash Based Actuals and Projections by Service

				Out Year						
LONG-TERM HOME HEALTH	Physical Therapy (for 0-21 years LTHH)	Occupational Therapy (for 0-21 years LTHH)	Speech and Language Therapy (for 0-21 years LTHH)	Registered Nursing/Licensed Practical Nurse	Home Health Aid Basic	Home Health Aid Extended	Registered Nursing Brief First Visit of Day	Registered Nursing Brief Second or More Visit of Day	Telehealth <sup>(1)</sup>	Total
FY 2021-22 Estimated Average Utilizers Per Month	2,313	3,923	5,776	3,714	6,014	4,425	535	185	N/A	14,694
Utilizer Trend Selected <sup>(4)</sup>	5.06%	6.76%	10.80%	0.00%	5.80%	3.14%	0.00%	0.00%	N/A	3.959
FY 2022-23 Estimated Average Utilizers Per Month	2,430	4,188	6,400	3,714	6,363	4,564	535	185	N/A	15,275
Bottom Line Impacts										
Total Bottom Line Impacts	0	0	0	0	0	0	0	0	N/A	
FY 2022-23 Estimated Average Utilizers Per Month	2,430	4,188	6,400	3,714	6,363	4,564	535	185	N/A	15,275
FY 2021-22 Average Units Per Utilizer Per Year	52	52	52	120	1,043	1,567	320	368	N/A	
Percentage Selected to Modify Units Per Utilizer <sup>(5)</sup>	0.00%	0.00%	0.00%	0.00%	2.68%	0.00%	0.00%	0.00%	N/A	
FY 2022-23 Estimated Average Units Per Utilizer	52	52	52	120	1,071	1,567		368		
FY 2021-22 Average Paid Rate Per Unit	\$118.99	\$119.71	\$129.87	\$109.12	\$37.65	\$11.26	\$74.18	\$51.57	N/A	
Unit Paid Rate Trend Selected	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	N/A	
FY 2022-23 Average Paid Rate Per Unit	\$118.99	\$119.71	\$129.87	\$109.12	\$37.65	\$11.26	\$74.18	\$51.57	N/A	
Estimated FY 2022-23 Base Expenditure	\$15,035,576	\$26,069,965	\$43,220,736	\$48,632,602	\$256,576,203	\$80,529,133	\$12,699,616	\$3,510,886	\$6,823	\$486,281,540
Bottom Line Impacts										
Telehealth Expenditure Adjustment <sup>(7)</sup>	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$4,025	\$4,025
Annualization of FY 2018-19 R-8 Assorted Medicaid Savines Initiatives - PAR Savines	(\$7,600)	(\$11,644)	(\$18,025)	(\$28,986)	(\$123,740)	(\$43,991)		(\$2,168)		(\$243,583
Total Bottom Line Impacts	(\$7,600)	(\$11,644)	(\$18,025)	(\$28,986)	(\$123,740)	(\$43,991)	(\$7,429)	(\$2,168)		(\$239,558
Estimated FY 2022-23 Expenditure	\$15,027,976	\$26,058,321	\$43,202,711	\$48,603,616	\$256,452,463	\$80,485,142	\$12,692,187	\$3,508,718	\$10,848	\$486,041,982
Estimated FY 2022-23 Per Utilizer Cost	\$6,184.35	\$6,222.14	\$6,750.42	\$13,086.60	\$40,303.70	\$17,634.78	\$23,723.71	\$18,966.04	N/A	\$31,819.44
% Change Over FY 2021-22 Per Utilizer Cost	0.00%	0.00%		0.04%	2.72%	0.04%	0.04%	0.04%	N/A	2.439
(1) Due to cell sizes, the Telehealth forecast is done at the total expenditure level. Telehealth is not a widely utilized service and disp										
(2) Presented information regarding the utilizers per service is derived from the average number of clients with a paid claim per mont			ers for LTHH services as clients typis	ally continue services once a need is	identified.					
(3) Since clients can access multiple services, the average utilizers does not reflect the sum of the services but rather the total Average										
		Physical Therapy (for 0-21 years I			Registered Nursing/Licensed Practic	al Nurse		Registered Nursing Brief First Visi		5.52%, 0.00%, 0.00%
(5) Percentages Selected to Modify Utilizers for FY 2020-21 through FY 2022-23		Occupational Therapy (for 0-21 ye		13.49%, 13.48%, 6.76%				Registered Nursing Brief Second or	r More Visit of Day	0.00%, 0.00%, 0.00%
		Speech and Language Therapy (for			Home Health Aid Extended		6.27%, 3.12%, 3.14%			
		Physical Therapy (for 0-21 years I.			Registered Nursing/Licensed Practic	al Nurse		Registered Nursing Brief First Visi		-1.84%, 0.00%, 0.00%
(6) Percentages Selected to Modify Units Per Utilizer for FY 2020-21 through FY 2022-23		Occupational Therapy (for 0-21 ye			Home Health Aid Basic			Registered Nursing Brief Second or	r More Visit of Day	-1.87%, 0.00%, 0.00%
(7) Due to small cell sizes that prevent the Telebralth forecast from using the same methodology as the other LTHH services, expend		Speech and Language Therapy (for		-1.89%, 0.00%, 0.00%	Home Health Aid Extended		-1.63%, 0.00%, 0.00%			

Hospice Calculations for FY 2020-21, FY 20	021-22, FY 2022-23	
FY 2020-21 Calculation		
Nursing Facility Room and Boa	ard	
Service Expenditure:	Core Components	Reference
Estimate of FY 2020-21 Per Diem Rate	\$193.55	Footnote 1
Estimate of Patient Days	280,158	Footnote 2
Total Estimated Costs for FY 2020-21 Days of Service	\$54,224,581	Footnote 3
Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	95.77%	Footnote 4
Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$51,930,881	
Estimated Expenditure for FY 2019-20 Dates of Service	\$2,165,676	Footnote 5
Estimated Nursing Facility Room and Board Expenditure in FY 2020-21 Prior to Adjustments	\$54,096,557	
Bottom Line Adjustments:		
Savings from days incurred in FY 2019-20 and paid in FY 2020-21 under HB 13-1152	(\$33,023)	Footnote 6
HB 13-1152 1.5% permanent rate reduction Effective July 1, 2013	(\$778,090)	Footnote 6
Total Bottom Line Adjustments:	(\$811,113)	
Total Estimated Nursing Facility Room and Board FY 2020-21 Total Fund Expenditure	\$53,285,444	
Percentage Change in Core Component Expenditure Over Prior Year	42.37%	
Hospice Services		
Service Expenditure:	Core Components	Reference
Hospice Routine Home Care	\$16,119,277	Footnote 7
Hospice General Inpatient	\$2,389,014	Footnote 7
Other Services	\$156,548	Footnote 7
Estimated Hospice Services Expenditure in FY 2020-21 Prior to Adjustments	\$18,664,839	Toomote
Bottom Line Adjustments:		
FY 2019-20 1.00% Across the Board Rate Increase	\$124,432	See narrative
Total Bottom Line Adjustments:	\$124,432	See narrative
Total Estimated Hospice Services FY 2020-21 Total Fund Expenditure	\$18,789,271	
Percentage Change in Expenditure Over Prior Year	30.03%	
Total Estimated FY 2020-21 Expenditure	\$72,074,715	

FY 2021-22 Calculation	ı	
Nursing Facility Room and Bo	ard	
Service Expenditure:	Core Components	Reference
Estimate of FY 2021-22 Per Diem Rate	\$197.42	Footnote 1
Estimate of Patient Days	293,161	Footnote 2
Total Estimated Costs for FY 2021-22 Days of Service	\$57,875,845	Footnote 3
Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	95.77%	Footnote 4
Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$55,427,697	
Estimated Expenditure for FY 2020-21 Dates of Service	\$2,293,700	Footnote 5
Estimated Nursing Facility Room and Board Expenditure in FY 2021-22 Prior to Adjustments	\$57,721,397	
Bottom Line Adjustments:		
Savings from days incurred in FY 2020-21 and paid in FY 2021-22 under HB 13-1152	(\$34,368)	Footnote 6
HB 13-1152 1.5% permanent rate reduction Effective July 1, 2013	(\$831,050)	Footnote 6
Total Bottom Line Adjustments:	(\$865,418)	
Total Estimated Nursing Facility Room and Board FY 2021-22 Total Fund Expenditure	\$56,855,979	
Percentage Change in Core Component Expenditure Over Prior Year	6.70%	
Hospice Services		
Service Expenditure:	Core Components	Reference
Hospice Routine Home Care	\$16,806,543	Footnote 7
Hospice General Inpatient	\$2,547,787	Footnote 7
Other Services	\$172,203	Footnote 7
Estimated Hospice Services Expenditure in FY 2021-22 Prior to Adjustments	\$19,526,533	
Bottom Line Adjustments:		
FY 2020-21 1.00% Across the Board Rate Increase	\$195,265	See narrative
Total Bottom Line Adjustments:	\$195,265	
Total Estimated Hospice Services FY 2021-22 Total Fund Expenditure	\$19,721,798	
Percentage Change in Expenditure Over Prior Year	4.96%	
Total Estimated FY 2021-22 Expenditure	\$76,577,777	

FY 2022-23 Calculation		
Nursing Facility Room and Board	d	
Service Expenditure:	Core Components	Reference
Estimate of FY 2022-23 Per Diem Rate	\$203.34	Footnote 1
Estimate of Patient Days	306,165	Footnote 2
Total Estimated Costs for FY 2022-23 Days of Service	\$62,255,591	Footnote 3
Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	95.77%	Footnote 4
Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$59,622,180	
Estimated Expenditure for FY 2021-22 Dates of Service	\$2,448,148	Footnote 5
Estimated Nursing Facility Room and Board Expenditure in FY 2022-23 Prior to Adjustments	\$62,070,328	
Bottom Line Adjustments:		
Savings from days incurred in FY 2021-22 and paid in FY 2022-23 under HB 13-1152	(\$36,707)	Footnote 6
HB 13-1152 1.5% permanent rate reduction Effective July 1, 2013	(\$894,303)	Footnote 6
Total Bottom Line Adjustments:	(\$931,010)	
Total Estimated Nursing Facility Room and Board FY 2022-23 Total Fund Expenditure	\$61,139,318	
Percentage Change in Core Component Expenditure Over Prior Year	7.53%	
Hospice Services		
Service Expenditure:	Core Components	Reference
Hospice Routine Home Care	\$17,792,850	Footnote 7
Hospice General Inpatient	\$2,618,379	Footnote 7
Other Services	\$189,423	Footnote 7
Estimated Hospice Services Expenditure in FY 2022-23 Prior to Adjustments	\$20,600,652	
Bottom Line Adjustments:		
FY 2021-22 1.00% Across the Board Rate Increase	\$206,007	
Total Bottom Line Adjustments:	\$206,007	
Total Estimated Hospice Services FY 2022-23 Total Fund Expenditure	\$20,806,659	
Percentage Change in Expenditure Over Prior Year	5.50%	
Total Estimated FY 2022-23 Expenditure	\$81,945,977	
I OTAL ESTIMATED F 1 2022-23 EXPENDITURE	\$61,945,977	

#### Footnotes

#### Hospice Nursing Facility Room and Board FY 2020-21, FY 2021-22 and FY 2022-23 Footnotes:

(1) Fiscal year per diems are the quotient of annual IBNR-adjusted expenditure and patient days, by first-date-of-service. Estimates for FY 2020-21, FY 2021-22, and FY 2022-23 are computed by applying rate reductions where appropriate and projecting the maximum-allowable-growth (2%) in General Fund expenditure. See footnote (4) for a detailed discussion of incurred-but-not-reported analysis. Rate reduction in FY 2020-21, FY 2021-22, and FY 2022-23 due to HB 13-1152; see footnote (6) for further detail.

Year	Per Diem After Reductions	Maximum Allowable Growth in General Fund Portion	Rate Reduction	Paid Rate Before Reductions	Percentage Change in Core Rate Before Reductions
FY 2011-12	\$140.19	3.00%	1.50%	\$142.32	1.25%
FY 2012-13	\$144.61	3.00%	1.50%	\$146.81	3.15%
FY 2013-14	\$151.64	3.00%	1.50%	\$153.95	4.86%
FY 2014-15	\$158.02	3.00%	1.50%	\$160.43	4.21%
FY 2015-16	\$163.39	3.00%	1.50%	\$165.88	3.40%
FY 2016-17	\$168.03	3.00%	1.50%	\$170.59	2.84%
FY 2017-18	\$173.76	3.00%	1.50%	\$176.41	3.41%
FY 2018-19	\$180.20	3.00%	1.50%	\$182.94	3.70%
FY 2019-20	\$186.91	3.00%	1.50%	\$189.76	100.00%
Estimated FY 2020-21	\$190.65	2.00%	1.50%	\$193.55	2.00%
Estimated FY 2021-22	\$194.46	2.00%	1.50%	\$197.42	2.00%
Estimated FY 2022-23	\$200.29	3.00%	1.50%	\$203.34	3.00%

(2) The Department estimated patient days based on a trend and seasonality model for FY 2020-21, FY 2021-22 and FY 2022-23.

Fiscal Year	Patient Days	Percentage Change	Full Time Equivalent Clients	Percentage Change
FY 2011-12	237,158	-	648	-
FY 2012-13	237,794	0.27%	651	0.46%
FY 2013-14	216,196	-9.08%	592	-9.06%
FY 2014-15	219,651	1.60%	602	1.69%
FY 2015-16	226,856	3.28%	620	2.99%
FY 2016-17	238,694	5.22%	654	5.48%
FY 2017-18	259,967	8.91%	712	8.87%
FY 2018-19	261,062	0.42%	715	0.42%
FY 2019-20	273,917	4.92%	748	4.62%
Estimated FY 2020-21	280,158	2.28%	768	2.67%
Estimated FY 2021-22	293,161	4.64%	803	4.56%
Estimated FY 2022-23	306,165	4.44%	839	4.48%

(3) Estimated cost for current year dates of service is the amount the Department expects to pay for services rendered in the current fiscal year regardless of which fiscal year the payment is made.

(4) Of the estimated costs for the current year dates of service, a portion of those claims will be paid during the same fiscal year in which they were incurred while the rest of the claims will be paid in a future period. In order to estimate how much of the total expenditure incurred in the current year will be paid in the current year, expenditure patterns must be analyzed by month. This is because, for example, a claim incurred in July 2017 has 11 more months to pay during FY 2017-18 (from August 2017 to June 2018), while a claim incurred in May 2018 only has one additional month to pay during FY 2017-18 (June 2018). Thus, more claims from May 2018 will pay in FY 2018-19 than claims from July 2017. Based on the Department's estimate of incurred-but-not-reported (IBNR) claims, the Department estimates in the table below the portion of claims outstanding for any given fiscal year by analyzing estimated IBNR (based on five years of data) and averages the total to provide an estimate of the total percentage of claims that will pay in the same fiscal year that the claim was incurred.

Estimate of Claims Incurred and Paid in the Same Fiscal Year

Month Incurred	Additional Months Until End of Fiscal Year	Estimated Percent Complete at End of Fiscal Year (IBNR Factor)
July	11	99.96%
August	10	99.88%
September	9	99.66%
October	8	99.41%
November	7	99.09%
December	6	98.72%
January	5	98.30%
February	4	97.34%
March	3	95.76%
April	2	93.11%
May	1	88.47%
June	0	79.52%
Average		95.77%

(5) As calculated in the table below, the estimated FY 2020-21 expenditure for core components with FY 2019-20 dates of service is the estimated FY 2019-20 core components per diem rate multiplied by the estimated number of patient days. This calculation is then multiplied by one minus the calculated IBNR rate.

Calculation of Expenditure From Claims in Previous Fiscal Year	FY 2019-20	Source
IBNR Factor	95.77%	Footnote (4)
Estimated Patient Days from previous fiscal year	273,917	Footnote (2)
Estimated Per Diem Rate for Core Components for previous fiscal year	\$186.91	Footnote (1)
Estimated claims expenditure for core components from previous fiscal year to be paid in the current fiscal	\$2.165.676	As described in Footnote
year	\$2,165,676	(5) narrative

(6) HB 10-1324 imposed a rate reduction of 1.5% effective March 1, 2010 and effective until June 30, 2011. HB 10-1379 imposed a rate reduction of 1% in addition to the rate reduction of HB 10-1324 for the period of July 1, 2010 to June 30, 2011. SB 11-215 imposed a rate reduction of 1.5% effective July 1, 2011 for FY 2011-12 that was extended for FY 2012-13 by HB 12-1340. HB 13-1152 extended the 1.5% rate reduction indefinitely, effective July 1, 2013. The rate reductions apply to all days incurred under the effective periods of each bill. As not all days will be reported in the fiscal year in which they are incurred, the impact of the rate extends over multiple fiscal years. The tables below show the incremental impact of HB 13-1152. These figures may vary from previous submissions of the Department's requests due to revised forecasts for rates and patient days. Because HB 13-1152 made the 1.5% rate reduction permanent, potential rate reductions of 1.5% for FY 2020-21, FY 2021-22, and FY 2022-23 are accounted for here.

НВ 13-1152	Rate Reduction	Per Diem before Reduction	Per Diem After Reduction	Per Diem Impact of Reduction
Estimated FY 2019-20 Rates	1.50%	\$189.76	\$186.91	(\$2.85)
Estimated FY 2019-20 Patient Days				273,917
Estimated FY 2019-20 Days Paid in FY 2019-20				262,330
Total FY 2019-20 Impact				(\$747,641)
Estimated FY 2019-20 Days Paid in FY 2020-21				11,587
FY 2020-21 Impact from Carryover from FY 2019-20				(\$33,023)
Estimated FY 2020-21 Rates	1.50%	\$193.55	\$190.65	(\$2.90)
Estimated FY 2020-21 Patient Days				280,158
Estimated FY 2020-21 Days Paid in FY 2020-21				268,307
FY 2020-21 Impact from FY 2020-21				(\$778,090)
Total FY 2020-21 Impact				(\$811,113)
Estimated FY 2020-21 Days Paid in FY 2021-22				11,851
FY 2021-22 Impact from Carryover from FY 2020-21				(\$34,368)
Estimated FY 2021-22 Rates	1.50%	\$197.42	\$194.46	(\$2.96)
Estimated FY 2021-22 Patient Days				293,161
Estimated FY 2021-22 Days Paid in FY 2021-22				280,760
FY 2021-22 Impact from FY 2021-22				(\$831,050)
Total FY 2021-22 Impact				(\$865,418)
Estimated FY 2021-22 Days Paid in FY 2021-22				12,401
FY 2022-23 Impact from Carryover from FY 2021-22				(\$36,707)
Estimated FY 2022-23 Rates	1.50%	\$203.34	\$200.29	(\$3.05)
Estimated FY 2022-23 Patient Days				306,165
Estimated FY 2022-23 Days Paid in FY 2022-23				293,214
FY 2021-22 Impact from FY 2021-22				(\$894,303)
Total FY 2022-23 Impact				(\$931,010)

(7) Hospice Services refers here to the following categories of service: hospice routine home care, hospice general inpatient, continuous home care, hospice inpatient respite, hospice physician visit, and hearing, vision, dental, and other PETI services. Hospice routine home care (HRHC) expenditure is forecast by multiplying estimated patient days by estimated rates in FY 2020-21, FY 2021-22, and FY 2022-23. HRHC patient days for FY 2020-21 are estimated by trending forward FY 2019-20 patient days by 2.79%, while FY 2021-22 and FY 2022-23 patient days are estimated by trending forward the previous year's patient days estimate also by 2.79%. HRHC rates are estimated by trending forward the previous years rates by 3.00%. Hospice general inpatient expenditure estimates are produced by assuming an increase of 2.77% for FY 2019-20, FY 2020-21, and FY 2021-22. Expenditure estimates for the remaining service categories are based on trending FY 2019-20 actuals forward by 10.00% for FY 2020-21.

# Exhibit G - COMMUNITY BASED LONG-TERM CARE - HOSPICE Cash-Based Actuals and Projections

							Cash Based	Actuals								
HOSPICE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$32,103,872	\$2,846,601	\$6,969,248	\$15,185	\$114,106	\$67,245	\$4,370	\$0	\$116,333	\$0	\$1,215	\$1,787	\$0	\$0	\$86,846	\$42,326,808
FY 2012-13	\$33,427,166	\$2,868,294	\$6,505,178	\$140,227	\$168,345	\$92,875	\$117,103	\$0	\$37,390	\$0	\$0	\$0	\$0	\$0	\$40,522	\$43,397,100
FY 2013-14	\$31,935,985 \$33,254,147	\$3,814,200 \$3,938,226	\$7,418,711 \$6,581,768	\$344,667 \$160,754	\$158,722 \$330,107	\$144,242 \$193,375	\$1,024,926 \$2,912,744	\$0 \$6,536	\$149,582 \$201,612	\$0 \$2,960	\$0 \$40,525	\$0 \$0	\$0 \$0	\$0 \$0	\$26,219 \$0	\$45,017,254 \$47,622,754
FY 2014-15 FY 2015-16	\$37,009,391	\$3,642,171	\$6,535,276	\$273.695	\$288.882	\$88.848	\$3,367,593	\$17,689	\$139,670	\$2,900	\$1,102	\$0 \$0	\$0	\$2,599	\$0 \$0	\$51,366,916
FY 2016-17	\$40,464,888	\$3,047,499	\$5,646,291	\$231,548	\$352,449	\$197,716	\$3,656,340	\$28,585	\$141,542	\$7,016	\$5,060	\$5,814	\$10,115	\$156,497	\$0	\$53,951,360
FY 2017-18	\$45,297,838	\$4,103,191	\$6,068,695	\$471,009	\$404,771	\$238,838	\$4,233,842	\$14,346	\$180,721	\$20,583	\$6,769	\$0	\$0	\$12,016	\$0	\$61,052,619
FY 2018-19	\$48,509,514	\$4,409,676	\$6,843,220	\$409,070	\$498,712	\$285,004	\$4,064,850	\$8,391	\$227,302	\$77,305	\$70,018	\$0	\$0	\$0	\$0	\$65,403,062
FY 2019-20	\$46,515,314	\$12,839,924	\$259,354,693	\$8,298,369	\$853,523	\$98,195	\$3,452,075	\$0	\$50,493,731	\$3,331,204	\$19,723,404	\$5,393	\$1,550	\$0	\$0	\$404,967,375
Estimated FY 2020-21	\$7,228,032	\$2,356,416	\$45,766,370	\$2,017,183	\$159,341	\$23,996	\$726,274	\$0	\$9,658,630	\$697,937	\$3,439,012	\$1,093	\$431	\$0	\$0	\$72,074,715
Estimated FY 2021-22	\$5,319,794	\$2,547,246	\$51,204,318	\$2,020,029	\$200,372	\$25,031	\$820,345	\$0	\$10,005,187	\$742,579	\$3,691,135	\$1,275	\$466	\$0	\$0	\$76,577,777
Estimated FY 2022-23	\$3,003,618	\$2,820,339	\$56,131,007	\$2,407,449	\$258,005	\$27,803	\$982,771	\$0	\$11,404,770	\$888,801	\$4,019,448	\$1,467	\$499	\$0	\$0	\$81,945,977
						Percen	t Change in Ca	ish Based Actu	ais							
HOSPICE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	4.12%	0.76%	-6.66%	823.46%	47.53%	38.11%	2579.70%	0.00%	-67.86%	0.00%	-100.00%	-100.00%	0.00%	0.00%	-53.34%	2.53%
FY 2013-14 FY 2014-15	-4.46% 4.13%	32.98%	14.04% -11.28%	145.79% -53.36%	-5.72% 107.98%	55.31% 34.06%	775.23% 184.19%	0.00% 100.00%	300.06% 34.78%	0.00% 100.00%	0.00% 100.00%	0.00%	0.00%	0.00%	-35.30% -100.00%	3.73% 5.79%
FY 2014-13 FY 2015-16	11.29%		-0.71%	70.26%	-12.49%	-54.05%	15.62%	170.64%	-30.72%	-100.00%	-97.28%	0.00%	0.00%	100.00%	0.00%	7.86%
FY 2016-17	9.34%		-13.60%	-15.40%	22.00%	122.53%	8.57%	61.60%	1.34%	100.00%	359.17%	100.00%	100.00%	5921.43%	0.00%	5.03%
FY 2017-18	11.94%		7.48%	103.42%	14.85%	20.80%	15.79%	-49.81%	27.68%	193.37%	33.77%	-100.00%	-100.00%	-92.32%	0.00%	13.16%
FY 2018-19	7.09%	7.47%	12.76%	-13.15%	23.21%	19.33%	-3.99%	-41.51%	25.78%	275.58%	934.39%	0.00%	0.00%	-100.00%	0.00%	7.13%
FY 2019-20	-4.11%		3689.95%	1928.59%	71.15%	-65.55%	-15.07%	-100.00%	22114.38%	4209.17%	28069.05%	100.00%	100.00%	0.00%	0.00%	519.19%
Estimated FY 2020-21	-84.46%	-81.65%	-82.35%	-75.69%	-81.33%	-75.56%	-78.96%	0.00%	-80.87%	-79.05%	-82.56%	-79.73%	-72.19%	0.00%	0.00%	-82.20%
Estimated FY 2021-22	-26.40%	8.10%	11.88%	0.14%	25.75%	4.31%	12.95%	0.00%	3.59%	6.40%	7.33%	16.65%	8.12%	0.00%	0.00%	6.25%
Estimated FY 2022-23	-43.54%	10.72%	9.62%	19.18%	28.76%	11.07%	19.80%	0.00%	13.99%	19.69%	8.89%	15.06%	7.08%	0.00%	0.00%	7.01%
		1	1				Per Capit	a Cost	1							
HOSPICE	Adults 65 and Older	Disabled Adults 60 to 64	Disabled Individuals to 59	Disabled Buy- In	MAGI Parents/ Caretakers to	MAGI Parents/ Caretakers	MAGI Adults	Breast & Cervical	Eligible Children	SB 11-008 Eligible	Foster Care	MAGI Pregnant	SB 11-250 Eligible	Non-Citizens-	Partial Dual	
	(OAP-A)	(OAP-B)	(AND/AB)	ın	68% FPL	69% to 133% FPL		Cancer Program	(AFDC-C/BC)	Children		Adults	Pregnant Adults	Emergency Services	Eligibles	TOTAL
FY 2011-12				\$292.02			\$3.85				\$0.07					**TOTAL \$68.27
FY 2011-12 FY 2012-13	(OAP-A) \$807.85 \$818.75	(OAP-B) \$339.57 \$316.90	(AND/AB) \$117.26 \$105.06	\$292.02 \$157.91	\$1.22 \$1.69	\$1.90 \$2.24	\$3.85 \$11.01	\$0.00 \$0.00	\$0.35 \$0.10	\$0.00 \$0.00	\$0.07 \$0.00	\$0.23 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$4.60 \$1.91	\$68.27 \$63.54
FY 2012-13 FY 2013-14	\$807.85 \$818.75 \$763.36	\$339.57 \$316.90 \$387.11	\$117.26 \$105.06 \$115.15	\$292.02 \$157.91 \$134.64	\$1.22 \$1.69 \$1.27	\$1.90 \$2.24 \$3.06	\$11.01 \$11.75	\$0.00 \$0.00 \$0.00	\$0.35 \$0.10 \$0.37	\$0.00 \$0.00 \$0.00	\$0.07 \$0.00 \$0.00	\$0.23 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12	\$68.27 \$63.54 \$52.29
FY 2012-13 FY 2013-14 FY 2014-15	\$807.85 \$818.75 \$763.36 \$795.23	\$339.57 \$316.90 \$387.11 \$376.29	\$117.26 \$105.06 \$115.15 \$98.90	\$292.02 \$157.91 \$134.64 \$44.32	\$1.22 \$1.69 \$1.27 \$2.04	\$1.90 \$2.24 \$3.06 \$2.69	\$11.01 \$11.75 \$12.07	\$0.00 \$0.00 \$0.00 \$0.00 \$18.62	\$0.35 \$0.10 \$0.37 \$0.45	\$0.00 \$0.00 \$0.00 \$0.00 \$0.06	\$0.07 \$0.00 \$0.00 \$2.02	\$0.23 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16	\$807.85 \$818.75 \$763.36 \$795.23 \$872.80	\$339.57 \$316.90 \$387.11 \$376.29 \$345.92	\$117.26 \$105.06 \$115.15 \$98.90 \$94.99	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02	\$11.01 \$11.75 \$12.07 \$10.51	\$0.00 \$0.00 \$0.00 \$0.00 \$18.62 \$54.93	\$0.35 \$0.10 \$0.37 \$0.45 \$0.30	\$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.06	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17	\$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89	\$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11	\$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51	\$0.00 \$0.00 \$0.00 \$0.00 \$18.62 \$54.93 \$121.64	\$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30	\$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.00 \$0.11	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18	\$807.85 \$818.75 \$763.36 \$795.23 \$872.80	\$339.57 \$316.90 \$387.11 \$376.29 \$345.92	\$117.26 \$105.06 \$115.15 \$98.90 \$94.99	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02	\$11.01 \$11.75 \$12.07 \$10.51	\$0.00 \$0.00 \$0.00 \$0.00 \$18.62 \$54.93	\$0.35 \$0.10 \$0.37 \$0.45 \$0.30	\$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.06 \$0.11 \$0.32	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17	\$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89	(OAP-B)  \$339.57  \$316.90  \$387.11  \$376.29  \$271.11  \$347.82	(AND/AB) \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01	\$0.00 \$0.00 \$0.00 \$18.62 \$54.93 \$121.64 \$92.55	\$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30	\$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.00 \$0.11	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$4.28	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	\$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27	(OAP-B)  \$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11 \$347.82 \$346.65	(AND/AB) \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.31 \$693.81	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$777.36 \$138.35	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01 \$12.30 \$10.69 \$1.90	\$0.00 \$0.00 \$0.00 \$18.62 \$54.93 \$121.64 \$92.55 \$57.87 \$0.00	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.41 \$0.54 \$123.90 \$22.05	\$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.00 \$0.11 \$0.32 \$1.30 \$59.57 \$10.60	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$4.28 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15
FY 2012-13 FY 2013-14 FY 2014-15 FY 2016-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56	\$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11 \$347.82 \$346.65 \$985.49 \$175.39 \$186.35	(AND/AB) \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3,898.31 \$693.31	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$777.36 \$138.35 \$147.00	68% FPL  \$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01 \$12.30 \$10.69 \$1.90 \$2.02	Program	(AFDC-C/BC)  \$0.35  \$0.10  \$0.37  \$0.45  \$0.30  \$0.30  \$0.41  \$0.54  \$123.90  \$22.05  \$23.43	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.01 \$0.32 \$1.30 \$59.57 \$10.60 \$11.26	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.47 \$0.00 \$0.49	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$0.98 \$59.28 \$4.28 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$44.08 \$46.42 \$51.85 \$332.15 \$53.05
FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21	\$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22	\$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11 \$347.82 \$346.65 \$985.49 \$175.39	(AND/AB) \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.31 \$693.81	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$777.36 \$138.35	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01 \$12.30 \$10.69 \$1.90 \$2.02	Program  \$0.00 \$0.00 \$0.00 \$18.62 \$54.93 \$121.64 \$92.55 \$57.87 \$0.00 \$0.00 \$0.00 \$0.00	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.31 \$0.41 \$0.54 \$123.90 \$22.05 \$23.43 \$25.07	\$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.00 \$0.11 \$0.32 \$1.30 \$59.57 \$10.60	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$4.28 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15
FY 2012-13 FY 2013-14 FY 2014-15 FY 2016-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56	\$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11 \$347.82 \$346.65 \$985.49 \$175.39 \$186.35	(AND/AB) \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3,898.31 \$693.31	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$777.36 \$138.35 \$147.00	68% FPL  \$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01 \$12.30 \$10.69 \$1.90 \$2.02	Program  \$0.00 \$0.00 \$0.00 \$18.62 \$54.93 \$121.64 \$92.55 \$57.87 \$0.00 \$0.00 \$0.00 \$0.00	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.31 \$0.31 \$0.32 \$0.31 \$0.31 \$0.54 \$123.90 \$22.05 \$23.43 \$25.07	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.01 \$0.32 \$1.30 \$59.57 \$10.60 \$11.26	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.47 \$0.00 \$0.49	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$0.98 \$59.28 \$4.28 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05
FY 2012-13 FY 2013-14 FY 2014-15 FY 2016-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56	\$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11 \$347.82 \$346.65 \$985.49 \$175.39 \$186.35	(AND/AB) \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3,898.31 \$693.31	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$777.36 \$138.35 \$147.00	68% FPL  \$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01 \$12.30 \$10.69 \$1.90 \$2.02	Program  \$0.00 \$0.00 \$0.00 \$18.62 \$54.93 \$121.64 \$92.55 \$57.87 \$0.00 \$0.00 \$0.00 \$0.00	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.31 \$0.31 \$0.32 \$0.31 \$0.31 \$0.54 \$123.90 \$22.05 \$23.43 \$25.07	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.06 \$0.01 \$0.32 \$1.30 \$59.57 \$10.60 \$11.26	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.47 \$0.00 \$0.49	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$0.98 \$59.28 \$4.28 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05
FY 2012-13 FY 2013-14 FY 2013-15 FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22 FY 2019-20 FY 2019-20 FY 2019-20 FY 2019-20 FY 2019-20 FY 2019-20	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35%	(OAP-B)  \$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11 \$347.82 \$346.65 \$985.49 \$175.39 \$186.35 \$199.42  Disabled Adults 60 to 64 (OAP-B)  -6.68%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.31 \$737.16 \$7781.83  Disabled Individuals to 59 (AND/AB)	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$177.36 \$138.35 \$147.00 \$157.30	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92 \$0.98 \$1.05	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 Perc MAGI Parents/ Caretakers 69% to 133% FPL	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01 \$12.30 \$10.69 \$2.02 \$2.16 ent Change in I	Program	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$22.05 \$22.43 \$25.07  tt  Eligible Children (AFDC-C/BC)	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$59.57 \$10.60 \$11.26 \$12.05  SB 11-008 Eligible Children	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.47 \$0.08 \$0.09 \$0.09	Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00 \$0.00 \$0.00 \$0.13 \$0.13 \$0.14  SB 11-250 Eligible Pregnant Adults  0.00%	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$4.28 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2016-17 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2020-22 Estimated FY 2020-23  HOSPICE  FY 2013-14	(OAP-A)  \$807.85 \$818.75 \$763.36 \$7795.23 \$872.80 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% 4-6.77%	(OAP-B)  \$339.57  \$316.90  \$387.11  \$376.29  \$345.92  \$71.11  \$347.82  \$346.65  \$346.65  \$186.35  \$199.42  Disabled Adults  60 to 64  (OAP-B)  \$22.16%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.11 \$693.81 \$737.16 \$7788.83	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.62 \$45.52 \$177.36 \$138.35 \$147.00 \$157.30 Disabled Buy-In	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92 \$0.98 \$1.05 \$4.05	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 <b>Perc</b> MAGI Parents/ Caretakers 69% to 133% FPL	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.30 \$10.69 \$2.02 \$2.16 ent Change in l	Solution	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$22.05 \$23.43 \$25.07  tt  Eligible Children (AFDC-C/BC)  -71.43% 270.00%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$59.57 \$11.60 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00%	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.40 \$0.43 \$0.00 \$0.43 \$0.09 \$0.09 \$0.09	Adults	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$4.28 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 \$54.44 \$53.05
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2021-22 Estimated FY 2022-23  HOSPICE  FY 2013-14 FY 2013-14 FY 2014-15	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% 4.17% 4.17%	(OAP-B)  \$339.57 \$316.90 \$387.11 \$376.29 \$271.11 \$347.82 \$346.65 \$985.49 \$1175.39 \$186.35 \$199.42  Disabled Adults 60 to 64 (OAP-B)  -6.68% 22.16%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3,898.31 \$693.81 \$737.16 \$788.83  Disabled Individuals to 59 (AND/AB)  -10.40%	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$777.36 \$138.35 \$147.00 \$157.30 Disabled Buy-In	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.98 \$1.05 MAGI Parents/ Caretakers to 68% FPL 38.52% 60.63%	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 <b>Perc</b> <b>MAGI Parents/</b> Caretakers 69% to 133% FPL	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.30 \$10.69 \$1.90 \$2.02 \$2.16 ent Change in I	Program   \$0.00   \$0.00   \$0.00   \$0.00   \$18.62   \$54.93   \$121.64   \$92.55   \$57.87   \$0.00   \$0.0	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$22.55 \$23.43 \$25.07 st  Eligible Children (AFDC-C/BC)  -71.43% 270.00% 21.62%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.11 \$0.32 \$1.30 \$59.57 \$11.60 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00% 100.00%	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.47 \$0.00 \$0.47 \$0.09 \$0.09 \$0.09	Adults	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligibles  \$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.40 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 TOTAL
FY 2012-13 FY 2013-14 FY 2013-15 FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2019-20 Estimated FY 2020-21 Estimated FY 2020-23  HOSPICE  FY 2013-14 FY 2014-15 FY 2013-14 FY 2015-16	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% -6.77% 4.17% 9.75%	(OAP-B)  \$339.57  \$316.90  \$387.11  \$376.29  \$345.92  \$271.11  \$347.82  \$346.65  \$985.49  \$175.39  \$186.35  \$199.42   Disabled Adults  60 to 64  (OAP-B)  -6.68%  -2.16%  -2.80%  -8.07%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.31 \$737.16 \$7781.83  Disabled Individuals to 59 (AND/AB)  -10.40% 9.60% -14.11% -13.95%	\$292.02 \$157.91 \$134.64 \$44.32 \$37.04 \$57.62 \$45.52 \$1777.36 \$138.35 \$147.00 \$157.30 <b>Disabled Buy-In</b> -45.92% -14.74% -67.08%	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92 \$0.98 \$1.05 \$MAGI Parents/ Caretakers to 68% FPL \$3.85 \$2.84 \$1.05	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 Perc MAGI Parents/ Caretakers 69% to 133% FPL. 17.89% 36.61% -12.09% -62.08%	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.01 \$12.30 \$10.69 \$2.02 \$2.16 ent Change in I	Program	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.31 \$0.41 \$0.54 \$123.90 \$22.05 \$23.43 \$25.07  tt  Eligible Children (AFDC-C/BC)  -71.43% 270.00% 21.62% -33.33%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$59.57 \$10.60 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00% 0.00% 100.00% -100.00%	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20 Foster Care	S0.23   \$0.00   \$0.00   \$0.00   \$0.00   \$0.43   \$0.00   \$0.47   \$0.08   \$0.09   \$0.09   \$0.09   \$0.09   \$0.00%   \$0.00	Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$5.14 \$0.00 \$0.00 \$0.13 \$0.13 \$0.14  SB 11-250 Eligible Pregnant Adults  0.00% 0.00% 0.00% 0.00%	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$0.00% \$0.00%	Eligibles  \$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  \$0.00 \$0.00  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 TOTAL
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2016-17 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2020-22 Estimated FY 2020-23  HOSPICE  FY 2013-14 FY 2014-15 FY 2016-17	(OAP-A)  \$807.85 \$818.75 \$763.36 \$7795.23 \$872.80 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% -6.77% 4.17% 9.75% 5.51%	(OAP-B)  \$339.57  \$316.90  \$387.11  \$376.29  \$345.92  \$71.11  \$347.82  \$346.65  \$346.65  \$186.35  \$199.42  Disabled Adults  60 to 64  (OAP-B)  \$22.16%  \$22.16%  \$2.2.16%  \$4.07%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.11 \$737.16 \$7788.83  Disabled Individuals to 59 (AND/AB) \$9.60% \$9.60% \$14.11%	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$177.36 \$138.35 \$147.00 \$157.30 Disabled Buy-In -45.92% -47.474% -67.08% -15.86%	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92 \$0.98 \$1.05 \$1.05 \$4.05	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 <b>Perc</b> MAGI Parents/ Caretakers 69% to 133% FPL 17.89% 36.61% -12.09% -22.08%	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.30 \$10.69 \$2.02 \$2.16 ent Change in l MAGI Adults 185.97% 6.72% 2.72% 1.2.92% 0.00%	Program   \$0.00   \$0.00   \$0.00   \$0.00   \$18.62   \$54.93   \$121.64   \$92.55   \$57.87   \$0.00   \$0.0	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$123.90 \$22.05 \$23.43 \$25.07  tt  Eligible Children (AFDC-C/BC) 270.00% \$21.62% \$23.333% \$0.00%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$1.30 \$1.1.26 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00% \$0.00% \$100.00% \$100.00%	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20 \$187.20 \$187.20	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.00 \$0.09 \$0.09 \$0.09 \$0.09 \$0.09 \$0.09 \$0.09	Adults	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$4.28 \$0.00	\$4.60 \$1.91 \$1.12 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 \$54.44 \$53.05
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2016-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2021-22 Estimated FY 2022-23  HOSPICE  FY 2013-14 FY 2014-15 FY 2016-17 FY 2016-17 FY 2016-17	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.32 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% 4.17% 9.75% 5.51% 7.15%	(OAP-B)  \$339.57 \$316.90 \$387.11 \$376.29 \$271.11 \$347.82 \$346.65 \$988.49 \$1186.35 \$199.42  Disabled Adults 60 to 64 (OAP-B)  -6.68% 22.16% -2.80% -2.80% -21.63% 28.29%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3,898.31 \$693.81 \$737.16 \$788.83  Disabled Individuals to 59 (AND/AB)  -10.40% -14.11% -3.95% -12.10% -7.63%	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$777.36 \$138.35 \$147.00 \$157.30 Disabled Buy-In  -45.92% -67.08% -6.68% -1.5.86% -1.5.86% -1.5.86% -1.5.86% -1.5.86% -1.5.86% -1.5.86% -1.5.86% -1.5.86% -1.5.86%	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.98 \$1.05 \$MAGI Parents/ Caretakers to 68% FPL \$3.852% \$4.60,53% \$4.13,24% \$4.13,24% \$4.13,24% \$4.13,24% \$4.13,24% \$4.13,24% \$4.13,24% \$4.13,24% \$4.13,24% \$4.13,24%	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 Perc MAGI Parents/ Caretakers 69% to 133% FPL. 17.89% 36.61% -12.09% -62.08%	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.30 \$10.69 \$1.90 \$2.02 \$2.16 ent Change in l	Program   \$0.00   \$0.00   \$0.00   \$0.00   \$18.62   \$54.93   \$12.64   \$92.55   \$57.87   \$0.00	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$22.55 \$23.43 \$25.07 \$t  Eligible Children (AFDC-C/BC)  -71.43% 270.00% 21.62% 33.33% 0.00% 36.67%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$59.57 \$11.60 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00% 100.00% 1100.00% 190.91%	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20 Foster Care	Solution	Adults	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$0.00% \$0.00%	Eligibles  \$4.60 \$1.91 \$1.12 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  \$0.00 \$0.00  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 <b>TOTAL</b>
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2016-17 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2020-22 Estimated FY 2020-23  HOSPICE  FY 2013-14 FY 2014-15 FY 2016-17	(OAP-A)  \$807.85 \$818.75 \$763.36 \$7795.23 \$872.80 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% -6.77% 4.17% 9.75% 5.51%	(OAP-B)  \$339.57  \$316.90  \$387.11  \$376.29  \$345.92  \$71.11  \$347.82  \$346.65  \$346.65  \$186.35  \$199.42  Disabled Adults  60 to 64  (OAP-B)  \$22.16%  \$22.16%  \$2.2.16%  \$4.07%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.11 \$737.16 \$7788.83  Disabled Individuals to 59 (AND/AB) \$9.60% \$9.60% \$14.11%	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$177.36 \$138.35 \$147.00 \$157.30 Disabled Buy-In -45.92% -47.474% -67.08% -15.86%	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92 \$0.98 \$1.05 \$1.05 \$4.05	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 <b>Perc</b> <b>MAGI Parents/</b> Caretakers <b>69%</b> to 133% <b>FPL</b> 17.89% 36.61% -12.09% -62.08% 92.16%	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.30 \$10.69 \$2.02 \$2.16 ent Change in l MAGI Adults 185.97% 6.72% 2.72% 1.2.92% 0.00%	Program   \$0.00   \$0.00   \$0.00   \$0.00   \$18.62   \$54.93   \$121.64   \$92.55   \$57.87   \$0.00   \$0.0	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$123.90 \$22.05 \$23.43 \$25.07  tt  Eligible Children (AFDC-C/BC) 270.00% \$21.62% \$23.333% \$0.00%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$1.30 \$1.1.26 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00% \$0.00% \$100.00% \$100.00%	\$0.07 \$0.00 \$0.00 \$2.02 \$0.06 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20 \$187.20 \$10.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.25 \$0.32 \$0	\$0.23 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.43 \$0.00 \$0.00 \$0.09 \$0.09 \$0.09 \$0.09 \$0.09 \$0.09 \$0.09	Adults	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.98 \$59.28 \$0.00	Eligibles  \$4.60 \$1.91 \$1.12 \$0.00	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 \$54.44 \$53.05
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2021-22 Estimated FY 2022-23  HOSPICE  FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-20 Estimated FY 2020-21	(OAP-A)  \$807.85 \$818.75 \$763.36 \$818.75 \$763.36 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% 4.17% 9.75% 3.10% 7.15% 3.10% -3.84% -84.70%	(OAP-B)  \$339.57 \$316.90 \$387.11 \$376.29 \$271.11 \$347.82 \$346.65 \$985.49 \$1175.39 \$186.35 \$199.42  Disabled Adults 60 to 64 (OAP-B)  -6.68% -2.80% -2.80% -2.163% 28.29% -2.1.34% -2.8.29% -3.44% -3.4	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3,898.31 \$693.81 \$737.16 \$788.83  Disabled Individuals to 59 (AND/AB)  -10.40% -14.11% -3.95% -12.10% -7.63% 10.94% -3810.04% -82.20%	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$37.04 \$57.62 \$45.52 \$77.36 \$138.35 \$147.00 \$157.30 Disabled Buy-In  -45.92% -67.08% -6.08% -5.56% -21.00% 1607.73% -82.20%	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.98 \$1.05 \$MAGI Parents/ Caretakers to 68% FPL 38.52% 60.63% 61.324% 23.16% 23.16% 23.12% 82.25% 82.25%	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33  Perc  MAGI Parents/ Caretakers 69% to 133% FPL.  17.89% -62.08% 92.16% 63.27% 40.00% -63.17% -82.42%	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.30 \$10.69 \$2.02 \$2.16 ent Change in l MAGI Adults 185.97% 6.72% 6.72% 6.72% 6.72% 6.72% 1.92% 14.27% 14.27% 14.27% 14.27%	Program   \$0.00   \$0.00   \$0.00   \$0.00   \$18.62   \$54.93   \$12.64   \$92.55   \$57.87   \$0.00	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$22.85 \$23.43 \$25.07 \$t  Eligible Children (AFDC-C/BC)  -71.43% 270.00% 21.62% 33.33% 0.00% 36.67% 31.71% 22844.44% -82.20%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$59.57 \$11.60 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00% 100.00% 110.00% 190.91% 306.25% 4482.31% -82.21%	\$0.07 \$0.00 \$0.00 \$0.00 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20 \$187.20 \$10.00% \$0.	Solution	Adults	\$0.00 \$0.00	Eligibles  \$4.60 \$1.91 \$1.12 \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 \$54.44 \$53.05 \$70.71 \$10.71 \$
FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2015-16 FY 2015-16 FY 2016-17 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2020-22 Estimated FY 2020-21 Estimated FY 2021-22 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2018-19 FY 2019-20	(OAP-A)  \$807.85 \$818.75 \$763.36 \$795.23 \$872.80 \$920.89 \$986.73 \$1,017.27 \$978.22 \$149.65 \$109.56 \$59.87  Adults 65 and Older (OAP-A)  1.35% -6.77% 4.17% 9.75% 5.51% 7.15%	(OAP-B)  \$339.57 \$316.90 \$387.11 \$376.29 \$345.92 \$271.11 \$347.82 \$346.65 \$985.49 \$1775.39 \$186.35 \$199.42  Disabled Adults 60 to 64 (OAP-B)  -6.68% -2.2.16% -2.2.16% -2.2.16% -2.1.63% -2.1.63% -2.1.63% -2.1.63% -2.2.2.9% -8.07% -2.1.63% -2.2.2.9% -8.07% -2.1.63% -2.2.2.9% -8.07% -2.1.63% -2.2.2.9% -8.2.2.9% -8.2.2.9% -8.2.2.9% -8.2.2.9% -8.2.2.9%	(AND/AB)  \$117.26 \$105.06 \$115.15 \$98.90 \$94.99 \$83.50 \$89.87 \$99.70 \$3.898.31 \$693.81 \$737.16 \$7737.16 Individuals to 59 (AND/AB)  -10.40% -14.11% -1.2.10% -1.2.10% -1.3.95% -1.2.10% -1.0.94%	\$292.02 \$157.91 \$134.64 \$44.32 \$44.02 \$57.62 \$45.52 \$177.36 \$138.35 \$147.00 \$157.30 Disabled Buy-In -45.92% -14.74% -67.08% -15.86% -15.86% 55.56% -21.00% 1607.73%	\$1.22 \$1.69 \$1.27 \$2.04 \$1.77 \$2.18 \$2.25 \$2.84 \$5.19 \$0.92 \$0.98 \$1.05	\$1.90 \$2.24 \$3.06 \$2.69 \$1.02 \$1.96 \$3.20 \$4.48 \$1.65 \$0.29 \$0.31 \$0.33 <b>Perc</b> MAGI Parents/ Caretakers 69% to 133% FPL 17.89% 36.61% -12.09% -62.08% 92.16% 63.27%	\$11.01 \$11.75 \$12.07 \$10.51 \$10.51 \$12.30 \$10.69 \$2.02 \$2.16 ent Change in l MAGI Adults 185.97% 6.72% 2.72% -1.2.92% 0.00% 14.27% 2.41%	Program   \$0.00   \$0.00   \$0.00   \$0.00   \$18.62   \$54.93   \$121.64   \$92.55   \$57.87   \$0.00   \$0.0	(AFDC-C/BC)  \$0.35 \$0.10 \$0.37 \$0.45 \$0.30 \$0.30 \$0.30 \$0.30 \$0.30 \$0.31 \$0.54 \$123.90 \$122.05 \$23.43 \$25.07  tt  Eligible Children (AFDC-C/BC) 270.00% 21.62% 23.33% 0.00% 36.67% 31.71%	Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.32 \$1.30 \$1.30 \$1.26 \$11.26 \$12.05  SB 11-008 Eligible Children  0.00% \$10.00% \$10.00% \$10.00% \$10.00% \$10.00% \$10.00% \$10.00% \$10.00% \$10.00% \$10.00% \$10.00%	\$0.07 \$0.00 \$0.00 \$0.00 \$0.25 \$0.25 \$0.32 \$3.21 \$925.11 \$164.65 \$174.94 \$187.20 \$100.00% \$0.0	Solution	Adults	\$0.00 \$0.00	Eligibles  \$4.60 \$1.91 \$1.12 \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$68.27 \$63.54 \$52.29 \$41.01 \$39.60 \$40.08 \$46.42 \$51.85 \$332.15 \$53.05 \$54.44 \$53.05 \$70.71 \$17.71 \$17.71 \$15.82 \$11.70 \$

## Exhibit H - LONG-TERM CARE AND INSURANCE Summary

					FY 20	020-21 Long-T	erm Care and I	nsurance Requ	uest							
FY 2020-21	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Class I Nursing Facilities	\$545,288,592	\$60,077,922	\$124,000,470	\$96,018	\$312,048	\$0	\$4,180,857	\$0	\$0	\$0	\$62,322	\$8,273	\$0	\$0	\$0	\$734,026,502
Class II Nursing Facilities	\$777,517	\$319,924	\$5,455,316	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$6,552,757
Program for All-Inclusive Care for the Elderly	\$205,764,428	\$28,962,647	\$12,893,092	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$247,620,167
Subtotal Long-Term Care	\$751,830,537	\$89,360,493	\$142,348,878	\$96,018	\$312,048	\$0	\$4,180,857	\$0		\$0	\$62,322	\$8,273	\$0	\$0	\$0	\$988,199,426
Supplemental Medicare Insurance Benefit	\$113,264,450	\$6,681,597	\$58,291,510	\$0	\$380,685	\$0	\$0	\$0		\$0	\$0	\$0	\$0		\$33,531,726	\$212,149,969
Health Insurance Buy-In	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	. , , .	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Subtotal Insurance	\$113,272,370	\$6,695,307	\$60,588,140	\$0	\$389,802	\$12,298	\$113,233	\$0	,	\$0	\$0	\$5,534	\$0	\$0	\$33,531,726	\$214,639,539
Total Long-Term Care and Insurance	\$865,102,907	\$96,055,800	\$202,937,018	\$96,018	\$701,850	\$12,298	\$4,294,090	\$0	, .	\$0	\$62,322	\$13,807	\$0		\$33,531,726	\$1,202,838,965
Class I Nursing Facility Supplemental Payments	\$90,697,501	\$9,992,722	\$20,624,919	\$15,971	\$51,903	\$0	\$695,399	\$0	\$0	\$0	\$10,366	\$1,376	\$0	\$0	\$0	\$122,090,157
Total Long-Term Care and Insurance Including Financing	\$955,800,408	\$106,048,522	\$223,561,937	\$111,989	\$753,753	\$12,298	\$4,989,489	\$0	\$31,129	\$0	\$72,688	\$15,183	\$0	\$0	\$33,531,726	\$1,324,929,122
				•	FY 20	021-22 Long-T	erm Care and I	nsurance Requ	uest					•		
FY 2021-22	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Class I Nursing Facilities	\$562,034,449	\$61,922,920	\$127,808,534	\$98,967	\$321,631	\$0	\$4,309,251	\$0	\$0	\$0	\$64,236	\$8,527	\$0	\$0	\$0	\$756,568,515
Class II Nursing Facilities	\$851,614	\$350,413	\$5,975,208	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,177,235
Program for All-Inclusive Care for the Elderly	\$225,799,734	\$31,782,743	\$14,148,493	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$271,730,970
Subtotal Long-Term Care	\$788,685,797	\$94,056,076	\$147,932,235	\$98,967	\$321,631	\$0	\$4,309,251	\$0	\$0	\$0	\$64,236	\$8,527	\$0	\$0	\$0	\$1,035,476,720
Supplemental Medicare Insurance Benefit	\$119,174,184	\$7,120,366	\$63,178,242	\$0	\$459,428	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$35,608,674	\$225,540,894
Health Insurance Buy-In	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	,	\$0	\$0	\$5,534	\$0		\$0	\$2,489,570
Subtotal Insurance	\$119,182,104	\$7,134,076	\$65,474,872	\$0	\$468,545	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$35,608,674	\$228,030,464
Total Long-Term Care and Insurance	\$907,867,901	\$101,190,152	\$213,407,107	\$98,967	\$790,176	\$12,298	\$4,422,484	\$0	\$31,129	\$0	\$64,236	\$14,061	\$0	\$0	\$35,608,674	\$1,263,507,184
Class I Nursing Facility Supplemental Payments	\$90,208,379	\$9,938,832	\$20,513,690	\$15,885	\$51,623	\$0	\$691,649	\$0	\$0	\$0	\$10,310	\$1,369	\$0	\$0	\$0	\$121,431,737
Total Long-Term Care and Insurance Including Financing	\$998,076,280	\$111,128,984	\$233,920,797	\$114,852	\$841,799	\$12,298	\$5,114,133	\$0	\$31,129	\$0	\$74,546	\$15,430	\$0	\$0	\$35,608,674	\$1,384,938,921
					FY 20	022-23 Long-T	erm Care and I	nsurance Requ	uest							
FY 2022-23	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Class I Nursing Facilities	\$580,962,964	\$64,008,395	\$132,112,943	\$102,300	\$332,463	\$0	\$4,454,380	\$0		\$0	\$66,399	\$8,814	\$0		\$0	
Class II Nursing Facilities	\$895,472	\$368,459	\$6,282,931	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$7,546,862
Program for All-Inclusive Care for the Elderly	\$250,888,056	\$35,314,083	\$15,720,514	\$0	\$0	\$0	\$0	\$0			\$0	\$0	\$0		\$0	, ,
Subtotal Long-Term Care	\$832,746,492	\$99,690,937	\$154,116,388	\$102,300	\$332,463	\$0	\$4,454,380	\$0			\$66,399	\$8,814	\$0		\$0	\$1,091,518,173
Supplemental Medicare Insurance Benefit Health Insurance Buy-In	\$125,831,158 \$7,920	\$7,548,762 \$13,710	\$67,039,731 \$2,296,630	\$0 \$0	\$571,103 \$9,117	\$0 \$12.298	\$0 \$113,233	\$0 \$0		\$0 \$0	\$0 \$0	\$0 \$5,534	\$0 \$0	\$0 \$0	\$38,105,786 \$0	\$239,096,540 \$2,489,570
	\$125.839.078	\$13,/10 \$7.562.472	\$2,296,630 \$69,336,361	\$0 \$0	\$580,220	\$12,298 \$12.298	\$113,233 \$113,233	\$0 \$0		\$0 \$0	\$0 \$0	\$5,534 \$5.534	\$0 \$0	\$0 \$0	\$38,105,786	\$2,489,570 \$241,586,110
Subtotal Insurance	,,	, , .	, ,		,	- ,	,		,			,			,,	,,,,,
Total Long-Term Care and Insurance	\$958,585,570	\$107,253,409	\$223,452,749	\$102,300	\$912,683	\$12,298	\$4,567,613	\$0	,.	\$0	\$66,399	\$14,348	\$0	\$0	\$38,105,786	\$1,333,104,283
Class I Nursing Facility Supplemental Payments	\$95,041,524	\$10,471,331	\$21,612,764	\$16,736	\$54,389	\$0	\$728,706	\$0	\$0	\$0	\$10,862	\$1,442	\$0	\$0	\$0	\$127,937,754
Total Long-Term Care and Insurance Including Financing	\$1,053,627,094	\$117,724,740	\$245,065,513	\$119,036	\$967,072	\$12,298	\$5,296,319	\$0	\$31,129	\$0	\$77,261	\$15,790	\$0	\$0	\$38,105,786	\$1,461,042,037

# Class I Nursing Home Calculations for FY 2020-21, FY 2021-22 and FY 2022-23 $\,$

## FY 2020-21 Calculation

Service Expenditure:	Core Components	Reference
Estimate of FY 2020-21 Total Fund Portion of Per Diem Rate	\$241.70	Footnote 1
Estimate of FY 2020-21 Patient Payment (per day)	(\$39.67)	Footnote 1
Estimated FY 2020-21 Medicaid Reimbursement (per day)	\$202.03	1 domote 1
Edit Ond D. Add M. Hall D. H.	2 ( 12 070	
Estimate of Patient Days (without Hospital Back Up)	3,642,078	Footnote 2
Total Estimated Costs for FY 2020-21 Days of Service	\$735,809,018	Footnote 3
Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	92.89%	Footnote 4
Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$683,492,997	
Estimated Expenditure for FY 2019-20 Dates of Service	\$50,336,616	Footnote 5
Estimated Expenditure in FY 2020-21 Prior to Adjustments	\$733,829,613	
Bottom Line Adjustments:		
Hospital Back Up Program	\$11,251,133	Footnote 6
Recoveries from Department Overpayment Review	(\$500,000)	Footnote 7
HB 13-1152 1.5% permanent rate reduction effective July 1, 2013	(\$10,284,703)	Footnote 8
DOLA - Increase Housing Vouchers	(\$1,478,565)	Footnote 10
Local Minimum Wage Adjustment	\$1,209,024	
Total Bottom Line Adjustments:	\$196,889	
Total Estimated FY 2020-21 Total Fund Expenditure	\$734,026,502	
Percentage Change in Core Component Expenditure Over Prior Year	2.95%	
Supplemental Payments from Nursing Facility Provider Fund:		
Prior Year Rate Reconciliation	\$59,308,511	Page EH-9
Cognitive Performance Scale	\$688,395	Page EH-9
PASRR - Resident	\$4,223,925	Page EH-9
PASRR - Facility	\$1,934,874	Page EH-9
Medicaid Supplemental Payment	\$46,356,143	Page EH-9
Pay for Performance	\$9,078,309	Page EH-9
Total Estimated Supplemental Payments	\$121,590,157	
Total Estimated FY 2020-21 Expenditure	\$855,616,659	

# Class I Nursing Home Calculations for FY 2020-21, FY 2021-22 and FY 2022-23

## FY 2021-22 Calculation

Service Expenditure:	Core Components	Reference
Sol Floo Exponence.	core components	Reference
Estimate of FY 2021-22 Total Fund Portion of Per Diem Rate	\$246.55	Footnote 1
Estimate of FY 2021-22 Patient Payment (per day)	(\$40.49)	Footnote 1
Estimated FY 2021-22 Medicaid Reimbursement (per day)	\$206.06	
Estimate of Patient Days (without Hospital Back Up)	3,670,805	Footnote 2
Total Estimated Costs for FY 2021-22 Days of Service	\$756,406,078	Footnote 3
Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	92.89%	Footnote 4
Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$702,625,606	
Estimated Expenditure for FY 2020-21 Dates of Service	\$52,316,021	Footnote 5
Estimated Expenditure in FY 2021-22 Prior to Adjustments	\$754,941,627	
Bottom Line Adjustments:		
Hospital Back Up Program	\$11,432,165	Footnote 6
Recoveries from Department Overpayment Review	(\$500,000)	Footnote 7
HB 13-1152 1.5% permanent rate reduction effective July 1, 2013	(\$11,323,530)	Footnote 8
Department of Local Affairs- Increased Housing Vouchers.	(\$1,922,415)	Footnote 10
Local Minimum Wage Adjustment	\$3,940,668	HB19-1210
Total Bottom Line Adjustments:	\$1,626,888	
Total Estimated FY 2021-22 Expenditure	\$756,568,515	
Percentage Change in Core Component Expenditure Over Prior Year	3.07%	
Growth Beyond General Fund Cap	\$0	Page EH-9
Rate Cut Backfill	\$0	Page EH-9
Cognitive Performance Scale	\$689,305	Page EH-9
PASRR - Resident	\$4,283,051	Page EH-9
PASRR - Facility	\$2,047,250	Page EH-9
Medicaid Supplemental Payment	\$46,102,713	Page EH-9
Pay for Performance	\$9,160,004	Page EH-9
Total Estimated Supplemental Payments	\$121,431,737	<u> </u>
Total Estimated FY 2021-22 Expenditure	\$878,000,252	

# Class I Nursing Home Calculations for FY 2020-21, FY 2021-22 and FY 2022-23

### FY 2022-23 Calculation

Service Expenditure:	Core Components	Reference	
<del></del>			
Estimate of FY 2022-23 Total Fund Portion of Per Diem Rate	\$253.54	Footnote 1	
Estimate of FY 2022-23 Patient Payment (per day)	(\$41.30)	Footnote 1	
Estimated FY 2022-23 Medicaid Reimbursement (per day)	\$212.24		
Estimate of Patient Days (without Hospital Back Up)	3,670,875	Footnote 2	
Total Estimated Costs for FY 2022-23 Days of Service	\$779,106,510	Footnote 3	
Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	92.89%	Footnote 4	
Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$723,712,037		
Estimated Expenditure for FY 2021-22 Dates of Service	\$53,780,472	Footnote 5	
Estimated Expenditure in FY 2022-23 Prior to Adjustments	\$777,492,509		
Bottom Line Adjustments:			
Hospital Back Up Program	\$11,615,910	Footnote 6	
Recoveries from Department Overpayment Review	(\$500,000)	Footnote 7	
HB 13-1152 1.5% permanent rate reduction effective July 1, 2013	(\$11,649,877)	Footnote 8	
Department of Local Affairs - Increased Housing Vouchers.	(\$1,922,415)	Footnote 10	
Local Minimum Wage Adjustment	\$7,012,531	HB19-1210	
Total Bottom Line Adjustments:	\$4,556,149		
Total Estimated FY 2022-23 Expenditure	\$782,048,658		
Percentage Change in Core Component Expenditure Over Prior Year	3.37%		
Supplemental Payments from Nursing Facility Provider Fund:			
Prior Year Rate Reconciliation	\$62,719,288	Page EH-9	
Rate Cut Backfill	\$0	Page EH-9	
Cognitive Performance Scale	\$690,217	Page EH-9	
PASRR - Resident	\$4,343,005	Page EH-9	
PASRR - Facility	\$2,075,908	Page EH-9	
Medicaid Supplemental Payment	\$48,866,903	Page EH-9	
Pay for Performance	\$9,242,433	Page EH-9	
Total Estimated Supplemental Payments	\$127,937,754		
Total Estimated FY 2022-23 Expenditure	\$909.986.412		

# Exhibit H - LONG-TERM CARE - CLASS I NURSING FACILITIES Footnotes and Assumptions

#### Class I Nursing Home Calculations for FY 2020-21, FY 2021-22 and FY 2022-23 Footnotes:

(1) Per HB 08-1114 and SB 09-263, the Department implemented significant changes in the reimbursement rate methodology for nursing facilities. Beginning in FY 2008-09, instead of reimbursement based on an overall per diem rate, facilities are reimbursed based on a per diem rate for core components as well as supplemental per diem rates for eligible facilities. The core components include fair rental value; direct and indirect health care; and administrative and general costs. Supplemental payments are made for providers who have residents with moderate to severe mental health conditions, cognitive dementia, or acquired brain injury; and to providers who meet performance standards. In addition, supplemental payments are made as part of the prior year rate reconciliation process and as a provider fee offset. The following table includes the historical per diem reimbursement rates and the estimated and projected per diem rates for FY 2010-2011 through FY 2022-2023. The core per diem less patient payment represents the Total Fund portion of nursing facility reimbursement.

Year	Per Diem	Patient Payment	Final Paid Rate	Rate Reduction	Per Diem Before Rate Reduction
FY 2011-12	\$183.73	\$34.19	\$149.54	1.50%	\$186.53
FY 2012-13	\$188.96	\$35.12	\$153.84	1.50%	\$191.84
FY 2013-14	\$198.24	\$35.73	\$162.51	1.50%	\$201.26
FY 2014-15	\$201.53	\$36.17	\$165.36	1.50%	\$204.60
FY 2015-16	\$208.04	\$35.55	\$172.49	1.50%	\$211.21
FY 2016-17	\$213.22	\$35.00	\$178.22	1.50%	\$216.47
FY 2017-18	\$220.91	\$37.20	\$183.71	1.50%	\$224.27
FY 2018-19	\$228.21	\$37.75	\$190.47	1.50%	\$231.69
FY 2019-20	\$233.38	\$38.29	\$195.09	1.50%	\$236.93
Estimated FY 2020-21	\$238.66	\$39.67	\$198.99	1.50%	\$241.70
Estimated FY 2021-22	\$243.46	\$40.49	\$202.97	1.50%	\$246.55
Estimated FY 2022-23	\$250.36	\$41.30	\$209.06	1.50%	\$253.54

(2) The patient days estimate is a trended value using incurred-but-not-reported (IBNR) adjusted data. Values for prior years differ slightly from prior Budget Requests due to the inclusion of claims paid between those requests and this request. Hospital Back Up days are removed from this calculation. The Department used an auto regressive model to trend patient days for FY 2020-21, FY 2021-22, and FY 2022-23.

Fiscal Year	Patient Days	Percentage Change	Full Time Equivalent Clients	Percentage Change
FY 2011-12	3,502,587	-	9,570	
FY 2012-13	3,474,994	-0.79%	9,521	-0.51%
FY 2013-14	3,453,162	-0.63%	9,461	-0.63%
FY 2014-15	3,487,254	0.99%	9,554	0.98%
FY 2015-16	3,565,499	2.24%	9,742	1.97%
FY 2016-17	3,700,793	3.79%	10,139	4.08%
FY 2017-18	3,686,680	-0.38%	10,100	-0.38%
FY 2018-19	3,672,496	-0.38%	10,062	-0.38%
FY 2019-20	3,628,931	-1.19%	9,915	-1.46%
Estimated FY 2020-21	3,642,078	0.36%	9,978	0.64%
Estimated FY 2021-22	3,670,805	0.79%	10,057	0.60%
Estimated FY 2022-23	3,670,875	0.00%	10.057	0.61%

#### Footnotes and Assumptions

- (3) Estimated costs for current year dates of service is the amount the Department expects to pay for services rendered in the current fiscal year regardless of which fiscal year the payment is made.
- (4) Of the estimated costs for the current year dates of service, a portion of those claims will be paid during the same fiscal year in which they were incurred while the rest of the claims will be paid in a future period. In order to estimate how much of the total expenditure incurred in the current year will be paid in the current year, expenditure patterns must be analyzed by month. This is because, for example, a claim incurred in July 2019 has 11 more months to pay during FY 2019-20 (from August 2019 to June 2020), while a claim incurred in May 2020 only has one additional month to pay during FY 2019-20 (June 2020). Thus, more claims from May 2020 will pay in FY 2021-22 than claims from July 2019. Based on the Department's estimate of incurred but not reported (IBNR) claims, the Department estimates in the table below the portion of claims outstanding for any given fiscal year by analyzing estimated IBNR (based on five years of data) and averages the total to provide an estimate of the total percentage of claims that will pay in the same fiscal year that the claim was incurred.

Estimate of Claims Incurred and Paid in the Same Fiscal Year

Month Incurred	Additional Months Until End of Fiscal Year	Estimated Percent Complete at End of Fiscal Year (IBNR Factor)
July	11	99.90%
August	10	99.88%
September	9	99.84%
October	8	99.78%
November	7	99.68%
December	6	99.54%
January	5	99.27%
February	4	98.82%
March	3	97.95%
April	2	96.31%
May	1	93.18%
June	0	30.51%
Average		92.89%

The IBNR factor does not apply to supplemental payments since these payments are calculated and paid once per year with no retroactive adjustments.

(5) As calculated in the table below, the estimated FY 2019-20 expenditure for core components with FY 2018-19 dates of service is the estimated FY 2018-19 core components per diem rate, less the estimated per diem patient payment rate, multiplied by the estimated number of patient days. This calculation is then multiplied by one minus the calculated IBNR rate.

Calculation of Expenditure From Claims in Previous Fiscal Year	FY 2019-20	Source
IBNR Factor	92.89%	Footnote (4)
Estimated Patient Days from previous fiscal year	3,628,931	Footnote (2)
Estimated Per Diem Rate for Core Components for previous fiscal year	\$233.38	Footnote (1)
Less: Estimated Patient Payment Rate for previous fiscal year	\$38.29	Footnote (1)
Estimated claims expenditure for core components from previous fiscal year to be paid in the current fiscal year	\$50,336,616	As described in Footnote (5) narrative

#### Footnotes and Assumptions

(6) Hospital Back Up (HBU) and out of state placements are programs where the Department pays a much higher per diem for specialized clients which can be several times the statewide average Nursing Facilities Medicaid reimbursement rate. This is an intermediate level of care in between the hospital and a skilled nursing facility. Types of clients treated under this program include ventilator, wound care, medically complex and traumatic brain injury with severe behaviors. This group is difficult to budget for due to the fluctuation in client base. FY 2007-08 expenditure was lower than previous years due to a facility which was placed under a "Denial of Payment for New Admissions" status for failure to comply with certain standards, although this has since been rectified. In FY 2008-09, expenditure rose sharply due to an increase in billed patient days. In FY 2009-10 no facilities were accepting new clients. In FY 2010-11 one new client was added to the program. In FY 2013-14, there was a spike in enrollment. It appears there was a level shift in enrollment in FY 2014-15. Currently, the Department is working to evaluate the efficacy and design of the HBU program. As the Department continues through this process, client admission into the program will be evaluated on a case by case basis. The Department assumed growth in FY 2020-21 would be in line with YTD costs, with lower growth in FY 2021-22 and FY 2022-23.

Fiscal Year	Hospital Back Up	Percent Difference
FY 2011-12	\$3,549,186	-
FY 2012-13	\$4,284,618	20.72%
FY 2013-14	\$6,604,416	54.14%
FY 2014-15	\$5,796,191	-12.24%
FY 2015-16	\$8,617,205	48.67%
FY 2016-17	\$9,225,021	7.05%
FY 2017-18	\$10,612,238	15.04%
FY 2018-19	\$10,186,076	-4.02%
FY 2019-20	\$10,900,595	7.01%
Estimated FY 2020-21	\$11,251,133	3.22%
Estimated FY 2021-22	\$11,432,165	1.61%
Estimated FY 2022-23	\$11,615,910	1.61%

(7) Overpayment review recoveries are amounts that the Department recovers from nursing homes. The Department contracted with a contingency based contractor to do a five year historical audit of all the facilities, and the contract expired at the end of FY 2005-06. In the most recent fiscal years, the Department audited a number of facilities with fewer overpayment issues and thus did not recover as much.

Fiscal Year	Overpayment Recoveries	Percent Difference
FY 2014-15	\$1,794,661	-
FY 2015-16	\$695,367	-61.25%
FY 2016-17	\$885,647	27.36%
FY 2017-18	\$606,082	-31.57%
FY 2018-19	\$736,128	21.46%
FY 2019-20	\$500,000	-32.08%
Estimated FY 2020-21	\$500,000	0.00%
Estimated FY 2021-22	\$500,000	0.00%
Estimated FY 2022-23	\$500,000	0.00%

Footnotes and Assumptions

(8) HB 10-1324 imposed a rate reduction of 1.5% effective March 1, 2010 and effective until June 30, 2011. HB 10-1379 imposed a rate reduction of 1% in addition to the rate reduction of HB 10-1324 for the period of July 1, 2010 to June 30, 2011. SB 11-215 imposed a rate reduction of 1.5% effective July 1, 2011 for FY 2011-12 that was extended for FY 2012-13 by HB 12-1340. HB 13-1152 extended the 1.5% rate reduction indefinitely, effective July 1, 2013. The rate reductions apply to all days incurred under the effective periods of each bill. As not all days will be reported in the fiscal year in which they are incurred, the impact of the rate cuts extends over multiple fiscal years. The tables below show the incremental impact of the two bills. These figures may vary from previous submissions of the Department's requests due to revised forecasts for rates and patient days.

НВ 13-1152	Rate	Per Diem before	Per Diem After	Per Diem Impact of
	Reduction	Reduction	Reduction	Reduction
Estimated FY 2019-20 Rates	1.50%	\$241.70	\$238.66	(\$3.04)
Estimated FY 2019-20 Patient Days				3,642,078
Estimated FY 2019-20 Days Paid in FY 2019-20				3,383,126
Total FY 2019-20 Impact				(\$10,284,703)
Estimated FY 2019-20 Days Paid in FY 2020-21				258,952
FY 2020-21 Impact from Carryover from FY 2019-20				(\$787,214)
Estimated FY 2020-21 Rates	1.50%	\$246.55	\$243.46	(\$3.09)
Estimated FY 2020-21 Patient Days				3,670,805
Estimated FY 2020-21 Days Paid in FY 2020-21				3,409,811
FY 2020-21 Impact from FY 2020-21				(\$10,536,316)
Total FY 2020-21 Impact				(\$11,323,530)
Estimated FY 2020-21 Days Paid in FY 2021-22				260,994
FY 2021-22 Impact from Carryover from FY 2020-21				(\$806,471)
Estimated FY 2021-22 Rates	1.50%	\$253.54	\$250.36	(\$3.18)
Estimated FY 2021-22 Patient Days				3,670,875
Estimated FY 2021-22 Days Paid in FY 2021-22				3,409,876
FY 2021-22 Impact from FY 2021-22				(\$10,843,406)
Total FY 2021-22 Impact				(\$11,649,877)

- (9) As of July 1, 2014, SB 14-130 raised the basic minimum amount payable for personal needs to any recipient admitted to a nursing facility or intermediate care facility for individuals with intellectual disabilities from \$50.00 to \$75.00, monthly. This amount increases by 3.0% annually on January 1st of each year.
- (10) The General Assembly appropriated funding for the Department of Local Affairs for an increase to housing vouchers for people transitioning from a Medicaid-financed nursing home to a community setting. The increase in housing vouchers is projected to decrease nursing home costs by lowering patient days and utilization of nursing home services.

DOLA - Increase In Housing Vouchers	Impact
FY 2019-20	(\$1,478,565)
FY 2020-21	(\$1,922,415)
FY 2021-22	(\$1,922,415)

#### Exhibit H - LONG-TERM CARE - CLASS I NURSING FACILITIES **Supplemental Payments**

	Class I Nursing Facilities Supplemental Payments										
Year	Provider Fee Per Non Medicare Day Paid by Low Medicaid Volume Facilities	Provider Fee Per Non Medicare Day Paid by High Medicaid Volume Facilities	Growth Beyond General Fund Cap <sup>(1)</sup>	Prior Year Rate Reconciliation (2)	Rate Cut Backfill	Cognitive Performance Scale	PASRR - Resident <sup>(3)</sup>	PASRR - Facility <sup>(3)</sup>	Medicaid Supplemental Payment	Pay for Performance	Total Effective Add-on/ Supplemental
FY 2013-14	\$12.96	\$1.99	\$40,051,460	\$5,697,344	\$0	\$630,925	\$2,796,344	\$686,768	\$32,429,057	\$6,067,966	\$88,359,864
FY 2014-15	\$13.30	\$2.04	\$45,483,952	\$4,304,753	\$0	\$767,427	\$1,884,606	\$564,926	\$33,000,199	\$6,750,242	\$92,756,105
FY 2015-16	\$13.64	\$2.09	\$28,411,979	\$26,857,074	\$0	\$840,830	\$2,368,440	\$847,630	\$34,370,573	\$6,880,724	\$100,577,250
FY 2016-17	\$13.98	\$2.14	\$0	\$50,253,623	\$0	\$645,904	\$2,820,102	\$1,039,725	\$36,685,534	\$5,682,521	\$97,127,409
FY 2017-18	\$14.39	\$2.69	\$0	\$56,431,416	\$0	\$800,883	\$3,241,125	\$980,887	\$39,544,234	\$6,635,279	\$107,633,824
FY 2018-19	\$14.80	\$2.77	\$0	\$54,596,738	\$0	\$696,340	\$4,177,626	\$1,298,711	\$42,682,266	\$7,805,535	\$111,257,216
FY 2019-20	\$15.26	\$2.86	\$0	\$56,292,128	\$0	\$687,486	\$4,165,615	\$2,081,611	\$44,379,617	\$8,997,343	\$116,603,800
Projected FY 2020-21	\$15.72	\$2.95	\$0	\$59,308,511	\$0	\$688,395	\$4,223,925	\$1,934,874	\$46,356,143	\$9,078,309	\$122,090,157
Projected FY 2021-22	\$16.19	\$3.04	\$0	\$59,149,414	\$0	\$689,305	\$4,283,051	\$2,047,250	\$46,102,713	\$9,160,004	\$121,431,737
Projected FY 2022-23	\$16.68	\$3.13	\$0	\$62,719,288	\$0	\$690,217	\$4,343,005	\$2,075,908	\$48,866,903	\$9,242,433	\$127,937,754
		Clas	s I Nursing Fa	cilities Supplem	ental Paymer	ts - Percent C	Change				
Year	Provider Fee Per Non Medicare Day Paid by Low Medicaid Volume Facilities	Provider Fee Per Non Medicare Day Paid by High Medicaid Volume Facilities	Growth Beyond General Fund Cap	Prior Year Rate Reconciliation	Rate Cut Backfill	Cognitive Performance Scale	PASRR - Resident <sup>(2)</sup>	PASRR - Facility <sup>(2)</sup>	Medicaid Supplemental Payment	Pay for Performance	Total Effective Add-on/ Supplemental
FY 2014-15	2.62%	2.51%	13.56%	-24.44%	0.00%	21.64%	-32.60%	-17.74%	1.76%	11.24%	4.98%
FY 2015-16	2.56%	2.5%	-37.53%	523.89%	0.00%	9.56%	25.67%	50.04%	4.15%	1.93%	8.43%
FY 2016-17	2.49%	2.4%	-100.00%	87.12%	0.00%	-23.18%	19.07%	22.66%	6.74%	-17.41%	-3.43%
FY 2017-18	2.93%	25.7%	0.00%	12.29%	0.00%	23.99%	14.93%	-5.66%	7.79%	16.77%	10.82%
FY 2018-19	2.85%	3.0%	0.00%	-3.25%	0.00%	-13.05%	28.89%	32.40%	7.94%	17.64%	3.37%
FY 2019-20	3.11%	3.3%	0.00%	3.11%	0.00%	-1.27%	-0.29%	60.28%	3.98%	15.27%	4.81%
Projected FY 2020-21	3.01%	3.2%	0.00%	5.36%	0.00%	0.13%	1.40%	-7.05%	4.45%	0.90%	4.71%
Projected FY 2021-22	2.99%	3.1%	0.00%	-0.27%	0.00%	0.13%	1.40%	5.81%	-0.55%	0.90%	-0.54%
Projected FY 2022-23	3.03%	3.0%	0.00%	6.04%	0.00%	0.13%	1.40%	1.40%	6.00%	0.90%	5.36%

<sup>(1)</sup> Supplemental payments made under Growth Beyond General Fund Cap were discontinued in FY 2016-17. These payments will instead be made as part of the Prior Year Rate Reconciliation. (2) Totals of Prior Year Rate Reconciliation in FY 2016-17 and after include acuity adjustments, rate true-ups, and prior year rate true-up payments.

<sup>(3)</sup> PASRR: Preadmission Screening and Resident Review

#### Exhibit H - LONG-TERM CARE - CLASS I NURSING FACILITIES Cash-Based Actuals and Projections (Reference Only)

CLASS I NURSING FACILITIES  FY 2011-12 FY 2012-13						Cas	sh Based Actua	ls								
	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
	\$411,201,009	\$33,559,826	\$76,088,316		\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$395,618	\$521,244,769
	\$418,131,480	\$35,559,417	\$78,452,737	\$0	\$0	\$0	\$12,430	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$249,186	\$532,405,250
FY 2013-14 FY 2014-15	\$440,587,143 \$450,965,898	\$38,148,380 \$41,239,990	\$81,720,674 \$84,210,839	\$387,966 \$82,897	\$125,945 \$195,582	\$0 \$40,448	\$570,397 \$2,542,746	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$76,579	\$0 \$0	\$0 \$0	\$0 \$0	\$784,886 (\$25,076)	\$562,325,391 \$579,329,903
FY 2014-13 FY 2015-16	\$471,762,532	\$48,104,528	\$95,971,531	\$185,970	\$167,980	\$15,396	\$3,458,057	\$0 \$0	\$0	\$0	\$5,103	\$0 \$0	\$0	\$0	\$2,391	\$619,673,488
FY 2016-17	\$492,617,483	\$50,923,191	\$100,809,620	\$177,065	\$217,731	\$315,596	\$4,098,376	\$0	\$70,792	\$1,184	\$27,882	\$3,702	\$0	\$0	\$0	\$649,262,622
FY 2017-18	\$531,601,092	\$53,246,932	\$90,576,120	\$414,594	\$313,773	\$452,428	\$13,048,950	\$0	(\$35,815)	\$4,737	\$0	\$0	\$0	\$2,511	\$0	\$689,625,322
FY 2018-19	\$537,588,982	\$62,636,697	\$99,246,348	\$97,119	\$215,595	\$187,698	\$4,861,556	\$0	\$68,310	(\$4,771)	\$0	\$0	\$0	\$0	\$0	\$704,897,534
FY 2019-20	\$545,271,318		\$98,665,772		\$142,847	\$78,880			\$31,472	\$0	\$0	\$4,951	\$0	\$0	\$0	\$713,000,252
Estimated FY 2020-21	\$545,288,592	\$60,077,922	\$124,000,470	\$96,018	\$312,048	\$0		\$0	\$0	\$0	\$62,322	\$8,273	\$0	\$0	\$0	\$734,026,502
Estimated FY 2021-22	\$562,034,449	\$61,922,920	\$127,808,534	\$98,967	\$321,631	\$0	\$4,309,251	\$0	\$0	\$0	\$64,236	\$8,527	\$0	\$0	\$0	\$756,568,515
Estimated FY 2022-23	\$580,962,964	\$64,008,395	\$132,112,943	\$102,300	\$332,463	Percent Char	\$4,454,380 nge in Cash Ba	\$0	\$0	\$0	\$66,399	\$8,814	\$0	\$0	\$0	\$782,048,658
							ige in Cash Ba									
CLASS I NURSING FACILITIES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	1.69%		3.11%		0.00%	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-37.01%	2.14%
FY 2013-14 FY 2014-15	5.37% 2.36%	7.28%	4.17% 3.05%	100.00% -78.63%	100.00% 55.29%	0.00%	4488.87% 345.79%	0.00%	0.00%	0.00%	0.00% 100.00%	0.00%	0.00%	0.00%	214.98% -103.19%	5.62% 3.02%
FY 2014-15 FY 2015-16	4.61%	8.10% 16.65%	13.97%	124.34%	-14.11%	-61.94%	36.00%	0.00%	0.00%	0.00%	-93.34%	0.00%	0.00%	0.00%	-103.19%	6.96%
FY 2016-17	4.42%	5.86%	5.04%	-4.79%	29.62%	1949.86%	18.52%	0.00%	100.00%	100.00%	446.38%	100.00%	0.00%	0.00%	-100.00%	4.77%
FY 2017-18	7.91%	4.56%	-10.15%		44.11%	43.36%	218.39%	0.00%	-150.59%	300.08%	-100.00%	-100.00%	0.00%	100.00%	0.00%	6.22%
FY 2018-19	1.13%	17.63%	9.57%	-76.57%	-31.29%	-58.51%	-62.74%	0.00%	-290.73%	-200.72%	0.00%	0.00%	0.00%	-100.00%	0.00%	2.21%
FY 2019-20	1.43%	1.48%	-0.58%	91.86%	-33.74%	-57.98%	4.03%	0.00%	-53.93%	-100.00%	0.00%	100.00%	0.00%	0.00%	0.00%	1.15%
Estimated FY 2020-21	0.00%	-5.48%	25.68%	-48.47%	118.45%	-100.00%	-17.33%	0.00%	-100.00%	0.00%	100.00%	67.10%	0.00%	0.00%	0.00%	2.95%
Estimated FY 2021-22	3.07%	3.07%	3.07%	3.07%	3.07%	0.00%	3.07%	0.00%	0.00%	0.00%	3.07%	3.07%	0.00%	0.00%	0.00%	3.07%
Estimated FY 2022-23	3.37%	3.37%	3.37%	3.37%	3.37%	0.00%		0.00%	0.00%	0.00%	3.37%	3.37%	0.00%	0.00%	0.00%	3.37%
						P	er Capita Cost									
CLASS I NURSING FACILITIES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$10,347.28	\$4,003.32	\$1,280.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$20.96	\$840.77
FY 2012-13	\$10,241.54	\$3,928.78	\$1,267.00	\$0.00	\$0.00	\$0.00	\$1.17	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$11.75	\$779.52
FY 2013-14	\$10,531.29	\$3,871.75	\$1,268.48	\$151.55	\$1.01	\$0.00	\$6.54	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$33.57	\$653.14
FY 2014-15	\$10,784.27	\$3,940.38	\$1,265.42	\$22.86	\$1.21	\$0.56	\$10.53	\$0.00	\$0.00	\$0.00	\$3.82	\$0.00	\$0.00	\$0.00	(\$0.89)	\$498.92
FY 2015-16	\$11,125.69	\$4,568.77 \$4,530.13	\$1,394.94	\$29.91	\$1.03	\$0.18	\$10.79	\$0.00	\$0.00	\$0.00	\$0.26	\$0.00	\$0.00	\$0.00	\$0.07	\$477.78 \$482.32
FY 2016-17 FY 2017-18	\$11,210.88 \$11,579.96	\$4,530.13 \$4,513.60	\$1,490.85 \$1,341.25	\$28.33 \$50.71	\$1.35 \$1.74	\$3.12 \$6.06	\$11.78 \$37.01	\$0.00 \$0.00	\$0.15 (\$0.08)	\$0.02 \$0.07	\$1.37 \$0.00	\$0.27 \$0.00	\$0.00 \$0.00	\$0.00 \$0.89	\$0.00 \$0.00	\$482.32 \$524.34
FY 2017-18 FY 2018-19	\$11,379.90	\$4,923.88	\$1,445.92	\$10.81	\$1.23	\$2.95	\$14.71	\$0.00	\$0.16	(\$0.08)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$558.84
FY 2019-20	\$11,467.08	\$4,878,46	\$1,483.03	\$17.45	\$0.87	\$1.33	\$15.66	\$0.00	\$0.08	\$0.00	\$0.00	\$0.43	\$0.00	\$0.00	\$0.00	\$584.79
Estimated FY 2020-21	\$11,289.39	\$4,471.75	\$1,879.82	\$6.59	\$1.81	\$0.00	\$10.95	\$0.00	\$0.00	\$0.00	\$2.98	\$0.63	\$0.00	\$0.00	\$0.00	\$540.25
Estimated FY 2021-22	\$11,574.50	\$4,530.17	\$1,839.98	\$7.20	\$1.58	\$0.00	\$10.62	\$0.00	\$0.00	\$0.00	\$3.04	\$0.59	\$0.00	\$0.00	\$0.00	\$537.87
Estimated FY 2022-23	\$11,580.08	\$4,525.79	\$1,856.64	\$6.68	\$1.35	\$0.00	\$9.80	\$0.00	\$0.00	\$0.00	\$3.09	\$0.55	\$0.00	\$0.00	\$0.00	\$506.24
Estimated F1 2022-23						Percent Cn	ange in Per Ca	pita Cost								
Estimated F1 2022-23					MAGI Parents/	MAGI Parents/		Breast &	Eligible	SB 11-008		MAGI	SB 11-250 Eligible	Non-Citizens- Emergency	Partial Dual	TOTAL
CLASS I NURSING FACILITIES	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Caretakers to 68% FPL	Caretakers 69% to 133% FPL	MAGI Adults	Cervical Cancer Program	Children (AFDC-C/BC)	Eligible Children	Foster Care	Pregnant Adults	Pregnant Adults	Services	Eligibles	IOTAL
CLASS I NURSING FACILITIES FY 2012-13	Older (OAP-A)	60 to 64 (OAP-B)	Individuals to 59 (AND/AB)	0.00%	Caretakers to 68% FPL 0.00%	69% to 133% FPL	100.00%	Cancer Program	(AFDC-C/BC) 0.00%	Children 0.00%	0.00%	Adults 0.00%	Adults 0.00%	Services	-43.94%	-7.28%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14	Older (OAP-A) -1.02% 2.83%	60 to 64 (OAP-B) -1.86% -1.45%	Individuals to 59 (AND/AB) -1.03% 0.12%	0.00%	Caretakers to 68% FPL 0.00% 100.00%	69% to 133% FPL 0.00% 0.00%	100.00% 458.97%	Cancer Program 0.00% 0.00%	(AFDC-C/BC) 0.00% 0.00%	0.00% 0.00%	0.00% 0.00%	0.00% 0.00%	0.00% 0.00%	Services 0.00% 0.00%	-43.94% 185.70%	-7.28% -16.21%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14 FY 2014-15	Older (OAP-A) -1.02% 2.83% 2.40%	60 to 64 (OAP-B) -1.86% -1.45% 1.77%	Individuals to 59 (AND/AB) -1.03% 0.12% -0.24%	0.00% 100.00% -84.92%	Caretakers to 68% FPL 0.00% 100.00% 19.80%	69% to 133% FPL 0.00% 0.00% 100.00%	100.00% 458.97% 61.01%	Cancer Program 0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 100.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	-43.94% 185.70% -102.65%	-7.28% -16.21% -23.61%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16	Older (OAP-A) -1.02% 2.83% 2.40% 3.17%	60 to 64 (OAP-B) -1.86% -1.45% 1.77% 15.95%	Individuals to 59 (AND/AB) -1.03% 0.12% -0.24% 10.24%	0.00% 100.00% -84.92% 30.84%	Caretakers to 68% FPL 0.00% 100.00% 19.80% -14.88%	69% to 133% FPL 0.00% 0.00% 100.00% -67.86%	100.00% 458.97% 61.01% 2.47%	Cancer Program 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 100.00% -93.19%	0.00% 0.00% 0.00% 0.00%	Adults 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	-43.94% 185.70% -102.65% -107.87%	-7.28% -16.21% -23.61% -4.24%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17	Older (OAP-A) -1.02% 2.83% 2.40% 3.17% 0.77%	60 to 64 (OAP-B) -1.86% -1.45% 1.77% 15.95% -0.85%	Individuals to 59 (AND/AB)  -1.03% 0.12% -0.24% 10.24% 6.88%	0.00% 100.00% -84.92% 30.84% -5.28%	Caretakers to 68% FPL 0.00% 100.00% 19.80% -14.88% 31.07%	69% to 133% FPL 0.00% 0.00% 100.00% -67.86% 1633.33%	100.00% 458.97% 61.01% 2.47% 9.18%	Cancer Program 0.00% 0.00% 0.00% 0.00% 0.00%	(AFDC-C/BC) 0.00% 0.00% 0.00% 0.00% 100.00%	Children  0.00% 0.00% 0.00% 0.00% 100.00%	0.00% 0.00% 100.00% -93.19% 426.92%	0.00% 0.00% 0.00% 0.00% 100.00%	Adults 0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	-43.94% 185.70% -102.65% -107.87% -100.00%	-7.28% -16.21% -23.61% -4.24% 0.95%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14 FY 2014-15 FY 2016-17 FY 2017-18	Older (OAP-A) -1.02% 2.83% 2.40% 3.17% 0.77% 3.29%	60 to 64 (OAP-B) -1.86% -1.45% 1.77% 15.95% -0.85% -0.36%	Individuals to 59 (AND/AB)  -1.03% 0.12% -0.24% 10.24% 6.88% -10.03%	0.00% 100.00% -84.92% 30.84% -5.28% 79.00%	Caretakers to 68% FPL 0.00% 100.00% 19.80% -14.88% 31.07% 28.89%	69% to 133% FPL 0.00% 0.00% 100.00% -67.86% 1633.33% 94.23%	100.00% 458.97% 61.01% 2.47% 9.18% 214.18%	Cancer Program 0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00% 100.00% -153.33%	Children  0.00% 0.00% 0.00% 0.00% 100.00% 250.00%	0.00% 0.00% 100.00% -93.19% 426.92% -100.00%	0.00% 0.00% 0.00% 0.00% 0.00% 100.00% -100.00%	Adults  0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	Services  0.00% 0.00% 0.00% 0.00% 0.00% 100.00%	-43.94% 185.70% -102.65% -107.87% -100.00% 0.00%	-7.28% -16.21% -23.61% -4.24% 0.95% 8.71%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17	Older (OAP-A) -1.02% 2.83% 2.40% 3.17% 0.77%	60 to 64 (OAP-B) -1.86% -1.45% 1.77% 15.95% -0.85%	Individuals to 59 (AND/AB)  -1.03% 0.12% -0.24% 10.24% 6.88%	0.00% 100.00% -84,92% 30.84% -5.28% 79.00% -78.68%	Caretakers to 68% FPL 0.00% 100.00% 19.80% -14.88% 31.07%	69% to 133% FPL 0.00% 0.00% 100.00% -67.86% 1633.33%	100.00% 458.97% 61.01% 2.47% 9.18%	Cancer Program 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	(AFDC-C/BC) 0.00% 0.00% 0.00% 0.00% 100.00%	Children  0.00% 0.00% 0.00% 0.00% 100.00%	0.00% 0.00% 100.00% -93.19% 426.92%	0.00% 0.00% 0.00% 0.00% 100.00%	Adults 0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	-43.94% 185.70% -102.65% -107.87% -100.00%	-7.28% -16.21% -23.61% -4.24% 0.95%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	Older (OAP-A)  -1.02% 2.83% 2.40% 3.17% 0.77% 3.29% -2.65%	60 to 64 (OAP-B) -1.86% -1.45% 1.77% 15.95% -0.85% -0.36% 9.09%	Individuals to 59 (AND/AB) -1.03% 0.12% -0.24% 10.24% -10.03% 7.80%	0.00% 100.00% -84.92% 30.84% -5.28% 79.00% -78.68% 61.42%	Caretakers to 68% FPL 0.00% 100.00% 19.80% -14.88% 31.07% 28.89% -29.31%	69% to 133% FPL 0.00% 0.00% 100.00% -67.86% 1633.33% 94.23% -51.32%	100.00% 458.97% 61.01% 2.47% 9.18% 214.18% -60.25%	Cancer Program 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	(AFDC-C/BC) 0.00% 0.00% 0.00% 100.00% -153.33% -300.00%	Children  0.00% 0.00% 0.00% 0.00% 100.00% 250.00% -214.29%	0.00% 0.00% 100.00% -93.19% 426.92% -100.00%	0.00% 0.00% 0.00% 0.00% 100.00% -100.00% 0.00%	Adults 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	Services  0.00% 0.00% 0.00% 0.00% 100.00% 100.00% -100.00%	-43.94% 185.70% -102.65% -107.87% -100.00% 0.00%	-7.28% -16.21% -23.61% -4.24% 0.95% 8.71% 6.58%
CLASS I NURSING FACILITIES  FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20	Older (OAP-A) -1.02% 2.83% 2.40% 3.17% 0.77% 3.29% -2.65% 1.72%	60 to 64 (OAP-B) -1.86% -1.45% 1.77% 15.95% -0.85% -0.36% 9.09% -0.92%	Individuals to 59 (AND/AB) -1.03% -0.12% -0.24% -10.24% -6.88% -10.03% -7.80% -2.57%	0.00% 100.00% -84.92% 30.84% -5.28% 79.00% -78.68% 61.42% -62.23% 9.26%	Caretakers to 68% FPL 0.00% 100.00% 19.80% -14.88% 31.07% 28.89% -29.31% -29.27%	69% to 133% FPL 0.00% 0.00% 100.00% -67.86% 1633.33% 94.23% -51.32% -54.92%	100.00% 458.97% 61.01% 2.47% 9.18% 214.18% -60.25% 6.46%	Cancer Program 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	(AFDC-C/BC)  0.00% 0.00% 0.00% 0.00% 100.00% 153.33% -300.00% -550.00%	Children  0.00% 0.00% 0.00% 0.00% 100.00% 250.00% -214.29% -100.00%	0.00% 0.00% 100.00% -93.19% 426.92% -100.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00% 100.00% -100.00% 0.00% 100.00%	Adults  0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	Services  0.00% 0.00% 0.00% 0.00% 100.00% 100.00% -100.00% 0.00%	-43.94% 185.70% -102.65% -107.87% -100.00% 0.00% 0.00%	-7.28% -16.21% -23.61% -4.24% 0.95% 8.71% 6.58% 4.64%

#### Exhibit H - LONG-TERM CARE - CLASS II NURSING FACILITIES Actual and Projected Expenditure by Eligibility

							Cash Based Actu	ale								
CLASS II NURSING FACILITIES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$0	\$583,751	\$1,915,323	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,499,074
FY 2012-13	\$180,939	\$825,327	\$4,101,296	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,107,562
FY 2013-14	\$393,954	\$298,879	\$2,748,163	\$0	\$0	\$0	\$43,770	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,484,766
FY 2014-15	\$411,017	\$455,389	\$3,411,445	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$4,277,851
FY 2015-16	\$397,005	\$327,830	\$3,317,671	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$4,042,506
FY 2016-17	\$1,361,188	\$199,288	\$2,315,475	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,875,951
FY 2017-18	\$4,623,021	\$42,992	\$860,082	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,526,095
FY 2018-19	\$2,585,226	\$136,322	\$2,566,369	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,287,917
FY 2019-20	\$739,436	\$304,255	\$5,188,127	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$6,231,818
Estimated FY 2020-21	\$777,517	\$319,924	\$5,455,316	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$6,552,757
Estimated FY 2021-22	\$851,614	\$350,413	\$5,975,208	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,177,235
Estimated FY 2022-23	\$895,472	\$368,459	\$6,282,931	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,546,862
		•				Pen	ent Change in Cash B	ased Actuals	•		•					
CLASS II NURSING FACILITIES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	100.00%	41.38%	114.13%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	104.38%
FY 2013-14	117.73%	-63.79%	-32.99%	0.00%	0.00%	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	-31.77%
FY 2014-15	4.33%	52.37%	24.14%	0.00%	0.00%	0.00%	-100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	22.76%
FY 2015-16	-3.41%	-28.01%	-2.75%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	-5.50%
FY 2016-17	242.86%	-39.21%	-30.21%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	-4.12%
FY 2017-18	239.63%	-78.43%	-62.86%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	42.57%
FY 2018-19	-44.08%	217.09%	198.39%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	-4.31%
FY 2019-20	-71.40%	123.19%	102.16%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	17.85%
Estimated FY 2020-21	5.15%	5.15%	5.15%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	5.15%
Estimated FY 2021-22	9.53%	9.53%	9.53%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	9.53%
Estimated FY 2022-23	5.15%	5.15%	5.15%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	5.15%
							Per Capita Cos	t								
CLASS II NURSING FACILITIES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services		TOTAL
FY 2011-12	\$0.00	\$69.64	\$32.23	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$4.03
FY 2012-13	\$4.43	\$91.19	\$66.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7.48
FY 2013-14	\$9.42	\$30.33	\$42.66	\$0.00	\$0.00	\$0.00	\$0.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4.05
FY 2014-15	\$9.83	\$43.51	\$51.26	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.68
FY 2015-16	\$9.36	\$31.14	\$48.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.12
FY 2016-17	\$30.98	\$17.73	\$34.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.88
FY 2017-18	\$100.70	\$3.64	\$12.74	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4.20
FY 2018-19	\$54.21	\$10.72	\$37.39	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4.19
FY 2019-20	\$15.55	\$23.35	\$77.98	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.11
Estimated FY 2020-21	\$16.10	\$23.81	\$82.70	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4.82
Estimated FY 2021-22	\$17.54	\$25.64	\$86.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.10
Estimated FY 2022-23	\$17.85	\$26.05	\$88.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4.89

#### Exhibit H - LONG-TERM CARE - CLASS II NURSING FACILITIES Actual and Projected Expenditure by Eligibility

						Per	rcent Change in Per Ca	apita Cost								
CLASS II NURSING FACILITIES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	100.00%	30.94%	105.52%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	8
FY 2013-14	112.64%	-66.74%	-35.60%	0.00%	0.00%	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-4
FY 2014-15	4.35%	43.46%	20.16%	0.00%	0.00%	0.00%	-100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
FY 2015-16	-4.78%	-28,43%	-5.93%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-1
FY 2016-17	230.98%	-43.06%	-28.99%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
FY 2017-18	225.05%	-79.47%	-62.79%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
FY 2018-19	-46.17%		193.49%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
FY 2019-20	-71.32%		108.56%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Estimated FY 2020-21	3.54%		6.05%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Estimated FY 2020-21	8.94%		4.01%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Estimated FY 2021-22 Estimated FY 2022-23	1.77%		2.65%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Estimated FY 2022-23	1.//%	1.60%	2.65%	0.00%	0.00%	0.00%	Current Year Project		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
		1					Current real riojes	Luon		1						
CLASS II NURSING FACILITIES	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2019-20 Expenditure	\$739,436	\$304,255	\$5,188,127	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$6,23
Percentage Selected to Modify Expenditure(1)	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	
Estimated FY 2020-21 Base Expenditure	\$777,517	\$319,924	\$5,455,316	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	S0	S0	\$0	\$0	\$6,55
Bottom Line Impacts																
Total Bottom Line Impacts	S0	S0	S0	S0	S0	S0	S0	S0	S0	SO	S0	S0	S0	S0	S0	
Estimated FY 2020-21 Total Expenditure	\$777,517	\$319,924	\$5,455,316	\$0	\$0	\$0	\$0	\$0	S0	\$0	S0	S0	S0	S0	\$0	\$6,55
Estimated FY 2020-21 Per Capita	\$16.10		\$82.70	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
% Change over FY 2019-20 Per Capita	3.54%	1.97%	6.05%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
							Request Year Project									
Estimated FY 2020-21 Expenditure	\$777,517	\$319,924	\$5,455,316	\$0	\$0	\$0	\$0	\$0			\$0	\$0		\$0		\$6,5
Percentage Selected to Modify Expenditure <sup>(1)</sup>	9.53%			9.53%	9.53%	9.53%	9.53%	9.53%	9.53%		9.53%	9.53%	9.53%	9.53%	9.53%	
Estimated FY 2021-22 Base Expenditure	\$851,614	\$350,413	\$5,975,208	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,1
Bottom Line Impacts																
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Estimated FY 2021-22 Total Expenditure	\$851,614	\$350,413	\$5,975,208	\$0	\$0	\$0	\$0	\$0	S0	\$0	SO	S0	S0	S0	\$0	\$7,17
Estimated FY 2021-22 Per Capita	\$17.54			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00	
% Change over FY 2020-21 Per Capita	8.94%	7.69%	4.01%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
							Out Year Projecti									
Estimated FY 2021-22 Expenditure	\$851,614	\$350,413	\$5,975,208	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,1
Percentage Selected to Modify Expenditure(1)	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	5.15%	
Estimated FY 2022-23 Base Expenditure	\$895,472	\$368,459	\$6,282,931	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,5
Bottom Line Impacts																
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Estimated FY 2022-23 Total Expenditure	\$895,472	\$368,459	\$6,282,931	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	S0	\$7,5
Estimated FY 2022-23 Per Capita	\$17.85		\$88.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00		\$0.00	\$0.00	

## Exhibit H - LONG-TERM CARE - PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE) Cash-Based Actuals and Projections

						CIP	1 4 4 1									
		<u> </u>		1		Cash Base	d Actuals									
PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)	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	69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$73,671,387	\$8,052,921 \$8,794,508	\$3,756,277 \$4,165,414	\$0				\$0 \$0	\$0	\$0	\$0	\$0 \$0	\$0	\$0	\$0	\$85,480,585 \$97,346,358
FY 2012-13 FY 2013-14	\$84,386,436 \$85,832,165	\$8,794,508 \$10,249,500	\$4,165,414 \$4,393,152	\$0 \$0	\$0 \$0			\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$97,346,358 \$100,474,817
FY 2014-15	\$112,128,644	\$14,440,173	\$6,335,950	\$0	\$0			\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$132,904,767
FY 2015-16	\$108,848,065	\$13,681,759	\$6,481,645	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$129,011,469
FY 2016-17	\$128,240,295	\$16,912,508	\$8,496,888	\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$824,674)	\$152,711,212
FY 2017-18 FY 2018-19	\$134,528,891 \$161,681,815	\$17,703,757 \$25,839,762	\$8,823,522 \$12,235,422	\$0 \$0	\$0 \$0			\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$161,056,170 \$199,756,999
FY 2018-19	\$194,589,032	\$27,389,639	\$12,233,422 \$12,192,847	\$0				\$0		\$0 \$0		\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$234,171,518
Estimated FY 2020-21	\$205,764,428	\$28,962,647	\$12,893,092	\$0		\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$247,620,167
Estimated FY 2021-22	\$225,799,734	\$31,782,743	\$14,148,493	\$0				\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$271,730,970
Estimated FY 2022-23	\$250,888,056	\$35,314,083	\$15,720,514	\$0	•				\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$301,922,653
	T				Perce	ent Change in C	ash Based Act	uals						1		
PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)	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	69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	14.54%	9.21%			0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	13.88%
FY 2013-14 FY 2014-15	1.71%	16.54% 40.89%	5.47% 44.22%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00% 0.00%	0.00%	0.00%	3.21% 32.28%
FY 2015-16	-2.93%	-5.25%	2.30%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-2.93%
FY 2016-17	17.82%	23.61%	31.09%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	18.37%
FY 2017-18	4.90%	4.68%	3.84%	0.00%	-100.00%		-100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-100.00%	5.46%
FY 2018-19 FY 2019-20	20.18%	45.96% 6.00%	38.67% -0.35%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	24.03% 17.23%
Estimated FY 2020-21	5.74%	5.74%	5.74%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	5.74%
Estimated FY 2021-22	9.74%	9.74%	9.74%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	9.74%
Estimated FY 2022-23	11.11%	11.11%	11.11%	0.00%	0.00%			0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	11.11%
	1				1	Per Cap	ta Cost									
PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
THE ELDERLY (PACE)  FY 2011-12	(OAP-A)	60 to 64 (OAP-B) \$960.63	to 59 (AND/AB) \$63.20	Buy-In \$0.00	Caretakers to 68% FPL \$0.00	Caretakers 69% to 133% FPL \$0.00	\$0.00	Cervical Cancer Program	Children (AFDC-C/BC)	Eligible Children \$0.00	\$0.00	Pregnant Adults	Eligible Pregnant Adults	Emergency Services	Eligibles \$0.00	\$137.88
THE ELDERLY (PACE)  FY 2011-12  FY 2012-13	(OAP-A)  \$1,853.83 \$2,066.93	60 to 64 (OAP-B) \$960.63 \$971.66	to 59 (AND/AB) \$63.20 \$67.27	\$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00	Caretakers 69% to 133% FPL \$0.00 \$0.00	\$0.00 \$0.00	Cervical Cancer Program \$0.00 \$0.00	Children (AFDC-C/BC) \$0.00 \$0.00	Eligible Children \$0.00 \$0.00	\$0.00 \$0.00	Pregnant Adults \$0.00 \$0.00	Eligible Pregnant Adults \$0.00	Emergency Services \$0.00 \$0.00	\$0.00 \$0.00	\$137.88 \$142.53
FY 2011-12 FY 2013-14 FY 2013-14	(OAP-A)  2 \$1,853.83   \$2,066.93   \$2,051.63	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24	to 59 (AND/AB) \$63.20 \$67.27 \$68.19	\$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	Cervical Cancer Program \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC) \$0.00 \$0.00 \$0.00	Eligible Children \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	Pregnant Adults \$0.00 \$0.00 \$0.00	Eligible Pregnant Adults \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70
THE ELDERLY (PACE)  FY 2011-12  FY 2012-13	(OAP-A) \$1,853.83 \$2,066.93 \$2,051.63 \$2,681.41 \$2,566.99	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$94.21	\$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00	Caretakers 69% to 133% FPL \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00	Cervical Cancer Program \$0.00 \$0.00	Children (AFDC-C/BC) \$0.00 \$0.00	Eligible Children \$0.00 \$0.00	\$0.00 \$0.00	Pregnant Adults \$0.00 \$0.00	Eligible Pregnant Adults \$0.00	Emergency Services \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47
FY 2011-12 FY 2013-14 FY 2014-15 FY 2014-15 FY 2014-16 FY 2014-16 FY 2015-16 FY 2016-17	(OAP-A) \$1,853.83 \$2,066.93 \$2,051.63 \$2,681.41 \$2,566.99 \$2,918.47	60 to 64 (OAP-B) \$960.63 \$971.66 \$1.040.24 \$1.379.72 \$1.299.44 \$1,504.54	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$94.21	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 (\$0.28)	Cervical Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant   Adults   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00	Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$24.39)	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45
THE ELDERLY (PACE)  FY 2011-12  FY 2012-13  FY 2013-14  FY 2015-16  FY 2016-15  FY 2016-17	(OAP-A)  2. \$1,853.83 \$2,066.93 \$2,051.63 \$2,681.41 \$2,566.99 \$2,918.47 \$2,930.47	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$94.21 \$125.66 \$130.66	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.28 \$0.00	Cervical Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	80.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant   Adults   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00	Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46
FY 2011-12 FY 2013-14 FY 2014-15 FY 2014-15 FY 2014-16 FY 2014-16 FY 2015-16 FY 2016-17	(OAP-A) \$1,853.83 \$2,066.93 \$2,051.63 \$2,681.41 \$2,566.99 \$2,918.47	60 to 64 (OAP-B) \$960.63 \$971.66 \$1.040.24 \$1.379.72 \$1.299.44 \$1,504.54	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$94.21	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 (\$0.28)	Cervical Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant   Adults   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00   \$0.00	Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$24.39)	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37
THE ELDERLY (PACE)  FY 2011-12  FY 2012-13  FY 2013-14  FY 2015-16  FY 2016-15  FY 2016-15  FY 2017-18  FY 2018-12  FY 2018-20  FY 2018-20  Estimated FY 2020-21	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,051.63 \$2,2681.41 \$2,2566.99 \$2,218.47 \$2,2930.47 \$3,390.55 \$4,092.22 \$44,260.04	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,02.10.21 \$2,155.76	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$183.27 \$195.46	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cervical Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible   Children	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06
FY 2011-12 FY 2012-13 FY 2012-14 FY 2013-14 FY 2013-14 FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-20 Estimated FY 2021-22 Estimated FY 2021-22	(OAP-A)  \$1,853.83 \$2,066.93 \$2,056.93 \$2,051.41 \$2,266.99 \$2,918.47 \$2,930.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,235.17	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$183.27 \$195.46	80,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cervical Cancer Program \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Children \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$24.39 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18
THE ELDERLY (PACE)  FY 2011-12  FY 2012-13  FY 2013-14  FY 2015-16  FY 2016-15  FY 2016-15  FY 2017-18  FY 2018-12  FY 2018-20  FY 2018-20  Estimated FY 2020-21	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,051.63 \$2,2681.41 \$2,2566.99 \$2,218.47 \$2,2930.47 \$3,390.55 \$4,092.22 \$44,260.04	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,02.10.21 \$2,155.76	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$183.27 \$195.46	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cervical Cancer Program \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible   Children	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06
FY 2011-12 FY 2012-13 FY 2012-14 FY 2013-14 FY 2013-14 FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-20 Estimated FY 2021-22 Estimated FY 2021-22	(OAP-A)  \$1,853.83 \$2,066.93 \$2,056.93 \$2,051.41 \$2,266.99 \$2,918.47 \$2,930.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,235.17	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$183.27 \$195.46	80,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL  S0.00 cont Change in	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cervical Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Children \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$24.39 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18
FY 2011-12 FY 2012-13 FY 2012-14 FY 2013-14 FY 2013-14 FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-20 Estimated FY 2021-22 Estimated FY 2021-22	(OAP-A)  \$1,853.83 \$2,066.93 \$2,056.93 \$2,051.43 \$2,256.99 \$2,918.47 \$2,393.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10	60 to 64 (OAP-B) \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,235.17	to 59 (AND/AB) \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$183.27 \$195.46	80,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cervical Cancer Program \$0.00	Children (AFDC-C/BC)  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Children \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$24.39 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18
FY 2011-15 FY 2012-15 FY 2012-15 FY 2012-15 FY 2013-16 FY 2013-16 FY 2014-15 FY 2016-17 FY 2016-17 FY 2016-17 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-25 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2021-22 FY 2018-25 FY	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,051.63 \$2,256.99 \$2,918.47 \$2,390.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10 \$5,000.84  Adults 65 and Older (OAP-A)	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,504.54 \$1,504.54 \$1,504.54 \$2,002.21 \$2,102.21 \$2,155.76 \$2,325.17 \$2,496.93	to 59 (AND/AB)  \$63.20 \$657.27 \$68.19 \$95.21 \$125.66 \$1378.26 \$1318.327 \$195.46 \$203.69 \$220.93	Suy-In	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Per  MAGI Parents Caretakers to 68% FPL	Caretakers 69% to 133% FPL  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cervical Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00	Eligible Children  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  MAGI Pregnant Adults	Eligible Pregnant Adults  \$0.00	Emergency Services  \$0.00	\$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18 \$195.44
FY 2011-12 FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-15 FY 2015-15 FY 2015-15 FY 2015-15 FY 2015-15 FY 2018-25 FY 2018-25 FY 2018-25 Estimated FY 2020-22 Estimated FY 2020-22 Estimated FY 2020-22 FY 2018-25	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.03 \$2,265.09 \$2,918.47 \$2,356.09 \$2,918.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10 \$5,000.84  Adults 65 and Older (OAP-A)  11,50%	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,235.17 \$2,496.93  Disabled Adults 60 to 64 (OAP-B)  1.15%	to 59 (AND/AB)  \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$130.66 \$213.546 \$203.69 \$220.93	Suy-In	Caretakers to 68% FPL  \$0.00	Caretakers 69% to 133% FPL  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  MAGI Adults  0.00%	Cervical Cancer Program \$0.00	Children (AFDC-C/BC)  \$0.00	Eligible Children  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00	Eligible Pregnant Adults \$0.00	Emergency Services \$0.00	Eligibles  \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18 \$195.44
FY 2011-15 FY 2012-15 FY 2012-15 FY 2012-15 FY 2013-16 FY 2013-16 FY 2014-15 FY 2016-17 FY 2016-17 FY 2016-17 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-25 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2021-22 FY 2018-25 FY	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,051.63 \$2,256.99 \$2,918.47 \$2,390.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10 \$5,000.84  Adults 65 and Older (OAP-A)	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,504.54 \$1,504.54 \$1,504.54 \$2,002.21 \$2,102.21 \$2,155.76 \$2,325.17 \$2,496.93	to 59 (AND/AB)  \$63.20 \$657.27 \$68.19 \$95.21 \$125.66 \$1378.26 \$1318.327 \$195.46 \$203.69 \$220.93	Suy-In	Caretakers to 68% FPL  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Per  MAGI Parents Caretakers to 68% FPL	Caretakers 69% to 133% FPL  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Cervical Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00	Eligible Children  \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Pregnant Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  MAGI Pregnant Adults	Eligible Pregnant Adults  \$0.00	Emergency Services  \$0.00	\$0.00 \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18 \$195.44
FY 2011-12 FY 2012-12 FY 2013-14 FY 2013-14 FY 2014-15 FY 2015-17 FY 2015-17 FY 2015-17 FY 2016-17 FY 2018-15 FY 2018-12 FY 2018-14 FY 2018-14 FY 2018-14 FY 2018-15 FY 2018-16 FY 2018-16 FY 2018-16 FY 2018-16	(OAP-A)  \$1,853,83 \$2,066,93 \$2,051,63 \$2,261,41 \$2,256,99 \$2,918,47 \$2,330,47 \$3,390,55 \$4,092,22 \$4,260,04 \$4,650,10 \$5,000,84  Adults 65 and Older (OAP-A)  11,50% 4,074% 4,27% 30,70% 4,4,27%	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,203.127 \$2,102.21 \$2,155.76 \$2,232.517 \$2,496.93  Disabled Adults 60 to 64 (OAP-B)  1.15% 7.06% 3.26.3% -5.82% 1.5.78%	to 59 (AND/AB)  \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$203.69 \$220.93  Disabled Individuals to 59 (AND/AB)  6.44% 1.137% 39.62% -1.05% 33.38%	Suy-In	Caretakers to 68% FPL  \$0.00	Caretakers 69% to 133% FPL  \$0.00	\$0.00 \$0.00%	Cervical Cancer Program  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Children (AFDC-C/BC)  \$0.00%	Eligible Children  \$0.00	\$0.00 \$0.00	Pregnant Adults  \$0.00	Eligible Pregnant Adults  \$0.00	Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  S0.00 \$0.00	Eligibles  \$0.00	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18 \$195.44 TOTAL
FY 2011-12 FY 2012-13 FY 2012-13 FY 2013-14 FY 2013-14 FY 2013-14 FY 2013-14 FY 2013-15 FY 2015-16 FY 2015-16 FY 2015-16 FY 2013-15 FY 2013-16	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,266.99 \$2,218.47 \$2,360.99 \$2,218.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10 \$5,000.84  Adults 65 and Older (OAP-A)  11,50% \$0,074% \$0,074% \$13,69%	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,325.17 \$2,496.93  Disabled Adults 60 to 64 (OAP-B)  1.15% 7.06% 32,63% -5.82% 15.78% -0.26%	to 59 (AND/AB)  \$63.20 \$67.27 \$68.19 \$93.21 \$125.66 \$138.27 \$183.27 \$203.69 \$220.93  Disabled Individuals to 59 (AND/AB)  6.44% 1.37% 3.38% 3.38% 3.38%	Suy-In	Caretakers to 68% FPL  \$0.00 \$	Caretakers 69% to 133% FPL  S.0.00	\$0.00 \$0.00	Cervical Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00% \$0.00% \$0.00% \$0.00%	Eligible Children  \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00%	Pregnant Adults  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Eligible Pregnant Adults  \$0.00	Emergency Services  \$0.00	Eligibles  \$0.00 \$	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18 \$195.44  TOTAL  3.37% -18.12% -1.92% -1.3.10% 14.05% 7.944
FY 2011-12 FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2015-16 FY 2015-16 FY 2015-16 FY 2016-17 FY 2018-15 FY 2018-15 FY 2018-16 FY 2016-17 FY 2016-17 FY 2018-16	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,266.99 \$2,918.47 \$2,256.99 \$2,918.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,560.10 \$5,000.84  Adults 65 and Older (OAP-A)  11,50% 4,74% 4,27% 13,69% 4,427% 13,69% 0,41% 15,70%	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,235.17 \$2,496.93  Disabled Adults 60 to 64 (OAP-B)  1.15% 7.06% 3.2.63% 4.2.78% 1.5.82% 1.5.78% 4.0.26% 3.3.33%	to 59 (AND/AB)  \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$178.26 \$213.546 \$203.69 \$220.93  Disabled Individuals to 59 (AND/AB)  6.44% \$1.37% \$39.62% \$1.05% \$3.33.88% \$3.98%	Buy-In  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00%	Caretakers to 68% FPL  \$0.00 \$	Caretakers 69% to 133% FPL  \$0.00	\$0.00 \$0.00	Cervical Cancer Program  \$0.00% \$0.00% \$0.00% \$0.00%	Children (AFDC-C/BC)  \$0.00%	Eligible Children  \$0.00% \$0.00%	\$0.00 \$0.00	Pregnant Adults  \$0.00	Eligible Pregnant Adults  \$0.00	Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  S0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Eligibles  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18 \$195.44  TOTAL  TOTAL
FY 2011-12 FY 2012-13 FY 2012-13 FY 2013-14 FY 2013-14 FY 2013-14 FY 2014-15 FY 2015-16 FY 2015-16 FY 2015-16 FY 2015-16 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-15 FY 2018-16	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,266.99 \$2,218.47 \$2,360.99 \$2,218.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10 \$5,000.84  Adults 65 and Older (OAP-A)  11,50% \$0,074% \$0,074% \$13,69%	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,325.17 \$2,496.93  Disabled Adults 60 to 64 (OAP-B)  1.15% 7.06% 32,63% -5.82% 15.78% -0.26%	to 59 (AND/AB)  \$63.20 \$67.27 \$68.19 \$93.21 \$125.66 \$138.27 \$183.27 \$203.69 \$220.93  Disabled Individuals to 59 (AND/AB)  6.44% 1.37% 3.38% 3.38% 3.38%	Suy-In	Caretakers to 68% FPL  \$0.00 \$	Caretakers 69% to 133% FPL  S.0.00	\$0.00 \$0.00	Cervical Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Eligible Children  \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00%	Pregnant Adults  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Eligible Pregnant Adults  \$0.00	Emergency Services  \$0.00	Eligibles  \$0.00 \$	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$158.37 \$192.06 \$182.25 \$193.18 \$195.44  TOTAL  3.37% -1.8.12% -1.92% -1.3.10% 14.05% 7.94%
THE ELDERLY (PACE)  FY 2011-12 FY 2012-13 FY 2012-13 FY 2014-15 FY 2014-15 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2018-12 FY 2018-20 Estimated FY 2020-21 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2021-22 FY 2018-14 FY 2018-14 FY 2018-14 FY 2018-14 FY 2018-15	(OAP-A)  \$1,853.83 \$2,066.93 \$2,051.63 \$2,266.99 \$2,218.47 \$2,256.99 \$2,918.47 \$2,390.47 \$3,390.55 \$4,092.22 \$4,260.04 \$4,650.10 \$5,000.84  Adults 65 and Older (OAP-A)  \$11,50% \$4,260.40 \$4,274% \$4,274% \$4,274% \$4,274% \$15,70% \$15,70%	60 to 64 (OAP-B)  \$960.63 \$971.66 \$1,040.24 \$1,379.72 \$1,299.44 \$1,500.70 \$2,031.27 \$2,102.21 \$2,155.76 \$2,325.17 \$2,496.93  Disabled Adults 60 to 64 (OAP-B)  1.15% 7.06% 32.63% -5.82% -5.82% -5.82% -0.26% 35.35% -0.26%	to 59 (AND/AB)  \$63.20 \$67.27 \$68.19 \$95.21 \$125.66 \$130.66 \$130.66 \$130.66 \$203.69 \$220.30  Disabled Individuals to 59 (AND/AB)  6.44% 1.37% 3.96% 3.3.38% 3.3.38% 3.6.43%	Buy-In  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  \$0.00 \$0.00  \$0.00	Caretakers to 68% FPL  \$0.00	Caretakers 69% to 133% FPL  \$0.00	\$0.00 \$0.00	Cervical Cancer Program  \$0.00	Children (AFDC-C/BC)  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Eligible Children  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	Pregnant Adults  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Eligible Pregnant Adults  \$0.00	Emergency Services  \$0.00 \$0.0	Eligibles  \$0.00 \$	\$137.88 \$142.53 \$116.70 \$114.46 \$99.47 \$113.45 \$122.46 \$188.25 \$193.18 \$195.44  TOTAL  3.37% -18.12% -1.12% -1.13.10% -1.40.5% -7.94% -29.32% -21.27%

## Exhibit H - LONG-TERM CARE - PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE) Cash-Based Actuals and Projections

					PACE	Enrollment an	d Cost Per Enr	ollee								
PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
					PACI	E Average Monthl	ly Paid Enrollmer	t <sup>(1)</sup>								
FY 2011-12	1,754	204	96	0	0	0	0	0	0	0	0	0	0	0	0	2,054
FY 2012-13	2,047	238	117	0	0	0	0	0	0	0	0	0	0	0	0	2,402
FY 2013-14	1,924	232	101	0		0	0	0	0	0		0	0	0		2,257
FY 2014-15	2,393	320	143	0		0	0	0	0	0		0	0	0		2,856
FY 2015-16	2,510	336	157	0		0	0	0	0	0	0	0	0	0		3,003
FY 2016-17	2,610	367	184	0				0	0	0		0	0	0		3,161
FY 2017-18	2,786	610	291	0		0	0	0	0	0		0	0	0		3,687
FY 2018-19 FY 2019-20	3,263 3,795	471 516	220 224	0				0	0	0		0	0	0		3,954 4,535
	4,232	506	253	0						0		0	0			4,535
Estimated FY 2020-21 Estimated FY 2021-22	4,232	506	253	0				0	0	0		0	0	0		4,991 5,358
Estimated FY 2021-22 Estimated FY 2022-23	4,344	583	291	0							-	0	0			
Estimated F1 2022-23	4,070	363	231				in Enrollment		0	0	0	0		0	0	3,732
TV 2012 12	16 700/	16 (50)	21.000/	0.000/					0.000/	0.000/	0.000/	0.000/	0.000/	0.000/	0.000/	16.040/
FY 2012-13 FY 2013-14	16.70% -6.01%	16.67% -2.52%	21.88%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		16.94% -6.04%
FY 2013-14 FY 2014-15	24.38%	-2.52% 37.93%	-13.68% 41.58%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		-6.04% 26.54%
FY 2015-16	4.89%	5.00%	9.79%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		5.15%
FY 2015-16 FY 2016-17	3.98%	9.23%	17.20%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		5.26%
FY 2017-18	6.74%	66.21%	58.15%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		16.64%
FY 2018-19	17.12%	-22.79%	-24.40%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		7.24%
FY 2019-20	16.30%	9.55%	1.82%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		14.69%
Estimated FY 2020-21	11.52%	-1.94%	12.95%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		10.06%
Estimated FY 2021-22	7.37%	7.25%	7.25%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	7.35%
Estimated FY 2022-23	7.35%	7.37%	7.37%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	7.35%
					A	verage Cost Pe	er Enrollee(3)(4)							•		
FY 2011-12	\$42,001.93	\$39,475,10	\$39,127,89	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$41,616,64
FY 2012-13	\$41,224.44	\$36,951.71	\$35,601.83	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$40,527.21
FY 2013-14	\$44,611.31	\$44,178.88	\$43,496.55	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$44,516.98
FY 2014-15	\$46,856.93	\$45,125.54	\$44,307.34	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$46,535.28
FY 2015-16	\$43,365.76	\$40,719.52	\$41,284.36	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$42,960.86
FY 2016-17	\$49,134.21	\$46,083.13	\$46,178.74	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$48,311.04
FY 2017-18	\$48,287.47	\$29,022.55	\$30,321.38	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$43,682.17
FY 2018-19	\$49,550.05	\$54,861.49	\$55,615.55	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$50,520.23
FY 2019-20	\$51,275.11	\$53,080.70	\$54,432.35	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$51,636.50
Estimated FY 2020-21	\$47,892.00	\$49,013.52	\$49,013.52	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$49,000.00
Estimated FY 2021-22	\$49,568.22	\$50,728.99	\$50,728.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$50,715.00
Estimated FY 2022-23	\$51,303.11	\$52,504.51	\$52,504.51	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$52,490.03
						U	Cost Per Enrol									
FY 2012-13	-1.85%	-6.39%	-9.01%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		-2.62%
FY 2013-14	8.22%	19.56%	22.18%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		9.84%
FY 2014-15	5.03%	2.14%	1.86%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		4.53%
FY 2015-16	-7.45%	-9.76%	-6.82%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		-7.68%
FY 2016-17	13.30%	13.17%	11.86%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		12.45%
FY 2017-18	-1.72%	-37.02%	-34.34%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		-9.58%
FY 2018-19 FY 2019-20	2.61% 3.48%	89.03% -3.25%	83.42% -2.13%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		15.65% 2.21%
FY 2019-20 Estimated FY 2020-21	-6.60%	-3.25% -7.66%	-2.13% -9.96%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		-5.11%
Estimated FY 2020-21 Estimated FY 2021-22	3.50%	3.50%	-9.96% 3.50%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		-5.11% 3.50%
Estimated F1 2021-22 Estimated FY 2022-23	3.50%	3.50%	3.50%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		3.50%
Loumaned F1 2022=23	3.3076	5.50/0[	3.3070[	0.0076	0.0076	0.0076	0.0076	0.0076	0.0076[	0.0076	0.0076	0.0076	0.0076	0.0076	0.0076	3.3076

### Exhibit H - LONG-TERM CARE - PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)

					C	asn-Based Actual	s and Projections									
						Current Year	Projection									
PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2019-20 Average Monthly Paid Enrollment	3,795	516		-	-	-	-	-	-	-	-	-	-	-	-	4,5
Trend Factor <sup>(5)</sup>	11.52%	-1.94%	12.95%	-	-	-	-	-	-	-	-	-		-	-	10.0
Estimated FY 2020-21 Monthly Paid Enrollment	4,232	506	253	-	-	-	-	-	-	-	-			-	-	4,9
FY 2020-21 Estimated Cost Per Enrollee	\$47,892.00	\$49,013.52	\$49,013.52	-	-	-	-	-	-	-	-	-		-	-	\$49,000.
Bottom Line Impacts																
FY 2019-20 Retroactive Payments		\$596,668	\$259,019	-				-			-				-	\$5,243,96
PACE Recoupment	(\$1,841,014)	(\$250,320)	(\$108,666)	-	-	-	-	-	-	-	-	-		-	-	(\$2,200,00
Total Bottom Line Impacts		\$346,348	\$150,353	\$0	\$0	\$0	\$0	\$0			\$0					(\$2,200,00
Estimated FY 2020-21 Expenditure	\$205,764,428	\$28,962,647	\$12,893,092	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0				\$247,620,16
Estimated FY 2020-21 Per Capita	\$4,260.04	\$2,155.76	\$195.46	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$182.2
% Change over FY 2019-20 Per Capita	4.10%	2.55%	6.65%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-5.11
						Request Year	Projection									
PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Estimated FY 2020-21 Monthly Paid Enrollment	4,232	506	253	-	-	-	-	-	-	-	-	-		-	-	4,99
Trend Factor <sup>(5)</sup>	7.37%	7.25%	7.25%	-	-	-	-	-	-	-	-	-		-	-	7.35
Estimated FY 2021-22 Monthly Paid Enrollment	4,544	543	271	-	-		-	-	-	-	-	-		-	-	5,35
FY 2021-22 Estimated Cost Per Enrollee	\$49,568.22	\$50,728.99	\$50,728.99	-	-	-	-	-	-	-	-	-	-	-	-	\$50,715.0
Bottom Line Impacts																
Total Bottom Line Impacts		\$0		\$0				\$0								\$
Estimated FY 2021-22 Expenditure		\$31,782,743	\$14,148,493	\$0				\$0								\$271,730,97
Estimated FY 2021-22 Per Capita		\$2,325.17	\$203.69	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$193.1
% Change over FY 2020-21 Per Capita	9.16%	7.86%	4.21%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6.00
·				·	·	Out Year P	rojection		·		·			·		
		Disabled Adults	Disabled Individuals		MAGI Parents/	MAGI Parents/		Breast &	Eligible	SR 11-008		MAGI	SB 11-250	Non-Citizens-		

PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)	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		MACIAdulte	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Estimated FY 2021-22 Monthly Paid Enrollment	4,544	543	271		-	-	-	-	-	-	-	-	-	-	-	5,358
Trend Factor <sup>(5)</sup>	7.35%	7.37%	7.37%		-	-	-	-	-	-	-	-	-	-	-	7.35%
Estimated FY 2022-23 Monthly Paid Enrollment	4,878	583	291	-	-	-	-	-	-	-	-	-	-	-	-	5,752
FY 2022-23 Estimated Cost Per Enrollee	\$51,303.11	\$52,504.51	\$52,504.51	-	-	-	-	-	-	-	-	-	-	-	-	\$52,490.0
Bottom Line Impacts																
PACE Rate Reduction JBC Action	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2022-23 Expenditure	\$250,888,056	\$35,314,083	\$15,720,514	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$301,922,653
Estimated FY 2022-23 Per Capita	\$5,000.84	\$2,496.93	\$220.93	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$195.44
% Change over FY 2021-22 Per Capita	7.54%	7.39%	8.46%	0.00%	6 0.00%	6 0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	1.17%

- (1) The Average Monthly Paid Enrollment is not the actual enrollment in the Department's PACE program. This figure reflects the number of capitations paid in each month, not the distinct number of clients enrolled. For further information, please see the Budget Line Item Description. (2) The FY 2010-11 Per Enrollee costs are adjusted for the PACE reconciliation with providers from FY 2009-10. These figures subtract out the reconciliation to keep trends consistent historically.
- (3) Per-enrollee costs for FY 2020-21, FY 2021-22, FY 2022-23 are a weighted average of FY 2019-20 rates by forecasted FY 2019-20 provider distribution and FY 2019-20 third-party-liability status.
- (4) Estimated costs per enrollee in this exhibit do not represent future rates in FY 2021-22 forward, as information that is necessary to accurately calculate actuarially sound rates is not available at this time. The cost per enrollee information in this exhibit is for informational purposes only. Please see the Narrative for more information on PACE rates.

  (5) Monthly Paid Enrollment figures for FY 2020-21, FY 2021-22, and FY 2023-24 are estimated via month to month trends in enrollment growth.

## Exhibit H - INSURANCE - SUPPLEMENTAL MEDICARE INSURANCE BENEFIT Cash-Based Actuals and Projections

							Cash-Based Actuals a	and Projections								
•							Cash Based	Actuals								
SUPPLEMENTAL MEDICARE INSURANCE BENEFIT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$63,201,668	\$3,688,256	\$33,153,682	\$46,299	\$207,374	\$0	\$0	\$0	\$0			\$0	\$0	\$0	\$18,301,648	\$118,598,927
FY 2012-13	\$63,920,416	\$3,727,469	\$33,506,170	\$0	\$209,579	\$0			\$0							\$119,859,864
FY 2013-14	\$68,884,741	\$4,016,960	\$36,108,399	\$0	\$225,857	\$0			\$0							\$129,168,681
FY 2014-15 FY 2015-16	\$73,205,694 \$83,423,470	\$4,268,933 \$4,864,774	\$38,373,381 \$43,729,393	\$0 \$0	\$240,024 \$273,526	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0			\$0 \$0	\$0 \$0			\$137,271,082 \$156,430,863
FY 2015-16 FY 2016-17	\$83,423,470 \$99,587,634	\$4,864,774	\$43,729,393 \$52,202,417	\$0 \$0	\$273,326 \$326,524	\$0	S0 S0		\$0 \$0			\$0 \$0				\$156,430,863
FY 2016-17 FY 2017-18	\$105,305,731	\$6,140,821	\$55,199,761	\$0 \$0	\$345,273	\$0	\$0 \$0		\$0 \$0			\$0				\$197,463,212
FY 2018-19	\$105,608,721	\$6,158,490	\$55,358,585	S0	\$346,266	\$0	SO SO	\$0	\$0			\$0	\$0			\$198,031,363
FY 2019-20	\$108,653,508	\$6,336,044	\$56,954,618	\$0	\$356,249	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$31,440,350	\$203,740,769
Estimated FY 2020-21	\$113,264,450	\$6,681,597	\$58,291,510	\$0	\$380,685	\$0	\$0		\$0			\$0		\$0	\$33,531,726	\$212,149,969
Estimated FY 2021-22	\$119,174,184	\$7,120,366	\$63,178,242	\$0	\$459,428	\$0			\$0							\$225,540,894
Estimated FY 2022-23	\$125,831,158	\$7,548,762	\$67,039,731	\$0	\$571,103	\$0			\$0	\$0	\$0	\$0	\$0	\$0	\$38,105,786	\$239,096,540
						Per	rcent Change in Cas	sh Based Actuals								
SUPPLEMENTAL MEDICARE INSURANCE BENEFIT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	1.14%	1.06%	1.06%	-100.00%	1.06%	0.00%		0.00%	0.00%		0.00%	0.00%	0.00%			1.06%
FY 2013-14	7.77%	7.77%	7.77%	0.00%	7.77%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%		7.77%	7.77%
FY 2014-15 FY 2015-16	6.27% 13.96%	6.27%	6.27%	0.00%	6.27% 13.96%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%			6.27% 13.96%
FY 2015-16 FY 2016-17	13.96%	13.96%	13.96%	0.00%	13.96%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%			13.96%
FY 2017-18	5.74%	5.74%	5.74%	0.00%	5.74%		0.00%	0.00%	0.00%		0.00%	0.00%	0.00%			5.74%
FY 2018-19	0.29%	0.29%	0.29%	0.00%	0.29%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%			0.29%
FY 2019-20	2.88%	2.88%	2.88%	0.00%	2.88%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%	0.00%		2.88%
Estimated FY 2020-21	4.24%	5.45%	2.35%	0.00%	6.86%		0.00%	0.00%	0.00%		0.00%	0.00%	0.00%			4.13%
Estimated FY 2021-22	5.22%	6.57%	8.38%	0.00%	20.68%		0.00%	0.00%	0.00%			0.00%	0.00%			6.31%
Estimated FY 2022-23	5.59%	6.02%	6.11%	0.00%	24.31%	0.00%			0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	7.01%	6.01%
							Per Capita	Cost								
SUPPLEMENTAL MEDICARE INSURANCE BENEFIT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$1,590.38	\$439.97	\$557.82	\$890.37	\$2.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$969.83	\$191.30
FY 2012-13	\$1,565.64	\$411.83	\$541.12	\$0.00	\$2.11	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$872.22	\$175.49
FY 2013-14	\$1,646.54	\$407.69	\$560.48	\$0.00	\$1.81	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00			\$150.03
FY 2014-15	\$1,750.62	\$407.89	\$576.63	\$0.00	\$1.48	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$755.32	\$118.22
FY 2015-16	\$1,967.40	\$462.04	\$635.60	\$0.00	\$1.67	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$740.82	\$120.61
FY 2016-17 FY 2017-18	\$2,266.39 \$2,293.89	\$516.62 \$520.54	\$772.01 \$817.40	\$0.00 \$0.00	\$2.02 \$1.92	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00		\$0.00 \$0.00	\$0.00 \$0.00	\$0.00		\$852.35 \$874.92	\$138.73 \$150.14
FY 2017-18 FY 2018-19	\$2,293.89 \$2,214.67	\$520.54 \$484.12	\$817.40 \$806.52	\$0.00	\$1.92 \$1.97	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$874.92 \$881.00	\$150.14 \$157.00
FY 2019-20	\$2,284.99	\$486.30	\$856.07	\$0.00	\$2.17	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$940.17	\$167.10
Estimated FY 2020-21	\$2,344.97	\$497.33	\$883.69	\$0.00	\$2.21	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$958.32	\$156.14
Estimated FY 2021-22	\$2,454.26	\$520.91	\$909.54	\$0.00	\$2.25	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00		\$1,009.63	\$160.34
Estimated FY 2022-23	\$2,508.14	\$533.74	\$942.14	\$0.00	\$2.32	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,028.57	\$154.77
			•	•		P	ercent Change in P	er Capita Cost	•	•						
SUPPLEMENTAL MEDICARE INSURANCE BENEFIT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
		< 100/	-2.99%	-100.00%	-4.95%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	-10.06%	-8.26%
FY 2012-13	-1.56%	-6.40%	-2.9970			0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%		-14.51%
FY 2013-14	5.17%	-1.01%	3.58%	0.00%	-14.22%											
FY 2013-14 FY 2014-15	5.17% 6.32%	-1.01% 0.05%	3.58%	0.00%	-18.23%	0.00%	0.00%	0.00%	0.00%		0.00%	0.00%	0.00%			-21.20%
FY 2013-14 FY 2014-15 FY 2015-16	5.17% 6.32% 12.38%	-1.01% 0.05% 13.28%	3.58% 2.88% 10.23%	0.00% 0.00%	-18.23% 12.84%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	6 0.00%	-1.92%	2.029
FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17	5.17% 6.32% 12.38% 15.20%	-1.01% 0.05% 13.28% 11.81%	3.58% 2.88% 10.23% 21.46%	0.00% 0.00% 0.00%	-18.23% 12.84% 20.96%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00%	0.00%	0.00% 0.00%	0.00% 0.00%	0.00%	0.00% 0.00%	-1.92% 15.05%	2.02% 15.02%
FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18	5.17% 6.32% 12.38% 15.20% 1.21%	-1.01% 0.05% 13.28% 11.81% 0.76%	3.58% 2.88% 10.23% 21.46% 5.88%	0.00% 0.00% 0.00% 0.00%	-18.23% 12.84% 20.96% -4.95%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	6 0.00% 6 0.00% 6 0.00%	-1.92% 15.05% 2.65%	2.029 15.029 8.229
FY 2013-14 FY 2014-15 FY 2015-16 FY 2015-17 FY 2017-18 FY 2018-19	5.17% 6.32% 12.38% 15.20% 1.21% -3.45%	-1.01% 0.05% 13.28% 11.81% 0.76% -7.00%	3.58% 2.88% 10.23% 21.46% 5.88% -1.33%	0.00% 0.00% 0.00% 0.00% 0.00%	-18.23% 12.84% 20.96% -4.95% 2.60%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	6 0.00% 6 0.00% 6 0.00% 6 0.00%	-1.92% 15.05% 2.65% 0.69%	2.029 15.029 8.229 4.579
FY 2013-14 FY 2014-15 FY 2016-15 FY 2016-16 FY 2016-18 FY 2018-19 FY 2018-19	5.17% 6.32% 12.38% 15.20% 1.21% -3.45% 3.18%	-1.01% 0.05% 13.28% 11.81% 0.76% -7.00% 0.45%	3.58% 2.88% 10.23% 21.46% 5.88% -1.33% 6.14%	0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	-18.23% 12.84% 20.96% -4.95% 2.60% 10.15%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0.00% 0.00% 0.00%	0 0.00% 6 0.00% 6 0.00% 6 0.00% 6 0.00%	-1.92% 15.05% 2.65% 0.69% 6.72%	2.029 15.029 8.229 4.579 6.439
FY 2013-14 FY 2014-15 FY 2015-16 FY 2015-17 FY 2017-18 FY 2018-19	5.17% 6.32% 12.38% 15.20% 1.21% -3.45%	-1.01% 0.05% 13.28% 11.81% 0.76% -7.00%	3.58% 2.88% 10.23% 21.46% 5.88% -1.33%	0.00% 0.00% 0.00% 0.00% 0.00%	-18.23% 12.84% 20.96% -4.95% 2.60%	0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	0.00% 0.00% 0.00% 0.00% 0.00%	6 0.00% 6 0.00% 6 0.00% 6 0.00% 6 0.00% 6 0.00%	-1.92% 15.05% 2.65% 0.69% 6.72% 1.93%	2.02% 15.02% 8.22%

## Exhibit H - INSURANCE - SUPPLEMENTAL MEDICARE INSURANCE BENEFIT Cash-Based Actuals and Projections

							Cash-Based Actuals a	na i rojections								
SUPPLEMENTAL MEDICARE INSURANCE BENEFIT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
					•		Current Year F	rojection	•							
FY 2019-20 Expenditure (Half Year)	\$54,326,754	\$3,168,022	\$28,477,309	\$0	\$178,125	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$15,720,175	\$101,870,385
Estimated FY 2020-21 First Half Caseload Trend	0.79%	1.56%	-0.43%	18.29%	2.45%	18.65%	9.11%	2.55%	3.74%	8.86%	-1.02%	6.94%	28.04%	31.77%	2.32%	5.72%
Estimated FY 2020-21 First Half Expenditure	\$54,755,189	\$3,217,382	\$28,356,174	\$0	\$182,483	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$16,084,257	\$102,595,486
Estimated FY 2020-21 Second Half Caseload Trend	0.79%	1.56%	-0.43%	18.29%	2.45%	18.65%	9.11%	2.55%	3.74%	8.86%	-1.02%	6.94%	28.04%	31.77%	2.32%	5.72%
Estimated Increase in Medicare Part B Premium (Effective January 1, 2021) <sup>(1)</sup>	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%	6.02%
Estimated FY 2020-21 Second Half Expenditure	\$58,509,261	\$3,464,215	\$29,935,336	\$0	\$198,202	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$17,447,469	\$109,554,483
Estimated FY 2020-21 Total Expenditure	\$113,264,450	\$6,681,597	\$58,291,510	\$0	\$380,685	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$33,531,726	\$212,149,969
Estimated FY 2020-21 Per Capita	\$2,344.97	\$497.33	\$883.69	\$0.00	\$2.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$958.32	\$156.14
% Change over FY 2019-20 Per Capita	2.62%	2.27%	3.23%	0.00%	1.84%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.93%	-6.56%
		-					Request Year P							1		
Estimated FY 2021-22 First Half Caseload Trend	0.27%	0.87%	2.65%	-2.87%	9.18%	-0.91%	3.16%	0.00%	-1.25%	0.07%	0.51%	4.92%	0.87%	-5.94%		1.76%
Estimated FY 2021-22 First Half Expenditure	\$58,664,919	\$3,494,383	\$30,729,055	\$0	\$216,393	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$17,517,030	\$110,621,780
Estimated FY 2021-22 Caseload Trend	0.27%	0.87%	2.65%	-2.87%	9.18%	-0.91%	3.16%	0.00%	-1.25%	0.07%	0.51%	4.92%	0.87%	-5.94%	0.40%	1.76%
Estimated Increase in Medicare Part B Premium (Effective January 1, 2022) <sup>(1)</sup>	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%	2.87%
Estimated FY 2021-22 Second Half Expenditure	\$60,509,265	\$3,625,983	\$32,449,187	\$0	\$243,035	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	, ,.	\$114,919,114
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2021-22 Total Expenditure	\$119,174,184	\$7,120,366	\$63,178,242	\$0	\$459,428	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$35,608,674	\$225,540,894
Estimated FY 2021-22 Per Capita	\$2,454.26	\$520.91	\$909.54	\$0.00	\$2.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$160.34
% Change over FY 2020-21 Per Capita	4.66%	4.74%	2.93%	0.00%	1.81%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	5.35%	2.69%
		-					Out Year Pro	jection						1		
Estimated FY 2022-23 First Half Caseload Trend	1.66%	1.73%	1.22%	5.69%	10.16%	1.90%	5.98%	0.35%	3.26%	5.93%	0.88%	5.96%	2.05%	1.83%	2.52%	4.91%
Estimated FY 2022-23 First Half Expenditure	\$61,513,120	\$3,688,856	\$32,845,136	\$0	\$267,737	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0		\$116,862,623
Estimated FY 2022-23 Caseload Trend	1.66%	1.73%	1.22%	5.69%	10.16%	1.90%	5.98%	0.35%	3.26%	5.93%	0.88%	5.96%	2.05%	1.83%	2.52%	4.91%
Estimated Increase in Medicare Part B Premium (Effective January 1, 2023) <sup>(1)</sup>	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%	2.85%
Estimated FY 2022-23 Second Half Expenditure	\$64,318,038	\$3,859,906	\$34,194,595	\$0	\$303,366	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$19,558,012	\$122,233,917
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2022-23 Total Expenditure	\$125,831,158	\$7,548,762	\$67,039,731	\$0	\$571,103	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	,,	\$239,096,540
Estimated FY 2022-23 Per Capita	\$2,508.14	\$533.74	\$942.14	\$0.00	\$2.32	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,028.57	\$154.77
% Change over Estimated FY 2021-22 Per Capita	2.20%	2.46%	3.58%	0.00%	3.11%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.88%	-3.47%
(1)The Part B premium is \$153.30 as of January 1, 2021. T	he Department projects t	hat the premium will be 5	\$157.70 in CY 2022 and	1 \$166.70 in CY 2023 b	ased on the Annual Rep	ort of the Boards of Trus	tees of the Federal Hosp	sital Insurance Trust Fund	d and the Federal Supple	mentary Medical Insuran	ce Trust Fund					

#### Exhibit H - INSURANCE - HEALTH INSURANCE BUY-IN Cash-Based Actuals and Projections

						Cash-Based Actu	-									
						Cash Bas	sed Actuals									
HEALTH INSURANCE BUY-IN	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$2,162	\$6,655	\$1,122,186	\$0	\$9,727 \$6,506	\$0	\$0	\$0	\$12,996	\$0	\$2,223	\$3,358	\$0 \$0	\$0	\$0	\$1,159,307 \$1,361,531
FY 2012-13 FY 2013-14	\$2,767 \$11,744	\$1,630 \$20,552	\$1,345,692 \$1,215,523	\$0 \$0		\$0 \$0		\$0 \$0		\$0 \$0	\$1,304 \$21,718	\$0 \$8,808	\$0 \$0	\$0 \$0	\$0 \$0	\$1,361,531
FY 2014-15	\$8,989	\$11,236	\$1,101,111	\$0		\$22,472	\$20,224	\$0		\$0	\$0	\$6,741	\$0	\$0	\$0	\$1,262,907
FY 2015-16	\$11,486	\$14,357	\$1,406,977	\$0	\$17,228	\$28,714	\$25,842	\$0		\$0	\$0	\$8,614	\$0	\$0	\$0	\$1,613,716
FY 2016-17	\$15,177	\$18,972	\$1,859,221	\$0		\$37,943	\$34,149	\$0		\$0	\$0	\$11,383	\$0	\$0	\$0	\$2,132,413
FY 2017-18 FY 2018-19	\$17,511 \$18,345	\$21,889 \$22,932	\$2,145,101 \$2,247,306	\$0 \$0		\$43,778 \$45,863	\$39,400 \$41,277	\$0 \$0		\$0 \$0	\$0 \$0	\$13,133 \$13,759	\$0 \$0	\$0 \$0	\$0 \$0	\$2,460,300 \$2,577,522
FY 2018-19 FY 2019-20	\$7,920	\$13,709	\$2,247,306	\$0 \$0			\$113.225	\$0 \$0		\$0 \$0	\$0 \$0	\$5,534	\$0 \$0	\$0 \$0	\$0 \$0	\$2,377,322
Estimated FY 2020-21	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Estimated FY 2021-22	\$7,920	\$13,710	\$2,296,630	\$0		\$12,298	\$113,233	\$0		\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Estimated FY 2022-23	\$7,920	\$13,710	\$2,296,630	\$0			\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
					Per	cent Change in	Cash Based Ac	tuals								
HEALTH INSURANCE BUY-IN	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	27.98%	-75.51%	19.92%	0.00%		0.00%	0.00%	0.00%	-72.05% 1565.50%	0.00%	-41.34%	-100.00%	0.00%	0.00%	0.00%	17.44%
FY 2013-14 FY 2014-15	324.43% -23.46%	1160.86% -45.33%	-9.67% -9.41%	0.00%	306.16% -48.98%	0.00% 100.00%	0.00% 100.00%	0.00%	1565.50% 30.02%	0.00%	1565.49% -100.00%	100.00% -23.47%	0.00%	0.00%	0.00%	0.27% -7.50%
FY 2015-16	27.78%	27.78%	27.78%	0.00%		27.78%	27.78%	0.00%	27.78%	0.00%	0.00%	27.79%	0.00%	0.00%	0.00%	27.78%
FY 2016-17	32.13%	32.14%	32.14%	0.00%	32.15%	32.14%	32.15%	0.00%	32.14%	0.00%	0.00%	32.15%	0.00%	0.00%	0.00%	32.14%
FY 2017-18	15.38%	15.38%	15.38%	0.00%	15.38%		15.38%	0.00%	15.38%	0.00%	0.00%	15.37%	0.00%	0.00%	0.00%	15.38%
FY 2018-19 FY 2019-20	4.76% -56.83%	4.76% -40.22%	4.76% 2.19%	0.00%	4.76%	4.76%	4.76% 174.31%	0.00%	4.77% -80.61%	0.00%	0.00%	4.77% -59.78%	0.00%	0.00%	0.00%	4.76% -3.42%
Estimated FY 2019-20	-56.83%	-40.22% 0.01%	0.01%	0.00%			0.01%	0.00%	-80.61%	0.00%	0.00%	-59.78%	0.00%	0.00%	0.00%	-3.42% 0.01%
Estimated FY 2021-22	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Estimated FY 2022-23	0.00%	0.0007	0.0001													
Littlimited 1 1 2022 23	0.0076	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Littlined 1 1 2022 23	0.0076	0.00%	0.00%	0.00%	0.00%		0.00% pita Cost	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
HEALTH INSURANCE BUY-IN	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-	MAGI Parents/ Caretakers to 68% FPL			0.00%  Breast & Cervical Cancer Program	0.00%  Eligible Children (AFDC-C/BC)	0.00% SB 11-008 Eligible Children	0.00%	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	0.00%  Partial Dual Eligibles	0.00%
HEALTH INSURANCE BUY-IN FY 2011-12	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	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00	pita Cost  MAGI Adults	Breast & Cervical Cancer Program \$0.00	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles \$0.00	TOTAL \$1.87
HEALTH INSURANCE BUY-IN  FY 2011-12 FY 2012-13	Adults 65 and Older (OAP-A) \$0.05 \$0.07	Disabled Adults 60 to 64 (OAP-B) \$0.79 \$0.18	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73	Disabled Buy- In \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.10 \$0.07	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00	MAGI Adults  \$0.00 \$0.00	Breast & Cervical Cancer Program \$0.00	Eligible Children (AFDC-C/BC) \$0.04	SB 11-008 Eligible Children \$0.00	Foster Care \$0.12 \$0.07	MAGI Pregnant Adults \$0.44 \$0.00	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00	Non-Citizens- Emergency Services \$0.00	Partial Dual Eligibles \$0.00 \$0.00	**TOTAL \$1.87 \$1.99
HEALTH INSURANCE BUY-IN  FY 2011-12  FY 2012-13  FY 2013-14	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28	Disabled Adults 60 to 64 (OAP-B) \$0.79 \$0.18 \$2.09	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73 \$18.87	Disabled Buy- In \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.10 \$0.07 \$0.21	Per Ca MAGI Parents/ Caretakers 69% to 133% FPL \$0.00 \$0.00	MAGI Adults  \$0.00 \$0.00 \$0.00	Breast & Cervical Cancer Program \$0.00 \$0.00	Eligible Children (AFDC-C/BC) \$0.04 \$0.01 \$0.15	SB 11-008 Eligible Children \$0.00 \$0.00	\$0.12 \$0.07 \$1.19	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00	Non-Citizens- Emergency Services \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59
HEALTH INSURANCE BUY-IN  FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28 \$0.21	Disabled Adults 60 to 64 (OAP-B) \$0.79 \$0.18 \$2.09 \$1.07	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73 \$18.87 \$16.55	Disabled Buy- In   \$0.00   \$0.00   \$0.00   \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.10 \$0.07 \$0.21 \$0.08	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL \$0.00 \$0.00 \$0.00 \$0.00 \$0.31	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.08	Breast & Cervical Cancer Program \$0.00 \$0.00 \$0.00	Eligible Children (AFDC-C/BC) \$0.04 \$0.01 \$0.15 \$0.18	SB 11-008 Eligible Children \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.45	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00 \$0.00	Non-Citizens- Emergency Services \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09
FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-15 FY 2016-17	Adults 65 and Older (OAP-A) \$0.05 \$0.27 \$0.21 \$0.27 \$0.35	Disabled Adults 60 to 64 (OAP-B) \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.69	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73 \$18.87 \$16.55 \$20.45 \$27.50	Disabled Buy- In \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.10 \$0.07 \$0.21 \$0.08 \$0.11	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.31 \$0.33 \$0.33	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.08 \$0.08 \$0.08 \$0.10	Breast & Cervical Cancer Program \$0.00 \$0.	Eligible Children (AFDC-C/BC) \$0.04 \$0.01 \$0.15 \$0.18 \$0.22	SB 11-008 Eligible Children \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.45 \$0.60 \$0.84	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Non-Citizens- Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09 \$1.24 \$1.58
FY 2011-12 FY 2012-13 FY 2013-15 FY 2013-16 FY 2014-15 FY 2016-16 FY 2016-17 FY 2017-18	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28 \$0.21 \$0.27 \$0.35 \$0.38	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.69 \$1.86	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73 \$16.55 \$20.45 \$27.50 \$31.76	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.10 \$0.07 \$0.21 \$0.08 \$0.11 \$0.14	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.01 \$0.31 \$0.33 \$0.38 \$0.38	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.08 \$0.08 \$0.08 \$0.10 \$0.11	Breast & Cervical Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Children (AFDC-C/BC) \$0.04 \$0.01 \$0.15 \$0.18 \$0.22 \$0.28 \$0.35	SB 11-008 Eligible Children \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.45 \$0.60 \$0.84 \$1.30	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Non-Citizens- Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09 \$1.24 \$1.58 \$1.187
FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2016-17	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28 \$0.21 \$0.27 \$0.35 \$0.38	Disabled Adults 60 to 64 (OAP-B) 50.79 50.18 \$2.09 \$1.07 \$1.36 \$1.69 \$1.80	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73 \$18.87 \$16.55 \$20.45 \$27.50 \$31.76 \$32.74	Disabled Buy- In \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.07 \$0.21 \$0.08 \$0.11 \$0.14 \$0.15 \$0.15	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.00 \$0.31 \$0.33 \$0.38 \$0.38 \$0.59 \$0.72	MAGI Adults    \$0.00     \$0.00     \$0.00     \$0.08     \$0.08     \$0.10     \$0.11     \$0.12	Breast & Cervical Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Children (AFDC-C/BC) \$0.04 \$0.01 \$0.15 \$0.22 \$0.28 \$0.35	SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.00 \$0.67 \$0.44 \$0.00 \$0.67 \$0.69 \$0.84 \$1.30	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09 \$1.24 \$1.58 \$1.87
FY 2011-12	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28 \$0.21 \$0.27 \$0.35 \$0.38 \$0.38	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.86 \$1.80 \$1.80	Disabled Individuals to 59 (AND/AB) 518.88 521.73 516.55 520.45 527.45 532.74 533.76	Disabled Buy- In \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.10 \$0.07 \$0.21 \$0.08 \$0.11 \$0.14 \$0.15 \$0.16	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL 50.00 50.00 50.00 50.31 50.33 50.38 50.59 50.72	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.08 \$0.08 \$0.08 \$0.08 \$0.10 \$0.11 \$0.12 \$0.35	Breast & Cervical Cancer Program \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Eligible Children (AFDC-C/BC) \$0.04 \$0.01 \$0.15 \$0.18 \$0.22 \$0.28 \$0.35 \$0.35	SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.65 \$0.60 \$0.84 \$1.30 \$1.13 \$0.45	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Non-Citizens- Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09 \$1.24 \$1.58 \$1.87 \$2.04
FY 2011-12	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28 \$0.21 \$0.27 \$0.35 \$0.38 \$0.38 \$0.38 \$0.30 \$0	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.69 \$1.80 \$1.80 \$1.81 \$1.80 \$1.80	Disabled Individuals to 59 (AND/AB) 518.88 521.73 516.55 520.45 527.50 331.76 332.74 534.52 334.82	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL \$0.10 \$0.07 \$0.21 \$0.08 \$0.11 \$0.14 \$0.15 \$0.16 \$0.06 \$0.06	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  50.00 50.00 50.00 50.31 50.33 50.38 50.59 50.72 50.15 50.15	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.08 \$0.08 \$0.08 \$0.10 \$0.11 \$0.12 \$0.35 \$0.30 \$0.30	Breast & Cervical Cancer Program \$0.00 \$0.	Eligible Children (AFDC-C/BC) \$0.04 \$0.15 \$0.15 \$0.18 \$0.22 \$0.28 \$0.35 \$0.35 \$0.30 \$0.08	SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.45 \$0.69 \$0.84 \$1.30 \$1.13 \$0.48 \$0.42 \$0.42	SB 11-250 Eligible Pregnant Adults  \$0.00	Non-Citizens- Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09 \$1.24 \$1.58 \$1.87 \$2.04 \$1.83 \$1.83
FY 2011-12	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28 \$0.21 \$0.27 \$0.35 \$0.38 \$0.38 \$0.17	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.69 \$1.80 \$1.80 \$1.81 \$1.80 \$1.80	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73 \$18.87 \$16.55 \$22.45 \$27.50 \$31.76 \$33.74 \$34.52 \$34.82	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL 50.10 50.07 50.21 50.18 50.15 50.16 50.06 50.05 50.05	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  50.00 50.00 50.01 50.31 50.38 50.38 50.59 50.72 50.15 50.15	magi Adults  S0.00  \$0.00  \$0.00  \$0.00  \$0.08  \$0.08  \$0.10  \$0.12  \$0.35  \$0.30  \$0.28  \$0.30  \$0.20	Breast & Cervical Cancer Program \$0.00	Eligible Children (AFDC-C/BC) \$0.04 \$0.15 \$0.15 \$0.18 \$0.22 \$0.28 \$0.35 \$0.35 \$0.30 \$0.08	SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.45 \$0.65 \$0.84 \$1.30 \$1.13 \$0.48	SB 11-250 Eligible Pregnant Adults \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Non-Citizens- Emergency Services  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09 \$1.24 \$1.58 \$1.27 \$2.04 \$2.04 \$1.83
FY 2011-12	Adults 65 and Older (OAP-A) \$0.05 \$0.07 \$0.28 \$0.21 \$0.27 \$0.35 \$0.38 \$0.38 \$0.38 \$0.30 \$0	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.69 \$1.80 \$1.80 \$1.81 \$1.80 \$1.80	Disabled Individuals to 59 (AND/AB) 518.88 521.73 516.55 520.45 527.50 331.76 332.74 534.52 334.82	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Parents/ Caretakers to 68% FPL 50.10 50.07 50.21 50.18 50.15 50.16 50.06 50.05 50.05	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  50.00 50.00 50.01 50.31 50.38 50.38 50.59 50.72 50.15 50.15	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.08 \$0.08 \$0.08 \$0.10 \$0.11 \$0.12 \$0.35 \$0.30 \$0.30	Breast & Cervical Cancer Program \$0.00	Eligible Children (AFDC-C/BC) \$0.04 \$0.15 \$0.15 \$0.18 \$0.22 \$0.28 \$0.35 \$0.35 \$0.30 \$0.08	SB 11-008 Eligible Children  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.45 \$0.69 \$0.84 \$1.30 \$1.13 \$0.48 \$0.42 \$0.42	SB 11-250 Eligible Pregnant Adults  \$0.00	Non-Citizens- Emergency Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.87 \$1.99 \$1.59 \$1.09 \$1.24 \$1.58 \$1.87 \$2.04 \$1.83 \$1.83
### HEALTH INSURANCE BUY-IN    FY 2011-12	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.27 \$0.38 \$0.31 \$0.16 \$0.16  Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.80 \$1.80 \$51.05 \$1.05 \$1.05 \$1.05 \$1.07  S1.05 \$1.05 \$1.00 \$1.05 \$1.00 \$1.05 \$1.00 \$1.05 \$1.00 \$1.05 \$1.00	Disabled Individuals to 10,000 to 10	Disabled Buy- 10 \$0.00 \$	MAGI Parents/ Caretakers to 68% FPL 10	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.03 \$0.33 \$0.38 \$0.59 \$0.59 \$0.21 \$0.15 \$0.1	MAGI Adults  S0.00 S0.00 S0.00 S0.00 S0.08 S0.08 S0.08 S0.10 S0.11 S0.12 S0.35 S0.30 S0.28 S0.28 MAGI Adults	Breast & Cervical Cancer Program \$0.000 \$0.0	Eligible Children (AFDC-C/BC)  \$0.04  \$0.05  \$0.15  \$0.15  \$0.22  \$0.22  \$0.38  \$0.07  \$0.07  Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children  \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults 50.00 \$0.64 \$0.67 \$0.65 \$0.84 \$1.13 \$0.48 \$0.48 \$0.48 \$0.48 \$0.48 \$0.48 \$0.48	SB 11-250 Eligibae Pregibae Adults  \$0.00	Non-Citizens- Emergency S0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Partial Dual Eligibles  \$0.00	TOTAL  \$1.87 \$1.99 \$1.59 \$1.59 \$1.24 \$1.24 \$2.04 \$2.04 \$3.83 \$3.1.77 \$1.61
### HEALTH INSURANCE BUY-IN  FY 2011-12  FY 2012-13  FY 2013-14  FY 2014-15  FY 2014-15  FY 2016-17  FY 2016-17  FY 2018-19  FY 2018-20  Estimated FY 2020-22  Estimated FY 2021-22  Estimated FY 2021-22  #################################	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.27 \$0.35 \$0.38 \$0.38 \$0.16 \$0.16 \$0.16 \$0.16	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.36 \$1.36 \$1.80 \$1.80 \$1.80 \$1.02	Disabled Individuals to 59 (AND/AB)  \$18.88 \$21.73 \$118.87 \$18.87 \$20.45 \$23.176 \$32.74 \$33.42 \$33.26  Disabled Individuals to 590 (AND/AB)  15.10%	Disabled Buy-  S0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  Disabled Buy-  In	MAGI Parents/ Caretakers to 68% FPL  \$0.10 \$0.07 \$0.21 \$0.08 \$0.11 \$0.15 \$0.16 \$0.06 \$0.00 \$0.04 P  MAGI Parents/ Caretakers to 68% FPL  -30.00%	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.03 \$0.31 \$0.38 \$0.38 \$0.38 \$0.59 \$0.72 \$0.21 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.13 \$0.38	MAGI Adults  MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.12 \$0.35 \$0.30 \$0.25 in Per Capita C  MAGI Adults  0.00%	Breast & Cervical Cancer Program \$0.00 \$0.00	Eligible Children (AFDC-C/BC) \$0.01 \$0.15 \$0.15 \$0.18 \$0.22 \$0.23 \$0.38 \$0.08 \$0.07 \$0.07	SB 11-008 Eligible Children S0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.00 \$0.67 \$0.65 \$0.65 \$0.80 \$1.13 \$0.48 \$0.32 \$0.32 \$0.32 \$0.32 \$0.34	SB 11-250 Eligibat Pregibat Adults  \$0.00	Non-Citizens- Emergency Scrvices S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00 S0.00	Partial Dual Eligibles \$0.00	TOTAL  \$1.87 \$1.99 \$1.59 \$1.59 \$1.24 \$1.87 \$2.04 \$5.187 \$5.161
### HEALTH INSURANCE BUY-IN  FY 2011-12  FY 2012-13  FY 2013-14  FY 2014-15  FY 2015-16  FY 2016-17  FY 2017-18  FY 2018-20  Estimated FY 2020-21  Estimated FY 2021-23  ###################################	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.21 \$0.25 \$0.35 \$0.38 \$0.38 \$0.16 \$0.16  Adults 65 and Older (OAP-A)  40.00%	Disabled Adults 60 to 64 (OAP-B) S0.79 S0.18 \$2.09 \$1.07 \$1.36 \$1.80 \$1.80 \$1.80 \$51.02 \$1.00 \$0.97	Disabled Individuals to 59 (AND/AB) \$18.88 \$221.73 \$18.87 \$18.87 \$23.47 \$33.27 \$33.27 \$33.27 \$33.27 \$33.27 \$33.06 \$32.28 \$34.82 \$33.06 \$32.28 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.20 \$34.20	Disabled Buy- In  50.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  Disabled Buy- In  0.00%	MAGI Parents/ Caretakers to 68% FPL  50.10 50.07 50.21 50.11 50.14 50.16 50.06 50.05 50.04 P  MAGI Parents/ Caretakers to 68% FPL	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.31 \$0.33 \$0.38 \$0.38 \$0.59 \$0.72 \$0.15 \$0.15 \$0.15 \$crcent Change  MAGI Parents/ Caretakers 69% to 133% FPL  0.00% 0.00%	MAGI Adults  S0.00  \$0.00  \$0.00  \$0.00  \$0.08  \$0.10  \$0.12  \$0.35  \$0.28  \$0.30  \$0.28  \$0.28  \$0.20  MAGI Adults	Breast & Cervical Cancer Program \$0.000 \$0.0	Eligible Children (AFDC-C/BC)  50.01  50.15  50.15  50.82  50.38  50.38  50.07  50.07  Eligible Children (AFDC-C/BC)  -75.00%	SB 11-008 Eligible Children  \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.67 \$0.45 \$0.45 \$0.45 \$0.13 \$0.13 \$0.18 \$0.42 \$0.38 \$0.34  MAGI Pregnant Adults -100.00%	SB 11-250 Eligible Pregnant Adults  \$0.00	Non-Citizens- Emergency S0.00 \$0.00	Partial Dual Eligibles \$0.00	\$1.87 \$1.99 \$1.59 \$1.99 \$1.94 \$1.83 \$1.87 \$2.04 \$2.04 \$1.83 \$1.77 \$1.61
### HEALTH INSURANCE BUY-IN  FY 2011-12  FY 2012-13  FY 2013-14  FY 2014-15  FY 2015-15  FY 2016-17  FY 2016-17  FY 2018-19  FY 2018-20  Estimated FY 2020-22  Estimated FY 2021-22  Estimated FY 2021-22  Estimated FY 2021-23  ###################################	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.27 \$0.35 \$0.38 \$0.38 \$0.17 \$0.16 \$0.16 \$0.16 \$0.16 \$0.10	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.36 \$1.69 \$1.80 \$1.80 \$1.02 \$1.02 \$1.00  Disabled Adults 60 to 64 (OAP-B)  -77.22% 1061.11% 448.09%	Disabled Individuals to 59 (AND/AB) \$18.88 \$21.73 \$18.85 \$21.73 \$18.65 \$23.75 \$21.76 \$32.45 \$21.75 \$21.76 \$32.45 \$21.75 \$21.76 \$	Disabled Buy- 10 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00	MAGI Parents/ Caretakers to 68% FPL.  \$0.10 \$0.07 \$0.21 \$0.08 \$0.11 \$0.15 \$0.16 \$0.06 \$0.04 P  MAGI Parents/ Caretakers to 68% FPL.	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.31 \$0.33 \$0.38 \$0.38 \$0.59 \$0.72 \$0.21 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.15 \$0.10 \$0.00% \$0.00% \$0.00%	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.08 \$0.08 \$0.08 \$0.11 \$0.12 \$0.35 \$0.30 \$0.25 in Per Capita C	Breast & Cervical Cancer Program \$0.000 \$0.0	Eligible Children (AFDC-C/BC) \$0.01 \$0.15 \$0.15 \$0.18 \$0.22 \$0.23 \$0.38 \$0.08 \$0.07 \$0.07	SB 11-008 Eligible Children \$0.00	\$0.12 \$0.07 \$1.19 \$0.00	MAGI Pregnant Adults  \$0.44 \$0.00 \$0.67 \$0.67 \$0.65 \$0.81 \$0.32 \$0.48 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38	SB 11-250 Eligibat Adults  \$0.00	Non-Citizens- Emergency Scrvices S0.00 S0	Partial Dual	TOTAL  \$1.87 \$1.99 \$1.59 \$1.59 \$1.59 \$1.24 \$1.87 \$2.04 \$2.14 \$1.87 \$2.14  TOTAL  6.42% -20.105%
### HEALTH INSURANCE BUY-IN  FY 2011-12  FY 2012-13  FY 2013-14  FY 2014-15  FY 2015-16  FY 2016-17  FY 2017-18  FY 2018-20  Estimated FY 2020-21  Estimated FY 2021-22  Estimated FY 2022-23  #################################	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.21 \$0.25 \$0.35 \$0.38 \$0.38 \$0.16 \$0.16  Adults 65 and Older (OAP-A)  40.00%	Disabled Adults 60 to 64 (OAP-B) S0.79 S0.18 \$2.09 \$1.07 \$1.36 \$1.80 \$1.80 \$1.80 \$51.02 \$1.00 \$0.97	Disabled Individuals to 59 (AND/AB) \$18.88 \$221.73 \$18.87 \$18.87 \$23.47 \$33.27 \$33.27 \$33.27 \$33.27 \$33.28 \$33.06 \$32.28 \$34.82 \$33.06 \$32.28 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.06 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.30 \$33.27 \$34.82 \$33.27 \$34.82 \$33.27 \$34.82 \$33.28 \$34.82 \$33.30 \$33.27 \$34.82 \$33.20 \$34.20	Disabled Buy- In  50.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  Disabled Buy- In  0.00%	MAGI Parents/ Caretakers to 68% FPL  50.10 50.07 50.21 50.08 50.14 50.15 50.16 50.06 50.05 50.04 PMAGI Parents/ Caretakers to 68% FPL  200.00% -61.90% 37.50%	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.31 \$0.33 \$0.38 \$0.38 \$0.59 \$0.72 \$0.15 \$0.15 \$0.15 \$crcent Change  MAGI Parents/ Caretakers 69% to 133% FPL  0.00% 0.00%	MAGI Adults  S0.00  \$0.00  \$0.00  \$0.00  \$0.08  \$0.10  \$0.12  \$0.35  \$0.28  \$0.30  \$0.28  \$0.28  \$0.20  MAGI Adults	Breast & Cervical Cancer Program \$0.000 \$0.0	Eligible Children (AFDC-C/BC)  \$0.04  \$0.01  \$0.15  \$0.15  \$0.28  \$0.28  \$0.35  \$0.38  \$0.07  \$0.07  Eligible (AFDC-C/BC)  -75.00%  1400.00%  20.00%	SB 11-008 Eligible Children  \$0.00	\$0.12 \$0.07 \$1.19 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.67 \$0.45 \$0.45 \$0.45 \$0.13 \$0.13 \$0.18 \$0.42 \$0.38 \$0.34  MAGI Pregnant Adults -100.00%	SB 11-250 Eligible Pregnant Adults  \$0.00	Non-Citizens- Emergency S0.00 \$0.00	Partial Dual Eligibles \$0.00	TOTAL  \$1.87 \$1.99 \$1.59 \$1.29 \$1.24 \$1.58 \$1.87 \$2.04 \$51.83 \$1.77 \$1.61
### HEALTH INSURANCE BUY-IN  FY 2011-12  FY 2012-13  FY 2013-14  FY 2014-15  FY 2015-16  FY 2016-17  FY 2017-18  FY 2018-20  Estimated FY 2009-20  Estimated FY 2012-23  Estimated FY 2012-23  #### HEALTH INSURANCE BUY-IN  FY 2013-18  FY 2014-15  FY 2014-15  FY 2014-15  FY 2015-16  FY 2015-16	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.21 \$0.27 \$0.38 \$0.38 \$0.16 \$0.16  Adults 65 and Older (OAP-A)  40.00% \$	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.80 \$1.80 \$1.80 \$1.00 \$0.97  Disabled Adults 60 to 64 (OAP-B)  -77.22% 1061.11% -48.80% -48.80% -24.26% 10.06%	Disabled Individuals to 59 (AND/AB) \$ 18.88 \$ 18.87 \$ 18.87 \$ 18.57 \$ 16.57 \$ 19.57 \$	Disabled Buy- In S0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  Disabled Buy- In  0.00% 0.00% 0.00% 0.00%	MAGI Parents/ Caretakers to 68% FPL  50.10 50.07 50.21 50.08 50.14 50.15 50.16 50.06 50.06 50.04 P  MAGI Parents/ Caretakers to 68% FPL  -30.00% -61.50% 27.27% 7.14%	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  50.00 50.00 50.01 50.31 50.33 50.38 50.59 50.72 50.15 50.15 creent Change  MAGI Parents/ FPL  0.00% 6.00% 6.00% 6.00% 6.00% 6.45% 6.15.15%	MAGI Adults  S0.00 S0.00 S0.00 S0.08 S0.08 S0.10 S0.11 S0.12 S0.35 S0.25 in Per Capita C  MAGI Adults  MAGI Adults	Breast & Cervical Cancer Program \$0.00 \$0.00	Eligible Children (AFDC-C/BC)  \$0.04  \$0.01  \$0.15  \$0.18  \$0.22  \$0.28  \$0.38  \$0.08  \$0.07  \$0.07  Eligible Children CAFDC-C/BC)  -75.00%  140.00%  20.22%  27.27%  25.00%	SB 11-008 Eligible Children  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.12 \$0.07 \$1.19 \$0.00	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.67 \$0.45 \$0.50 \$0.	SB 11-250 Eligible Preginant Adults  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Non-Citizens- Emergency S0.00	Partial Dual Eligibles S0.00 S	TOTAL  \$1.87 \$1.99 \$1.59 \$1.19 \$1.14 \$1.18 \$1.18 \$1.18 \$1.18 \$1.17 \$1.161  TOTAL  6.42% -20.10% -31.47
FY 2011-12	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.27 \$0.38 \$0.31 \$0.38 \$0.17 \$0.16 \$0.16  Adults 65 and Older (OAP-A)  40.00% \$0.300.09% \$0.25.00% \$0.38 \$0.38	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.36 \$1.86 \$1.80 \$1.85 \$1.05 \$1.05 \$1.07 \$1	Disabled Individuals to \$10.00 to \$1	Disabled Buy- 10  \$0.00	MAGI Parents/ Caretakers to 68% FPL  50.07 50.21 50.08 50.11 50.16 50.06 50.05 50.04  MAGI Parents/ Caretakers to 68% FPL  30.09% 20.109% 37.27% 7.14% 6.66%	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.31 \$0.33 \$0.38 \$0.39 \$0.72 \$0.21 \$0.15 \$0.15 \$0.15  ercent Change MAGI Parents/ Caretakers 69% to 133% FPL  0.00% 6.45% 15.15%	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.12 \$0.35 \$0.35 \$0.36 \$0.25 in Per Capita C  MAGI Adults	Breast & Cervical Cancer Program \$0.000 \$0.0	Eligible Children (AFDC-C/BC) \$0.04 \$0.04 \$0.05 \$0.15 \$0.18 \$0.28 \$0.28 \$0.38 \$0.08 \$0.07 \$0.07  Eligible Children (AFDC-C/BC)  -75.00% \$100.0% \$20.00% \$2.20% \$2.5.00% \$8.57%	SB 11-008 Eligible Children \$0.00	Sol.12   Sol.07   Sol.00   S	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.67 \$0.65 \$0.81 \$0.81 \$0.81 \$0.81 \$0.48 \$0.	SB 11-250 Eligibat Adults  \$0.00	Non-Citizens- Emergency \$0.00	Partial Dual Eligibles S0.00 S	TOTAL  \$1.87 \$1.99 \$1.59 \$1.59 \$1.28 \$1.28 \$1.87 \$2.04 \$2.04 \$5.187 \$1.61
### HEALTH INSURANCE BUY-IN  FY 2011-12  FY 2012-13  FY 2013-14  FY 2014-15  FY 2014-15  FY 2016-17  FY 2018-16  FY 2018-19  Estimated FY 2020-22  Estimated FY 2021-22  Estimated FY 2021-22  Estimated FY 2021-23  ###################################	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.27 \$0.35 \$0.38 \$0.38 \$0.16 \$0.16 \$0.16 \$0.16 \$0.16 \$0.27 \$0.25 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.38 \$0.19 \$0.10 \$	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.07 \$1.36 \$1.80 \$1.80 \$1.00 \$0.97  Disabled Adults 60 to 64 (OAP-B)  -77.22% 1061.11% 48.80% 227.10% 24.26% 10.06% 3.23% 44.80%	Disabled Individuals to 59 (AND/AB) \$18.88 \$18.87 \$18.87 \$18.87 \$21.50 \$32.74 \$33.45 \$33.26 \$33.28 \$18.87 \$18.87 \$18.87 \$19.87 \$	Disabled Buy- 10 50.00 5	MAGI Parents/ Caretakers to 68% FPL  50.10 50.21 50.21 50.11 50.15 50.16 50.06 50.06 50.04 P  MAGI Parents/ Caretakers to 20.09% 40.09%	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  50.00 50.00 50.01 50.33 50.33 50.39 50.72 50.71 50.15 creent Change  MAGI Parents/ Caretakers 69% to 133% FPL  0.00% 10.00% 10.00% 15.15% 55.26% 22.03% -70.83%	MAGI Adults  S0.00 S0.00 S0.00 S0.08 S0.08 S0.10 S0.11 S0.12 S0.35 S0.25 in Per Capita C  MAGI Adults  MAGI Adults	Breast & Cervical Carloid St. 100 St.	Eligible Children (AFDC-CBC)  \$0.04  \$0.01  \$0.15  \$0.18  \$0.22  \$0.28  \$0.38  \$0.08  \$0.07  \$0.07  \$0.07  Eligible Children (AFDC-CBC)  40.00%  20.22%  27.27%  8.57%  8.57%	SB 11-008 Eligible Children  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	Sol.12   Sol.07   Sol.00   S	MAGI Pregnant Adults \$0.40 \$0.67 \$0.67 \$0.65 \$0.50 \$0.	SB 11-250 Eligibal Preginal Adults S0.00 S	Non-Citizens- Emergency S0.00	Partial Dual Eligibles  \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	TOTAL  \$1.87 \$1.99 \$1.59 \$1.59 \$1.29 \$1.24 \$1.87 \$2.04 \$2.14 \$1.87 \$1.61  TOTAL  6.42% -20.14% -31.45% -31.45% -31.45% -31.45% -31.97%
FY 2011-12	Adults 65 and Older (OAP-A)  \$0.05 \$0.07 \$0.28 \$0.27 \$0.38 \$0.31 \$0.38 \$0.17 \$0.16 \$0.16  Adults 65 and Older (OAP-A)  40.00% \$0.300.09% \$0.25.00% \$0.38 \$0.38	Disabled Adults 60 to 64 (OAP-B)  \$0.79 \$0.18 \$2.09 \$1.36 \$1.86 \$1.80 \$1.85 \$1.05 \$1.05 \$1.07 \$1	Disabled Individuals to \$10.00 to \$1	Disabled Buy- 10  \$0.00	MAGI Parents/ Caretakers to 68% FPL  \$0.10 \$0.07 \$0.21 \$0.08 \$0.01 \$0.14 \$0.16 \$0.06 \$0.06 \$0.00 \$0.004  P  MAGI Parents/ Caretakers to 68% FPL  30.00% \$0.04 \$0.04 \$0.07 \$0.0	Per Ca  MAGI Parents/ Caretakers 69% to 133% FPL  \$0.00 \$0.00 \$0.31 \$0.33 \$0.38 \$0.39 \$0.72 \$0.21 \$0.15 \$0.15 \$0.15  ercent Change MAGI Parents/ Caretakers 69% to 133% FPL  0.00% 6.45% 15.15%	MAGI Adults  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.11 \$0.12 \$0.35 \$0.35 \$0.36 \$0.25 in Per Capita C  MAGI Adults	Breast & Cervical Cancer Program \$0.000 \$0.0	Eligible Children (AFDC-C/BC) \$0.04 \$0.04 \$0.05 \$0.15 \$0.18 \$0.28 \$0.28 \$0.38 \$0.08 \$0.07 \$0.07  Eligible Children (AFDC-C/BC)  -75.00% \$100.0% \$20.00% \$2.20% \$2.5.00% \$8.57%	SB 11-008 Eligible Children \$0.00	Sol.12   Sol.07   Sol.00   S	MAGI Pregnant Adults \$0.44 \$0.00 \$0.67 \$0.67 \$0.65 \$0.81 \$0.81 \$0.81 \$0.81 \$0.48 \$0.	SB 11-250 Eligibat Adults  \$0.00	Non-Citizens- Emergency \$0.00	Partial Dual Eligibles S0.00 S	TOTAL  \$1.87 \$1.99 \$1.59 \$1.59 \$1.52 \$1.58 \$1.87 \$2.04 \$2.04 \$1.87 \$1.61  TOTAL  TOTAL

#### Exhibit H - INSURANCE - HEALTH INSURANCE BUY-IN Cash-Based Actuals and Projections

						Expendit	ure Trends									
HEALTH INSURANCE BUY-IN	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Actual FY 2019-20 Expenditure	\$7,920	\$13,709	\$2,296,471	\$0	\$9,116	\$12,297	\$113,225	\$0	\$31,127	\$0	\$0	\$5,534	\$0		\$0	\$2,489,399
Average of FY 2013-14 through FY 2017-18	75.25%	238.17%	11.24%	0.00%	66.50%	35.06%	35.06%	0.00%	334.16%	0.00%	293.10%	30.37%	0.00%		0.00%	13.61%
Average of FY 2014-15 through FY 2017-18	12.96%	7.49%	16.47%	0.00%	6.58%	43.83%	43.83%	0.00%	26.33%	0.00%	-25.00%	12.96%	0.00%		0.00%	16.95%
Average of FY 2015-16 through FY 2017-18	25.10% 23.76%	25.10% 23.76%	25.10% 23.76%	0.00%	25.10% 23.77%	25.10% 23.76%	25.10% 23.77%	0.00%	25.10% 23.76%	0.00%	0.00%	25.10% 23.76%	0.00%	0.00%	0.00%	25.10% 23.76%
Average of FY 2016-17 through FY 2017-18 Average of FY 2014-15 through FY 2018-19	23.76%	6.95%	23.76% 14.13%	0.00%	6.22%	23.76% 36.01%	36.01%	0.00%	23.76%	0.00%	-20.00%	11.32%	0.00%	0.00%	0.00%	23.76% 14.51%
Average of FY 2015-15 through FY 2018-19	20.01%	20.02%	20.02%	0.00%	20.02%	20.02%	20.02%	0.00%	20.02%	0.00%	0.00%	20.02%	0.00%	0.00%	0.00%	20.02%
Average of FY 2016-17 through FY 2018-19	17.42%	17.43%	17.43%	0.00%	17.43%	17.43%	17.43%	0.00%	17.43%	0.00%	0.00%	17.43%	0.00%	0.00%	0.00%	17.43%
Average of FY 2017-18 through FY 2018-19	10.07%	10.07%	10.07%	0.00%	10.07%	10.07%	10.07%	0.00%	10.08%	0.00%	0.00%	10.07%	0.00%	0.00%	0.00%	10.07%
Average of FY 2015-16 through FY 2019-20	4.64%	7.97%	16.45%	0.00%	2.64%	1.37%	50.88%	0.00%	-0.11%	0.00%	0.00%	4.06%	0.00%	0.00%	0.00%	15.33%
Average of FY 2016-17 through FY 2019-20	-1.14%	3.02%	13.62%	0.00%	-3.65%	-5.23%	56.65%	0.00%	-7.08%	0.00%	0.00%	-1.87%	0.00%		0.00%	12.22%
Average of FY 2017-18 through FY 2019-20	-12.23%	-6.69%	7.44%	0.00%	-15.58%	-17.68%	64.82%	0.00%	-20.15%	0.00%	0.00%	-13.21%	0.00%	0.00%	0.00%	5.57%
Average of FY 2018-19 through FY 2019-20	-26.04%	-17.73%	3.48%	0.00%	-31.06%	-34.22%	89.54%	0.00%	-37.92%	0.00%	0.00%	-27.51%	0.00%	0.00%	0.00%	0.67%
						Current Yo	ear Projection									
Actual FY 2019-20 Expenditure	\$7,920	\$13,709	\$2,296,471	\$0	\$9,116	\$12,297	\$113,225	\$0	\$31,127	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,399
Estimated Incremental Expenditure for FY 2020-21																
SB 10-167 "Medicaid Efficiency & False Claims" - Provider Payment	\$0	\$1	\$147	\$0	\$1	\$1	\$7	\$0	\$2	\$0	\$0	\$0	\$0	\$0	\$0	\$159
SB 10-167 "Medicaid Efficiency & False Claims" - Premiums Payment	\$0	\$0	\$12	\$0	\$0	\$0	\$1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$12
Total Incremental Expenditure	\$0	\$1	\$159	\$0	\$1	\$1	\$8	\$0	\$2	\$0	\$0	\$0	\$0	\$0	\$0	\$171
Estimated FY 2020-21 Total Expenditure	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Estimated FY 2020-21 Per Capita	\$0.16	\$1.02	\$34.82	\$0.00	\$0.05	\$0.15	\$0.30	\$0.00	\$0.07	\$0.00	\$0.00	\$0.42	\$0.00		\$0.00	\$1.83
% Change over FY 2019-20 Per Capita	-5.88%	-2.86%	0.87%	0.00%	-16.67%	-28.57%	-14.29%	0.00%	-12.50%	0.00%	0.00%	-12.50%	0.00%	0.00%	0.00%	-10.29%
						Request Yo	ear Projection									
Estimated FY 2020-21 Total Expenditure	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Estimated Incremental Expenditure for FY 2021-22																
Annualization of SB 10-167 "Medicaid Efficiency & False Claims" - Provider Payment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Annualization of SB 10-167 "Medicaid Efficiency & False Claims" - Premiums Payment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Incremental Expenditure	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2021-22 Total Expenditure	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Estimated FY 2021-22 Per Capita	\$0.16	\$1.00	\$33.06	\$0.00	\$0.04	\$0.15	\$0.28	\$0.00	\$0.07	\$0.00	\$0.00	\$0.38	\$0.00	\$0.00	\$0.00	\$1.77
% Change over FY 2020-21 Per Capita	0.00%	-1.96%	-5.05%	0.00%	-20.00%	0.00%	-6.67%	0.00%	0.00%	0.00%	0.00%	-9.52%	0.00%	0.00%	0.00%	-3.28%
						Out Year	r Projection								•	
Estimated FY 2021-22 Total Expenditure	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Estimated Incremental Expenditure for FY 2022-23																
Annualization of SB 10-167 "Medicaid Efficiency & False Claims" - Provider Payment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Annualization of SB 10-167 "Medicaid Efficiency & False Claims" - Premiums Payment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Incremental Expenditure	\$0	\$0	\$0	\$0	\$0	\$0	\$0	January 0, 1900	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2022-23 Total Expenditure	\$7,920	\$13,710	\$2,296,630	\$0	\$9,117	\$12,298	\$113,233	\$0	\$31,129	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,570
Estimated FY 2022-23 Per Capita	\$0.16	\$0.97	\$32.28	\$0.00	\$0.04	\$0.15	\$0.25	\$0.00	\$0.07	\$0.00	\$0.00	\$0.34	\$0.00	\$0.00	\$0.00	\$1.61
% Change over FY 2021-22 Per Capita	0.00%	-3.00%	-2.36%	0.00%	0.00%	0.00%	-10.71%	0.00%	0.00%	0.00%	0.00%	-10.53%	0.00%	0.00%	0.00%	-9.04%

#### Exhibit I - SERVICE MANAGEMENT

#### Summary

						FY 2020-21 Se	rvice Managen	nent Request								
SERVICE MANAGEMENT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Single Entry Points	\$16,397,057	\$4,299,009	\$24,091,491	\$7,363	\$12,720	\$3,682	\$66,443	\$0	\$8,536	\$1,004	\$60,585	\$0	\$0	\$0	\$0	\$44,947,890
Disease Management	\$8,394	\$30,142	\$257,502	\$32,013	\$229,734	\$78,882	\$512,632	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Accountable Care Collaborative	\$7,025,531	\$1,992,551	\$11,215,462	\$1,960,341	\$27,442,336	\$12,194,559	\$58,725,378	\$26,010	\$72,169,271	\$10,595,148	\$3,758,218	\$2,132,808	\$516,457	\$221	\$0	\$209,754,292
Prepaid Inpatient Health Plan	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Service Management	\$23,430,982	\$6,321,702	\$35,564,455	\$1,999,717	\$27,684,790	\$12,277,123	\$59,304,453	\$26,010	\$72,177,807	\$10,596,152	\$3,874,714	\$2,201,507	\$528,274	\$221	\$0	\$255,987,908
						FY 2021-22 Se	rvice Managen	nent Request								
SERVICE MANAGEMENT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Single Entry Points	\$17,559,636	\$4,603,817	\$25,799,619		\$13,621	\$3,943	\$71,154	\$0	\$9,141	\$1,076	\$64,880	\$0		\$0	\$0	\$48,134,773
Disease Management	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Accountable Care Collaborative	\$7,111,236	\$2,011,960	\$11,508,475	\$1,999,367	\$27,642,493	\$13,134,204	\$65,019,162	\$26,742	\$73,431,030	\$11,339,272	\$3,803,710	\$2,359,215	\$586,993	\$0	\$0	\$219,973,854
Prepaid Inpatient Health Plan	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Service Management	\$24,679,266	\$6,645,919	\$37,565,596	\$2,039,266	\$27,885,847	\$13,217,029	\$65,602,949	\$26,742	\$73,440,171	\$11,340,348	\$3,924,501	\$2,427,914	\$598,810	\$0	\$0	\$269,394,353
						FY 2022-23 Se	rvice Managen	nent Request								
SERVICE MANAGEMENT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Single Entry Points	\$18,109,253	\$4,747,916	\$26,607,147	\$8,133	\$14,047	\$4,066	\$73,381	\$0	\$9,427	\$1,110	\$66,911	\$0		\$0	\$0	\$49,641,391
Disease Management	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0		\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Accountable Care Collaborative	\$8,026,642	\$2,235,396	\$11,814,767	\$2,214,690	\$27,642,513	\$14,315,413	\$73,486,280	\$26,932	\$78,027,711	\$12,671,340	\$3,867,530	\$2,660,385	\$616,758	\$0	\$0	\$237,606,366
Prepaid Inpatient Health Plan	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Service Management	\$26,144,289	\$7,013,454	\$38,679,416	\$2,254,836	\$27,886,293	\$14,398,361	\$74,072,294	\$26,932	\$78,037,138	\$12,672,450	\$3,990,352	\$2,729,084	\$628,575	80	\$0	\$288,533,483

#### Exhibit I - SERVICE MANAGEMENT - SINGLE ENTRY POINT

Projections	Expenditure	by Eligibili	tv

|   |   |   |   |  
  |   | Cash   | Based Actuals   
  |   |  |   
  |   |   |  
   |  |  |   
   |
|---|---|---|---
---|---|--
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SINGLE ENTRY POINTS	Adults 65 and Older (OAP-A)
  | MAGI Parents/<br>Caretakers to 68%<br>FPL   | MAGI Parents/<br>Caretakers 69% to<br>133% FPL   | MAGI Adults   
  | Breast & Cervical<br>Cancer Program   | Eligible Children<br>(AFDC-C/BC)   | SB 11-008 Eligible<br>Children  
  | Foster Care   | MAGI Pregnant<br>Adults   | SB 11-250 Eligible<br>Pregnant Adults  
   | Non-Citizens-<br>Emergency Services  | Partial Dual Eligible  | TOTAL   
   |
| FY 2011-1:  | \$11,748,349  |   | \$10,910,528  | \$0  
  | \$5,343   | \$1,263  | \$0   
  |   | \$1,749  | \$0   
  | \$8,355   | \$0   |  
   |  | \$45,369   | \$25,226,746  
   |
| FY 2012-1:<br>FY 2013-1-  | \$11,133,931<br>\$7,836,051   |   | \$11,274,336<br>\$15,256,301  | \$8,561<br>\$107.844   
  | \$1,712<br>\$14,555   | \$5,993<br>\$3,169   | \$0<br>\$35,876   
  | \$856<br>\$376  | \$1,443,430<br>\$1,156,908   | \$0<br>\$0  
  | \$285,947<br>\$248.772  | \$0<br>\$161  | \$0<br>\$0   
   |  | \$53,080<br>\$107.361  | \$26,976,561<br>\$26,899,016  
   |
| FY 2013-14<br>FY 2014-1:  | \$7,836,051   |   | \$15,256,301  | \$107,844<br>\$201.793   
  | \$14,555<br>\$44,524  | \$3,169<br>\$5,745   | \$35,876<br>\$170,913   
  | \$3/6<br>\$0  | \$1,156,908  | \$9,336   
  | \$248,772<br>\$315,974  | \$161<br>\$2,154  | 02   
   |  | \$107,361  | \$26,899,016<br>\$32,619,317  
   |
| FY 2015-10  | \$8,758,028   | \$2,502,485   | \$18,504,336  | \$200,734  
  | \$28,772  | \$4,015  | \$171,962   
  | \$0   | \$788,216  | \$9,368   
  | \$223,484   | \$669   | \$0  
   |  | \$90,999   | \$31,283,068  
   |
| FY 2016-1   | \$8,784,331   | \$2,598,679   | \$18,717,289  | \$215,488  
  | \$36,556  | \$3,848  | \$221,260   
  | \$0   | \$237,934  | \$10,903  
  | \$182,138   | \$1,283   | \$0  
   |  | \$79,525   | \$31,089,234  
   |
| FY 2017-1:<br>FY 2018-1   | \$11,229,722<br>\$9,551,535   |   | \$19,516,828<br>\$14,033,660  | \$144,404<br>\$4,290   
  | \$66,825<br>\$7,409   | \$19,971<br>\$2,145  | \$307,243<br>\$38,704   
  | \$66,057<br>\$0   | \$129,810<br>\$4,972   | \$74,506<br>\$585   
  | \$96,781<br>\$35,292  | \$0<br>\$0  | \$0<br>\$0   
   |  | \$95,245<br>\$0  | \$34,799,849<br>\$26,182,831  
   |
| FY 2019-21  | \$9,331,333<br>\$11,089,942   |   | \$14,033,000  | \$4,290  
  | \$7,409<br>\$8,603  | \$2,143<br>\$2,490   | \$36,704<br>\$44,938  
  | 30<br>S0  | \$4,972<br>\$5,773   | \$585<br>\$679  
  | \$33,292<br>\$40,976  | \$0<br>\$0  |  
   |  | S0   | \$20,182,831  
   |
| Estimated FY 2020-2   | \$16,397,057  | \$4,299,009   | \$24,091,491  | \$7,363  
  | \$12,720  | \$3,682  | \$66,443  
  | \$0   | \$8,536  | \$1,004   
  | \$60,585  | \$0   |  
   |  | SO SO  | \$44,947,890  
   |
| Estimated FY 2021-2   | \$17,559,636  |   | \$25,799,619  | \$7,886  
  | \$13,621  | \$3,943  | \$71,154  
  | \$0   | \$9,141  | \$1,076   
  | \$64,880  | \$0   |  
   |  | \$0  | \$48,134,773  
   |
| Estimated FY 2022-2   | \$18,109,253  | \$4,747,916   | \$26,607,147  | \$8,133  
  | \$14,047  | \$4,066  | \$73,381  
  | \$0   | \$9,427  | \$1,110   
  | \$66,911  | \$0   | \$0  
   | \$0  | \$0  | \$49,641,391  
   |
|   |   |   |   |  
  |   | Percent Change   | in Cash Based Actua   
  | s   |  |   
  |   |   |  
   |  |  |   
   |
| SINGLE ENTRY POINTS   | Adults 65 and Older<br>(OAP-A)  | Disabled Adults 60 to<br>64<br>(OAP-B)  | Disabled Individuals<br>to 59<br>(AND/AB)   | Disabled Buy-In  
  | MAGI Parents/<br>Caretakers to 68%<br>FPL   | MAGI Parents/<br>Caretakers 69% to<br>133% FPL   | MAGI Adults   
  | Breast & Cervical<br>Cancer Program   | Eligible Children<br>(AFDC-C/BC)   | SB 11-008 Eligible<br>Children  
  | Foster Care   | MAGI Pregnant<br>Adults   | SB 11-250 Eligible<br>Pregnant Adults  
   | Non-Citizens-<br>Emergency Services  | Partial Dual Eligible  | TOTAL   
   |
| FY 2012-1:  | -5.23%  |   | 3.33%   | 100.00%  
  | -67.96%   | 374.51%  | 0.00%   
  |   | 82428.87%  | 0.00%   
  | 3322.47%  | 0.00%   |  
   |  | 17.00%   | 6.94%   
   |
| FY 2013-1-<br>FY 2014-1:  | -29.62%   |   | 35.32%<br>20.79%  | 1159.71%<br>87.12%   
  | 750.18%<br>205.90%  |  | 100.00%<br>376.40%  
  |   | -19.85%<br>47.98%  | 0.00%<br>100.00%  
  | -13.00%<br>27.01%   | 100.00%<br>1237.89%   | 0.00%  
   |  | 102.26%<br>19.06%  | -0.29%<br>21.27%  
   |
| FY 2015-1   | -3.46%  |   | 0.41%   | -0.52%   
  | -35.38%   | -30.11%  | 0.61%   
  | 0.00%   | -53.96%  | 0.34%   
  | -29.27%   | -68.94%   | 0.00%  
   | 0.00%  | -28.81%  | -4.10%  
   |
| FY 2016-1   | 0.30%   |   | 1.15%   | 7.35%  
  | 27.05%  | -4.16%   | 28.67%  
  | 0.00%   | -69.81%  | 16.39%  
  | -18.50%   | 91.78%  | 0.00%  
   | 0.00%  | -12.61%  | -0.62%  
   |
| FY 2017-11  | 27.84%  |   | 4.27%   | -32.99%  
  | 82.80%  | 419.00%  | 38.86%  
  |   | -45.44%  | 583.35%   
  | -46.86%   | -100.00%  | 0.00%  
   | 0.00%  | 19.77%   | 11.94%  
   |
| FY 2018-19  | -14.94%   |   | -28.09%   | -97.03%  
  | -88.91%   | -89.26%  | -87.40%   
  | -100.00%  | -96.17%  | -99.21%   
  | -63.53%   | 0.00%   | 0.00%  
   | 0.00%  | -100.00%   | -24.76%   
   |
| FY 2019-20<br>Estimated FY 2020-2   | 16.11%  |   | 16.11%<br>47.86%  | 16.08%<br>47.85%   
  | 16.12%<br>47.86%  | 16.08%<br>47.87%   | 16.11%<br>47.85%  
  | 0.00%   | 16.11%<br>47.86%   | 16.07%<br>47.86%  
  | 16.11%<br>47.85%  | 0.00%   | 0.00%  
   | 0.00%  | 0.00%  | 16.11%<br>47.86%  
   |
| Estimated FY 2020-2   | 7.09%   |   | 7.09%   | 7.10%  
  | 7.80%   | 7.09%  | 7.09%   
  |   | 7.09%  | 7.17%   
  | 7.83%   | 0.00%   | 0.00%  
   |  | 0.00%  | 7.09%   
   |
| Estimated FY 2022-2:  | 3.13%   |   | 3.13%   | 3.13%  
  | 3.13%   |  | 3.13%   
  |   | 3.13%  | 3.16%   
  | 3.13%   | 0.00%   | 0.00%  
   |  | 0.00%  | 3.13%   
   |
|   |   |   |   |  
  |   |  | Capita Cost   
  |   |  |   
  |   |   |  
   |  |  |   
   |
|   | Adults 65 and Older   | Disabled Adults 60 to   |   |  
  | MAGI Parents/   | MAGI Parents/  |   
  | Breast & Cervical   | Eligible Children  | SB 11-008 Eligible  
  |   | MAGI Pregnant   | SB 11-250 Eligible   
   | Non-Citizens-  |  |   
   |
| SINGLE ENTRY POINTS   |   |   | to 59   | Disabled Buy-In  
  | Caretakers to 68%   | Caretakers 69% to  | MAGI Adults   
  |   | (AFDC-C/BC)  | Children  
  | Foster Care   | Adults  |  
   |  | Partial Dual Eligible  |   
   |
|   | (OAP-A)   | (OAP-B)   | (AND/AB)  | Disabled Day-11  
  | FPL   | 133% FPL   |   
  | Cancer Program  | (AFDC-C/BC)  | Cilliuren   
  |   |   | Pregnant Adults  
   | Emergency Services   | I artim Dum Lingible   | TOTAL   
   |
| FY 2011-1:  | (OAP-A)<br>\$295.63   | \$298.91  | (AND/AB)<br>\$183.57  | \$0.00   
  | FPL<br>\$0.06   | 133% FPL<br>\$0.04   | \$0.00  
  | \$0.00  | \$0.01   | \$0.00  
  | \$0.46  | \$0.00  | \$0.00   
   | \$0.00   | \$2.40   | \$40.69   
   |
| FY 2012-1:  | (OAP-A)<br>2 \$295.63<br>3 \$272.71   | \$298.91<br>\$305.90  | (AND/AB)<br>\$183.57<br>\$182.08  | \$0.00<br>\$9.64   
  | FPL<br>\$0.06<br>\$0.02   | 133% FPL<br>\$0.04<br>\$0.14   | \$0.00<br>\$0.00  
  | \$0.00<br>\$1.37  | \$0.01<br>\$4.01   | \$0.00<br>\$0.00  
  | \$16.09   | \$0.00  | \$0.00<br>\$0.00   
   | \$0.00<br>\$0.00   | \$2.40<br>\$2.50   | \$40.69<br>\$39.50  
   |
| FY 2012-1:<br>FY 2013-1-  | (OAP-A)<br>2 \$295.63<br>3 \$272.71<br>1 \$187.30   | \$298.91<br>\$305.90<br>\$216.34  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81  | \$0.00<br>\$9.64<br>\$42.13  
  | FPL<br>\$0.06<br>\$0.02<br>\$0.12   | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07   | \$0.00<br>\$0.00<br>\$0.41  
  | \$0.00<br>\$1.37<br>\$0.67  | \$0.01<br>\$4.01<br>\$2.90   | \$0.00<br>\$0.00<br>\$0.00  
  | \$16.09<br>\$13.62  | \$0.00<br>\$0.01  | \$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59   | \$40.69<br>\$39.50<br>\$31.24   
   |
| FY 2012-1:<br>FY 2013-1-<br>FY 2014-1:  | (OAP-A)  2 \$295.63  3 \$272.71  4 \$187.30  5 \$216.95   | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59  | \$183.57<br>\$182.08<br>\$236.81<br>\$276.92  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64   
  | \$0.06<br>\$0.02<br>\$0.12<br>\$0.28  | \$0.04<br>\$0.14<br>\$0.07<br>\$0.08   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19  
  | \$16.09<br>\$13.62<br>\$15.77   | \$0.00<br>\$0.01<br>\$0.14  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.56   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09  
   |
| FY 2012-1:<br>FY 2013-1-  | (OAP-A)<br>2 \$295.63<br>3 \$272.71<br>1 \$187.30   | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81  | \$0.00<br>\$9.64<br>\$42.13  
  | FPL<br>\$0.06<br>\$0.02<br>\$0.12   | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07   | \$0.00<br>\$0.00<br>\$0.41  
  | \$0.00<br>\$1.37<br>\$0.67  | \$0.01<br>\$4.01<br>\$2.90   | \$0.00<br>\$0.00<br>\$0.00  
  | \$16.09<br>\$13.62  | \$0.00<br>\$0.01  | \$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59   | \$40.69<br>\$39.50<br>\$31.24   
   |
| FY 2012-1:<br>FY 2013-1:<br>FY 2014-1:<br>FY 2014-1:<br>FY 2016-1:  | (OAP-A)  \$295.63 \$272.71 \$187.30 \$216.95 \$206.54 \$199.91 \$244.62   | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59<br>\$237.68<br>\$231.18<br>\$258.75  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81<br>\$276.92<br>\$268.96<br>\$276.81<br>\$289.01  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64<br>\$32.29<br>\$34.47<br>\$17.66  
  | \$0.06<br>\$0.02<br>\$0.12<br>\$0.28<br>\$0.18<br>\$0.23<br>\$0.23  | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.04<br>\$0.27   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71<br>\$0.54<br>\$0.64  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$426.17  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.30   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.16<br>\$0.17<br>\$1.16  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51  | \$0.00<br>\$0.01<br>\$0.14<br>\$0.05<br>\$0.09<br>\$0.00  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.56<br>\$2.79<br>\$2.35<br>\$2.73   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09<br>\$24.12<br>\$23.10<br>\$26.46   
   |
| FY 2012-15<br>FY 2013-15<br>FY 2014-15<br>FY 2015-16<br>FY 2015-16<br>FY 2017-16  | (OAP-A)  \$295.63  \$272.71  \$187.30  \$216.95  \$206.54  \$199.91  \$244.62  \$200.30   | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59<br>\$237.68<br>\$231.18<br>\$258.75<br>\$196.86  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81<br>\$276.92<br>\$268.96<br>\$276.81<br>\$289.01<br>\$204.46  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64<br>\$32.29<br>\$34.47<br>\$17.66<br>\$0.48  
  | \$0.06<br>\$0.02<br>\$0.12<br>\$0.28<br>\$0.18<br>\$0.23<br>\$0.37  | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.04<br>\$0.27<br>\$0.03   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71<br>\$0.54<br>\$0.64<br>\$0.87<br>\$0.12  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$426.17<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.30<br>\$0.01   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.16<br>\$0.17<br>\$1.16<br>\$0.01  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51<br>\$1.62  | \$0.00<br>\$0.01<br>\$0.14<br>\$0.05<br>\$0.09<br>\$0.09  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.56<br>\$2.79<br>\$2.35<br>\$2.73<br>\$0.00   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09<br>\$24.12<br>\$23.10<br>\$26.46<br>\$20.76  
   |
| FY 2012-12<br>FY 2015-14<br>FY 2016-16<br>FY 2016-16<br>FY 2016-16<br>FY 2017-17<br>FY 2018-16<br>FY 2018-17  | (OAP-A)  \$295.63 \$272.71 \$187.30 \$216.95 \$206.54 \$199.91 \$244.62 \$200.30 \$233.22   | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59<br>\$237.68<br>\$231.18<br>\$258.75<br>\$196.86<br>\$223.16  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81<br>\$276.92<br>\$268.96<br>\$276.81<br>\$289.01<br>\$204.46<br>\$244.91  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64<br>\$32.29<br>\$34.47<br>\$17.66<br>\$0.48  
  | FPL \$0.06<br>\$0.02<br>\$0.12<br>\$0.28<br>\$0.18<br>\$0.23<br>\$0.37<br>\$0.04  | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.05<br>\$0.04<br>\$0.27<br>\$0.03<br>\$0.03   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71<br>\$0.54<br>\$0.64<br>\$0.87<br>\$0.12  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$426.17<br>\$0.00<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.30<br>\$0.01   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.16<br>\$0.17<br>\$1.16<br>\$0.01  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51<br>\$1.62<br>\$1.92  | \$0.00<br>\$0.01<br>\$0.14<br>\$0.05<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.56<br>\$2.79<br>\$2.35<br>\$2.73<br>\$0.00   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09<br>\$24.12<br>\$23.10<br>\$26.46<br>\$20.76<br>\$24.93   
   |
| FY 2012-15 FY 2013-16 FY 2014-16 FY 2015-16 FY 2015-16 FY 2015-17   | (OAP-A)  \$295.63 \$272.71 \$187.30 \$216.95 \$206.54 \$199.91 \$244.62 \$200.30 \$233.22 \$339.48  | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59<br>\$237.68<br>\$231.18<br>\$258.75<br>\$196.86<br>\$223.16  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81<br>\$276.92<br>\$268.96<br>\$276.81<br>\$289.01<br>\$204.46<br>\$244.91<br>\$365.22  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64<br>\$32.29<br>\$34.47<br>\$17.66<br>\$0.48<br>\$0.47  
  | FPL \$0.06<br>\$0.02<br>\$0.12<br>\$0.28<br>\$0.28<br>\$0.23<br>\$0.23<br>\$0.37<br>\$0.04<br>\$0.05  | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.04<br>\$0.27<br>\$0.03<br>\$0.04   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71<br>\$0.54<br>\$0.64<br>\$0.87<br>\$0.12<br>\$0.14  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$426.17<br>\$0.00<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.30<br>\$0.01<br>\$0.01   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.16<br>\$0.17<br>\$1.16<br>\$0.01<br>\$0.01  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51<br>\$1.62<br>\$1.92<br>\$2.90  | \$0.00<br>\$0.01<br>\$0.14<br>\$0.05<br>\$0.05<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.56<br>\$2.79<br>\$2.35<br>\$2.73<br>\$0.00<br>\$0.00   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09<br>\$24.12<br>\$23.10<br>\$26.46<br>\$20.76<br>\$24.93<br>\$33.08  
   |
| FY 2012-12<br>FY 2015-14<br>FY 2016-16<br>FY 2016-16<br>FY 2016-17<br>FY 2018-18<br>FY 2018-18  | (OAP-A)  \$295.63 \$272.71 \$187.30 \$216.95 \$206.54 \$199.91 \$244.62 \$200.30 \$233.22   | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59<br>\$231.68<br>\$231.68<br>\$231.68<br>\$228.75<br>\$196.86<br>\$223.16  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81<br>\$276.92<br>\$268.96<br>\$276.81<br>\$289.01<br>\$204.46<br>\$244.91  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64<br>\$32.29<br>\$34.47<br>\$17.66<br>\$0.48  
  | FPL \$0.06<br>\$0.02<br>\$0.12<br>\$0.28<br>\$0.18<br>\$0.23<br>\$0.37<br>\$0.04  | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.05<br>\$0.04<br>\$0.27<br>\$0.03<br>\$0.04<br>\$0.05   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71<br>\$0.54<br>\$0.64<br>\$0.87<br>\$0.12  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$426.17<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.30<br>\$0.01   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.16<br>\$0.17<br>\$1.16<br>\$0.01  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51<br>\$1.62<br>\$1.92  | \$0.00<br>\$0.01<br>\$0.14<br>\$0.05<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.56<br>\$2.79<br>\$2.35<br>\$2.73<br>\$0.00   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09<br>\$24.12<br>\$23.10<br>\$26.46<br>\$20.76<br>\$24.93   
   |
| FY 2012-12 FY 2014-14 FY 2014-14 FY 2014-14 FY 2014-14 FY 2016-16 FY 2016-16 FY 2016-17 FY 2018-18 FY 2018-18 Estimated FY 2012-2 Estimated FY 2012-2   | (OAP-A)  \$295.63 \$272.71 \$187.30 \$216.95 \$206.54 \$199.91 \$244.62 \$200.30 \$233.22 \$333.48  | \$298.91<br>\$305.90<br>\$216.34<br>\$241.59<br>\$237.68<br>\$231.18<br>\$258.75<br>\$196.86<br>\$223.16<br>\$319.99<br>\$336.81<br>\$335.71  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81<br>\$276.92<br>\$268.96<br>\$276.81<br>\$289.01<br>\$204.46<br>\$244.91<br>\$365.22<br>\$371.42  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64<br>\$32.29<br>\$34.47<br>\$17.66<br>\$0.48<br>\$0.47<br>\$0.51  
  | FPL  \$0.06  \$0.02  \$0.12  \$0.28  \$0.18  \$0.23  \$0.37  \$0.04  \$0.05  \$0.07  \$0.07  \$0.06   | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.04<br>\$0.27<br>\$0.03<br>\$0.04<br>\$0.05<br>\$0.05   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71<br>\$0.54<br>\$0.64<br>\$0.87<br>\$0.12<br>\$0.14<br>\$0.17<br>\$0.18  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$426.17<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.30<br>\$0.01<br>\$0.01<br>\$0.02   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.16<br>\$0.17<br>\$1.16<br>\$0.01<br>\$0.01  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51<br>\$1.62<br>\$1.92<br>\$2.90<br>\$3.07  | \$0.00<br>\$0.01<br>\$0.14<br>\$0.05<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.59<br>\$4.56<br>\$2.79<br>\$2.35<br>\$2.73<br>\$0.00<br>\$0.00<br>\$0.00   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09<br>\$24.12<br>\$23.10<br>\$26.46<br>\$20.76<br>\$24.93<br>\$33.08  
   |
| FY 2012-12 FY 2014-14 FY 2014-14 FY 2014-14 FY 2014-14 FY 2016-16 FY 2016-16 FY 2016-17 FY 2018-18 FY 2018-18 Estimated FY 2012-2 Estimated FY 2012-2   | (OAP-A)  \$295.63 \$272.71 \$187.30 \$216.95 \$206.54 \$199.91 \$244.62 \$200.30 \$233.22 \$333.48  | \$298.91<br>\$305.90<br>\$216.34<br>\$244.59<br>\$237.68<br>\$233.18<br>\$258.75<br>\$196.86<br>\$223.16<br>\$319.99<br>\$336.81<br>\$335.71  | (AND/AB)<br>\$183.57<br>\$182.08<br>\$236.81<br>\$276.92<br>\$268.96<br>\$276.81<br>\$289.01<br>\$204.46<br>\$244.91<br>\$365.22<br>\$371.42  | \$0.00<br>\$9.64<br>\$42.13<br>\$55.64<br>\$32.29<br>\$34.47<br>\$17.66<br>\$0.48<br>\$0.47<br>\$0.51  
  | FPL \$0.06 \$0.02 \$0.12 \$0.12 \$0.28 \$0.18 \$0.23 \$0.18 \$0.23 \$0.04 \$0.05 \$0.04 \$0.05 \$0.07 \$0.00 \$0 | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.04<br>\$0.27<br>\$0.03<br>\$0.04<br>\$0.05<br>\$0.05   | \$0.00<br>\$0.00<br>\$0.41<br>\$0.71<br>\$0.54<br>\$0.64<br>\$0.87<br>\$0.12<br>\$0.14<br>\$0.17<br>\$0.18  
  | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$426.17<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.30<br>\$0.01<br>\$0.01<br>\$0.02   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.16<br>\$0.17<br>\$1.16<br>\$0.01<br>\$0.01  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51<br>\$1.62<br>\$1.92<br>\$2.90<br>\$3.07  | \$0.00<br>\$0.01<br>\$0.14<br>\$0.05<br>\$0.09<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   
   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.59<br>\$4.56<br>\$2.79<br>\$2.35<br>\$2.73<br>\$0.00<br>\$0.00<br>\$0.00   | \$40.69<br>\$39.50<br>\$31.24<br>\$28.09<br>\$24.12<br>\$23.10<br>\$26.46<br>\$20.76<br>\$24.93<br>\$33.08<br>\$33.42   
   |
| FY 2012-15 FY 2013-16 FY 2014-16   | (OAP-A)  \$295.63  \$272.71  \$187.30  \$216.95  \$206.54  \$206.54  \$244.62  \$200.30  \$233.22  \$306.36  Adults 65 and Older (OAP-A)  | \$298.91<br>\$308.90<br>\$216.34<br>\$241.59<br>\$237.68<br>\$233.18<br>\$258.75<br>\$196.86<br>\$223.16<br>\$319.99<br>\$336.81<br>\$335.71<br>Disabled Adults 60 to<br>64<br>(OAP-B)  | (AND/AB)  \$182.08  \$182.08  \$236.81  \$276.92  \$268.96  \$276.81  \$289.01  \$244.91  \$3572.92  \$377.92  \$377.92  \$377.92  Disabled Individuals to 59  (AND/AB)   | \$0.00<br>\$9.64<br>\$42.13<br>\$55.54<br>\$32.29<br>\$17.66<br>\$0.48<br>\$0.47<br>\$0.51<br>\$0.53<br>\$0.53  
   | FPL  \$0.05 \$0.05 \$0.02 \$0.12 \$0.12 \$0.18 \$0.18 \$0.18 \$0.28 \$0.18 \$0.05 \$0.07 \$0.05 \$0.07 \$0.05  MAGI Parents/ Caretakers to 68% FPL  | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.05<br>\$0.05<br>\$0.04<br>\$0.05<br>\$0.04<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05 | \$0.00 \$0.00 \$0.01 \$0.71 \$0.54 \$0.54 \$0.64 \$0.87 \$0.14 \$0.17 \$0.18 \$0.11 \$0.18 \$0.18 \$0.18 \$0.18 \$0.18 \$0.10 \$0.19 \$0.10
\$0.10   | \$0.00<br>\$1.37<br>\$0.67<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00  | \$0.01<br>\$4.01<br>\$2.90<br>\$3.84<br>\$1.69<br>\$0.51<br>\$0.01<br>\$0.01<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02   | \$0.00<br>\$0.00<br>\$0.00<br>\$0.19<br>\$0.17<br>\$0.16<br>\$0.01<br>\$0.01<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02<br>\$0.02  
  | \$16.09<br>\$13.62<br>\$15.77<br>\$11.21<br>\$8.97<br>\$4.51<br>\$1.62<br>\$2.90<br>\$3.07<br>\$3.12<br>Foster Care   | \$0.00 \$0.01 \$0.14 \$0.05 \$0.09 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  MAGI Pregnant Adults 0.00%   | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  
   | \$0.00   | \$2.40<br>\$2.50<br>\$4.59<br>\$4.55<br>\$2.79<br>\$2.35<br>\$2.73<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00 | \$40.69<br>\$39.50<br>\$31.24<br>\$28.69<br>\$24.12<br>\$33.10<br>\$26.46<br>\$20.76<br>\$24.93<br>\$33.08<br>\$34.22<br>\$32.13  
   |
| FY 2012-15 FY 2014-15 FY 2014-15 FY 2014-15 FY 2014-15 FY 2014-16 FY 2015-16 FY 2015-16 FY 2015-16 FY 2015-16 FY 2015-16 FY 2015-16 FESTINATE FY 2012-15 FESTINATE FY 2012-15 FESTINATE FY 2012-15 FESTINATE FY 2012-15 FY 2012-16  | (OAP-A)  \$295.63  \$272.71  \$187.30  \$216.95  \$306.54  \$309.31  \$244.62  \$200.33  \$233.22  \$301.42  \$30 | \$298.91<br>\$305.90<br>\$216.34<br>\$244.59<br>\$237.68<br>\$233.18<br>\$258.75<br>\$106.86<br>\$223.16<br>\$319.99<br>\$336.81<br>\$335.71<br>Disabled Adults 60 to 64<br>(OAP-B)<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24%<br>\$2.24% | (AND/AB)  \$183.37  \$182.08  \$216.31  \$276.92  \$276.92  \$286.95  \$276.81  \$290.446  \$204.466  \$244.61  \$346.52  \$371.42  \$377.42  \$377.42  \$477.42                                | \$0.00<br>\$9.64<br>\$42.13<br>\$5.55.64<br>\$5.55.64<br>\$17.66<br>\$0.48<br>\$0.47<br>\$0.57<br>\$0.57<br>\$0.57<br>\$0.57   
  | FPL  \$0.06 \$0.02 \$0.12 \$0.12 \$0.22 \$0.12 \$0.23 \$0.23 \$0.23 \$0.23 \$0.07 \$0.05 \$0.07 \$0.07 \$0.07 \$0.06  MAGI Parents/ Caretakers to 68% FPL  -66.67% \$0.007 \$0.007 \$0.007  | 133% FPL<br>\$0.04<br>\$0.14<br>\$0.07<br>\$0.08<br>\$0.08<br>\$0.05<br>\$0.04<br>\$0.07<br>\$0.03<br>\$0.04<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05<br>\$0.05 |
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FY 2012-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2015-1 FY 2015-1 Estimated FY 2002-2 Estimated FY 2002-2 SINGLE ENTRY POINTS FY 2012-1 FY 2014-1 FY 2014-1 FY 2014-1	(OAP-A)  \$272.71  \$272.71  \$272.71  \$272.71  \$216.95  \$216.95  \$206.84  \$206.84  \$206.84  \$206.84  \$206.84  \$206.84  \$206.86  \$20	\$298.91 \$308.90 \$216.34 \$241.634 \$241.69 \$237.68 \$227.68 \$227.68 \$228.65 \$228.65 \$228.65 \$228.66 \$228.66 \$228.66 \$28.67 \$	(AND/AB)  \$182.08  \$182.08  \$236.81  \$276.92  \$268.96  \$276.81  \$289.01  \$244.91  \$357.42  \$377.42  \$3	\$0.00 \$9.64 \$4213 \$55.64 \$1223 \$1247 \$17.66 \$0.48 \$0.48 \$0.47 \$0.51 \$0.51 \$0.53 \$0.53	FPL  \$0.06 \$0.02 \$0.12 \$0.28 \$0.18 \$0.28 \$0.18 \$0.23 \$0.30 \$0.04 \$0.05 \$0.07 \$0.07 \$0.07 \$0.06  MAGI Parents' FPL  \$0.0095 \$13.3389	133% FPL 50.04 50.04 50.07 50.08 50.05 50.04 50.05 50.05 50.05 50.05 50.05 Fercet 150 Freed 150 6133% FPL 6133% FPL	\$0.00 \$0.00 \$0.01 \$0.71 \$0.71 \$0.54 \$0.64 \$0.87 \$0.12 \$0.11 \$0.17 \$0.18 \$0.16 \$0.17 \$0.18 \$0.16 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.00%	\$0.00 \$1.37 \$0.67 \$0.00	\$0.01 \$4.01 \$2.90 \$3.84 \$1.69 \$0.51 \$0.01 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02	\$0.00 \$0.00 \$0.00 \$0.19 \$0.17 \$1.16 \$0.01 \$0.01 \$0.02	\$16.09 \$13.62 \$15.77 \$11.21 \$8.897 \$4.51 \$1.62 \$2.20 \$3.07 \$3.12 Foster Care 3397.83% -15.35%	\$0.00 \$0.01 \$0.14 \$0.05 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$2.40 \$2.50 \$4.59 \$4.59 \$4.56 \$2.79 \$2.35 \$2.35 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$40.69 \$39.50 \$31.24 \$28.09 \$24.12 \$23.10 \$26.46 \$20.76 \$24.93 \$33.08 \$34.22 \$32.13
FY 2012-15 FY 2014-15 FY 2014-15 FY 2014-15 FY 2014-15 FY 2015-16 FESTIMATED FY 2012-25 FESTIMATED FY 2012-25 FESTIMATED FY 2012-25 FY 2015-16 FY 2015-16 FY 2015-16 FY 2015-17	(OAP-A)  \$295.63  \$272.71  \$187.30  \$216.95  \$306.54  \$399.91  \$244.62  \$200.33  \$233.22  \$301.62  \$300.34  \$300.35  \$30	\$289.91 \$280.90 \$216.54 \$241.59 \$237.68 \$231.18 \$258.75 \$190.86 \$223.16 \$330.81 \$333.681 \$333.681 \$333.681 \$10.234.69 \$10	(AND/AB)  \$183.37  \$182.08  \$216.31  \$276.92  \$258.96  \$276.81  \$290.46  \$244.91  \$365.22  \$371.42  \$371.42  \$371.42  \$4	\$0.00 \$9.64 \$42:13 \$35.54 \$32.55 \$34.47 \$17.66 \$0.48 \$0.48 \$0.47 \$0.51 \$0.51 \$0.53 \$	FPL \$0.06 \$0.00 \$0	133% FPL S0.04 S0.14 S0.07 S0.04 S0.14 S0.07 S0.08 S0.05 S0.04 S0.07 S0.03 S0.04 S0.07 S0.03 S0.04 S0.07 S0.05 S0.	\$0.00 \$0.00 \$0.01 \$0.71 \$0.54 \$0.64 \$0.07 \$0.12 \$0.14 \$0.18 \$0.18 \$0.18 \$0.18 \$0.00 \$0.18 \$0.00 \$0.18 \$0.00	\$0.00 \$0.07 \$0.07 \$0.07 \$0.07 \$0.07 \$0.00	\$0.01 \$4.01 \$2.90 \$3.58 \$9.53 \$9.53 \$9.01 \$9.01 \$9.02 \$9.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.03 \$0.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.01 \$0.01 \$0.01 \$0.01 \$0.01 \$0.01 \$0.02 \$0.02 \$0.02 \$0.02 \$0.00	\$16.09 \$13.62 \$13.62 \$15.77 \$11.21 \$2.90 \$3.97 \$3.97 \$3.97 \$3.97 \$3.07 \$3.10  Foster Care  3397.83% 15.39% 15.39% 15.39%	\$0.00 \$0.01 \$0.14 \$0.14 \$0.05 \$0.07 \$0.09 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00  MAGI Pregnant Adults 0.00% \$100.00% \$100.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$2.40 \$2.50 \$4.59 \$4.59 \$3.56 \$2.79 \$2.35 \$0.00	\$40.69 \$39.50 \$31.24 \$28.09 \$24.12 \$23.10 \$24.63 \$33.30 \$33.30 \$34.22 \$32.13 \$34.22 \$32.13
FY 2012-1 FY 2014-1 FY 2015-1 FY 2015-1 FY 2015-1 FY 2015-1 Estimated FY 2002-2 Estimated FY 2002-2 SINGLE ENTRY POINTS FY 2012-1 FY 2014-1 FY 2014-1 FY 2014-1	(OAP-A)  \$272.71  \$272.71  \$272.71  \$272.71  \$216.95  \$216.95  \$206.24  \$206.24  \$206.25  \$20	\$208.91 \$305.90 \$216.34 \$241.59 \$227.68 \$237.68 \$237.68 \$237.68 \$237.68 \$237.68 \$330.81 \$330.8	(AND/AB)  \$182.08  \$182.08  \$236.81  \$276.92  \$268.96  \$276.81  \$289.01  \$244.91  \$357.42  \$377.42  \$3	\$0.00 \$9.64 \$4213 \$55.64 \$1223 \$1247 \$17.66 \$0.48 \$0.48 \$0.47 \$0.51 \$0.51 \$0.53 \$0.53	FPL  \$0.06 \$0.02 \$0.12 \$0.28 \$0.18 \$0.28 \$0.18 \$0.23 \$0.30 \$0.04 \$0.05 \$0.07 \$0.07 \$0.07 \$0.06  MAGI Parents' FPL  \$0.0095 \$13.3389	133% FPL S0.04 S0.14 S0.07 S0.04 S0.14 S0.07 S0.08 S0.05 S0.04 S0.07 S0.03 S0.04 S0.07 S0.03 S0.04 S0.07 S0.05 S0.	\$0.00 \$0.00 \$0.01 \$0.71 \$0.71 \$0.54 \$0.64 \$0.87 \$0.12 \$0.11 \$0.17 \$0.18 \$0.16 \$0.17 \$0.18 \$0.16 \$0.10 \$0.10 \$0.10 \$0.10 \$0.10 \$0.00%	\$0.00 \$1.37 \$0.67 \$0.00	\$0.01 \$4.01 \$2.90 \$3.84 \$1.69 \$0.51 \$0.01 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02	\$0.00 \$0.00 \$0.00 \$0.19 \$0.17 \$1.16 \$0.01 \$0.01 \$0.02	\$16.09 \$13.62 \$15.77 \$11.21 \$8.897 \$4.51 \$1.62 \$2.20 \$3.07 \$3.12 Foster Care 3397.83% -15.35%	\$0.00 \$0.01 \$0.14 \$0.05 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$2.40 \$2.50 \$4.59 \$4.59 \$4.56 \$2.79 \$2.35 \$2.35 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$40.69 \$39.50 \$31.24 \$28.09 \$24.12 \$25.10 \$26.46 \$20.76 \$24.93 \$33.08 \$33.08 \$34.22 \$32.13
FY 2012-11 FY 2014-11 FY 2014-11 FY 2014-11 FY 2014-11 FY 2014-11 FY 2015-11 FY 2015-11 FY 2015-12 FY 2015-12 FY 2015-12 FY 2015-12 FX 2015-12 FY 2015-13 FY 2015-13 FY 2015-14 FY 2015-14 FY 2015-15 FY 2015-15 FY 2015-16 FY 2015-16 FY 2015-17	(OAP-A)  \$272.71  \$272.71  \$1873.03  \$216.95  \$216.95  \$199.91  \$244.62  \$250.93  \$2	\$298.91 \$305.90 \$216.34 \$241.59 \$227.68 \$2327.68 \$2327.68 \$2327.68 \$232.16 \$330.81 \$330.81 \$330.81 \$330.81 \$330.81 \$10.00 \$4.00 \$10.00	(AND/AB) \$183.37 \$182.08 \$236.81 \$276.02 \$250.80 \$250.81 \$250.	\$0.00 \$9.64 \$42.13 \$55.64 \$32.46 \$1.46 \$1.46 \$0.47 \$0.57 \$0.	FPL  \$0.06 \$0.02 \$0.12 \$0.18 \$0.18 \$0.18 \$0.18 \$0.17 \$0.17 \$0.07 \$0.00 \$0.07 \$0.07 \$0.00 MAGI Parents/ Caretakers to 68% FPL  \$0.00	133% FPL 50.04 50.14 50.07 50.08 50.08 50.08 50.07 50.08 50.07 50.07 50.05 50.05 Fercent Chan MAGI Parenta Caretakers 69% to 133% FPL 250.00% 50.05 50	\$0.00 \$0.01 \$0.01 \$0.07 \$0.07 \$0.07 \$0.06 \$0.07 \$0.06 \$0.07 \$0.06 \$0.07 \$0.06 \$0.07	\$0.00 \$1.37 \$0.67 \$0.00 \$0.00 \$426.17 \$0.00 \$0.0	\$0.01 \$4.01 \$3.00 \$3.00 \$3.00 \$0.51 \$0.01 \$0.01 \$0.01 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.03 \$0.04	\$0.00 \$0.00 \$0.00 \$0.00 \$0.10 \$0.10 \$0.11 \$0.11 \$0.11 \$0.01 \$0.00	\$16.09 \$13.02 \$13.02 \$15.77 \$11.12 \$8.97 \$4.51 \$1.62 \$1.62 \$2.90 \$3.10  Foster Care  3397.83% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35% \$1.5.35%	\$0,000 \$0,01 \$0,14 \$0,14 \$0,03 \$0,000	\$0.00 \$0.00	\$0.00 \$0.00	\$2.40 \$2.50 \$4.59 \$4.59 \$4.56 \$2.79 \$2.70 \$5.00	\$40.69 \$30.50 \$31.24 \$28.09 \$24.12 \$23.10 \$20.76 \$20.76 \$24.93 \$33.08 \$34.22 \$32.13 TOTAL
FY 2012-16 FY 2014-16 FY 2014-16 FY 2014-16 FY 2015-16	(OAP-A)  \$272.71  \$272.71  \$272.71  \$272.71  \$216.95  \$216.95  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.25  \$20	\$299.91 \$309.90 \$216.34 \$241.59 \$237.68 \$237.68 \$237.68 \$237.68 \$233.61 \$335.71  Disabled Adults 60 to 64 (0.AP-B) -2.3475 -2.3475 -2.2475 -2.21.2	(AND/AB)  \$183.37  \$182.08  \$236.81  \$276.92  \$268.95  \$276.81  \$289.01  \$204.46  \$244.91  \$365.22  \$373.92  Disabled Individual to 49  (AND/AB)  (AND/AB)  (16.94%)  2.2.2%  4.41%  4.2.2%  4.41%  4.2.2%  4.41%	\$0.00 \$9.64 \$42:13 \$55.54 \$13.25 \$13.25 \$13.447 \$17.66 \$0.48 \$0.47 \$0.51 \$0.51 \$0.51 \$0.53 \$17.08 \$1	FPL \$0.06 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.00 \$0	133% FPL S0.04 S0.14 S0.07 S0.04 S0.14 S0.07 S0.08 S0.06 S0.06 S0.06 S0.07 S0.03 S0.07 S0.	\$0.00 \$0.00 \$0.01 \$0.71 \$0.54 \$0.64 \$0.87 \$0.17 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.16 \$0.17 \$0.17 \$0.17 \$0.18 \$0.17 \$0.18	\$0.00 \$1.17 \$0.07 \$0.07 \$0.07 \$0.00	\$0.01 \$4.01 \$2.90 \$3.84 \$1.69 \$0.51 \$0.00 \$0.01 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.10 \$0.19 \$0.19 \$0.16 \$0.17 \$1.16 \$0.00	\$16.00 \$13.02 \$15.77 \$11.12 \$8.97 \$4.51 \$1.62 \$1.92 \$2.90 \$3.07 \$3.12 \$1.57 \$1	\$0.00 \$0.01 \$0.14 \$0.05 \$0.09 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$2.40 \$2.50 \$4.59 \$4.59 \$4.56 \$2.79 \$2.35 \$2.73 \$0.00	\$40.69 \$39.50 \$31.24 \$28.09 \$24.10 \$25.06 \$20.76 \$20.76 \$31.08 \$31.08 \$31.08 \$32.13 \$32.13 \$32.13
FY 2012-11 FY 2014-11	(OAP-A)  \$272.71  \$272.71  \$272.71  \$216.95  \$216.95  \$206.54  \$216.95  \$206.54  \$206.50  \$206.54  \$206.50  \$20	\$209.01 \$305.90 \$216.34 \$241.59 \$227.68 \$2327.68 \$2327.68 \$2327.68 \$232.16 \$330.81 \$33	(AND/AB) \$183.37 \$182.08 \$236.81 \$276.92 \$28.98 \$276.81 \$276.92 \$28.98 \$276.81 \$244.91 \$244.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$254.91 \$257.32	\$0.00 \$9.64 \$42.13 \$55.64 \$32.46 \$3.47 \$0.47 \$0.57 \$0.	FPL  \$0.06 \$0.02 \$0.12 \$0.28 \$0.18 \$0.28 \$0.18 \$0.27 \$0.28 \$0.28 \$0.18 \$0.07 \$0.07 \$0.07 \$0.07 \$0.00 MAGI Parents/ Caretakers to 68% FPL  -66.67% \$0.00 \$0.0	133% FPL 50.04 50.14 50.07 50.08 30.08 30.00 50.07 50.07 50.07 50.05 50.05 Fercent Chan MAGI Parenta 50.00 50.05 5	\$0.00 \$0.01 \$0.01 \$0.07 \$0.07 \$0.07 \$0.08 \$0.04 \$0.07 \$0.06 \$0.07 \$0.06 \$0.07 \$0.06 \$0.07	\$0.00 \$1.17 \$0.67 \$0.07 \$0.07 \$0.00 \$0.00 \$0.00 \$426.17 \$0.00 \$0.0	\$0.01 \$4.01 \$3.00 \$3.80 \$1.69 \$0.51 \$0.01 \$0.01 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.03 \$0.04	\$0.00 \$0.00 \$0.00 \$0.00 \$0.10 \$0.10 \$0.10 \$0.11 \$0.11 \$0.01 \$0.01 \$0.00	\$16.00 \$13.62 \$15.77 \$11.21 \$8.97 \$4.41 \$1.62 \$1	\$0.00 \$0.01 \$0.14 \$0.05 \$0.07 \$0.09 \$0.000	\$0.00 \$0.00	\$0.00 \$0.00	\$2.40 \$2.50 \$4.59 \$4.56 \$2.79 \$3.25 \$5.00	\$40.69 \$30.50 \$31.24 \$22.69 \$23.10 \$23.10 \$23.00 \$23.00 \$33.00 \$33.00 \$33.00 \$34.22 \$32.13 \$34.22 \$34.21 \$34.22 \$34.21 \$34.21 \$34.22 \$34.21 \$3
FY 2012-16 FY 2014-17 FY 2014-17 FY 2014-17 FY 2014-17 FY 2014-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FStimuted FY 2012-17 FStimuted FY 2012-17 FSTIMUTED FY 2012-17 FY 2014-17	(OAP-A)  \$272.71  \$272.71  \$272.71  \$272.71  \$216.95  \$216.95  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.45  \$206.25  \$20	\$299.91 \$309.90 \$210.34 \$241.59 \$237.68 \$237.68 \$231.68 \$231.68 \$331.69 \$350.60 \$350.6	(AND/AB)  \$183.37  \$182.08  \$236.81  \$276.92  \$268.95  \$276.81  \$289.01  \$204.46  \$244.91  \$365.22  \$373.92  Disabled Individual to 49  (AND/AB)  (AND/AB)  (16.94%)  2.2.2%  4.41%  4.2.2%  4.41%  4.2.2%  4.41%													
\$0.00<br>\$9.64<br>\$42:13<br>\$55.54<br>\$13.25<br>\$13.25<br>\$13.447<br>\$17.66<br>\$0.48<br>\$0.47<br>\$0.51<br>\$0.51<br>\$0.51<br>\$0.53<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$17.08<br>\$1   | FPL \$0.06 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.02 \$0.00 \$0 | 133% FPL 50.04 50.14 50.07   |
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#### Exhibit I - SERVICE MANAGEMENT - SINGLE ENTRY POINT Projections Expenditure by Eligibility

							penditure by Engionit	,								
						Current	Year Projection									
SINGLE ENTRY POINTS	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligible	TOTAL
Projected FY 2019-20 Expenditure on Case Management	\$15,657,672	\$4,105,156	\$23,005,144	\$7,031	\$12,146	\$3,516	\$63,447	\$0	\$8,151	\$959	\$57,853	\$0	\$0	\$0	\$0	\$42,921,075
Estimated Increase in HCBS Enrollment(1)(2)	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.60%	2.609
Estimated Projected F Base Expenditure	\$16,064,771	\$4,211,890	\$23,603,278	\$7,214	\$12,462	\$3,607	\$65,097	\$0	\$8,363	\$984	\$59,357	\$0	\$0	\$0	\$0	\$44,037,023
Bottom Line Impacts																
FY 2018-19 R-17 Single Assessment Tool Financing	\$332,286	\$87,119	\$488,213	\$149	\$258	\$75	\$1,346	\$0	\$173	\$20	\$1,228	\$0	\$0	\$0	\$0	\$910,86
Total Bottom Line Impacts	\$332,286	\$87,119	\$488,213	\$149	\$258	\$75	\$1,346	\$0	\$173	\$20	\$1,228	\$0	\$0	\$0	\$0	\$910,867
Estimated FY 2020-21 Contract Amount	\$16,397,057	\$4,299,009	\$24,091,491	\$7,363	\$12,720	\$3,682	\$66,443	\$0		\$1,004	\$60,585	\$0				\$44,947,890
Estimated FY 2020-21 Per Capita	\$339.48	\$319.99	\$365.22	\$0.51	\$0.07	\$0.05	\$0.17	\$0.00	\$0.02	\$0.02	\$2.90	\$0.00				\$33.08
% Change over FY 2019-20 Per Capita	45.56%	62.55%	78.63%	6.25%			41.67%	0.00%	100.00%	100.00%	79.01%	0.00%	0.00%			59.34
Estimated FY 2020-21 Contract Amount	\$16,397,057	\$4,299,009	\$24,091,491	\$7,363			\$66,443	\$0		\$1,004		\$0				\$44,947,890
Estimated FY 2020-21 Estimated Recoveries	\$0	\$0	\$0	\$0			\$0			\$0		\$0				S(
Estimated FY 2020-21 Total Expenditure	\$16,397,057	\$4,299,009	\$24,091,491	\$7,363	\$12,720		\$66,443	\$0	\$8,536	\$1,004	\$60,585	\$0	\$0	\$0	\$0	\$44,947,89
							Year Projection									
FY 2021-22 Base Contracts	\$16,064,771	\$4,211,890	\$23,603,278	\$7,214	\$12,462	\$3,607	\$65,097	\$0	\$8,363	\$984	\$59,357	\$0	\$0			\$44,037,023
Estimated Increase in HCBS Enrollment(1)(2)	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.10%	3.109
Estimated FY 2021-22 Base Expenditure	\$16,562,779	\$4,342,459	\$24,334,980	\$7,438	\$12,848	\$3,719	\$67,115	\$0	\$8,622	\$1,015	\$61,197	\$0	\$0	\$0	S0	\$45,402,172
Bottom Line Impacts																
FY 2018-19 R-17 Single Assessment Tool Financing	\$996,857	\$261,358	\$1,464,639	\$448	\$773	\$224	\$4,039	\$0	\$519	\$61	\$3,683	\$0				\$2,732,60
Total Bottom Line Impacts	\$996,857	\$261,358	\$1,464,639	\$448	\$773		\$4,039	\$0	\$519	\$61	\$3,683	\$0				\$2,732,601
Estimated FY 2021-22 Contract Amount	\$17,559,636	\$4,603,817	\$25,799,619	\$7,886	\$13,621		\$71,154	\$0		\$1,076	\$64,880	\$0		\$0		\$48,134,773
Estimated FY 2021-22 Per Capita	\$361.62	\$336.81	\$371.42	\$0.57	\$0.07	\$0.05	\$0.18	\$0.00	\$0.02	\$0.02	\$3.07	\$0.00	\$0.00			\$34.2
% Change over Estimated FY 2020-21 Per Capita	6.52%	5.26%	1.70%	11.76%	0.00%		5.88%	0.00%	0.00%	0.00%	5.86%	0.00%	0.00%			3.45
Estimated FY 2021-22 Contract Amount	\$17,559,636	\$4,603,817	\$25,799,619	\$7,886	\$13,621 \$0	\$3,943 \$0	\$71,154	\$0		\$1,076	\$64,880	\$0 \$0				\$48,134,77
Estimated FY 2021-22 Estimated Recoveries	90	30	\$0	\$0			\$0	\$0		\$0						SI
Estimated FY 2021-22 Total Expenditure	\$17,559,636	\$4,603,817	\$25,799,619	\$7,886	\$13,621		\$71,154 ear Projection	\$0	\$9,141	\$1,076	\$64,880	\$0	\$0	\$0	SO	\$48,134,77
		\$4,603,817									\$64,880					
FY 2022-23 Base Contracts	\$17,559,636	. ,	\$25,799,619	\$7,886	\$13,621	\$3,943	\$71,154	\$0		\$1,076		\$0				\$48,134,77
Estimated Increase in HCBS Enrollment <sup>(1)(2)</sup>	3.13%	3.13%	3.13%	3.13%			3.13%	3.13%		3.13%	3.13%	3.13%				3.13
Estimated FY 2022-23 Base Expenditure	\$18,109,253	\$4,747,916	\$26,607,147	\$8,133	\$14,047	\$4,066	\$73,381	\$0	\$9,427	\$1,110	\$66,911	\$0	\$0	\$0	\$0	\$49,641,39
Bottom Line Impacts																
FY 2018-19 R-17 Single Assessment Tool Financing	\$0	S0	S0	S0	\$0	\$0	\$0	S0	\$0	\$0	\$0	\$0	\$0	\$0		
Total Bottom Line Impacts	\$0	\$0														S
Estimated FY 2022-23 Contract Amount	\$18,109,253 \$360.96	\$4,747,916 \$335.71	\$26,607,147 \$373.92	\$8,133 \$0.53	\$14,047 \$0.06		\$73,381 \$0.16	\$0 \$0.00	\$9,427 \$0.02	\$1,110 \$0.02	\$66,911 \$3.12	90 00.02	00.00 00.02			\$49,641,391 \$32.13
Estimated FY 2022-23 Per Capita	\$360.96 -0.18%	\$335.71	\$373.92	-7 02%	-14.29%		\$0.16 -11.11%	0.00%	0.02	0.02	1.63%	\$0.00 0.00%	\$0.00			\$32.1: -6.11'
% Change over FY 2021-22 Per Capita Estimated FY 2022-23 Contract Amount	-0.18% \$18,109,253	-0.33% \$4,747,916	0.67% \$26,607,147	-7.02% \$8,133			-11.11% \$73,381	0.00% \$0		0.00% \$1.110		0.00%				-6.11 \$49,641,39
Estimated FY 2022-23 Contract Amount Estimated FY 2022-23 Estimated Recoveries	\$18,109,253	\$4,747,916	\$26,607,147 \$0	\$8,133			\$/3,381	\$0 \$0		\$1,110 \$0		\$0 \$0				349,041,39
Estimated FY 2022-23 Estimated Recoveries  Estimated FY 2022-23 Total Expenditure	\$18 109 253	\$4 747 916	\$26,607,147	\$8 133				50	\$9.427	\$1 110		\$0	50	30 \$0		\$49,641,39
Footnotes Estimated F1 2022-23 10tal Expenditure	\$18,109,233	34,/4/,910	320,007,147	38,133	314,047	34,000	\$/3,381	30	39,427	51,110	300,911	30	30	30	30	349,041,39

Footnotes
(1) Home- and Community-Based Services (HCBS) enrollment is not the only factor which influences Single Entry Point expenditure. However, the Department believes that enrollment trends are a good proxy for other Single Entry Point functions. Please see the Narrative for further information. (2) FY 2019-20 expenditure is the amount of the base contracts in place with the SEPs; to trend expenditure for FY 2020-21 and FY 2021-22, the Department selected the estimated growth rate in HCBS Enrollment.

#### Exhibit I - SERVICE MANAGEMENT - DISEASE MANAGEMENT Cash-Based Actuals and Projections

						Cas	h Based Actual	ls								
DISEASE MANAGEMENT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	\$18,845	\$38,614	\$282,411	\$10,185	\$329,787	\$91,251	\$48,349	\$0		\$0	\$49,301	\$88,367	\$0		\$0	\$957,110
FY 2013-14 FY 2014-15	\$7,234 \$8,232	\$17,469 \$21,647	\$116,400 \$145,304	\$7,957 \$9,050	\$142,079 \$211,327	\$40,697 \$78,847	\$112,294 \$390,096	\$0 \$0		\$0 \$0	\$19,931 \$29,418	\$62,892 \$84,586	\$0 \$9,735	\$0 \$0	\$0 \$0	\$526,953 \$988,242
FY 2014-13 FY 2015-16	\$4,417	\$11,155	\$76,681	\$6,833	\$105,014	\$45,818	\$231,386	\$0		\$0	\$15,397	\$40,805	\$4,719	\$0 \$0	\$0 \$0	\$542,225
FY 2016-17	\$21,390	\$19,223	\$135,054	\$15,538	\$179,636	\$125,847	\$338,068	\$0		\$0	\$34,168	\$56,620	\$11,787	\$0	\$0	\$937,331
FY 2017-18	\$9,979	\$19,086	\$143,698	\$17,059	\$178,818	\$71,908	\$367,806	\$0		\$0	\$27,010	\$47,345	\$10,344	\$0	\$0	\$893,053
FY 2018-19	\$5,787	\$16,653	\$136,067	\$16,034	\$133,777	\$46,240	\$281,028	\$0		\$0	\$23,205	\$39,235	\$7,382	\$0	\$0	\$705,408
FY 2019-20	\$3,158	\$11,340	\$96,878	\$12,044	\$86,431	\$29,677	\$192,864	\$0		\$0	\$21,035	\$25,846	\$4,446	\$0	\$0	\$483,719
Estimated FY 2020-21 Estimated FY 2021-22	\$8,394 2 \$8,394	\$30,142 \$30,142	\$257,502 \$257,502	\$32,013 \$32,013	\$229,734 \$229,733	\$78,882 \$78,882	\$512,632 \$512,633	\$0 \$0		\$0 \$0	\$55,911 \$55,911	\$68,699 \$68,699	\$11,817 \$11,817	\$0 \$0	\$0 \$0	\$1,285,726 \$1,285,726
Estimated FY 2021-22 Estimated FY 2022-23	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0		\$0	\$55,911	\$68,699	\$11,817	\$0	\$0 \$0	\$1,285,726
Estimated 1 1 2022-25	30,374	\$30,142	9237,302	332,013	\$227,133		ge in Cash Bas		50	30	\$33,711	300,077	\$11,017	30	30	\$1,205,720
DISEASE MANAGEMENT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2013-14			-58.78%	-21.88%	-56.92%	-55.40%	132.26%	0.00%		0.00%	-59.57%	-28.83%	0.00%	0.00%	0.00%	-44.94%
FY 2014-15 FY 2015-16	13.80% -46.34%	23.92% -48.47%	24.83% -47.23%	13.74% -24.50%	48.74% -50.31%	93.74% -41.89%	247.39% -40.68%	0.00%	0.00%	0.00%	47.60% -47.66%	34.49% -51.76%	100.00% -51.53%	0.00%	0.00%	87.54% -45.13%
FY 2015-16 FY 2016-17	384.27%	-48.47% 72.33%	-47.23% 76.12%	-24.50% 127.40%	-50.31% 71.06%	-41.89% 174.67%	-40.68% 46.11%	0.00%	0.00%	0.00%	-47.66% 121.91%	-51.76% 38.76%	-51.53% 149.78%	0.00%	0.00%	-45.13% 72.87%
FY 2017-18	-53.35%	-0.71%	6.40%	9.79%	-0.46%	-42.86%	8.80%	0.00%		0.00%	-20.95%	-16.38%	-12.24%	0.00%	0.00%	-4.72%
FY 2018-19	-42.01%		-5.31%	-6.01%	-25.19%	-35.70%	-23.59%	0.00%		0.00%	-14.09%	-17.13%	-28.63%	0.00%	0.00%	-21.01%
FY 2019-20	-45.43%	-31.90%	-28.80%	-24.88%	-35.39%	-35.82%	-31.37%	0.00%		0.00%	-9.35%	-34.13%	-39.77%	0.00%	0.00%	-31.43%
Estimated FY 2020-21	165.80%	165.80%	165.80%	165.80%	165.80%	165.80%	165.80%	0.00%	0.00%	0.00%	165.80%	165.80%	165.79%	0.00%	0.00%	165.80%
Estimated FY 2021-22	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Estimated FY 2022-23	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
DISEASE MANAGEMENT	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	er Capita Cost  MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	\$0.46	\$4.27	\$4.56	\$11.47	\$3.32											
FY 2013-14	\$0.17	61.77				\$2.20	\$4.55	\$0.00	\$0.00	\$0.00	\$2.77	\$11.01	\$0.00	\$0.00	\$0.00	\$1.40
FY 2014-15		\$1.77	\$1.81	\$3.11	\$1.14	\$2.20 \$0.86	\$4.55 \$1.29	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$2.77 \$1.09	\$11.01 \$4.78	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$1.40 \$0.61
FY 2015-16	\$0.20	\$2.07	\$2.18	\$2.50	\$1.14 \$1.31	\$0.86 \$1.10	\$1.29 \$1.62	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$1.09 \$1.47	\$4.78 \$5.68	\$0.00 \$5.57	\$0.00 \$0.00	\$0.00 \$0.00	\$0.61 \$0.85
	\$0.10	\$2.07 \$1.06	\$2.18 \$1.11	\$2.50 \$1.10	\$1.14 \$1.31 \$0.64	\$0.86 \$1.10 \$0.53	\$1.29 \$1.62 \$0.72	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77	\$4.78 \$5.68 \$2.83	\$0.00 \$5.57 \$2.68	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42
FY 2016-17	\$0.10 \$0.49	\$2.07 \$1.06 \$1.71	\$2.18 \$1.11 \$2.00	\$2.50 \$1.10 \$2.49	\$1.14 \$1.31 \$0.64 \$1.11	\$0.86 \$1.10 \$0.53 \$1.25	\$1.29 \$1.62 \$0.72 \$0.97	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68	\$4.78 \$5.68 \$2.83 \$4.17	\$0.00 \$5.57 \$2.68 \$5.99	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70
FY 2016-17 FY 2017-18	\$0.10 7 \$0.49 8 \$0.22	\$2.07 \$1.06 \$1.71 \$1.62	\$2.18 \$1.11 \$2.00 \$2.13	\$2.50 \$1.10 \$2.49 \$2.09	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68
FY 2016-17	5 \$0.10 7 \$0.49 8 \$0.22 0 \$0.12 0 \$0.07	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40
FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21	\$ \$0.10 \$ \$0.49 \$ \$0.22 \$ \$0.12 \$ \$0.07 \$ \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40
FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22	\$ \$0.10 \$0.49 \$ \$0.22 \$ \$0.12 \$ \$0.07 \$ \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$5.22 \$4.76	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91
FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21	\$ \$0.10 \$ \$0.49 \$ \$0.22 \$ \$0.12 \$ \$0.07 \$ \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97 \$0.98 \$0.95	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40
FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22	\$ \$0.10 \$0.49 \$ \$0.22 \$ \$0.12 \$ \$0.07 \$ \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97 \$0.98 \$0.95	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$5.22 \$4.76	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22  Estimated FY 2022-23	\$0.10 \$0.49 \$ \$0.22 \$0.07 \$0.17 \$0.17 \$0.17 \$0.17 Adults 65 and Older (OAP-A)	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B)	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$33.90 \$3.71 \$3.62 Disabled Individuals to \$9 (AND/AB)	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.09 Disabled Buy-In	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97 \$0.98 \$0.95 Percent Ch MAGI Parents/ Caretakers 69% to 133% FPL	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Ca	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$5.22 \$4.76 \$4.25	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$B 11-250 Eligible Pregnant Adults	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91 \$0.83
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2022-23  DISEASE MANAGEMENT  FY 2013-14	\$0.10 \$0.49 \$0.22 \$0.02 \$0.07 \$0.17 \$0.17 \$0.17 \$0.17 \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B)	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 <b>Disabled Individuals to</b> \$9 (AND/AB)	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.09 Disabled Buy- In	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.97 \$0.98 \$0.95 Percent Ch MAGI Parents/ Caretakers 69% to 133% FPL	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Cap	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Pita Cost Breast & Cervical Cancer Program 0.00%	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$5.22 \$4.76 \$4.25 \$4.76 \$4.25	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$3.24 \$3.24 \$3.24 \$3.24	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91 \$0.83
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22  DISEASE MANAGEMENT  FY 2013-14 FY 2014-15	\$0.10 \$0.49 \$ \$0.22 0 \$0.17 \$0.17 \$0.17 \$0.17 \$0.17 \$0.17 \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B)	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 Disabled Individuals to \$9 (AND/AB)	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$11.3 \$2.20 \$2.33 \$2.20 Disabled Buy-In	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL -65.66%	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97 \$0.98 \$0.95 <b>Percent Ch</b> MAGI Parents/ Caretakers 69% to 133% FPL	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Ca <sub>1</sub>	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$5.22 \$4.76 \$4.25 MAGI Pregnant Adults	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$B 11-250 Eligible Pregnant Adults	\$0.00 \$0.00	\$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91 \$0.83 TOTAL
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22  Estimated FY 2021-23  DISEASE MANAGEMENT  FY 2013-14 FY 2014-15 FY 2015-16	\$0.10 \$0.49 \$0.22 \$0.12 \$0.07 \$0.17 \$0.17 \$0.17 \$0.17 \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B) -58.55% -48.79%	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 Disabled Individuals to \$9 (AND/AB) -60.31% -49.08%	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.09 Disabled Buy- In -72.89% -19.61%	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL -65.66% 14.91% -51.15%	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.97 \$0.98 \$0.95 <b>Percent Ch</b> MAGI Parents/ Caretakers 69% to 133% FPL	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Ca MAGI Adults -71.65% 25.58%	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60 \$2.65 \$2.60	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$5.22 \$4.76 \$4.25 \$4.25 \$4.25 \$4.25	\$0.00 \$5.37 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$B 11-250 Eligible Pregnant Adults \$0.00% \$10.00% \$1.89%	\$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91 \$0.83
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-19 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22 Estimated FY 2021-23  DISEASE MANAGEMENT  FY 2013-14 FY 2014-15 FY 2016-17	\$0.10 \$0.49 \$0.22 \$0.22 \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B) -58.59% -48.79% 61.32%	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 Disabled Individuals to 59 (AND/AB) -60.31% -49.08% 80.18%	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.09 Disabled Buy- In  -72.89% -19.61% -19.61% -19.63%	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL -65.66% 14.91% -51.15%	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97 \$0.98 \$0.95 <b>Percent Ch</b> <b>MAGI Parents/</b> <b>Caretakers</b> <b>69%</b> to 133% <b>FPL</b> \$27.91% \$13.585%	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Ca <sub>1</sub> MAGI Adults \$25.58% \$34.72%	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60 \$2.60 \$2.65 \$2.60 \$2.65 \$2.60 \$2.65 \$2.65 \$2.60	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$B 11-250 Eligible Pregnant Adults 0.00% 100.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91 \$0.83 *** **TOTAL**  -56.43% 39.34% -50.59% 66.67%
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22  Estimated FY 2021-22  Estimated FY 2021-25  DISEASE MANAGEMENT  FY 2013-14 FY 2014-15 FY 2016-16 FY 2017-18	\$0.10 \$0.49 \$ \$0.22 \$ \$0.17 \$	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B) -58.55% -48.79% 61.32% 61.32%	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 Disabled Individuals to 59 (AND/AB) -60.31% -49.08% 80.18% 6.50%	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.20 Disabled Buy-In -72.89% -19.61% -56.00% 126.36%	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL \$1.19% \$1.	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97 \$0.98 \$0.95 <b>Percent Ch</b> <b>MAGI Parents</b> / <b>Caretakers</b> <b>69%</b> to 133% <b>FPL</b> -60.91% -51.82% -51.82% -23.20%	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Cap MAGI Adults -71.65% 25.58% -55.56% 34.72%	\$0.00 \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60 \$2.60 \$4.86% 47.62% 418.18%	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$5.22 \$4.76 \$4.25 \$4.75 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$B 11-250 Eligible Pregnant Adults \$0.00% \$10.00% \$1.89% \$1.23.51%	\$0.00 \$0.00	\$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.95 \$0.91 \$0.83 ************************************
FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-19 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22 Estimated FY 2021-23  DISEASE MANAGEMENT  FY 2013-14 FY 2014-15 FY 2016-17	\$0.10 \$0.49 \$0.22 \$0.22 \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B) -58.59% -48.79% 61.32%	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 Disabled Individuals to 59 (AND/AB) -60.31% -49.08% 80.18%	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.09 Disabled Buy- In  -72.89% -19.61% -19.61% -19.63%	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL -65.66% 14.91% -51.15%	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.50 \$0.97 \$0.98 \$0.95 <b>Percent Ch</b> <b>MAGI Parents/</b> <b>Caretakers</b> <b>69%</b> to 133% <b>FPL</b> \$27.91% \$13.585%	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Ca <sub>1</sub> MAGI Adults \$25.58% \$34.72%	\$0.00 \$0.00	\$0.00 \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60 \$2.60 \$2.65 \$2.60 \$2.65 \$2.60 \$2.65 \$2.65 \$2.60	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$B 11-250 Eligible Pregnant Adults 0.00% 100.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91 \$0.83 *** **TOTAL**  -56.43% 39.34% -50.59% 66.67%
FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2018-19 Estimated FY 2020-22 Estimated FY 2021-22 Estimated FY 2021-22 Estimated FY 2021-23  DISEASE MANAGEMENT  FY 2013-14 FY 2014-15 FY 2016-17 FY 2017-18 FY 2018-19	\$0.10 \$0.49 \$0.22 \$0.12 \$0.07 \$0.17	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 <b>Disabled Adults</b> <b>60 to 64</b> <b>(OAP-B)</b> -58.55% -48.79% 61.32% -5.26% -19.14% -1	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 Disabled Individuals to \$9 (AND/AB) -60.31% 49.08% 80.18% 6.50%	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.09 Disabled Buy- In -72.89% -19.61% -56.00% 126.36% -14.83%	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.33 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL -65.66% 14.91% -51.15% 73.44% -10.81% -23.23%	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.97 \$0.98 \$0.95 Percent Ch MAGI Parents/ Caretakers 69% to 133% FPL -60.91% 27.91% 135.85% -23.20%	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Ca MAGI Adults -71.65% 25.58% 34.72% 7.22%	\$0.00 \$0.00%	\$0.00 \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60 \$2.60 \$3.86% \$4.86% \$4.86% \$4.86% \$4.76% \$4.86% \$4.76%	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$5.10 Eligible Pregnant Adults 0.00% 100.00% 123.51% -22.54% -22.54% -23.66% -23.66%	\$0.00 \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.95 \$0.91 \$0.83 \$0.95 \$0.91 \$0.83 \$0.95 \$0.91 \$0.83
FY 2016-17 FY 2017-18 FY 2017-18 FY 2017-18 FY 2018-19 FY 2019-20 Estimated FY 2020-21 Estimated FY 2021-22 Estimated FY 2021-22 Estimated FY 2021-25  DISEASE MANAGEMENT  FY 2013-14 FY 2014-15 FY 2016-17 FY 2017-18 FY 2018-19 FY 2019-20	\$0.10 \$0.49 \$ \$0.22 \$ \$0.22 \$ \$0.17 \$	\$2.07 \$1.06 \$1.71 \$1.62 \$1.31 \$0.87 \$2.24 \$2.21 \$2.13 Disabled Adults 60 to 64 (OAP-B) -58.55% 16.95% -48.79% -48.79% -19.14% -33.59% -19.14% -33.59% -19.14% -13.45%	\$2.18 \$1.11 \$2.00 \$2.13 \$1.98 \$1.46 \$3.90 \$3.71 \$3.62 Disabled Individuals to 59 (AND/AB) -60.31% -49.08% 80.18% 6.50% -7.04%	\$2.50 \$1.10 \$2.49 \$2.09 \$1.78 \$1.13 \$2.20 \$2.33 \$2.39 Disabled Buy- In -72.89% -19.61% -16.66% -16.66% -14.83% -36.52% 94.69% 5.91%	\$1.14 \$1.31 \$0.64 \$1.11 \$0.99 \$0.76 \$0.53 \$1.13 \$0.94 MAGI Parents/ Caretakers to 68% FPL -65.66% 14.91% -51.15% -10.81% -10.81% -23.23%	\$0.86 \$1.10 \$0.53 \$1.25 \$0.96 \$0.73 \$0.98 \$0.95 \$0.98 \$0.95 Percent Ch MAGI Parents/ Caretakers 69% to 133% FPL -60.91% 27.91% -51.82% 135.82% -23.20% -23.20% -31.51%	\$1.29 \$1.62 \$0.72 \$0.97 \$1.04 \$0.85 \$0.60 \$1.34 \$1.26 \$1.13 ange in Per Ca <sub>1</sub> MAGI Adults -71.65% 25.58% -55.56% 34.72% 7.22% -18.27%	\$0.00 \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00% \$0.00%	\$0.00 \$0.00	\$1.09 \$1.47 \$0.77 \$1.68 \$1.26 \$1.06 \$0.99 \$2.68 \$2.65 \$2.60 \$2.60 \$4.65% \$4.86% \$4.762% \$118.18% \$4.25.00% \$4.56% \$4.65% \$4.66% \$4.65%	\$4.78 \$5.68 \$2.83 \$4.17 \$4.68 \$3.22 \$2.24 \$5.22 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25 \$4.76 \$4.25	\$0.00 \$5.57 \$2.68 \$5.99 \$4.64 \$3.22 \$2.01 \$3.43 \$3.37 \$3.24 \$B 11-250 Eligible Pregnant Aduts 0.00% \$10.00% \$-51.89% \$-22.54% \$-37.58%	\$0.00 \$0.00	\$0.00 \$0.00	\$0.61 \$0.85 \$0.42 \$0.70 \$0.68 \$0.56 \$0.40 \$0.95 \$0.91 \$0.83 TOTAL -56.43% 39.34% -50.59% -66.67% -2.86% -17.65%

#### Exhibit I - SERVICE MANAGEMENT - DISEASE MANAGEMENT Cash-Based Actuals and Projections

DISEASE MANAGEMENT	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
						FY 20	020-21 Projecti	on								
Estimated FY 2020-21 Base Per Capita	\$0.17	\$2.24	\$3.90	\$2.20	\$1.33	\$0.97	\$1.34	\$0.00	\$0.00	\$0.00	\$2.68	\$5.22	\$3.43	\$0.00	\$0.00	\$0.95
Estimated FY 2020-21 Eligibles	48,301	13,435	65,964	14,580	172,515	81,695	381,763	144	438,020	65,834	20,887	13,150	3,448	3,953	34,990	1,358,679
Estimated FY 2020-21 Base Expenditure	\$8,394	\$30,142	\$257,502	\$32,013	\$229,734	\$78,882	\$512,632	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Bottom Line Impacts																
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2020-21 Total Expenditure	\$8,394	\$30,142	\$257,502	\$32,013	\$229,734	\$78,882	\$512,632	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Estimated FY 2020-21 Per Capita	\$0.17	\$2.24	\$3.90	\$2.20	\$1.33	\$0.97	\$1.34	\$0.00	\$0.00	\$0.00	\$2.68	\$5.22	\$3.43	\$0.00	\$0.00	\$0.95
% Change over FY 2019-20 Per Capita	142.86%	157.47%	167.12%	94.69%	150.94%	94.00%	123.33%	0.00%	0.00%	0.00%	170.71%	133.04%	70.65%	0.00%	0.00%	137.50%
						FY 20	021-22 Projecti	on								
Estimated FY 2021-22 Base Per Capita	\$0.17	\$2.21	\$3.71	\$2.33	\$1.13	\$0.98	\$1.26	\$0.00	\$0.00	\$0.00	\$2.65	\$4.76	\$3.37	\$0.00	\$0.00	\$0.91
Estimated FY 2021-22 Eligibles	48,558	13,669	69,462	13,742	204,182	80,208	405,854	144	427,055	65,926	21,100	14,443	3,508	3,483	35,269	1,406,603
Estimated FY 2021-22 Base Expenditure	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Bottom Line Impacts																
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2021-22 Total Expenditure	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Estimated FY 2021-22 Per Capita	\$0.17	\$2.21	\$3.71	\$2.33	\$1.13	\$0.98	\$1.26	\$0.00	\$0.00	\$0.00	\$2.65	\$4.76	\$3.37	\$0.00	\$0.00	\$0.91
% Change over FY 2020-21 Per Capita	0.00%	-1.34%	-4.87%	5.91%	-15.04%	1.03%	-5.97%	0.00%	0.00%	0.00%	-1.12%	-8.81%	-1.75%	0.00%	0.00%	-4.21%
						FY 20	022-23 Projecti	on								
Estimated FY 2022-23 Base Per Capita	\$0.17	\$2.13	\$3.62	\$2.09	\$0.94	\$0.95	\$1.13	\$0.00	\$0.00	\$0.00	\$2.60	\$4.25	\$3.24	\$0.00	\$0.00	\$0.83
Estimated FY 2022-23 Eligibles	50,169	14,143	71,157	15,305	245,688	83,255	454,361	145	454,905	73,738	21,472	16,166	3,652	3,611	37,047	1,544,812
Estimated FY 2022-23 Base Expenditure	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Bottom Line Impacts																
Total Bottom Line Impacts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2022-23 Total Expenditure	\$8,394	\$30,142	\$257,502	\$32,013	\$229,733	\$78,882	\$512,633	\$0	\$0	\$0	\$55,911	\$68,699	\$11,817	\$0	\$0	\$1,285,726
Estimated FY 2022-23 Per Capita	\$0.17	\$2.13	\$3.62	\$2.09	\$0.94	\$0.95	\$1.13	\$0.00	\$0.00	\$0.00	\$2.60	\$4.25	\$3.24	\$0.00	\$0.00	\$0.83
% Change over FY 2021-22 Per Capita	0.00%	-3.62%	-2.43%	-10.30%	-16.81%	-3.06%	-10.32%	0.00%	0.00%	0.00%	-1.89%	-10.71%	-3.86%	0.00%	0.00%	-8.79%

						(	Cash Based Actuals									
ACCOUNTABLE CARE COLLABORATIVE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2011-12	\$345,078	\$256,950	\$2,052,795	\$377	\$5,690,110	\$2,269,608	\$79,568	\$0	\$6,360,605	\$0	\$576,072	\$275,408	\$0		\$1,155	\$17,907,833
FY 2012-13 FY 2013-14	\$576,537 \$547,729	\$452,652 \$468,561	\$3,916,914 \$4,052,232	\$19,706 \$88.828	\$9,740,443 \$10.681,279	\$4,141,282 \$3,955,017	\$1,856,177 \$6,302,817	\$0 \$0	\$13,291,533 \$38,151,110	\$887,610 \$1,949,462	\$1,388,883 \$1,594,103	\$429,730 \$714,315	\$22,052 \$40,255	\$518 \$842	\$4,894 \$23,780	\$36,728,931 \$68,570,330
FY 2013-14 FY 2014-15	\$1,548,799	\$468,361 \$747,258	\$4,052,232 \$5,551,796	\$88,828 \$158,419	\$10,681,279	\$3,955,017	\$6,302,817	\$0 \$0	\$38,151,110	\$1,949,462 \$5,347,941	\$1,594,103	\$/14,315 \$952,332	\$40,255 \$111,815	\$842 \$25,749	\$23,780 \$90,254	\$68,570,330
FY 2015-16	\$2,537,026	\$997,903	\$7,402,114	\$468,572	\$17,348,602	\$8,867,761	\$34,091,686	\$21,262	\$57,830,606	\$7,572,596	\$2,441,963	\$1,142,668	\$140,520	\$1,411	\$84,513	\$140,949,203
FY 2016-17	\$2,914,538	\$1,131,754	\$7,654,416	\$394,525	\$17,469,934	\$10,220,432	\$37,096,754	\$2,115	\$59,169,454	\$8,511,080	\$2,639,850	\$1,146,380	\$162,819	\$61	\$9,566	\$148,523,678
FY 2017-18	\$3,718,887	\$1,287,216	\$8,162,944	\$764,936	\$20,808,430	\$7,201,612	\$36,969,970	\$15,390	\$54,334,599	\$7,446,617	\$3,146,443	\$893,378	\$190,728	\$321	\$0	\$144,941,471
FY 2018-19 FY 2019-20	\$5,976,019 \$7,286,885	\$1,610,594 \$2,036,439	\$9,376,506 \$11.368.287	\$1,176,416 \$1,660,976	\$23,985,873 \$27,382,237	\$8,973,111 \$10,146,837	\$43,550,316 \$51,271,711	\$20,310 \$24,475	\$59,414,184 \$72,056,026	\$8,506,771 \$9,604,889	\$3,121,813 \$3,886,018	\$1,575,582 \$1,794,332	\$292,882 \$335.812	\$383 \$226	\$0 \$0	\$167,580,760 \$198.855.150
FY 2019-20 Estimated FY 2020-21	\$7,286,885	\$2,036,439	\$11,368,287	\$1,660,976	\$27,382,237	\$10,146,837	\$51,2/1,/11	\$24,475	\$72,056,026	\$9,604,889	\$3,886,018	\$1,794,332	\$335,812 \$516,457	\$226 \$221	\$0 \$0	\$198,855,150
Estimated FY 2021-22	\$7,111,236	\$2,011,960	\$11,508,475	\$1,999,367	\$27,642,493	\$13,134,204	\$65,019,162	\$26,742	\$73,431,030	\$11,339,272	\$3,803,710	\$2,359,215	\$586,993	\$0	\$0	\$219,973,854
Estimated FY 2022-23	\$8,026,642	\$2,235,396	\$11,814,767	\$2,214,690	\$27,642,513	\$14,315,413	\$73,486,280	\$26,932	\$78,027,711	\$12,671,340	\$3,867,530	\$2,660,385	\$616,758	\$0	\$0	\$237,606,366
						Percent C	hange in Cash Base	d Actuals								
ACCOUNTABLE CARE COLLABORATIVE	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
FY 2012-13	67.07%	76.16%	90.81%	5127.06%	71.18%	82.47%	2232.82%	0.00%	108.97%	100.00%	141.10%	56.03%	100.00%	384.11%	323.72%	105.10%
FY 2013-14	-5.00% 182.77%	3.51% 59.48%	3.45% 37.01%	350.77% 78.34%	9.66%	-4.50% 56.73%	239.56% 210.75%	0.00%	187.03% 22.78%	119.63%	14.78% 21.93%	66.22%	82.55% 177.77%	62.55% 2958.08%	385.90% 279.54%	86.69% 51.60%
FY 2014-15 FY 2015-16	63.81%	33.54%	37.01%	195.78%	16.85%	43.06%	74.06%	100.00%	23.46%	41.60%	25.64%	19 99%	25.67%	-94.52%	-6.36%	35.59%
FY 2016-17	14.88%	13.41%	3.41%	-15.80%	0.70%	15.25%	8.81%	-90.05%	2.32%	12.39%	8.10%	0.32%	15.87%	-95.68%	-88.68%	5.37%
FY 2017-18	27.60%	13.74%	6.64%	93.89%	19.11%	-29.54%	-0.34%	627.66%	-8.17%	-12.51%	19.19%	-22.07%	17.14%	426.23%	-100.00%	-2.41%
FY 2018-19	60.69%	25.12%	14.87%	53.79%	15.27%	24.60%	17.80%	31.97%	9.35%	14.24%	-0.78%	76.36%	53.56%	19.31%	0.00%	15.62%
FY 2019-20	21.94%		21.24%	41.19%	14.16%	13.08%	17.73%	20.51%	21.28%		24.48%	13.88%	14.66%	-40.99%	0.00%	18.66% 5.48%
Estimated FY 2020-21 Estimated FY 2021-22	-3.59% 1.22%	-2.16% 0.97%	-1.34% 2.61%	18.02% 1.99%	0.22% 0.73%	20.18%	14.54% 10.72%	6.27% 2.81%	0.16% 1.75%	10.31% 7.02%	-3.29% 1.21%	18.86% 10.62%	53.79% 13.66%	-2.21% -100.00%	0.00%	5.48% 4.87%
Estimated FY 2021-22 Estimated FY 2022-23	12.87%		2.66%	10.77%	0.00%	8.99%		0.71%	6.26%		1.68%	12.77%	5.07%		0.00%	8.02%
							Per Capita Cost									
ACCOUNTABLE CARE COLLABORATIVE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
ACCOUNTABLE CARE COLLABORATIVE FY 2011-12	(OAP-A) \$8.68	64	to 59	Disabled Buy-In \$7.25	Caretakers to 68%	Caretakers 69% to 133% FPL \$64.00	\$70.17			Children \$0.00	\$31.94	Adults \$36.10	Pregnant Adults \$0.00		Partial Dual Eligibles	\$28.89
FY 2011-12 FY 2012-13	(OAP-A) \$8.68 \$14.12	64 (OAP-B) \$30.65 \$50.01	to 59 (AND/AB) \$34.54 \$63.26	\$7.25 \$22.19	Caretakers to 68% FPL \$61.04 \$98.00	Caretakers 69% to 133% FPL \$64.00 \$99.68	\$70.17 \$174.55	Cancer Program \$0.00 \$0.00	(AFDC-C/BC) \$19.01 \$36.94	\$0.00 \$107.77	\$31.94 \$78.13	\$36.10 \$53.56	Pregnant Adults \$0.00 \$64.10	Emergency Services \$0.04 \$0.19	\$0.06 \$0.23	\$28.89 \$53.78
FY 2011-12 FY 2012-14 FY 2013-14	(OAP-A) \$8.68 \$14.12 \$13.09	64 (OAP-B) \$30.65 \$50.01 \$47.56	to 59 (AND/AB) \$34.54 \$63.26 \$62.90	\$7.25 \$22.19 \$34.70	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67	Caretakers 69% to 133% FPL \$64.00 \$99.68 \$84.00	\$70.17 \$174.55 \$72.24	\$0.00 \$0.00 \$0.00	\$19.01 \$36.94 \$95.61	\$0.00 \$107.77 \$76.92	\$31.94 \$78.13 \$87.27	\$36.10 \$53.56 \$54.28	\$0.00 \$64.10 \$38.08	\$0.04 \$0.19 \$0.34	\$0.06 \$0.23 \$1.02	\$28.89 \$53.78 \$79.64
FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15	\$8.68 \$14.12 \$13.09 \$37.04	64 (OAP-B) \$30.65 \$50.01 \$47.56 \$71.40	to 59 (AND/AB) \$34.54 \$63.26 \$62.90 \$83.43	\$7.25 \$22.19 \$34.70 \$43.68	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83	Caretakers 69% to 133% FPL \$64.00 \$99.68 \$84.00 \$86.11	\$70.17 \$174.55 \$72.24 \$81.14	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$19.01 \$36.94 \$95.61 \$105.09	\$0.00 \$107.77 \$76.92 \$106.72	\$31.94 \$78.13 \$87.27 \$97.01	\$36.10 \$53.56 \$54.28 \$63.93	\$0.00 \$64.10 \$38.08 \$63.93	\$0.04 \$0.19 \$0.34 \$9.46	\$0.06 \$0.23 \$1.02 \$3.22	\$28.89 \$53.78 \$79.64 \$89.52
FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-16	(OAP-A) \$8.68 \$14.12 \$13.09	64 (OAP-B) \$30.65 \$50.01 \$47.56	to 59 (AND/AB) \$34.54 \$63.26 \$62.90	\$7.25 \$22.19 \$34.70	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67	Caretakers 69% to 133% FPL \$64.00 \$99.68 \$84.00	\$70.17 \$174.55 \$72.24	\$0.00 \$0.00 \$0.00	\$19.01 \$36.94 \$95.61	\$0.00 \$107.77 \$76.92	\$31.94 \$78.13 \$87.27	\$36.10 \$53.56 \$54.28	\$0.00 \$64.10 \$38.08	\$0.04 \$0.19 \$0.34	\$0.06 \$0.23 \$1.02	\$28.89 \$53.78 \$79.64
FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15	(OAP-A)  \$8.68 \$14.12 \$13.09 \$37.04 \$59.83 \$66.33 \$81.01	64 (OAP-B) \$30.65 \$50.01 \$47.56 \$71.40 \$94.78 \$100.68	\$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$120.88	\$7.25 \$22.19 \$34.70 \$43.68 \$75.37 \$63.11 \$93.57	Caretakers to 68% FPL.  \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$108.23 \$115.70	Caretakers 69% to 133% FPL \$64.00 \$99.68 \$84.00 \$86.11 \$101.97 \$101.13	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.65 \$104.85	\$0.00 \$0.00 \$0.00 \$0.00 \$66.03 \$99.29	\$19.01 \$36.94 \$95.61 \$105.09 \$123.78 \$126.08 \$123.83	\$0.00 \$107.77 \$76.92 \$106.72 \$127.27 \$131.13 \$115.73	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53	\$36.10 \$53.56 \$54.28 \$63.93 \$79.28 \$84.50 \$88.23	\$0.00 \$64.10 \$38.08 \$63.93 \$79.89 \$82.73 \$85.57	\$0.04 \$0.19 \$0.39 \$9.46 \$0.53 \$0.02	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.28 \$0.00	\$28.89 \$53.78 \$79.64 \$89.52 \$108.67 \$110.20
FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2016-17 FY 2017-18	(OAP-A)  \$8.68 \$14.12 \$13.09 \$37.04 \$59.83 \$66.33 \$81.01 \$125.32	64 (OAP-B) \$30.65 \$50.01 \$47.56 \$71.40 \$94.78 \$100.68 \$109.11	to 59 (AND/AB) \$34.54 \$63.26 \$62.29 \$83.43 \$107.59 \$113.20 \$120.88 \$13.661	\$7.25 \$22.19 \$34.70 \$43.68 \$75.37 \$63.11 \$93.57 \$130.90	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$108.23 \$115.70	Caretakers 69% to 133% FPL S64.00 \$99.68 \$84.00 \$86.11 \$101.97 \$101.13 \$96.52 \$141.17	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.65 \$104.85	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$66.03 \$9.00 \$99.29	(AFDC-C/BC) \$19.01 \$36.94 \$95.61 \$105.09 \$123.78 \$126.08 \$123.83 \$141.38	\$0.00 \$107.77 \$76.92 \$106.72 \$127.27 \$131.13 \$115.73 \$143.27	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$143.10	336.10 \$53.56 \$54.28 \$63.93 \$79.28 \$84.50 \$88.23	\$0.00 \$64.10 \$38.08 \$63.93 \$79.89 \$82.73 \$85.57 \$127.73	\$0.04 \$0.19 \$0.34 \$9.46 \$0.02 \$0.02 \$0.11	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.28 \$0.00	\$28.89 \$53.78 \$79.64 \$89.52 \$108.67 \$110.20 \$132.86
FY 2011-12 FY 2011-13 FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17	\$8.68 \$14.12 \$13.09 \$37.04 \$59.83 \$66.33 \$81.01 \$125.32	64 (OAP-B) \$30.65 \$50.01 \$47.56 \$71.40 \$94.78 \$100.68 \$109.11 \$126.61	to 59 (AND/AB) \$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$120.88 \$136.61 \$0.00	\$7.25 \$22.19 \$34.70 \$43.68 \$75.37 \$63.11 \$93.57 \$130.90 \$0.00	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$108.23 \$115.70 \$136.22 \$0.00	Caretakers 69% to 133% FPL \$64.00 \$99.68 \$84.00 \$86.11 \$101.97 \$101.13 \$96.52 \$141.77 \$50.00	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.65 \$104.85 \$131.76 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$66.03 \$9.00 \$99.29 \$140.07	\$19.01 \$36.94 \$95.61 \$105.09 \$123.78 \$126.08 \$123.83 \$141.83 \$50.00	\$0.00 \$107.77 \$76.92 \$106.72 \$127.27 \$131.13 \$115.73 \$143.73	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$143.10 \$0.00	\$36.10 \$33.56 \$54.28 \$63.93 \$79.28 \$84.50 \$88.23 \$129.19	\$0.00 \$64.10 \$38.08 \$63.93 \$79.89 \$82.73 \$85.57 \$127.73	\$0.04 \$0.19 \$0.34 \$9.46 \$0.53 \$0.02 \$0.11 \$0.14	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.28 \$0.00 \$0.00	\$28.89 \$33.78 \$79.64 \$89.52 \$108.67 \$110.34 \$110.20 \$132.86 \$0.00
FY 2011-12 FY 2013-14 FY 2013-14 FY 2015-16 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-16 FY 2018-16 FY 2018-16 FY 2018-16 FY 2018-16	\$8.68 \$14.12 \$13.09 \$37.04 \$59.83 \$66.33 \$81.01 \$125.32 \$0.00 \$145.45	64 (OAP-B) \$30.65 \$50.01 \$47.56 \$71.40 \$94.78 \$100.68 \$109.11 \$126.61 \$0.00 \$148.31	to 59 (AND/AB) \$34.54 \$63.26 \$62.90 \$83.34 \$107.59 \$113.20 \$120.88 \$136.61 \$0.00 \$170.02	\$7.25 \$22.19 \$34.70 \$43.68 \$75.37 \$63.11 \$93.57 \$130.90 \$0.00 \$134.45	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83 \$108.23 \$115.70 \$136.42 \$0.00 \$159.07	Caretakers 69% to 133% FPL S64.00 \$99.68 \$84.00 \$86.11 \$101.97 \$101.13 \$96.52 \$141.17 \$0.00 \$149.27	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.65 \$104.85 \$131.76 \$0.00 \$153.83	Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$66.03 \$9.00 \$99.29 \$140.07 \$0.00 \$180.63	(AFDC-C/BC)  \$19.01  \$36.94  \$95.61  \$105.09  \$123.78  \$126.08  \$123.83  \$141.38  \$50.00  \$164.76	\$0.00 \$107.77 \$76.92 \$106.72 \$127.27 \$131.13 \$1115.73 \$143.27 \$0.00 \$160.94	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$143.10 \$0.00 \$179.93	\$36.10 \$33.56 \$34.28 \$63.93 \$79.28 \$84.50 \$88.23 \$129.19 \$0.00 \$162.19	\$0.00 \$64.10 \$38.08 \$63.93 \$79.89 \$82.73 \$88.5.77 \$127.73 \$0.00 \$149.78	\$0.04 \$0.19 \$0.34 \$0.53 \$0.65 \$0.05 \$0.01 \$0.14 \$0.00 \$0.06	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.28 \$0.00 \$0.00 \$0.00	\$28.89 \$53.78 \$79.64 \$89.52 \$108.67 \$110.34 \$110.20 \$132.86 \$0.00 \$154.38
FY 2011-12 FY 2011-13 FY 2012-13 FY 2013-14 FY 2014-15 FY 2014-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17 FY 2015-17	\$8.68 \$14.12 \$13.09 \$37.04 \$59.83 \$66.33 \$81.01 \$125.32	64 (OAP-B) \$30.65 \$50.01 \$47.56 \$71.40 \$94.78 \$100.68 \$109.11 \$126.61 \$0.00 \$148.31 \$147.19	to 59 (AND/AB) \$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$120.88 \$136.61 \$0.00	\$7.25 \$22.19 \$34.70 \$43.68 \$75.37 \$63.11 \$93.57 \$130.90 \$0.00	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$108.23 \$115.70 \$136.24	Caretakers 69% to 133% FPL \$64.00 \$99.68 \$84.00 \$86.11 \$101.97 \$101.13 \$96.52 \$141.77 \$50.00	\$70.17 \$174.55 \$72.24 \$81.14 \$106.61 \$104.85 \$131.76 \$0.00 \$153.83 \$160.20	Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$66.03 \$9.00 \$99.29 \$140.07 \$0.00 \$180.63 \$188.71	\$19.01 \$36.94 \$95.61 \$105.09 \$123.78 \$126.08 \$123.83 \$141.83 \$50.00	\$0.00 \$107.77 \$76.92 \$106.72 \$131.13 \$115.73 \$143.27 \$0.00 \$160.94 \$172.00	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$143.10 \$0.00	\$36.10 \$33.56 \$54.28 \$63.93 \$79.28 \$84.50 \$88.23 \$129.19	\$0.00 \$64.10 \$38.08 \$63.93 \$79.89 \$82.73 \$85.57 \$127.73	Emergency Services  \$0.04 \$0.19 \$0.34 \$9.46 \$0.50.30 \$0.02 \$0.11 \$0.14 \$0.00 \$0.06 \$0.00	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.28 \$0.00 \$0.00	\$28.89 \$33.78 \$79.64 \$89.52 \$108.67 \$110.34 \$110.20 \$132.86 \$0.00
FY 2011-12 FY 2013-14 FY 2013-14 FY 2013-15 FY 2013-16 FY 2015-16 FY 2015-16 FY 2015-17 FY 2015-19	(OAP-A)  \$8.68 \$14.12 \$13.09 \$37.04 \$59.83 \$66.33 \$81.01 \$125.32 \$5.00 \$1145.45 \$146.45	64 (OAP-B) \$30.65 \$50.01 \$47.56 \$71.40 \$94.78 \$100.68 \$109.11 \$126.61 \$0.00 \$148.31 \$147.19	to 59 (AND/AB) \$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$120.88 \$136.61 \$0.00 \$170.02	\$7.25 \$22.19 \$34.70 \$43.68 \$75.37 \$63.11 \$93.57 \$130.90 \$0.00	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$108.23 \$115.70 \$136.42 \$0.00 \$159.07 \$135.38	Caretakers 69% to 133% FPL  \$64.00   \$99.68   \$84.00   \$86.11   \$101.97   \$101.37   \$50.00   \$1441.7   \$163.75   \$171.95   \$171.95	\$70.17 \$174.55 \$72.24 \$81.14 \$106.61 \$104.85 \$131.76 \$0.00 \$153.83 \$160.20	Cancer Program  50.00 50.00 50.00 50.00 \$6.03 \$9.00 \$99.29 \$140.07 \$0.00 \$180.63 \$185.71	\$19.01 \$36.94 \$95.61 \$105.09 \$123.78 \$126.08 \$123.83 \$141.38 \$0.00 \$164.76 \$171.95	\$0.00 \$107.77 \$76.92 \$106.72 \$131.13 \$115.73 \$143.27 \$0.00 \$160.94 \$172.00	\$31.94 \$78.13 \$87.27 \$97.01 \$122.98 \$146.53 \$143.10 \$0.00 \$179.93 \$180.27	\$36.10 \$33.56 \$54.28 \$63.33 \$79.28 \$84.50 \$88.23 \$129.19 \$0.00 \$162.19 \$163.35	\$64.10 \$38.08 \$63.39 \$79.89 \$82.73 \$85.57 \$127.73 \$0.00 \$149.78 \$167.33	Emergency Services  \$0.04 \$0.19 \$0.34 \$9.46 \$0.50.30 \$0.02 \$0.11 \$0.14 \$0.00 \$0.06 \$0.00	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.28 \$0.00 \$0.00 \$0.00 \$0.00	\$28.89 \$53.78 \$79.64 \$89.52 \$108.67 \$110.30 \$132.86 \$0.00 \$154.38 \$156.39
FY 201-12 FY 201-23 FY 201-34 FY 201-34 FY 201-35 FY 201-35 FY 201-35 FY 201-37 FY 201-38 FY 201-39 FY 201-20 Estimated FY 201-22 Estimated FY 201-22 Estimated FY 202-22	(OAP-A)  \$8.68 \$14.12 \$13.09 \$57.04 \$57.04 \$59.93 \$66.33 \$81.01 \$125.32 \$0.00 \$145.45 \$145.45 \$159.99  Adults 65 and Older (OAP-A)	64 (OAP-B)  \$30.65 \$50.01 \$47.56 \$6.01 \$71.40 \$71.4	to 59 (AND/AB)  \$14.54 \$63.26 \$62.20 \$83.43 \$107.59 \$113.20 \$113.20 \$120.88 \$136.61 \$0.00 \$170.02 \$150.66 \$160.04	\$725 \$22.19 \$34.70 \$43.48 \$75.37 \$63.11 \$93.57 \$130.00 \$1344.57 \$144.40 \$144.40	Caretakers to 68% FPL  \$61.04 \$98.00 \$\$5.67 \$91.83 \$106.21 \$108.23 \$115.70 \$135.84 \$109.07 \$151.83 \$112.51	Caretakers 69% to 133% FPL  Se4 00  \$99.68  \$84.00  \$86.11  \$10.13  \$10.13  \$96.52  \$141.17  \$10.20  \$142.27  \$17.95  Percent  MAGI Parents/ Caretakers 69% to 133% FPL	\$70,17 \$174,55 \$77,24 \$31,14 \$106,41 \$106,65 \$104,85 \$131,76 \$0.00 \$153,83 \$160,27 \$161,74 Change in Per Capi	Cancer Program	(AFDC-C/BC)  \$19.01 \$36.94 \$95.61 \$105.09 \$123.78 \$126.08 \$124.138 \$104.138 \$104.17 \$117.153  Eligible Children (AFDC-C/BC)	Children  \$0.00 \$107.77 \$76.92 \$106.72 \$127.27 \$131.13 \$115.73 \$10.00 \$172.00 \$171.84  SB 11-008 Eligible Children	\$31,94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$143.01 \$0.00 \$179.93 \$180.27 \$180.12	Adults  \$36.10  \$53.56  \$54.28  \$63.93  \$79.28  \$84.50  \$88.23  \$129.19  \$162.19  \$163.35  \$164.57	Pregnant Adults  \$0.00 \$64.10 \$38.08 \$63.93 \$57.93 \$85.273 \$85.57 \$127.73 \$9.00 \$149.78 \$167.83 \$168.88	S0.04   S0.19   S0.19   S0.19   S0.19   S0.14   S0.19   S0.14   S0.34   S0.33   S0.02   S0.11   S0.14   S0.00   S0.0	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$28.89 \$53.78 \$79.64 \$89.52 \$108.67 \$110.34 \$110.20 \$132.86 \$0.00 \$154.38 \$155.38 \$155.38
FY 2011-12 FY 2011-12 FY 2012-13 FY 2013-14 FY 2014-15 FY 2015-16 FY 2015-16 FY 2015-17 FY 2015-19 ACCOUNTABLE CARE COLLABORATIVE	(OAP-A)  \$8.68  \$14.12 \$13.09	64 (OAP-B)  \$30.65 \$50.01 \$47.56 \$50.01 \$47.56 \$50.01 \$51.40 \$50.00 \$50.	to 59 (AND/AB)  \$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$120.88 \$136.61 \$0.00 \$170.02 \$165.68 \$56.04	\$725 \$22.19 \$34.70 \$43.68 \$75.37 \$63.11 \$93.57 \$130.90 \$134.45 \$144.71 Disabled Buy-In	Caretakers to 68% FPL  \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$108.23 \$115.70 \$135.42 \$0.00 \$159.07 \$135.38 \$112.51	Caretakers 69% to 133% FPL.  \$64.00 \$99.68 \$84.00 \$86.11 \$10.197 \$10.113 \$96.52 \$141.17 \$0.00 \$149.27 \$171.95 \$717.95 \$717.95 \$717.95  MAGI Parents/ Caretakers 69% to 133% FPL.	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.55 \$104.85 \$104.85 \$131.76 \$100.20 \$161.74 Change in Per Capi	Cancer Program  \$0.00	(AFDC-C/BC)  \$19.01  \$36.94  \$95.61  \$105.09  \$123.78  \$126.08  \$123.88  \$141.38  \$141.38  \$171.95  \$171.53	Children  \$0.00 \$107.77 \$75.92 \$102.77 \$75.92 \$102.72 \$132.73 \$13.13 \$115.73 \$143.27 \$143.27 \$152.00 \$171.84 \$172.00 \$171.84	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$143.10 \$0.00 \$17.99.33 \$180.27 \$180.12	Adults  \$36.10 \$53.56 \$54.28 \$6.393 \$79.28 \$84.23 \$86.23 \$86.23 \$120.19 \$160.315 \$164.57  MAGI Pregnant Adults  48.37%	Pregnant Adults  \$0.00 \$564.10 \$38.00 \$45.10 \$45.00 \$55.00	### Emergency Services  \$0.04  \$0.19  \$0.34  \$59.46  \$0.02  \$0.11  \$0.04  \$0.00  \$0.00  \$0.00  **Non-Citzens-  Emergency Services  **Triple of the company o	\$0.06 \$0.23 \$1.02 \$3.29 \$0.25 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$28.89 \$53.78 \$53.78 \$79.64 \$59.52 \$108.67 \$110.20 \$110.20 \$132.86 \$20.00 \$156.39 \$154.38 \$154.38 \$154.38
FY 201-12 FY 201-23 FY 201-34 FY 201-34 FY 201-35 FY 201-35 FY 201-37 FY 201-37 FY 201-38 FY 201-39 FY 201-20 Estimated FY 202-23 Estimated FY 202-23 ACCOUNTABLE CARE COLLABORATIVE FY 201-34 FY 201-34	(OAP-A)  \$8.68 \$14.12 \$13.00 \$13.00 \$15.00 \$59.83 \$59.83 \$81.01 \$10.00 \$12.53 \$10.00 \$14.45 \$15.90 Adults 65 and Older (OAP-A)  62.67%	64 (OAP-B)  \$30.65   \$50.01   \$47.56   \$51.40   \$47.56   \$51.40   \$51.60   \$1.50	to 59 (AND/AB)  \$34.34 \$63.26 \$62.90 \$88.43 \$107.59 \$1120.08 \$1120.08 \$1120.08 \$1150.66 \$10.00 \$110.00 \$110.00 \$110.00 \$110.00 \$110.00 \$10.00	\$7.25 \$22.19 \$34.70 \$43.48 \$75.37 \$63.11 \$93.57 \$130.00 \$134.45 \$144.71 <b>Disabled Buy-In</b>	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$115.70 \$115.70 \$115.70 \$15.38 \$112.51  MAGI Parents' Caretakers to 68% FPL 60.55% -0.25% -1.25%	Caretakers 69% to 133% FPL	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.55 \$104.85 \$10.00 \$153.35 \$10.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$16.2	Cancer Program  \$0.00	(AFDC-C/BC)  \$19.01  \$16.04  \$95.61  \$95.61  \$12.378  \$12.38  \$12.38  \$0.00  \$164.76  \$171.95  \$171.95  \$171.53	Children  \$0.00 \$107.77 \$76.92 \$107.77 \$78.92 \$127.27 \$131.13 \$115.73 \$10.00 \$16.00 \$172.00 \$171.84  SB 11-008 Eligible Children  100.00% \$28.639%	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$146.53 \$180.27 \$180.27 \$180.27	Adults  \$36,10 \$33,56 \$53,56 \$54,28 \$54,28 \$59,28 \$59,28 \$58,23 \$59,29 \$50,00 \$162,19 \$103,35 \$164,57	Pregnant Adults  \$0.00 \$64.10 \$58.00 \$58.00 \$58.00 \$58.00 \$58.00 \$59.90	### Emergency Services    \$0.04     \$0.19     \$0.34     \$0.34     \$0.34     \$0.34     \$0.35     \$0.03     \$0.00	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$28.89 \$33.78 \$79.64 \$89.52 \$108.67 \$110.20 \$132.86 \$0.00 \$154.38 \$155.39 \$155.39 \$155.39
FY 2011-12  FY 2012-13  FY 2013-14  FY 2013-14  FY 2015-16  FY 2015-16  FY 2015-16  FY 2015-16  FY 2015-20  For any and a second and a	(OAP-A)  \$8.68 \$14.12 \$13.09 \$37.04 \$59.83 \$66.33 \$61.01 \$15.25 \$40.00 \$15.25 \$40.00 \$15.25 \$40.00 \$15.25 \$40.00 \$15.25 \$40.00 \$	64 (OAP-B)  \$30.65 \$50.01 \$47.56 \$50.01 \$47.56 \$50.01 \$51.40 \$547.8 \$5100.68 \$100.68 \$100.15 \$126.61 \$50.00 \$5148.31 \$147.00 \$5158.06 \$100.40	to 59 (AND/AB)  \$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$120.88 \$136.61 \$0.00 \$170.02 \$165.68 \$166.04  Disabled Individuals to 59 (AND/AB)  \$81.15% \$2.64% \$2.26%	\$7.25 \$22.10 \$34.70 \$43.68 \$75.37 \$63.11 \$93.10 \$10.00 \$10.00 \$134.45 \$134.45 \$144.71 Disabled Buy-In	Caretakers to 68% FPL  \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$135.04 \$135.642 \$0.00 \$159.07 \$135.38 \$112.51	Caretakers 69% to 133% FPL.  \$64.00 \$99.68 \$84.00 \$86.11 \$101.33 \$96.52 \$141.17 \$50.00 \$149.27 \$171.95 \$717.95 \$717.95 \$717.95 \$717.95 \$717.95 \$717.95 \$717.95 \$717.95	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.55 \$104.85 \$13.04.85 \$15.38 \$16.174	Cancer Program  \$0.00	(AFDC-C/BC)  \$19.01 \$36.04 \$95.61 \$95.61 \$123.78 \$122.38 \$123.83 \$10.00 \$151.75 \$171.53 \$171.53 \$171.53	Children  \$0.00 \$107.77 \$76.92 \$106.77 \$131.13 \$115.73 \$115.73 \$10.00 \$171.84  SB 11-008 Eligible Children  100.00% 28.63% 38.73%	\$31,94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.50 \$144.50 \$179.93 \$180.12 \$180.12 \$180.12 \$180.12 \$180.12	Adults  \$36,10 \$33,56 \$53,26 \$54,28 \$63,33 \$79,28 \$84,25 \$88,23 \$129,10 \$100,21 \$100,2	Pregnant Adults  S0.00  \$4.10  \$5.4.10  \$3.8.08  \$5.3.3  \$5.2.3  \$5.5.7  \$0.00  \$4.10  \$5.2.7  \$5.12	\$0.04 \$0.19 \$0.34 \$0.34 \$0.34 \$0.34 \$0.34 \$0.34 \$0.35 \$0.53 \$0.00	\$0.06 \$0.23 \$1.02 \$3.23 \$2.59 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$28.89 \$53.78 \$79.64 \$79.64 \$108.67 \$108.67 \$10.20 \$10.20 \$10.20 \$10.30 \$154.38 \$154.38 \$154.38 \$154.38 \$154.38 \$154.38
FY 201-12 FY 201-23 FY 201-34 FY 201-34 FY 201-35 FY 201-35 FY 201-37 FY 201-37 FY 201-38 FY 201-39 FY 201-20 Estimated FY 202-23 Estimated FY 202-23 ACCOUNTABLE CARE COLLABORATIVE FY 201-34 FY 201-34	(OAP-A)  \$8.68 \$14.12 \$13.00 \$13.00 \$15.00 \$59.83 \$59.83 \$81.01 \$10.00 \$12.53 \$10.00 \$14.45 \$15.90 Adults 65 and Older (OAP-A)  62.67%	64 (OAP-B)  \$30.65 \$50.01 \$47.56 \$50.01 \$47.56 \$50.01 \$51.40 \$547.8 \$5100.68 \$100.68 \$100.15 \$126.61 \$50.00 \$5148.31 \$147.00 \$5158.06 \$100.40	to 59 (AND/AB)  \$34.34 \$63.26 \$62.90 \$88.43 \$107.59 \$1120.08 \$1120.08 \$1120.08 \$1150.66 \$10.00 \$110.00 \$110.00 \$110.00 \$110.00 \$110.00 \$10.00	\$7.25 \$22.19 \$34.70 \$43.48 \$75.37 \$63.11 \$93.57 \$130.00 \$134.45 \$144.71 <b>Disabled Buy-In</b>	Caretakers to 68% FPL \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$115.70 \$115.70 \$115.70 \$15.38 \$112.51  MAGI Parents' Caretakers to 68% FPL 60.55% -0.25% -1.25%	Caretakers 69% to 133% FPL	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.55 \$104.85 \$10.00 \$153.35 \$10.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$153.35 \$16.20 \$16.2	Cancer Program  \$0.00	(AFDC-C/BC)  \$19.01  \$16.04  \$95.61  \$95.61  \$12.378  \$12.38  \$12.38  \$0.00  \$164.76  \$171.95  \$171.95  \$171.53	Children  \$0.00 \$107.77 \$76.92 \$107.77 \$78.92 \$127.27 \$131.13 \$115.73 \$10.00 \$16.00 \$172.00 \$171.84  SB 11-008 Eligible Children  100.00% \$28.639%	\$31.94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.98 \$146.53 \$146.53 \$180.27 \$180.27 \$180.27	Adults  \$36,10 \$33,56 \$53,56 \$54,28 \$54,28 \$59,28 \$59,28 \$58,23 \$59,29 \$50,00 \$162,19 \$103,35 \$164,57	Pregnant Adults  \$0.00 \$64.10 \$58.00 \$58.00 \$58.00 \$58.00 \$58.00 \$59.90	### Emergency Services    \$0.04     \$0.19     \$0.34     \$0.34     \$0.34     \$0.34     \$0.35     \$0.03     \$0.00	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$28.89 \$53.78 \$79.64 \$89.52 \$108.67 \$110.34 \$110.34 \$132.86 \$0.00 \$154.38 \$155.381
FY 2011-12 FY 2011-13 FY 2013-14 FY 2013-14 FY 2013-15 FY 2013-16 FY 2013-16 FY 2013-16 FY 2013-16 FY 2013-16 FY 2013-17 FY 2013-19	(OAP-A)  \$8.68 \$14.12 \$13.09 \$13.09 \$59.83 \$59.83 \$81.01 \$15.00 \$0.00 \$14.14 \$1.00 \$	64 (OAP-B)  \$30.65 \$50.01 \$50.01 \$47.56 \$6.25% \$6.23%	to 59 (AND/AB)  \$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$132.64 \$15.64 \$16.60  Disabled Individuals to 59 (AND/AB)  \$83.15% \$2.64% \$2.64% \$2.26% \$3.26%	\$7.25 \$22.19 \$34.70 \$43.68 \$5.31 \$5.31 \$13.99 \$13.445 \$134.45 \$144.71 Disabled Buy-In	Caretakers to 68% FPL  \$61.04 \$98.00 \$85.67 \$91.83 \$10.23 \$10.23 \$10.23 \$10.25 \$10.20	Caretakers 69% to 133% FPL	\$70.17 \$174.55 \$72.24 \$811.45 \$106.41 \$106.41 \$131.76 \$103.85 \$103.85 \$104.72 \$105.74 Change in Per Capi MAGI Adults \$48.75% \$48.65% \$	Cancer Program  \$0.00 \$0	(AFDC-C/BC)  \$19.01 \$16.04 \$95.61 \$95.61 \$15.09 \$123.78 \$123.78 \$123.88 \$0.00 \$164.76 \$171.95 \$171.95 \$171.95 \$171.53	Children  \$0.00 \$107.77 \$76.02 \$107.77 \$75.02 \$107.77 \$131.13 \$115.73	\$31,94 \$78,13 \$87,27 \$97,10 \$91,20 \$129,98 \$143,10 \$0.00 \$179,93 \$180,12  Foster Care  144,61% 11,1076 \$1,10,10	Adults  \$34.10 \$33.56 \$33.56 \$53.356 \$53.356 \$53.356 \$53.35 \$59.28 \$58.23 \$59.29 \$50.00 \$162.19 \$103.35 \$164.57  MAGI Pregnant Adults  48.37% \$1.34% \$1.7.78% \$6.58% \$4.41%	Pregnant Adults  \$0.00 \$64.01 \$18.08 \$18.08 \$1.3	### Emergency Services    \$0.04     \$0.19     \$0.33     \$0.33     \$0.03     \$0.00	\$0.06 \$0.23 \$1.02 \$3.23 \$0.25 \$0.25 \$0.00	\$28.88 (58.78 ) \$33.78 (58.78 ) \$79.64 (58.78 ) \$108.67 (58.78 ) \$108.67 (58.78 ) \$108.67 (58.78 ) \$108.67 (58.78 ) \$108.67 (58.78 ) \$108.67 (58.78 ) \$108.67 (58.78 ) \$109.67 (
FY 201-12 FY 201-23 FY 201-24 FY 201-34 FY 201-35 FY 201-35 FY 201-36 FY 201-38	(OAP-A)  \$8.68 \$14.12 \$13.09 \$13.09 \$5.98 \$5.98 \$6.63 \$6.63 \$15.12 \$5.00 \$1.00 \$1.15.25 \$5.00 \$1.15.25 \$1.00 \$1.15.25 \$1.00 \$1.15.25 \$1.00 \$1.15.25	64 (OAP-B)  \$30.65 \$50.01  \$41.75 \$6.05  \$50.01  \$41.75 \$6.05  \$50.478  \$109.11  \$12.66  \$10.00  \$148.31  \$147.19  \$158.06  63.16%  4.00AP-B)  \$2.75%  \$3.27%  \$8.37%	to 59 (AND/AB)  \$34.54 \$61.26 \$62.26 \$62.20 \$15.20 \$113.20 \$113.20 \$112.088 \$136.61 \$0.00 \$170.02 \$165.68 \$166.04  Disabled Individuals to 59 (AND/AB)  \$3.15% \$0.57% \$2.59% \$2.9% \$1.20,57% \$2.9% \$1.20,57% \$	\$7.25 \$22.10 \$34.70 \$43.48 \$75.37 \$63.11 \$93.57 \$130.90 \$14.45 \$14.45 \$14.47 \$1	Caretakers to 68% FPL  \$61.04 \$99.00 \$85.65 \$1.50 \$1.5	Caretakers 69% to 133% FPL	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.55 \$104.85 \$104.85 \$106.20 \$	Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$6.03 \$99.29 \$140.07 \$0.00 \$188.571 \$185.71 Breast & Cervical Cancer Program \$0.000 \$0.0	(AFDC-C/BC) \$19.01 \$36.04 \$395.61 \$95.61 \$95.61 \$123.78 \$122.38 \$123.83 \$40.00 \$141.38 \$40.00 \$164.76 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95	Children  \$0.00 \$107.77 \$76.92 \$107.77 \$131.13 \$115.73 \$115.73 \$10.00 \$172.00	\$31,94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.90 \$146.53 \$146.53 \$149.02 \$180.12 \$180.12 Foster Care	Adults  \$36,10 \$33,56 \$53,56 \$53,28 \$63,39 \$79,28 \$88,23 \$79,28 \$88,23 \$129,19 \$0,00 \$162,10 \$163,35 \$164,57  MAGI Pregnant Adults  44,37% \$2,40,1% \$6,55% \$	Pregnant Adults  50.00  \$4.00  \$5.41.00  \$3.8.08  \$3.8.08  \$5.79.89  \$82.73  \$5.57  \$5.00  \$5.40,78  \$5.67,33  \$5.00  \$5.40,78  \$5.67,33  \$5.00  \$5.67,33  \$	### Emergency Services    \$0.04     \$0.19     \$0.34     \$0.34     \$0.93     \$0.33     \$0.00	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.00	\$28.89 \$28.70 \$53.78 \$570.64 \$53.78 \$570.64 \$5
FY 2011-12 FY 2012-13 FY 2013-14 FY 2013-14 FY 2013-15 FY 2013-16 FY 2013-17 FY 2013-17 FY 2013-17 FY 2013-18 FY 2013-18 FY 2013-19	(OAP-A)  \$8.68 \$14.12 \$13.09 \$13.09 \$59.83 \$59.83 \$81.01 \$15.00 \$0.00 \$14.14 \$1.00 \$	64 (OAP-B)  \$30.65 \$50.01 \$50.01 \$47.56 \$67.140 \$67.14	to 59 (AND/AB)  \$34.54 \$63.26 \$62.90 \$83.43 \$107.59 \$113.20 \$1	\$725 \$22.19 \$34.70 \$43.68 \$15.33 \$13.33 \$13.93 \$13.93 \$134.45 \$144.71 Disabled Buy-In \$63.85 \$63.85 \$12.25 \$13.25	Caretakers to 68% FPL  \$61.04 \$98.00 \$85.67 \$91.83 \$106.21 \$108.23 \$115.73 \$108.23 \$13.00 \$10.00 \$10	Caretaken 69% to 133% FPL  \$64.00 \$99.68 \$84.00 \$86.11 \$10.19 \$10.13 \$95.52 \$10.10 \$10.13 \$10	\$70.17 \$174.55 \$72.24 \$811.4 \$106.41 \$108.45 \$131.76 \$131.76 \$131.76 \$131.76 \$131.76 \$131.76 \$131.76 \$131.76 \$131.76 \$147.75 \$	Cancer Program  \$0.00 \$0	(AFDC-C/BC)  \$19.01 \$16.04 \$95.61 \$95.61 \$15.09 \$123.78 \$123.78 \$123.88 \$0.00 \$164.76 \$171.95 \$171.95 \$171.95 \$171.95 \$171.86 \$18.88	Children  \$0.00 \$107.77 \$76.92 \$107.77 \$75.92 \$127.27 \$127.27 \$111.13 \$115.73 \$143.27 \$0.00 \$171.84 \$172.00 \$171.84 \$18.38.746 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006 \$1.00.006	\$31,94 \$78,13 \$87,27 \$97,01 \$12,90 \$11,29,90 \$146,30 \$19,93 \$143,10 \$10,90 \$179,93 \$180,12  Foster Care  144,615 11,705 11,170	Adults  \$34.10 \$33.56 \$33.56 \$53.356 \$53.356 \$53.357 \$59.28 \$58.23 \$58.23 \$59.29 \$50.00 \$162.19 \$103.35 \$164.57  MAGI Pregnant Adults  48.37% \$6.58% \$1.34% \$6.58% \$4.40% \$4.41%	Pregnant Adults  \$0.00 \$64.01 \$18.08 \$1.00	Emergency Services  50.04  50.19  50.34  50.34  50.33  50.03  50.01  50.11  50.11  50.00  50.00  50.00  Non-Citizens- Emergency Services  78.95%  78.95%  78.95%  78.95%  90.20%  90.2	S0.06   \$0.23   \$1.02   \$3.23   \$0.25   \$0.25   \$0.00   \$0.0	\$28.89 \$28.89 \$3.87 \$4.85 \$3.78 \$4.85 \$3.78 \$4.85 \$3.70 \$4.85 \$3.7
FY 201-12 FY 201-23 FY 201-24 FY 201-34 FY 201-35 FY 201-35 FY 201-36 FY 201-38	(OAP-A)  \$8.68 \$14.12 \$13.09 \$13.09 \$5.98 \$5.98 \$6.63 \$6.63 \$15.12 \$5.00 \$1.00 \$1.15.25 \$5.00 \$1.15.25 \$1.00 \$1.15.25 \$1.00 \$1.15.25 \$1.00 \$1.15.25	64 (OAP-B)  \$30.65 \$50.01 \$47.56 \$50.01 \$47.56 \$67.00 \$17.40 \$17.	to 59 (AND/AB)  \$34.54 \$61.26 \$62.26 \$62.20 \$15.20 \$113.20 \$113.20 \$112.088 \$136.61 \$0.00 \$170.02 \$165.68 \$166.04  Disabled Individuals to 59 (AND/AB)  \$3.15% \$0.57% \$2.59% \$2.9% \$1.20,57% \$2.9% \$1.20,57% \$	\$7.25 \$22.10 \$34.70 \$43.48 \$75.37 \$63.11 \$93.57 \$130.90 \$14.45 \$14.45 \$14.47 \$1	Caretakers to 68% FPL  \$61.04 \$99.00 \$85.65 \$1.50 \$1.5	Caretakers 69% to 133% FPL	\$70.17 \$174.55 \$72.24 \$81.14 \$106.41 \$106.55 \$104.85 \$104.85 \$106.20 \$	Cancer Program  \$0.00 \$0.00 \$0.00 \$0.00 \$6.03 \$99.29 \$140.07 \$0.00 \$188.571 \$185.71 Breast & Cervical Cancer Program \$0.000 \$0.0	(AFDC-C/BC) \$19.01 \$36.04 \$395.61 \$95.61 \$95.61 \$123.78 \$122.38 \$123.83 \$40.00 \$141.38 \$40.00 \$164.76 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95 \$171.95	Children  \$0.00 \$107.77 \$76.92 \$107.77 \$131.13 \$115.73 \$115.73 \$10.00 \$172.00	\$31,94 \$78.13 \$87.27 \$97.01 \$122.50 \$129.90 \$146.53 \$146.53 \$149.02 \$180.12 \$180.12 Foster Care	Adults  \$36,10 \$33,56 \$53,56 \$53,28 \$63,39 \$79,28 \$88,23 \$79,28 \$88,23 \$129,19 \$0,00 \$162,10 \$163,35 \$164,57  MAGI Pregnant Adults  44,37% \$2,40,1% \$6,55% \$	Pregnant Adults  50.00  \$4.00  \$5.41.00  \$3.8.08  \$3.8.08  \$5.79.89  \$82.73  \$5.57  \$5.00  \$5.40,78  \$5.67,33  \$5.00  \$5.40,78  \$5.67,33  \$5.00  \$5.67,33  \$	### Emergency Services    \$0.04     \$0.19     \$0.34     \$0.34     \$0.93     \$0.33     \$0.00	\$0.06 \$0.23 \$1.02 \$3.22 \$2.59 \$0.00	\$28.89 \$28.89 \$35.78 \$35.78 \$35.78 \$35.78 \$35.78 \$35.78 \$35.78 \$45.78 \$3

						Cui	rent Year Projecti	on								
ACCOUNTABLE CARE COLLABORATIVE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Estimated Expenditure for RAEs in the ACC	\$5,233,939	\$1,480,056	\$8,389,231	\$1,478,267	\$20,508,853	\$9,491,339	\$45,090,287	\$19,669	\$53,913,583	\$8,046,422	\$2,801,675	\$1,636,244	\$413,380	\$0	SO So	\$158,502,946
KPI Payment	\$1,063,131	\$304,760	\$1,680,489	\$298,196	\$4,118,990	\$1,699,030	\$8,351,074	\$3,816	\$10,932,676	\$1,549,878	\$567,189	\$302,949	\$66,363	\$120	\$0	\$30,938,660
Performance Pool Payment	\$728,461	\$207,735	\$1,145,742	\$183,878	\$2,814,493	\$1,004,190	\$5,284,017	\$2,525	\$7,323,012	\$998,848	\$389,354	\$193,614	\$36,714	\$101	\$0	\$20,312,686
FY 2018-19 R-08 Assorted Medicaid Savings Initiatives	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2020-21 Total Expenditure	\$7,025,531	\$1,992,551	\$11,215,462	\$1,960,341	\$27,442,336	\$12,194,559	\$58,725,378	\$26,010	\$72,169,271	\$10,595,148	\$3,758,218	\$2,132,807	\$516,457	\$221	\$0	\$209,754,292
Estimated FY 2020-21 Per Capita Cost	\$145.00	\$148.00	\$170.00	\$134.00	\$159.00	\$149.00	\$154.00	\$181.00	\$165.00	\$161.00	\$180.00	\$162.00	\$150.00	\$0.00	\$0.00	\$154.00
		•		•	•	Rec	uest Year Projecti	on		•		•				
ACCOUNTABLE CARE COLLABORATIVE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Estimated Expenditure for RAEs in the ACC	\$5,293,898	\$1,498,475	\$8,578,758	\$1,494,977	\$20,508,962	\$9,865,517	\$49,177,841	\$19,872	\$54,820,144		\$2,828,379	\$1,784,075		\$0	\$0	\$164,853,457
KPI Payment	\$1,074,392	\$303,395	\$1,738,884	\$294,553	\$4,222,344	\$1,921,412	\$9,440,849	\$4,078	\$10,957,966		\$577,639	\$342,879		\$0	\$0	\$32,621,248
Performance Pool Payment	\$742,946	\$210,090	\$1,190,833	\$209,837	\$2,911,187	\$1,347,275	\$6,400,468	\$2,792	\$7,652,916	\$1,142,172	\$397,692	\$232,261	\$58,678	\$0	\$0	\$22,499,149
FY 2018-19 R-08 Assorted Medicaid Savings Initiatives	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Estimated FY 2021-22 Total Expenditure	\$7,111,236		\$11,508,475	\$1,999,367	\$27,642,493	\$13,134,204	\$65,019,158				\$3,803,710	\$2,359,215		\$0		\$219,973,854
Estimated FY 2021-22 Per Capita Cost	\$146.00	\$147.00	\$166.00	\$145.00	\$135.00	\$164.00	\$160.00	\$186.00	\$172.00	\$172.00	\$180.00	\$163.00	\$167.00	\$0.00	\$0.00	\$156.00
						O	ut Year Projection	1								
ACCOUNTABLE CARE COLLABORATIVE	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL
Estimated Expenditure for RAEs in the ACC	\$6,121,473		\$8,812,655	\$1,680,565	\$20,508,962	\$10,811,403	\$55,871,634		\$58,663,662	\$9,618,583	\$2,879,727	\$2,021,749				\$179,170,725
KPI Payment	\$1,153,712		\$1,784,376	\$321,917	\$4,222,349	\$2,103,622	\$10,633,958	\$4,102	\$11,582,449		\$586,321	\$385,391		\$0	\$0	\$35,035,052
Performance Pool Payment	\$751,457	\$212,705	\$1,217,736	\$212,208	\$2,911,202	\$1,400,388	\$6,980,687	\$2,820	\$7,781,600		\$401,482	\$253,245		\$0	\$0	\$23,400,589
FY 2018-19 R-08 Assorted Medicaid Savings Initiatives	\$0			\$0	\$0		\$0			ψo	\$0					\$0
Estimated FY 2022-23 Total Expenditure	\$8,026,642		\$11,814,767	\$2,214,690	\$27,642,513	\$14,315,413	\$73,486,279				\$3,867,530	\$2,660,385				\$237,606,366
Estimated FY 2022-23 Per Capita Cost	\$160.00	\$158.00	\$166.00	\$145.00	\$113.00	\$172.00	\$162.00	\$186.00	\$172.00	\$172.00	\$180.00	\$165.00	\$169.00	\$0.00	\$0.00	\$154.00
Note: Current and Request Year Projections are calculated in pages EI-7:	and EI-8.															

	Cash Based Actuals by Provider		
ACCOUNTABLE CARE COLLABORATIVE	ACC: RAE/Regional Care Collaboration Organizations (RCCOs)	ACC: Statewide Data and Analytics Contractor (SDAC)	TOTAL
FY 2013-14	\$33,826,431	\$2,902,500	\$36,728,931
FY 2014-15	\$65,620,330	\$2,950,000	\$68,570,330
FY 2015-16	\$100,891,291 \$137,974,203	\$3,059,475	\$103,950,766
FY 2016-17 FY 2017-18	\$137,974,203 \$146,273,678	\$2,975,000 \$2,250,000	\$140,949,203 \$148,523,678
FY 2017-18 FY 2018-19	\$146,273,678 \$144.941.471	\$2,230,000	\$148,323,678 \$144.941.471
FY 2019-20	\$167,580,760	\$0	\$167,580,760
Estimated FY 2020-21	\$209,754,292	\$0	\$209,754,292
Estimated FY 2021-22	\$219,973,854	\$0	\$219,973,854
Estimated FY 2022-23	\$237,606,366 ercent Change in Cash Based Actu	\$0	\$237,606,366
ACCOUNTABLE CARE COLLABORATIVE	ACC: RAE/Regional Care	ACC: Statewide Data and Analytics	TOTAL
FY 2012-13	Collaboration Organizations (RCCOs)  0.00%	Contractor (SDAC)	0.009
FY 2013-14	0.00%	0.00%	0.00
FY 2013-14	100.00%	100.00%	100.009
FY 2014-15	93.99%	1.64%	86.69
FY 2015-16	53.75%	3.71%	51.60
FY 2016-17	36.76%	-2.76%	35.59
FY 2017-18	6.02%	-24.37%	5.37
FY 2018-19	-0.91%	-100.00%	-2.419
Estimated FY 2020-21	44.72%	0.00%	44.729
Estimated FY 2021-22	4.87%	0.00%	4.879
Estimated FY 2022-23	8.02% untable Care Collaborative Enroll	0.00%	8.029
	ACC: RAE/Regional Care	ACC: Statewide Data and Analytics	
ACCOUNTABLE CARE COLLABORATIVE	ACC: RAE/Regional Care Collaboration Organizations (RCCOs)	Contractor (SDAC)	TOTAL <sup>(2)</sup>
FY 2011-12 FY 2012-13	-	•	-
FY 2013-14	-	-	
FY 2013-14	226,499	226,499	622,871
FY 2014-15	455,426	455,426	455,426
FY 2015-16	751,742	751,742	751,742
FY 2016-17 FY 2017-18	931,919	931,919	931,919
FY 2017-18 FY 2018-19	937,858 951,521	937,858 951,521	937,858 951,521
FY 2018-19 FY 2019-20	1,038,059	951,521	951,521
Estimated FY 2020-21	1,148,572		1,148,572
Estimated FY 2021-22	1.194.590	_	1,194,590
Estimated FY 2022-22	1,298,339	-	1,298,339
	Annual Percent Change in Enrollm	ent	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
FY 2015-16 FY 2016-17	65.06% 23.97%	65.06% 23.97%	65.069 23.979
FY 2017-18	0.64%	0.64%	0.649
FY 2017-18 FY 2018-19	1.46%	1.46%	1.469
Estimated FY 2020-21	20.71%	-100.00%	20.719
Estimated FY 2020-21 Estimated FY 2021-22	4 01%	0.00%	4 019
Estimated FY 2021-22 Estimated FY 2022-23	8.68%	0.00%	8.68%
	Cost Per Enrollee	·	
ACCOUNTABLE CARE COLLABORATIVE	ACC: RAE/Regional Care Collaboration Organizations (RCCOs)	ACC: Statewide Data and Analytics Contractor (SDAC)	TOTAL
	Commonation Organizations (ICCCO3)	,	
FY 2014-15	\$74.27	\$6.37	\$80.65
FY 2015-16	\$74.27 \$87.29	\$6.37 \$3.92	\$80.65 \$91.22
FY 2015-16 FY 2016-17	\$74.27 \$87.29 \$108.26	\$6.37 \$3.92 \$3.28	\$91.22 \$111.54
FY 2015-16 FY 2016-17 FY 2017-18	\$74.27 \$87.29 \$108.26 \$147.12	\$6.37 \$3.92 \$3.28 \$3.17	\$91.22 \$111.54 \$150.25
FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	\$74.27 \$87.29 \$108.26 \$147.12 \$152.33	\$6.37 \$3.92 \$3.28 \$3.28 \$3.17 \$0.00	\$91.22 \$111.54 \$150.25 \$152.33
FY 2015-16 FY 2016-16 FY 2017-18 FY 2018-19 Estimated FY 2028-19	\$74.27 \$87.29 \$108.26 \$147.12 \$152.33 \$182.62	\$6.37 \$3.92 \$3.28 \$3.17 \$0.00	\$91.22 \$111.54 \$150.25 \$152.33 \$182.62
FY 2013-16 FY 2016-17 FY 2017-18 FY 2017-18 FStimated FY 2020-21 Estimated FY 2021-29	\$74.27 \$87.29 \$108.26 \$147.12 \$152.33	\$6.37 \$3.92 \$3.28 \$3.28 \$3.17 \$0.00	\$91.22 \$111.54 \$150.25 \$152.33 \$182.62 \$184.14
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 Estimated FY 2007-21 Estimated FY 2007-22 Estimated FY 2007-23	\$74.27 \$87.29 \$108.26 \$147.12 \$152.33 \$182.62 \$184.14	\$6.37 \$3.92 \$3.28 \$3.17 \$0.00 \$0.00 \$0.00	\$91.22 \$111.54 \$150.29 \$152.33 \$182.62 \$184.14
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 Firmated FY 2002-23 Firmated FY 2002-23 Firmated FY 2002-23 ACCOUNTABLE CARE COLLABORATIVE	\$74.27 \$87.29 \$180.25 \$147.12 \$182.25 \$182.25 \$182.45 \$184.14 \$184.14 \$20.00 Per Earoll Care ACC: RAE/Regional Care Collaboration Organizations (RCCOs)	\$6.37 \$3.92 \$1.32 \$3.17 \$5.00 \$5.00 \$5.00 \$5.00 \$6.00	\$91,22 \$111,54 \$150,29 \$152,33 \$182,62 \$184,14 \$183,01
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 Estimated FY 2002-22 Estimated FY 2002-22 Estimated FY 2022-23 ACCOUNTABLE CARE COLLABORATIVE FY 2015-16	\$74.27 \$87.29 \$108.26 \$147.12 \$152.33 \$182.62 \$184.14 \$183.01 Percent Change in Cost Per Enroll	\$6.37 \$3.92 \$3.28 \$3.17 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$91.22 \$111.54 \$150.29 \$152.33 \$182.62 \$184.14 \$183.01
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 Estimated FY 2002-23 Estimated FY 2002-23 ACCOUNTABLE CARE COLLABORATIVE FY 2015-16 FY 2016-17	\$74.27 \$87.29 \$1808.26 \$147.12 \$152.33 \$182.62 \$183.01 \$183.01 Percent Change in Cost Per Euroll ACC: RAE/Regional Care Collaboration Organizations (RCCOs)	\$6.37 \$3.92 \$1.32 \$3.17 \$5.00 \$5.00 \$5.00 \$5.00 \$6.00	\$91.22 \$111.54 \$150.29 \$152.33 \$182.62 \$184.14 \$183.01
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 Finance FY 200-22 Estimated FY 200-22 Estimated FY 200-22  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2015-16 FY 2017-18	\$74.27 \$87.29 \$1308.26 \$147.12 \$152.23 \$182.02 \$184.14 \$184.14 \$184.14 \$184.14 \$162.04 \$162.04 \$162.04 \$163.04	\$6.37 \$3.92 \$1.32 \$3.17 \$5.00 \$5.00 \$5.00 \$5.00 \$6.00	\$91.22 \$111.54 \$150.20 \$151.23 \$152.23 \$181.26 \$181.41 \$183.01 \$170.41
FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-19 Frimated FY 2007-21 Feitimeted FY 2007-22 Feitimeted FY 2007-22 Feitimeted FY 2007-22 ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2017-18 FY 2018-19	\$74.27 \$87.29 \$1808.26 \$147.12 \$152.33 \$182.02 \$183.01 Percent Change in Cost Per Euroll ACC: RAE/Reglonal Care Collaboration Organizations (RCCOs) \$17.53% \$24.02%	\$6.37 \$3.92 \$3.28 \$3.17 \$0.00	\$91.22 \$111.54 \$150.29 \$152.33 \$182.62 \$184.14 \$183.01 TOTAL
FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FEITHER FY 2017-21 FEITHER FY 2017-22 FEITHER FY 2017-22 FEITHER FY 2017-22 FOR THE FY 2017-22 FOR THE FY 2017-18 FY 2018-19 FY 2018-19 FY 2018-19 FEITHER FY 2017-21 FEITHER FY 2018-19 FEITHER FY 2017-21	\$74.27 \$87.29 \$180.25 \$147.12 \$182.25 \$182.20 \$184.14 \$184.14 \$184.14 \$184.14 \$185.25 \$185.20	\$6.37 \$3.92 \$3.28 \$3.17 \$0.00	\$91.22 \$111.54 \$150.20 \$151.23 \$181.26 \$181.41 \$183.01 TOTAL 13.111 22.288 34.749 13.88 13
FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-19 FY 2018-19 Feitimated FY 2002-23 Feitimated FY 2002-23 Feitimated FY 2002-23 Feitimated FY 2002-23  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2017-18 FEITIMATED FY 2018-19 FEITIMATED FY 2018-19 FEITIMATED FY 2018-19 FEITIMATED FY 2018-19 FEITIMATED FY 2018-21 FEITIMATED FY 2018-22 FEITIMATED FY 2018-22	\$74.27 \$87.29 \$87.20 \$180.25 \$147.12 \$182.62 \$187.12 \$182.62 \$181.81 \$	\$6.37 \$3.92 \$3.32 \$3.37 \$5.307 \$5.000 \$5.000 \$5.000 \$5.000 \$6.000	\$91.22 \$115.54 \$150.25 \$152.32 \$182.62 \$182.61 \$182.61 \$183.01 TOTAL
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 Estimated FY 2002-22 Estimated FY 2002-23  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 Estimated FY 2002-21 Estimated FY 2002-22 Estimated FY 2002-21	\$74.27 \$87.29 \$180.26 \$147.12 \$182.26 \$182.21 \$182.21 \$183.14 \$183.14 Percent Change in Cost Per Enrol ACC: RAE/Regional Care Collaboration Organizations (RCCOs) 24.02% 3.54% (1988) (1988) (1988) (1988) (1988) (1988) (1988)	\$6.37 \$3.92 \$3.32 \$3.38 \$3.37 \$5.00 \$5.000 \$5.000 \$5.000 \$6.000 \$	\$91.22 \$115.54 \$150.25 \$152.32 \$182.62 \$182.61 \$182.61 \$183.01 TOTAL
FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-19 Feinmated FY 2007-21 Feinmated FY 2007-22 Feinmated FY 2007-22 Feinmated FY 2007-22 Feinmated FY 2007-22  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FEInmated FY 2007-22 Feinmated FY 2007-21 Fernilmated FY 2007-21	\$74.27 \$87.29 \$87.20 \$180.25 \$147.12 \$182.25 \$	\$6.37 \$3.92 \$3.32 \$3.17 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$5.00 \$6.00	\$91.2 \$11.5 \$15.02 \$15.23 \$182.6 \$184.1 \$183.0 TOTAL 13.11 22.28 34.74 13.88 13.84 14.80 13.81 14.80
FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 Estimated FY 202-22 Estimated FY 202-22 Estimated FY 202-23  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2016-18 FY 2017-18 FY 2018-19 Estimated FY 202-23	\$74.27 \$87.29 \$180.26 \$147.12 \$182.26 \$182.21 \$182.21 \$183.21 \$183.21 Percent Change in Cost Per Enrol Percent Change in Cost Per Enrol ACC: RAE/Regional Care Collaboration Organizations (RCCOs) \$2.402% \$3.595% \$1.985% \$0.835% \$0.	\$6.37 \$3.92 \$3.32 \$3.37 \$3.07 \$3.00 \$3.00 \$0.00	\$91.2 \$11.5 \$15.0.2 \$15.2.3 \$182.6 \$184.4 \$183.0 \$184.4 \$1.3 \$1.3 \$1.3 \$1.3 \$1.3 \$1.3 \$1.3 \$1.3
FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-19 FY 2017-19 Feinmated FY 2002-23 Feinmated FY 2002-23 Feinmated FY 2002-23  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2017-18 FY 2015-16 FY 2016-17 FY 2017-18 FEInmated FY 2002-23 Feinmated FY 2002-23 Feinmated FY 2002-23 Feinmated FY 2002-23 Feinmated FY 2002-21 Feinmated FY 2002-22 Feinmated FY 2002-22 Feinmated FY 2002-23 Fe	\$74.27 \$87.29 \$87.20 \$180.25 \$147.12 \$182.25 \$187.20 \$187.20 \$187.20 \$188.20 \$	\$6.37 \$5.302 \$5.325 \$5.317 \$5.000 \$5.000 \$5.000 \$5.000 \$6.	\$91.2 \$115.5 \$150.2 \$152.3 \$182.6 \$184.1 \$183.0 TOTAL 13.11 22.28 34.74 19.88 0.83 0.83 0.61
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2018-19 Estimated FY 2002-22 Estimated FY 2002-22 Estimated FY 2002-23  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2016-18 FY 2018-19 Estimated FY 2002-21	\$74.27 \$57.29 \$57.29 \$187.20 \$187.12 \$	\$6,37 \$1302 \$1373 \$2107 \$2000	\$91.2 \$11.5 \$15.2 \$15.2,3 \$182.6 \$182.6 \$182.6 \$183.0 TOTAL 13.11 22.28 \$1.3,6 \$1.3,6 \$1.3,6 \$1.4,8,5 \$1.4,8,5 \$1.4,8,5 \$1.5,8,0
FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 Estimated FY 2002-23 Estimated FY 2002-23  ACCOUNTABLE CARE COLLABORATIVE  FY 2018-19 FY 2018-19 FY 2018-19 FY 2018-19 FY 2018-19 Estimated FY 2002-23 Estimated FY 2002-23 FY 2018-19 Estimated FY 2002-23 Estimated FY 2002-23 Estimated FY 2002-23 Estimated FY 2002-21 FY 2002-11 PMPM Administration Fee Number of Monthe Paid Estimated FY 2002-21 Base Expenditure FY 2002-18 Est Expenditure FY 2002-18 Est Expenditure FY Parameter F	\$74.27 \$87.29 \$87.29 \$108.26 \$147.12 \$182.26 \$147.12 \$182.26 \$181.20 \$182.26 \$183.30 Percent Change in Cost Per Barroll ACC: RAE/Regional Care Collaboration Organizations (RCCOs) \$1.25.38 \$3.50% \$3.50% \$3.50% \$0.83% \$0.83% \$0.83% Current Year Projection \$1.148.572 \$1.148.572 \$1.185.502.486 \$3.93%,660 \$3.93%,660 \$3.93%,660 \$3.93%,660	\$6.37 \$5.302 \$5.328 \$5.317 \$5.000 \$5.000 \$5.000 \$5.000 \$6.	\$91.2 \$111.5 \$150.2 \$152.3 \$182.6 \$184.1 \$183.0 TOTAL 13.11 22.28 34.74 19.88 0.83 0.63 1.148.57 \$158.502.94 \$310.98.66 \$320.12.68
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 Festimated FY 2012-12 Festimated FY 2012-22 Festimated FY 2012-22 Festimated FY 2012-22 Festimated FY 2012-23 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2018-19 FY 2018-19 FESTIMATED FY 2012-23 FESTIMATED	\$74.27 \$87.29 \$87.29 \$18.20 \$147.12 \$18.20 \$147.12 \$18.20 \$20.21.266 \$20.31.266	\$6,37 \$1,302 \$1,302 \$1,317 \$1,000 \$1,	\$91.2 \$111.5 \$150.2 \$152.3 \$182.6 \$182.6 \$183.0 \$18
FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 Estimated FY 2002-23 Estimated FY 2002-23 Estimated FY 2002-23  ACCOUNTABLE CARE COLLABORATIVE  FY 2015-16 FY 2016-17 FY 2016-17 FY 2016-17 FY 2016-17 FY 2018-19 Estimated FY 2002-23 Estimated FY 2002-23 Estimated FY 2002-23 Estimated FY 2002-21 FY 2002-21 Base Executions FY 2002-21 PMPM Administration Fee Number of Monthe Paid Estimated FY 2002-21 Base Executions FY 2002-21 PMPM Administration Fee Number of Monthe Paid Estimated FY 2002-23 Base Executions FY 2002-21 Base Executions FY 2018-19 R-08 Assorted Medicaid Savinas Initiatives FY 2018-19 R-08 Assorted Medicaid Savinas Initiatives FY 2018-19 R-08 Assorted Medicaid Savinas Initiatives FY 2018-10 R-08 Assorted Medicaid Savinas Initiatives	\$74.27 \$87.29 \$87.29 \$108.26 \$147.12 \$182.20 \$187.20 \$187.20 \$187.20 \$188.20 \$20 \$188.20 \$20 \$188.20 \$20 \$30 \$30 \$30 \$30 \$30 \$30 \$30 \$30 \$30 \$3	\$6.37 \$5.302 \$5.328 \$5.317 \$0.000 \$0.000 \$0.000 \$0.000 \$0.000 \$0.0000 \$0.0000 \$0.0000 \$0.0000 \$0.0000 \$0.0000 \$0.0000 \$0.00000 \$0.0000	\$91.2 \$115.5 \$150.2 \$152.3 \$182.6 \$184.1 \$183.0 \$170.4 \$13.11 \$13
FY 2015-16 FY 2016-17 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 Festimated FY 2012-12 Festimated FY 2012-22 Festimated FY 2012-22 Festimated FY 2012-22 Festimated FY 2012-23 FY 2015-16 FY 2016-17 FY 2017-18 FY 2017-18 FY 2018-19 FY 2018-19 FY 2018-19 FESTIMATED FY 2012-23 FESTIMATED	\$74.27 \$87.29 \$87.29 \$18.20 \$147.12 \$18.20 \$147.12 \$18.20 \$20.21.266 \$20.31.266	\$6,37 \$1,302 \$1,302 \$1,317 \$1,000 \$1,	\$91.22 \$111.54 \$150.25 \$152.32 \$182.62 \$184.14 \$183.01 TOTAL 13.11 22.28 34.74 1.136 19.88 9.88 9.88 9.88 9.88 9.88 9.88 9.8

	Request Year Projection		
ACCOUNTABLE CARE COLLABORATIVE	ACC: RAE/Regional Care Collaboration Organizations (RCCOs)	ACC: Statewide Data and Analytics Contractor (SDAC)	TOTAL
Estimated FY 2021-22 Enrollment	1,194,590	N/A	1.194.59
FY 2021-22 PMPM Administration Fee	\$11.50	N/A	
Number of Months Paid	12	N/A	
Estimated FY 2021-22 Base Expenditure	\$164,853,457		\$164,853,45
KPI Payment	\$32,621,248	\$0	\$32,621,24
Performance Pool Payment	\$22,499,149	\$0	\$22,499,14
FY 2018-19 R-08 Assorted Medicaid Savings Initiatives	\$0	\$0	
Total Bottom Line Impacts	\$55,120,397	\$0	\$55,120,39
Estimated FY 2021-22 Total Expenditure	\$219,973,854	\$0	\$219,973,8
Estimated FY 2021-22 Cost Per Enrollee	\$184.14	\$0.00	\$184.
% Change over FY 2020-21 Cost Per Enrollee	0.83%	0.00%	0.8
	ACC: RAE/Regional Care	ACC: Statewide Data and Analytics	
ACCOUNTABLE CARE COLLABORATIVE	Collaboration Organizations (RCCOs)	Contractor (SDAC)	TOTAL
ACCOUNTABLE CARE COLLABORATIVE  Estimated FY 2022-23 Enrollment			
	Collaboration Organizations (RCCOs)	Contractor (SDAC)	
Estimated FY 2022-23 Enrollment	Collaboration Organizations (RCCOs)	Contractor (SDAC)	
Estimated FY 2022-23 Enrollment FY 2022-23 PMPM Administration Fee	Collaboration Organizations (RCCOs)  1,298,339 \$11.50	Contractor (SDAC)  N/A  N/A	1,298,3
Estimated FY 2022-23 Enrollment FY 2022-23 PMPM Administration Fee Number of Montls Paid	Collaboration Organizations (RCCOs)  1,298,339  \$11.50  12	Contractor (SDAC)  N/A  N/A	1,298,3: \$179,170,7:
Estimated FV 2022-23 Enrollment FY 2022-23 PMPM Administration Fee Number of Months Paid Estimated FV 2022-23 Base Expenses	Collaboration Organizations (RCCOs)  1,298,339  \$11.50  12  \$179,170,725	Contractor (SDAC)  N/A  N/A  N/A  N/A	1,298,3: \$179,170,7: \$35,035,0:
Estimated FY 2022-23 Enrollment FY 2022-23 PMPM Administration Fee Number of Months Paid Estimated FY 2022-23 Base Expenditure KPI Payment	Collaboration Organizations (RCCOs)  1,298,339 \$11.50 12 \$179,170,725 \$35,035,055	N/A   N/A   N/A   N/A   S0	1,298,3: \$179,170,7: \$35,035,0: \$23,400,5:
Estimated FY 2022-23 Enrollment FY 2022-23 PMPM Administration Fee Number of Months Paid Estimated FY 2022-23 Base Expenditure KPI Payment Performance Pool Payment	Collaboration Organizations (RCCOs)  1,298,339  \$11.50  12  \$179,170,725  \$35,035,055  \$23,400,589	N/A   N/A   N/A   N/A   N/A   N/A   S0   S0	1,298,3 \$179,170,7: \$35,035,0 \$23,400,5i
Estimated FY 2022-23 Enrollment FY 2022-23 PMPM Administration Fee Number of Months Paid Estimated FY 2022-23 Base Expenditure FY 2022-23 Base Expenditure FY 2018-19 R-08 Assorted Medicaids Swips Indiatives FY 2018-19 R-08 Assorted Medicaids Swips Indiatives	Collaboration Organizations (RCCOs)  1,298,339  \$11.50  122  \$179,170,725  \$35,035,052  \$23,400,589  \$0	Contractor (SDAC)  N/A  N/A  N/A  S0  50  50  50	TOTAL  1,298,33  \$179,170,73  \$35,035,03  \$23,400,5,5  \$58,435,64  \$237,606,34
Estimated FY 2022-23 Enrollment FY 2022-23 PMPM Administration Fee Number of Months Paid Estimated FY 2022-23 Base Expenditure KFI PA System See See See See See See See See See S	Collaboration Organizations (RCCOs)  1,298,339  \$11,50  1,298,39  \$179,170,725  \$353,035,205  \$23,400,589  \$558,435,641	Contractor (SDAC)  N/A  N/A  N/A  N/A  N/A  S0  S0  S0  S0	1,298,3: \$179,170,7: \$35,035,0: \$23,400,5:  \$58,435,6:
Estimated FY 2022-23 Enrollment FY 2022-23 PAPPM Administration Fee Number of Monthe Paid Estimated FY 2022-23 Bes Expenditure KPI Paromete KPI Paromete FP 2021-81 Paid FP 408 Assorted Medicaid Savinus Initiatives Total Botton Line Impacts Estimated FY 2022-23 Total Expenditure Estimated FY 2022-23 Total Personal Estimated FY 2022-23 Cone Personalee	Collaboration Organizations (RCCOs)  1,298,339  \$11.50  \$11.50  \$11.50  \$17.70,725  \$35,055,052  \$35,405,89  \$55,435,641  \$323,400,589	Contractor (SDAC)  N/A  N/A  N/A  N/A  S0  S0  S0  S0  S0  S0  S0	1,298,3 \$179,170,7 \$35,035,0 \$23,400,5 \$8,435,6 \$237,606,3
Estimated FV 2022-23 Enrollment FY 2022-23 PAIPM Administration Fee Number of Months Faids Estimated FV 2022-23 Base Excenditure KPI Payment Performance Food Payment FY 2018-19 R-08 Assorted Medical Switzme Initiatives From Betton Line Impacts Estimated FY 2022-23 Total Expenditure Estimated FY 2022-23 Total Expenditure	Collaboration Organizations (RCCOs)    1,298,339     1,102     1,1	Contractor (SDAC)  NA  NA  NA  NA  S0  S0  S0  S0  S0  S0  S0  S00	1,298,3 \$179,170,7 \$35,035,6 \$23,400,5 \$58,435,6 \$237,606,3 \$1838
Estimated FY 2022-23 Eurollanem FY 2022-23 PAPPA Administration Fee Number of Montla Fadia  Estimated FY 2022-33 PAPPA Administration Fee Partnamed FY 2022-33 PAPPA Administration Fee Partnamed Feel Paymen FY 2018-19 R-08 Assorted Medical disvingal Initiatives FY 2018-19 R-08 Assorted Medical disvingal Initiatives FY 2018-19 R-08 Assorted Medical disvingal Initiatives Festimated FY 2012-23 Total Reston Line Impact Estimated FY 2012-23 Total Reston Line Impact Estimated FY 2012-23 Total Personalite Schange over FY 2012-12 Code Fer Estimated Schange over FY 2012-12 Code Fer Estimated	Collaboration Organizations (RCCOs)  1.298,339  \$11.50  1.20  \$1.79,170,225  \$53,935,5022  \$523,400,586  \$237,066,366  \$183,00  -0.61%	Contractor (SDAC)  NA  NA  NA  NA  S0  S0  S0  S0  S0  S0  S00  S0	1,298, \$179,170, \$35,035, \$23,400, \$58,435, \$237,606,

Exhibit J - Healthcare Affordability and Sustainability Fee Cash Funded Populations and Supplemental Payments

			d Expansion Popula arce of Funding	tions			
			020-21 Summary				
Eligibility Category	Caseload	penditure Expenditure	General Fund	Fund Cal Healthcare Affordability and Sustainability Fee Cash Fund	Medicaid Buy-in Cash Fund	Federal Funds	FMAP
Medicaid Expansion Clients				,			
MAGI Parents/Caretakers 69% to 133% FPL	81,695	\$252,975,114	\$0	\$25,448,246	\$0	\$227,526,868	89.949
Buy-In for Individuals with Disabilities	14,580	\$115,900,948	\$0	\$50,444,672	\$4,666,833	\$60,789,443	52.45
MAGI Adults	378,715	\$1,545,679,151	\$0	\$160,776,750	\$0	\$1,384,902,401	89.60
Non-Newly Eligibles	3,048	\$58,355,680	\$0	\$10,994,210	\$0	\$47,361,470	81.16
MAGI Parents/Caretakers 60% to 68% FPL	5,659	\$18,716,570	\$0	\$8,487,965	\$0	\$10,228,605	54.65
Continuous Eligibility for Children	18,372	\$39,032,474	\$0	\$17,701,226	\$0	\$21,331,248	54.65
Subtotal of Medicaid Expansion Clients		\$2,030,659,937	\$0	\$273,853,069	\$4,666,833	\$1,752,140,035	
Supplemental Payments		, , ,					
Inpatient Hospital Rates		\$547,598,700	\$0	\$214,275,372	\$0	\$333,323,328	60.87
Outpatient Hospital Rates		\$568,606,028	\$0	\$222,495,538	\$0	\$346,110,490	60.87
Essential Access Payment		\$19,000,000	\$0	\$7,434,700	\$0	\$11,565,300	60.87
Hospital Quality Incentive Payment		\$90,663,203	\$0	\$41,115,763	\$0	\$49,547,440	54.65
Subtotal of Supplemental Payments		\$1,225,867,931	\$0	\$485,321,373	\$0	\$740,546,558	505
Cash Fund Financing		\$1,223,867,931	(\$15,700,000)	\$15,700,000	\$0	\$740,340,338	<del>                                     </del>
Total		\$3,256,527,868	(\$15,700,000)	\$774,874,442	\$4,666,833	\$2,492,686,593	
1 Otal			021-22 Summary	3//4,8/4,442	34,000,033	32,492,000,393	
			021-22 Summary				
	Ex	penditure		Fund Cal			
Eligibility Category	Caseload	Expenditure	General Fund	Healthcare Affordability and Sustainability Fee Cash Fund	Medicaid Buy-in Cash Fund	Federal Funds	FMAP
Medicaid Expansion Clients							
MAGI Parents/Caretakers 69% to 133% FPL	80,208	\$240,301,187	\$0	\$24,192,730	\$0	\$216,108,457	89.939
Buy-in for Individuals with Disabilities	13,742	\$114,190,933	\$0	\$54,533,117	\$5,124,696	\$54,533,120	47.769
MAGI Adults	402,311	\$1,554,752,561	\$0	\$161,787,777	\$0	\$1,392,964,784	89.599
Non-Newly Eligibles	3,543	\$68,327,653	\$0	\$13,665,532	\$0	\$54,662,121	80.009
MAGI Parents/Caretakers 60% to 68% FPL	6,012	\$19,274,791	\$0	\$9,637,395	\$0	\$9,637,396	50.009
Continuous Eligibility for Children	18,611	\$39,409,414	\$0	\$19,704,706	\$0	\$19,704,708	50.009
Subtotal of Medicaid Expansion Clients		\$2,036,256,539	\$0	\$283,521,257	\$5,124,696	\$1,747,610,586	
Supplemental Payments							
Inpatient Hospital Rates		\$584,135,129	\$0	\$239,553,816	\$0	\$344,581,313	58.999
Outpatient Hospital Rates		\$603,210,284	\$0	\$247,376,537	\$0	\$355,833,747	58.99
Essential Access Payment		\$19,000,000	\$0	\$7,791,900	\$0	\$11,208,100	58.999
Hospital Quality Incentive Payment		\$90,663,203	\$0	\$45,331,601	\$0	\$45,331,602	50.009
Subtotal of Supplemental Payments		\$1,297,008,616	\$0	\$540,053,854	\$0	\$756,954,762	
Cash Fund Financing		\$0	(\$15,700,000)	\$15,700,000	\$0	\$0	
Total		\$3,333,265,155	(\$15,700,000)	\$839,275,111	\$5,124,696	\$2,504,565,348	
20112			022-23 Summary	0007,270,111	\$5,121,070	\$2,00 i,000,0 io	
	Ex	penditure	022-23 Summary	Fund Cal	culations		
Eligibility Category	Caseload	Expenditure	General Fund	Healthcare Affordability and	Medicaid Buy-in	Federal Funds	FMAP
Medicaid Expansion Clients	<del>-  </del>			Sustainability Fee Cash Fund	Cash Fund		<b>I</b>
MAGI Parents/Caretakers 69% to 133% FPL	83,255	\$254,719,095	\$0	\$25,634,520	\$0	\$229,084,575	89.949
Buy-in for Individuals with Disabilities	15,305	\$131,047,409	\$0 \$0	\$23,634,320 \$62,730,472	\$5,586,461	\$62,730,476	47.87
MAGI Adults	450,394	\$1,754,525,728	\$0 \$0	\$181,765,095	\$5,586,461	\$1,572,760,633	89.64
Non-Newly Eligibles	3,967	\$1,/34,323,728	\$0 \$0	\$181,765,095	\$0	\$61,702,158	80.00
			\$0 \$0				50.00
MAGI Parents/Caretakers 60% to 68% FPL	7,234	\$24,147,982	\$0 \$0	\$12,073,990	\$0 \$0	\$12,073,992	
Continuous Eligibility for Children	18,927	\$41,120,867		\$20,560,432		\$20,560,435	50.00
Subtotal of Medicaid Expansion Clients		\$2,282,688,779	\$0	\$318,190,049	\$5,586,461	\$1,958,912,269	
Supplemental Payments		A		****		A	50.0
Inpatient Hospital Rates		\$593,293,458	\$0	\$243,309,647	\$0	\$349,983,811	58.99
Outpatient Hospital Rates		\$609,237,588	\$0	\$249,848,335	\$0	\$359,389,253	58.99
Essential Access Payment		\$19,000,000	\$0	\$7,791,900	\$0	\$11,208,100	58.99
Hospital Quality Incentive Payment		\$90,663,203	\$0	\$45,331,601	\$0	\$45,331,602	50.00
Subtotal of Supplemental Payments		\$1,312,194,249	\$0	\$546,281,483	\$0	\$765,912,766	
Cash Fund Financing		\$0	(\$15,700,000)	\$15,700,000	\$0	\$0	
		\$3,594,883,028	(\$15,700,000)	\$880,171,532	\$5,586,461	\$2,724,825,035	

Exhibit J - Healthcare Affordability and Sustainability Fee Cash Funded Populations and Supplemental Payments

Healthcare Af	fordability and Su	ıstainability Fee	e	Fund Splits and Ser FY 2020-21	vice Category Impa	acts by Expansion Popu	lation	
MAGI Parents/Caretakers 69% to 133% FPL <sup>(1)</sup>			П					
	Caseload	Per Capita		Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,945.94		\$240,668,962	\$0	\$24,217,631	\$0	\$216,451,331
Community-Based Long-Term Care		\$1.22		\$99,295	\$0	\$9,929	\$0	\$89,366
Long-Term Care		\$0.00		\$0	\$0	\$0	\$0	\$0
Insurance		\$0.15		\$12,298	\$0	\$1,230	\$0	\$11,068
Service Management		\$149.27		\$12,194,559	\$0	\$1,219,456	\$0	\$10,975,103
Total	81,695	\$3,096.58		\$252,975,114	\$0	\$25,448,246	\$0	\$227,526,868
Buy-In for Individuals with Disabilities								
	Caseload	Per Capita		Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$6,744.74		\$98,338,292	\$0	\$42,800,710	\$3,959,660	\$51,577,922
Community-Based Long-Term Care		\$1,063.53	Ш	\$15,506,297	\$0	\$6,748,953	\$624,372	\$8,132,972
Long-Term Care		\$6.59	Н	\$96,018	\$0	\$41,791	\$3,866	\$50,361
Insurance Source Management	+	\$0.00 \$134.45	Н	\$0 \$1,960,341	\$0 \$0	\$0 \$853,218	\$0 \$78,935	\$0 \$1,028,188
Service Management Total	14,580	\$134.45 \$7,949.31	Н	\$1,960,341 \$115,900,948	\$0 \$0	\$853,218 \$50,444,672	\$/8,935 \$4,666,833	\$1,028,188
MAGI Adults <sup>(1)</sup>	14,580	3/,949.31	H	3115,900,948	50	\$50,444,072	34,000,833	30U,/89,443
MAGI Adults**	Caseload	Per Capita		Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds <sup>(1)</sup>
Acute Care		\$3,904.75		\$1,478,790,029	\$0	\$154,087,838	\$0	\$1,324,702,191
Community-Based Long-Term Care		\$11.31	Ш	\$4,284,676	\$0	\$428,467	\$0	\$3,856,209
Long-Term Care		\$10.97	Ш	\$4,153,398	\$0	\$415,340	\$0	\$3,738,058
Insurance Source Management		\$0.30 \$154.04		\$112,502 \$58,338,546	\$0 \$0	\$11,250 \$5,833,855	\$0 \$0	\$101,252 \$52,504,691
Service Management	378,715	\$4,081.37	H	\$1,545,679,151	\$0 \$0	\$160,776,750	\$0 \$0	\$1,384,902,401
Total Non-Newly Eligibles	3/8,/15	\$4,081.37	Н	\$1,545,079,151	\$0	\$100,770,750	30	\$1,384,902,401
. with the same of	Caseload	Per Capita		Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care	-	\$19,002.72		\$57,912,742	\$0	\$10,910,761	\$0	\$47,001,981
Community-Based Long-Term Care	-	\$9.16		\$27,916	\$0	\$5,259	\$0	\$22,657
Long-Term Care	-	\$9.01		\$27,459	\$0	\$5,173	\$0	\$22,286
Insurance	-	\$0.24	Н	\$731	\$0	\$138	\$0	\$593
Service Management	3,048	\$126.93 <b>\$19,876.18</b>	Н	\$386,832 \$58,355,680	\$0 \$0	\$72,879 <b>\$10,994,210</b>	\$0 \$0	\$313,953 \$47,361,470
Total MAGI Parents/Caretakers 60% to 68% FPL	3,048	\$19,870.18	Н	\$58,555,080	30	\$10,994,210	30	\$47,301,470
MAGIT ATEMS/CATEGORES 507/6 to 507/6 FTL	Caseload	Per Capita		Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care	-	\$3,128.60	Ш	\$17,704,695	\$0	\$8,029,079	\$0	\$9,675,616
Community-Based Long-Term Care	-	\$6.28	Ш	\$35,545	\$0	\$16,120	\$0	\$19,425
Long-Term Care	-	\$1.91	Н	\$10,816	\$0	\$4,905 \$5,856	\$0	\$5,911
Insurance Service Management	-	\$2.28 \$168.33	Н	\$12,913 \$952,601	\$0 \$0	\$5,856 \$432,005	\$0 \$0	\$7,057 \$520,596
Total	5,659	\$3,307.40	H	\$18,716,570	\$0	\$8,487,965	\$0 \$0	\$10,228,605
Continuous Eligibility for Children	2,009	23,007.10	Ħ	220,710,070	30	\$0,107,700	30	-10,220,300
	Caseload	Per Capita		Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$1,824.47		\$33,518,791	\$0	\$15,200,772	\$0	\$18,318,019
Community-Based Long-Term Care	-	\$142.39		\$2,615,926	\$0	\$1,186,322	\$0	\$1,429,604
Long-Term Care	-	\$0.00		\$0	\$0	\$0	\$0	\$0
Insurance	-	\$0.07	Н	\$1,249	\$0	\$566	\$0	\$683
Service Management	19 272	\$157.66 \$2.124.50	Н	\$2,896,508	\$0	\$1,313,566	\$0	\$1,582,942
Total FY 2020-21 Summary	18,372	\$2,124.59	Н	\$39,032,474	\$0	\$17,701,226	\$0	\$21,331,248
FY 2020-21 Summary	Caseload	Per Capita		Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Total	502,069	\$4,044.59	П	\$2,030,659,937	\$0	\$273,853,069	\$4,666,833	\$1,752,140,035
(1) The matching federal funds for this population will decre			dan			,,	,,	, , , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2) Figures may not sum due to rounding.								

Exhibit J - Healthcare Affordability and Sustainability Fee Cash Funded Populations and Supplemental Payments

	are Allordabilit	y and Sustainabii	FY 2021-		ory Impacts by Expansion	on Population	
MAGI Parents/Caretakers 69% to 133	3% FPL <sup>(1)</sup>						
	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,830.8	\$227,048,850	\$0	\$22,867,497	\$0	\$204,181,35
Community-Based Long-Term Care		\$1.32	\$105,835	\$0	\$10,583	\$0	\$95,25
Long-Term Care		\$0.00	\$0	\$0	\$0	\$0	\$
Insurance		\$0.15	\$12,298	\$0	\$1,230	\$0	\$11,06
Service Management		\$163.75	\$13,134,204	\$0	\$1,313,420	\$0	\$11,820,78
Total	80,208	\$2,995.98	\$240,301,187	\$0	\$24,192,730	\$0	\$216,108,45
Buy-In for Individuals with Disabilities			0=10,001,101		4-1,-2-1,	-	,,
	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$6,966.35	\$95,731,636	\$0	\$45,717,680	\$4,296,275	\$45,717,68
Community-Based Long-Term Care		\$1,190.58	\$16,360,963	\$0	\$7,813,355	\$734,252	\$7,813,35
Long-Term Care		\$7.20	\$98,967	\$0	\$47,263	\$4,441	\$47,20
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$
Service Management		\$145.49	\$1,999,367	\$0	\$954,819	\$89,728	\$954,82
Total	13,742	\$8,309.63	\$114,190,933	\$0	\$54,533,117	\$5,124,696	\$54,533,12
MAGI Adults <sup>(1)</sup>	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds <sup>(1)</sup>
Acute Care		\$3,688.23	\$1,483,812,580	\$0	\$154,693,780	\$0	\$1,329,118,80
Community-Based Long-Term Care		\$11.06	\$4,450,975	\$0	\$445,097	\$0	\$4,005,87
Long-Term Care		\$10.26	\$4,126,513	\$0	\$412,651	\$0	\$3,713,8
Insurance		\$0.27	\$108,460	\$0	\$10,846	\$0	\$97,6
Service Management		\$154.74	\$62,254,033	\$0	\$6,225,403	\$0	\$56,028,63
Total	402,311	\$3,864.56	\$1,554,752,561	\$0	\$161,787,777	\$0	\$1,392,964,78
Non-Newly Eligibles							
	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care	-	\$18,395.02	\$65,178,223	\$0	\$13,035,645	\$0	\$52,142,57
Community-Based Long-Term Care	-	\$55.54	\$196,790	\$0	\$39,358	\$0	\$157,43
Long-Term Care	-	\$51.57	\$182,738	\$0	\$36,548	\$0	\$146,19
Insurance	-	\$1.35	\$4,773	\$0	\$955	\$0	\$3,8
Service Management	-	\$780.39	\$2,765,129	\$0	\$553,026	\$0	\$2,212,10
Total	3,543	\$19,283.87	\$68,327,653	\$0	\$13,665,532	\$0	\$54,662,12
MAGI Parents/Caretakers 60% to 68	% FPL Caseload	Per Capita	Total Funds <sup>(2)</sup>	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Acute Care	-	\$3,050.88	\$18,341,064	\$0	\$9,170,532	\$0	\$9,170,53
Community-Based Long-Term Care	-	\$5.97	\$35,864	\$0	\$17,932	\$0	\$17,9
Long-Term Care	-	\$1.69	\$10,152	\$0	\$5,076	\$0	\$5,0
	-	\$2.14	\$12,840	\$0	\$6,420	\$0	\$6,4
Insurance		0145 52			6427 425	\$0	\$437,4
Service Management	-	\$145.53	\$874,871	\$0	\$437,435		
Service Management  Fotal	6,012	\$3,206.20	\$874,871 <b>\$19,274,791</b>	\$0 <b>\$0</b>	\$9,637,395	\$0	\$9,637,3
Service Management  Fotal	6,012					Medicaid Buy-in Fund	\$9,637,39 Federal Funds
Service Management  Fotal		\$3,206.20	\$19,274,791	\$0	\$9,637,395 Healthcare Affordability	Medicaid Buy-in	\$9,637,39  Federal Funds  \$16,910,53
Service Management Fotal Continuous Eligibility for Children	Caseload	\$3,206.20 Per Capita	\$19,274,791 Total Funds <sup>(2)</sup>	General Fund  \$0 \$0 \$0	\$9,637,395  Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds
Service Management Fotal Continuous Eligibility for Children Acute Care	Caseload	\$3,206.20  Per Capita  \$1,817.30 \$146.71 \$0.00	\$19,274,791  Total Funds (2)  \$33,821,070  \$2,730,314  \$0	S0   S0   S0   S0   S0   S0   S0   S0	\$9,637,395  Healthcare Affordability and Sustainability Fee \$16,910,535 \$1,365,157 \$0	Medicaid Buy-in Fund \$0 \$0 \$0	Federal Funds \$16,910,5: \$1,365,1:
Service Management Total Continuous Eligibility for Children Acute Care Community-Based Long-Term Care	Caseload	\$3,206.20  Per Capita  \$1,817.30  \$146.71	\$19,274,791  Total Funds (2)  \$33,821,070 \$2,730,314	\$0  General Fund  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	\$9,637,395  Healthcare Affordability and Sustainability Fee \$16,910,535 \$1,365,157	Medicaid Buy-in Fund \$0 \$0	Federal Funds
Service Management Fotal Continuous Eligibility for Children  Acute Care Community-Based Long-Term Care Long-Term Care	Caseload	\$3,206.20  Per Capita  \$1,817.30 \$146.71 \$0.00	\$19,274,791  Total Funds (2)  \$33,821,070  \$2,730,314  \$0	S0   S0   S0   S0   S0   S0   S0   S0	\$9,637,395  Healthcare Affordability and Sustainability Fee \$16,910,535 \$1,365,157 \$0	Medicaid Buy-in Fund \$0 \$0 \$0	\$16,910,5 \$1,365,1
Service Management Fotal Continuous Eligibility for Children Acute Care Community-Based Long-Term Care .ong-Term Care .surance Service Management	Caseload	\$3,206.20  Per Capita  \$1,817.30 \$146.71 \$0.00 \$0.07	\$19,274,791  Total Funds (2)  \$33,821,070  \$2,730,314  \$0  \$1,211	\$0  General Fund  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	\$9,637,395  Healthcare Affordability and Sustainability Fee \$16,910,535 \$1,365,157 \$0 \$605	Medicaid Buy-in Fund  \$0 \$0 \$0 \$0 \$0	\$16,910,5 \$1,365,1 \$6 \$1,428,4
Service Management Total Continuous Eligibility for Children  Acute Care Community-Based Long-Term Care Long-Term Care Insurance	Caseload	\$3,206.20 Per Capita \$1,817.30 \$146.71 \$0.00 \$0.07 \$153.51 \$2,117.58	\$19,274,791  Total Funds (2)  \$33,821,070  \$2,730,314  \$0  \$1,211  \$2,856,819  \$39,409,414	\$0  General Fund  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	\$9,637,395  Healthcare Affordability and Sustainability Fee \$16,910,535 \$1,365,157 \$0 \$605 \$1,428,409 \$19,704,706	Medicaid Buy-in Fund  \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$16,910,5: \$1,365,1: \$66 \$1,428,4 \$19,704,70
Service Management Total  Continuous Eligibility for Children  Acute Care Community-Based Long-Term Care Long-Term Care Insurance Service Management Total	Caseload	\$3,206.20 Per Capita \$1,817.30 \$146.71 \$0.00 \$0.07 \$153.51	\$19,274,791  Total Funds (2)  \$33,821,070  \$2,730,314  \$0  \$1,211  \$2,856,819	\$0  General Fund  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$	\$9,637,395  Healthcare Affordability and Sustainability Fee \$16,910,335 \$1,365,157 \$0 \$605 \$1,428,409	Medicaid Buy-in Fund \$0 \$0 \$0 \$0 \$0	\$16,910,5 \$1,365,1 \$6 \$1,428,4

Exhibit J - Healthcare Affordability and Sustainability Fee Cash Funded Populations and Supplemental Payments

Healtho	Healthcare Affordability and Sustainability Fee - Fund Splits and Service Category Impacts by Expansion Population FY 2022-23							
MAGI Parents/Caretakers 69% to 13	3% FPL <sup>(1)</sup>			-				
Militar I menaj caretanti 50 / 5 to 12	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds	
Acute Care		\$2,886.04	\$240,277,054	\$0	\$24,190,317	\$0	\$216,086,737	
Community-Based Long-Term Care		\$1.37	\$114,330	\$0	\$11,432	\$0	\$102,898	
Long-Term Care		\$0.00	\$0	\$0	\$0	\$0	\$0	
Insurance		\$0.15	\$12,298	\$0	\$1,230	\$0	\$11,068	
Service Management		\$171.95	\$14,315,413	\$0	\$1,431,541	\$0	\$12,883,872	
Total	83,255	\$3,059.51	\$254,719,095	\$0	\$25,634,520	\$0	\$229,084,575	
Buy-In for Individuals with Disabilitie	es							
	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds	
Acute Care		\$7,255.50	\$111,045,362	\$0	\$53,155,787	\$4,733,787	\$53,155,788	
Community-Based Long-Term Care		\$1,155.51	\$17,685,057	\$0	\$8,465,577	\$753,902	\$8,465,578	
Long-Term Care		\$6.68	\$102,300	\$0	\$48,969	\$4,361	\$48,970	
Insurance Service Management		\$0.00 \$144.70	\$0 \$2,214,690	\$0 \$0	\$0 \$1,060,139	\$0 \$94,411	\$0 \$1,060,140	
Total	15,305	\$8,562.39	\$131,047,409	\$0 \$0	\$62,730,472	\$5,586,461	\$62,730,476	
	15,505	30,302.37	\$131,047,407	30	302,730,472	\$3,300,401	302,730,470	
MAGI Adults <sup>(1)</sup>	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds <sup>(1)</sup>	
Acute Care		\$3,718.83	\$1,674,940,478	\$0	\$173,806,570	\$0	\$1,501,133,908	
Community-Based Long-Term Care		\$10.76	\$4,846,479	\$0	\$484,648	\$0	\$4,361,831	
Long-Term Care		\$9.47 \$0.24	\$4,267,171	\$0 \$0	\$426,717	\$0 \$0	\$3,840,454	
Insurance Service Management		\$156.23	\$108,458 \$70,363,142	\$0	\$10,846 \$7,036,314	\$0 \$0	\$97,612 \$63,326,828	
Total	450,394	\$3,895.54	\$1,754,525,728	\$0	\$181,765,095	\$0	\$1,572,760,633	
Non-Newly Eligibles	430,374	93,073.34	31,734,323,720	30	\$101,703,073	50	91,572,700,033	
	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds	
Acute Care	-	\$18,554.17	\$73,598,331	\$0	\$14,719,666	\$0	\$58,878,665	
Community-Based Long-Term Care	-	\$54.01	\$214,245	\$0	\$42,849	\$0	\$171,396	
Long-Term Care	-	\$47.20	\$187,209	\$0	\$37,442	\$0	\$149,767	
Insurance	-	\$1.20	\$4,775	\$0	\$955	\$0	\$3,820	
Service Management Total	3,967	\$787.34 <b>\$19,443.93</b>	\$3,123,138 \$77,127,698	\$0 \$0	\$624,628 \$15,425,540	\$0 <b>\$0</b>	\$2,498,510 <b>\$61,702,158</b>	
MAGI Parents/Caretakers 60% to 68		317,443.73	\$77,127,098	30	\$13,423,340	30	301,702,136	
	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds	
Acute Care	-	\$3,202.94	\$23,169,802	\$0	\$11,584,901	\$0	\$11,584,901	
Community-Based Long-Term Care	-	\$5.70	\$41,198	\$0	\$20,599	\$0	\$20,599	
Long-Term Care	-	\$1.50 \$2.22	\$10,815 \$16,094	\$0 \$0	\$5,407 \$8,047	\$0 \$0	\$5,408 \$8,047	
Insurance Service Management	-	\$125.81	\$910,073	\$0 \$0	\$455,036	\$0 \$0	\$455,037	
Total	7,234	\$3,338.16	\$24,147,982	\$0	\$12,073,990	\$0	\$12,073,992	
Continuous Eligibility for Children	,	,		50	,-,-,-,-	.,0	,-,-,-,-,-	
	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds	
Acute Care	-	\$1,868.69	\$35,368,643	\$0	\$17,684,321	\$0	\$17,684,322	
Community-Based Long-Term Care	-	\$149.24	\$2,824,671	\$0	\$1,412,335	\$0	\$1,412,336	
Long-Term Care	-	\$0.00	\$0	\$0	\$0	\$0	\$0	
Insurance	-	\$0.06	\$1,167	\$0	\$583	\$0	\$584	
Service Management	18,927	\$154.61	\$2,926,386	\$0	\$1,463,193	\$0 <b>\$0</b>	\$1,463,193	
Total FY 2022-23 Summary	18,92/	\$2,172.61	\$41,120,867	\$0	\$20,560,432	\$0	\$20,560,435	
1 1 2022-23 Summary	Caseload	Per Capita	Total Funds (2)	General Fund	Healthcare Affordability and Sustainability Fee	Medicaid Buy-in Fund	Federal Funds	
Total	579,082	\$3,941.91	\$2,282,688,779	\$0	\$318,190,049	\$5,586,461	\$1,958,912,269	
						,,	. ,,,,	
	The matching federal funds for this population will be 90% and on going in accordance with the Affordable Care Act. Figures may not sum due to rounding.							

**Exhibit K - Upper Payment Limit Financing Summary of Upper Payment Limit Financing** 

Nursing Facilities UPL	FY 2020-21	FY 2021-22	FY 2022-23
Total Funds	\$8,050,462	\$8,185,709	\$8,323,230
General Fund	(\$8,050,462)	(\$8,185,710)	(\$8,323,229)
Cash Funds	\$8,050,462	\$8,185,709	\$8,323,230
Federal Funds	\$8,050,462	\$8,185,710	\$8,323,229
Home Health UPL			
Total Funds	\$940,661	\$956,464	\$972,533
General Fund	(\$940,662)	(\$956,465)	(\$972,533)
Cash Funds	\$940,661	\$956,464	\$972,533
Federal Funds	\$940,662	\$956,465	\$972,533
Total Upper Payment Limit Financing			
Total Funds	\$8,991,123	\$9,142,173	\$9,295,763
General Fund	(\$8,991,124)	(\$9,142,175)	(\$9,295,762)
Cash Funds	\$8,991,123	\$9,142,173	\$9,295,763
Federal Funds	\$8,991,124	\$9,142,175	\$9,295,762

# **Exhibit K - Upper Payment Limit Financing**

# Nursing Facilities Upper Payment Limit Calculation Estimate Based on CY 2018 Actual Upper Payment Limit & CY 2018 Interim Public Nursing Facility Calculations

State N	Jursing Facilities	
Provider Name	Upper Payment Limit (Amount Remaining after Medicaid Payment)	Certified Uncompensated Cost
Colorado St. Veterans - Fitzsimmons	\$5,235,498	\$3,795,019
Colorado St. Veterans - Florence	\$2,379,059	\$3,269,659
Colorado St. Veterans - Homelake	\$2,660,937	\$1,270,596
Colorado St. Veterans - Rifle	\$1,472,889	\$2,570,381
State Nursing Facilities Total	\$11,748,383	\$10,905,655
Governmen	nt Nursing Facilities	
Colorado St. Veterans - Walsenburg	\$384,736	\$55,299
Arkansas Valley	\$1,329,962	\$936,185
Bent County Healthcare Center	(\$353,176)	(\$333,994
Cheyenne Manor	\$287,372	\$499,964
Cripple Creek Rehabilitation & Wellness Center	(\$29,241)	\$235,086
E. Dene Moore Care Center	\$1,629,882	\$2,818,645
Gunnison Valley Health Senior Care	(\$11,716)	\$137,524
Lincoln Community Hospital & Nursing Home	\$610,223	\$470,974
Prospect Park Living Center	\$520,339	\$955,690
Sedgwick County Hospital & Nursing Home	(\$110,722)	(\$414,527
Southeast Colorado Hospital & LTC Center	\$162,596	\$125,734
Walbridge Memorial Convalescent Wing	\$291,612	\$956,745
Walsh Healthcare Center	\$253,786	\$242,446
Washington County Nursing Home	(\$36,411)	(\$173,100
Government Nursing Facilities Total	\$4,929,242	\$6,512,671

(1) Certified uncompensated costs will be updated in the Department's February Medical Services Premiums request.

Exhibit K - Upper Payment Limit Financing

Supplemental Medicaid Nursing Facilities Payment			
Estimated CY 2019 Upper Payment Limit	\$16,100,923		
Estimated CY 2020 Upper Payment Limit	\$16,371,419		
Estimated CY 2021 Upper Payment Limit	\$16,646,459		
Supplemental Medicaid Nursing Facility Pa	yment FY 2020-21		
Total Funds	\$8,050,462		
General Fund (offset by Federal Funds)	(\$8,050,462		
Cash Funds	\$8,050,462		
Federal Funds	\$8,050,462		
Total Funds General Fund (offset by Federal Funds) Cash Funds Federal Funds	\$8,185,709 (\$8,185,710 \$8,185,709 \$8,185,710		
Supplemental Medicaid Nursing Facility Pa			
Total Funds	\$8,323,230		
General Fund (offset by Federal Funds)	(\$8,323,229		
Cash Funds	\$8,323,230		
Federal Funds	\$8,323,229		
CY 2018 Inflation Factor (1)	1.68%		
(1) Consumer Price Index for Urban Wage Earners and Care, US City Average	l Clerical Workers, Medica		

# **Exhibit K - Upper Payment Limit Financing**

# Home Health Certified Public Expenditure Calculation Estimate Based on Calendar Year 2018 Interim Payment Made in June 2019

Provider Name	Total Uncompensated Costs by Provider
Alamosa County Nursing Service	\$190,925
Delta Montrose Home Health Services	\$458,706
Estes Park Home Health	\$454,983
Kit Carson County Home Health	\$6,138
Lincoln Community Home Health	\$18,353
Pioneers Hospital Home Health	\$32,331
Prowers Home Health	\$124,691
Southeast Colorado Hospital Home Health	\$160,511
Yuma District Home Health Care	\$190,476
Home Health Total	\$1,850,239

**Exhibit K - Upper Payment Limit Financing** 

Supplemental Medicaid Home Health Payment			
CY 2020 Upper Payment Limit	\$1,881,323		
CY 2021 Upper Payment Limit	\$1,912,929		
CY 2022 Upper Payment Limit	\$1,945,066		
Supplemental Medicaid Home Health	Payment FY 2020-21		
Total Funds	\$940,661		
General Fund	(\$940,662)		
Cash Funds	\$940,661		
Federal Funds	\$940,662		
Cash Funds Federal Funds	\$956,464 \$956,465		
Supplemental Medicaid Home Health	Payment FY 2022-23		
Total Funds	\$972,533		
General Fund	(\$972,533)		
Cash Funds	\$972,533		
Federal Funds	\$972,533		
CY 2018 Inflation Factor <sup>(1)</sup>	1.68%		
(1) Consumer Price Index for Urban Wage Earner. Care, US City Average.	s and Clerical Workers, Medical		

## **Exhibit K - Upper Payment Limit Financing**

# Medicaid Eligible Inpatient Days from the Cost Report Ending in Calendar Year 2016 for FY 2017-18 Participating Colorado Indigent Care Program Providers per HB 04-1438

Hospitals	Medicaid Eligible Inpatient Days	Total Inpatient Days	Percent of Medicaid Eligible Inpatient Days
State Owned			
University of Colorado Hospital	60,567	179,252	33.79%
Non State-Owned Public	<u> </u>		
Arkansas Valley Regional Medical Center	1,305	3,495	37.34%
Aspen Valley Hospital	310	2,504	12.38%
Delta County Memorial Hospital	1,248	5,045	24.74%
Denver Health Medical Center	71,780	115,506	62.14%
East Morgan County Hospital	273	1,149	23.76%
Estes Park Health	209	1,073	19.48%
Grand River Hospital District	282	1,340	21.04%
Gunnison Valley Health	231	1,567	14.74%
Heart of the Rockies Regional Medical Center	572	3,271	17.49%
Middle Park Medical Center - Kremmling	53	339	15.63%
Melissa Memorial Hospital	56	260	21.54%
Memorial Hospital Central	44,643	114,139	39.11%
Memorial Regional Health	1,478	2,578	57.33%
Montrose Memorial Hospital	2,409	11,173	21.56%
North Colorado Medical Center	14,696	42,476	34.60%
Poudre Valley Hospital	14,329	56,995	25.14%
Prowers Medical Center	1,018	1,960	51.94%
Sedgwick County Health Center	66	301	21.93%
Southeast Colorado Hospital District	127	492	25.81%
Southwest Health System, Inc.	1,197	3,608	33.18%
Spanish Peaks Regional Health Center	49	498	9.84%
St. Vincent General Hospital District	9	5	180.00%
Wray Community District Hospital	362	968	37.40%
Yuma District Hospital	80	483	16.56%

**Exhibit K - Upper Payment Limit Financing** 

Hospitals	Medicaid Eligible Inpatient Days	Total Inpatient Days	Percent of Medicaid Eligible Inpatient Days
Private			
Banner Fort Collins Medical Center	712	2,328	30.58%
Boulder Community Health	6,407	35,299	18.15%
St. Thomas More Hospital	1,756	5,730	30.65%
Children's Hospital Colorado	53,069	97,177	54.61%
Colorado Plains Medical Center	1,366	7,172	19.05%
Community Hospital	1,172	7,252	16.16%
Colorado Canyons Hospital and Medical Center	181	952	19.01%
Longmont United Hospital	7,341	25,642	28.63%
McKee Medical Center	3,463	11,445	30.26%
Medical Center of the Rockies	8,021	48,106	16.67%
Mercy Regional Medical Center	4,258	15,436	27.58%
Mt. San Rafael Hospital	583	1,988	29.33%
National Jewish Health	49	69	71.01%
Parkview Medical Center	23,385	85,771	27.26%
Penrose-St. Francis Health Services	22,302	96,501	23.11%
Pikes Peak Regional Hospital	309	1,481	20.86%
Platte Valley Medical Center	5,231	11,601	45.09%
Rio Grande Hospital	263	1,103	23.84%
San Luis Valley Health Conejos County Hospital	67	328	20.43%
St. Mary-Corwin Medical Center	8,527	26,740	31.89%
St. Mary's Hospital & Medical Center, Inc.	20,150	65,192	30.91%
Sterling Regional MedCenter	943	3,392	27.80%
Valley View Hospital	6,433	13,751	46.78%
Yampa Valley Medical Center	1,023	4,519	22.64%
Note: Figures from Cost Report Year End (CRYE) 20	16.		

#### Exhibit L - Recoveries

			Depart	ment Recovery R	levenue						
Recovery Category	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	Estimated FY 2020-21	Estimated FY 2021-22	Estimated FY 2022-23
Estate Recoveries <sup>(1)</sup>	\$4,679,459	\$5,283,510	\$6,969,380	\$5,526,967	\$6,261,038	\$6,743,602	\$9,216,130	\$7,039,020	\$7,428,981	\$7,840,547	\$8,274,913
Income Trust and Repayments <sup>(1)</sup>	\$3,976,905	\$3,467,692	\$4,074,355	\$6,716,046	\$6,090,938	\$5,628,684	\$9,992,986	\$7,363,768	\$7,771,721	\$8,202,274	\$8,656,680
Third Party Health Insurance	\$27,406,316	\$21,063,474	\$26,598,141	\$28,691,812	\$31,434,219	\$25,476,789	\$38,022,040	\$37,175,342	\$39,234,856	\$41,408,467	\$43,702,496
Third Party Casualty	\$5,660,459	\$7,093,986	\$8,809,174	\$8,457,430	\$7,341,535	\$9,239,387	\$17,832,295	\$17,430,179	\$18,395,811	\$19,414,939	\$20,490,527
Credit Balance Audits <sup>(2)</sup>	\$0	\$0	\$0	\$0	\$0	\$997,742	\$709,519	\$451,097	\$476,087	\$502,462	\$530,298
Total Recoveries Including Bottom Line Impacts <sup>(3)</sup>	\$41,723,139	\$36,908,662	\$46,451,050	\$49,392,255	\$51,127,730	\$48,086,205	\$75,772,969	\$69,459,406	\$73,307,456	\$77,368,689	\$81,654,914

<sup>(1)</sup> Historical Estate and Income Trust recoveries have been restated to reflect changes in accounting classifications.

<sup>(3)</sup> Figures represent only recovery types classified as revenue by the Department. Additionally, figures are adjusted for cash flow. As a result, differences may exist between historical recovery totals reported here and totals reported elsewhere by the Department.

			Contingen	cy and Contractor	r Payments						
Recovery Category	Contingency Amount <sup>(5)</sup>	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	Estimated FY 2020-21	Estimated FY 2021-22	Estimated FY 2022-23
Estate Recoveries	12.00%	\$554,769	\$731,785	\$580,332	\$657,409	\$775,514	\$1,059,855	\$844,682	\$891,478	\$940,866	\$992,990
Income Trust and Repayments <sup>(4)</sup>	0.00%	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Third Party Health Insurance	7.50%	\$1,242,745	\$1,569,290	\$1,692,817	\$1,854,619	\$1,757,898	\$2,623,521	\$2,788,151	\$2,942,614	\$3,105,635	\$3,277,687
Third Party Casualty	10.00%	\$595,895	\$739,971	\$710,424	\$616,689	\$868,502	\$1,676,236	\$1,743,018	\$1,839,581	\$1,941,494	\$2,049,053
Credit Balance Audits	16.00%	\$0	\$0	\$0	\$0	\$159,639	\$113,523	\$72,175	\$76,174	\$80,394	\$84,848
Total		\$2,393,409	\$3,041,046	\$2,983,573	\$3,128,717	\$3,561,553	\$5,473,135	\$5,448,026	\$5,749,847	\$6,068,389	\$6,404,578

<sup>(4)</sup> Income Trust and Repayments are processed by Department staff. No contingency fee is paid.

<sup>(5)</sup> The Department's recovery contract was reprocured for the beginning of FY 2017. Contingency rates shown reflect the new contract amounts.

	Fund Splits				
Total Medical Services Premiums Impact	Total Funds	General Fund	Cash Funds	Federal Funds	FFP
FY 2020-21	\$0	(\$24,624,112)	\$67,557,609	(\$42,933,497)	63.55%
FY 2021-22	\$0	(\$30,408,906)	\$71,300,300	(\$40,891,394)	57.35%
FY 2022-23	\$0	(\$32,093,560)	\$75,250,336	(\$43,156,776)	57.35%

Recovery Trend for FY 2019-20 to FY 2020-21	5.54%
Recovery Trend for FY 2020-21 to FY 2021-22	5.54%
Recovery Trend for FY 2019-20 to FY 2020-21	5.54%

<sup>(2)</sup> Credit Balance and Audits is a new line procured in the 2017 contract.

							Exhibit M ash-based Actuals									
FY 2019-20	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	CORE TOTAL
Acute Care																
Physician Services & EPSDT	\$3,427,077	\$12,306,630 \$1,116,242	\$105,137,197 \$4,927,037	\$13,070,385 \$311,232	\$93,799,665 \$3,413,426	\$32,206,898 \$804.550	\$209,305,099 \$27,592,515	\$368,273 \$6,297	\$257,809,067 \$4,992,158	\$27,365,885 \$422,462	\$22,827,697 \$675,339	\$28,049,555 \$922,427	\$4,825,222 \$154.423	\$7,240,329 \$11,122,217	\$0 \$0	\$817,738,979 \$57,167,041
Emergency Transportation Non-emergency Medical Transportation	\$706,716 \$8,246,077	\$1,116,242	\$4,927,037 \$15,827,741	\$311,232	\$3,413,426	\$804,550 \$574,215	\$27,592,515 \$14,004,449	\$6,297 (\$2,048)	\$4,992,158 \$2,649,807	\$422,462	\$675,339 \$422,678	\$922,427 \$570,021	\$154,423 \$24,441	\$11,122,217 \$506	\$0 \$0	\$57,167,041 \$51,570,333
Dental Services	\$9,460,039	\$3,333,139	\$19,088,246	\$2,823,084	\$33,130,745	\$12,801,332	\$59,857,743	\$33,530	\$117,879,610	\$21,424,812	\$6,619,081	\$2,474,799	\$338,043	\$1,603	\$0	\$289,265,806
Family Planning Health Maintenance Organizations	\$0 \$16,623,203	\$0 \$14.869.284	\$310 \$68,588,380	\$0 \$5.736,107	\$1,853 \$56,494,241	\$1,778 \$22,623,823	\$4,678 \$167,925,508	\$0 \$0	\$2,034 \$42,833,473	\$343 \$4,906,965	\$137 \$1,867,418	\$46 \$14,725,929	\$0 \$2.877.701	\$0 \$5,321	\$0 \$0	\$11,179 \$420,077,353
Inpatient Hospitals	\$21,599,684	\$21,694,649	\$103,646,072	\$12,561,303	\$69,261,996	\$19,493,521	\$318,130,008	\$239,078	\$144,717,061	\$5,785,654	\$2,243,923	\$50,294,071	\$6,500,449	\$17,429,746	\$0	\$793,597,215
Outpatient Hospitals Lab & X-Ray	\$2,372,705 \$392,694	\$9,761,874 \$2,275,501	\$48,914,640 \$10,503,225	\$6,804,363 \$856,735	\$77,170,307 \$38,006,585	\$27,210,858 \$10,898,650	\$173,207,470 \$64,293,949	\$742,444 \$91.619	\$94,440,931 \$6,411,611	\$13,445,816 (\$813,261)	\$8,742,744 \$1,442,152	\$12,576,573 \$8,961,637	\$1,770,246 \$1,305,502	\$5,376,439 (\$796,876)	\$0 \$0	\$482,537,410 \$143,829,723
Durable Medical Equipment	\$11,825,292	\$5,747,041	\$70,256,246	\$2,967,128	\$7,055,254	\$2,890,472	\$23,816,417	\$28,524	\$26,318,643	\$2,572,254	\$6,419,366	\$373,692	\$65,619	\$2,719	\$0	\$160,338,667
Prescription Drugs	\$5,552,308	\$34,530,368	\$225,139,181	\$29,340,579	\$133,075,255	\$51,498,542	\$396,702,661	\$418,616	\$115,622,518	\$21,568,580	\$20,375,751	\$5,729,045	\$712,073	\$13,158	\$109,287	\$1,040,387,922
Physician Administered Drugs Drug Rebate	\$2,455,929 (\$3,495,103)	\$4,017,125 (\$21,736,402)	\$24,507,566 (\$141,722,084)	\$4,348,455 (\$18,469,500)	\$18,318,614 (\$83,769,082)	\$7,834,747 (\$32,417,639)	\$51,884,949 (\$249,718,986)	\$931,065 (\$263,513)	\$8,261,870 (\$72,782,820)	\$1,566,288 (\$13,577,131)	\$898,314 (\$12,826,261)	\$2,477,848 (\$3,606,357)	\$375,410 (\$448,240)	\$203,519 (\$8,283)	\$1,202,675 (\$68,795)	\$129,284,374 (\$654,910,196)
Rural Health Centers	\$83,932	\$565,411	\$2,130,491	\$161,297	\$5,661,265	\$2,502,144	\$8,950,653	\$8,862	\$10,909,460	\$1,489,542	\$662,436	\$2,303,962	(\$373,187)	\$17,902	\$0	\$35,074,170
Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare)	\$1,525,196 \$52,789,901	\$2,423,200 \$8,490,112	\$9,827,776 \$28,291,150	\$1,005,768 \$6,512,973	\$20,835,323 \$2,775,586	\$7,545,328 \$268,460	\$42,955,122 \$2,321,798	\$36,236 (\$445)	\$19,147,432 \$0	\$1,538,907 \$20,139	\$1,052,883 \$29,729	\$8,882,820 \$66,048	\$1,342,460 \$5,707	\$737,317 \$11.890	\$0 \$16,563,737	\$118,855,768 \$118,146,785
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$29,984)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$29,984)
Prepaid Inpatient Health Plan Services Other Medical Services	\$0 (\$84)			\$0 (\$47)		\$0 (\$101)	\$0 (\$784)	\$0 (\$1)	\$0 (\$449)	\$0 (\$54)	\$0 (\$44)	\$0 (\$68)	\$0 (\$10)	\$0 (\$21)	\$0 (\$9)	\$0 (\$2,478)
Preventive Services	(\$114,224)	(\$408,227)	(\$1,017,537)	(\$154,331)	(\$8,256,893)	(\$2,934,023)	(\$12,103,347)	(\$17,649)	(\$11,316,924)	(\$3,529,559)	(\$634,661)	(\$1,800,554)	(\$54,870)	(\$50,206)	\$0	(\$42,393,005)
Acute Home Health	\$2,498,634 \$0	\$756,420 \$0	\$13,007,488 \$0	\$405,355 \$0	\$92,235 \$0	\$19,896 \$0	\$404,062 \$0	\$0 \$0	\$2,997,715 \$0	\$434,144 \$0	\$954,965 \$0	\$11,929	\$2,087	\$0 \$0	\$0 \$0	\$21,584,930
Presumptive Eligibility Subtotal of Acute Care		\$104,413,749	\$607,052,671		\$470,412,101		\$1,299,533,964	\$2,590,904		\$84,741,213	\$61,773,647	\$0 \$133,013,423	\$0 \$19,423,076	\$41,307,280		\$3,982,131,992
Community Based Long Term Care		220,120,10		200,000,000	*****	0100,000,000	**,***,***,***		2.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	444,111,210	401,111,011	,,	417,110,010	,,	0.01,000,000	,,
HCBS - Elderly, Blind, and Disabled	\$307,272,648		\$159,532,825	\$2,761,112	\$0	\$0	\$77,179	\$0		\$0	\$34,487	\$0	\$0	\$0		\$524,294,139
HCBS - Community Mental Health Services HCBS - Children's HCBS	\$9,553,818 \$0	\$7,893,598 \$0	\$31,497,417 \$50,814,056	\$474,849 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0		\$0 \$0	\$0 \$351	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$49,419,682 \$50,814,407
HCBS - Children's HCBS HCBS - Persons Living with AIDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
HCBS - Consumer Directed Attendant Support	(\$7,164)			(\$65)		\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	(\$12,221)
HCBS - Brain Injury HCBS - Children with Autism	\$2,502,262 \$0	\$3,191,066 \$0	\$21,670,226 \$0	\$355,811 \$34,785	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$27,719,365 \$34,785
HCBS - Children with Life Limiting Illness	\$0	\$0	\$660,431	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,464	\$0	\$0	\$0	\$0	\$661,895
HCBS - Spinal Cord Injury CCT - Services	\$708,520 \$1,414,553	\$374,718 \$1,305,022	\$6,158,570 \$2,293,318	\$1,077,592 \$0	\$0 \$257	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$8,319,400 \$5,013,150
Private Duty Nursing	\$4,958,904	\$747,100	\$70,623,359	\$343,970	(\$15,885)	(\$6,217)	(\$54,204)	\$0	\$2,880,338	\$174,629	\$22,611,357	\$0	\$0 \$0	\$0	\$0	\$102,263,351
Long Term Home Health	\$46,515,314	\$12,839,924 \$5,084,844	\$259,354,693	\$8,298,369	\$853,523 \$447,838	\$98,195	\$3,452,075	\$0	\$50,493,731	\$3,331,204	\$19,723,404	\$5,393 \$8,980	\$1,550 \$0	\$0 \$0	\$0 \$0	\$404,967,375 \$69,222,983
Hospice Subtotal Community Based Long Term Care	\$52,293,731 \$425,212,586	\$86,050,887	\$6,541,648 \$609,142,824	\$373,345 \$13,719,768	\$1,285,733	\$186,582 \$278,560	\$3,770,673 \$7,245,723	\$18,766 \$18,766	\$360,647 \$53,734,716	(\$16,709) \$3,489,124	\$152,638 \$42,523,701	\$14,373	\$1,550	\$0	\$0 \$0	\$1,242,718,311
Long Term Care																
Class I Nursing Facilities	\$545,271,318	\$63,561,400	\$98,665,772	\$186,328	\$142,847	\$78,880	\$5,057,284	\$0	\$31,472	\$0	\$0	\$4,951	\$0	\$0	\$0	\$713,000,252
Class II Nursing Facilities	\$739,436 \$194,589,032	\$304,255 \$27,389,639	\$5,188,127 \$12,192,847	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$6,231,818
Program of All-Inclusive Care for the Elderly Subtotal Long Term Care	\$740,599,786	\$91,255,294	\$116,046,746	\$186,328		\$78,880	\$5,057,284	\$0 \$0	\$31,472	\$0	\$0 \$0	\$4,951	\$0 \$0	\$0 \$0	\$0 \$0	\$234,171,518 \$953,403,588
Insurance																
Supplemental Medicare Insurance Benefit	\$108,653,508	\$6,336,044	\$56,954,618	\$0	\$356,249	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$31,440,350	\$203,740,769
Health Insurance Buy-In Program	\$7,920	\$13,709	\$2,296,471	\$0	\$9,116	\$12,297	\$113,225	\$0	\$31,127	\$0	\$0	\$5,534	\$0	\$0	\$0	\$2,489,399
Subtotal Insurance	\$108,661,428	\$6,349,753	\$59,251,089	\$0	\$365,365	\$12,297	\$113,225	\$0	\$31,127	\$0	\$0	\$5,534	\$0	\$0	\$31,440,350	\$206,230,168
Service Management		60.0														
Single Entry Points Disease Management	\$11,089,942 \$3,158	\$2,907,581 \$11,340	\$16,293,976 \$96,878	\$4,980 \$12,044	\$8,603 \$86,431	\$2,490 \$29,677	\$44,938 \$192.864	\$0 \$0	\$5,773 \$0	\$679 \$0	\$40,976 \$21,035	\$0 \$25,846	\$0 \$4,446	\$0 \$0	\$0 \$0	\$30,399,938 \$483,719
Prepaid Inpatient Health Plan Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Accountable Care Collaborative Subtotal Service Management	\$7,286,885 \$18,379,985	\$2,036,439 \$4,955,360	\$11,368,287 \$27,759,141	\$1,660,976 \$1,678,000	\$27,382,237 \$27,477,271	\$10,146,837 \$10,179,004	\$51,271,711 \$51,509,513	\$24,475 <b>\$24,475</b>	\$72,056,026 \$72,061,799	\$9,604,889 \$9,605,568	\$3,886,018 \$3,948,029	\$1,794,332 \$1,820,178	\$335,812 \$340,258	\$226 <b>\$22</b> 6	\$0 <b>\$0</b>	\$198,855,150 <b>\$229,738,807</b>
Total Services	\$1,428,803,761	\$293,025,043	\$1,419,252,471	\$84,980,541	\$499,683,317	\$174,372,192	\$1,363,459,709	\$2,634,145	\$896,752,311	\$97,835,905	\$108,245,377	\$134,858,459	\$19,764,884	\$41,307,506	\$49,247,245	\$6,614,222,866
Financing & Supplemental Baymants																
Financing & Supplemental Payments  Upper Payment Limit Financing	\$2,809,582	\$419,103	\$2,051,054	\$76,181	\$396,128	\$138,641	\$926,631	\$3,737	\$756,220	\$97,945	\$142,087	\$64,037	\$9,038	\$27,063	\$0	\$7,917,447
Hospital Supplemental Payments	\$18,234,913	\$24,861,910	\$120,798,222	\$15,417,451	\$120,191,661	\$38,699,906	\$391,245,116	\$837,270	\$191,861,723	\$16,250,350	\$9,432,712	\$48,716,089	\$6,424,918	\$17,786,062	\$0	\$1,020,758,303
Nursing Facility Supplemental Payments	\$101,784,903 \$65,848	\$11,864,902 \$236,459	\$18,417,778 \$2,020,097	\$34,782 \$251,133	\$26,665 \$1,802,259	\$14,724 \$618.821	\$944,035 \$4,021,572	\$0 \$7,076	\$5,875 \$4,953,523	\$0 \$525,806	\$0 \$438,610	\$924 \$538,942	\$0 \$92,711	\$0 \$139.115	\$0 \$0	\$133,094,588 \$15,711,972
Physician Supplemental Payments Outstationing Payments	\$65,848 \$26,985	\$236,459 \$111,024	\$2,020,097 \$556,319	\$251,133 \$77,388	\$877,675	\$618,821 \$309,475	\$4,021,572 \$1,969,927	\$7,076 \$8,444	\$4,953,523 \$1,074,098	\$525,806 \$152,922	\$438,610 \$99,433	\$538,942 \$143,036	\$92,711 \$20,133	\$139,115 \$61,147	\$0	\$15,711,972 \$5,488,006
University of Colorado School of Medicine Payments	\$490,326	\$1,760,760	\$15,042,406	\$1,870,033	\$13,420,299	\$4,607,972	\$29,946,131	\$52,690	\$36,885,791	\$3,915,348	\$3,266,051	\$4,013,164	\$690,364	\$1,035,903	\$0	\$116,997,240
Other Supplemental Payments Accounting Adjustments	\$2,709,468 (\$2,593,433)	\$861,808 (\$613,017)	\$3,488,269 (\$3,063,228)	\$389,188 (\$215,404)	\$3,001,511 (\$1,208,214)	\$974,553 (\$428,653)	\$9,419,679 (\$3,332,327)	\$19,962 (\$6,258)	\$5,171,116 (\$1,983,575)	\$459,781 (\$233,140)	\$293,728 (\$255,486)	\$1,174,046 (\$285,644)	\$158,889 (\$42,195)	\$418,219 (\$80,698)	\$0 (\$37,743)	\$28,540,215 (\$14,379,015)
Subtotal Financing & Supplemental Payments	\$123,528,592	\$39,502,949	\$159,310,917	\$17,900,752	\$138,507,984	\$44,935,439	\$435,140,764	\$922,921	\$238,724,771	\$21,169,012	\$13,417,135	\$54,364,594	\$7,353,858	\$19,386,811	(\$37,743)	\$1,314,128,756
Grand Total Notes:	\$1,552,332,353	\$332,527,992	\$1,578,563,388	\$102,881,293	\$638,191,301	\$219,307,631	\$1,798,600,473	\$3,557,066	\$1,135,477,082	\$119,004,917	\$121,662,512	\$189,223,053	\$27,118,742	\$60,694,317	\$49,209,502	\$7,928,351,622
FY 2019-20 actuals are from data accessed in CORE on Augus	st 4, 2020.															

							Exhibit M									
						Ca	sh-based Actuals									
FY 2018-19 Actuals	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	CORE TOTAL
Acute Care																
Physician Services & EPSDT	\$4,593,872	\$11,940,319	\$101,861,163	\$11,079,694	\$102,715,505	\$34,591,039	\$207,514,482	\$822,435	\$198,670,709	\$20,698,842	\$19,620,882	\$32,102,608	\$6,198,370	\$6,125,760	90	\$758,535,680
Emergency Transportation	\$1,747,382	\$1,947,616	\$9,210,208	\$486,348	\$6,326,910	(\$61,591)	\$25,861,269	\$3,916	\$5,572,227	\$1,362,907	\$1,187,773	\$883,012	\$19,830	\$288,146	(\$943)	\$54,835,010
Non-emergency Medical Transportation	\$7,894,928	\$4,112,109	\$15,960,491	\$1,044,472	\$3,879,152	\$339,530	\$14,837,929	(\$43)	\$4,114,668	\$244,265	\$520,776	\$1,091,729	\$20,296	\$111,675	(\$16)	\$54,171,961
Dental Services	\$10,467,813		\$21,215,240	\$2,533,305	\$35,168,578	\$14,610,722	\$63,967,975	\$33,816	\$137,439,597	\$25,490,009	\$6,837,209	\$2,328,152	\$376,032	\$1,065	(\$1)	\$324,041,021
Family Planning Health Maintenance Organizations	\$0 \$12,233,233		(\$389) \$70,002,446	\$4,150,641	(\$15,406) \$59,443,152	(\$9,170) \$17,800,909	(\$30,408) \$161,447,773	\$0 \$14,511	(\$9,474) \$38,192,637	(\$2,160) \$4,306,020	(\$132) \$1,322,089	(\$1,207) \$14,298,048	(\$180) \$2,769,385	\$0 \$6,966	\$0 (\$43,234)	(\$68,526) \$400,359,785
Health Maintenance Organizations Inpatient Hospitals	\$12,233,233 \$19,395,058	\$14,415,209 \$26,547,991	\$70,002,446 \$115,550,298	\$4,150,641	\$66,757,913	\$17,800,909	\$280,947,051	\$199,890	\$147,833,540	\$4,306,020	\$1,322,089	\$14,298,048 \$50,229,530	\$7,129,604	\$34,177,096	(\$43,234)	\$400,339,783 \$797,071,196
Outpatient Hospitals	\$2 438 694		\$48 307 483	\$6,053,158	\$75,693,972	\$25,876,042	\$157,592,019	\$523,415	\$91,976,634	\$11.581.181	\$7 333 116	\$10,162,180	\$2,198,949	\$1,676,318	S0	\$449.822.722
Lab & X-Ray	\$517,094	\$2,356,667	\$11,051,514	\$796,449	\$31,809,611	\$8,879,209	\$55,892,910	\$73,719	\$8,251,860	\$1,654,411	\$1,450,769	\$9,095,890	\$401,939	\$285,697	\$0	\$132,517,739
Durable Medical Equipment	\$11,508,550		\$66,473,642	\$2,666,690	\$6,822,460	\$2,372,816	\$21,465,035	\$26,123	\$24,713,730	\$2,644,163	\$6,303,518	\$414,188	\$17,175	\$3,087	\$0	\$150,457,643
Prescription Drugs	\$5,155,289	\$32,311,656	\$215,350,195	\$22,908,173	\$133,683,515	\$48,217,231	\$367,710,630	\$457,406	\$102,552,873	\$19,574,435	\$17,775,652	\$7,736,701	\$813,313	\$417	\$767,551	\$975,015,037
Physician Administered Drugs	\$3,018,464 (\$3,965,419)		\$27,253,714 (\$165,646,160)	\$5,457,097 (\$17,620,838)	\$20,009,592 (\$102,828,608)	\$8,171,655 (\$37,088,423)	\$55,820,333 (\$282,840,951)	\$327,349 (\$351,834)	\$7,873,354 (\$78,883,094)	\$602,113 (\$15,056,546)	\$907,722 (\$13,672,931)	\$2,549,190 (\$5,951,027)	\$270,425 (\$625,596)	\$257 (\$321)	\$1,252,766 (\$590,396)	\$137,956,678 (\$749,976,088)
Drug Rebate Rural Health Centers	\$74.298	\$487 172	\$2,080,336	\$136,196	\$4,886,116	\$2,150,267	\$6,960,190	\$16.250	\$14,131,043	\$1 480 266	\$663,049	\$1 144 077	\$30.887	\$29.802	(3390,390)	\$34.269.949
Federally Qualified Health Centers	\$1,871,153	\$2,446,201	\$10,776,952	\$872,850	\$22,794,462	\$8,574,186	\$46,970,993	\$24,818	\$49,704,346	\$5,583,703	\$1,836,483	\$8,905,086	\$288,290	(\$46,090)	(\$296)	\$160,603,137
Co-Insurance (Title XVIII-Medicare)	\$46,967,143		\$29,608,795	\$5,843,559	\$2,986,033	\$251,587	\$2,352,065	\$77	\$195,971	\$62,527	\$60,966	\$78,199	\$3,509	\$260	\$16,361,918	\$113,165,862
Breast and Cervical Cancer Treatment Program	\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0		\$0	\$0	\$0	\$0
Prepaid Inpatient Health Plan Services Other Medical Services	\$0 \$41		\$0 \$240	\$0 \$20			\$0 \$364	\$0 \$1		\$0 \$25	\$0 \$24		\$0 \$4	\$0 \$10	\$0 \$4	\$0 \$1,215
Other Medical Services Preventive Services	\$41 \$222,924		\$240 \$3,882,525	\$20 \$402,723	\$144	\$49 \$4,052,540	\$364 \$16,348,498	\$1 \$30,580	\$221 \$37,197,742	\$25 \$1,631,833	\$1,631,765	\$34 \$1,464,999	\$4 \$55,492	\$10 \$9,150	\$4 \$0	\$1,215 \$77,522,796
Acute Home Health	\$3,942,991		\$19,557,883	\$483 161	\$140.711	\$33,533	\$651.301	\$0,580	\$3,342,105	\$97.957	\$1,414,899	\$23 170	\$143	\$9,150	\$0	\$30,766,913
Presumptive Eligibility	\$0	\$0	\$0	S0	SO SO	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	SO SO
Subtotal of Acute Care	\$128,083,508	\$103,145,930	\$602,496,576	\$58,472,526	\$480,353,432	\$158,121,334	\$1,203,469,458	\$2,202,429	\$792,870,689	\$87,237,080	\$67,677,694	\$136,554,559	\$19,967,867	\$42,669,295	\$17,747,353	\$3,901,069,730
Community Based Long Term Care																
HCBS - Elderly Blind and Disabled	\$244 683 737	\$43,435,145	\$169 105 484	\$2.811.706	SO.	SO.	SO.	S0	SO.	SO.	\$0	SO.	\$0	\$0	\$0	\$460,036,072
HCBS - Community Mental Health Services	\$9,742,648		\$29,201,646	\$56,328	S0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$45,292,226
HCBS - Children's HCBS	\$0		\$37,791,586	\$0	\$0		\$0	\$0		\$0	\$0		\$0	\$0	\$0	\$37,791,586
HCBS - Persons Living with AIDS	\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0		\$0	\$0	\$0	\$0
HCBS - Consumer Directed Attendant Support	\$836,779 \$4,314,281		\$578,313 \$19,665,286	\$9,616 \$17,058	\$0 \$0		\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0		\$0 \$0	\$0 \$0	\$0 \$0	\$1,573,249 \$26,179,750
HCBS - Brain Injury HCBS - Children with Autism	\$4,314,281		\$19,665,286	\$17,058			\$0 \$0	\$0		\$0 \$0	\$0 \$0		\$0 \$0	\$0	\$0	\$26,179,750
HCBS - Children with Life Limiting Illness	\$0		\$670,649	\$0	\$0		S0	\$0	S0	\$0	\$0		\$0	\$0	\$0	\$670,649
HCBS - Spinal Cord Injury	\$895,818		\$4,967,475	\$732,074	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$6,814,633
CCT - Services	\$1,508,437		\$2,594,631	\$0			\$0	\$0		\$0	\$0		\$0	\$0		\$5,253,862
Private Duty Nursing	\$5,348,458		\$65,990,518	\$660,025 \$5,658,015	\$12,589		\$88,260 \$3,038,174	\$0 \$0		\$3,378	\$18,984,512 \$16,987,453	\$0	\$0 \$0	\$0	\$0	\$95,953,404
Long Term Home Health Hospice	\$45,614,951 \$48,509,514	\$10,166,037 \$4,409,676	\$231,040,432 \$6,843,220	\$5,658,015	\$617,155 \$498,712	\$49,609 \$285,004	\$3,038,174 \$4,064,850	\$8,391	\$41,004,505 \$227,302	\$2,717,319 \$77,305	\$16,987,453	\$12,720	\$0 \$0	\$0 \$0	\$0 \$0	\$356,906,370 \$65,403,062
Subtotal Community Based Long Term Care	\$361,454,623		\$568,477,311	\$10,353,892	\$1,128,456	\$336,676	\$7,191,284	\$8,391	\$45,642,018	\$2,798,002	\$36,041,983	\$12,720	S0	\$0	S0	\$1,101,902,934
Long Term Care																
Class I Nursing Facilities	\$537,588,982	\$62,636,697	\$99,246,348	\$97,119	\$215,595	\$187,698	\$4.861.556	S0	\$68,310	(\$4,771)	S0	S0	S0	S0	S0	\$704.897.534
Class II Nursing Facilities	\$2,585,226	\$136,322	\$2,566,369	\$0	\$0	\$107,050	\$1,001,550	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$5,287,917
Program of All-Inclusive Care for the Elderly	\$161,681,815		\$12,235,422	\$0	\$0		\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$199,756,999
Subtotal Long Term Care	\$701,856,023	\$88,612,781	\$114,048,139	\$97,119	\$215,595	\$187,698	\$4,861,556	\$0	\$68,310	(\$4,771)	\$0	\$0	\$0	\$0	\$0	\$909,942,450
Insurance																
Supplemental Medicare Insurance Benefit	\$105,608,721	\$6,158,490	\$55,358,585	\$0	\$346,266	\$0	\$0	\$0	S0	\$0	\$0		\$0	\$0	\$30,559,301	\$198,031,363
Health Insurance Buy-In Program	\$18,345	\$22,932	\$2,247,306	\$0	\$27,518	\$45,863	\$41,277	\$0		\$0	\$0	\$13,759	\$0	\$0	\$0	\$2,577,522
Subtotal Insurance	\$105,627,066	\$6,181,422	\$57,605,891	\$0	\$373,784	\$45,863	\$41,277	\$0	\$160,522	\$0	\$0	\$13,759	\$0	\$0	\$30,559,301	\$200,608,885
Service Management													1			
Single Entry Points	\$9,551,535	\$2,504,239	\$14,033,660	\$4,290	\$7,409	\$2,145	\$38,704	\$0	\$4,972	\$585	\$35,292	S0	S0	\$0	S0	\$26,182,831
Disease Management	\$5,787	\$16,653	\$136,067	\$16,034	\$133,777	\$46,240	\$281,028	\$0		\$0	\$23,205	\$39,235	\$7,382	\$0	\$0	\$705,408
Prepaid Inpatient Health Plan Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0
Accountable Care Collaborative	\$5,976,019		\$9,376,506	\$1,176,416	\$23,985,873	\$8,973,111	\$43,550,316	\$20,310	\$59,414,184	\$8,506,771	\$3,121,813	\$1,575,582	\$292,882	\$383	\$0	\$167,580,760
Subtotal Service Management	\$15,533,341		\$23,546,233	\$1,196,740	\$24,127,059	\$9,021,496	\$43,870,048	\$20,310	\$59,419,156	\$8,507,356	\$3,180,310	\$1,614,817	\$300,264	\$383	\$0	\$194,468,999
Total Services	\$1,312,554,561	\$270,529,197	\$1,366,174,150	\$70,120,277	\$506,198,326	\$167,713,067	\$1,259,433,623	\$2,231,130	\$898,160,695	\$98,537,667	\$106,899,987	\$138,195,855	\$20,268,131	\$42,669,678	\$48,306,654	\$6,307,992,998
Financing & Supplemental Payments																
Upper Payment Limit Financing	\$2,488,750		\$1,728,342	\$65,813	\$410,325	\$142,309	\$924,200	\$4,163	\$648,263	\$63,094	\$112,089		\$11,096	\$8,203	\$0	\$7,029,904
Hospital Supplemental Payments	\$19,559,798 \$84,850,139		\$159,897,150 \$15,664,506	\$18,076,518 \$15,329	\$142,040,997 \$34,028	\$46,054,471 \$29,625	\$425,133,372 \$767,322	\$1,046,426 \$0	\$226,972,614 \$10,782	\$16,733,116 (\$753)	\$18,773,150 \$0	\$54,365,054 \$0	\$8,483,720 \$0	\$31,232,629 \$0	\$0 \$0	\$1,201,546,143 \$111,257,216
Nursing Facility Supplemental Payments Physician Supplemental Payments	\$38,143	\$9,886,238	\$15,664,506 \$896,888	\$15,329 \$105,690	\$881,794	\$304,791	\$1,852,403	\$6,272	\$1,537,431	\$160,309	\$152,953	\$258,621	\$48,659	\$46,713	\$0 \$0	\$6,400,433
Outstationing Payments	\$12,718	\$46,363	\$271,846	\$38,089	\$381,600	\$132,652	\$825,371	\$3,951	\$449,087	\$55,040	\$36,143	\$49,708	\$10,524	\$7,786	\$0	\$2,320,878
University of Colorado School of Medicine Payments	\$813,932	\$2,342,276	\$19,138,494	\$2,255,301	\$18,816,436	\$6,503,869	\$39,528,055	\$133,830	\$32,806,933	\$3,420,804	\$3,263,844	\$5,518,669	\$1,038,327	\$996,806	\$0	\$136,577,576
Accounting Adjustments	(\$1,268,498)	(\$306,723)	(\$1,553,494)	(\$94,505)	(\$642,535)	(\$218,059)	(\$1,633,735)	(\$2,908)	(\$989,914)	(\$112,804)	(\$125,610)	(\$153,654)	(\$22,219)	(\$44,774)	(\$19,620)	(\$7,189,052)
Subtotal Financing & Supplemental Payments	\$106,494,982		\$196,043,732	\$20,462,235		\$52,949,658	\$467,396,988	\$1,191,734	\$261,435,196	\$20,318,806	\$22,212,569	\$60,091,982	\$9,570,107	\$32,247,363	(\$19,620)	\$1,457,943,098
Grand Total Notes:	\$1,419,049,543	\$316,153,918	\$1,562,217,882	\$90,582,512	\$668,120,971	\$220,662,725	\$1,726,830,611	\$3,422,864	\$1,159,595,891	\$118,856,473	\$129,112,556	\$198,287,837	\$29,838,238	\$74,917,041	\$48,287,034	\$7,765,936,096
Notes: FY 2018-19 actuals are from data accessed in CORE on August	st 15, 2019.															

Exhibit M

						C	ash-based Actuals									
FY 2017-18	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	CORE TOTAL
Acute Care																
Physician Services & EPSDT	\$6,268,395	\$10,984,856	\$82,561,138	\$9,548,731	\$108,993,378	\$43,212,777	\$217,249,813	\$1,429,123	\$201,248,180	\$23,119,752	\$17,325,550	\$29,890,608	\$6,647,503	\$7,027,451	\$0	\$765,507,255
Emergency Transportation Non-emergency Medical Transportation	\$1,523,224 \$7,080,487	\$1,657,166 \$3,535,875	\$8,696,025 \$13,592,151	\$327,068 \$710,271	\$6,381,251 \$2,916,246	\$1,821,053 \$924,059	\$25,313,359 \$11,008,489	\$8,625 \$25,852	\$5,280,114 \$4,026,624	\$658,361 \$334,537	\$1,070,552 \$504,574	\$643,148 \$493,367	\$56,053 \$14,100	\$203,005 \$100,181	\$0 \$0	\$53,639,004 \$45,266,813
Dental Services	\$10,211,678	\$3,440,409	\$20,575,758	\$2,454,054	\$35,194,357	\$16,268,689	\$66,509,190	\$37,696	\$137,730,928	\$25,887,871	\$6,451,712	\$1,728,350	\$327,744	\$419	\$0	\$326,818,855
Family Planning Health Maintenance Organizations	\$0 \$11,935,329	\$0 \$13,337,658	\$0 \$69,471,997	\$0 \$3,342,983	\$2,403 \$68,508,490	\$209 \$22,725,517	\$2,021 \$174,845,983	\$0 \$0	\$1,092 \$46,984,000	\$124 \$4.951.340	\$109 \$563,532	\$54 \$12,143,570	\$0 \$2,281,843	\$0 \$1,240	\$0 (\$24,369)	\$6,012 \$431,069,113
Inpatient Hospitals	\$11,933,329	\$20,643,204	\$111,642,068	\$8,568,470	\$71,177,016	\$22,723,317	\$278,712,228	\$247,277	\$141,717,503	\$8,753,543	\$12,415,589	\$44,323,316	\$2,281,843	\$41,931,148	(\$24,369)	\$792,880,332
Outpatient Hospitals	\$2,639,744	\$8,222,217	\$45,347,842	\$1,683,370	\$77,273,890	\$29,110,141	\$159,700,215	\$559,034	\$96,167,663	\$12,149,198	\$7,370,071	\$9,090,859	\$2,032,538	\$1,830,670	\$10,680	\$453,188,132
Lab & X-Ray Durable Medical Equipment	\$362,263 \$16,135,186	\$1,401,752 \$6,722,055	\$7,470,357 \$67,709,435	\$618,432 \$2,434,561	\$28,453,728 \$9,899,664	\$9,382,776 \$4,302,260	\$40,601,919 \$31,566,871	\$57,969 \$65,264	\$7,007,179 \$26,706,612	\$2,360,549 \$2,938,393	\$1,328,779 \$6,055,831	\$7,495,151 \$370,047	\$422,147 \$15,522	\$348,402 \$2,813	(\$16) \$0	\$107,311,387 \$174,924,514
Prescription Drugs	\$6,255,798	\$29,601,467	\$204,027,668	\$20,334,549	\$137,472,297	\$54,321,388	\$374,238,547	\$349,026	\$112,732,673	\$22,854,260	\$21,194,401	\$5,914,742	\$919,934	\$3,516	\$628,481	\$990,848,747
Physician Administered Drugs Drug Rebate	\$1,604,206 (\$3,512,639)	\$2,920,833 (\$16,621,261)	\$21,650,564 (\$114,561,790)	\$3,883,330 (\$11,417,875)	\$14,271,619 (\$77,190,866)	\$7,025,813 (\$30,501,527)	\$41,703,059 (\$210,135,412)	\$303,051 (\$195,979)	\$6,364,433 (\$63,299,537)	\$79,729 (\$12,832,696)	\$775,801 (\$11,900,683)	\$1,791,289 (\$3,321,135)	\$170,893 (\$516,544)	\$159 (\$1,974)	\$1,149,027 (\$352,893)	\$103,693,806 (\$556,362,811)
Rural Health Centers	\$65,529	\$347,164	\$1,604,709	\$73,333	\$3,791,669	\$1,808,843	\$5,746,349	\$15,982	\$10,067,588	\$1,190,574	\$430,159	\$487,456	\$22,241	\$11,759	(\$332,893)	\$25,663,355
Federally Qualified Health Centers	\$1,664,349	\$2,174,267	\$10,644,520	\$686,424	\$24,360,316	\$10,212,404	\$48,120,376	\$33,638	\$58,661,476	\$5,943,170	\$1,969,335	\$7,785,119	\$267,410	\$85,708	(\$67)	\$172,608,445
Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program	\$39,078,126 \$0	\$6,283,727 \$0	\$24,273,832 \$0	\$6,975,619 \$0	\$2,281,370 \$0	\$245,864 \$0	\$1,863,331 \$0	\$2,215 (\$22,533)	\$197,995 \$0	\$26,388 \$0	\$41,875 \$0	\$59,555 \$0	\$1,841 \$0	\$170 \$0	\$11,668,606 \$0	\$93,000,514 (\$22,533)
Prepaid Inpatient Health Plan Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Medical Services Preventive Services	\$425 \$278,890	\$366 \$575,308	\$2,249 \$3,971,931	\$203 \$391,544	\$1,933 \$12,179,698	\$750 \$5,160,263	\$4,778 \$19,427,272	\$10 \$22.735	\$2,828 \$27,949,426	\$363 \$2,402,679	\$253 \$1,436,736	\$395 \$1,763,835	\$67 \$97,339	\$165 \$17,590	\$50 \$0	\$14,835 \$75,675,246
Acute Home Health	\$6,509,435	\$2,833,514	\$12,500,655	\$416,134	\$1,487,299	\$590,934	\$6,412,276	\$7,923	\$1,953,914	\$77,696	\$543,107	\$261,579	\$5,076	\$1,126	\$0	\$33,600,668
Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal of Acute Care	\$126,193,589	\$98,060,577	\$591,181,109	\$51,031,201	\$527,455,758	\$203,548,722	\$1,292,890,664	\$2,946,908	\$821,500,691	\$100,895,831	\$67,577,283	\$120,921,305	\$20,485,004	\$51,563,548	\$13,079,499	\$4,089,331,689
Community Based Long Term Care		**********			-						-			-		
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services	\$242,816,144 \$10,465,393	\$34,770,319 \$5,271,390	\$137,989,345 \$25,475,289	\$2,929,348 \$122,710	\$0 \$0	\$0 \$0	\$1,370 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$418,506,526 \$41,334,782
HCBS - Children's HCBS	\$0	\$0	\$25,354,895	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$25,354,895
HCBS - Persons Living with AIDS	\$0 \$631.615	\$0 \$90,445	\$0 \$358.939	\$0	\$0 \$0	\$0 \$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$1,088,619
HCBS - Consumer Directed Attendant Support HCBS - Brain Injury	\$5,379,565	\$1,458,525	\$15,262,601	\$7,620 \$54,749	\$0 \$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$22,155,440
HCBS - Children with Autism	\$0	\$0	\$559,525	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$559,525
HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury	\$0 \$1,200,494	\$0 \$103,858	\$760,772 \$4,098,668	\$0 \$255,405	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$760,772 \$5,658,425
CCT - Services	\$1,278,789	\$327,281	\$1,655,846	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,261,916
Private Duty Nursing	\$5,391,820 \$48,628,171	\$358,029 \$8,428,469	\$60,179,523 \$201,637,564	\$1,258,040 \$4,424,728	\$30,548 \$766,240	\$22,613 \$151.912	\$131,192 \$3,479,504	\$0 \$0	\$7,996,591 \$31,770,989	\$226,716 \$2,906,178	\$14,981,374 \$15,106,259	\$0 \$12.651	\$0 \$0	\$0 \$0	\$0 \$16.814	\$90,576,446 \$317,329,479
Long Term Home Health Hospice	\$45,297,838	\$4,103,191	\$6,068,695	\$4,424,728	\$404,771	\$238,838	\$4,233,842	\$14,346	\$180,721	\$2,906,178	\$15,106,239	\$12,651	\$0 \$0	\$12,016	\$10,814	\$61,052,619
Subtotal Community Based Long-Term Care	\$361,089,829	\$54,911,507	\$479,401,662	\$9,523,609	\$1,201,559	\$413,363	\$7,845,908	\$14,346	\$39,948,301	\$3,153,477	\$30,094,402	\$12,651	\$0	\$12,016	\$16,814	\$987,639,444
Long Term Care																
Class I Nursing Facilities	\$531,601,092	\$53,246,932	\$90,576,120	\$414,594	\$313,773	\$452,428	\$13,048,950	\$0	(\$35,815)	\$4,737	\$0	\$0	\$0	\$2,511	\$0	\$689,625,322
Class II Nursing Facilities Program of All-Inclusive Care for the Elderly	\$4,623,021 \$134,528,891	\$42,992 \$17,703,757	\$860,082 \$8,823,522	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$5,526,095 \$161,056,170
Subtotal Long-Term Care	\$670,753,004	\$70,993,681	\$100,259,724	\$414,594	\$313,773	\$452,428	\$13,048,950	\$0	(\$35,815)	\$4,737	\$0	\$0	\$0	\$2,511	\$0	\$856,207,587
Insurance																
Supplemental Medicare Insurance Benefit	\$105,305,731	\$6,140,821	\$55,199,761	\$0	\$345,273	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$30,471,626	\$197,463,212
Health Insurance Buy-In Program	\$17,511	\$21,889	\$2,145,101	\$0	\$26,267	\$43,778	\$39,400	\$0	\$153,221	\$0	\$0	\$13,133	\$0	\$0	\$0	\$2,460,300
Subtotal Insurance	\$105,323,242	\$6,162,710	\$57,344,862	\$0	\$371,540	\$43,778	\$39,400	\$0	\$153,221	\$0	\$0	\$13,133	\$0	\$0	\$30,471,626	\$199,923,512
Service Management																
Single Entry Points Disease Management	\$11,229,722 \$9,979	\$3,052,457 \$19,086	\$19,516,828 \$143,698	\$144,404 \$17,059	\$66,825 \$178,818	\$19,971 \$71,908	\$307,243 \$367,806	\$66,057 \$0	\$129,810 \$0	\$74,506 \$0	\$96,781 \$27,010	\$0 \$47,345	\$0 \$10,344	\$0 \$0	\$95,245 \$0	\$34,799,849 \$893,053
Prepaid Inpatient Health Plan Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Accountable Care Collaborative	\$3,718,887	\$1,287,216	\$8,162,944	\$764,936	\$20,808,430	\$7,201,612	\$36,969,970	\$15,390	\$54,334,599	\$7,446,617	\$3,146,443	\$893,378	\$190,728	\$321	\$0	\$144,941,471
Subtotal Service Management Total Services	\$14,958,588 \$1,278,318,252	\$4,358,759 \$234,487,234	\$27,823,470 \$1,256,010,827	\$926,399 \$61,895,803	\$21,054,073 \$550,396,703	\$7,293,491 \$211,751,782	\$37,645,019 \$1,351,469,941	\$81,447 \$3,042,701	\$54,464,409 \$916,030,807	\$7,521,123 \$111,575,168	\$3,270,234 \$100,941,919	\$940,723 \$121,887,812	\$201,072 \$20,686,076	\$321 \$51,578,396	\$95,245 \$43,663,184	\$180,634,373 \$6,313,736,605
Financing & Supplemental Payments	\$1,2/8,318,252	3434,487,234	\$1,250,010,827	301,895,803	\$350,096,/03	3211,/31,/82	\$1,351,409,941	\$3,042,701	\$910,030,807	3111,5/5,108	3100,941,919	3121,887,812	320,080,076	\$51,5/8,396	343,003,184	30,313,730,005
Upper Payment Limit Financing	\$1,889,440	\$241,467	\$1,182,066	\$32,158	\$313,032	\$121,804	\$724,182	\$3,192	\$482,616	\$54,033	\$77,746	\$36,326	\$7,684	\$6,727	\$39	\$5,172,512
Hospital Supplemental Payments	\$14,729,347	\$21,598,901	\$119,756,237	\$8,770,617	\$113,755,313	\$43,615,765	\$330,500,826	\$838,981	\$175,664,742	\$15,492,696	\$14,622,910	\$38,120,518	\$6,948,543	\$30,357,922	\$8,280	\$934,781,598
Nursing Facility Supplemental Payments	\$82,992,626 \$88,626	\$8,312,817 \$169,509	\$14,140,584	\$64,726	\$48,986	\$70,632 \$638,635	\$2,037,179	\$0	(\$5,591)	\$740	\$0 \$239.885	\$0	\$0 \$01,972	\$392 \$95.518	\$0 \$0	\$107,663,091
Physician Supplemental Payments Outstationing Payments	\$88,626 \$5,362	\$169,509 \$17,579	\$1,276,227 \$102,116	\$151,506 \$6,832	\$1,588,147 \$154,542	\$638,635 \$59,838	\$3,266,605 \$330,324	\$19,425 \$1,598	\$2,762,339 \$186,167	\$314,723 \$22,599	\$239,885 \$14,476	\$420,489 \$18,007	\$91,873 \$3,876	\$95,518 \$3,394	\$0 \$20	\$11,123,507 \$926,730
University of Colorado School of Medicine Payments	\$984,212	\$1,882,437	\$14,172,811	\$1,682,509	\$17,636,750	\$7,092,197	\$36,276,431	\$215,718	\$30,676,442	\$3,495,077	\$2,663,979	\$4,669,634	\$1,020,267	\$1,060,753	\$0	\$123,529,217
Accounting Adjustments Subtotal Financing and Supplemental Payments	(\$4,157,153) \$96,532,460	(\$865,712) \$31,356,998	(\$4,641,486) \$145,988,555	(\$269,144) \$10,439,204	(\$2,205,912) \$131,290,858	(\$856,788) \$50,742,083	(\$5,517,420) \$367,618,127	(\$11,735) \$1,067,179	(\$3,371,237) \$206,395,478	(\$424,796) \$18,955,072	(\$394,711) \$17,224,285	(\$450,131) \$42,814,843	(\$75,826) <b>\$7,996,417</b>	(\$187,676) \$31,337,030	(\$57,042) (\$48,703)	(\$23,486,769) \$1,159,709,886
Subtotal Financing and Supplemental Payments  Grand Total	\$1,374,850,712	\$265,844,232	\$1,401,999,382	\$72,335,007	\$681,687,561	\$262,493,865	\$1,719,088,068	\$4,109,880	\$1,122,426,285	\$130,530,240	\$118,166,204	\$164,702,655	\$28,682,493	\$82,915,426	\$43,614,481	\$7,473,446,491
Notes: FY 2017-18 actuals are from data accessed in CORE on Augus	t 15, 2018.	•														

Exhibit M

							Exhibit M									
FY 2016-17	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	Cash-based Actuals MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	CORE TOTAL
Acute Care																
Physician Services & EPSDT	\$5,549,682	\$9,551,184	\$66,114,232	\$6,587,540	\$82,244,204	\$46,156,733	\$193,657,624	\$665,284	\$187,320,743	\$20,957,739	\$15,010,926	\$33,258,283	\$4,625,383	\$5,634,345	\$33,738	\$677,367,640
Clinic Services Emergency Transportation	\$0 \$1,938,383	\$0 \$1.671.118	\$0 \$8,070,764	\$0 \$285,908	\$0 \$4,655,506	\$0 \$3,174,496	\$0 \$20,217,300	\$0 \$3,105	\$0 \$4,706,531	\$0 \$516,686	\$0 \$824.564	\$0 \$831,450	\$0 \$59,851	\$0 \$173,647	\$0 \$1,301	\$0 \$47,130,610
Non-emergency Medical Transportation	\$6,297,730	\$1,952,972	\$7,461,686	\$293,810	\$1,347,113	\$757,555	\$5,371,101	\$4,899	\$1,781,902	\$193,559	\$283,182	\$257,988	\$5,917	\$20,117	\$1,301	\$26,029,542
Dental Services	\$9,718,391	\$3,322,904	\$19,922,032	\$1,314,791	\$32,640,794	\$19,124,730	\$67,898,206	\$61,398	\$147,759,042	\$27,451,013	\$7,012,490	\$2,397,206	\$326,345	\$162	\$22,394	\$338,971,898
Family Planning Health Maintenance Organizations	\$911 \$10,467,463	\$326 \$11,829,058	\$52,470 \$67,318,203	\$6,178 \$2,173,634	\$1,221,320 \$63,625,538	\$524,401 \$34,487,757	\$1,764,054 \$151,918,251	\$0 \$22,253	\$583,873 \$45,850,583	\$104,988 \$5,923,966	\$70,799 \$791,838	\$158,024 \$12,391,633	\$17,205 \$1,675,596	\$0 (\$691)	\$0 (\$25,023)	\$4,504,549 \$408,450,059
Inpatient Hospitals	\$15,082,838	\$17,591,716	\$96,474,207	\$8,175,734	\$54,474,355	\$30,624,052	\$269,721,847	\$226,344	\$130,635,905	\$6,382,706	\$8,096,673	\$49,866,020	\$5,440,310	\$32,889,372	(\$10,512)	\$725,671,567
Outpatient Hospitals Lab & X-Ray	\$2,865,438 \$490,613	\$8,888,360 \$1,533,708	\$55,173,292 \$9,027,127	\$3,790,732 \$751,040	\$82,472,619 \$23,280,577	\$45,960,995 \$11,448,484	\$197,673,354 \$42.854.263	\$470,855 \$73,618	\$103,913,195 \$11,350,493	\$11,444,090 \$2,289,130	\$6,961,326 \$1,614,333	\$12,605,523 \$7,413,337	\$1,410,313 \$811.645	\$1,416,392 \$155,663	(\$871) \$25,688	\$535,045,613 \$113,119,719
Durable Medical Equipment	\$22,166,996	\$7,359,401	\$63,753,168	\$2,006,310	\$9,001,096	\$5,558,169	\$29,841,160	\$29,169	\$25,018,429	\$2,695,347	\$5,644,923	\$430,418	\$27,822	\$40	\$260,283	\$173,792,731
Prescription Drugs	\$6,697,222	\$28,187,518	\$190,731,757	\$13,816,372	\$120,811,200	\$71,478,144	\$344,761,500	\$350,562	\$125,845,772	\$28,877,794	\$23,575,874	\$8,865,339	\$963,396	\$3,003	\$139,474	\$965,104,927
Drug Rebate Rural Health Centers	(\$4,996,014) \$38,984	(\$20,910,026) \$191,592	(\$142,315,922) \$955,664	(\$10,535,194) \$38,997	(\$93,890,622) \$2,233,140	(\$64,626,676) \$1,478,684	(\$249,587,539) \$4,001,928	(\$250,559) \$3,399	(\$95,539,743) \$6,575,180	(\$26,904,758) \$824,374	(\$17,308,227) \$321,843	(\$6,447,078) \$530,095	(\$771,802) \$41,293	(\$1,380) \$8,159	(\$193,328) \$0	(\$734,278,868) \$17,243,332
Federally Qualified Health Centers	\$755,513	\$1,302,539	\$6,967,428	\$372,129	\$15,136,497	\$9,587,572	\$37,192,928	\$27,512	\$43,406,147	\$3,525,762	\$1,556,604	\$8,556,292	\$602,942	\$285,592	\$699	
Co-Insurance (Title XVIII-Medicare) Breast and Cervical Cancer Treatment Program	\$22,877,290 \$0		\$13,643,597 \$0	\$3,888,746 \$0	\$1,677,575 \$0	\$74,361 \$0	\$360,728 \$0	\$1,571 \$2,135,021	\$42,344 \$0	\$4,942 \$0	\$7,172 \$0	\$46,600 \$0	\$1,294 \$0	\$0 \$0	\$12,181,148 \$0	\$58,577,663 \$2,135,021
Prepaid Inpatient Health Plan Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Medical Services Preventive Services	\$37 \$0	\$29 \$0	\$210 \$0	\$12 \$0	\$130 \$0	\$63 \$0	\$383 \$0	\$1 \$0	\$233 \$0	\$27 \$0	\$23 \$0	\$38 \$0	\$4 \$0	\$10 \$0	\$3 \$0	\$1,203 \$0
Acute Home Health	\$6,123,966	\$2,334,416	\$11,181,555	\$314,869	\$981,454	\$547,273	\$4,807,865	\$4,666	\$1,929,807	\$37,036	\$592,427	\$237,920	\$17,858	\$0 \$0	\$0	\$29,111,112
Presumptive Eligibility	\$0	\$0 \$78,577,110	\$0 \$474,531,470	\$0	\$0	\$0 \$216,356,793	\$0 \$1,122,454,953	\$0	\$0	\$0	\$0 \$55,056,770		\$0 \$15,255,372	\$0	\$0	\$0 \$3,517,254,474
Subtotal of Acute Care	\$106,075,443	\$78,577,110	\$474,531,470	\$33,281,608	\$401,912,496	\$216,356,793	\$1,122,454,953	\$3,829,098	\$741,180,436	\$84,324,401	\$55,056,770	\$131,399,088	\$15,255,372	\$40,584,431	\$12,435,005	\$3,517,254,474
Community Based Long Term Care	****	***		********											0.100.101	
HCBS - Elderly, Blind, and Disabled HCBS - Community Mental Health Services	\$199,682,041 \$11,435,128	\$30,996,190 \$4,450,039	\$129,366,898 \$21,926,045	\$2,331,649 \$112,982	\$309,580 \$22,349	\$32,382 \$175	\$1,146,717 \$146,192	\$0 \$0	\$22,328 \$0	\$0 \$0	\$66,526 \$8,180	\$2,552 \$0	\$0 \$0	\$0 \$0	\$423,491 \$94,823	\$364,380,354 \$38,195,913
HCBS - Children's HCBS	\$0	\$0	\$16,212,727	\$40,222	\$0	\$0	\$0	\$0	\$637,953	\$3,222	\$1,175	\$0	\$0	\$0	\$0	\$16,895,299
HCBS - Persons Living with AIDS	(\$898,039)	\$0 (\$47,737)	\$0 (\$270,700)	(\$7,926)	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 (\$1,224,402)
HCBS - Consumer Directed Attendant Support HCBS - Brain Injury	\$4,373,481	\$1,619,912	\$14,571,353	\$11,531	\$1,588	\$0	\$63,308	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$26,777	\$20,667,950
HCBS - Children with Autism HCBS - Children with Life Limiting Illness	\$0	\$0 \$0	\$503,684 \$680,196	\$7,494 \$969	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$53,670 \$28,619	\$1,413 \$1,107	\$438 \$6,324	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$566,699 \$717,215
HCBS - Children with Life Limiting liness HCBS - Spinal Cord Injury	\$0 \$587,948	\$38,997	\$2,030,037	\$13,347	\$0 \$0	\$0 \$0	\$47,859	\$0	\$28,619	\$1,107	\$0,324	\$0 \$0	\$0	\$0 \$0	\$0	\$2,718,188
CCT - Services	\$995,060	\$221,824	\$1,534,970	\$969	\$0	\$0	\$34,524	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,110	\$2,789,457
Private Duty Nursing Long Term Home Health	\$32,421,076 \$39,750,102	\$380,219 \$8,739,054	\$38,445,725 \$173,793,283	\$526,916 \$2,904,097	\$0 \$583,453	\$0 \$242,459	\$0 \$2,827,143	\$0 \$0	\$5,795,549 \$28,451,344	\$168,244 \$2,333,066	\$9,341,763 \$14,000,869	\$0 \$13,497	\$0 \$1,036	\$0 \$0	\$0 \$0	\$87,079,492 \$273,639,403
Hospice	\$40,464,888	\$3,047,499	\$5,646,291	\$231,548	\$352,449	\$197,716	\$3,656,340	\$28,585	\$141,542	\$7,016	\$5,060	\$5,814	\$10,115	\$156,497	\$0	\$53,951,360
Subtotal Community Based Long-Term Care	\$328,811,685	\$49,445,997	\$404,440,509	\$6,173,798	\$1,269,419	\$472,732	\$7,922,083	\$28,585	\$35,131,005	\$2,514,068	\$23,430,335	\$21,863	\$11,151	\$156,497	\$547,201	\$860,376,928
Long Term Care																
Class I Nursing Facilities Class II Nursing Facilities	\$492,617,483 \$1,361,188	\$50,923,191 \$199,288	\$100,809,620 \$2,315,475	\$177,065 \$0	\$217,731 \$0	\$315,596 \$0	\$4,098,376 \$0	\$0 \$0	\$70,792 \$0	\$1,184 \$0	\$27,882 \$0	\$3,702 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$649,262,622 \$3,875,951
Program of All-Inclusive Care for the Elderly	\$128,240,295	\$16,912,508	\$8,496,888	\$0	(\$15,917)	\$0	(\$97,888)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$824,674)	\$152,711,212
Subtotal Long-Term Care	\$622,218,966	\$68,034,987	\$111,621,983	\$177,065	\$201,814	\$315,596	\$4,000,488	\$0	\$70,792	\$1,184	\$27,882	\$3,702	\$0	\$0	(\$824,674)	\$805,849,785
Insurance																
Supplemental Medicare Insurance Benefit	\$99,587,634	\$5,807,375	\$52,202,417	\$0		\$0 627.042	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$28,817,019	\$186,740,969
Health Insurance Buy-In Program Subtotal Insurance	\$15,177 \$99,602,811	\$18,972 \$5,826,347	\$1,859,221 \$54,061,638	\$0 \$0	\$22,766 \$349,290	\$37,943 <b>\$37,943</b>	\$34,149 \$34,149	\$0 \$0	\$132,802 \$132,802	\$0 \$0	\$0 \$0	\$11,383 <b>\$11,383</b>	\$0 \$0	\$0 \$0	\$0 \$28,817,019	\$2,132,413 \$188,873,382
Service Management	,,	,	,,	, , ,	,	,e.,ç. 10	,12	, ,,,	,302	20	30	,,	30	30	,,,,2	
Single Entry Points	\$8,784,331	\$2,598,679	\$18,717,289	\$215,488	\$36,556	\$3,848	\$221,260	\$0	\$237,934	\$10,903	\$182,138	\$1,283	\$0	\$0	\$79,525	\$31,089,234
Disease Management	\$21,390	\$19,223	\$135,054	\$15,538	\$179,636	\$125,847	\$338,068	\$0	\$0	\$0	\$34,168	\$56,620	\$11,787	\$0	\$0	\$937,331
Prepaid Inpatient Health Plan Administration Accountable Care Collaborative	\$0 \$2,914,538	\$0 \$1,131,754	\$0 \$7,654,416	\$0 \$394,525	\$0 \$17,469,934	\$0 \$10,220,432	\$0 \$37,096,754	\$0 \$2,115	\$0 \$59,169,454	\$0 \$8,511,080	\$0 \$2,639,850	\$0 \$1,146,380	\$0 \$162,819	\$0 \$61	\$0 \$9,566	\$0 \$148,523,678
Subtotal Service Management	\$11,720,259	\$3,749,656	\$26,506,759	\$625,551	\$17,469,934	\$10,220,432 \$10,350,127	\$37,656,082	\$2,115	\$59,407,388	\$8,521,983	\$2,856,156	\$1,140,380	\$174,606	\$61	\$89,091	\$180,550,243
Total Services	\$1,168,429,164	\$205,634,097	\$1,071,162,359	\$40,258,022	\$421,419,145	\$227,533,191	\$1,172,067,755	\$3,859,798	\$835,922,423	\$95,361,636	\$81,371,143	\$132,640,319	\$15,441,129	\$40,740,989	\$41,063,642	\$5,552,904,812
Financing & Supplemental Payments																
Upper Payment Limit Financing Hospital Supplemental Payments	\$1,276,887 \$9,105,389	\$177,064 \$13,973,028	\$849,451 \$79,650,597	\$20,244 \$6,110,922	\$235,541 \$73,939,425	\$122,358 \$42,366,499	\$599,300 \$244,965,150	\$1,010 \$405,247	\$362,463 \$123,940,469	\$37,843 \$9,655,632	\$54,052 \$7,998,268	\$35,317 \$32,077,626	\$3,634 \$3,588,845	\$4,706 \$17,537,986	(\$3) (\$5,423)	\$3,779,867 \$665,309,660
Nursing Facility Supplemental Payments	\$78,230,759	\$8,092,802	\$16,025,981	\$28,006	\$34,626	\$49,649	\$650,126	\$0	\$11,131	\$186	\$4,452	\$591	\$0	\$0	\$0	\$103,128,309
Physician Supplemental Payments	\$103,283	\$93,080	\$653,879	\$75,172	\$869,408	\$608,430	\$1,638,394	\$14,515	\$1,725,163	\$252,308	\$165,332	\$274,446	\$57,003	\$59,713	\$1,076	\$6,591,202
Outstationing Payments Jniversity of Colorado School of Medicine Payments	\$27,949 \$0	\$83,895 \$0	\$557,659 \$0	\$51,767 \$0	\$819,659 \$0	\$392,055 \$0	\$2,099,393 \$0	\$2,134 \$0	\$1,024,346 \$0	\$117,799 \$0	\$69,011 \$0	\$120,235 \$0	\$11,104 \$0	\$19,851 \$0	(\$16) \$0	\$5,396,841 \$0
Accounting Adjustments	(\$1,303,739)	(\$244,827)	(\$1,257,452)	(\$63,911)	(\$618,666)	(\$437,066)	(\$1,542,272)	(\$4,350)	(\$869,298)	(\$141,049)	(\$102,329)	(\$150,969)	(\$21,825)	(\$59,345)	(\$14,835)	(\$6,831,933)
Subtotal Financing and Supplemental Payments  Grand Total	\$87,440,528 \$1,255,869,692	\$22,175,042 \$227,809,139	\$96,480,115 \$1,167,642,474	\$6,222,200 \$46,480,222	\$75,279,993 \$496,699,138	\$43,101,925 \$270,635,116	\$248,410,091 \$1,420,477,846	\$418,556 \$4,278,354	\$126,194,274 \$962,116,697	\$9,922,719 \$105,284,355	\$8,188,786 \$89,559,929	\$32,357,246 \$164,997,565	\$3,638,761 \$19,079,890	\$17,562,911 \$58,303,900	(\$19,201) \$41,044,441	\$777,373,946 \$6,330,278,758
Notes: FY 2016-17 actuals are from data accessed in CORE								1	1							
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Exhibit M

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FY 2015-16	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	Cash-based Actuals MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	CORE TOTAL
Acute Care																
Physician Services & EPSDT	\$4,170,472	\$10,532,475	\$72,397,988	\$6,450,995	\$99,149,751	\$43,258,830	\$218,464,600	\$463,550	\$209,475,242	\$19,617,514	\$14,537,430	\$38,525,890	\$4,455,839	\$5,540,117	\$7,963	\$747,048,656
Clinic Services	\$0 \$2,000,046	\$0 \$1,386,802	\$0 \$6,486,393	\$0 \$204.631	\$0 \$3,215,877	\$0 \$831,046	\$0 \$12,079,906	\$0 \$4,934	\$0 \$3,636,939	\$0 \$302.841	\$0 \$545,804	\$0 \$727,944	\$0 \$60.248	\$0 \$117,887	\$0 \$34,058	\$0 \$31,635,356
Emergency Transportation Non-emergency Medical Transportation	\$3,260,871	\$1,755,147	\$6,969,615	\$163,703	\$1,015,029	\$193,560	\$3,197,422	\$5,869	\$1,341,691	\$115,343	\$272,208	\$141,007	\$3,704	\$859	\$36,354	\$18,472,382
Dental Services	\$9,692,512	\$3,255,670	\$20,017,136	\$1,882,755	\$34,090,114	\$16,628,574	\$64,187,405	\$74,846	\$145,712,015	\$24,525,543	\$6,761,894	\$2,418,029	\$252,079	\$345	\$3,788	\$329,502,705
Family Planning Health Maintenance Organizations	\$528 \$9,447,795	\$992 \$12,228,472	\$46,985 \$68,878,368	\$2,891 \$3,239,365	\$716,229 \$68,358,097	\$365,230 \$37,727,860	\$914,935 \$123,878,453	\$0 \$56,900	\$341,081 \$40,884,782	\$61,664 \$4,527,312	\$30,292 \$591,464	\$101,773 \$13,626,398	\$11,705 \$1,435,071	\$459 \$0	\$0 \$0	\$2,594,764 \$384,880,337
Inpatient Hospitals	\$18,292,743	\$16,639,326	\$90,696,089	\$6,764,992	\$55,111,577	\$22,910,109	\$259,637,386	\$78,035	\$114,338,331	\$5,179,888	\$6,221,158	\$64,923,374	\$7,254,791	\$31,036,448	\$10,073	\$699,094,320
Outpatient Hospitals Lab & X-Ray	\$3,014,976 \$481,231	\$8,709,595 \$1,477,195	\$63,421,210 \$9,692,110	\$5,126,306 \$668,754	\$97,931,288 \$25,701,856	\$39,893,296 \$10,428,774	\$212,878,197 \$42.882.704	\$237,732 \$62,936	\$113,956,211 \$11.724.610	\$13,486,633 \$1,436,375	\$7,727,226 \$1,670,621	\$12,433,542 \$8,417,120	\$1,174,484 \$922,946	\$2,147,336 \$166,570	\$1,211 \$43	\$582,139,243 \$115,733,845
Durable Medical Equipment	\$22,258,858	\$7,902,572	\$65,941,979	\$1,834,863	\$8,583,859	\$3,223,250	\$25,945,820	\$52,874	\$23,215,395	\$2,038,731	\$5,489,338	\$348,629	\$51,402	\$2,420	\$195,552	\$167,085,542
Prescription Drugs Drug Rebate	\$6,227,499 (\$3,051,642)	\$24,685,912 (\$12,096,762)	\$174,153,037 (\$85,339,679)	\$11,400,688 (\$5,586,644)	\$109,975,215 (\$53,890,818)	\$48,970,322 (\$23,996,777)	\$296,662,439 (\$145,372,586)	\$324,059 (\$158,798)	\$114,100,963 (\$55,912,545)	\$17,531,462 (\$8,590,889)	\$22,205,327 (\$10,881,208)	\$7,366,232 (\$3,609,652)	\$796,782 (\$390,444)	\$525 (\$257)	\$2,009 (\$985)	\$834,402,471 (\$408,879,686)
Rural Health Centers	\$56,618	\$247,203	\$1,198,720	\$89,640	\$3,081,704	\$1,658,932	\$4,775,550	\$2,175	\$7,802,596	\$740,919	\$352,281	\$657,990	\$50,352	\$10,476	\$0	\$20,725,156
Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare)	\$770,516 \$29,610,286	\$1,357,335	\$8,268,087	\$391,338	\$18,109,179	\$8,779,786 \$35,047	\$41,908,321	\$46,859	\$49,814,305	\$4,453,883 \$2,212	\$1,641,318	\$9,148,673 \$78,939	\$781,507	\$344,754	\$299	\$145,816,160 \$76,012,667
Breast and Cervical Cancer Treatment Program	\$29,610,286	\$5,273,218 \$0	\$21,041,966 \$0	\$2,322,116 \$0	\$2,942,588 \$0	\$35,047	\$360,398 \$0	\$3,170 \$2,591,199	\$19,711 \$0	\$2,212 \$0	\$20,505 \$0	\$78,939	\$54 \$0	\$1,304 \$0	\$14,301,153 \$0	\$76,012,667 \$2,591,199
Prepaid Inpatient Health Plan Services	\$90,616	\$161,634	\$2,966,454	\$18,351	\$424,917	\$92,395	\$263,935	\$0	\$959,898	\$0	\$69,521	\$246,229	\$96,119	\$0	\$418	\$5,390,487
Other Medical Services Preventive Services	\$127 \$0	\$93 \$0	\$680 \$0	\$38 \$0	\$465 \$0	\$206 \$0	\$1,154 \$0	\$4 \$0	\$750 \$0	\$83 \$0	\$72 \$0	\$140 \$0	\$15 \$0	\$35 \$0	\$13 \$0	\$3,875 \$0
Acute Home Health	\$5,040,801	\$2,590,755	\$10,879,696	\$323,098	\$1,232,589	\$345,330	\$4,992,413	\$1,054	\$1,827,308	\$38,585	\$674,253	\$221,166	\$28,663	\$203	\$0	\$28,195,914
Presumptive Eligibility Subtotal of Acute Care	\$111,364,853	\$86,107,634	\$0 \$537,716,834	\$0 \$35,297,880	\$0 \$475,749,516	\$0 \$211,345,770	\$1,167,658,452	\$0 \$3,847,398	\$0 \$783,239,283	\$0 \$85,468,099	\$0 \$57,929,504	\$0 \$155,773,423	\$0 \$16,985,317	\$0 \$39,369,481	\$14,591,949	\$0 \$3,782,445,393
Community Based Long Term Care			***************************************	,,	41.14,1.17,4.1		**,***,****	00,017,020	,		441,0-21,0-11	0.000,000,000	,,	, , , , , , , , , , , , , , , , , , ,	41,101,0	***************************************
HCBS - Elderly, Blind, and Disabled	\$158,254,237	\$29,645,404	\$128,736,747	\$1,941,856	\$337,114	\$42,261	\$1,422,526	\$0	\$29,685	\$0	\$140,367	\$34,095	\$0	\$0	\$736,932	\$321,321,224
HCBS - Community Mental Health Services	\$5,680,834	\$4,844,841	\$24,777,537	\$92,735	\$12,366	\$0	\$182,561	\$0	\$0	\$0	\$7,251	\$0	\$0	\$0	\$123,436	\$35,721,561
HCBS - Children's HCBS	\$0 \$0	\$0 \$0	\$11,624,351 \$0	\$30,787 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$900,588	\$1,468 \$0	\$1,279 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$12,558,473 \$0
HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support	\$1,025,387	\$192,083	\$834,133	\$12,582	\$2,184	\$274	\$9,217	\$0	\$192	\$0	\$909	\$221	\$0	\$0	\$4,775	\$2,081,957
HCBS - Brain Injury HCBS - Children with Autism	\$938,063 \$0	\$2,023,716 \$0	\$16,067,505 \$528,398	\$17,758 \$615	\$752 \$0	\$0 \$0	\$97,102 \$0	\$0 \$0	\$1,141 \$27,138	\$0 \$0	\$0 \$2,397	\$0 \$0	\$0 \$0	\$0 \$0	\$14,511 \$0	\$19,160,548 \$558,548
HCBS - Children with Autism HCBS - Children with Life Limiting Illness	\$0 \$0	\$0 \$0	\$528,398 \$586,968	\$615 \$554	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$27,138 \$49,560	\$684	\$2,397	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$558,548 \$642,990
HCBS - Spinal Cord Injury	\$159,217	\$50,750	\$1,748,220	\$1,976	\$232	\$0	\$5,390	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$8,639	\$1,974,424
CCT - Services Private Duty Nursing	\$341,658 \$2,646,578	\$322,842 \$602,061	\$1,501,784 \$49,469,896	\$17,425 \$559,463	\$0 \$0	\$0 \$0	\$23,638 \$40.514	\$0 \$0	\$0 \$7.627.484	\$0 \$192,885	\$0 \$11,470,454	\$0 \$0	\$0 \$0	\$0 \$0	\$1,047 \$0	\$2,208,394 \$72,609,335
Long Term Home Health	\$31,647,015	\$8,813,402	\$157,177,050	\$2,237,376	\$468,105	\$34,319	\$2,001,772	\$0	\$22,807,220	\$1,195,443	\$13,045,361	\$9,226	\$0	\$0	\$0	\$239,436,289
Hospice Subtotal Community Based Long-Term Care	\$37,009,391 \$237,702,380	\$3,642,171 \$50,137,270	\$6,535,276 <b>\$399,587,865</b>	\$273,695 \$5,186,822	\$288,882 \$1,109,635	\$88,848 \$165,702	\$3,367,593 <b>\$7,150,313</b>	\$17,689 \$17.689	\$139,670 \$31.582.678	\$0 \$1,390,480	\$1,102 \$24,674,344	\$0 \$43,542	\$0 \$0	\$2,599 <b>\$2.599</b>	\$889,340	\$51,366,916 \$759,640,659
Long Term Care	3237,702,300	950,157,270	333,507,005	35,100,022	\$1,105,000	\$105,702	97,130,013	\$17,000	551,552,676	31,570,400	021,071,011	945,542	30	92,000	5007,510	\$755,040,055
Class I Nursing Facilities	\$471,762,532	\$48,104,528	\$95,971,531	\$185,970	\$167,980	\$15,396	\$3,458,057	\$0	02	\$0	\$5,103	\$0	\$0	\$0	\$2,391	\$619,673,488
Class II Nursing Facilities	\$397,005	\$327,830	\$3,317,671	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$4,042,506
Program of All-Inclusive Care for the Elderly Subtotal Long-Term Care	\$108,848,065 \$581,007,602	\$13,681,759 \$62,114,117	\$6,481,645 \$105,770,847	\$0 \$185,970	\$0 \$167,980	\$0 \$15,396	\$0 \$3,458,057	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$5,103	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$2,391	\$129,011,469 \$752,727,463
Insurance	3301,007,002	302,114,117	3103,770,047	3103,770	3107,700	\$13,370	33,436,637	30	30	30	33,103	30	30	30	92,371	\$132,121,403
Supplemental Medicare Insurance Benefit	\$83,423,470	\$4.864.774	\$43,729,393	\$0	\$273,526	\$0	\$0	\$0	\$0	\$0	\$0	SO.	\$0	\$0	\$24,139,700	\$156,430,863
Health Insurance Buy-In Program	\$11,486	\$14,357	\$1,406,977	\$0	\$17,228	\$28,714	\$25,842	\$0	\$100,498	\$0	\$0	\$8,614	\$0	\$0	\$0	\$1,613,716
Subtotal Insurance	\$83,434,956	\$4,879,131	\$45,136,370	\$0	\$290,754	\$28,714	\$25,842	\$0	\$100,498	\$0	\$0	\$8,614	\$0	\$0	\$24,139,700	\$158,044,579
Service Management																
Single Entry Points Disease Management	\$8,758,028 \$4,417	\$2,502,485 \$11,155	\$18,504,336 \$76,681	\$200,734 \$6,833	\$28,772 \$105,014	\$4,015 \$45,818	\$171,962 \$231,386	\$0 \$0	\$788,216 \$0	\$9,368 \$0	\$223,484 \$15,397	\$669 \$40,805	\$0 \$4,719	\$0 \$0	\$90,999	\$31,283,068 \$542,225
Prepaid Inpatient Health Plan Administration	\$10	\$3	\$27	\$2	\$31	\$11	\$9	\$0	\$18	\$0	\$2	\$7	\$1	\$0	\$0	\$121
Accountable Care Collaborative	\$2,537,026	\$997,903	\$7,402,114	\$468,572	\$17,348,602	\$8,867,761	\$34,091,686	\$21,262	\$57,830,606 \$58,618,840	\$7,572,596 \$7,581,064	\$2,441,963	\$1,142,668	\$140,520	\$1,411	\$84,513	\$140,949,203
Subtotal Service Management Total Services	\$11,299,481 \$1,024,809,272	\$3,511,546 \$206,749,698	\$25,983,158 \$1,114,195,074	\$676,141 \$41,346,813	\$17,482,419 \$494,800,304	\$8,917,605 \$220,473,187	\$34,495,043 \$1,212,787,707	\$21,262 \$3,886,349	\$58,618,840 \$873,541,299	\$7,581,964 \$94,440,543	\$2,680,846 \$85,289,797	\$1,184,149 \$157,009,728	\$145,240 \$17,130,557	\$1,411 \$39,373,491	\$175,512 \$39,798,892	\$172,774,617 \$5,625,632,711
Financing & Supplemental Payments																
Upper Payment Limit Financing Hospital Supplemental Payments	\$1,180,837 \$17,612,702	\$159,293 \$21,281,118	\$772,916 \$130,055,992	\$19,199 \$10,049,700	\$248,355 \$131,387,251	\$100,314 \$53,897,863	\$554,716 \$399,925,058	\$595 \$273,370	\$341,619 \$193,933,661	\$36,491 \$16,123,936	\$51,404 \$11,897,959	\$31,516 \$64,037,549	\$2,993 \$6,966,370	\$5,350 \$27,266,164	\$9 \$9,303	\$3,505,607 \$1,084,717,996
Nursing Facility Supplemental Payments	\$76,548,979	\$7,805,521	\$15,572,502	\$30,176	\$27,257	\$2,498	\$561,110	\$0	\$0	\$0	\$828	\$0	\$0	\$0	\$388	\$100,549,259
Physician Supplemental Payments	\$108,135	\$273,093	\$1,877,182	\$167,266	\$2,570,819	\$1,121,643	\$5,664,492	\$12,019	\$5,431,411	\$508,656	\$376,936	\$998,924	\$115,534	\$143,648	\$206	\$19,369,964
Outstationing Payments Jniversity of Colorado School of Medicine Payments	\$33,372 \$0	\$96,404 \$0	\$701,991 \$0	\$56,742 \$0	\$1,083,973 \$0	\$441,567 \$0	\$2,356,287 \$0	\$2,631 \$0	\$1,261,349 \$0	\$149,280 \$0	\$85,530 \$0	\$137,623 \$0	\$13,000 \$0	\$23,768 \$0	\$13 \$0	\$6,443,530 \$0
Accounting Adjustments	(\$177,517)	(\$39,872)	(\$213,189)	(\$8,784)	(\$101,163)	(\$44,825)	(\$252,226)	(\$768)	(\$164,545)	(\$17,945)	(\$17,725)	(\$30,322)	(\$3,289)	(\$7,512)	(\$2,915)	(\$1,082,597)
Subtotal Financing and Supplemental Payments	\$95,306,508	\$29,575,557	\$148,767,394	\$10,314,299	\$135,216,492	\$55,519,060	\$408,809,437	\$287,847	\$200,803,495	\$16,800,418	\$12,394,932	\$65,175,290	\$7,094,608	\$27,431,418	\$7,004	\$1,213,503,759
Grand Total Notes:	\$1,120,115,780	\$236,325,255	\$1,262,962,468	\$51,661,112	\$630,016,796	\$275,992,247	\$1,621,597,144	\$4,174,196	\$1,074,344,794	\$111,240,961	\$97,684,729	\$222,185,018	\$24,225,165	\$66,804,909	\$39,805,896	\$6,839,136,470
FY 2015-16 actuals are from data accessed in CORE	on January 31, 201	7.		·	·		·	·	·	·	·			·	·	

							Exhibit M Cash-based Actua	1-								
FY 2014-15	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	CORE TOTAL
Acute Care																
Physician Services & EPSDT	\$3,771,379	\$9,916,981	\$66,568,043	\$4,145,915	\$96,815,236	\$36,122,366	\$178,714,716	\$760,690	\$183,160,830	\$15,332,110	\$13,477,087	\$38,751,596	\$4,459,870	\$5,787,709	\$15,398	\$657,799,926
Clinic Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Emergency Transportation	\$859,041 \$2,543,596	\$652,931 \$1,373,242	\$3,535,202	\$75,434 \$80.721	\$2,228,101	\$509,063	\$6,735,257	\$7,271	\$2,391,150	\$182,463 \$83,737	\$363,597	\$496,966 \$93,878	\$24,521	\$82,366	\$173	\$18,143,536
Non-emergency Medical Transportation  Dental Services	\$2,543,596	\$1,373,242	\$5,331,563 \$14,903,405	\$80,721 \$758,575	\$795,536 \$28,727,629	\$126,277 \$11,520,208	\$2,019,535 \$43,374,295	\$8,978 \$51,410	\$1,027,169 \$114,622,180	\$83,/37 \$16,983,497	\$179,576 \$5,430,196	\$1,912,629	\$4,516 \$201,134	\$1,331 \$20,395	\$631 \$583	\$13,670,286 \$248,329,591
Family Planning	\$52	\$180	\$19,952	\$626	\$395,549	\$175,175	\$341,353	\$3	\$288,088	\$36,049	\$86,284	\$67,457	\$4,736	\$131	\$84	\$1,415,719
Health Maintenance Organizations	\$7,108,104	\$11,373,164	\$61,991,940	\$1,144,978	\$67,145,619	\$26,786,330	\$55,281,494	\$34,393	\$45,406,382	\$4,302,012	\$616,786	\$11,594,085	\$1,309,458	\$0	\$227	\$294,094,972
Inpatient Hospitals	\$16,329,588	\$21,605,072	\$90,638,415	\$5,350,867	\$58,315,959	\$19,150,611	\$223,805,633	\$304,758	\$120,310,553	\$4,314,302	\$7,112,415	\$64,064,967	\$6,919,861	\$31,426,297	\$47,180	\$669,696,478
Outpatient Hospitals Lab & X-Ray	\$3,003,669 \$467,377	\$8,416,364 \$1,257,069	\$58,113,406 \$8,156,132	\$3,370,330 \$427,436	\$95,510,977 \$22,024,217	\$33,777,881 \$7,965,752	\$184,439,832 \$31,345,973	\$596,343 \$55,728	\$110,939,336 \$10,683,747	\$10,873,795 \$1,187,801	\$7,956,488 \$1,586,651	\$11,677,303 \$8,254,433	\$1,057,636 \$873,621	\$2,584,759 \$182,391	\$3,245 \$368	\$532,321,364 \$94,468,696
Durable Medical Equipment	\$21,390,288	\$7,246,058	\$62,888,128	\$1,370,460	\$8,143,071	\$2,671,295	\$19,207,942	\$53,121	\$19,538,986	\$1,602,332	\$5,210,831	\$437,293	\$37,821	\$11,844	\$65,852	\$149,875,322
Prescription Drugs	\$6,407,476	\$22,030,318	\$150,791,230	\$6,114,863	\$100,895,753	\$37,586,190	\$205,455,766	\$335,916	\$98,850,382	\$13,583,609	\$20,579,392	\$6,009,263	\$529,786	\$4,381	\$1,032	\$669,175,357
Drug Rebate	(\$3,075,945)	(\$10,575,778)	(\$72,388,174)	(\$2,935,474)		(\$18,043,461)	(\$98,630,190)	(\$161,258)	(\$47,453,679)	(\$6,520,888)	(\$9,879,252)	(\$2,884,780)	(\$254,327)	(\$2,103)	(\$495)	(\$321,241,375
Rural Health Centers	\$63,562	\$302,285	\$1,423,255	\$38,923	\$3,671,941	\$1,453,465	\$4,386,258	\$5,175	\$8,298,508	\$743,132	\$397,646	\$684,350	\$41,943	\$8,625	\$0	\$21,519,068
Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare)	\$852,268 \$22,130,080	\$1,483,941 \$4,018,646	\$8,425,337 \$15,458,646	\$188,228 \$1,043,740	\$19,070,434 \$2,831,367	\$8,513,069 \$47,897	\$41,565,591 \$292,799	\$76,344 \$636	\$51,086,040 \$23,576	\$4,374,281 \$1,423	\$1,753,888 \$13,339	\$10,572,023 \$59,100	\$932,642 \$753	\$401,434 \$4,799	\$2,208 \$8,682,997	\$149,297,728 \$54,609,798
Breast and Cervical Cancer Treatment Program	\$22,130,080	\$4,018,646	\$13,438,646	\$1,043,740	\$2,831,367	\$47,897	\$292,799	\$2,945,501	\$23,376	\$1,423	\$13,339	\$39,100	\$0	\$4,799	\$8,082,997	\$2,945,501
Prepaid Inpatient Health Plan Services	\$1,241,845	\$1,030,356	\$11,286,756	\$188,092	\$11,059,110	\$2,505,549	\$3,845,321	\$0	\$8,536,384	\$598,839	\$1,329,535	\$3,204,865	\$245,231	\$0	\$7,038	\$45,078,921
Other Medical Services	\$622	\$521	\$3,520	\$132	\$2,561	\$941	\$5,082	\$27	\$3,935	\$371	\$393	\$776	\$82	\$205	\$42	\$19,210
Preventive Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Acute Home Health Presumptive Eligibility	\$5,197,837	\$2,805,984 \$0	\$13,544,480 \$0	\$242,091 \$0	\$1,044,220 \$0	\$332,968 \$0	\$4,313,995 \$0	\$12,103 \$0	\$1,823,849 \$0	\$266,880 \$0	\$579,101 \$0	\$114,469 \$0	\$13,735 \$0	\$0 \$0	(\$24,975) \$0	\$30,266,737 \$0
Subtotal of Acute Care	\$95,567,853	\$85,483,775	\$500,691,236	\$21,605,937	\$470,241,709	\$171,201,576	\$906,500,652	\$5,087,139	\$729,537,416	\$67,945,745	\$56,793,953	\$155,110,673		\$40,514,564	\$8,801,588	
Community Based Long Term Care	970,007,000	900,100,770	9500,051,250	921,000,501	9170,211,702	31/1,201,5/0	9200,000,002	95,007,155	9/2/,05/,110	\$67,545,745	950,750,555	9100,110,070	310,103,017	310,011,001	30,001,000	55,551,100,055
HCBS - Elderly, Blind, and Disabled	\$145,776,359	\$26,965,601	\$120,071,169	\$1,393,041	\$586,640	\$104.830	\$1.134.300	\$0	\$8,292	\$0	\$261,233	\$28,982	\$0	\$1,154	\$823,219	\$297,154,820
HCBS - Community Mental Health Services	\$5,348,512	\$4,296,416	\$24,018,634	\$36,912	\$18,270	\$2,852	\$126,168	\$0	\$0	\$0	\$6,636	\$0	\$0	\$0	\$134,993	\$33,989,393
HCBS - Children's HCBS	\$0	\$0	\$9,909,382	\$70,019	\$0	\$0	\$0	\$0	\$931,511	\$953	\$138	\$0			\$0	\$10,912,003
HCBS - Persons Living with AIDS	(\$259)	(\$21)	(\$3,297)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	(\$3,577)
HCBS - Consumer Directed Attendant Support HCBS - Brain Injury	\$1,255,189 \$571,061	\$233,746 \$1,568,283	\$1,046,065 \$14,272,888	\$11,964 \$53,801	\$5,038 \$41,480	\$900 \$0	\$10,152 \$122,805	\$0 \$0	\$71 \$0	\$0 \$0	\$2,243 \$0	\$249 \$0	\$0 \$0	\$10 \$0	\$7,070 \$18,992	\$2,572,697 \$16,649,310
HCBS - Children with Autism	\$0	\$1,508,285	\$666.234	\$9,427	\$41,480	\$0	\$122,803	\$0	\$21,721	\$0 \$0	\$12,676	\$0		\$0	\$10,992	\$710,049,310
HCBS - Children with Life Limiting Illness	\$0	\$0	\$435,310	\$1,749	\$0	\$0	\$0	\$0	\$31,406	\$0	\$5,209	\$0		\$0	\$0	\$473,674
HCBS - Spinal Cord Injury	\$168,679	\$28,884	\$1,541,573	\$6,800	\$12,052	\$0	\$1,007	\$0	\$0	\$0	\$0	\$0		\$0	\$77	\$1,759,072
CCT - Services	\$377,824	\$251,763	\$1,732,716	\$0	\$0	\$0	\$47,763	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$2,410,066
Private Duty Nursing Long Term Home Health	\$2,110,022 \$28,375,632	\$441,354 \$9,114,399	\$39,608,590 \$139,389,238	\$300,436 \$1,945,982	\$0 \$310,179	\$0 \$69,594	\$41,377 \$1,335,165	\$0 \$0	\$7,416,333 \$18,387,951	\$27,251 \$725,506	\$11,553,619 \$12,889,124	\$0 \$6,903	\$0 \$0	\$0 \$0	\$0 \$27,780	\$61,498,982 \$212,577,453
Hospice	\$33,254,147	\$3,938,226	\$6,581,768	\$160,754	\$330,107	\$193,375	\$2,912,744	\$6,536	\$201,612	\$2,960	\$40,525	\$0,703	\$0	\$0	\$27,780	\$47,622,754
Subtotal Community Based Long-Term Care	\$217,237,166	\$46,838,651	\$359,270,270	\$3,990,885	\$1,303,766	\$371,551	\$5,731,481	\$6,536	\$26,998,897	\$756,670	\$24,771,403	\$36,134	\$0	\$1,164	\$1,012,131	\$688,326,705
Long Term Care																
	\$450,965,898	\$41,239,990	\$84.210.839	\$82.897	\$195,582	\$40,448	\$2,542,746	\$0	\$0	\$0	\$76,579	\$0	\$0	\$0	(\$25,076)	\$579,329,903
Class I Nursing Facilities Class II Nursing Facilities	\$450,965,898	\$41,239,990	\$3,411,445	\$82,897	\$195,582	\$40,448 \$0	\$2,542,746	\$0 \$0	\$0 \$0	\$0 \$0	\$76,579	\$0	\$0	\$0 \$0	(\$25,076) \$0	\$4,277,851
Program of All-Inclusive Care for the Elderly	\$112,128,644	\$14,440,173	\$6,335,950	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$132,904,767
Subtotal Long-Term Care		\$56,135,552	\$93,958,234	\$82,897	\$195,582	\$40,448	\$2,542,746	\$0	\$0	\$0	\$76,579	\$0	\$0	\$0	(\$25,076)	
Insurance						-										
Supplemental Medicare Insurance Benefit	\$73,205,694	\$4,268,933	\$38,373,381	\$0	\$240,024	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$21,183,050	\$137,271,082
Health Insurance Buy-In Program	\$8,989	\$11,236	\$1,101,111	\$0	\$13,483	\$22,472	\$20,224	\$0	\$78,651	\$0	\$0	\$6,741	\$0	\$0	\$0	\$1,262,907
Subtotal Insurance	\$73,214,683	\$4,280,169	\$39,474,492	\$0	\$253,507	\$22,472	\$20,224	\$0	\$78,651	\$0	\$0	\$6,741	\$0	\$0	\$21,183,050	\$138,533,989
Service Management																
Single Entry Points	\$9,072,052	\$2,528,512	\$18,428,482	\$201,793	\$44,524	\$5,745	\$170,913	\$0	\$1,712,006	\$9,336	\$315,974	\$2,154	\$0	\$0	\$127,826	\$32,619,317
Disease Management	\$8,232	\$21,647	\$145,304	\$9,050	\$211,327	\$78,847	\$390,096	\$0	\$0	\$0	\$29,418	\$84,586	\$9,735	\$0	\$0	\$988,242
Prepaid Inpatient Health Plan Administration	\$131,201	\$52,198	\$339,287	\$15,518	\$415,468	\$119,209	\$229,248	\$0	\$652,475	\$52,903	\$83,940	\$100,164	\$9,170	\$0	\$705	\$2,201,486
Accountable Care Collaborative Subtotal Service Management	\$1,548,799 \$10,760,284	\$747,258 \$3,349,615	\$5,551,796 <b>\$24,464,869</b>	\$158,419 \$384,780	\$14,847,436 \$15,518,755	\$6,198,632 \$6,402,433	\$19,585,930 \$20,376,187	\$0 \$0	\$46,840,789 \$49,205,270	\$5,347,941 \$5,410,180	\$1,943,616 \$2,372,948	\$952,332 \$1,139,236	\$111,815 \$130,720	\$25,749 <b>\$25,749</b>	\$90,254 <b>\$218,785</b>	\$103,950,766 \$139,759,811
Subtotal Service Management Total Services	\$10,760,284	\$196,087,762	\$1,017,859,101	\$384,780	\$487,513,319	\$178,038,480	\$935,171,290	\$5,093,675	\$805,820,234	\$74,112,595	\$2,372,948	\$1,139,236	\$130,720	\$40,541,477	\$218,785	\$5,014,619,861
Financing & Supplemental Payments																
	\$1,258,632	\$161,115	\$777,086	\$15,459	\$276,197	\$97,407	\$546,766	\$1,731	\$368,268	\$33,548	\$57,588	\$33,592	\$3,050	\$7,366	(\$48)	\$3,637,757
Upper Payment Limit Financing Hospital Supplemental Payments	\$1,258,632	\$161,115	\$77,086	\$15,459	\$76,528,890	\$26,374,862	\$199,860,824	\$1,/31 \$450,028	\$113,514,255	\$33,548 \$7.623.848	\$57,588 \$7,431,061	\$35,392	\$3,785,914	\$16,050,425	\$23,769	\$5,637,757
Nursing Facility Supplemental Payments	\$72,414,594	\$6,622,180	\$13,522,294	\$13,311	\$31,406	\$6,495	\$408,306	\$0	\$0	\$0	\$12,297	\$0	\$0	\$0	(\$4,027)	\$93,026,856
Physician Supplemental Payments	\$26,713	\$70,243	\$471,506	\$29,366	\$685,748	\$255,857	\$1,265,848	\$5,388	\$1,297,340	\$108,598	\$95,459	\$274,480	\$31,589	\$40,995	\$109	\$4,659,239
Outstationing Payments	\$110,302	\$309,069	\$2,134,061	\$123,767	\$3,507,388	\$1,240,403	\$6,773,065	\$21,899	\$4,073,954	\$399,311	\$292,181	\$428,818	\$38,839	\$94,918	\$119	\$19,548,094
Jniversity of Colorado School of Medicine Payments Accounting Adjustments	\$0 \$1,000,099	\$0 \$225,772	\$0 \$1,161,859	\$0 \$32,635	\$0 \$586,057	\$0 \$215,217	\$0 \$1,168,113	\$0 \$6,085	\$0 \$908,238	\$0 \$84,852	\$0 \$103,408	\$0 \$177,135	\$0 \$18,726	\$0 \$46,776	\$0 \$10,593	\$0 \$5,745,565
Subtotal Financing and Supplemental Payments	\$1,000,099 \$84,006,086	\$225,772 \$21,844,048	\$1,161,859	\$32,633 \$4,457,340	\$81,615,686	\$215,217 \$28,190,241	\$1,168,113	\$485,131	\$908,238 \$120,162,055	\$84,852 \$8,250,157	\$103,408	\$36,936,137	\$18,726	\$16,240,480	\$10,593 \$30,515	\$5,745,565 \$714,573,932
Grand Total		\$217,931,810	\$1,108,322,123	\$30,521,839	\$569,129,005	\$206,228,721	\$1,145,194,212	\$5,578,806	\$925,982,289	\$82,362,752	\$92,006,877	\$193,228,921	\$20,411,857	\$56,781,957	\$31,220,993	\$5,729,193,793
	\$1,044,291,631	\$217,931,810	\$1,108,322,123	\$30,521,839	\$509,129,005	\$206,228,721	51,145,194,212	\$5,578,806	\$925,982,289	\$82,362,752	\$92,006,877	\$193,228,921	\$20,411,857	\$50,/81,957	\$51,220,993	55,/29,193,793
Note:																

L Effective February 2016, the Department has restated actuals between categories (MAGI Parents/Caretakers to 68% FPL, MAGI Parents/Caretakers 69% to 133% FPL, MAGI Adults, Breast & Cervical Cancer Program, Eligible Children (AFDC-C/BC), and SB 11-008 Eligible Children) to account for an error in the distribution of clients between these categories. These adjustments affect FY 2013-14 and FY 2014-15, and are from data accessed in CORE on January 18, 2016.

							Cash-based Actua	ale								
FY 2013-14	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	COFRS TOTAL
Acute Care																1
Physician Services & EPSDT	\$4,043,358	\$9,764,022	\$65,059,985	\$4,447,494	\$79,412,236	\$22,746,644	\$62,764,565	\$0	01.10j0.1.j==2	\$6,564,319	\$11,140,179	\$32,892,756	\$2,259,530	\$5,996,669	\$6,241	\$447,742,226
Clinic Services Emergency Transportation	\$0 \$122,767	\$0 \$386,959	\$0 \$2,292,281	\$0 \$74,609	\$0 \$1,688,406	\$0 \$377,423	\$0 \$2,529,108	\$0 \$0	\$0 \$1.836.694	\$0 \$93,391	\$0 \$217.731	\$0 \$418.912	\$0 \$12,129	\$0 \$74,649	\$0 \$793	\$10,125,852
Non-emergency Medical Transportation	\$2,801,468	\$1,681,808	\$6,714,864	\$104,987	\$787,858	\$134,029	\$884,418	\$0	\$1,309,873	\$16,599	\$186,648	\$108,329	\$158	\$1,171	\$2,733	\$14,734,943
Dental Services	\$1,794,852	\$558,246	\$6,514,545	\$182,628	\$9,153,795	\$2,701,535	\$7,009,072	\$0	\$104,015,935	\$8,645,646	\$5,427,900	\$753,139	\$37,893	\$6,551	\$2,203	\$146,803,940
Family Planning Health Maintenance Organizations	\$171 \$5,677,843	\$148 \$8,172,001	\$21,457 \$42,251,264	\$519 \$413,617	\$324,023 \$24,329,657	\$120,585 \$7,208,136	\$108,540 \$990,043	\$0 \$0	\$235,217 \$41,097,777	\$14,840 \$2,040,162	\$87,920 \$842,135	\$40,664 \$2,689,951	\$4,492 \$177,153	\$0 \$0	\$0 \$983	\$958,576 \$135,890,722
Inpatient Hospitals	\$12,214,429	\$15,459,639	\$100,723,524	\$9,865,184	\$53,019,260	\$14,695,913	\$82,271,168	\$0	\$97,275,901	\$2,780,149	\$5,454,304	\$50,721,950	\$3,936,967	\$29,904,181	(\$11,278)	\$478,311,291
Outpatient Hospitals Lab & X-Rav	\$4,073,018 \$561,228	\$8,674,477 \$1,308,244	\$63,033,295 \$8,043,314	\$4,581,825 \$412,716	\$83,219,305 \$19,064,302	\$28,408,884 \$5,597,136	\$80,209,873 \$12,668,155	\$0 \$0	\$96,213,635 \$8,096,984	\$7,383,654 \$571,527	\$6,710,556 \$1,363,487	\$11,883,976 \$6,338,685	\$768,457 \$504,049	\$1,990,324 \$154,559	\$18,275 \$389	\$397,169,554 \$64,684,775
Durable Medical Equipment	\$19,993,666	\$6,603,977	\$58,381,851	\$1,146,426	\$6,130,253	\$1,697,299	\$6,071,020	\$0	\$13,761,168	\$735,697	\$4,764,199	\$320,245	\$14,406	\$134,339	\$41,277	\$119,661,675
Prescription Drugs	\$7,635,879	\$20,390,022	\$140,653,748	\$5,070,325	\$74,904,567	\$23,282,207	\$70,931,016	\$0	\$78,800,106	\$7,972,434	\$18,780,213	\$4,407,498	\$343,428	\$0	\$19,995	\$453,191,438
Drug Rebate Rural Health Centers	(\$3,290,157) \$76,264	(\$8,785,678) \$269,623	(\$60,605,064) \$1,260,474	(\$2,184,708) \$49,323	(\$32,274,974) \$2,842,709	(\$10,031,867) \$927,828	(\$30,562,845) \$1,552,329	\$0 \$0	(\$33,953,490) \$6,617,012	(\$3,435,172) \$383,462	(\$8,092,042) \$338,606	(\$1,899,108) \$465,767	(\$147,977) \$32,629	\$0 \$9,802	(\$8,616) \$68	(\$195,271,698) \$14,825,896
Federally Qualified Health Centers	\$1,026,219	\$1,398,281	\$8,662,577	\$258,811	\$17,770,985	\$6,072,398	\$1,332,329	\$0 \$0	\$58,131,185	\$3,251,501	\$1,880,042	\$8,924,580	\$590,478	\$373,196	\$1,908	\$128,107,489
Co-Insurance (Title XVIII-Medicare)	\$22,734,911	\$3,929,241	\$16,405,226	\$756,407	\$1,713,377	\$564,799	\$277,023	\$0	\$24,448	\$382	\$6,921	\$51,243	\$1,476	\$0	\$8,438,925	\$54,904,379
Breast and Cervical Cancer Treatment Program Prepaid Inpatient Health Plan Services	\$0 \$1,461,833	\$0 \$2,659,699	\$0 \$15,888,654	\$0 \$598,122	\$0 \$14.862.251	\$0 \$3,626,623	\$0 \$888,577	\$8,879,647 \$0	\$0 \$12,689,674	\$0 \$196,781	\$0 \$1,928,356	\$0 \$4,018,370	\$0 \$110,765	\$0 \$0	\$0 \$2,858	\$8,879,647 \$58,932,563
Other Medical Services	\$1,461,833	\$2,659,699	\$15,888,654	\$398,122	\$14,862,251	\$3,626,623	\$888,577	\$68	\$12,689,674	\$196,781	\$1,928,356 \$548	\$4,018,370	\$110,765	\$0 \$304	\$2,858 \$56	\$20,991
Preventive Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Acute Home Health Presumptive Eligibility	\$4,746,512 \$0	\$2,312,870 \$0	\$10,990,172 \$0	\$264,529 \$0	\$785,606 \$0	\$221,450 \$0	\$1,429,996 \$0	(\$2,446) \$0	\$1,076,709 \$0	\$96,886 \$0	\$661,112 \$0	\$86,583 \$0	\$2,691 \$0	\$0 \$0	\$147,321 \$0	\$22,819,991 \$0
Subtotal of Acute Care	\$85,675,110			\$26,043,041		\$108,351,925	\$319,790,154	\$8,877,269	\$627,878,215	\$37,312,569	\$51,698,815	\$122,224,478	\$8,648,792	\$38,511,597	\$8,664,131	\$2,362,494,250
Community Based Long Term Care																
HCBS - Elderly, Blind, and Disabled	\$137,529,774	\$24,219,087	\$115,680,698	\$724,923	\$186,239	\$29,760	\$263,750	\$0	\$1,630	S0	\$148,720	\$0	\$0	\$0	\$738,607	\$279,523,188
HCBS - Community Mental Health Services	\$4,841,365	\$4,065,194	\$22,793,556	\$33,366	\$4,185	\$40	\$54,018	\$0	\$0	\$0	\$649	\$35	\$0	\$0	\$126,821	\$31,919,229
HCBS - Children's HCBS	\$0 \$9,821	\$0 \$813	\$7,856,110 \$125,099	\$17 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$245,654 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$8,101,781 \$135,733
HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support	\$1,147,005	\$201,988	\$964,783	\$6,046	\$1,553	\$248	\$2,200	\$0	\$14	\$0	\$1,240	\$0	\$0 \$0	\$0 \$0	\$6,160	\$2,331,237
HCBS - Brain Injury	\$412,822	\$1,254,551	\$12,464,998	\$4,821	\$12,089	\$0	\$18,321	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$16,475	\$14,184,077
HCBS - Children with Autism HCBS - Children with Life Limiting Illness	\$0 \$0	\$0 \$0	\$733,096 \$214,922	\$2,563 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$13,349 \$3,510	\$0 \$0	\$15,294 \$3,200	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$764,302 \$221,632
HCBS - Spinal Cord Injury	\$214,216	\$19,446		\$0	\$1,105	\$0	\$817	\$0	\$0	\$0	\$3,200	\$0	\$0	\$0	\$0	\$1,773,572
CCT - Services	\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Private Duty Nursing Long Term Home Health	\$3,039,698 \$26,251,582	\$734,755 \$8,030,921	\$35,345,893 \$130,369,940	\$280,781 \$1,316,824	\$0 \$235,386	\$0 \$18.678	\$43,544 \$172,588	\$0 \$2,446	\$3,373,711 \$7,825,402	\$400 \$244,287	\$10,310,507 \$11,792,931	\$0 \$1,213	\$0 \$0	\$0 \$0	\$25,614 \$252,997	\$53,154,903 \$186,515,195
Hospice	\$31,935,985	\$3,814,200	\$7,418,711	\$344,667	\$158,722	\$144,242	\$1,024,926	\$0	\$149,582	\$0	\$0	\$0	\$0	\$0	\$26,219	\$45,017,254
Subtotal Community Based Long-Term Care	\$205,382,268	\$42,340,955	\$335,505,794	\$2,714,008	\$599,279	\$192,968	\$1,580,164	\$2,446	\$11,612,852	\$244,687	\$22,272,541	\$1,248	\$0	\$0	\$1,192,893	\$623,642,103
Long Term Care																i I
Class I Nursing Facilities	\$440,587,143	\$38,148,380	\$81,720,674	\$387,966	\$125,945	\$0	\$570,397	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$784,886	\$562,325,391
Class II Nursing Facilities Program of All-Inclusive Care for the Elderly	\$393,954 \$85,832,165	\$298,879 \$10,249,500	\$2,748,163 \$4,393,152	\$0 \$0	\$0 \$0	\$0 \$0	\$43,770 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$3,484,766 \$100,474,817
Subtotal Long-Term Care	\$526,813,262	\$48,696,759	\$88,861,989	\$387,966	\$125,945	\$0	\$614,167	\$0 \$0	\$0 \$0	\$0 \$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$784,886	\$666,284,974
Insurance																
Supplemental Medicare Insurance Benefit	\$68,884,741	\$4,016,960	\$36,108,399	\$0	\$225,857	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$19,932,724	\$129,168,681
Health Insurance Buy-In Program	\$11,744	\$20,552	\$1,215,523	\$0	\$26,425	\$0	\$0	\$0	\$60,491	\$0	\$21,718	\$8,808	\$0	\$0	\$0	\$1,365,261
Subtotal Insurance	\$68,896,485	\$4,037,512	\$37,323,922	\$0	\$252,282	\$0	\$0	\$0	\$60,491	\$0	\$21,718	\$8,808	\$0	\$0	\$19,932,724	\$130,533,942
Service Management																
Single Entry Points	\$7,836,051	\$2,131,642	\$15,256,301	\$107,844	\$14,555 \$142,070	\$3,169	\$35,876	\$376	\$1,156,908	\$0	\$248,772	\$161	\$0	\$0	\$107,361	\$26,899,016
Disease Management Prepaid Inpatient Health Plan Administration	\$7,234 \$521,003	\$17,469 \$251.547	\$116,400 \$1,474,302	\$7,957 \$43,729	\$142,079 \$1,553,848	\$40,697 \$424,799	\$112,294 \$88,292	\$0 \$0	\$0 \$2,691,223	\$0 \$43,733	\$19,931 \$263.625	\$62,892 \$262,766	\$0 \$8,772	\$0 \$0	\$0 \$2,499	\$526,953 \$7,630,138
Accountable Care Collaborative	\$547,729	\$468,561	\$4,052,232	\$88,828	\$10,681,279	\$3,955,017	\$6,302,817	\$0	\$38,151,110	\$1,949,462	\$1,594,103	\$714,315	\$40,255	\$842	\$23,780	\$68,570,330
Subtotal Service Management	\$8,912,017	\$2,869,219	\$20,899,235	\$248,358	\$12,391,761	\$4,423,682	\$6,539,279	\$376	\$41,999,241	\$1,993,195	\$2,126,431	\$1,040,134	\$49,027	\$842	\$133,640	\$103,626,437
Total Services	\$895,679,142	\$172,728,710	\$968,888,268	\$29,393,373	\$371,105,828	\$112,968,575	\$328,523,764	\$8,880,091	\$681,550,799	\$39,550,451	\$76,119,505	\$123,274,668	\$8,697,819	\$38,512,439	\$30,708,274	\$3,886,581,706
Financing & Supplemental Payments																
Upper Payment Limit Financing	\$2,285,513	\$275,715	\$1,380,129	\$32,126	\$417,977	\$141,962	\$407,973	\$0	\$519,465	\$38,175	\$92,728	\$59,326	\$3,821	\$9,866	\$5,774	\$5,670,550
Hospital Supplemental Payments Nursing Facility Supplemental Payments	\$11,507,426 \$70,338,750	\$17,112,897 \$6,090,303	\$116,213,340 \$13,046,522	\$10,229,747 \$61,938	\$97,403,214 \$20,107	\$30,866,151 \$0	\$115,720,548 \$91,063	\$0 \$0	\$137,873,040 \$0	\$7,242,327 \$0	\$8,680,400 \$0	\$44,141,616 \$0	\$3,317,657 \$0	\$22,394,362 \$0	\$5,329 \$125,305	\$622,708,054 \$89,773,988
Physician Supplemental Payments	\$50,744	\$122,537	\$816,497	\$55,816	\$996,616	\$285,468	\$787,689	\$0	\$1,765,072	\$82,382	\$139,808	\$412,801	\$28,357	\$75,258	\$78	\$5,619,123
Outstationing Payments University of Colorado School of Medicine Payments	\$65,720 \$0	\$139,967 \$0	\$1,017,072 \$0	\$73,930 \$0	\$1,342,783 \$0	\$458,391 \$0	\$1,294,224 \$0	\$0 \$0	\$1,552,452 \$0	\$119,139 \$0	\$108,278 \$0	\$191,754 \$0	\$12,399 \$0	\$32,115 \$0	\$295 \$0	\$6,408,519 \$0
University of Colorado School of Medicine Payments  Accounting Adjustments	\$436,709	\$90,753	\$505,639	\$16,283	\$198,896	\$61,001	\$187,748	\$4,585	\$350,522	\$0 \$20,341	\$42,577	\$63,459	\$0 \$4,477	\$0 \$20,535	\$4,735	\$2,008,260
Subtotal Financing and Supplemental Payments	\$84,684,862	\$23,832,172		\$10,469,840	\$100,379,593	\$31,812,973	\$118,489,245	\$4,585	\$142,060,551	\$7,502,364	\$9,063,791	\$44,868,956	\$3,366,711	\$22,532,136	\$141,516	\$732,188,494
Grand Total	\$980,364,004	\$196,560,882	\$1,101,867,467	\$39,863,213	\$471,485,421	\$144,781,548	\$447,013,009	\$8,884,676	\$823,611,350	\$47,052,815	\$85,183,296	\$168,143,624	\$12,064,530	\$61,044,575	\$30,849,790	\$4,618,770,200
Note:  1. Historicals have been restated for the Eligible Chile	dren (AFDC-C/DC	") SR 11-008 Eli-	ible Children MA	GI Prognant Adulto	s and SR 11-250 E	ligible Prognant A	dults to correct on	error in the pression	us distribution of d	ollars hetween the	nonulatione within	Fligible Children	and Pregnant Adv	ılts categories room	ectively	
1. This contents have been restated for the Eligible Clini	a.a. (AI DC-C/BC	7, 52 11-000 Elig	iore cilitaren, MA	G. Fregnant Addite	, and 9D 11-230 E	agazie i reguditi A	control di	error in the previo	ao alburouton on u	omis octween the	populations within	. Lagiore Cardier	and regnant Add	ing categories respi	coursely.	

						Ca	sh-based Actuals									
FY 2012-13	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	COFRS TOTAL
Acute Care																
Physician Services & EPSDT	\$3,733,246	\$7,649,554	\$55,946,660	\$2,017,690	\$65,332,114	\$18,077,268	\$9,578,088	\$0	\$113,235,322	\$2,820,853	\$9,766,797	\$16,755,632	\$750,233	\$5,679,532	\$1,154	\$311,344,143
Clinic Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Emergency Transportation Non-emergency Medical Transportation	\$124,218 \$2,046,589	\$323,127 \$978,360	\$2,163,425 \$4,716,005	\$32,160 \$41,726	\$1,485,643 \$433,180	\$369,950 \$97,299	\$641,885 \$194,838	\$0 \$0	\$1,637,796 \$914,535	\$26,420 \$3,640	\$187,373 \$102,262	\$167,195 \$47,670	\$8,312 \$334	\$106,156 \$188	\$0 \$129	\$7,273,660 \$9,576,755
Dental Services	\$1,392,227	\$396,231	\$5,433,896	\$53,656	\$5,859,871	\$1,742,902	\$662,572	\$0	\$92,806,672	\$2,680,354	\$5,018,241	\$309,878	\$16,150	\$13,185	\$203	\$116,386,038
Family Planning	\$30	\$103	\$22,595	\$693	\$263,357	\$91,428	\$11,356	\$0	\$192,173	\$7,719	\$77,522	\$30,742	\$1,502	\$0	\$0	\$699,220
Health Maintenance Organizations	\$5,627,161 \$15,837,813	\$7,554,375 \$18,086,253	\$40,140,958 \$113,024,520	\$244,617 \$3,818,807	\$23,044,932 \$68,007,485	\$8,493,510 \$13,393,053	\$0 \$15,941,298	\$0 \$0	\$38,756,103 \$85,415,409	\$544,994 \$2,638,015	\$785,911 \$5,291,669	\$1,295,209 \$28,564,111	\$43,813 \$1,274,916	\$0 \$35,472,048	\$0 \$19,522	\$126,531,583 \$406,784,919
Inpatient Hospitals Outpatient Hospitals	\$15,837,813	\$18,086,253	\$113,024,520 \$57.838.186	\$3,818,807	\$71,204,056	\$13,393,033	\$13,941,298 \$14.655.972	\$0 \$0	\$85,415,409 \$85,203,477	\$2,638,015	\$5,291,669	\$6,306,950	\$1,274,916	\$1,919,513	\$19,322	\$406,784,919 \$281.148.005
Lab & X-Ray	\$488,758	\$1,018,642	\$7,339,265	\$205,214	\$16,311,375	\$4,656,054	\$1,995,854	\$0	\$7,258,518	\$467,903	\$1,468,092	\$4,130,559	\$161,187	\$151,951	\$13	\$45,653,385
Durable Medical Equipment	\$19,066,652	\$6,220,600	\$54,238,022	\$369,556	\$4,767,095	\$1,520,743	\$1,349,129	\$0	\$10,732,598	\$160,536	\$4,520,423	\$142,596	\$6,366	\$3,137	\$28,801	\$103,126,254
Prescription Drugs  Drug Rebate	\$6,719,553 (\$3,599,458)	\$18,246,448 (\$9,774,062)	\$126,656,626 (\$67,846,065)	\$2,095,797 (\$1,122,654)	\$58,302,300 (\$31,230,752)	\$21,010,283 (\$11,254,563)	\$12,450,869 (\$6,669,548)	\$0 \$0	\$65,383,399 (\$35,023,879)	\$2,300,381 (\$1,232,243)	\$18,488,514 (\$9,903,729)	\$2,447,209 (\$1,310,895)	\$102,473 (\$54,892)	\$0 \$0	\$262 (\$140)	\$334,204,114 (\$179,022,880)
Rural Health Centers	\$68,840	\$302,964	\$1,310,864	\$32,728	\$2,371,639	\$886,068	\$187,860	\$0	\$6,447,858	\$122,104	\$296,822	\$294,754	\$14,997	\$7,574	\$521	\$12,345,593
Federally Qualified Health Centers	\$944,509	\$1,199,727	\$8,478,727	\$140,279	\$16,982,037	\$4,871,971	\$4,036,338	\$0	\$54,024,086	\$1,245,246	\$1,894,311	\$5,363,217	\$207,877	\$402,879	\$0	\$99,791,204
Co-Insurance (Title XVIII-Medicare)	\$17,569,039	\$3,024,606	\$12,446,112	\$274,031	\$537,695	\$888,995	\$8,564	\$0	\$13,711	\$1,394	\$3,037	\$34,811	\$375	\$112	\$6,036,730	\$40,839,212
Breast and Cervical Cancer Treatment Program Prepaid Inpatient Health Plan Services	\$0 \$1,059,766	\$0 \$1,577,317	\$9,663,961	\$0 \$647,691	\$0 \$12.557.982	\$4.456.972	\$0 \$0	\$9,559,144 \$0	\$0 \$21,163,282	\$0 \$158,949	\$0 \$1.869.895	\$0 \$4,464,891	\$0 \$34,808	\$0 \$0	\$0 \$0	\$9,559,144 \$57,655,514
Other Medical Services	\$752	\$599	\$4,562	\$92	\$2,518	\$741	\$467	\$72	\$4,354	\$0	\$486	\$517	\$0	\$327	\$45	\$15,532
Preventive Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Acute Home Health Presumptive Eligibility	\$4,372,425 \$0	\$1,944,403 \$0	\$9,888,976 \$0	\$79,789 \$0	\$600,900 \$0	\$172,799 \$0	\$224,892 \$0	(\$840) \$0	\$555,960 \$0	\$47,028 \$0	\$669,278 \$0	\$44,098 \$3,075,000	\$1,587 \$0	\$0 \$0	\$124,081 \$0	\$18,725,376 \$3,075,000
Subtotal of Acute Care	\$78,805,339	\$65,882,971	\$441,467,295	\$11,438,155	\$316,833,427	\$92,095,552	\$55,270,434	\$9,558,376	\$548,721,374	\$14,144,638	\$46,515,535	\$72,164,144	\$2,846,306	\$43,756,602	\$6,211,623	\$1,805,711,771
Community Based Long-Term Care	\$70,005,557	303,002,771	\$441,407,273	\$11,430,133	3310,033,427	372,073,332	333,270,434	37,330,370	3540,721,574	314,144,030	340,313,333	372,104,144	\$2,040,300	343,730,002	30,211,023	\$1,003,711,771
. 3	\$119,755,823	\$19,994,030	\$102,379,886	\$47,026	\$14,857	\$39,338	\$5,289	\$0	\$0	\$0	\$57,950	\$0	\$0	\$0	\$200,361	\$242,494,560
HCBS - Community Mental Health Services	\$3,978,510	\$3,706,685	\$20,590,876	\$0	\$1,936	\$0	\$2,399	\$0	\$0	\$0	\$10,306	\$0	\$0	\$0	\$18,700	\$28,309,412
HCBS - Children's HCBS	\$0	\$0	\$5,350,385	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0	\$0	\$0 \$0	\$0	\$0	\$5,350,385
HCBS - Persons Living with AIDS HCBS - Consumer Directed Attendant Support	\$30,653 \$1,314,616	\$8,994 \$219,484	\$441,281 \$1,123,872	\$0 \$516	\$0 \$163	\$0 \$432	\$0 \$58	\$0 \$0	\$0 \$0	\$0 \$0	\$636	\$0 \$0	\$0	\$0 \$0	\$0 \$2,200	\$480,928 \$2,661,977
HCBS - Brain Injury	\$274,983	\$899,956	\$11,674,531	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$212	\$0	\$0	\$0	\$0	\$12,849,682
HCBS - Children with Autism	\$0	\$0	\$868,411	\$0	\$0	\$0	\$0	\$0	\$17,013	\$0	\$0	\$0	\$0	\$0	\$0	\$885,424
HCBS - Children with Life Limiting Illness	\$0	\$0 \$0	\$207,061	\$0	\$0	\$0	\$0	\$0	\$0 \$0	\$0	\$70	\$0	\$0	\$0	\$0	\$207,131
HCBS - Spinal Cord Injury CCT - Services	\$6,686 \$0	\$0 \$0	\$245,823 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$252,509 \$0
Private Duty Nursing	\$2,364,123	\$557,116	\$24,342,047	\$18,478	\$0	\$0	\$0	\$0	\$1,069,272	\$5,806	\$8,490,119	\$0	\$0	\$0	\$0	\$36,846,961
Long Term Home Health	\$21,401,061	\$7,062,994	\$115,530,465	\$368,744	\$151,443	\$4,862	\$0	\$840	\$3,609,745	\$0	\$10,404,821	\$1,690	\$0	\$0	\$93,867	\$158,630,532
Hospice	\$33,427,166	\$2,868,294	\$6,505,178 <b>\$289,259,816</b>	\$140,227 \$574,991	\$168,345 <b>\$336,744</b>	\$92,875 <b>\$137,507</b>	\$117,103	\$0 \$840	\$37,390	\$0 \$5,806	\$0 \$18,964,114	\$0 \$1,690	\$0 <b>\$0</b>	\$0 <b>\$0</b>	\$40,522 \$355,650	\$43,397,100
Subtotal Community Based Long-Term Care Long-Term Care	\$182,553,621	\$35,317,553	\$289,259,816	\$5/4,991	\$330,/44	\$137,507	\$124,849	3840	\$4,733,420	\$5,800	518,964,114	\$1,690	30	50	\$355,050	\$532,366,601
	\$418,131,480	\$35,559,417	\$78,452,737	\$0	\$0	\$0	\$12,430	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$249,186	\$532,405,250
Class II Nursing Facilities	\$180,939	\$825,327	\$4,101,296	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,107,562
Program of All-Inclusive Care for the Elderly	\$84,386,436	\$8,794,508	\$4,165,414	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$97,346,358
Subtotal Long-Term Care	\$502,698,855	\$45,179,252	\$86,719,447	\$0	\$0	\$0	\$12,430	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$249,186	\$634,859,170
Insurance																
Supplemental Medicare Insurance Benefit	\$63,920,416	\$3,727,469	\$33,506,170	\$0	\$209,579	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$18,496,230	\$119,859,864
Health Insurance Buy-In Program Subtotal Insurance	\$2,767 \$63,923,183	\$1,630 \$3,729,099	\$1,345,692 <b>\$34,851,862</b>	\$0 \$0	\$6,506 <b>\$216,085</b>	\$0 \$0	\$0 <b>\$0</b>	\$0 \$0	\$3,632 \$3,632	\$0 <b>\$0</b>	\$1,304 <b>\$1,304</b>	\$0 <b>\$0</b>	\$0 <b>\$0</b>	\$0 <b>\$0</b>	\$18,496,230	\$1,361,531 <b>\$121,221,395</b>
Subtotal Insurance Service Management	\$63,923,183	\$3,729,099	534,851,862	50	\$210,085	50	30	50	\$3,032	50	\$1,304	\$0	50	50	\$18,490,230	\$121,221,395
Single Entry Points	\$11,133,931	\$2,768,715	\$11,274,336	\$8,561	\$1,712	\$5,993	\$0	\$856	\$1,443,430	\$0	\$285,947	\$0	\$0	\$0	\$53,080	\$26,976,561
Disease Management	\$18,845	\$38,614	\$282,411	\$10,185	\$329,787	\$91,251	\$48,349	\$0	\$0	\$0	\$49,301	\$88,367	\$0	\$0	\$0	\$957,110
Prepaid Inpatient Health Plan Administration	\$314,516	\$102,047	\$728,309	\$10,723	\$1,049,127	\$425,319	\$0	\$0	\$3,699,162	\$27,783	\$246,713	\$80,747	\$629	\$0	\$0	\$6,685,075
Accountable Care Collaborative	\$576,537	\$452,652	\$3,916,914	\$19,706	\$9,740,443	\$4,141,282	\$1,856,177	\$0	\$13,291,533	\$887,610	\$1,388,883	\$429,730	\$22,052	\$518	\$4,894	\$36,728,931
Subtotal Service Management Total Services	\$12,043,829 \$840,024,827	\$3,362,028 \$153,470,903	\$16,201,970 \$868,500,390	\$49,175 \$12,062,321	\$11,121,069 \$328,507,325	\$4,663,845 \$96,896,904	\$1,904,526 \$57,312,239	\$856 \$9,560,072	\$18,434,125 \$571,892,551	\$915,393 \$15,065,837	\$1,970,844 \$67,451,797	\$598,844 \$72,764,678	\$22,681 \$2,868,987	\$518 \$43,757,120	\$57,974 \$25,370,663	\$71,347,677 \$3,165,506,614
-	3040,024,02/	9133,470,903	3000,500,390	312,002,321	3340,307,325	\$70,070,704	337,314,439	39,300,072	33/1,094,331	313,003,637	307,431,797	5/4,/04,0/8	34,000,98/	343,/3/,120	343,370,003	55,105,500,014
Financing and Supplemental Payments  Upper Payment Limit Financing	\$2,595,353	\$301,488	\$1,530,078	\$17,718	\$433,958	\$137,505	\$89,799	\$0	\$551.431	\$0	\$100,170	\$39,993	\$0	\$11,581	\$2,709	\$5,811,783
Hospital Supplemental Payments	\$2,393,333	\$301,488	\$1,530,078	\$5,980,773	\$132,279,730	\$34,389,153	\$29,033,679	\$0 \$0		\$0 \$0	\$100,170	\$39,993	\$0	\$34,836,430	\$18,440	\$650,828,979
Nursing Facility Supplemental Payments	\$66,564,067	\$5,660,850	\$12,489,213	\$0	\$0	\$0	\$1,979	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$39,669	\$84,755,778
Physician Supplemental Payments	\$161,698	\$331,324	\$2,423,211	\$87,392	\$2,829,723	\$782,979	\$414,855	\$0	\$5,026,728	\$0	\$423,028	\$758,230	\$0	\$245,997	\$50	\$13,485,215
Outstationing Payments University of Colorado School of Medicine Payments	\$183,823 \$0	\$391,070 \$0	\$3,170,686 \$0	\$137,394 \$0	\$3,903,403 \$0	\$1,240,032 \$0	\$803,440 \$0	\$0 \$0	\$4,788,787 \$0	\$0 \$0	\$327,748 \$0	\$360,892 \$0	\$0 \$0	\$105,228 \$0	\$17 \$0	\$15,412,520 \$0
Accounting Adjustments	\$395,443	\$79,505	\$451,107	\$6,504	\$174,992	\$51,549	\$32,482	\$5,040	\$297,169	\$5,883	\$38,144	\$34,940	\$949	\$22,723	\$3,415	\$1,599,845
ů ,	\$87,875,426	\$30,496,099	\$181,228,291	\$6,229,781	\$139,621,806	\$36,601,218	\$30,376,234	\$5,040	\$177,242,973	\$5,883	\$11,606,831	\$35,317,330	\$949	\$35,221,959	\$64,300	\$771,894,120
Subtotal Financing and Supplemental Payments	907,073,720															

						Cash-based Ac	tuals							
FY 2011-12	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	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	COFRS TOTAL
Acute Care														
Physician Services & EPSDT	\$3,496,026	\$7,111,322	\$54,312,685	\$65,386	\$64,061,263	\$16,729,289	\$254,561	\$0	\$108,220,089	\$10,282,293	\$16,641,874	\$5,841,664	\$3,787	\$287,020,239
Clinic Services Emergency Transportation	\$0 \$127.388	\$0 \$284,073	\$0 \$2,131,467	\$0 \$133	\$0 \$1,416,682	\$0 \$326,160	\$0 \$26,001	\$0 \$0	\$1.599.438	\$0 \$194,707	\$0 \$167,590	\$0 \$87,424	\$0 (\$5)	\$0 \$6,361,058
Non-emergency Medical Transportation	\$2,170,701	\$1,007,841	\$5,235,088	\$443	\$509,852	\$130,804	\$1,752	\$0	\$1,217,489	\$131,419	\$55,775	\$1,230	(\$228)	\$10,462,166
Dental Services	\$1,227,623	\$328,572	\$5,016,624	\$1,339	\$5,415,654	\$1,489,789	\$36,007	\$0	\$85,091,328	\$4,962,709	\$336,789	\$5,353	\$0	\$103,911,787
Family Planning	\$0	\$168	\$16,872	\$94	\$239,510	\$88,899	\$1,072	\$0	\$157,184	\$52,601	\$22,557	\$0	\$0	\$578,957
Health Maintenance Organizations Inpatient Hospitals	\$6,436,982 \$13,661,835	\$6,682,350 \$15,340,090	\$39,413,533 \$114,582,636	\$6,100 \$177,773	\$22,554,171 \$63,034,133	\$7,791,492 \$12,964,966	\$0 \$891,142	\$0 \$0	\$35,919,341 \$76,041,187	\$845,047 \$4,890,304	\$1,066,895 \$26,947,586	\$0 \$33,984,087	\$0 (\$13,122)	\$120,715,911 \$362,502,617
Outpatient Hospitals	\$13,061,833	\$6,281,086	\$52,781,917	\$73,670	\$63,034,133	\$12,964,966	\$570,577	\$0	\$73,411,714	\$4,890,304	\$5,461,418	\$1,478,314	(\$13,122)	\$232,479,846
Lab & X-Ray	\$459,363	\$872,743	\$6,962,429	\$4,882	\$14,880,312	\$3,943,322	\$72,092	\$0	\$7,263,261	\$1,727,639	\$3,649,035	\$142,603	\$322	\$39,978,003
Durable Medical Equipment	\$18,449,168	\$5,367,881	\$50,025,626	\$5,509	\$4,189,111	\$1,297,015	\$19,968	\$0	\$9,835,195	\$4,337,018	\$159,994	\$0	\$19,967	\$93,706,452
Prescription Drugs	\$6,894,276	\$18,586,340	\$132,005,966	\$66,035	\$56,328,543	\$17,910,509	\$486,584	\$0	\$63,118,535	\$21,082,476	\$2,262,197	\$0	\$0	\$318,741,461
Drug Rebate Rural Health Centers	(\$3,239,849) \$59,913	(\$8,734,338) \$297,322	(\$62,033,986) \$1,232,984	(\$31,032) \$272	(\$26,470,652) \$2,175,921	(\$8,416,743) \$650,762	(\$228,662) \$8,863	\$0 \$0	(\$29,661,495) \$5,497,429	(\$9,907,355) \$310,962	(\$1,063,081) \$310,347	\$0 \$23,141	\$0 \$0	(\$149,787,193) \$10,567,916
Federally Qualified Health Centers	\$945,395	\$1,068,432	\$8,305,722	\$7,949	\$17,414,509	\$4,922,023	\$252,682	\$0	\$54,487,052	\$1,927,134	\$5,087,649	\$371,769	\$167	\$94,790,483
Co-Insurance (Title XVIII-Medicare)	\$16,681,939	\$2,722,367	\$11,215,656	\$5,057	\$461,993	\$629,323	\$0	\$0	\$26,223	\$17,454	\$41,240	\$1,973	\$5,233,327	\$37,036,552
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$10,272,613	\$0	\$0	\$0	\$0	\$0	\$10,272,613
Prepaid Inpatient Health Plan Services	\$1,808,943	\$2,331,859	\$18,074,087 \$4,856	\$14,849	\$10,256,623	\$2,867,598	\$0	\$0	\$16,657,333	\$2,332,229	\$2,119,598	\$0	\$0	\$56,463,119
Other Medical Services Preventive Services	\$766 \$0	\$590 \$0	\$4,856 \$0	\$3 \$0	\$2,573 \$0	\$718 \$0	\$21 \$0	\$84 \$0	\$4,256 \$0	\$543 \$0	\$504 \$0	\$339 \$0	\$42 \$0	\$15,295 \$0
Acute Home Health	\$3,019,688	\$1,501,229	\$4,482,470	\$0	\$468,586	\$133,222	\$490	(\$205)	\$468,010	\$227,440	\$49,661	\$268	\$35,453	\$10,386,312
Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal of Acute Care	\$75,155,191	\$61,049,927	\$443,766,632	\$398,462	\$301,104,198	\$82,998,921	\$2,393,150	\$10,272,492	\$509,353,569	\$49,175,549	\$63,317,628	\$41,938,165	\$5,279,710	\$1,646,203,594
Community Based Long-Term Care														
HCBS - Elderly, Blind, and Disabled	\$112,080,401	\$18,862,257	\$93,931,903	\$0	\$2,834	\$17,029	\$0	\$0	\$0	\$69,862	\$0	\$0	\$221,425	\$225,185,711
HCBS - Community Mental Health Services	\$3,683,462	\$3,266,023	\$18,943,039	\$0	\$507	\$3,220	\$0	\$0	\$0	\$10,762	\$0	\$0	\$27,242	\$25,934,255
HCBS - Children's HCBS	\$0	\$0	\$3,129,357	\$0	\$0	\$0	\$0	\$0	\$716	\$0	\$0	\$0	\$0	\$3,130,073
HCBS - Persons Living with AIDS	\$27,143 \$1,722,964	(\$1,798) \$289.961	\$482,666 \$1,443,974	\$0 \$0	\$0 \$44	\$0 \$262	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$1.074	\$0 \$0	\$0 \$0	\$8,025 \$3,404	\$516,036 \$3,461,683
HCBS - Consumer Directed Attendant Support	\$1,722,904	\$851,608	\$1,535,816	\$0	\$5,163	\$202	\$0 \$0	\$0	\$0	\$29,164	\$0	\$0	\$3,404 \$165	\$12,587,131
HCBS - Children with Autism	\$0	\$0	\$1,015,699	\$0	\$0	\$0	\$0	\$0	\$6,688	\$0	\$0	\$0	\$0	\$1,022,387
HCBS - Children with Life Limiting Illness	\$0	\$0	\$170,418	\$0	\$0	\$0	\$0	\$0	\$0	\$492	\$0	\$0	\$0	\$170,910
HCBS - Spinal Cord Injury	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
CCT - Services Private Duty Nursing	\$0 \$1,832,636	\$0 \$135,105	\$0 \$20,720,340	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$601,939	\$0 \$7,854,133	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$31,144,153
Long Term Home Health	\$19,241,801	\$5,960,470	\$112,026,204	\$0	\$70,804	\$21,256	\$0	\$205	\$3,621,831	\$10,150,245	\$374	\$0	\$128,231	\$151,221,421
Hospice	\$32,103,872	\$2,846,601	\$6,969,248	\$15,185	\$114,106	\$67,245	\$4,370	\$0	\$116,333	\$1,215	\$1,787	\$0	\$86,846	\$42,326,808
Subtotal Community Based Long-Term Care	\$170,857,494	\$32,210,227	\$270,368,664	\$15,185	\$193,458	\$109,012	\$4,370	\$205	\$4,347,507	\$18,116,947	\$2,161	\$0	\$475,338	\$496,700,568
Long-Term Care														
Class I Nursing Facilities	\$411,201,009	\$33,559,826	\$76,088,316	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$395,618	\$521,244,769
Class II Nursing Facilities	\$0	\$583,751	\$1,915,323	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,499,074
Program of All-Inclusive Care for the Elderly	\$73,671,387	\$8,052,921	\$3,756,277	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$85,480,585
Subtotal Long-Term Care	\$484,872,396	\$42,196,498	\$81,759,916	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$395,618	\$609,224,428
Insurance														
Supplemental Medicare Insurance Benefit	\$63,201,668	\$3,688,256	\$33,153,682	\$46,299	\$207,374	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$18,301,648	\$118,598,927
Health Insurance Buy-In Program	\$2,162	\$6,655	\$1,122,186	\$0	\$9,727	\$0	\$0	\$0	\$12,996	\$2,223	\$3,358	\$0	\$0	\$1,159,307
Subtotal Insurance	\$63,203,830	\$3,694,911	\$34,275,868	\$46,299	\$217,101	\$0	\$0	\$0	\$12,996	\$2,223	\$3,358	\$0	\$18,301,648	\$119,758,234
Service Management														
Single Entry Points	\$11,748,349	\$2,505,790	\$10,910,528	\$0	\$5,343	\$1,263	\$0	\$0	\$1,749	\$8,355	\$0	\$0	\$45,369	\$25,226,746
Disease Management Prepaid Inpatient Health Plan Administration	\$51,573 \$514,348	\$36,611 \$183,069	\$303,654 \$1,118,391	\$218 \$1.094	\$164,545 \$1,332,529	\$45,358 \$526,053	\$1,307 \$0	\$5,612 \$0	\$280,261 \$4,776,807	\$32,412 \$325,880	\$34,593 \$113,177	\$22,913 \$0	\$2,955 \$0	\$982,012 \$8,891,348
Accountable Care Collaborative	\$345,078	\$256,950	\$2,052,795	\$377	\$5,690,110	\$2,269,608	\$79,568	\$0	\$6,360,605	\$576,072	\$275,408	\$107	\$1,155	\$17,907,833
Subtotal Service Management	\$12,659,348	\$2,982,420	\$14,385,368	\$1,689	\$7,192,527	\$2,842,282	\$80,875	\$5,612	\$11,419,422	\$942,719	\$423,178	\$23,020	\$49,479	\$53,007,939
Total Services	\$806,748,259	\$142,133,983	\$844,556,448	\$461,635	\$308,707,284	\$85,950,215	\$2,478,395	\$10,278,309	\$525,133,494	\$68,237,438	\$63,746,325	\$41,961,185	\$24,501,793	\$2,924,894,763
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Financing and Supplemental Payments	62.000.011	\$220.250	¢1 725 002	éseo.	\$457,096	\$139,126	64.024	60	\$5.47.70°	\$114,617	\$38,935	\$10,444	62.007	\$C 377 157
Upper Payment Limit Financing Hospital Supplemental Payments	\$3,006,644 \$17,049,970	\$328,259 \$22,262,870	\$1,725,903 \$172,465,286	\$520 \$258,926	\$457,096 \$131,847,819	\$139,126 \$33,793,401	\$4,034 \$1,509,784	\$0 \$0	\$547,701 \$154,850,875	\$114,617 \$11,052,910	\$38,935	\$10,444	\$3,886 (\$13,389)	\$6,377,165 \$614,554,259
Nursing Facility Supplemental Payments	\$68,465,150	\$5,587,726	\$12,668,738	\$238,920	\$0	\$0	\$1,509,784	\$0	\$154,850,875	\$11,032,910	\$33,244,021	\$0	\$65,871	\$86,787,485
Physician Supplemental Payments	\$60,715	\$123,502	\$943,247	\$1,136	\$1,112,553	\$290,538	\$4,421	\$0	\$1,879,459	\$178,573	\$289,020	\$101,452	\$66	\$4,984,682
Outstationing Payments	\$18,395	\$39,101	\$328,574	\$459	\$399,437	\$121,637	\$3,552	\$0	\$456,997	\$35,862	\$33,998	\$9,203	\$0	\$1,447,215
University of Colorado School of Medicine Payments  Accounting Adjustments	\$0 \$763,823	\$0 \$147,724	\$0 \$878,727	\$0 \$451	\$0 \$337,808	\$0 \$94,928	\$0 \$2,831	\$0 \$9,629	\$0 \$556,699	\$0 \$78,990	\$65,448	\$0 \$43,897	\$0 \$6,238	\$0 \$2,987,193
Subtotal Financing and Supplemental Payments	\$763,823 \$ <b>89,364,69</b> 7	\$147,724	\$878,727 \$189,010,475	\$451 \$261,492	\$337,808 \$134,154,713	\$94,928	\$1,524,622	\$9,629 \$9,629	\$330,099 \$158,291,731	\$78,990 \$11,460,952	\$33,671,422	\$45,897	\$62,672	\$717,137,999
<u> </u>			\$1,033,566,923	\$723,127		\$120,389,845	\$4,003,017	\$10,287,938	\$683,425,225	\$79,698,390		\$78,357,967	\$24,564,465	\$3,642,032,762
Grand Total	\$896,112,956	\$170,623,165	\$1,033,566,923	\$/23,127	\$442,861,997	\$120,389,845	\$4,003,017	\$10,287,938	3083,425,225	\$/9,098,390	\$97,417,747	\$/8,357,967	\$24,504,405	\$3,042,032,762

				Ca	sh-based Actuals							
FY 2010-11	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	COFRS TOTAL
Acute Care												
Physician Services & EPSDT	\$4,269,992	\$6,951,129	\$52,819,492	\$61,394,491	\$12,531,062	\$0	\$108,898,551	\$10,934,900	\$18,198,453	\$6,592,130	\$1,842	\$282,592,042
Clinic Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Emergency Transportation	\$135,881	\$262,494	\$2,067,024	\$1,347,570	\$236,352	\$0	\$1,665,110	\$236,484	\$196,837	\$88,493	\$5	\$6,236,250
Non-emergency Medical Transportation  Dental Services	\$2,248,810 \$980,947	\$1,043,480 \$296,165	\$5,199,711 \$5,001,213	\$500,754 \$5,332,025	\$72,340 \$1,211,640	\$0 \$0	\$1,156,790 \$89,583,233	\$195,450 \$5,780,945	\$48,109 \$379,656	\$3,420 \$4,838	\$243 \$30	\$10,469,107 \$108,570,692
Family Planning	\$0	\$16	\$12,731	\$193,371	\$60,160	\$0	\$120,830	\$38,845	\$15,461	\$4,050	\$0	\$441.414
Health Maintenance Organizations	\$6,832,995	\$6,431,178	\$38,459,466	\$21,704,093	\$6,456,182	\$0	\$35,589,978	\$823,759	\$1,190,805	\$0	\$0	\$117,488,456
Inpatient Hospitals	\$13,928,315	\$14,401,355	\$109,555,356	\$64,961,507	\$10,000,540	\$0	\$83,895,044	\$6,584,854	\$30,244,597	\$38,292,048	(\$1,668)	\$371,861,948
Outpatient Hospitals	\$3,159,881	\$5,575,085	\$50,038,984	\$57,298,855	\$14,717,844	\$0	\$73,155,361	\$6,071,798	\$6,013,521	\$1,460,551	\$1,031	\$217,492,911
Lab & X-Ray	\$558,717	\$853,427	\$6,862,072	\$13,332,748	\$2,936,506	\$0	\$7,589,083	\$1,757,292	\$3,807,140	\$164,351	\$784 \$14,245	\$37,862,120
Durable Medical Equipment Prescription Drugs	\$19,960,510 \$8,014,198	\$4,911,081 \$16,245,119	\$48,169,450 \$119,835,487	\$3,505,807 \$46,135,231	\$797,869 \$11,840,965	\$0 \$0	\$8,735,551 \$56,157,222	\$4,353,214 \$20,762,963	\$180,213 \$2,287,737	\$5 \$23	\$14,245 \$4	\$90,627,945 \$281,278,949
Drug Rebate	(\$3,615,910)	(\$7,329,604)	(\$54,068,344)	(\$20,815,666)	(\$5,342,502)	\$0	(\$25,337,470)	(\$9,368,002)	(\$1,032,200)	(\$10)	(\$2)	(\$126,909,710)
Rural Health Centers	\$53,270	\$206,418	\$1,122,812	\$1,871,661	\$557,927	\$0	\$5,357,537	\$698,495	\$285,879	\$33,931	\$75	\$10,188,005
Federally Qualified Health Centers	\$916,375	\$1,051,613	\$7,588,335	\$15,885,638	\$3,802,322	\$0	\$53,308,981	\$2,132,545	\$5,192,824	\$427,890	\$0	\$90,306,523
Co-Insurance (Title XVIII-Medicare)	\$16,505,219	\$2,494,667	\$11,474,583	\$349,523	\$446,438	\$0	\$43,461	\$31,683	\$56,279	\$44	\$4,985,517	\$36,387,414
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$10,106,643	\$0	\$0	\$0	\$0	\$0	\$10,106,643
Prepaid Inpatient Health Plan Services Other Medical Services	\$2,221,510 \$770	\$2,361,149 \$518	\$19,107,158 \$4,450	\$10,370,751 \$2,275	\$2,076,156 \$509	\$0 \$78	\$9,365,354 \$4,077	\$2,583,913 \$555	\$2,763,503 \$525	\$0 \$361	\$0 \$40	\$50,849,494 \$14,158
Preventive Services	\$0	\$0	\$4,430	\$2,273	\$309	\$0	\$4,077	\$333	\$323	\$0	\$0	\$14,138
Acute Home Health	\$5,093,934	\$2,031,276	\$11,832,652	\$537,458	\$126,179	\$0	\$712,181	\$1,112,785	\$48,496	\$0	\$145,260	\$21,640,221
Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal of Acute Care	\$81,265,414	\$57,786,566	\$435,082,632	\$283,908,092	\$62,528,489	\$10,106,721	\$510,000,874	\$54,732,478	\$69,877,835	\$47,068,075	\$5,147,406	\$1,617,504,582
Community Based Long-Term Care												
HCBS - Elderly, Blind, and Disabled	\$107,968,359	\$16,811,191	\$87,178,266	\$19,464	\$11,962	\$0	\$0	\$72,439	\$0	\$0	\$134,462	\$212,196,143
HCBS - Community Mental Health Services	\$3,642,260	\$2,685,012	\$18,587,745	\$9,419	\$0	\$0	\$0	\$14,257	\$0	\$0	\$8,097	\$24,946,790
HCBS - Children's HCBS	\$0	\$0	\$1,963,855	\$0	\$0	\$0	\$572	\$577	\$0	\$0	\$0	\$1,965,004
HCBS - Persons Living with AIDS	\$29,837	\$3,598	\$532,418	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,682	\$567,535
HCBS - Consumer Directed Attendant Support	\$1,506,730 \$158,989	\$234,605 \$815,885	\$1,216,870 \$11,318,640	\$0 \$3,254	\$167 \$0	\$0 \$0	\$0 \$0	\$1,011 \$0	\$0 \$0	\$0 \$0	\$1,876 \$497	\$2,961,259 \$12,297,265
HCBS - Brain Injury HCBS - Children with Autism	\$138,989	\$013,883	\$1,318,040	\$3,234	\$0	\$0	\$2,545	\$0	\$0	\$0	\$0	\$1,357,612
HCBS - Children with Life Limiting Illness	\$0	\$0	\$126,096	\$0	\$0	\$0	\$2,343	\$395	\$0	\$0	\$0	\$126,702
HCBS - Spinal Cord Injury	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
CCT - Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Private Duty Nursing	\$1,328,952	\$0	\$17,573,121	\$0	\$0	\$0	\$521,410	\$8,338,211	\$0	\$0	\$0	\$27,761,694
Long Term Home Health	\$19,383,216	\$5,467,614	\$112,041,515	\$30,506	\$32,861	\$0	\$3,507,579	\$10,439,102	\$188	\$0	\$90,966	\$150,993,547
Hospice	\$30,470,765	\$2,124,046 \$28,141,951	\$6,934,494 \$258,828,087	\$235,444	\$39,141 <b>\$84,131</b>	\$0 <b>\$0</b>	\$60,107 \$4,092,424	\$3,517 \$18,869,509	\$0	\$0 <b>\$0</b>	(\$4,548) \$233,032	\$39,862,966 \$475,036,517
Subtotal Community Based Long-Term Care	\$164,489,108	\$28,141,951	\$258,828,087	\$298,087	\$84,131	\$0	\$4,092,424	\$18,869,509	\$188	\$0	\$233,032	\$4/5,036,517
Long-Term Care												
Class I Nursing Facilities	\$397,056,172	\$32,228,696	\$78,280,022	\$7,615	\$0	\$0	\$0	\$0	\$0	\$0	\$569,344	\$508,141,849
Class II Nursing Facilities Program of All-Inclusive Care for the Elderly	(\$200,939) \$73,242,923	\$647,887 \$7,896,872	\$1,915,758 \$3,289,888	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$2,362,706 \$84,429,683
Subtotal Long-Term Care	\$/3,242,923 \$470,098,156	\$40,773,455	\$3,289,888	\$7,615	\$0 \$0	\$0 \$0	\$0 \$0	\$0 <b>\$0</b>	\$0 \$0	\$0 \$0	\$569,344	\$594,934,238
	3470,038,130	340,773,433	\$65,465,006	\$7,013	30	30	30	30	30	30	3303,344	3374,734,238
Insurance				I	1				\$0			
Supplemental Medicare Insurance Benefit	\$63,751,826	\$3,717,638	\$33,417,797	\$209,027	\$0	\$0	\$0	\$0		\$0	\$18,447,446	\$119,543,734
Health Insurance Buy-In Program	\$2,287	\$1,347	\$1,111,909	\$5,375	\$0	\$0	\$3,001	\$1,077	\$0	\$0	\$0	\$1,124,996
Health Insurance Buy-In Program Subtotal Insurance								4.0				
Health Insurance Buy-In Program Subtotal Insurance Service Management	\$2,287 \$63,754,113	\$1,347 \$3,718,985	\$1,111,909 \$34,529,706	\$5,375 <b>\$214,402</b>	\$0 \$0	\$0 <b>\$0</b>	\$3,001 \$3,001	\$1,077 <b>\$1,077</b>	\$0 <b>\$0</b>	\$0 <b>\$0</b>	\$0 \$18,447,446	\$1,124,996 <b>\$120,668,730</b>
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points	\$2,287 <b>\$63,754,113</b> \$11,482,516	\$1,347 <b>\$3,718,985</b> \$2,211,295	\$1,111,909 \$34,529,706 \$10,261,280	\$5,375 <b>\$214,402</b> \$6,052	\$0 <b>\$0</b> \$0	\$0 <b>\$0</b>	\$3,001 <b>\$3,001</b> \$4,841	\$1,077 <b>\$1,077</b> \$9,683	\$0 <b>\$0</b>	\$0 <b>\$0</b> <b>\$38</b> ,731	\$0 \$18,447,446 \$7,262	\$1,124,996 <b>\$120,668,730</b> \$24,021,660
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management	\$2,287 \$63,754,113 \$11,482,516 \$0	\$1,347 <b>\$3,718,985</b> \$2,211,295 \$0	\$1,111,909 \$34,529,706 \$10,261,280 \$0	\$5,375 <b>\$214,402</b> \$6,052 \$0	\$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0	\$1,077 <b>\$1,077</b> \$9,683 \$0	\$0 \$0 \$0 \$0	\$0 \$0 \$38,731 \$0	\$0 \$18,447,446 \$7,262 \$0	\$1,124,996 \$120,668,730 \$24,021,660 \$0
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355	\$1,347 <b>\$3,718,985</b> \$2,211,295 \$0 \$211,517	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792	\$5,375 \$214,402 \$6,052 \$0 \$793,726	\$0 \$0 \$0 \$0 \$0 \$238,521	\$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511	\$1,077 \$1,077 \$1,077 \$9,683 \$0 \$216,554	\$0 \$0 \$0 \$0 \$0 \$88,268	\$0 \$0 \$38,731 \$0 \$0	\$0 \$18,447,446 \$7,262 \$0 \$0	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920	\$0 \$0 \$0 \$0 \$0 \$238,521 \$73,004	\$0 \$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791	\$1,077 \$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905	\$0 \$0 \$38,731 \$0 \$0 \$0	\$0 \$18,447,446 \$7,262 \$0 \$0 \$0	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931 \$11,905,802	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920 \$1,046,698	\$0 \$0 \$0 \$0 \$0 \$238,521 \$73,004 \$311,525	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791 \$3,476,143	\$1,077 \$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731	\$0 \$18,447,446 \$7,262 \$0 \$0 \$0 \$7,262	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920	\$0 \$0 \$0 \$0 \$0 \$238,521 \$73,004	\$0 \$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791	\$1,077 \$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905	\$0 \$0 \$38,731 \$0 \$0 \$0	\$0 \$18,447,446 \$7,262 \$0 \$0 \$0	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931 \$11,905,802 \$791,512,593	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920 \$1,046,698 \$285,474,894	\$0 \$0 \$0 \$0 \$0 \$238,521 \$73,004 \$311,525 \$62,924,145	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791 \$3,476,143 \$517,572,442	\$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433 \$73,843,497	\$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731 \$47,106,806	\$0 \$18,447,446 \$7,262 \$0 \$0 \$0 \$7,262 \$24,404,490	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments Upper Payment Limit Financing	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931 \$11,905,802 \$791,512,593	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132	\$5,375 \$214,402 \$6,052 \$0 \$193,726 \$246,920 \$1,046,698 \$285,474,894	\$0 \$0 \$0 \$0 \$238,521 \$73,004 \$311,525 \$62,924,145	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791 \$3,476,143 \$517,572,442	\$1,077 \$1,077 \$9,683 \$90 \$216,554 \$14,196 \$240,433 \$73,843,497	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731 \$47,106,806	\$0 \$18,447,446 \$7,262 \$0 \$0 \$0 \$7,262 \$24,404,490	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments Upper Payment Limit Financing Hospital Supplemental Payments	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931 \$11,905,802 \$791,512,593	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920 \$1,046,698 \$285,474,894	\$0 \$0 \$0 \$0 \$238,521 \$73,004 \$311,525 \$62,924,145	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791 \$3,476,143 \$517,572,442	\$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433 \$73,843,497 \$323,850 \$9,849,776	\$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731 \$47,106,806 \$27,916 \$30,044,551	\$18,447,446 \$7,262 \$0 \$0 \$0 \$7,262 \$24,404,490 \$14,559 \$428)	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382 \$16,446,173 \$455,348,284
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments Upper Payment Limit Financing Hospital Supplemental Payments Nursing Facility Supplemental Payments	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,993 \$11,995,802 \$791,512,593 \$7,676,809 \$13,043,327 \$59,632,155	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466 \$823,929 \$15,343,201 \$4,840,289	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132 \$4,599,470 \$122,857,357 \$11,756,539	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,929 \$1,046,698 \$285,474,894 \$1,105,520 \$9,078,024 \$1,144	\$0 \$0 \$0 \$0 \$238,521 \$73,004 \$311,525 \$62,924,145 \$284,166 \$19,381,431 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791 \$3,476,143 \$517,572,442 \$1,474,141 \$122,110,435 \$0	\$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433 \$73,843,497 \$323,850 \$9,849,776	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196 \$115,813 \$27,640,610 \$0	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731 \$47,106,806 \$27,916 \$30,044,551 \$0	\$18,447,446 \$7,262 \$0 \$0 \$7,262 \$24,404,490 \$14,559 \$14,559 \$85,507	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382 \$16,446,173 \$455,348,284 \$76,315,634
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments Upper Payment Limit Financing Hospital Supplemental Payments Nursing Facility Supplemental Payments Physician Supplemental Payments	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931 \$11,905,802 \$791,512,593	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132 \$4,599,470 \$112,887,357 \$11,756,539 \$507,620	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920 \$1,046,698 \$285,474,894	\$0 \$0 \$0 \$0 \$238,521 \$73,004 \$311,525 \$62,924,145	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791 \$3,476,143 \$517,572,442	\$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433 \$73,843,497 \$323,850 \$9,849,776	\$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731 \$47,106,806 \$27,916 \$30,044,551	\$18,447,446 \$7,262 \$0 \$0 \$7,262 \$24,404,490 \$14,559 \$428) \$85,507 \$18	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382 \$16,446,173 \$455,348,284 \$76,315,634 \$2,715,842
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments Upper Payment Limit Financing Hospital Supplemental Payments Nursing Facility Supplemental Payments	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,993 \$11,995,802 \$791,512,593 \$7,676,809 \$13,043,327 \$59,632,155 \$41,037 \$76,764 \$60 \$76,764 \$76	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466 \$823,929 \$15,343,201 \$4,840,289 \$66,804 \$135,435 \$0	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132 \$4,599,470 \$12,857,55,539 \$507,620 \$1,215,606 \$0	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920 \$1,046,698 \$285,474,894 \$1,105,520 \$95,078,024 \$1,144 \$590,030 \$1,391,971 \$0	\$0 \$0 \$0 \$238,521 \$73,004 \$311,525 \$62,924,145 \$284,166 \$19,381,431 \$0 \$120,429 \$357,543	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$10,106,721 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$3,476,143 \$517,572,442 \$1,474,141 \$122,110,435 \$0 \$1,046,566 \$1,777,176	\$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433 \$73,843,497 \$323,850 \$9,849,776 \$105,089 \$147,503 \$0	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196 \$115,813 \$27,640,610 \$174,896 \$146,088 \$146,088	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731 \$47,106,806 \$27,916 \$30,044,551 \$63,353 \$53,481	\$18,447,446 \$7,262 \$0 \$0 \$7,262 \$24,404,490 \$14,559 \$428 \$85,507 \$18 \$25 \$0	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382 \$16,446,173 \$455,348,284 \$76,315,634 \$2,715,842 \$5,283,594
Health Insurance Buy-In Program Subtotal Insurance Service Management  Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments Upper Payment Limit Financing Hospital Supplemental Payments Nursing Facility Supplemental Payments Physician Supplemental Payments Outstationing Payments Outstationing Payments	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,931 \$11,905,802 \$791,512,593 \$7,676,809 \$13,043,327 \$59,632,155 \$41,037 \$76,764	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466 \$823,929 \$15,343,201 \$4,840,289 \$66,804 \$135,437	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132 \$4,599,470 \$112,857,357 \$11,756,539 \$507,620 \$1,215,606	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920 \$1,046,698 \$285,474,894 \$1,105,520 \$95,078,024 \$1,144 \$590,030 \$1,391,971	\$0 \$0 \$0 \$0 \$238,521 \$73,04 \$311,525 \$62,924,145 \$19,381,431 \$0 \$120,429 \$357,543	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$10,106,721 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$407,791 \$3,476,143 \$517,572,442 \$1,474,141 \$122,110,435 \$0 \$1,046,566 \$1,777,176	\$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433 \$73,843,497 \$323,850 \$9,849,776 \$0 \$105,089 \$147,503	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196 \$115,813 \$27,640,610 \$0 \$174,896 \$146,088	\$0 \$0 \$38,731 \$0 \$0 \$38,731 \$47,106,806 \$27,916 \$30,044,551 \$0 \$63,353 \$35,481	\$18,447,446 \$7,262 \$0 \$0 \$7,262 \$0 \$7,262 \$24,404,490 \$14,559 \$428) \$85,507 \$18 \$25	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382 \$16,446,173 \$455,348,284 \$76,315,634 \$2,715,842 \$5,283,594
Health Insurance Buy-In Program Subtotal Insurance Service Management Single Entry Points Disease Management Prepaid Inpatient Health Plan Administration Accountable Care Collaborative Subtotal Service Management Total Services Financing and Supplemental Payments Upper Payment Limit Financing Hospital Supplemental Payments Nursing Facility Supplemental Payments Physician Supplemental Payments Outstationing Payments University of Colorado School of Medicine Payments	\$2,287 \$63,754,113 \$11,482,516 \$0 \$411,355 \$11,993 \$11,995,802 \$791,512,593 \$7,676,809 \$13,043,327 \$59,632,155 \$41,037 \$76,764 \$60 \$76,764 \$76	\$1,347 \$3,718,985 \$2,211,295 \$0 \$211,517 \$16,697 \$2,439,509 \$132,860,466 \$823,929 \$15,343,201 \$4,840,289 \$66,804 \$135,435 \$0	\$1,111,909 \$34,529,706 \$10,261,280 \$0 \$1,451,792 \$100,967 \$11,814,039 \$823,740,132 \$4,599,470 \$12,857,55,539 \$507,620 \$1,215,606 \$0	\$5,375 \$214,402 \$6,052 \$0 \$793,726 \$246,920 \$1,046,698 \$285,474,894 \$1,105,520 \$95,078,024 \$1,144 \$590,030 \$1,391,971 \$0	\$0 \$0 \$0 \$238,521 \$73,004 \$311,525 \$62,924,145 \$284,166 \$19,381,431 \$0 \$120,429 \$357,543	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$10,106,721 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$3,001 \$3,001 \$4,841 \$0 \$3,063,511 \$3,476,143 \$517,572,442 \$1,474,141 \$122,110,435 \$0 \$1,046,566 \$1,777,176	\$1,077 \$1,077 \$9,683 \$0 \$216,554 \$14,196 \$240,433 \$73,843,497 \$323,850 \$9,849,776 \$105,089 \$147,503 \$0	\$0 \$0 \$0 \$0 \$0 \$88,268 \$15,905 \$104,173 \$69,982,196 \$115,813 \$27,640,610 \$174,896 \$146,088 \$146,088	\$0 \$0 \$38,731 \$0 \$0 \$0 \$38,731 \$47,106,806 \$27,916 \$30,044,551 \$63,353 \$53,481	\$18,447,446 \$7,262 \$0 \$0 \$7,262 \$24,404,490 \$14,559 \$428 \$85,507 \$18 \$25 \$0	\$1,124,996 \$120,668,730 \$24,021,660 \$0 \$6,475,244 \$887,411 \$31,384,315 \$2,839,528,382 \$16,446,173 \$455,348,284 \$76,315,634 \$2,715,842 \$5,283,594

Applicat Track for Jun 2016 Promot Date   Other   Ot					Cash	-based Actuals							
Photons Services & 1977   51,16718   56,703.06   51,0718   51,07		Older	60 to 64	Individuals to 59	Caretakers to 68%	Caretakers 69% to 133%	Cervical Cancer	Children	Foster Care	Pregnant	Emergency		COFRS TOTAL
Criss Section   S12,10   S50													
Emergen Prinception													\$273,385,004
Non-emergraphy Madeid Transportation   \$2,027.07   \$1,000.770   \$3.46,071   \$40.770   \$3.210.07   \$1.00.070   \$1					4.0								\$0
Detail Service		\$2,229,276											\$6,024,129 \$10,363,372
Real Management Operation			\$287,848				\$0						\$104,818,977
Empired Hospital State   St.													\$428,473
Community Business   \$3.056,729   \$5.056,029   \$5.056,020   \$5.056,0													\$117,488,424
Description   Lab & XX.Tay   S55,6134   S55,6148   S55,6148   S55,6148   S55,60489   S55													\$357,410,899 \$209,791,226
Prescription Prog.   \$5,000, 100   \$5,000, 100   \$5,000, 100, 100, 100, 100, 100, 100, 100													\$36,581,144
Programmer   Pro													\$87,745,314
Productly Qualified Highlight Centers   \$51,237   \$30,149   \$1,000,151   \$1,000,1													\$272,469,874
Footenaily Qualified Health Centure   S877,183   \$51,014,344   \$73,535,601   \$515,22484   \$53,746,392   \$50   \$517,7579   \$20,061   \$514,011   \$444   \$41,013   \$73,014   \$11,													(\$126,909,710) \$9,887,646
Community Based Long-Tree Grammary Manual Based Services   15,904,615   23,988.89   \$11,056,677   \$32,289   \$510,750   \$50													\$87,530,066
Proposite legistal Plan Branch Service   \$2,21,510   \$2,301,149   \$19,171,85   \$10,707,51   \$2,076,150   \$50   \$0,305,534   \$2,536,130   \$2,576,540   \$30	Co-Insurance (Title XVIII-Medicare)	\$15,904,615	\$2,389,850		\$332,809	\$438,294	\$0	\$42,211	\$30,661	\$55,401	\$44		\$35,043,547
Community Based Lang-Terrent Cares   STO   SSI													\$9,817,118
Precentive Services   So   So   So   So   So   So   So   S													\$50,849,494 \$14,158
Acute Home Health   \$4,988,407   \$51,975,727   \$11,490,524   \$502,229   \$150,156   \$(1,9771)   \$722,200   \$1,090,805   \$54,211   \$90   \$14,1405   \$51, 200   \$14,000   \$10,000													\$14,138
Community Mean Halms Services   S8,578,046   \$497,54485   \$224,174,100   \$64,700,155   \$93,164,125   \$93,071,755   \$35,250,083   \$97,297,255   \$46,533,127   \$8,077,273   \$1,075   \$1			\$1,957,872	\$11,490,524					\$1,099,085				\$21,100,194
Community Based Long-Term Care													\$0
HCRS - Cheldren Mill Call S. Market S.	Subtotal of Acute Care	\$78,498,148	\$55,703,641	\$419,754,485	\$274,174,108	\$61,700,153	\$9,816,125	\$493,871,755	\$52,506,031	\$67,507,355	\$45,331,276	\$4,976,271	\$1,563,839,348
HCBS - Community Mental Health Services \$3.5873.07 \$2.562,010 \$18,837,043\$ \$99,410 \$50 \$50 \$50 \$513,590 \$50 \$50 \$58,8977 \$2.50 \$50 \$50 \$50 \$51, HCBS - Persona Living with AUDS \$29,046 \$3.471 \$516,199 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50	Community Based Long-Term Care												
HeBS - Children's HCBS   S0   S0   S1,386,052   S0   S0   S5   S572   S577   S0   S0   S0   S1     HCBS - Consumer Directed Attendant Support   S1,506,700   S234,0605   S1,216,870   S0   S0   S1,67   S0   S0   S0   S1,011   S0   S0   S1,876   S2, 11     HCBS - Consumer Directed Attendant Support   S1,506,700   S234,0605   S1,216,870   S0   S1,67   S0   S0   S0   S0   S0   S0   S0   S													\$208,526,316
HCRS - Consumer Directed Actendard Support of \$15,067,30													\$24,587,535
HCBS - Consumer Directed Attendant Support   \$1,306,720   \$234,605   \$1,216,570   \$0   \$1,07   \$0   \$0   \$1,011   \$0   \$0   \$0   \$1,376   \$2.5   \$1.00													\$1,887,201 \$550,398
HCBS - Parial Injury	HCBS - Consumer Directed Attendant Support												\$2,961,259
HCBS -Children with Life Limiting Illness HGBS -Spinal Cord Injury S0	HCBS - Brain Injury					\$0	\$0	\$0	\$0	\$0	\$0		\$12,182,917
CTCT-Service	HCBS - Children with Autism												\$1,328,578
CTC - Service   S0   S0   S0   S0   S0   S0   S0   S									90.00				\$119,273 \$0
Private Daty Nursing													\$0
Subtotal Community Based Long-Term Care   S161,588,989   S27,646,464   S254,107,471   S316,286   S58,921   S1,071   S4,013,482   S18,638,145   S188   S0   S227,976   S466,								\$502,792					\$27,325,956
Subtotal Community Based Long-Term Care   \$161,588,989   \$27,646,464   \$254,107,471   \$316,286   \$58,921   \$11,071   \$44,013,482   \$18,638,145   \$188   \$50   \$227,976   \$466,													\$147,581,926
Class   Narising Facilities   \$390,609,241   \$31,625,231   \$76,509,001   \$7,615   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$		, .,		, , .	,			,	,.				\$39,547,635
Class I Nursing Facilities   \$390,609,241   \$31,625,231   \$76,509,001   \$7,615   \$50   \$		\$161,588,989	\$27,646,464	\$254,107,471	\$316,286	\$58,921	\$1,071	\$4,013,482	\$18,638,145	\$188	\$0	\$227,976	\$466,598,993
Class Il Nursing Facilities   (\$84,406)   \$729,155   \$2,518,446   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$													
Program of All-Inclusive Care for the Elderly   \$73,232,308   \$7,892,082   \$32,298,988   \$0   \$0   \$0   \$0   \$0   \$0   \$0													\$499,315,390
Subtotal Long-Term Care   S463,757,142   S40,246,468   S82,317,335   S7,615   S0   S0   S0   S0   S0   S0   S564,302   S886, Insurance   Supplemental Medicare Insurance Benefit   S63,751,826   S3,717,638   S3,417,797   S209,027   S0   S0   S0   S0   S0   S0   S18,447,446   S119, Service Management   S1,797   S205, S50   S0   S0   S2,021   S1,059   S0   S0   S18,447,446   S120, Service Management   S1,835, S7,886   S214,125   S0   S0   S2,021   S1,059   S0   S0   S18,447,446   S120, Service Management   S1,835, S7,886   S2,211,295   S10,261,280   S6,052   S0   S0   S0   S4,841   S9,683   S0   S3,718,263   S34,443,658   S214,125   S0   S0   S0   S4,841   S9,683   S0   S3,718,263   S18,447,446   S120, Service Management   S1,835,145   S2,211,295   S10,261,280   S6,052   S0   S0   S0   S0   S0   S0   S0   S	Class II Nursing Facilities												\$3,163,194 \$84,414,278
Supplemental Medicare Insurance Benefit   \$63,751,826   \$3,717,638   \$33,417,797   \$209,027   \$50		, . ,	, ,	,,								-	\$84,414,278 \$586,892,863
Supplemental Medicare Insurance Benefit   \$63,751,826   \$3,717,638   \$33,417,797   \$209,027   \$50		2.00,101,142	\$10,270,700	402,017,000	97,013	30	30	30	30	30	30	\$504,502	\$200,072,003
Health Insurance Buy-In Program   S1,979   S625   S1,025,861   S5,098   S0   S0   S2,021   S1,059   S0   S0   S0   S1,		\$62.751.027	\$2.717.620	\$22 417 707	6200.027	60	60	60	¢o.	éo.	60	\$19 447 447	\$110 542 724
Subtotal Insurance   S63,753,805   S3,718,263   S34,443,658   S214,125   S0   S0   S2,021   S1,059   S0   S0   S18,447,446   S120, Service Management   S1,482,516   S2,211,295   S10,261,280   S6,052   S0   S0   S4,841   S9,683   S0   S38,731   S7,262   S24, S24, S24, S24, S24, S24, S24, S24,													\$119,543,734 \$1,036,644
Service Management			4.0-1					- /-	41,000				\$120,580,378
Single Entry Points   S11,482,516   S2,211,295   S10,261,280   S6,052   S0   S0   S4,841   S9,683   S0   S38,731   S7,262   S24,		, ,	,,	, .,,	. ,	1		. ,,,==	. ,,,,,,,,			, .,	.,,
Disease Management   S0   S0   S0   S0   S0   S0   S0   S		\$11.482.516	\$2,211.295	\$10.261.280	\$6.052	\$0	90	\$4.841	\$9.683	90	\$38 731	\$7.262	\$24,021,660
Prepaid Inpatient Health Plan Administration   S411,355   S211,517   S1,451,792   S793,726   S238,521   S0   S3,063,511   S216,554   S88,268   S0   S0   S6													\$24,021,000
Subtotal Service Management   \$11,905,802   \$2,439,509   \$11,814,039   \$1,046,698   \$311,525   \$50   \$3,476,143   \$240,433   \$104,173   \$38,731   \$7,262   \$31,	Prepaid Inpatient Health Plan Administration	\$411,355	\$211,517	\$1,451,792	\$793,726	\$238,521	\$0	\$3,063,511	\$216,554	\$88,268	\$0	\$0	\$6,475,244
Total Services \$779,503,887 \$129,754,346 \$802,436,987 \$275,758,832 \$62,070,599 \$9,817,196 \$501,363,402 \$71,385,669 \$67,611,716 \$45,370,007 \$224,223,257 \$2,769, \$10,000 \$1									,				\$887,411
Financing and Supplemental Payments	Subtotal Service Management	\$11,905,802		\$11,814,039			\$0	\$3,476,143	\$240,433	\$104,173			\$31,384,315
Upper Payment Limit Financing   \$7,676,809   \$823,929   \$4,599,470   \$1,105,520   \$284,166   \$0   \$1,474,141   \$323,850   \$115,813   \$27,916   \$14,559   \$16,	Total Services	\$779,503,887	\$129,754,346	\$802,436,987	\$275,758,832	\$62,070,599	\$9,817,196	\$501,363,402	\$71,385,669	\$67,611,716	\$45,370,007	\$24,223,257	\$2,769,295,896
Hospital Supplemental Payments   \$13,043,227   \$15,343,201   \$122,857,357   \$95,078,024   \$19,381,431   \$0   \$122,110,435   \$98,497,76   \$27,640,610   \$30,044,551   \$6428)   \$455,57   \$76, \$175,639   \$11,44   \$0   \$0   \$0   \$0   \$0   \$0   \$0	Financing and Supplemental Payments												
Hospital Supplemental Payments   \$13,043,327   \$15,343,201   \$122,857,357   \$95,078,024   \$19,381,431   \$0   \$122,110,435   \$95,847,76   \$27,640,610   \$30,044,551   \$(5428)   \$455, \$0   \$10,045,511   \$10,045,512   \$10,045,513   \$10,045,51	Upper Payment Limit Financing									\$115,813		\$14,559	\$16,446,173
Physician Supplemental Payments   \$41,037   \$66,804   \$507,620   \$590,030   \$120,429   \$0   \$1,046,566   \$105,089   \$174,896   \$63,353   \$18   \$52, \$0.000   \$1,000													\$455,348,284
Outstationing Payments         \$76,764         \$135,437         \$1,215,606         \$1,391,971         \$357,543         \$0         \$1,777,176         \$147,503         \$146,088         \$35,481         \$25         \$5,           University of Colorado School of Medicine Payments         \$0													\$76,315,634
University of Colorado School of Medicine Payments         \$0								\$1,046,566					\$2,715,842 \$5,283,594
Accounting Adjustments (\$2,642) (\$483) (\$3,002) (\$1,102) (\$247) (\$38) (\$1,975) (\$299) (\$254) (\$175) (\$22) (	University of Colorado School of Medicine Payments												\$5,285,594
C-14-4-17-4-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1										(\$254)			(\$10,239)
Subtotal Financing and Supplemental Payments   \$80,467,450   \$21,209,177   \$140,935,590   \$98,105,587   \$20,143,322   (\$38)   \$126,406,343   \$10,425,919   \$28,077,153   \$30,171,126   \$99,659   \$556,	Subtotal Financing and Supplemental Payments	\$80,467,450	\$21,209,177	\$140,933,590	\$98,165,587	\$20,143,322	(\$38)	\$126,406,343	\$10,425,919	\$28,077,153	\$30,171,126	\$99,659	\$556,099,288
Grand Total \$859,971,337 \$150,963,523 \$943,370,577 \$373,924,419 \$82,213,921 \$9,817,158 \$627,769,745 \$81,811,588 \$95,688,869 \$75,541,133 \$24,322,916 \$3,325,	Grand Total	\$859,971,337	\$150,963,523	\$943,370,577	\$373,924,419	\$82,213,921	\$9,817,158	\$627,769,745	\$81,811,588	\$95,688,869	\$75,541,133	\$24,322,916	\$3,325,395,184

				Cash	-based Actuals							
FY 2009-10	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	COFRS TOTAL
Acute Care												
Physician Services & EPSDT	\$4,504,959	\$5,841,290	\$45,027,403	\$57,248,711	\$379,950	\$0	\$97,071,331	\$9,752,159	\$16,382,526	\$6,720,532	\$553	\$242,929,414
Clinic Services Emergency Transportation	\$0 \$132.013	\$0 \$206,450	\$0 \$1,629,960	\$0 \$1,215,599	\$0 \$5,733	\$0 \$0	\$0 \$1.553.739	\$0 \$202,199	\$0 \$184.865	\$0 \$87,075	\$0 \$0	\$0 \$5,217,633
Non-emergency Medical Transportation	\$2,230,609	\$868,873	\$4,556,037	\$365,170	\$463	\$0	\$964,382	\$100,146	\$44,731	\$1,244	\$0	\$9,131,655
Dental Services	\$790,484	\$236,617	\$4,188,551	\$4,364,415	\$54,703	\$0	\$73,534,295	\$5,281,907	\$353,118	\$2,724	\$43	\$88,806,857
Family Planning	\$0		\$11,970	\$149,434	\$1,828	\$0	\$110,955	\$30,688	\$17,076	\$0	\$0	\$321,975
Health Maintenance Organizations Inpatient Hospitals	\$6,690,235 \$15,121,066	\$6,808,868 \$10,933,612	\$45,687,859 \$94,203,357	\$21,208,184 \$60,316,941	\$149,518 \$225,968	\$0 \$0	\$35,072,614 \$82,963,155	\$902,745 \$5,813,909	\$1,131,694 \$29,535,689	\$0 \$38,240,653	\$0 \$4,098	\$117,651,717 \$337,358,448
Outpatient Hospitals	\$2,483,053	\$3,912,610	\$33,983,522	\$42,016,658	\$591,764	\$0	\$51,528,634	\$4,616,132	\$4,813,849	\$1,009,919	\$0	\$144,956,141
Lab & X-Ray	\$542,175	\$702,690	\$5,366,358	\$11,597,242	\$113,194	\$0	\$6,592,607	\$1,625,242	\$3,462,744	\$145,427	\$638	\$30,148,317
Durable Medical Equipment Prescription Drugs	\$18,160,548 \$7,741,380	\$3,979,784 \$13,544,934	\$40,816,114 \$97,612,578	\$3,035,899 \$41,216,168	\$21,565 \$524,963	\$0 \$618	\$8,177,251 \$44,622,097	\$3,905,570 \$18,661,722	\$172,313 \$2,189,164	\$559 \$0	\$3,359 \$462	\$78,272,962 \$226,114,086
Drug Rebate	(\$3,418,708)	(\$5,981,643)	(\$43,107,160)	(\$18,201,670)	(\$231,831)	(\$273)	(\$19,705,779)	(\$8,241,293)	(\$966,767)	\$0	(\$204)	(\$99,855,328)
Rural Health Centers	\$40,614	\$147,085	\$904,243	\$1,585,161	\$22,504	\$0	\$4,562,102	\$405,207	\$300,495	\$26,268	\$142	\$7,993,821
Federally Qualified Health Centers Co-Insurance (Title XVIII-Medicare)	\$903,859 \$9,563,469	\$792,591 \$1,441,719	\$6,070,347 \$6,576,135	\$13,704,904 \$269,357	\$182,692 \$4,014	\$0 \$0	\$47,091,191 \$21,034	\$1,962,149 \$17,428	\$5,080,079 \$24,075	\$456,394 \$32	\$154 \$2,934,912	\$76,244,360 \$20,852,175
Breast and Cervical Cancer Treatment Program	\$9,563,469	\$1,441,719	\$6,576,135	\$269,357	\$4,014	\$8,716,269	\$21,034	\$17,428	\$24,075	\$32 \$0	\$2,934,912	\$20,852,175
Prepaid Inpatient Health Plan Services	\$2,375,072	\$2,021,423	\$17,073,019	\$9,355,563	\$183,288	\$0	\$8,648,317	\$2,128,848	\$2,918,289	\$0	\$0	\$44,703,819
Other Medical Services	\$3,033	\$1,762	\$15,618	\$8,354	\$0	\$271	\$14,457	\$2,022	\$2,008	\$1,457	\$158	\$49,140
Preventive Services Acute Home Health	\$0 \$6,129,559	\$0 \$2,135,982	\$0 \$11,903,905	\$0 \$458,258	\$0 \$1,616	\$0 \$0	\$0 \$672,411	\$0 \$796,082	\$0 \$50,128	\$0 \$0	\$0 \$115,542	\$0 \$22,263,483
Presumptive Eligibility	\$0,129,339		\$11,903,903	\$438,238	\$1,010	\$0	\$072,411	\$790,082	\$0,128	\$0	\$113,342	\$22,203,483
Subtotal of Acute Care	\$73,993,420	\$47,594,671	\$372,519,816	\$249,914,348	\$2,231,932	\$8,716,885	\$443,494,793	\$47,962,862	\$65,696,076	\$46,692,284	\$3,059,857	\$1,361,876,944
Community Based Long-Term Care												
HCBS - Elderly, Blind, and Disabled	\$101,286,004	\$14,326,522	\$70,577,472	\$13,343	\$0	\$0	\$0	\$77,881	\$0	\$0	\$144,853	\$186,426,075
HCBS - Community Mental Health Services	\$3,418,565	\$2,358,037	\$16,839,277	\$80	\$0	\$0	\$0	\$22,942	\$0	\$0	\$42,459	\$22,681,360
HCBS - Children's HCBS HCBS - Persons Living with AIDS	\$0 \$19.745	\$0 \$28,343	\$1,762,739 \$533,292	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$471 \$0	\$0 \$0	\$0 \$0	\$0 \$25	\$1,763,210 \$581,405
HCBS - Consumer Directed Attendant Support	\$1,910,754	\$270,269	\$1,331,531	\$161	\$0	\$0	\$0	\$1,469	\$0	\$0	\$2,733	\$3,516,917
HCBS - Brain Injury	\$143,522	\$526,310	\$10,806,523	\$5,718	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$11,482,073
HCBS - Children with Autism HCBS - Children with Life Limiting Illness	\$0 \$0		\$1,565,700 \$94,296	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$485	\$0 \$0	\$0 \$0	\$0 \$0	\$1,565,700 \$94,781
HCBS - Children with Life Limiting liness HCBS - Spinal Cord Injury	\$0 \$0	\$0	\$94,296 \$0	\$0 \$0	\$0 \$0	\$0	\$0 \$0	\$485	\$0 \$0	\$0	\$0 \$0	\$94,781
CCT - Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Private Duty Nursing	\$1,026,115 \$17,725,454	\$240,541 \$4,386,024	\$14,816,120	\$0 \$43,807	\$0 \$0	\$0 \$0	\$586,102	\$6,561,939	\$0 \$0	\$0 \$0	\$0 \$97,291	\$23,230,817 \$134,184,938
Long Term Home Health Hospice	\$33,775,858	\$4,386,024	\$98,742,575 \$6,070,145	\$43,807 \$196,954	\$0 \$0	\$0	\$3,077,212 \$231,678	\$10,112,575 \$34,952	\$0 \$0	\$1,279	\$6,603	\$134,184,938 \$43,321,496
Subtotal Community Based Long-Term Care	\$159,306,017	\$25,140,073	\$223,139,670	\$260,063	\$0	\$0	\$3,894,992	\$16,812,714	\$0	\$1,279	\$293,964	\$428,848,772
Long-Term Care												
Class I Nursing Facilities	\$386,581,897	\$28,352,812	\$72,076,695	\$5,285	\$0	\$0	\$0	\$0	\$0	\$0	\$57,644	\$487,074,333
Class II Nursing Facilities	\$78,087	\$345,366	\$1,592,382	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,015,835
Program of All-Inclusive Care for the Elderly	\$61,913,944	\$4,981,340	\$2,345,339	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$69,240,623
Subtotal Long-Term Care	\$448,573,928	\$33,679,518	\$76,014,416	\$5,285	\$0	\$0	\$0	\$0	\$0	\$0	\$57,644	\$558,330,791
Insurance Supplemental Medicare Insurance Benefit	\$54,965,748	\$3,205,285	\$28,812,261	\$180,219	\$0	\$0	\$0	\$0	\$0	\$0	\$15,905,077	\$103,068,590
Supplemental Medicare Insurance Benefit Health Insurance Buy-In Program	\$54,965,748 \$3,244	\$3,205,285	\$28,812,261 \$907,336	\$180,219 \$2,920	\$0 \$0	\$0 \$0	\$10,334	\$0 \$192	\$0 \$0	\$0	\$15,905,077	\$103,068,590
Subtotal Insurance	\$54,968,992	\$3,212,896	\$29,719,597	\$183,139	\$0	\$0	\$10,334	\$192	\$0	\$0	\$15,905,077	\$104,000,227
Service Management												
Single Entry Points	\$11,622,897	\$2,068,951	\$9,956,430	\$2,637	\$0	\$0	\$1,458	\$8,329	\$0	\$41,435	\$5,414	\$23,707,551
Disease Management	\$4,570	\$2,655	\$23,534	\$12,589	\$0	\$409	\$21,785	\$3,047	\$3,027	\$0	\$0	\$71,616
Prepaid Inpatient Health Plan Administration	\$331,989 \$0	\$116,999 \$0	\$938,116 \$0	\$713,502 \$0	\$0 \$0	\$0 \$0	\$2,715,378 \$0	\$208,304 \$0	\$87,465 \$0	\$0 \$0	\$0 \$0	\$5,111,753 \$0
Accountable Care Collaborative Subtotal Service Management	\$11,959,456	\$2,188,605	\$10,918,080	\$728,728	\$0 \$0	\$409	\$2,738,621	\$219,680	\$90,492	\$41,435	\$5,414	\$28,890,920
Total Services	\$748,801,813	\$111,815,763	\$712,311,579	\$251,091,563	\$2,231,932	\$8,717,294	\$450,138,740	\$64,995,448	\$65,786,568	\$46,734,998	\$19,321,956	\$2,481,947,654
Financing and Supplemental Payments												<u> </u>
Upper Payment Limit Financing	\$11,041,603	\$915,688	\$3,009,973	\$1,192,576	\$16,794	\$0	\$1,462,375	\$131,005	\$136,616	\$28,661	\$1,636	\$17,936,927
Hospital Supplemental Payments	\$11,404,873	\$9,618,163	\$83,046,197	\$66,297,084	\$529,770	\$0	\$87,130,849	\$6,757,129	\$22,253,436	\$25,428,583	\$2,655	\$312,468,739
Nursing Facility Supplemental Payments	\$37,661,309	\$2,762,168	\$7,021,804	\$515	\$0	\$0	\$0	\$0	\$0	\$0	\$5,616	\$47,451,412
Physician Supplemental Payments	\$268,976	\$348,764	\$2,688,433	\$3,418,128	\$22,686	\$0	\$5,795,803	\$582,269	\$978,146	\$401,260 \$24,526	\$33	\$14,504,498
Outstationing Payments University of Colorado School of Medicine Payments	\$60,301 \$0	\$95,018 \$0	\$825,287 \$0	\$1,020,373 \$0	\$14,371 \$0	\$0 \$0	\$1,251,371 \$0	\$112,103 \$0	\$116,904 \$0	\$24,526 \$0	\$0 \$0	\$3,520,254 \$0
Accounting Adjustments	(\$5,210)		(\$4,955)	(\$1,747)	(\$16)	(\$61)	(\$3,132)	(\$452)	(\$458)	(\$325)	(\$134)	(\$17,268)
Subtotal Financing and Supplemental Payments	\$60,431,852	\$13,739,023	\$96,586,739	\$71,926,929	\$583,605	(\$61)	\$95,637,266	\$7,582,054	\$23,484,644	\$25,882,705	\$9,806	\$395,864,562
Grand Total	\$809,233,665	\$125,554,786	\$808,898,318	\$323,018,492	\$2,815,537	\$8,717,233	\$545,776,006	\$72,577,502	\$89,271,212	\$72,617,703	\$19,331,762	\$2,877,812,216

				Ca	sh-based Actuals							
FY 2009-10 Adjusted Totals for June 2010 Payment Delay	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	COFRS TOTAL
Acute Care												
Physician Services & EPSDT	\$4,644,233	\$6,088,858	\$46,749,043	\$59,351,542	\$535,323	\$0	\$100,673,872	\$10,102,008	\$16,999,107	\$6,991,912	\$553	\$252,136,452
Clinic Services Emergency Transportation	\$0 \$135,675	\$0 \$219,816	\$0 \$1,715,327	\$0 \$1,254,376	\$0 \$7,556	\$0 \$0	\$0 \$1,604,042	\$0 \$210,924	\$0 \$189,911	\$0 \$92,127	\$0 \$0	\$0 \$5,429,754
Non-emergency Medical Transportation	\$2,250,143	\$881,643	\$4,609,047	\$368,648	\$608	\$0 \$0	\$976,900	\$103,821	\$45,337	\$1,244	\$0	\$9,237,391
Dental Services	\$815,475	\$244,934	\$4,352,134	\$4,534,160	\$78,276	\$0	\$76,650,059	\$5,510,341	\$370,426	\$2,724	\$43	\$92,558,572
Family Planning	\$0	\$24	\$12,421	\$157,531	\$2,601	\$0	\$114,009	\$30,897	\$17,434	\$0	\$0	\$334,916
Health Maintenance Organizations Inpatient Hospitals	\$6,690,235 \$15,822,983	\$6,808,868 \$11,626,366	\$45,687,848 \$99,034,203	\$21,208,211 \$62,578,505	\$149,518 \$390,748	\$0 \$0	\$35,072,631 \$85,902,848	\$902,745 \$6,206,952	\$1,131,694 \$30,629,067	\$0 \$39,618,658	\$0 (\$833)	\$117,651,749 \$351,809,497
Outpatient Hospitals	\$2,586,214	\$4,061,576	\$35,876,257	\$44,238,787	\$819,720	\$0	\$54,117,958	\$4,860,761	\$5,029,450	\$1,066,581	\$521	\$152,657,826
Lab & X-Ray	\$564,758	\$733,232	\$5,613,057	\$12,075,776	\$154,214	\$0	\$6,852,876	\$1,693,335	\$3,589,272	\$152,136	\$638	\$31,429,293
Durable Medical Equipment	\$18,847,335	\$4,155,985	\$42,281,065	\$3,146,879	\$39,139	\$0	\$8,456,254	\$4,040,218	\$185,251	\$559	\$2,908	\$81,155,593
Prescription Drugs	\$8,059,382	\$14,076,616	\$101,424,096	\$42,876,010	\$671,944	\$618	\$46,186,239	\$19,361,739	\$2,266,055	\$0	\$462	\$234,923,161
Drug Rebate Rural Health Centers	(\$3,418,708) \$42,647	(\$5,981,643) \$152,354	(\$43,107,160) \$945,902	(\$18,201,670) \$1,654,608	(\$231,831) \$30,726	(\$273) \$0	(\$19,705,779) \$4,711,474	(\$8,241,293) \$418,503	(\$966,767) \$308,458	\$0 \$29,366	(\$204) \$142	(\$99,855,328) \$8,294,180
Federally Qualified Health Centers	\$943,051	\$829,860	\$6,305,621	\$14,261,594	\$238,622	\$0	\$48,664,174	\$2,029,256	\$5,276,197	\$472,287	\$154	\$79,020,817
Co-Insurance (Title XVIII-Medicare)	\$10,164,073	\$1,546,536	\$7,014,431	\$286,071	\$12,158	\$0	\$22,284	\$18,450	\$24,953	\$32	\$3,107,054	\$22,196,042
Breast and Cervical Cancer Treatment Program	\$0	\$0 \$2,021,423	\$0	\$0	\$0	\$9,005,794 \$0	\$0	\$0 \$2,128,848	\$0 \$2,918,289	\$0	\$0 \$0	\$9,005,794
Prepaid Inpatient Health Plan Services Other Medical Services	\$2,375,072 \$3,033	\$2,021,423	\$17,073,019 \$15,618	\$9,355,563 \$8,354	\$183,288 \$0	\$0 \$271	\$8,648,317 \$14,457	\$2,128,848	\$2,918,289	\$0 \$1.457	\$0 \$158	\$44,703,819 \$49,140
Preventive Services	\$0,033	\$0	\$15,616	\$0,554	\$0	\$0	\$0	\$0	\$2,000	\$0	\$0	\$0
Acute Home Health	\$6,235,086	\$2,209,386	\$12,229,634	\$468,176	\$2,869	(\$167)	\$661,296	\$809,781	\$50,413	\$0	\$119,397	\$22,785,871
Presumptive Eligibility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal of Acute Care	\$76,760,686	\$49,677,596	\$387,831,564	\$259,623,121	\$3,085,478	\$9,006,243	\$459,623,912	\$50,189,308	\$68,066,556	\$48,429,083	\$3,230,992	\$1,415,524,539
Community Based Long-Term Care												
HCBS - Elderly, Blind, and Disabled	\$103,386,210	\$14,626,539	\$71,841,260	\$13,385	\$0	\$0	\$0	\$79,148	\$0	\$0	\$149,360	\$190,095,902
HCBS - Community Mental Health Services HCBS - Children's HCBS	\$3,473,458 \$0	\$2,391,039 \$0	\$17,109,979 \$1,840,542	\$80 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$23,600 \$471	\$0 \$0	\$0 \$0	\$42,459 \$0	\$23,040,615 \$1,841,013
HCBS - Children's HCBS HCBS - Persons Living with AIDS	\$20,536	\$28,470	\$549,511	\$0	\$0	\$0 \$0	\$0 \$0	\$471	\$0	\$0	\$25	\$598,542
HCBS - Consumer Directed Attendant Support	\$1,910,754	\$270,269	\$1,331,531	\$161	\$0	\$0	\$0	\$1,469	\$0	\$0	\$2,733	\$3,516,917
HCBS - Brain Injury	\$144,343	\$532,868	\$10,913,492	\$5,718	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$11,596,421
HCBS - Children with Autism	\$0 \$0	\$0 \$0	\$1,594,734 \$101,725	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$485	\$0 \$0	\$0 \$0	\$0 \$0	\$1,594,734
HCBS - Children with Life Limiting Illness HCBS - Spinal Cord Injury	\$0	\$0 \$0	\$101,723	\$0	\$0	\$0 \$0	\$0	\$483	\$0	\$0	\$0	\$102,210 \$0
CCT - Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Private Duty Nursing	\$1,035,252	\$240,541	\$15,137,080	\$0	\$0	\$0	\$604,720	\$6,648,963	\$0	\$0	\$0	\$23,666,555
Long Term Home Health	\$18,218,198	\$4,520,382	\$101,341,215	\$43,869	\$0	\$167	\$3,137,536	\$10,254,991	\$0 \$0	\$0	\$97,840	\$137,614,198
Hospice Subtotal Community Based Long-Term Care	\$34,017,386 \$162,206,136	\$3,025,452 \$25,635,560	\$6,115,615 <b>\$227,876,685</b>	\$203,862 <b>\$267,075</b>	\$0 \$0	\$0 \$167	\$231,678 \$3,973,934	\$34,952 <b>\$17,044,079</b>	\$0 \$0	\$1,279 <b>\$1,279</b>	\$6,603 \$299,020	\$43,636,827 \$437,303,935
·	\$102,200,130	\$25,035,500	3227,670,065	\$207,075	30	3107	\$3,973,934	\$17,044,079	30	\$1,279	\$299,020	3437,303,933
Long-Term Care								-				
Class I Nursing Facilities Class II Nursing Facilities	\$393,028,828 (\$38,446)	\$28,956,277 \$264,098	\$73,847,716 \$989,694	\$5,285 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$62,686 \$0	\$495,900,792 \$1,215,347
Program of All-Inclusive Care for the Elderly	\$61,924,559	\$4,986,130	\$2,345,339	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$69,256,028
Subtotal Long-Term Care	\$454,914,942	\$34,206,505	\$77,182,749	\$5,285	\$0	\$0	\$0	\$0	\$0	\$0	\$62,686	\$566,372,166
Insurance												
Supplemental Medicare Insurance Benefit	\$54,965,748	\$3,205,285	\$28,812,261	\$180,219	\$0	\$0	\$0	\$0	\$0	\$0	\$15,905,077	\$103,068,590
Health Insurance Buy-In Program	\$3,552	\$8,333	\$993,384	\$3,197	\$0	\$0	\$11,314	\$210	\$0	\$0	\$0	\$1,019,989
Subtotal Insurance	\$54,969,300	\$3,213,618	\$29,805,645	\$183,416	\$0	\$0	\$11,314	\$210	\$0	\$0	\$15,905,077	\$104,088,579
Service Management												
Single Entry Points	\$11,622,897	\$2,068,951	\$9,956,430	\$2,637	\$0	\$0	\$1,458	\$8,329	\$0	\$41,435	\$5,414	\$23,707,551
Disease Management	\$4,570	\$2,655	\$23,534	\$12,589	\$0	\$409	\$21,785	\$3,047	\$3,027	\$0	\$0	\$71,616
Prepaid Inpatient Health Plan Administration	\$331,989	\$116,999	\$938,116	\$713,502	\$0	\$0	\$2,715,378	\$208,304	\$87,465	\$0	\$0	\$5,111,753
Accountable Care Collaborative	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal Service Management	\$11,959,456	\$2,188,605	\$10,918,080	\$728,728	\$0	\$409	\$2,738,621	\$219,680	\$90,492	\$41,435	\$5,414	\$28,890,920
Total Services	\$760,810,519	\$114,921,883	\$733,614,724	\$260,807,625	\$3,085,478	\$9,006,819	\$466,347,780	\$67,453,276	\$68,157,048	\$48,471,797	\$19,503,189	\$2,552,180,140
Financing and Supplemental Payments												
Upper Payment Limit Financing	\$11,041,603	\$915,688	\$3,009,973	\$1,192,576	\$16,794	\$0	\$1,462,375	\$131,005	\$136,616	\$28,661	\$1,636	\$17,936,927
Hospital Supplemental Payments Nursing Facility Supplemental Payments	\$11,404,873 \$37,661,309	\$9,618,163 \$2,762,168	\$83,046,197 \$7,021,804	\$66,297,084 \$515	\$529,770 \$0	\$0 \$0	\$87,130,849 \$0	\$6,757,129 \$0	\$22,253,436 \$0	\$25,428,583 \$0	\$2,655 \$5,616	\$312,468,739 \$47,451,412
Nursing Facility Supplemental Payments Physician Supplemental Payments	\$37,661,309	\$2,762,168	\$7,021,804	\$3,418,128	\$22,686	\$0 \$0	\$5,795,803	\$582,269	\$978.146	\$401,260	\$5,616	\$47,451,412 \$14,504,498
Outstationing Payments	\$60,301	\$95,018	\$825,287	\$1,020,373	\$14,371	\$0	\$1,251,371	\$112,103	\$116,904	\$24,526	\$0	\$3,520,254
University of Colorado School of Medicine Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Accounting Adjustments	(\$5,210)	(\$778)	(\$4,955)	(\$1,747)	(\$16)	(\$61)	(\$3,132)	(\$452)	(\$458)	(\$325)	(\$134)	(\$17,268)
Subtotal Financing and Supplemental Payments	\$60,431,852	\$13,739,023	\$96,586,739	\$71,926,929	\$583,605	(\$61)	\$95,637,266	\$7,582,054	\$23,484,644	\$25,882,705	\$9,806	\$395,864,562
Grand Total	\$821,242,371	\$128,660,906	\$830,201,463	\$332,734,554	\$3,669,083	\$9,006,758	\$561,985,046	\$75,035,330	\$91,641,692	\$74,354,502	\$19,512,995	\$2,948,044,702

ACUTE CARE	FY 2019-20	Percent Change from Prior	FY 2018-19	Percent Change from Prior	FY 2017-18	Percent Change from Prior	FY 2016-17	Percent Change from Prior	FY 2015-16	Percent Change from Prior Year	FY 2014-15	Percent Change from Prior Year	FY 2013-14	Percent Change from Prior Year		Percent Change From Prior Year	FY 2011-12
Physician Services & EPSDT	\$817,738,979	7.80%	\$758,535,680	-0.91%	\$765,507,255	13.01%	\$677,367,640	-9.33%	\$747,048,656	13.57%	\$657,799,926	46.91%	\$447,742,226	43.81%	\$311,344,143	8.47%	\$287,020,239
Clinic Services	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0
Emergency Transportation	\$57,167,041	4.25%	\$54,835,010	2.23%	\$53,639,004	13.81%	\$47,130,610	48 98%	\$31,635,356	74 36%	\$18,143,536	79 18%	\$10.125.852	39.21%	\$7,273,660	14 35%	\$6,361,058
Non-Emergency Medical Transportation	\$51,570,333	-4.80%	\$54,171,961	19.67%	\$45,266,813	73.91%	\$26,029,542	40.91%	\$18,472,382	35.13%	\$13,670,286	-7.23%	\$14,734,943	53.86%	\$9,576,755	-8.46%	\$10,462,166
	\$289,265,806	-10.73%	\$324,041,021	-0.85%	\$326,818,855	-3.59%	\$338,971,898	2.87%	\$329,502,705	32.69%	\$248,329,591	69.16%	\$146,803,940	26.14%	\$116,386,038	12.00%	\$103,911,787
Dental Services																	
Family Planning	\$11,179	-116.31%	(\$68,526)	-1239.82%	\$6,012	-99.87%	\$4,504,549	73.60%	\$2,594,764	83.28%	\$1,415,719	47.69%	\$958,576	37.09%	\$699,220	20.77%	\$578,957
Health Maintenance Organizations	\$420,077,353	4.92%	\$400,359,785	-7.12%	\$431,069,113	5.54%	\$408,450,059	6.12%	\$384,880,337	30.87%	\$294,094,972	116.42%	\$135,890,722	7.40%	\$126,531,583	4.82%	\$120,715,911
Inpatient Hospitals	\$793,597,215	-0.44%	\$797,071,196	0.53%	\$792,880,332	9.26%	\$725,671,567	3.80%	\$699,094,320	4.39%	\$669,696,478	40.01%	\$478,311,291	17.58%	\$406,784,919	12.22%	\$362,502,617
Outpatient Hospitals	\$482,537,410	7.27%	\$449,822,722	-0.74%	\$453,188,132	-15.30%	\$535,045,613	-8.09%	\$582,139,243	9.36%	\$532,321,364	34.03%	\$397,169,554	41.27%	\$281,148,005	20.93%	\$232,479,846
Lab & X-Ray	\$143,829,723	8.54%	\$132,517,739	23.49%	\$107,311,387	-5.13%	\$113,119,719	-2.26%	\$115,733,845	22.51%	\$94,468,696	46.04%	\$64,684,775	41.69%	\$45,653,385	14.20%	\$39,978,003
Durable Medical Equipment	\$160,338,667	6.57%	\$150,457,643	-13.99%	\$174,924,514	0.65%	\$173,792,731	4.01%	\$167,085,542	11.48%	\$149,875,322	25.25%	\$119,661,675	16.03%	\$103,126,254	10.05%	\$93,706,452
Prescription Drugs	\$1,040,387,922	6.70%	\$975,015,037	-1.60%	\$990,848,747	2.67%	\$965,104,927	15.66%	\$834,402,471	24.69%	\$669,175,357	47.66%	\$453,191,438	35.60%	\$334,204,114	4.85%	\$318,741,461
Physician Administered Drugs	\$129,284,374	-6.29%	\$137,956,678	0.00%	\$103,693,806	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	S0	0.00%	S0
Drug Rebate	(\$654,910,196)	-12.68%	(\$749,976,088)	34.80%	(\$556,362,811)	-24.23%	(\$734,278,868)	79.58%	(\$408,879,686)	27.28%	(\$321,241,375)	64.51%	(\$195,271,698)	9.08%	(\$179,022,880)	19.52%	(\$149,787,193)
Rural Health Centers	\$35,074,170	2.35%	\$34,269,949	33.54%	\$25,663,355	48.83%	\$17,243,332	-16.80%	\$20,725,156	-3.69%	\$21,519,068	45.15%	\$14.825.896	20.09%	\$12,345,593	16.82%	\$10,567,916
Federally Qualified Health Centers	\$118,855,768	-25.99%	\$160,603,137	-6.96%	\$172,608,445	33.52%	\$129,276,156	-11.34%	\$145,816,160	-2.33%	\$149,297,728	16.54%	\$128,107,489	28.38%	\$99,791,204	5.28%	\$94,790,483
Co-Insurance (Title XVIII-Medicare)	\$118,146,785	4.40%	\$113,165,862	21.68%	\$93,000,514	58.76%	\$58,577,663	-22.94%	\$76,012,667	39.19%	\$54,609,798	-0.54%	\$54,904,379	34.44%	\$40,839,212	10.27%	\$37,036,552
Breast and Cervical Cancer Treatment Program	(\$29,984)	100.00%	\$0	-100.00%	(\$22,533)	-101.06%	\$2,135,021	-17.60%	\$2,591,199	-12.03%	\$2,945,501	-66.83%	\$8,879,647	-7.11%	\$9,559,144	-6.95%	\$10,272,613
Prepaid Inpatient Health Plan Services	(329,984)	0.00%	\$0 \$0	0.00%	(322,333)	0.00%	\$2,133,021	0.00%	\$5,390,487	0.00%	\$45.078.921	0.00%	\$58,932,563	0.00%	\$57.655.514	0.00%	\$56,463,119
		-303 95%				1133 17%		-68 95%		-79.83%		-8 48%				1.55%	
Other Medical Services	(\$2,478)		\$1,215	-91.81%	\$14,835		\$1,203		\$3,875		\$19,210		\$20,991	35.15%	\$15,532		\$15,295
Preventive Services	(\$42,393,005)	-154.68%	\$77,522,796	2.44%	\$75,675,246	100.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0
Acute Home Health	\$21,584,930	-29.84%	\$30,766,913	-8.43%	\$33,600,668	15.42%	\$29,111,112	3.25%	\$28,195,914	-6.84%	\$30,266,737	32.63%	\$22,819,991	21.87%	\$18,725,376	80.29%	\$10,386,312
Presumptive Eligibility	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	-100.00%	\$3,075,000	100.00%	\$0
Subtotal of Acute Care	\$3,982,131,992	2.08%	\$3,901,069,730	-4.60%	\$4,089,331,689	16.26%	\$3,517,254,474	-7.01%	\$3,782,445,393	13.54%	\$3,331,486,835	41.02%	\$2,362,494,250	30.83%	\$1,805,711,771	9.69%	\$1,646,203,594
COMMUNITY BASED LONG-TERM CARE																	
HCBS - Elderly, Blind, and Disabled	\$524,294,139	13.97%	\$460,036,072	9.92%	\$418,506,526	14.85%	\$364,380,354	13.40%	\$321,321,224	8.13%	\$297,154,820	6.31%	\$279,523,188	15.27%	\$242,494,560	7.69%	\$225,185,711
HCBS - Community Mental Health Services	\$49,419,682	9.11%	\$45,292,226	9.57%	\$41,334,782	8.22%	\$38,195,913	6.93%	\$35,721,561	5.10%	\$33,989,393	6.49%	\$31,919,229	12.75%	\$28,309,412	9.16%	\$25,934,255
HCBS - Children's HCBS	\$50,814,407	34.46%	\$37,791,586	49.05%	\$25,354,895	50.07%	\$16,895,299	34.53%	\$12,558,473	15.09%	\$10,912,003	34.69%	\$8,101,781	51.42%	\$5,350,385	70.93%	\$3,130,073
HCBS - Persons Living with AIDS	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	-100,00%	(\$3,577)	-102.64%	\$135,733	-71.78%	\$480,928	-6.80%	\$516,036
HCBS - Consumer Directed Attendant Support	(\$12.221)	-100.78%	\$1,573,249	44.52%	\$1,088,619	-188.91%	(\$1,224,402)	-158.81%	\$2.081.957	-19.07%	\$2,572,697	10.36%	\$2,331,237	-12.42%	\$2,661,977	-23.10%	\$3,461,683
HCBS - Colsulter Directed Attendant Support	\$27,719,365	5.88%	\$26,179,750	18.16%	\$22,155,440	7.20%	\$20,667,950	7.87%	\$19,160,548	15.08%	\$16,649,310	17.38%	\$14.184.077	10.38%	\$12.849.682	2.09%	\$12.587.131
HCBS - Children with Autism	\$34,785	23.92%	\$28,071	-94.98%	\$559,525	-1.27%	\$566,699	1.46%	\$558,548	-21.34%	\$710,058	-7.10%	\$764,302	-13.68%	\$885,424	-13.40%	\$1,022,387
	\$661,895	-1.31%	\$670,649	-94.98%	\$760,772	6.07%	\$717.215	11.54%	\$558,548 \$642,990	35.75%	\$473.674	113.72%	\$221,632	7.00%	\$207,131	21.19%	\$1,022,387
HCBS - Children with Life Limiting Illness		-1.31%	\$6,814,633	-11.85% 20.43%	\$760,772 \$5.658.425	108.17%	\$/1/,215		\$642,990 \$1,974,424	35./5% 12.24%	\$4/3,6/4	-0.82%	\$221,632 \$1,773,572	602.38%	\$207,131 \$252,509	100.00%	
HCBS - Spinal Cord Injury	\$8,319,400							37.67%									\$0
CCT - Services	\$5,013,150	4.58%	\$5,253,862	61.07%	\$3,261,916	16.94%	\$2,789,457	26.31%	\$2,208,394	-8.37%	\$2,410,066	100.00%	\$0	0.00%	\$0	0.00%	\$0
Private Duty Nursing	\$102,263,351	6.58%	\$95,953,404	5.94%	\$90,576,446	4.02%	\$87,079,492	19.93%	\$72,609,335	18.07%	\$61,498,982	15.70%	\$53,154,903	44.26%	\$36,846,961	18.31%	\$31,144,153
Long Term Home Health	\$404,967,375	13.47%	\$356,906,370	12.47%	\$317,329,479	15.97%	\$273,639,403	14.28%	\$239,436,289	12.63%	\$212,577,453	13.97%	\$186,515,195	17.58%	\$158,630,532	4.90%	\$151,221,421
Hospice	\$69,222,983	5.84%	\$65,403,062	7.13%	\$61,052,619	13.16%	\$53,951,360	5.03%	\$51,366,916	7.86%	\$47,622,754	5.79%	\$45,017,254	3.73%	\$43,397,100	2.53%	\$42,326,808
Subtotal of Community Based Long-Term Care	\$1,242,718,311	12.78%	\$1,101,902,934	11.57%	\$987,639,444	14.79%	\$860,376,928	13.26%	\$759,640,659	10.36%	\$688,326,705	10.37%	\$623,642,103	17.15%	\$532,366,601	7.18%	\$496,700,568
LONG-TERM CARE AND INSURANCE																	
Class I Nursing Facilities	\$713,000,252	1.15%	\$704,897,534	2.21%	\$689,625,322	6.22%	\$649,262,622	4.77%	\$619,673,488	6.96%	\$579,329,903	3.02%	\$562,325,391	5.62%	\$532,405,250	2.14%	\$521,244,769
Class II Nursing Facilities	\$6,231,818	17.85%	\$5,287,917	-4.31%	\$5,526,095	42.57%	\$3,875,951	-4.12%	\$4,042,506	-5.50%	\$4,277,851	22.76%	\$3,484,766	-31.77%	\$5,107,562	104.38%	\$2,499,074
Program of All-Inclusive Care for the Elderly	\$234,171,518	17.23%	\$199,756,999	24.03%	\$161,056,170	5.46%	\$152,711,212	18.37%	\$129,011,469	-2.93%	\$132,904,767	32.28%	\$100,474,817	3.21%	\$97,346,358	13.88%	\$85,480,585
Supplemental Medicare Insurance Benefit	\$203,740,769	2.88%	\$198,031,363	0.29%	\$197,463,212	5.74%	\$186,740,969	19.38%	\$156,430,863	13.96%	\$137,271,082	6.27%	\$129,168,681	7.77%	\$119,859,864	1.06%	\$118,598,927
Health Insurance Buy-In Program	\$2,489,399	-3.42%	\$2,577,522	4.76%	\$2,460,300	15.38%	\$2,132,413	32.14%	\$1,613,716	27.78%	\$1,262,907	-7.50%	\$1,365,261	0.27%	\$1,361,531	17.44%	\$1,159,307
Subtotal of Long-Term Care and Insurance	\$1,159,633,756	4.42%	\$1,110,551,335	5.15%	\$1,056,131,099	6.17%	\$994,723,167	9.22%	\$910,772,042	6.52%	\$855,046,510	7.31%	\$796,818,916	5,39%	\$756,080,565	3.72%	\$728,982,662
SERVICE MANAGEMENT	31,133,033,/50	4.42%	31,110,001,335	3.13%	31,050,151,099	0.17%	3774,/43,10/	9.42%	3710,772,042	0.34%	3022,040,510	7.31%	3/70,010,910	3.37 %	\$750,000,505	3.14%	3/40,704,002
	620 200	16.165	604 100	24.86	624 800	11.000	621.005.77	0.000	621 202	4.107	622 (10 ***	21.25	60 ( 000	0.205	0000000000	6.000	605.004.7
Single Entry Points	\$30,399,938	16.11%	\$26,182,831	-24.76%	\$34,799,849	11.94%	\$31,089,234	-0.62%	\$31,283,068	-4.10%	\$32,619,317	21.27%	\$26,899,016	-0.29%	\$26,976,561	6.94%	\$25,226,746
Disease Management	\$483,719	-31.43%	\$705,408	-21.01%	\$893,053	-4.72%	\$937,331	72.87%	\$542,225	-45.13%	\$988,242	87.54%	\$526,953	-44.94%	\$957,110	-2.54%	\$982,012
Prepaid Inpatient Health Plan Administration	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$121	0.00%	\$2,201,486	0.00%	\$7,630,138	0.00%	\$6,685,075	0.00%	\$8,891,348
Accountable Care Collaborative	\$198,855,150	18.66%	\$167,580,760	15.62%	\$144,941,471	-2.41%	\$148,523,678	5.37%	\$140,949,203	35.59%	\$103,950,766	51.60%	\$68,570,330	86.69%	\$36,728,931	105.10%	\$17,907,833
Subtotal Service Management	\$229,738,807	18.14%	\$194,468,999	7.66%	\$180,634,373	0.05%	\$180,550,243	4.50%	\$172,774,617	23.62%	\$139,759,811	34.87%	\$103,626,437	45.24%	\$71,347,677	34.60%	\$53,007,939
Total Services	\$6,614,222,866	4.85%	\$6,307,992,998	-0.09%	\$6,313,736,605	13.70%	\$5,552,904,812	-1.29%	\$5,625,632,711	12.18%	\$5,014,619,861	29.02%	\$3,886,581,706	22.78%	\$3,165,506,614	8.23%	\$2,924,894,763
FINANCING AND SUPPLEMENTAL PAYMENTS																	
Upper Payment Limit Financing	\$7,917,447	12.63%	\$7,029,904	35.91%	\$5,172,512	36.84%	\$3,779,867	7.82%	\$3,505,607	-3.63%	\$3,637,757	-35.85%	\$5,670,550	-2.43%	\$5,811,783	-8.87%	\$6,377,165
Hospital Supplemental Payments	\$1,020,758,303	-15.05%	\$1,201,546,143	28 54%	\$934,781,598	40.50%	\$665,309,660	-38.67%	\$1.084.717.996	84.49%	\$587,956,421	-5 58%	\$622,708,054	-4 32%	\$650,828,979	5.90%	\$614,554,259
Nursing Facility Supplemental Payments	\$133,094,588	19.63%	\$111,257,216	3.34%	\$107,663,091	4.40%	\$103,128,309	2.56%	\$100.549.259	8.09%	\$93,026,856	3.62%	\$89,773,988	5.92%	\$84,755,778	-2.34%	\$86,787,485
Physician Supplemental Payments	\$15,711,972	145.48%	\$6,400,433	-42.46%	\$11,123,507	68.76%	\$6,591,202	-65 97%	\$19,369,964	315.73%	\$4,659,239	-17.08%	\$5,619,123	-58 33%	\$13,485,215	170.53%	\$4,984,682
Outstationing Payments	\$5,488,006	136.46%	\$2,320,878	150 44%	\$926,730	-82.83%	\$5,396,841	-16.24%	\$6,443,530	-67.04%	\$19,548,094	205.03%	\$6,408,519	-58.42%	\$15,412,520	964 98%	\$1,447,215
University of Colorado School of Medicine Payments	\$116,997,240	-14 34%	\$136,577,576	10.56%	\$123,529,217	-82.83% 100.00%	\$5,390,841	0.00%	\$0,443,330	-67.04%	\$19,548,094	0.00%	\$6,408,519	-58.42%	\$15,412,520	0.00%	\$1,447,215
		11.01/9							3			0.0070	4.0	0.0079			90
Accounting Adjustments	(\$14,379,015)	100.01%	(\$7,189,052)	-69.39%	(\$23,486,769)	243.78%	(\$6,831,933)	531.07%	(\$1,082,597)	-118.84%	\$5,745,565	186.10%	\$2,008,260	25.53%	\$1,599,845	-46.44%	\$2,987,193
Subtotal Financing and Supplemental Payments	\$1,285,588,541	-11.82%	\$1,457,943,098	25.72%	\$1,159,709,886	49.18%	\$777,373,946	-35.94%	\$1,213,503,759	69.82%	\$714,573,932	-2.41%	\$732,188,494	-5.14%	\$771,894,120	7.64%	\$717,137,999
Grand Total	\$7,899,811,407	1.72%	\$7,765,936,096	3.91%	\$7,473,446,491	18.06%	\$6,330,278,758	-7.44%	\$6,839,136,470	19.37%	\$5,729,193,793	24.04%	\$4,618,770,200	17.31%	\$3,937,400,734	8.11%	\$3,642,032,762
			·								·		·				

**Exhibit O - Appropriations and Expenditures** 

	F	inal FY 2019-20 Fur	ding Splits			
	Total Funds	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2019-20 Long Bill Appropriation (SB 19-207)	\$7,869,382,428	\$1,376,104,786	\$897,710,833	\$982,744,312	\$88,876,290	\$4,523,946,207
HB 19-1302 Cancer Treatment & License Plate Surcharge (BCCP)	\$2,293,990	\$0	\$0	\$798,986	\$0	\$1,495,004
SB 19-209 PACE Program Funding Methodology	\$13,510,958	\$6,755,479	\$0	\$0	\$0	\$6,755,479
SB 19-197 Continue Complementary or Alternative Medicine Program (Spinal Cord Pilot)	\$0	\$0	\$0	\$0	\$0	\$0
SB 19-238 Improve Wages and Accountability Home Care Workers	\$10,230,152	\$5,115,076	\$0	\$0	\$0	\$5,115,076
S-01 Medical Services Premiums	\$64,206,386	\$36,885,502	\$0	\$42,906,264	\$0	(\$15,585,380)
FY 2019-20 S-06 Pharmacy Pricing and Technology	\$5,336,522	\$1,408,842	\$0	\$325,528	\$0	\$3,602,152
SB 19-207 FY 2018-19 Long Bill Add-on	\$103,185,316	\$218,799,409	(\$374,387,500)	(\$30,924,009)	\$93,850	\$289,603,566
HB 20-1385 Use of Increased Medicaid Match	\$0	(\$24,733,945)	\$0	\$24,733,945	\$0	\$0
Appropriations Totals	\$8,068,145,752	\$1,620,335,149	\$523,323,333	\$1,020,585,026	\$88,970,140	\$4,814,932,104
Final Expenditures	\$8,099,261,570	\$1,645,024,128	\$523,323,333	\$933,323,923	\$88,963,623	\$4,908,626,563
Remaining Balance	(\$31,115,818)	(\$24,688,979)	\$0	\$87,261,103	\$6,517	(\$93,694,459)
Percentage Difference	-0.39%	-1.15%	/ <sub>0</sub>	8.55%	0.01%	-1.95%

#### Notes:

<sup>1.</sup> Totals reflect final CORE close as of August 4, 2020; they do not include post-closing entries past this date.

<sup>2.</sup> Totals may not match those found elsewhere, due to the rounding.

**Exhibit O - Final Expenditures for Prior Fiscal Year by Aid Category** 

FY 2	2019-20 Final Actuals		
Aid Category	Caseload	Per Capita	Total
Adults 65 and Older (OAP-A)	47,551	\$32,645.63	\$1,552,332,353
Disabled Adults 60 to 64 (OAP-B)	13,029	\$25,522.14	\$332,527,992
Disabled Individuals to 59 (AND/AB)	66,530	\$23,727.09	\$1,578,563,388
Disabled Buy-In	10,675	\$9,637.59	\$102,881,293
MAGI Parents/Caretakers to 68% FPL	164,467	\$3,880.36	\$638,191,301
MAGI Parents/Caretakers 69% to 133% FPL	59,499	\$3,685.90	\$219,307,631
MAGI Adults	322,951	\$5,569.27	\$1,798,600,473
Breast & Cervical Cancer Program	137	\$25,963.99	\$3,557,066
Eligible Children (AFDC-C/BC)	407,548	\$2,786.12	\$1,135,477,082
SB 11-008 Eligible Children	55,924	\$2,127.98	\$119,004,917
Foster Care	21,320	\$5,706.50	\$121,662,512
MAGI Pregnant Adults	11,547	\$16,387.20	\$189,223,053
SB 11-250 Eligible Pregnant Adults	2,209	\$12,276.48	\$27,118,742
Non-Citizens- Emergency Services	2,417	\$25,111.43	\$60,694,317
Partial Dual Eligibles	33,441	\$1,471.53	\$49,209,502
TOTAL	1,219,245	TF	\$8,099,261,570
Total Euroda in alveda yannan naymaant limit financina and	gymnlom ontol novements	GF	\$1,645,024,128
Total Funds include upper payment limit financing and		GFE	\$523,323,333
and other Medicaid financing. Totals reflect final CORI		CF	\$933,323,923
2020 and do not include post-closing entries past this da	ie. Totais may not match	RF	\$88,963,623
due to rounding.		FF	\$4,908,626,563

Exhibit O - Comparison of Budget Requests and Appropriations

			FY 2019-	20 Comparison of	Requests and A	ppropriations				
FY 2019-20	November 1, 2018	February 15, 2019	_	FY 2019-20 Long Bill and Special Bills Appropriation	November 1, 2019	February 15, 2020	% Change over Appropriation	FY 2019-20 Final Appropriation	FY 2019-20 Actuals	% Change over Feb.
Acute Care	\$3,841,779,726	\$3,907,663,103	1.71%	\$5,008,363,658	\$3,864,930,619	\$4,004,906,551	-20.04%	\$3,992,828,331	\$3,982,131,992	-0.57%
Community Based Long-Term Care	\$1,159,368,122	\$1,322,947,619	14.11%	\$1,254,974,225	\$1,247,927,618	\$1,231,392,204	-1.88%	\$1,231,392,204	\$1,242,718,311	0.92%
Long-Term Care	\$1,086,045,655	\$1,138,828,599	4.86%	\$972,782,773	\$1,090,050,246	\$1,079,380,579	10.96%	\$1,079,380,579	\$953,403,588	-11.67%
Insurance	\$222,470,279	\$213,502,302	-4.03%	\$215,344,239	\$205,623,449	\$207,405,603	-3.69%	\$207,405,603	\$206,230,168	-0.57%
Service Management	\$256,818,590	\$249,240,901	-2.95%	\$247,865,981	\$238,013,112	\$232,939,605	-6.02%	\$232,939,605	\$229,738,807	-1.37%
Financing	\$1,278,459,797	\$1,390,835,252	8.79%	\$1,332,129,459	\$1,313,078,870	\$1,324,199,430	-0.60%	\$1,324,199,430	\$1,314,128,756	-0.76%
Total	\$7,844,942,169	\$8,223,017,776	4.82%	\$9,031,460,335	\$7,959,623,914	\$8,080,223,972	-10.53%	\$8,068,145,752	\$7,928,351,622	-1.88%
Class I Nursing Facilities	\$864,827,191	\$881,337,816	1.91%	\$753,890,605	\$852,638,172	\$843,823,555	11.93%	\$843,823,555	\$713,000,252	-15.50%

			FY 2020-	21 Comparison of	Requests and A	ppropriations				
FY 2020-21	November 1, 2019	February 15, 2020	% Change	FY 2020-21 Long Bill and Special Bills Appropriation	November 1, 2020	February 15, 2021	% Change over Appropriation	FY 2020-21 Final Appropriation	FY 2020-21 Actuals	% Change over Feb.
Acute Care	\$3,907,663,103	\$4,032,867,703	3.20%	\$5,008,363,658	\$4,751,876,703					
Community Based Long-Term Care	\$1,322,947,619	\$1,313,815,087	-0.69%	\$1,254,974,225	\$1,313,851,459					
Long-Term Care	\$1,138,828,599	\$1,126,343,635	-1.10%	\$972,782,773	\$2,214,067,357					
Insurance	\$213,502,302	\$220,773,292	3.41%	\$215,344,239	\$214,639,539					
Service Management	\$249,240,901	\$239,920,353	-3.74%	\$247,865,981	\$255,987,908					
Financing	\$1,390,835,252	\$1,438,883,649	3.45%	\$1,332,129,459	\$262,909,329					
Total	\$8,223,017,776	\$8,372,603,719	1.82%	\$9,031,460,335	\$9,013,332,295					
Class I Nursing Facilities	\$881,337,816	\$872,110,943	-1.05%	\$753,890,605	\$734,026,502					

			FY 2021-	22 Comparison of	f Requests and A	ppropriations				
FY 2021-22	November 1, 2020	February 15, 2021	% Change	FY 2021-22 Long Bill and Special Bills Appropriation	November 1, 2021	February 15, 2022	% Change over Appropriation	FY 2021-22 Final Appropriation	FY 2021-22 Actuals	% Change over Feb.
Acute Care	\$4,711,712,450									
Community Based Long-Term Care	\$1,391,881,970									
Long-Term Care	\$1,156,908,457									
Insurance	\$228,030,464									
Service Management	\$269,394,353									
Financing	\$1,555,935,834									
Total	\$9,313,863,529									
Class I Nursing Facilities	\$756,568,515									

Exhibit P - Estimate of FY Expenditures with Prior Year Cash Flow Pattern (For Reference Only - Not the Department's Request)

				Exhil	oit P - Estimate of F	Y Expenditures wit	h Prior Year Cash	Flow Pattern (For I	Reference Only - N	ot the Department's	Request)					
Fiscal Year	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	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	Total
FY 2004-05	\$652,991,016	\$82,003,665	\$540,574,590	\$0	\$193,239,971	\$0	\$0	\$2,490,659	\$304,520,783	\$0	\$46,710,822	\$42,305,572	\$0	\$44,773,436	\$10,931,012	\$1,920,541,525
FY 2005-06	\$670,399,260	\$87,347,545	\$554,870,506	\$0	\$200,372,840	\$0	\$0	\$6,810,399	\$317,181,796	\$0	\$49,374,100	\$41,186,119	\$0	\$55,353,863	\$13,367,880	\$1,996,264,308
FY 2006-07	\$680,873,516	\$90,702,791	\$573,755,683	\$0	\$205,339,546	\$0	\$0	\$5,557,749	\$331,302,379	\$0	\$53,781,937	\$48,628,238	\$0	\$54,484,004	\$16,970,966	\$2,061,396,809
FY 2007-08	\$712,276,694	\$101,257,270	\$655,167,660	\$0	\$207,678,887	\$0	\$0	\$7,102,713	\$364,161,301	\$0	\$64,197,785	\$54,600,185	\$0	\$53,660,977	\$18,992,933	\$2,239,096,405
FY 2008-09	\$789,584,078	\$115,435,768	\$735,082,424	\$0	\$239,681,753	\$0	\$0	\$7,056,952	\$433,354,524	\$0	\$67,739,569	\$60,847,257	\$0	\$59,283,547	\$18,925,572	\$2,526,991,443
FY 2009-10 (DA)	\$821,242,371	\$128,660,906	\$830,201,463	\$0	\$332,734,554	\$3,669,083	\$0	\$9,006,758	\$561,985,046	\$0	\$75,035,330	\$91,641,692	\$0	\$74,354,502	\$19,512,995	\$2,948,044,702
FY 2010-11 (DA)	\$859,971,337	\$150,963,523	\$943,370,577	\$0	\$373,924,419	\$82,213,921	\$0		\$627,769,745	\$0	\$81,811,588	\$95,688,869	\$0	\$75,541,133	\$24,322,916	\$3,325,395,184
FY 2011-12	\$896,112,956	\$170,623,165	\$1,033,566,923	\$723,127	\$442,861,997	\$120,389,845	\$4,003,017	\$10,287,938	\$683,425,225	\$0	\$79,698,390	\$97,417,747	\$0	\$78,357,967	\$24,564,465	\$3,642,032,762
FY 2012-13	\$927,900,253	\$183,967,002	\$1,049,728,681	\$18,292,102	\$468,129,131	\$133,498,122	\$87,688,473	\$9,565,112	\$749,135,524	\$15,071,720	\$79,058,628	\$108,082,008	\$2,869,936	\$78,979,079	\$25,434,963	\$3,937,400,734
FY 2013-14	\$980,364,004	\$196,560,882	\$1,101,867,467	\$39,863,213	\$471,485,421	\$144,781,548	\$447,013,009	\$8,884,676	\$823,611,350	\$47,052,815	\$85,183,296	\$168,143,624	\$12,064,530	\$61,044,575	\$30,849,790	\$4,618,770,200
FY 2014-15	\$1,044,291,631	\$217,931,810	\$1,108,322,123	\$30,521,839	\$569,129,005	\$206,228,721	\$1,145,194,212	\$5,578,806	\$925,982,289	\$82,362,752	\$92,006,877	\$193,228,921	\$20,411,857	\$56,781,957	\$31,220,993	\$5,729,193,793
FY 2015-16	\$1,120,115,780	\$236,325,255	\$1,262,962,468	\$51,661,112	\$630,016,796	\$275,992,247		\$4,174,196	\$1,074,344,794	\$111,240,961	\$97,684,729	\$222,185,018	\$24,225,165	\$66,804,909	\$39,805,896	\$6,839,136,470
FY 2016-17	\$1,255,869,692	\$227,809,139	\$1,167,642,474	\$46,480,222	\$496,699,138	\$270,635,116	\$1,420,477,846	\$4,278,354	\$962,116,697	\$105,284,355	\$89,559,929	\$164,997,565	\$19,079,890	\$58,303,900	\$41,044,441	\$6,330,278,758
FY 2017-18	\$1,374,850,712	\$265,844,232	\$1,401,999,382	\$72,335,007	\$681,687,561	\$262,493,865	\$1,719,088,068	\$4,109,880	\$1,122,426,285	\$130,530,240	\$118,166,204	\$164,702,655	\$28,682,493	\$82,915,426	\$43,614,481	\$7,473,446,491
FY 2018-19	\$1,419,049,543	\$316,153,918	\$1,562,217,882	\$90,582,512	\$668,120,971	\$220,662,725	\$1,726,830,611	\$3,422,864	\$1,159,595,891	\$118,856,473	\$129,112,556	\$198,287,837	\$29,838,238	\$74,917,041	\$48,287,034	\$7,765,936,096
FY 2019-20	\$1,552,332,353	\$332,527,992	\$1,578,563,388	\$102,881,293	\$638,191,301	\$219,307,631	\$1,798,600,473	\$3,557,066	\$1,135,477,082	\$119,004,917	\$121,662,512	\$189,223,053	\$27,118,742	\$60,694,317	\$49,209,502	\$7,928,351,622
Fiscal Year	Expenditures	Percent Change	Dollar Increase/ Decrease	Average Yearly Percent Change From FY 2000-01	Percent Change	Three-year Moving Average	Percent Change									
FY 2004-05	\$1,920,541,525															
FY 2005-06	\$1,996,264,308	3.94%	\$75,722,783													
FY 2006-07	\$2,061,396,809	3.26%	\$65,132,501	3.60%												
FY 2007-08	\$2,239,096,405	8.62%	\$177,699,596	5.28%	46.42%	5.28%										
FY 2008-09	\$2,526,991,443	12.86%	\$287,895,038	7.17%	35.93%	8.25%	56.33%									
FY 2009-10 (DA)	\$2,948,044,702	16.66%	\$421,053,259	9.07%	26.47%	12.71%	54.16%									
FY 2010-11 (DA)	\$3,325,395,184	12.80%	\$377,350,482	9.69%	6.86%	14.11%										
FY 2011-12	\$3,642,032,762	9.52% 8.11%	\$316,637,578 \$295,367,972	9.67%	-0.25%	12.99% 10.14%	-7.88% -21.94%									
FY 2012-13 FY 2013-14	\$3,937,400,734 \$4,618,770,200	8.11% 17.31%	\$295,367,972	9.47% 10.34%	-2.01% 9.19%	10.14%	-21.94% 14.80%									
FY 2013-14 FY 2014-15	\$5,729,193,793	24.04%	\$1,110,423,593	11.71%	13.25%	16.49%	41.56%	-								
FY 2015-16	\$6,839,136,470	19.37%	\$1,109,942,677	12.41%	5.95%	20.24%		-								
FY 2016-17	\$6,330,278,758	-7.44%	(\$508,857,712)	10.75%	-13.33%	11.99%	-40.75%	-								
FY 2017-18	\$7,473,446,491	18.06%	\$1,143,167,733	11.32%	5.22%	10.00%	-16.63%									
FY 2018-19	\$7,765,936,096	3.91%	\$292,489,605	10.79%	-4.67%	4.84%	-51.55%									
FY 2019-20	\$7,928,351,622	2.09%	\$162,415,526	10.21%	-5.37%	8.02%	65.59%									
			Dollar Increase/	Projection Using	Percent Change	Projection Using Most Recent										
	Official Projection		Decrease	Most Recent Average Change	over Official Projection	Three-year Average	Workbook Projection									
FY 2019-20 Projection	\$9,013,332,295	13.68%	\$1,084,980,673	\$8,737,683,232	-3.06%	\$8,564,306,591	-4.98%	-								
FY 2020-21 Projection	\$9,313,863,529	3.33%	\$300,531,234	\$9,933,419,482	6.65%	\$9,736,316,559	4.54%	-								
FY 2021-22 Projection	\$10,032,481,775	7.72%	\$718,618,246	\$10,264,629,152	2.31%	\$10,060,954,233	0.28%									
FY 2019-20	\$9,031,460,335															
Appropriation Difference Between				l	<del>                                     </del>			1								
FY 2019-20 Projections and FY 2019-20 Appropriation	(\$18,128,040)	-0.20%		(\$293,777,103)	-3.25%	(\$467,153,744)	-5.17%									
Difference Between FY 2020-21 Projections and FY 2019-20 Appropriation	\$282,403,194	3.13%		\$901,959,147	9.99%	\$704,856,224	7.80%									
Difference Between FY 2021-22 Projections and FY 2019-20 Appropriation	\$1,001,021,440	11.08%		\$1,233,168,817	13.65%	\$1,029,493,898	11.40%									

Exhibit P - Estimate of FY Expenditures with Prior Year Cash Flow Pattern (For Reference Only - Not the Department's Request)

Total Expenditures	Annual % Change	Total Caseload (2)	Annual % Change
\$1,308,420,100		253,254	
\$1,416,535,408	8.26%	275,399	8.74%
\$1,536,804,691	8.49%	331,800	20.48%
\$1,651,670,874	7.47%	367,559	10.78%
\$1,920,541,525	16.28%	406,024	10.46%
\$1,996,264,308	3.94%	402,218	-0.94%
\$2,061,396,809	3.26%	392,229	-2.48%
\$2,239,096,405	8.62%	391,962	-0.07%
\$2,526,991,443	12.86%	436,812	11.44%
\$2,948,044,702	16.66%	498,797	14.19%
\$3,325,395,184	12.80%	560,759	12.42%
\$3,642,032,762	9.52%	619,963	10.56%
\$3,937,400,734	8.11%	682,994	10.17%
\$4,618,770,200	17.31%	860,957	26.06%
\$5,729,193,793	24.04%	1,161,157	34.87%
\$6,839,136,470	19.37%	1,296,986	11.70%
\$6,330,278,758	-7.44%	1,346,114	3.79%
\$7,473,446,491	18.06%	1,315,217	-2.30%
\$7,765,936,096	3.91%	1,261,365	-4.09%
\$7,928,351,622	2.09%	1,219,245	-3.34%
\$9,013,332,295	16.06%	1,358,679	7.71%
\$9,313,863,529	3.33%	1,406,603	3.53%
\$10,032,481,775	7.72%	1,544,812	9.83%
al Services Premiums	only.	<u>'</u>	
etroactivity.			
	\$1,308,420,100 \$1,416,535,408 \$1,536,804,691 \$1,651,670,874 \$1,920,541,525 \$1,996,264,308 \$2,061,396,809 \$2,239,096,405 \$2,526,991,443 \$2,948,044,702 \$3,325,395,184 \$3,642,032,762 \$3,937,400,734 \$4,618,770,200 \$5,729,193,793 \$6,839,136,470 \$6,330,278,758 \$7,473,446,491 \$7,765,936,096 \$7,928,351,622 \$9,013,332,295 \$9,013,332,295 \$9,313,863,529 \$10,032,481,775 Il Services Premiums	\$1,308,420,100 \$1,416,535,408 \$1,536,804,691 \$1,651,670,874 \$1,920,541,525 \$1,996,264,308 \$2,239,096,405 \$2,239,096,405 \$2,239,096,405 \$2,239,096,405 \$2,239,096,405 \$2,239,096,405 \$2,239,096,405 \$2,239,096,405 \$2,239,096,405 \$3,325,395,184 \$2,948,044,702 \$3,325,395,184 \$12,80% \$3,642,032,762 \$3,937,400,734 \$4,618,770,200 \$7,721,93,793 \$6,330,278,758 \$7,474,446,491 \$7,473,446,491 \$7,765,936,096 \$7,765,936,096 \$9,013,332,295 \$10,032,481,775 \$10,032,481,775 \$1,226 \$1,236 \$1,106 \$1,1	\$1,308,420,100

		,															
	FY 2022-23 Projection	Percent Change from Prior Year	FY 2021-22 Projection	Percent Change from Prior Year	FY 2020-21 Projection	Percent Change from Prior Year	FY 2019-20	Percent Change from Prior Year	FY 2018-19	Percent Change from Prior Year	FY 2017-18	Percent Change from Prior Year	FY 2016-17	Percent Change from Prior Year	FY 2015-16	Percent Change from Prior Year	FY 2014-15
Title XIX - Medical Services Premiums																	
Acute Care	\$5,070,101,835	11.29%	\$4,555,555,583	1.36%	\$4,494,358,666	15.89%	\$3,877,967,703	2.22%	\$3,793,864,783	-4.39%	\$3,967,950,854	16.10%	\$3,417,674,701	-7.13%	\$3,679,991,977	13.33%	\$3,247,138,071
Community-Based Long-Term Care	\$1,476,746,699	6.45%	\$1,387,217,727	5.94%	\$1,309,468,659	5.67%	\$1,239,227,637	12.75%	\$1,099,104,932	11.64%	\$984,485,967	14.76%	\$857,851,709	13.14%	\$758,250,179	10.28%	\$687,570,035
Long-Term Care and Insurance	\$1,333,104,283	5.51%	\$1,263,507,184	5.04%	\$1,202,838,965	3.73%	\$1,159,633,756	4.42%	\$1,110,556,106	5.15%	\$1,056,126,362	6.17%	\$994,721,983	9.22%	\$910,772,042	6.52%	\$855,046,510
Service Management	\$275,232,458	6.90%	\$257,455,195	5.14%	\$244,863,482	11.41%	\$219,792,981	18.38%	\$185,661,379	7.37%	\$172,912,178	0.62%	\$171,853,654	4.12%	\$165,047,413	22.97%	\$134,218,911
Total Services	\$8,155,185,275	9.26%	\$7,463,735,689	2.93%	\$7,251,529,772	11.62%	\$6,496,622,077	3399.18%	\$185,661,379	7.37%	\$172,912,178	-96.82%	\$5,442,102,047	-1.31%	\$5,514,061,611	11.98%	\$4,923,973,527
Financing and Supplemental Payments	\$1,676,039,208	0.59%	\$1,666,224,861	5.33%	\$1,581,917,010	23.05%	\$1,285,605,886	-9.97%	\$1,428,054,185	26.07%	\$1,132,758,397	48.30%	\$763,812,466	-35.79%	\$1,189,608,733	69.35%	\$702,445,657
Total Medical Services Premiums Expenditure	\$9,831,224,483	7.68%	\$9,129,960,550	3,36%	\$8,833,446,782	13.51%	\$7,782,227,963	382,26%	\$1,613,715,564	23.59%	\$1,305,670,575	-78,96%	\$6,205,914,513	-7.43%	\$6,703,670,344	19,15%	\$5,626,419,184
Title XIX - Medicaid Mental Health	97,001,221,100	710076	33,123,300,000	5.5070	50,055,110,702	10.0170	37,702,227,703	30212070	91,015,715,504	25.55 70	91,505,070,575	70.5070	30,200,714,010	71-13 70	50,705,070,544	1711570	55,020,117,101
Capitations	\$1,097,268,954	10.30%	\$994.818.155	21.00%	\$822,172,190	28.01%	\$642,269,872	7.47%	\$597,600,167	20.29%	\$496,789,229	-15.39%	\$587,130,447	-0.36%	\$589,248,607	6.28%	\$554,440,757
Fee-for-Service	\$16,094,458	9 93%	\$14,640,109	3.71%	\$14,116,592	16.61%	\$12,106,157	18.47%	\$10.219.150	13.00%	\$9.043.182	18.76%	\$7,614,874	-3.04%	\$7.853.643	8.83%	\$7,216,638
Total Mental Health Expenditure	\$1,113,363,412		\$1,009,458,264	20.71%	\$836,288,782	27.80%	\$654,376,029	7,66%	\$607,819,316	20.16%	\$505,832,411	-14,95%	\$594,745,321	-0.39%	\$597,102,250	6.31%	\$561,657,395
Title XIX - Other Medicaid Services	31,113,303,412	10.27 /6	31,007,430,204	20.7170	3030,200,702	27.0070	3034,370,027	7.00 /0	3007,017,510	20.1070	3303,032,411	-14.7370	3374,743,321	-0.37 /0	3577,102,250	0.31 /0	3301,037,373
Office of Community Living	\$742,530,416	4.87%	\$708,020,032	6.02%	\$667,842,206	7.46%	\$621,491,378	14.87%	\$541,061,431	9.80%	\$492,757,506	8.82%	\$452,810,204	6.13%	\$426,671,562	8.09%	\$394,730,397
Medicare Modernization Act	\$200,660,077	5.67%	\$189,889,421	23.41%	\$153,866,923	-3.86%	\$160,049,900	7.38%	\$149,053,569	3.81%	\$143,579,021	10.05%	\$130,472,767	14.44%	\$114,014,333	5.78%	\$107,786,301
Public School Health Services <sup>(1)</sup>	\$166,242,562	0.00%	\$166,242,562	29.08%	\$128,793,149	5.09%	\$122,557,700	35.08%	\$90,727,295	-4.66%	\$95,161,739	14.87%	\$82,845,907	17.72%	\$70,374,889	32.36%	\$53,167,635
Total Other Medicaid Services Expenditure	\$1,109,433,055	4.26%	\$1,064,152,015	11.96%	\$950,502,278	5.13%	\$904,098,978	15,79%	\$780,842,295	6,75%	\$731,498,266	9.81%	\$666,128,878	9.01%	\$611,060,784	9,97%	\$555,684,333
Title XIX - DHS - Medicaid Funded (2)	31,107,400,000	412076	31,004,102,010	111,70,70	9750,502,270	511570	\$704,070,770	1517770	3700,012,275	0.7570	9751,170,200	2,0170	3000,120,070	7101 70	3011,000,704	31,7770	3555,004,555
Child Welfare Services	\$12,981,594	0.00%	\$12,981,594	0.00%	\$12,981,594	139.02%	\$5,431,083	0.00%	\$5,431,083	-28.19%	\$7,563,057	28.97%	\$5,864,156	-10.12%	\$6,524,564	-4.23%	\$6,812,425
Mental Health Institutes	\$8,416,131	0.00%	\$8,416,131	0.00%	\$8,416,131	-14.95%	\$9,896,024	0.00%	\$9,896,024	-34.45%	\$15,097,842	134.18%	\$6,447,127	-10.12%	\$7,176,700	18.07%	\$6,078,316
High Risk Pregnant Women Program	\$1.838.654	0.00%	\$1,838,654	0.00%	\$1,838,654	26.40%	\$1,454,580	0.00%	\$1,454,580	26.72%	\$1,147,889	0.62%	\$1,140,814	55.11%	\$735.467	-24.16%	\$969,806
Regional Centers	\$54,771,068	0.00%	\$54,771,068	0.00%	\$54,771,068	-1.42%	\$55,560,420	0.00%	\$55,560,420	26.73%	\$43,841,503	-33.29%	\$65,719,538	35.26%	\$48.586.422	22.92%	\$39,525,715
Division of Youth Corrections Medicaid Funding	\$970,397	0.00%	\$970,397	0.00%	\$970,397	-36.81%	\$1,535,639	0.00%	\$1,535,639	36.07%	\$1,128,555	22.46%	\$921,535	-30.61%	\$1.328.061	1.91%	\$1,303,119
Mental Health Treatment Services for Youth (HB 99-1116)	\$126,610	0.00%	\$126,610	0.00%	\$126,610	0.00%	\$0	0.00%	\$0	-100.00%	\$17.370	2473.33%	\$675	-91.70%	\$8,133	-6.28%	\$8,678
DHS Office of Community Living	\$120,010		\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0
Total DHS - Medicaid Funded Expenditure	\$79,104,454	0.00%	\$79,104,454	0.00%	\$79,104,454	7.07%	\$73,877,747	0.00%	\$73,877,747	7.39%	\$68,796,216	-14.11%	\$80,093,845	24.45%	\$64,359,347	17.66%	\$54,698,059
Total Title XIX Services Expenditure	\$12,133,125,404	7,54%	\$11,282,675,283	5,45%	\$10,699,342,296	13.65%	\$9,414,580,717	206.04%	\$3,076,254,922	17.78%	\$2,611,797,468	-65.39%	\$7,546,882,557	-5,38%	\$7,976,192,725	17.32%	\$6,798,458,971
Title XXI	,,,101				,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	2,1,2,70	. ,,,	22.22.70	. , , , ,	22370	,,,,/20	2.12270	,,,
CHP+ Children	\$208,697,589	8.10%	\$193,062,743	11.89%	\$172,550,084	-2.89%	\$177,679,136	2.00%	\$174,197,411	-5.87%	\$185,066,704	27.93%	\$144,662,042	26.32%	\$114,522,947	-9.77%	\$126,924,334
Medicaid SB 11-008 Eligible Children Services	\$161,725,939	13.29%	\$142,750,958	1.70%	\$140,364,475	42.30%	\$98,636,607	298.82%	\$24,732,372	6.71%	\$23,176,809	-79.23%	\$111,586,652	3.20%	\$108,121,884	21.12%	\$89,270,353
Medicaid SB 11-008 Eligible Children Financing and Supplemental Payments	\$22,187,892	0.59%	\$22,057,967	5.57%	\$20,894,525	-1.30%	\$21,169,012	4.18%	\$20,318,806	7.19%	\$18,955,072	91.03%	\$9,922,719	-40.94%	\$16,800,418	103.64%	\$8,250,157
CHP+ Prenatal	\$10,782,198	-31.12%	\$15,653,393	6.83%	\$14,652,682	37.45%	\$10,659,994	-25.16%	\$14,244,375	78.71%	\$7,970,670	-5.12%	\$8,400,884	-28.24%	\$11,706,851	204.23%	\$3,848,028
Medicaid SB 11-250 Eligible Pregnant Adults Services	\$37,562,579	5.27%	\$35,682,517	2.36%	\$34,861,259	-11.25%	\$39,278,953	3955.15%	\$968,619	5.45%	\$918,548	-94.30%	\$16,109,484	-8.74%	\$17,652,473	2.60%	\$17,204,409
Medicaid SB 11-250 Eligible Pregnant Adults Financing and Supplemental Payments	\$8,533,805	0.59%	\$8,483,833	5.31%	\$8,055,882	9.55%	\$7,353,858	-23.16%	\$9,570,107	19.68%	\$7,996,417	119.76%	\$3,638,761	-48.71%	\$7,094,608	82.94%	\$3,878,118
Total Title XXI Services Expenditure	\$449,490,002	7.61%	\$417,691,411	6.72%	\$391,378,907	10.32%	\$354,777,560	45.38%	\$244,031,690	-0.02%	\$244,084,220	-17.07%	\$294,320,542	6.68%	\$275,899,181	10.64%	\$249,375,399
Total Services Expenditure	\$12,582,615,406	7.54%	\$11,700,366,694	5.50%	\$11,090,721,203	13.53%	\$9,769,358,277	194.23%	\$3,320,286,612	16.26%	\$2,855,881,688	-63.58%	\$7,841,203,099	-4.98%	\$8,252,091,906	17.09%	\$7,047,834,370
Footnotes:																	

<sup>(1)</sup> Projections for Public School Health Services are the appropriation without the administrative costs, in FY 2019-20, and the annualization from TA-27 Annualization of FY 2020-21 BA-09 "Public School Health Services" and annualization from FY 2020-21 BA-09 "Public School Health Services Funding Adjustment" without the administrative costs, in FY 2019-20, held constant in FY 2020-

<sup>21. (2)</sup> The Department of Human Services Medicaid Funded services are not forecast in a budget request by the Department. Due to this, the Department has held the FY 2017-18 spending constant in FY 2018-19 and beyond for Child Welfare Services, and the FY 2020-21 appropriation constant for the other services, for the purpose of this exhibit. This does not represent an actual request by the Department.

Notes:

1. FY 2019-20 expenditure shows data as of August 4, 2020.

Exhibit Q - Title XIX and Title XXI Services Per Capita History by Eligibility Category - Delay Adjusted and Excluding Financing

				7	Total Title XIX	X and Title XX	I Services Per C	Capita Costs	- Adjusted for	Payment Dela	ys and Exclud	ling Financi	ng					
Fiscal Year	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	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	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL Title XIX	Title XXI Children	Title XXI Prenatal	TOTAL Title XXI	TOTAL Title XIX and Title XXI
FY 2011-12	\$21,540.31	\$23,516.59	\$20,236.14	8,877.60	\$3,323.24	\$2,423.80	2,185.53	\$17,216.60	\$1,647.61	\$4,817.71	\$8,506.87	\$15,148.44	\$2,420.52	\$5,573.91	\$2,168.46	\$10,373.58	\$2,390.33	\$5,224.91
FY 2012-13	\$22,035.90	\$25,021.30	\$21,679.22	13,687.41	\$3,582.29	\$2,375.14	5,389.53	\$32,188.57	\$1,656.74	\$8,627.95	\$9,204.24	\$30,830.35	\$2,279.31	\$5,882.49	\$1,987.01	\$10,974.94	\$2,186.63	\$5,455.79
% Change from FY 2011-12	2.30%	6.40%	7.13%	0.54	7.80%	-2.01%	1.47	86.96%	0.55%	79.09%	8.20%	103.52%	-5.83%	5.54%	-8.37%	5.80%	-8.52%	4.42%
FY 2013-14	\$22,896.64	\$25,656.67	\$22,839.53	\$13,465.59	\$3,311.41	\$2,621.07	\$4,842.31	\$16,339.65	\$1,984.01	\$7,141.47	\$9,733.31	\$15,522.95	\$2,337.99	\$5,784.93	\$2,519.36	\$12,002.47	\$2,733.75	\$5,491.17
% Change from FY 2012-13	3.91%	2.54%	5.35%	(0.02)	-7.56%	10.35%	(0.10)	-49.24%	19.75%	-17.23%	5.75%	-49.65%	2.57%	-1.66%	26.79%	9.36%	25.02%	0.65%
FY 2014-15	\$24,449.37	\$27,332.93	\$23,296.22	\$9,104.99	\$3,354.74	\$2,915.59	\$4,577.88	\$14,896.29	\$2,093.83	\$7,501.70	\$10,827.83	\$14,894.00	\$2,004.22	\$5,495.39	\$2,082.56	\$8,642.22	\$2,232.96	\$5,210.23
% Change from FY 2013-14	6.78%	6.53%	2.00%	-32.38%	1.31%	11.24%	-5.46%	-8.83%	5.54%	5.04%	11.25%	-4.05%	-14.28%	-5.01%	-17.34%	-28.00%	-18.32%	-5.12%
FY 2015-16	\$25,745.04	\$28,262.25	\$24,356.49	\$8,299.22	\$3,360.09	\$3,163.04	\$4,435.98	\$12,469.29	\$2,173.13	\$6,910.10	\$11,214.80	\$14,863.53	\$2,052.46	\$5,491.98	\$2,014.12	\$12,096.96	\$2,230.74	\$5,218.81
% Change from FY 2014-15	5.30%	3.40%	4.55%	-8.85%	0.16%	8.49%	-3.10%	-16.29%	3.79%	-7.89%	3.57%	-0.20%	2.41%	-0.06%	-3.29%	39.98%	-0.10%	0.16%
FY 2016-17	\$28,266.61	\$27,338.08	\$24,891.68	\$8,207.17	\$2,977.67	\$2,611.12	\$3,982.40	\$16,788.64	\$2,104.11	\$6,135.70	\$10,162.63	\$15,432.19	\$2,212.62	\$5,302.43	\$1,983.84	\$9,448.87	\$2,130.80	\$5,006.25
% Change from FY 2015-16	9.79%	-3.27%	2.20%	-1.11%	-11.38%	-17.45%	-10.23%	34.64%	-3.18%	-11.21%	-9.38%	3.83%	7.80%	-3.45%	-1.50%	-21.89%	-4.48%	-4.07%
FY 2017-18	\$27,085.04	\$27,239.34	\$27,062.95	\$9,564.49	\$3,423.88	\$2,936.75	\$4,371.93	\$19,925.52	\$2,419.57	\$6,753.00	\$12,458.45	\$18,412.00	\$1,594.89	\$5,838.45	\$1,474.45	\$2,894.57	\$1,504.67	\$5,389.48
% Change from FY 2016-17	-4.18%	-0.36%	8.72%	16.54%	14.99%	12.47%	9.78%	18.68%	14.99%	10.06%	22.59%	19.31%	-27.92%	10.11%	-25.68%	-69.37%	-29.38%	7.66%
FY 2018-19	\$26,880.59	\$29,684.92	\$29,147.42	\$10,045.90	\$3,299.30	\$2,889.22	\$4,470.92	\$17,472.42	\$2,519.71	\$6,990.07	\$11,804.40	\$16,132.61	\$1,761.28	\$6,212.98	\$1,426.93	\$4,743.68	\$1,501.51	\$5,712.40
% Change from FY 2017-18	-0.75%	8.98%	7.70%	5.03%	-3.64%	-1.62%	2.26%	-12.31%	4.14%	3.51%	-5.25%	-12.38%	10.43%	6.41%	-3.22%	63.88%	-0.21%	5.99%
FY 2019-20	\$31,746.52	\$32,251.84	\$32,846.64	\$10,087.03	\$3,475.84	\$5,030.79	\$4,967.08	\$19,612.80	\$2,683.35	\$7,363.61	\$12,189.29	\$17,155.39	\$2,862.13	\$7,087.23	\$2,085.61	\$16,036.91	\$2,405.99	\$6,597.70
% Change from FY 2018-19	18.10%	8.65%	12.69%	0.41%	5.35%	74.12%	11.10%	12.25%	6.49%	5.34%	3.26%	6.34%	62.50%	14.07%	46.16%	238.07%	60.24%	15.50%
FY 2020-21 Projection	\$30,980.61	\$32,100.31	\$36,561.12	\$9,848.98	\$3,805.84	\$3,401.37	\$4,955.20	\$24,109.25	\$2,910.00	\$8,473.10	\$13,037.87	\$21,547.14	\$2,760.40	\$7,071.08	\$2,199.63	\$11,392.99	\$2,472.16	\$6,601.56
% Change from FY 2019-20	-2.41%	-0.47%	11.31%	-2.36%	9.49%	-32.39%	-0.24%	22.93%	8.45%	15.07%	6.96%	25.60%	-3.55%	-0.23%	5.47%	-28.96%	2.75%	0.06%
FY 2021-22 Projection	\$32,272.71	\$33,096.76	\$37,439.85	\$10,361.51	\$3,760.98	\$3,309.04	\$4,774.02	\$21,442.38	\$3,113.62	\$9,138.77	\$13,076.55	\$17,061.51	\$3,094.31	\$7,191.65	\$2,298.79	\$11,530.98	\$2,571.82	\$6,724.19
% Change from FY 2020-21	4.17%	3.10%	2.40%	5.20%	-1.18%	-2.71%	-3.66%	-11.06%	7.00%	7.86%	0.30%	-20.82%	12.10%	1.71%	4.51%	1.21%	4.03%	1.86%
FY 2022-23 Projection	\$32,965.10	\$33,781.14	\$38,582.09	\$10,621.50	\$3,758.54	\$3,381.27	\$4,828.37	\$20,290.11	\$3,138.08	\$9,237.88	\$13,080.12	\$17,261.67	\$3,136.22	\$7,126.16	\$2,353.54	\$10,425.87	\$2,584.56	\$6,674.56
% Change from FY 2021-22	2.15%	2.07%	3.05%	2.51%	-0.06%	2.18%	1.14%	-5.37%	0.79%	1.08%	0.03%	1.17%	1.35%	-0.91%	2.38%	-9.58%	0.50%	-0.74%

Exhibit Q - Title XIX and Title XXI Services Per Capita History by Eligibility Category - Delay Adjusted and Excluding Financing

							Total T	itle XIX and	Title XXI Case	eload								
Fiscal Year	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	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL Title XIX	Title XXI Children	Title XXI Prenatal	TOTAL Title XXI	TOTAL Title XIX and Title XXI
FY 2011-12	39,740	8,383	59,434	52.00	93,224	35,461	1,134.00	597	334,633	18,034	7,630	2,770	18,871	619,963	74,266	2,064	76,330	696,293
FY 2012-13	40,827	9,051	61,920	888.00	99,392	41,545	10,634.00	623	359,843	17,777	8,024	2,684	21,206	674,414	86,071	1,955	88,026	762,440
% Change from FY 2011-12	2.74%	7.97%	4.18%	16.08	6.62%	17.16%	8.38	4.36%	7.53%	-1.43%	5.16%	-3.10%	12.37%	8.78%	15.90%	-5.28%	15.32%	9.50%
FY 2013-14	41,836	9,853	64,424	2,560	124,680	47,082	87,243	559	399,032	18,267	13,160	2,481	23,378	834,555	86,899	2,010	88,909	923,464
% Change from FY 2012-13	2.47%	8.86%	4.04%	1.88	25.44%	13.33%	7.20	-10.27%	10.89%	2.76%	64.01%	-7.56%	10.24%	23.75%	0.96%	2.81%	1.00%	21.12%
FY 2014-15	41,817	10,466	66,548	3,627	161,682	71,989	241,392	351	445,723	20,036	14,897	2,722	28,045	1,109,295	103,812	2,436	106,248	1,215,543
% Change from FY 2013-14	-0.05%	6.22%	3.30%	41.68%	29.68%	52.90%	176.69%	-37.21%	11.70%	9.68%	13.20%	9.71%	19.96%	32.92%	19.46%	21.19%	19.50%	31.63%
FY 2015-16	42,403	10,529	68,800	6,217	163,342	86,964	320,374	322	467,193	19,935	14,413	2,649	32,585	1,235,726	110,542	2,427	112,969	1,348,695
% Change from FY 2014-15	1.40%	0.60%	3.38%	71.41%	1.03%	20.80%	32.72%	-8.26%	4.82%	-0.50%	-3.25%	-2.68%	16.19%	11.40%	6.48%	-0.37%	6.33%	10.95%
FY 2016-17	43,941	11,241	67,619	6,251	161,422	101,059	347,848	235	469,297	20,310	13,567	2,640	33,809	1,279,239	129,168	2,594	131,762	1,411,001
% Change from FY 2015-16	3.63%	6.76%	-1.72%	0.55%	-1.18%	16.21%	8.58%	-27.02%	0.45%	1.88%	-5.87%	-0.34%	3.76%	3.52%	16.85%	6.88%	16.64%	4.62%
FY 2017-18	45,907	11,797	67,531	8,175	179,853	74,610	352,607	155	438,772	21,473	10,125	2,809	34,828	1,248,642	141,235	3,071	144,306	1,392,948
% Change from FY 2016-17	4.47%	4.95%	-0.13%	30.78%	11.42%	-26.17%	1.37%	-47.46%	-6.50%	5.73%	-25.37%	6.40%	3.01%	-2.39%	9.34%	18.39%	9.52%	-1.28%
FY 2018-19	47,686	12,721	68,639	8,987	175,827	63,563	330,524	145	420,253	21,815	12,196	2,654	34,687	1,199,697	139,411	3,207	142,618	1,342,315
% Change from FY 2017-18	3.88%	7.83%	1.64%	9.93%	-2.24%	-14.81%	-6.26%	-6.45%	-4.22%	1.59%	20.45%	-5.52%	-0.40%	-3.92%	-1.29%	4.43%	-1.17%	-3.63%
FY 2019-20	47,551	13,029	66,530	10,675	164,467	59,499	322,951	137	407,548	21,320	11,547	2,417	33,441	1,161,112	132,487	3,114	135,601	1,296,713
% Change from FY 2018-19	-0.28%	2.42%	-3.07%	18.78%	-6.46%	-6.39%	-2.29%	-5.52%	-3.02%	-2.27%	-5.32%	-8.93%	-3.59%	-3.22%	-4.97%	-2.90%	-4.92%	-3.40%
FY 2020-21 Projection	48,301	13,435	65,964	14,580	172,515	81,695	381,763	144	438,020	20,887	13,150	3,953	34,990	1,289,397	142,258	4,346	146,604	1,436,001
% Change from FY 2019-20	1.58%	3.12%	-0.85%	36.58%	4.89%	37.30%	18.21%	5.11%	7.48%	-2.03%	13.88%	63.55%	4.63%	11.05%	7.38%	39.56%	8.11%	10.74%
FY 2021-22 Projection	48,558	13,669	69,462	13,742	204,182	80,208	405,854	144	427,055	21,100	14,443	3,483	35,269	1,337,169	146,083	4,452	150,535	1,487,704
% Change from FY 2020-21	0.53%	1.74%	5.30%	-5.75%	18.36%	-1.82%	6.31%	0.00%	-2.50%	1.02%	9.83%	-11.89%	0.80%	3.70%	2.69%	2.44%	2.68%	3.60%
FY 2022-23 Projection	50,169	14,143	71,157	15,305	245,688	83,255	454,361	145	454,905	21,472	16,166	3,611	37,047	1,467,422	157,390	4,637	162,027	1,629,449
% Change from FY 2021-22	3.32%	3.47%	2.44%	11.37%	20.33%	3.80%	11.95%	0.69%	6.52%	1.76%	11.93%	3.66%	5.04%	9.74%	7.74%	4.16%	7.63%	9.53%

Exhibit Q - Title XIX and Title XXI Services Per Capita History by Eligibility Category - Delay Adjusted and Excluding Financing

	Total Title XIX and Title XXI Services Expenditure - Adjusted for Payment Delays and Excluding Financing																	
Fiscal Year	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	59 (AND/AB)	Disabled Buy- In	68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non- Citizens- Emergency Services	Partial Dual Eligibles	TOTAL Title XIX	Title XXI Children	Title XXI Prenatal	TOTAL Title XXI	TOTAL Title XIX and Title XXI
FY 2011-12		\$197,139,587		461,635.00	\$309,805,315	\$85,950,215	2,478,395.00	\$10,278,309	\$551,345,591	\$86,882,670	\$64,907,422		\$45,677,697	\$3,455,614,936	\$161,043,047		\$182,454,123	\$3,638,069,059
			\$1,342,376,999	#######################################	\$356,051,014	\$98,675,225	57,312,239.00	\$20,053,477	\$596,165,567	\$153,379,122	\$73,854,798		\$48,334,979	\$3,967,233,827	\$171,024,110		\$192,480,120	\$4,159,713,947
% Change from FY 2011-12	5.10%	14.88%	11.61%	25.33	14.93%	14.81%	22.12	95.10%	8.13%	76.54%	13.78%	97.20%	5.82%	14.81%	6.20%	0.21%	5.50%	14.34%
FY 2013-14			\$1,471,413,710	\$34,471,902	\$412,866,584	\$123,405,172	\$422,457,338	\$9,133,865	\$791,683,383	\$130,453,143	\$128,090,423		\$54,657,612	\$4,827,844,521	\$218,929,855	\$24,124,955	\$243,054,810	\$5,070,899,331
% Change from FY 2012-13	6.47%	11.63%	9.61%	1.84	15.96%	25.06%	6.37	-54.45%	32.80%	-14.95%	73.44%	-53.46%	13.08%	21.69%	28.01%	12.44%	26.28%	21.91%
		\$286,066,466		\$33,023,800	\$542,400,603		\$1,105,062,500	\$5,228,598	\$933,268,755	\$150,304,134	\$161,302,175		\$56,208,287	\$6,096,013,313	\$216,194,687	\$21,052,437	\$237,247,124	\$6,333,260,437
% Change from FY 2013-14	6.73%	13.16%	5.36%	-4.20%	31.37%	70.08%	161.58%	-42.76%	17.88%	15.22%	25.93%	5.27%	2.84%	26.27%	-1.25%	-12.74%	-2.39%	24.89%
	\$1,091,666,877		\$1,675,726,850	\$51,596,269	\$548,843,701	\$275,070,795	\$1,421,173,260		\$1,015,273,197	\$137,752,768	\$161,638,859		\$66,879,535	\$6,786,583,995	\$222,644,831	\$29,359,324	\$252,004,155	\$7,038,588,150
% Change from FY 2014-15	6.77%	4.02%	8.09%	56.24%	1.19%	31.05%	28.61%	-23.21%	8.79%	-8.35%	0.21%	-2.88%	18.99%	11.33%	2.98%	39.46%	6.22%	11.14%
			\$1,683,150,454	\$51,303,018	\$480,661,423		\$1,385,270,075	\$3,945,330	\$987,452,198	\$124,615,992	\$137,876,417		\$74,806,309	\$6,783,070,091	\$256,248,694	\$24,510,368	\$280,759,062	\$7,063,829,153
% Change from FY 2015-16	13.78%	3.27%	0.44%	-0.57%	-12.42%	-4.07%	-2.53%	-1.74%	-2.74%	-9.54%	-14.70%	3.47%	11.85%	-0.05%	15.09%	-16.52%	11.41%	0.36%
			\$1,827,587,953		\$615,795,903		\$1,541,574,198		\$1,061,641,549	\$145,007,087	\$126,141,820		\$55,546,915	\$7,290,139,042	\$208,243,513	\$8,889,218	\$217,132,731	\$7,507,271,773
% Change from FY 2016-17	0.11%	4.57%	8.58%	52.41%	28.11%	-16.96%	11.28%	-21.72%	7.51%	16.36%	-8.51%	26.95%	-25.75%	7.48%	-18.73%	-63.73%	-22.66%	6.28%
			\$2,000,649,981	\$90,282,509	\$580,106,698		\$1,477,747,107		\$1,058,913,624	\$152,488,363	\$143,966,481		\$61,093,646	\$7,453,695,195	\$198,929,783		\$214,142,777	\$7,667,837,972
% Change from FY 2017-18	3.09%	17.51%	9.47%	15.47%	-5.80%	-16.19%	-4.14%	-17.97%	-0.26%	5.16%	14.13%	-17.21%	9.99%	2.24%	-4.47%	71.14%	-1.38%	2.14%
FY 2019-20	\$1,509,578,845	\$420,209,275	\$2,185,286,925	\$107,679,075	\$571,660,332	\$299,326,766	\$1,604,123,326	\$2,686,954	\$1,093,592,192	\$156,992,167	\$140,749,734	\$41,464,580	\$95,712,526	\$8,229,062,698	\$276,315,743	\$49,938,947	\$326,254,690	\$8,555,317,388
% Change from FY 2018-19	17.77%	11.28%	9.23%	19.27%	-1.46%	62.99%	8.55%	6.06%	3.27%	2.95%	-2.23%	-3.16%	56.67%	10.40%	38.90%	228.27%	52.35%	11.57%
FY 2020-21 Projection	\$1,496,394,327	\$431,267,676	\$2,411,717,612	\$143,598,077	\$656,563,930	\$277,874,958	\$1,891,712,948	\$3,471,732	\$1,274,636,189	\$176,977,690	\$171,448,000	\$85,175,842	\$96,586,301	\$9,117,425,282	\$312,914,559	\$49,513,941	\$362,428,500	\$9,479,853,782
% Change from FY 2019-20	-0.87%	2.63%	10.36%	33.36%	14.85%	-7.17%	17.93%	29.21%	16.55%	12.73%	21.81%	105.42%	0.91%	10.80%	13.25%	-0.85%	11.09%	10.81%
FY 2021-22 Projection	\$1,567,098,467	\$452,399,562	\$2,600,646,878	\$142,387,822	\$767,925,101	\$265,411,431	\$1,937,557,107	\$3,087,703	\$1,329,685,396	\$192,828,074	\$188,864,565	\$59,425,236	\$109,133,081	\$9,616,450,424	\$335,813,701	\$51,335,910	\$387,149,611	\$10,003,600,035
% Change from FY 2020-21	4.72%	4.90%	7.83%	-0.84%	16.96%	-4.49%	2.42%	-11.06%	4.32%	8.96%	10.16%	-30.23%	12.99%	5.47%	7.32%	3.68%	6.82%	5.52%
FY 2022-23 Projection	\$1,653,831,758	\$477,767,538	\$2,745,391,918	\$162,558,782	\$923,426,347	\$281,507,963	\$2,193,819,255	\$2,942,066	\$1,427,528,897	\$198,351,997	\$211,446,640	\$62,324,132	\$116,188,904	\$10,457,086,198	\$370,423,528	\$48,344,777	\$418,768,305	\$10,875,854,503
% Change from FY 2021-22	5.53%	5.61%	5.57%	14.17%	20.25%	6.06%	13.23%	-4.72%	7.36%	2.86%	11.96%	4.88%	6.47%	8.74%	10.31%	-5.83%	8.17%	8.72%

Notes:
1. See Page EQ-1 for a list of services that are included in the calculations for expenditure and per capita costs for Title XIX and Title XXI services.
2. See Narrative for a description of events that alter trends.
3. The expenditure and per capita costs reported here are adjusted for the two-week FY 2009-10 payment delay; that is, the claims which were delayed at the end of FY 2009-10 (and paid in FY 2010-11) are included in the FY 2009-10 totals and excluded from the FY 2010-11 totals.

Exhibit Q - Title XIX and Title XXI Services Per Capita History by Eligibility Category - Delay Adjusted

Total Title XIX and Title XXI Services Per Capita Costs - Adjusted for Payment Delays																		
Fiscal Year	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	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL Title XIX	Title XXI Children	Title XXI Prenatal	TOTAL Title XXI	TOTAL Title XIX and Title XXI
FY 2011-12	\$23,789.05	\$26,915.04	\$23,416.32	13,906.29	\$4,762.29	\$3,394.99	3,530.00	\$17,232.73	\$2,120.64	\$5,453.23	\$12,919.90	\$28,288.07	\$2,423.84	\$6,730.65	\$2,168.46	\$10,373.58		\$6,254.85
FY 2012-13	\$24,188.28	\$28,390.66	\$24,606.03	20,702.93	\$4,987.05	\$3,256.14	8,246.05	\$32,196.66	\$2,149.29	\$9,280.87	\$13,605.70	\$43,953.29	\$2,282.34	\$7,027.02	\$1,987.01	\$10,974.94	\$2,186.63	\$6,468.18
% Change from FY 2011-12	1.68%	5.48%	5.08%	0.49	4.72%	-4.09%	1.34	86.83%	1.35%	70.19%	5.31%	55.38%	-5.84%	4.40%	-8.37%	5.80%		3.41%
FY 2013-14	\$24,920.85	\$28,075.44	\$24,903.65	\$17,555.37	\$4,116.51	\$3,296.76	\$6,200.46	\$16,347.85	\$2,340.02	\$7,637.65	\$13,142.81	\$24,604.83	\$2,344.05	\$6,649.25	\$2,519.36	\$12,002.47	\$2,733.75	\$6,272.27
% Change from FY 2012-13	3.03%	-1.11%	1.21%	(0.15)	-17.46%	1.25%	(0.25)	-49.23%	8.87%	-17.71%	-3.40%	-44.02%	2.70%	-5.38%	26.79%	9.36%	25.02%	-3.03%
FY 2014-15	\$26,458.27	\$29,420.08	\$24,655.58	\$10,333.92	\$3,859.53	\$3,307.18	\$5,447.92	\$16,278.43	\$2,363.42	\$7,900.59	\$13,307.26	\$20,860.38	\$2,005.31	\$6,128.63	\$2,162.03	\$10,234.22	\$2,347.11	\$5,798.10
% Change from FY 2013-14	6.17%	4.79%	-1.00%	-41.14%	-6.24%	0.32%	-12.14%	-0.42%	1.00%	3.44%	1.25%	-15.22%	-14.45%	-7.83%	-14.18%	-14.73%	-14.14%	-7.56%
FY 2015-16	\$27,992.67	\$31,071.22	\$26,518.81	\$9,958.27	\$4,187.90	\$3,801.46	\$5,712.02	\$13,363.23	\$2,602.94	\$7,531.86	\$15,736.78	\$25,218.92		\$6,454.66	\$2,166.10	\$15,020.16	\$2,442.26	\$6,118.58
% Change from FY 2014-15	5.80%	5.61%	7.56%	-3.64%	8.51%	14.95%	4.85%	-17.91%	10.13%	-4.67%	18.26%	20.89%	2.36%	5.32%	0.19%	46.76%		5.53%
FY 2016-17	\$30,256.56	\$29,310.77	\$26,318.50	\$9,202.56	\$3,444.03	\$3,037.63	\$4,696.53	\$18,569.73	\$2,373.01	\$6,538.89	\$12,547.63	\$22,084.81	\$2,212.05	\$5,899.51	\$2,060.66	\$10,851.63	\$2,233.73	\$5,557.19
% Change from FY 2015-16	8.09%	-5.67%	-0.76%	-7.59%	-17.76%	-20.09%	-17.78%	38.96%	-8.83%	-13.18%	-20.27%	-12.43%	7.76%	-8.60%	-4.87%	-27.75%	-8.54%	-9.18%
FY 2017-18	\$29,187.82	\$29,897.39	\$29,224.75	\$10,841.45	\$4,153.87	\$3,616.85	\$5,414.50	\$26,810.55	\$2,889.97	\$7,555.13	\$16,687.08	\$29,567.94	\$1,593.49	\$6,745.65	\$1,608.66	\$5,498.42	\$1,691.44	\$6,222.04
% Change from FY 2016-17	-3.53%	2.00%	11.04%	17.81%	20.61%	19.07%	15.29%	44.38%	21.78%	15.54%	32.99%	33.88%	-27.96%	14.34%	-21.93%	-49.33%	-24.28%	11.96%
FY 2018-19	\$29,113.84	\$33,271.49	\$32,003.58	\$12,322.77	\$4,220.22	\$3,722.25	\$5,885.03	\$25,691.28	\$3,141.80	\$8,008.29	\$16,731.59		\$1,760.72	\$7,403.33	\$1,572.68	\$7,727.81	\$1,711.09	\$6,798.54
% Change from FY 2017-18	-0.25%	11.29%	9.51%	13.66%	1.60%	2.91%	8.69%	-4.17%	8.71%	6.00%	0.27%	-4.35%	10.49%	9.75%	-2.24%	40.55%	1.16%	9.27%
FY 2019-20	\$34,344.33	\$35,283.77	\$35,241.21	\$11,763.92	\$4,318.00	\$5,786.02	\$6,314.47	\$26,349.45	\$3,269.10	\$7,992.93	\$16,897.40	\$25,176.41	\$2,861.00	\$8,194.45	\$2,245.39	\$18,398.46		\$7,611.13
% Change from FY 2018-19	17.97%	6.05%	10.12%	-4.54%	2.32%	55.44%	7.30%	2.56%	4.05%	-0.19%	0.99%	-10.98%	62.49%	10.69%	42.77%	138.08%	52.90%	11.95%
FY 2020-21 Projection	\$35,206.50	\$35,503.85	\$39,970.80	\$10,728.99	\$4,769.74	\$4,235.00	\$6,245.32	\$27,028.29	\$3,466.88	\$9,302.47	\$18,709.90	\$29,430.68	\$2,760.40	\$8,297.94	\$2,346.50	\$13,246.62	\$2,669.63	\$7,723.34
% Change from FY 2019-20	2.51%	0.62%	13.42%	-8.80%	10.46%	-26.81%	-1.10%	2.58%	6.05%	16.38%	10.73%	16.90%	-3.52%	1.26%	4.50%	-28.00%	2.04%	1.47%
FY 2021-22 Projection	\$36,693.02	\$36,622.12	\$40,852.34	\$11,349.29	\$4,618.58	\$4,203.88	\$6,052.49	\$24,977.31	\$3,715.16	\$10,007.26	\$18,515.88	\$26,463.63	\$3,094.31	\$8,437.73	\$2,449.78	\$13,436.60	\$2,774.71	\$7,864.71
% Change from FY 2020-21	4.22%	3.15%	2.21%	5.78%	-3.17%	-0.73%	-3.09%	-7.59%	7.16%	7.58%	-1.04%	-10.08%	12.10%	1.68%	4.40%	1.43%	3.94%	1.83%
FY 2022-23 Projection	\$37,268.65	\$37,208.41	\$41,932.90	\$11,513.65	\$4,475.45	\$4,248.44	\$5,977.07	\$23,821.34	\$3,706.12	\$10,096.37	\$17,968.49	\$26,385.07	\$3,136.22	\$8,268.33	\$2,494.51	\$12,266.25	\$2,774.17	\$7,722.01
% Change from FY 2021-22	1.57%	1.60%	2.65%	1.45%	-3.10%	1.06%	-1.25%	-4.63%	-0.24%	0.89%	-2.96%	-0.30%	1.35%	-2.01%	1.83%	-8.71%	-0.02%	-1.81%

Exhibit Q - Title XIX and Title XXI Services Per Capita History by Eligibility Category - Delay Adjusted

	Total Title XIX and Title XXI Caseload																	
Fiscal Year	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	Eligible Children (AFDC-C/BC)	Foster Care	MAGI Pregnant Adults	Non-Citizens- Emergency Services	Partial Dual Eligibles	TOTAL Title XIX	Title XXI Children	Title XXI Prenatal	TOTAL Title XXI	TOTAL Title XIX and Title XXI
FY 2011-12	39,740	8,383	59,434	52.00	93,224	35,461	1,134.00	597	334,633	18,034	7,630	2,770	18,871	619,963	74,266	2,064	76,330	696,293
FY 2012-13	40,827	9,051	61,920	888.00	99,392	41,545	10,634.00	623	359,843	17,777	8,024	2,684	21,206	674,414	86,071	1,955	88,026	762,440
% Change from FY 2011-12	2.74%	7.97%	4.18%	16.08	6.62%	17.16%	8.38	4.36%	7.53%	-1.43%	5.16%	-3.10%	12.37%	8.78%	15.90%	-5.28%	15.32%	9.50%
FY 2013-14	41,836	9,853	64,424	2,560	124,680	47,082	87,243	559	399,032	18,267	13,160	2,481	23,378	834,555	86,899	2,010	88,909	923,464
% Change from FY 2012-13	2.47%	8.86%	4.04%	1.88	25.44%	13.33%	7.20	-10.27%	10.89%	2.76%	64.01%	-7.56%	10.24%	23.75%	0.96%	2.81%	1.00%	21.12%
FY 2014-15	41,817	10,466	66,548	3,627	161,682	71,989	241,392	351	445,723	20,036	14,897	2,722	28,045	1,109,295	103,812	2,436	106,248	1,215,543
% Change from FY 2013-14	-0.05%	6.22%	3.30%	41.68%	29.68%	52.90%	176.69%	-37.21%	11.70%	9.68%	13.20%	9.71%	19.96%	32.92%	19.46%	21.19%	19.50%	31.63%
FY 2015-16	42,403	10,529	68,800	6,217	163,342	86,964	320,374	322	467,193	19,935	14,413	2,649	32,585	1,235,726	110,542	2,427	112,969	1,348,695
% Change from FY 2014-15	1.40%	0.60%	3.38%	71.41%	1.03%	20.80%	32.72%	-8.26%	4.82%	-0.50%	-3.25%	-2.68%	16.19%	11.40%	6.48%	-0.37%	6.33%	10.95%
FY 2016-17	43,941	11,241	67,619	6,251	161,422	101,059	347,848	235	469,297	20,310	13,567	2,640	33,809	1,279,239	129,168	2,594	131,762	1,411,001
% Change from FY 2015-16	3.63%	6.76%	-1.72%	0.55%	-1.18%	16.21%	8.58%	-27.02%	0.45%	1.88%	-5.87%	-0.34%	3.76%	3.52%	16.85%	6.88%	16.64%	4.62%
FY 2017-18	45,907	11,797	67,531	8,175	179,853	74,610	352,607	155	438,772	21,473	10,125	2,809	34,828	1,248,642	141,235	3,071	144,306	1,392,948
% Change from FY 2016-17	4.47%	4.95%	-0.13%	30.78%	11.42%	-26.17%	1.37%	-47.46%	-6.50%	5.73%	-25.37%	6.40%	3.01%	-2.39%	9.34%	18.39%	9.52%	-1.28%
FY 2018-19	47,686	12,721	68,639	8,987	175,827	63,563	330,524	145	420,253	21,815	12,196	2,654	34,687	1,199,697	139,411	3,207	142,618	1,342,315
% Change from FY 2017-18	3.88%	7.83%	1.64%	9.93%	-2.24%	-14.81%	-6.26%	-6.45%	-4.22%	1.59%	20.45%	-5.52%	-0.40%	-3.92%	-1.29%	4.43%	-1.17%	-3.63%
FY 2019-20	47,551	13,029	66,530	10,675	164,467	59,499	322,951	137	407,548	21,320	11,547	2,417	33,441	1,161,112	132,487	3,114	135,601	1,296,713
% Change from FY 2018-19	-0.28%	2.42%	-3.07%	18.78%	-6.46%	-6.39%	-2.29%	-5.52%	-3.02%	-2.27%	-5.32%	-8.93%	-3.59%	-3.22%	-4.97%	-2.90%	-4.92%	-3.40%
FY 2020-21 Projection	48,301	13,435	65,964	14,580	172,515	81,695	381,763	144	438,020	20,887	13,150	3,953	34,990	1,289,397	142,258	4,346	146,604	1,436,001
% Change from FY 2019-20	1.58%	3.12%	-0.85%	36.58%	4.89%	37.30%	18.21%	5.11%	7.48%	-2.03%	13.88%	63.55%	4.63%	11.05%	7.38%	39.56%	8.11%	10.74%
FY 2021-22 Projection	48,558	13,669	69,462	13,742	204,182	80,208	405,854	144	427,055	21,100	14,443	3,483	35,269	1,337,169	146,083	4,452	150,535	1,487,704
% Change from FY 2020-21	0.53%	1.74%	5.30%	-5.75%	18.36%	-1.82%	6.31%	0.00%	-2.50%	1.02%	9.83%	-11.89%	0.80%	3.70%	2.69%	2.44%	2.68%	3.60%
FY 2022-23 Projection	50,169	14,143	71,157	15,305	245,688	83,255	454,361	145	454,905	21,472	16,166	3,611	37,047	1,467,422	157,390	4,637	162,027	1,629,449
% Change from FY 2021-22	3.32%	3.47%	2.44%	11.37%	20.33%	3.80%	11.95%	0.69%	6.52%	1.76%	11.93%	3.66%	5.04%	9.74%	7.74%	4.16%	7.63%	9.53%

#### Total Title XIX and Title XXI Services Expenditure - Adjusted for Payment Delays Disabled Disabled TOTAL Breast & MAGI Parents Parents/ Eligible MAGI Non-Citizens Adults 65 and Older Individuals to Partial Dual TOTAL Title XXI Title XXI TOTAL Title XIX Adults 60 to Disabled Buy Cervical Fiscal Year Caretakers to Caretakers MAGI Adults Children Foster Care Pregnant Emergency (OAP-A) 64 59 In Eligibles Title XIX Children Title XXI Cancer Prenatal and 68% FPL 69% to 133% AFDC-C/BC Adults Services (OAP-B) (AND/AB) Title XXI Program FPL FY 2011-12 \$945,376,812 \$225,628,769 \$1,391,725,275 \$443,960,028 \$120,389,845 4,003,017.00 \$10,287,938 \$709,637,322 \$98,343,622 \$98,578,844 \$78,357,967 \$45,740,369 \$161,043,047 \$182,454,123 \$4,355,207,059 \$164,985,953 \$109,172,128 FY 2012-13 \$987,534,993 \$256,963,850 \$1,523,605,290 ########### \$495,672,820 \$135,276,443 87,688,473.00 \$20,058,517 \$773,408,540 \$117,970,62 \$48,399,279 \$4,739,121,115 \$171,024,110 \$21,456,01 \$192,480,120 \$4,931,601,23 % Change from FY 2011-1: 4.46% 13.89% 9.48% 24.42 11.65% 20.91 94.979 8.999 67.76% 50.55 5.819 13.5 6.20% 0.2 5.50% 13.23 FY 2013-14 \$1,042,588,676 \$276,627,306 \$1,604,392,909 \$44,941,742 \$513,246,177 \$155,218,145 \$540,946,583 \$9 138 450 \$933,743,934 \$139,516,934 \$172,959,379 \$61,044,575 \$54,799,128 \$5,549,163,940 \$218,929,855 \$24,124,955 \$243,054,810 \$5,792,218,750 % Change from FY 2012-13 5 57% 7.65% 5.30% 1.44 3 55% 14.74% 5 17 -54 44% 20.73% -15.44% 58.43% -48.25° 17.09% 28.019 12.44 26.28% 17.459 FY 2014-15 \$1,106,405,473 \$307,910,514 \$1,640,779,759 \$37,481,140 \$624.016.289 \$238.080.635 \$1,315,085,422 \$5,713,729 \$1,053,430,810 \$158,296,128 \$198,238,312 \$56,781,957 \$56,238,802 \$6,798,458,970 \$224,444,844 \$24,930,555 \$249,375,399 \$7,047,834,369 % Change from FY 2013-6.12% -16.609 21.58% 53.389 143.119 -37.489 2.63% 3.349 2.60% 21.68% FY 2015-16 \$1,186,973,385 327,148,840 \$1,824,494,244 \$61,910,568 \$684,060,193 \$330,589,855 \$1,829,982,697 \$4,302,959 \$ \$150,147,700 \$226,814,149 \$66,804,909 \$66,886,539 \$7,976,192,728 \$239,445,249 \$36,453,93 \$275,899,181 \$8,252,091,909 % Change from FY 2014-15 7 28% 6.259 11.20% 65.189 0.620 38.86% 39.15% -24.69% 15.44% 14.41% 17 650 6.68% 46.2 10.64% 17.09% \$1,329,503,524 \$555,941,417 \$7,546,882,55 \$7.841.203.099 FY 2016-17 329.482.400 \$1,779,630,569 \$57,525,218 \$306,979,455 \$1,633,680,166 \$4.363.886 \$1.113.646.473 \$132.804.778 \$170.233.663 \$58,303,900 \$74.787.108 \$266.171.413 \$28.149.129 \$294,320,542 % Change from FY 2015-16 12.01% 0.719 -2 46% -7 08° -18 73% -7 14% -10 73% 1 42% -8.429 -11 55% -24.95% 11.81% -5 38% 11 16% -22 78 6.68% -4 98% FY 2017-18 \$1,339,925,376 \$352,699,458 \$1,973,576,508 \$88,628,882 \$747,086,761 \$269,852,885 \$1,909,192,325 \$4,155,635 \$1,268,037,027 \$162,231,372 \$168,956,663 \$83,056,335 \$55,498,212 \$8,422,897,439 \$227,198,585 \$16,885,635 \$244,084,220 \$8,666,981,659 % Change from FY 2016-17 0.78% 7.05% 10.90% 54.079 34 38% -12 09% 16.869 -4 779 13.869 22 16% 42 459 -25 790 11.61% -14 64% -40.01 -17.079 10.539 \$1,388,322,811 \$8,881,749,379 FY 2018-19 \$423,246,636 \$2,196,693,713 \$110,744,744 \$742,029,343 \$236,597,238 \$1,945,144,095 \$3,725,235 \$1,320,348,820 \$174,700,932 \$204,058,463 \$75,063,323 \$61,074,026 \$219,248,589 \$24,783,101 \$244,031,690 \$9,125,781,069 % Change from FY 2017-18 3.61% 20.00% 11.319 24.95 -0.68% 1 88% -10.36% 4.139 7.60% 20.78% -0.62 5.45% -3 50% 46.7 -0.029 5.299 FY 2019-20 \$1,633,107,438 \$459,712,224 2.344.597.842 \$125,579,827 \$710,168,316 \$344,262,205 \$2,039,264,090 \$3,609,875 332,316,963 \$170,409,302 \$195,114,328 \$60.851.391 \$95,674,783 \$9.514.668.585 \$297,484,755 \$57,292,805 \$354,777,560 \$9.869.446.145 % Change from FY 2018-19 17.63% 8.62% 6.73% 13.40% -4 29% 45 51% 4 84% -3 10% 0.91% -2 46% -4 38% -18.93% 56.65% 7 1 3% 35.68% 131.189 45 38% 8 159 FY 2020-21 Projection \$1,700,509,041 \$476,994,167 \$2,636,634,086 \$156,428,695 \$822,852,125 \$345,978,019 \$2,384,231,213 \$3,892,074 \$1,518,561,143 \$194,300,713 \$246,035,228 \$116,339,491 \$96,586,301 \$10,699,342,296 \$333,809,084 \$57,569,823 \$391,378,907 \$11,090,721,203 % Change from FY 2019-20 4.13% 12.46% 24.57 15.87% 0.50% 16.92% 7.82% 13.98% 14.02% 26.10% 91.19% 12.45% 0.489 10.329 12.379 \$1,781,739,449 \$2,837,685,180 \$155,961,955 \$943,031,420 \$2,456,428,352 \$3,596,733 \$211,153,154 \$267,424,861 \$92,172,833 \$109,133,081 \$11,282,675,283 \$59,819,743 \$11,700,366,694 FY 2021-22 Projection 4.959 -0.30 -2.54% 4.48% 8.69% 5.45% 5.50% \$1,869,737,010 FY 2022-23 Projection \$526,239,548 \$2,983,826,416 \$176,212,869 \$1,099,564,072 \$353,703,949 \$2,715,746,740 \$3,454,094 \$1,685,932,498 \$216,785,015 \$290,469,670 \$95,264,617 \$116,188,905 \$12,133,125,404 \$392,611,420 \$56,878,582 \$449,490,002 \$12,582,615,406 % Change from FY 202

#### Notes:

<sup>1.</sup> See Page EQ-1 for a list of services that are included in the calculations for expenditure and per capita costs for Title XIX and Title XXI services.

<sup>2.</sup> See Narrative for a description of events that alter trends.

<sup>3.</sup> The expenditure and per capita costs reported here are adjusted for the two-week FY 2009-10 payment delay; that is, the claims which were delayed at the end of FY 2009-10 (and paid in FY 2010-11) are included in the FY 2009-10 totals and excluded from the FY 2010-11 totals.

Exhibit R - Estimate of Federal Medicaid Assistance Percentage (FMAP)

								FMA	P Forecast										$\overline{}$
	Un	ited States			Colorado		Colorado 3-vear	U.S. 3-year					m	m		FFY	FFY	SFY	SFY
Calendar Year	Personal Income	Population	Per Capita Personal Income	Personal Income	Population	Per Capita Personal Income	Average Per Capita	Average Per Capita	(Colorado Average Per Capita) <sup>2</sup>	(U.S. Average Per Capita) <sup>2</sup>	CO APC <sup>2</sup> / U.S. APC <sup>2</sup>	*0.45	FMAP <sup>(1)</sup> Calculation	eFMAP <sup>(2)</sup> Calculation	FFY/ SFY	FMAP <sup>(3)</sup>	eFMAP <sup>(3)</sup>	FMAP <sup>(4)</sup>	eFMAP <sup>(4)</sup>
2000	\$8,652,600,000,000	282,162,411	\$30,665.32	\$147,234,259,000	4,338,831	\$33,934.08	-		-	-	-	-	-	-	2000-01	50.00%	65.00%	50.00%	65.00%
2001	\$9,005,600,000,000	284,968,955	\$31,602.04	\$154,409,814,000	4,444,513	\$34,741.67	-	-		-	-	-	-	-	2001-02	50.00%	65.00%	50.00%	65.00%
2002	\$9,159,001,000,000	287,625,193	\$31,843.53	\$154,765,500,000	4,504,709		\$34,344.04	\$31,370.30	\$1,179,513,083.52	\$984,095,722.09	119.86%	53.94%	50.00%	65.00%	2002-03	50.00%	65.00%	50.00%	65.00%
2003	\$9,487,500,000,000	290,107,933	\$32,703.35	\$157,543,201,000	4,555,084		\$34,561.43	\$32,049.64	\$1,194,492,443.64	\$1,027,179,424.13	116.29%	52.33%	50.00%	65.00%	2003-04	50.00%	65.00%	50.00%	65.00%
2004	\$10,035,100,000,000	292,805,298	\$34,272.26	\$163,427,008,000	4,608,811	\$35,459.69	\$34,800.77	\$32,939.71	\$1,211,093,592.59	\$1,085,024,494.88		50.23%	50.00%	65.00%	2004-05	50.00%	65.00%	50.00%	65.00%
2005	\$10,598,200,000,000	295,516,599	\$35,863.30	\$174,771,645,000	4,662,534		\$35,843.39	\$34,279.64	\$1,284,748,606.69	\$1,175,093,718.53	109.33%	49.20%	50.80%	65.56%	2005-06	50.00%	65.00%	50.00%	65.00%
2006	\$11,381,700,000,000	298,379,912	\$38,144.99	\$188,803,293,000	4,745,660	\$39,784.41	\$37,576.12	\$36,093.52	\$1,411,964,794.25	\$1,302,742,185.99	108.38%	48.77%	51.23%	65.86%	2006-07	50.00%	65.00%	50.00%	65.00%
2007	\$12,007,841,900,000	301,231,207	\$39,862.54	\$201,227,297,000	4,821,784	\$41,732.96	\$39,667.21	\$37,956.94	\$1,573,487,549.18	\$1,440,729,294.16	109.21%	49.14%	50.86%	65.60%	2007-08	50.00%	65.00%	50.00%	65.00%
2008	\$12,442,000,000,000	304,093,966	\$40,914.98	\$207,772,729,000	4,901,938	\$42,385.83	\$41,301.07	\$39,640.84	\$1,705,778,383.14	\$1,571,396,195.91	108.55%	48.85%	51.15%	65.81%	2008-09	50.00%	65.00%	50.00%	65.00%
2009	\$12,591,000,000,000	306,771,529	\$41,043.57	\$198,147,196,000	4,976,853		\$41,310.85	\$40,607.03	\$1,706,586,327.72	\$1,648,930,885.42	103.50%	46.58%	53.42%	67.39%	2009-10	50.00%	65.00%	50.00%	65.00%
2010	\$12,551,600,000,000	309,348,193	\$40,574.34	\$204,691,900,000	5,049,935		\$40,911.05	\$40,844.30	\$1,673,714,012.10	\$1,668,256,842.49		45.15%	54.85%	68.40%	2010-11	50.00%	65.00%	50.00%	65.00%
2011	\$13,263,000,000,000	311,663,358	\$42,555.53	\$222,571,956,000	5,119,538	\$43,475.01	\$41,274.11	\$41,391.15	\$1,703,552,156.29	\$1,713,227,298.32	99.44%	44.75%	55.25%	68.68%	2011-12	50.00%	65.00%	50.00%	65.00%
2012	\$14,010,100,000,000	313,998,379	\$44,618.38	\$236,687,388,000	5,191,086		\$43,201.18	\$42,582.75	\$1,866,341,953.39	\$1,813,290,597.56	102.93%	46.32%	53.68%	67.58%	2012-13	50.00%	65.00%	50.00%	65.00%
2013	\$14,181,100,000,000	316,204,908	\$44,847.82	\$248,958,974,000	5,268,413	\$47,255.02	\$45,441.67	\$44,007.24	\$2,064,945,372.39	\$1,936,637,172.42		47.98%	52.02%	66.41%	2013-14	50.00%	65.00%	50.00%	65.00%
2014	\$14,991,800,000,000	318,563,456	\$47,060.64	\$271,101,038,000	5,350,118		\$47,840.65	\$45,508.95	\$2,288,727,792.42	\$2,071,064,530.10	110.51%	49.73%	50.27%	65.19%	2014-15	51.01%	65.71%	50.76%	65.53%
2015	\$15,719,500,000,000	320,896,618	\$48,986.18	\$284,142,915,000	5,448,055		\$50,027.31	\$46,964.88	\$2,502,731,745.84	\$2,205,699,953.41	113.47%	51.06%	50.00%	65.00%	2015-16	50.72%	65.50%	50.79%	65.55%
2016	\$16,125,100,000,000	323,127,513	\$49,903.21	\$289,620,855,000	5,538,180	\$52,295.31	\$51,707.40	\$48,650.01	\$2,673,655,214.76	\$2,366,823,473.00	112.96%	50.83%	50.00%	65.00%	2016-17	50.02%	65.01%	50.20%	65.13%
2017	\$16,830,900,000,000	325,511,000	\$51,706.09	\$306,411,131,000	5,609,445		\$53,024.79	\$50,198.49	\$2,811,628,354.54	\$2,519,888,398.28	111.58%	50.21%	50.00%	65.00%	2017-18	50.00%	65.00%	50.00%	65.00%
2018	\$17,588,000,000,000	327,892,000	\$53,639.61	\$324,183,000,000	5,689,227		\$54,633.78	\$51,749.64	\$2,984,849,917.09	\$2,678,025,240.13	111.46%	50.16%	50.00%	65.00%	2018-19	50.00%	65.00%	50.00%	65.00%
2019	\$18,325,000,000,000	330,269,000	\$55,485.07	\$342,546,000,000	5,769,985	\$59,366.88	\$56,990.97	\$53,610.26	\$3,247,970,661.54	\$2,874,059,977.27	113.01%	50.85%	50.00%	65.00%	2019-20	54.65%	84.51%	53.10%	67.17%
2020	\$18,850,000,000,000	332,639,000	\$56,668.04	\$360,353,000,000	5,816,300	\$61,955.71	\$59,434.83	\$55,264.24	\$3,532,499,017.13	\$3,054,136,222.78	115.66%	52.05%	50.00%	65.00%	2020-21	53.10%	67.17%	54.65%	68.26%
2021	\$18,680,000,000,000	334,998,000	\$55,761.53	\$359,632,000,000	5,916,483	\$60,784.76	\$60,702.45	\$55,971.55	\$3,684,787,436.00	\$3,132,814,409.40	117.62%	52.93%	50.00%	65.00%	2021-22	50.00%	65.00%	50.00%	65.00%
2022	\$19,689,000,000,000	337,342,000	\$58,365,10	\$379,052,000,000	5,996,435	\$63.212.89	\$61,984,45	\$56,931,56	\$3.842.072.041.80	\$3,241,202,524,03	118.54%	53.34%	50.00%	65.00%	2022-23	50.00%	65.00%	50.00%	65.00%

2022 \$19,689,000,000,000 337,342,000 \$58,365.10 \$5379,052,000,000 \$5,996,435 \$63,212.89 \$61,984.45 \$56,931.50 \$33,842,072,041.80 \$53,241,202,524.03 \$18,54% \$50,00% \$65,00% \$2022.23 \$50,00% \$65,00% \$

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for Th	ne FY 2021-22 Budget Cycle	
Request Title			
	R-02 Behavioral Health Programs		
Dept. Approval By:	BC		Supplemental FY 2020-21
OSPB Approval By:	askey Cano		Budget Amendment FY 2021-22
		<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$959,410,239	\$0	\$1,089,791,808	(\$55,261,248)	\$52,147,773
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$249,860,102	\$0	\$275,467,360	(\$18,371,642)	\$6,993,538
Impacted by Change Request	CF	\$54,860,438	\$0	\$63,487,433	\$8,251,231	\$16,071,254
rtoquest	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$654,689,699	\$0	\$750,837,015	(\$45,140,837)	\$29,082,981

		FY 202	20-21	FY 202	21-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$945,357,559	\$0	\$1,075,758,611	(\$56,122,803)	\$49,801,988
03. Behavioral Health Community Programs,	FTE	0.0	0.0	0.0	0.0	0.0
(A) Behavioral Health	GF	\$246,481,122	\$0	\$272,092,533	(\$18,013,912)	\$7,051,542
Community Programs, (1) Behavioral Health	CF	\$54,045,515	\$0	\$62,673,885	\$8,080,849	\$15,801,224
Community Programs -	RF	\$0	\$0	\$0	\$0	\$0
Behavioral Health Capitation Payments	FF	\$644,830,922	\$0	\$740,992,193	(\$46,189,740)	\$26,949,222
	Total	\$14,052,680	\$0	\$14,033,197	\$861,555	\$2,345,785
03. Behavioral Health	FTE	0.0	0.0	0.0	0.0	0.0
Community Programs, (A) Behavioral Health	GF	\$3,378,980	\$0	\$3,374,827	(\$357,730)	(\$58,004)
Community Programs, (1) Behavioral Health	CF	\$814,923	\$0	\$813,548	\$170,382	\$270,030
Community Programs -	RF	\$0	\$0	\$0	\$0	\$0
Behavioral Health Fee- for-Service Payments	FF	\$9,858,777	\$0	\$9,844,822	\$1,048,903	\$2,133,759

		Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact



# Department of Health Care Policy and Financing Behavioral Health Community Programs

FY 2020-21 and FY 2021-22 Budget Request

November 2020

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#### BEHAVIORAL HEALTH COMMUNITY PROGRAMS

The following is a description of the budget projection for the Behavioral Health Community Programs.

# History and Background Information

In 1993, under Section 1915 (b) and Section 1902 (a) of Title XIX of the Social Security Act, the Centers for Medicare and Medicaid Services (CMS) granted the State waivers that allowed the State to implement a pilot managed care behavioral health program. The pilot program operated until 1995. In 1995, SB 95-078 directed the Department and the Department of Human Services to implement a statewide capitated mental health managed care program. In 1997, SB 97-005 authorized the Department to provide behavioral health services through a managed care program.

The structure of managed care has changed over time. In 1995, implementation of the Behavioral Health Capitation Program in 51 counties of the State was complete, with the remaining 12 counties added in 1998. A 64th county was added when Broomfield became a county in November 2001. Through a competitive bid process, eight behavioral health assessment and service agencies were awarded contracts to be service providers in the program. Again, through competitive procurement, the Department reduced the number of regions from eight to five and awarded managed care contracts to five behavioral health organizations effective January 1, 2005. The five behavioral health organizations were again procured through a competitive bid process effective July 1, 2009. As a result of the reprocurement, the same five organizations won their respective contract bids, leaving the program unchanged. In July 2014, the Department went through another competitive bid process to reprocure the contractors of the five behavioral health regions. As a result of this reprocurement, four of the five prior behavioral health organizations won their respective rebids. The only change was in the northeast region. Access Behavioral Care Northeast began providing services in this region effective July 1, 2014. The Department implemented the Accountable Care Collaborative Phase II, starting July 1, 2018, through HB 17-1353 "Implement Medicaid Delivery and Payment Initiatives". The program integrated behavioral health services and physical health services under one administrative entity called a regional accountable entity. The Department underwent a competitive bidding process to procure contractors for the seven regional accountable entities to be service providers for physical and behavioral health. These changes are effective July 1, 2018.

Each regional accountable entity is responsible for providing or arranging medically necessary behavioral health services to Medicaideligible adults 65 and older, individuals with disabilities through 64, MAGI parents and caretakers, MAGI adults, eligible children, foster care children, and breast and cervical cancer program adults enrolled with a behavioral health organization. Services provided by those organizations include, but are not limited to: inpatient hospitalization, psychiatric care, rehabilitation, and outpatient care; clinic services, case management, medication management, physician care, substance use disorder; and non-hospital residential care as it pertains to behavioral health. The capitation program also includes alternatives to institutionalization. The Department is required to make monthly capitation payments to contracted regional accountable entities for services for each eligible Medicaid recipient. Payments vary across each regional accountable entity, as well as each eligibility category.

Since the inception of the Behavioral Health Community Programs, the Department has been responsible for oversight and contracting with the managed care organizations. The budget projections, day-to-day operations, and administration of the program were the responsibility of the Department of Human Services. In 2004, the administration and programmatic duties were transferred from the Department of Human Services to the Department. These duties include budget projections and accounting for the program, site reviews of the institutions, and contract negotiations. The transfer resulted in a new Long Bill group for the Department in the FY 2004-05 Long Bill (HB 04-1422). Subsequently, SB 05-112 transferred: (1) the Mental Health Administration appropriation for Personal Services, Operating Expenses, and External Quality Review Organization Mental Health from Behavioral Health Community Programs – Program Administration to the Executive Director's Office Long Bill group; (2) Single Entry Point case management services from Medicaid Mental Health Fee-for-Service Payments to Medical Services Premiums; and (3) services for the developmentally disabled from the Colorado Department of Human Services for People with Disabilities – Community Services and Regional Centers to Non-Emergency Medical Transportation, Medical Services Premiums, and Mental Health Fee-for-Service appropriations within the Department. As a result, only the Behavioral Health Community Programs expenditures are addressed in this section.

The recent history of the Behavioral Health Community Programs is summarized as follows:

- HB 17-1353, "Implement Medicaid Delivery & Payment Initiatives", authorized the Department to implement performance-based payments for medical providers. The payments are designed to incentivize BHOs to achieve performance-based goals regarding improving health outcomes, coordinating care, and containing costs. The bill also implemented the integration of behavioral health and physical health services under the new Regional Accountability Entity (RAE). Effective July 1, 2018, the Department began working with the new RAEs instead of the BHOs. Although care will be integrated between behavioral health and physical health services under one entity, the Department still pays actuarially sound capitation rates for behavioral health services. Therefore, there will be no changes to the forecasting methodology.
- HB 18-1136, "Substance Use Disorder Treatment", authorized the Department to add residential and inpatient substance use disorder services, and medical detoxification service to the behavioral health program. The Department anticipates that residential and inpatient substance use disorder service and medical detoxification services will begin January 1, 2021 after the Department seeks and receives federal authorization to secure federal financial participation in the program. The Department currently is forecasting the cost of the program based on a report produced by Colorado Health Institute called "Options for Residential and Inpatient Treatment of Substance Use Disorder<sup>1</sup>", which was authorized under HB 17-1351 "Study Inpatient Substance Use Disorder Treatment" but assuming that the program will not reach full capacity until FY 2021-22. The Department will incorporate the costs

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 $<sup>^{1}\</sup> https://www.coloradohealthinstitute.org/research/options-residential-and-inpatient-treatment-substance-use-disorder$ 

of the new benefits through the Department's rate setting process for the RAEs and will make corresponding adjustments to estimated expenditure through the regular budget process.

# **Program Administration**

In FY 2005-06, SB 05-112 transferred all Behavioral Health Community Programs - Program Administration expenditures into the Executive Director's Office Long Bill group and they are reflected in the lines for Personal Services, Operating Expenses, and Behavioral Health External Quality Review Organization. The current year and out-year requests for Program Administration are included in the Executive Director's Office Long Bill group.

# Medicaid Anti-Psychotic Pharmaceuticals

Prior to FY 2008-09, as part of the Long Bill, estimated expenditures for anti-psychotic pharmaceuticals were appropriated to this Long Bill group as Cash Funds Exempt. This was an informational-only line item; the costs for these drugs were and are paid in the Department's Medical Services Premiums Long Bill group, and no actual transfer took place. Because there was no corresponding decrease to the Medical Services Premiums Long Bill group, this double counted the funding for these drugs.

In its November 1, 2007 Budget Request, the Department officially requested the removal of the Medicaid Anti-Psychotic Pharmaceuticals line item and subsequently received approval. The Department continues to report expenditure for antipsychotics in its Budget Request (such as in Exhibit F of the exhibits for Medical Services Premiums, and/or the Strategic Plan).

# Significant Changes between Spending Authority and FY 2020-21 R-2

# FY 2020-21

In the FY 2020-21 S-2A, the Department requests a reduction of \$98,830,8294 in total expenditure compared to the FY 2020-21 spending authority, including \$42,281,674 General Fund, an increase of \$1,731,561 cash funds, and a decrease of \$58,280,716 federal funds. This is primarily because projected caseload is lower than anticipated and the per member per month rates came in lower than anticipated. This effect was partially offset because the Department verified that a risk corridor payment must be made to five of the seven RAEs for services that occurred in FY 2018-19. Projected cash fund expenditure rose because the projected utilization of the SUD benefit was redistributed towards populations funded with cash funds, in line with preliminary rate calculations for the benefit.

# FY 2020-21

In the FY 2021-22 R-2, the Department forecasts a decrease of \$55,261,248 in total expenditure compared to the base budget, including a decrease of \$18,371,642 General Fund, an increase of \$8,251,2316 cash funds, and a decrease of \$45,140,837 federal funds. This is primarily due to a reduction in projected caseload.

# Behavioral Health Capitation Payments and Medicaid Behavioral Health Fee-for-Service Payments

The Behavioral Health Capitation Payments line item reflects the appropriation that funds behavioral health services throughout Colorado through managed care providers contracted by the Department. As a result of competitive procurement, five behavioral health organizations were awarded contracts with updated capitation rates and services effective January 1, 2005. Payments for Mental Health Institute Rate Refinance Adjustment, Alternatives to Inpatient Hospitalization at the Mental Health Institute at Pueblo, Alternatives to Inpatient Hospitalization at the Mental Health Institute at Fort Logan, and Alternatives to the Fort Logan Aftercare Program were separate payments prior to FY 2005-06 and incorporated into the Behavioral Health Capitation Payments line item in FY 2005-06. Effective July 1, 2009, the five behavioral health organizations were reprocured through a competitive bid process. As a result of the reprocurement, the same five organizations won their respective contract bids, leaving the program unchanged. Effective July 1, 2014, the behavioral health services contracts were up for reprocurement through a competitive bid process. Four of the five BHOs from the previous rebid won their respective regions with the exception of the northeast region. That region is now managed by Access Behavioral Health – Northeast. The Department underwent a competitive bidding process to procure contractors for the seven regional accountable entities to be service providers for physical and behavioral health. These changes were effective July 1, 2018.

The regional accountable entities are responsible for providing or arranging all medically necessary behavioral health services to Medicaid-eligible members within a specified geographic location for a pre-determined capitation rate. The Department pays actuarially certified rates to each regional accountable entity for each Medicaid client in each Medicaid eligibility category. Retroactive eligibility is covered. Payments vary across regional accountable entities, as well as eligibility categories.

The Medicaid populations that are eligible for behavioral health services covered by capitation rates are combined into eight categories, as indicated below. Partial dual-eligible members and non-citizens are ineligible for behavioral health services.

The eligible behavioral health populations are:

- Adults 65 and Older
- Individuals with Disabilities
- Low Income Adults
- Expansion Parents & Caretakers
- MAGI Adults

- Eligible Children
- Foster Care
- Breast and Cervical Cancer Prevention and Treatment Program

# Analysis of Historical Expenditure Allocations across Eligibility Categories

At the beginning of a contract cycle, behavioral health organization capitation rates were entered in the Medicaid Management Information System (MMIS). Monthly payments were paid based on eligibility categories. The MMIS provided detailed expenditures by behavioral health organization and eligibility category but did not include offline transactions and accounting adjustments. The only source that included all actual expenditure activity was the Colorado Financial Reporting System (COFRS). The drawback was the COFRS provided total expenditures, but not by eligibility category. The exception was the Breast and Cervical Cancer Treatment Program eligibility category, which was reported separately in the COFRS. Since an allocation had to be calculated to determine the amount of actual expenditures across the other eligibility categories, a ratio was calculated for each eligibility category by dividing the MMIS eligibility category expenditures (less the Breast and Cervical Cancer Treatment Program eligibility category) by the total MMIS expenditures (less the Breast and Cervical Cancer Treatment Program eligibility category) from the COFRS. This calculation estimated actual COFRS expenditures across each eligibility category. Beginning July 1, 2014, the Department is using a new financial reporting tool. The Colorado Operations Resource Engine (CORE) is used in place of COFRS and the same overlay methodology is used between CORE and the MMIS.

# Description of Methodology

The Department utilizes a capitation trend forecast model. In short, the methodology examines the trend in capitation rates across each eligibility category and applies that trend to the average per-claim, incurred expense rate. By examining the capitation rate trends directly, rather than through a per-capita methodology, future expenditures are forecasted directly through the primary cost drivers: the actuarially agreed-upon capitation rate and caseload. By tying forecasts directly to capitation rates, the methodology may provide more accurate estimates of expenditures by eligibility category, rather than simply in aggregate, as well as provide an additional window of transparency into the forecasting process by presenting a clear link between total expenditure and the rates being paid to regional accountable entities.

Additionally, the forecast utilizes an incurred but not reported methodology similar to other portions of this Request submitted by the Department (e.g., Nursing Facilities; see Section E, Exhibit H). The Department adjusts its request to capture the reality that some

behavioral health claims incurred in any one fiscal year may not be paid during that same fiscal year. Similarly, some portion of expenditure in any fiscal year will be payments on claims incurred in prior fiscal years.

The following narrative describes in greater detail the assumptions and calculations used in developing the current year and out-year requests for Behavioral Health Community Programs. It should be noted that the data and values in many of the exhibits are contained and calculated in one or more other exhibits which may come before or after the exhibit being described. When this occurs, the source exhibit will be noted.

# EXHIBIT AA - CALCULATION OF CURRENT TOTAL LONG BILL GROUP IMPACT

Effective with the November 2, 2009 Budget Request, in this exhibit the Department sums the total spending authority by fund source, including the Long Bill and any special bills which have appropriations that affect the Department. The total spending authority is compared to the total projected estimated current year expenditures from Exhibit BB. The difference between the two figures is the Department's Supplemental Request for the current fiscal year.

Exhibit AA now presents a concise summary of spending authority affecting the Behavioral Health Community Programs. In previous budget requests, the Department presented historical expenditure and caseload figures in graphical form. This information can be found in table form in Exhibit DD (see below).

For the request year, the Department starts with the prior year's appropriation including special bills and adds in any required annualizations. This total is the Base Amount for the Request year. The total Base Amount is compared to the total projected estimated request year expenditure from Exhibit BB. The difference between the two figures is the Department's Funding Request in the November Budget Request and the Department's Budget Amendment in the February Supplemental Budget Request.

# EXHIBIT BB - CALCULATION OF FUND SPLITS

Exhibit BB details fund splits for all Behavioral Health Community Programs budget lines for the current fiscal year supplemental and the out-year Budget Request. For all of the capitation payments for the base traditional members, the state receives the standard Medicaid federal match with the State's share coming from General Fund. In FY 2018-19 and ongoing the federal match is 50.00%. Payments for members in the Breast and Cervical Cancer Program receive an enhanced federal match rate, which in FY 2021-22 and ongoing is 65.00% and is described separately below.

Following the declaration of a public health emergency by the Secretary of Health and Human Services during the COVID-19 pandemic, CMS notified states that an increased FMAP would be available for each calendar quarter occurring during the public health emergency,

including retroactively to January 1, 2020. To be eligible to receive the 6.2 percentage point FMAP increase, states must adhere to a set of requirements which include, but are not limited to, maintaining eligibility standards, methodologies, and procedures; covering medical costs related to the testing, services, and treatment of COVID-19; and not terminating individuals from Medicaid if such individuals were enrolled in the Medicaid program as of the date of the beginning of the emergency period or during the emergency period. The Department is compliant with all requirements and assumes that the State will be eligible for the enhanced FMAP through March 31st, 2021. The Department anticipates that the FMAP will decrease to its normal level beginning on April 1, 2021 following the end of the public health emergency. As such, the Department assumes a 50.00% FMAP for SFY 2021-22 and SFY 2022-23. FMAP forecasts can be found in exhibit R of the Department's FY 2021-22 R-1 "Medical Services Premiums Request". The chart below shows the average FMAP for the year.

Capitation expenditures are split between traditional members and expansion members. Expansion members are funded from Healthcare Affordability and Sustainability Fee funds. Finally, the reconciliation from prior years for behavioral health capitation overpayments, retractions for capitations paid for members later determined to be deceased, and system issues are also presented (see Exhibit II for reconciliation calculations). A summary of applicable FMAP rates for each of the forecast years is provided below:

Population	FY 2020-21 Match Rate	FY 2021-22 Match Rate	FY 2022-23 Match Rate
Standard Medicaid	54.65%	50.00%	50.00%
Former CHP+ Children	71.13%	65.00%	65.00%
Former CHP+ Prenatal	71.13%	65.00%	65.00%
Expansion Adults	90.00%	90.00%	90.00%
ВССР	68.26%	65.00%	65.00%

The Department also calculates the fund splits for the fee-for-service expenditure in Exhibit BB. The make-up of the fee-for-service population is the same as the capitation program and therefore the same funding mechanisms are used for the same populations mentioned above in the fee-for-service environment (see Exhibit JJ and Exhibit KK for fee-for-service calculations).

Medicaid Behavioral Health Fee-for-Service base traditional members also receive the standard Medicaid federal match with the State's share coming from General Fund. Similar to the populations within the capitation payments line, as of July 1, 2014, the Department is breaking out the fee-for-service expenditure by funding source according to population so that it may claim the correct federal match associated with who is obtaining services. The sum of the capitations and the fee-for-service payments comprise the Department's request.

Behavioral Health Services for Breast and Cervical Cancer Program Adults

SB 01S2-012 created the Breast and Cervical Cancer Prevention and Treatment Program. SB 05-209 and HB 08-1373 incorporated funding for the Breast and Cervical Cancer patients into the appropriation for Behavioral Health Community Programs Capitation Payments, effective with the FY 2005-06 budget. Behavioral health care for members in the Breast and Cervical Cancer Program is managed through the capitation contracts with the regional accountable entities. Therefore, the budget is based on the behavioral health caseload that includes the Breast and Cervical Cancer Program eligibility category. For this reason, they are shown as a separate eligibility category where appropriate.

Annual designations of General Fund contributions to program costs are specified in sections 25.5-5-308(9), C.R.S. (2015). Exhibit BB details funds splits for the Behavioral Health Community Programs Capitations line. Excluding the FMAP bump during the emergency period, the funding for the members enrolled in the program is 35.00% cash funds from the Breast and Cervical Cancer Prevention and Treatment Fund and 65.00% federal funds. The program was reauthorized in FY 2014-15 and sunsets at the end of FY 2018-19, with the potential to extend the program through new legislation. Beginning in FY 2016-17, the Breast and Cervical Cancer Prevention and Treatment Program expanded the age of eligibility for women being screened for cervical cancer from 39 to 21, which impacts the caseload forecast.

Behavioral Health Services for Healthcare Affordability and Sustainability Fee Expansion Members

HB 09-1293 established a funding mechanism for a series of expansion members. The first set of expansion members that are funded through the bill was parents with income up to 100% of the Federal Poverty Limit (FPL). Services for these members were funded through the Healthcare Affordability and Sustainability Fee cash fund. Starting in FY 2011-12, additional expansion populations also received funding through the Healthcare Affordability and Sustainability Fee cash fund. These include individuals with disabilities with income limits up to 450% of the federal poverty level and MAGI Adults, both of which received services through the RAEs as part of their benefit package. Individuals with disabilities with income limits up to 450% are assumed to be similar to other members with disabilities, and expenditure for these members is therefore calculated using the same per-capita rate as other members with disabilities (see exhibit JJ). See exhibits EE, GG, II, and JJ for more detailed explanations of these assumptions.

Behavioral Health Services for Expansion Populations in SB 11-008 and SB 11-250

Absent the FMAP bump during the emergency period, the former CHP+ populations that transferred to Medicaid with SB 11-008 (Eligible Children) and SB 11-250 (Eligible Pregnant Adults) receives the enhanced CHP+ FMAP of approximately 65.00%, with an additional 23 percentage point FMAP increase through September 30, 2019; the enhanced FMAP is expected to be 88.00% in FY 2018-19 and 79.38% in FY 2019-20, and 67.88% in FY 2020-21 per the HEALTHY KIDS Act.

Behavioral Health Services for Expansion populations in SB 13-200

SB 13-200, "Expanding Medicaid Eligibility in Colorado," extends Medicaid eligibility to up to 133% of the FPL parents of Medicaid eligible children and MAGI Adults, effective January 1, 2014. The Department assumes that federal match rates will apply to each new population as follows: Parents from 60% to 68% FPL will receive the standard Medicaid match rate, with the state share coming from Healthcare Affordability and Sustainability Fee cash fund. Parents from 69% - 133% FPL and newly eligible MAGI Adults will receive the expansion federal match rate. And adults up to 60% FPL will continue to receive the standard Medicaid match. The Department also estimates that the non-newly eligible MAGI Adult population is 81.13%; Because some of these members may have been eligible prior to the expansion, the Department is unable to claim the expansion federal match. Therefore, the Department estimates that it can claim the expansion match on 75% percent of the population and the standard match on the other 25%. As such, the federal match percentage in FY 2019-10 is 81.13%. Beginning January 1, 2017, all expansion populations will begin a stepdown in federal matching. As a result, the match rate for those populations in 91.50% in FY 2019-20, and 90.00% in FY 2020-21 and ongoing.

# EXHIBIT CC - BEHAVIORAL HEALTH COMMUNITY PROGRAMS SUMMARY

Exhibit CC presents a summary of behavioral health caseload and capitation expenditures itemized by eligibility category as well as a summary of the rest of the Behavioral Health Community Programs. The net capitation payments include the impacts of actions with perpetual effect, such as caseload driven impacts such as the various reconciliations and retractions for members determined to be ineligible. Exhibit EE illustrates the build to the final expenditure estimates presented in this exhibit.

# EXHIBIT DD - BEHAVIORAL HEALTH CASELOAD, PER CAPITA, AND EXPENDITURE HISTORY

Exhibit DD contains the caseload, per-capita, and expenditure history for each of the 13 eligibility categories. Each of the tables that comprise Exhibit DD is described below.

# Behavioral Health Community Programs Caseload

Behavioral Health Community Programs caseload is displayed in two tables. The first table shows total caseload for each of the rate cells which the Department pays a capitation on. The second table displays caseload by all behavioral health eligibility categories that make up the eight rate cells. Figures for fiscal years up to the present fiscal year are actual caseloads, while the current fiscal year and the request year caseloads are estimates. The behavioral health caseload excludes the caseload for partial dual eligible members and non-citizens and ties to the caseload presented in the Request for Medical Services Premiums, Section E, Exhibit B. Please see the Medicaid Caseload section of the Medical Services Premiums narrative for further discussion of Medicaid caseload projections. The caseload numbers are used in numerous exhibits throughout the Behavioral Health Community Programs exhibits and narrative.

# Behavioral Health Community Programs Per-Capita Historical Summary

As with caseload, Behavioral Health Community Programs per-capita is displayed in two tables. The first table sets forth total per-capita for each rate cell the Department pays a capitation on. The second table displays per-capita for all behavioral health eligibility categories. However, since the actual per capita from the first table for the combined categories have a single per-capita, the true per-capita is shown in those categories and will not mathematically be the same as dividing each individual category expenditure by the caseload. Figures for fiscal years up to the present fiscal year are actual per-capita, while the current fiscal year and the request year per-capita are estimates.

# Behavioral Health Community Programs Expenditures Historical Summary

The history of expenditures includes combined category and expanded category tables as well as total expenditures for both capitation and fee-for-service expenditures. For fee-for-service expenditure, service categories are listed separately.

Actual expenditures are only available from the Colorado Operations Resource Engine (CORE). Expenditures by eligibility category are not available from the CORE. The Medicaid Management Information System (MMIS) does provide expenditures by eligibility category but does not include offline transactions and accounting adjustments. The two systems typically have minor discrepancies in reported expenditure, often due to accounting adjustments made to the CORE as fiscal periods close. Because the variance is minor, data from the MMIS can be used to distribute total expenditures from the CORE across eligibility categories.

A ratio is calculated for each eligibility category by dividing the MMIS eligibility category expenditures by the total MMIS expenditures. The ratio is multiplied by the total expenditures from the CORE. This calculation estimates actual CORE expenditures across each eligibility category. Once the overall expenditures by eligibility category are determined, they may be divided by the actual average monthly caseload for each eligibility category to determine the actual per capita for each eligibility category.

# EXHIBIT EE - ESTIMATE AND REQUEST BY ELIGIBILITY CATEGORY

Exhibit EE provides capitation expenditure calculations for the current fiscal year and the request year.

The Department has adopted a methodology based on forecasting a capitation rate, multiplying that rate by monthly caseload, multiplying again by the number of months that the forecasted rate will be in effect, and then adjusting for incurred claims that will be paid in subsequent years as well as for claims from former years that will be paid in the year of the request. The methodology is a zero-based budget tool that allows the Department to examine projected expenditures each year without building in inappropriate assumptions, estimates, or calculations from preceding years.

The forecasted capitation rate is derived from exhibits FF through HH and will be presented in more detail below. The caseload is the same as presented in the Department's budget request for Medical Services Premiums Exhibit B (excepting partial dual eligible members and non-citizens, as discussed above).

In order to adjust the calculations for cash accounting, the Department makes two adjustments to the calculation: first, the Department subtracts the incurred amount estimated to be paid in subsequent periods; then, the Department adds the claims incurred in prior periods expected to be paid in the forecast period. These adjustments transform the estimated incurred expenditure to a cash-based figure. The basis for these adjustments is described in this narrative below and is shown starting on page E.EE-4.

After calculating total expenditure, the anticipated date-of-death retractions for each fiscal year are estimated and added to total expenditure. The Department began an aggressive retraction of payments for deceased members in FY 2009-10; this activity resulted in the retraction of payments originally made between FY 2004-05 and FY 2008-09 and reduced prior period dates of service expenditure. The Department is continuing to identify these claims and retracts payments twice a year. For the current year, the retractions are estimated as a 10% reduction in the total amount retracted in the previous year. For the request year, the retractions are estimated as a 10% reduction in the estimated amount that will be retracted in the current year. The retractions are expected to decline, as there is a smaller pool of historical members from which to retract and current processes of identification become more effective.

# Incurred-but-not-Reported Estimates

In order to estimate the necessary adjustments to convert the projection to a cash basis, the Department estimates monthly incurred-but-not-reported (IBNR) adjustments based on historical data. Monthly adjustments are required because, for example, claims incurred in July of the current fiscal year have 11 more months of the fiscal year in which the claims can be paid; however, claims incurred in June of the fiscal year only have the remainder of that month in which to be paid before the payment becomes part of the next fiscal year's expenditure.

The Department examined historical data from the last five fiscal years and determined the prior fiscal years would provide a representative model for the likelihood of claims being paid in the year in which they are incurred. Pages E.EE-4 through E.EE-5 presents the percentage of claims paid in a six-month period that come from that same period and those which come from previous periods. The previous four years of expenditure experience were examined, and the average was applied to the forecast.

On pages E.EE-6 through E.EE-7, the Department calculates the estimated outstanding expenditure from claims remaining from previous period by aid category. The sums are then carried forward to the calculations on pages E.EE-1, E.EE-2, and E.EE-3.

# Actuarially Certified Capitation Rates

Capitated rates for the regional accountable entities are required to be actuarially certified and approved by CMS. Thus, actuarially certified rate increases could reasonably be expected to be good predictors of future costs. As such, the Department used trends on the historically certified capitation rates to derive the capitation rate presented in Exhibit EE. The methodology for determining the forecasted capitation rate is the subject of Exhibits FF through HH.

# EXHIBIT FF - BEHAVIORAL HEALTH RAE ENROLLMENT ADJUSTMENT

Historically, the Department would forecast RAE enrollment using the Medicaid caseload forecast minus select populations that are not eligible for behavioral health services. RAE enrollment was then multiplied by the weighted rates to estimate the total capitation expenditure. However, historically capitation expenditure was not perfectly forecasted via this methodology in part because some clients are eligible for behavioral health services via the Program for All-Inclusive Care for the Elderly (PACE), and thus the Department does not pay a behavioral health capitation payment for them. Additionally, there is occasionally a one-month lag between Medicaid enrollment and RAE enrollment due to processing delays.

The Department now estimates the average monthly RAE enrollment as the forecasted Medicaid clients minus the sum of ineligible populations, the average monthly PACE enrollment, and the average number of clients who aren't enrolled in a RAE until a month after enrolling in Medicaid. To adjust for these factors the Department reduced the weighted capitation rates by the estimated RAE enrollment as a percentage of caseload.

# EXHIBIT GG - BEHAVIORAL HEALTH CAPITATION RATE TRENDS AND FORECASTS

As presented above, the expenditure forecast was derived by examining the trend on the capitation rate and then applying that trend to the monthly cost per client (i.e., the claims-based rate). For the purpose of trend analysis, the weighted capitation rate (weighted by the

proportion of total claims within an eligibility category covered by an individual behavioral health organization) was examined. Exhibit GG presents historical data as well as the forecasted weighted rates.

The weighted rate is presented along with the percentage change from the previous fiscal year. The multiple forecast trend models and the criteria for selecting the forecasted capitation rate point estimate are presented in Exhibit HH.

Based on the Department's calculations and rate-setting process and input from the regional accountable entities, the Department's actuaries certify a capitation rate for each RAE and eligibility type as the rate point estimate for each fiscal year.

It is important to note the overall weighted rate point estimate presented in the exhibit is weighted across two factors. First, the rate is weighted within an eligibility category (that is, weighted by the regional accountable entities' proportion of claims processed within that eligibility category). Second, that rate is then weighted across all eligibility categories (with the weight derived from the total number of claims processed within an eligibility category as a percentage of total claims processed across all eligibility categories). Because caseload can be increasing or decreasing independently of any one capitation rate, the Weighted Behavioral Health Total rate may not be a clear indicator of the rate trends across all eligibility categories.

Exhibit GG presents the weighted point estimate rates, and the trend of those rates is used for forecasting. The weighted point estimates differ from paid rates, which can change within the upper and lower bounds of the established rate range in response to new rate-setting processes and budget reduction measures. The paid rates, which are discussed below, are not presented in Exhibit GG in order to allow for comparison across years and so as to not artificially inflate or deflate the rate trend and bias the estimated rate in future years.

# EXHIBIT HH - FORECAST MODEL COMPARISONS

Exhibit HH produces the final capitation rate estimates that are used as the source of the expenditure calculations provided in Exhibit EE. Pages E.HH-1 and E.HH-2 present the final rate estimates in their entirety. The final rate estimates are a product of model selection (discussed below) and the necessary adjustments as presented in Exhibit FF.

On page E.HH-3, a series of forecast models are presented for each eligibility category. From the models or from historical changes, a point estimate is selected as an input into pages E.HH-1 and E.HH-2. Based on the point estimates, the adjustments presented in Exhibit FF are then applied and the final, adjusted point estimate is then used in the expenditure calculations of Exhibit EE.

# **Capitation Trend Models**

The forecasted capitation rates are the result of a point estimate selection from among several forecast trend models and historical information. These models are presented on page E.HH-3 and historical midpoint rates are presented in Exhibit GG.

For each eligibility category, four different trend model forecasts were performed: an average growth model, a two-period moving average model, an exponential growth model, and a linear growth model. The average growth model examines the rate of change in the capitation rate and applies the average rate of change to the forecast period. The two-period moving average model projects the forecast period will see a change in the capitation rate that is the average of the last two changes in the capitation rate. The exponential growth model assumes the capitation rate is increasing faster as time moves forward (a best-fit exponential equation is applied to the historical data and trended into the future). The linear growth model is a regression model on time, fitting a linear equation line to the historical data and forecasting that line into the future. Each model in the exhibit also shows what the percent change would be from the prior period. The Department's decisions for trend factors are informed, in part, by preliminary calculations from the actual rate setting process. Because those calculations remain preliminary, the Department does not explicitly use them in estimating trend factors.

Capitation rates are required to be actuarially sound and are built from a blend of historical rates and recent year encounter data (provider expenditure on services). The trend models, as presented in this exhibit, are an attempt to predict the final outcome of this rate setting process. The Department has used the trend models to establish a range of reasonable rate values and has selected trends by considering the various factors that impact the respective eligibility populations as well as the impact that encounter data will have on the rate setting process. As such, the Department believes the most recent years' experience is the most predictive of the likely current year and future year experiences.

Due to COVID-19, the Department determined that none of these methodologies are appropriate for FY 2021-22 and FY 2022-23. The Department set the trends to 3% growth for all populations based on the assumption that as more people enroll in Medicaid due to rising unemployment as a result of the crisis, average client utilization of behavioral health services will drop. Historically, members that churn onto Medicaid as a result of an economic downturn do not utilize behavioral health services and thus lower the per capita cost of providing those services. During the most recent period of economic growth, rates rose significantly as low utilizers were churned off of Medicaid due to rising incomes. The table below shows the estimated trends for FY 2020-21.

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Aid Category	FY 2021-22 Trend					
	3.00%					
Adults 65 and Older (OAP-A)	Assumed actuarially sound based on caseload projection.					
To disside a la sociale dissa tribate a	3.00%					
Individuals with disabilities Through 64 (AND/AB, OAP-B)	Assumed actuarially sound based on caseload projection.					
	3.00%					
Low Income Adults	Assumed actuarially sound based on caseload projection.					
	3.00%					
Expansion Parents & Caretakers	Assumed actuarially sound based on caseload projection.					
	3.00%					
MAGI Adults	Assumed actuarially sound based on caseload projection.					
	3.00%					
Eligible Children (AFDC-C/BC)	Assumed actuarially sound based on caseload projection.					
	3.00%					
Foster Care	Assumed actuarially sound based on caseload projection.					

# Trend Justification

The selected point estimates of the capitation rates are adjusted on pages E.HH-1 and E.HH-2, as described above, for use in the expenditure calculations presented in Exhibit EE.

# **EXHIBIT II - RECONCILIATIONS**

Capitation payments are made on a monthly basis throughout the year in the Medicaid Management Information System (MMIS). When members are determined to be eligible for benefits retroactively, retroactive capitation payments are made to the regional accountable entities through the MMIS. When members are determined to be ineligible for Medicaid benefits retroactively, recoupment of the capitation payments is completed separately. When known, this exhibit also shows the impact of the reconciliation process surrounding all populations.

Formally, the ACA mandated that the Internal Revenue Service (IRS) charge a fee, the Health Insurance Provider Fee (HIPF), to covered entities that provide health insurance, based on the amount of revenue that the provider earns and that the HIPF be paid for based upon the insurer's market share. This mandate excluded insurers that have a certain percentage of revenue that is publicly funded and provides other exclusions based on the number of premiums taken into an account.<sup>2</sup> The Department issued a refund to the BHOs or RAEs for these costs. The IRS issued a moratorium in the FY 2019-20 payment and the mandate was revoked entirely in January of 2020. The Department still must issue a refund of fees attached to services from before January 2020, so it will make one payment in FY 2020-21. However, that payment will only refund half a fiscal year worth of fees instead of a full one. Following the FY 2020-21 payment, the Department will not make any more HIPF payments.

Starting in FY 2018-19, the Department is paying incentive payments to the contracted behavioral health providers based on service performance and quality metrics of up to 5% of the total capitation expenditure paid from the previous fiscal year's services.

There was a risk corridor placed on the FY 2018-19 rates due to the uncertainty of the caseload estimates. The risk corridor allows the risk of not setting an accurate rate to be split between the Department and the RAEs. Depending on how far off the rate is from the actual encounter based rate, the Department may receive money if the rates were set too high or pay out money if the rates were set too low. Exhibit II summarizes the expected fiscal impacts. The Department expects to make five risk corridor payments in FY 2020-21 because the rates in FY 2018-19 were lower than the risk corridor allowed for five out of the seven RAEs. The rates were low because caseload dropped rapidly for populations with low behavioral health utilization and, as a result, the remaining population had much higher behavioral health costs per person than expected. In total, the Department expects to spend \$22,000,000 on these payments.

# EXHIBIT JJ - ALTERNATIVE FINANCING POPULATIONS

Exhibit JJ is a stand-alone exhibit designed to show the effect of the Colorado Health Care Affordability Act (HB 09-1293), Aligning Medicaid Eligibility for Children (SB 11-008), Eligibility for Pregnant Women in Medicaid (SB 11-250), and Expanding Medicaid

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 $<sup>^2\</sup> https://www.irs.gov/businesses/corporations/affordable-care-act-provision-9010$ 

Eligibility in Colorado (SB 13-200) to the Behavioral Health Community Programs fund splits. This exhibit presents projected caseload and costs itemized by eligibility category for the current year and the request year. The exhibit also separates out the funding source and the calculation of federal match associated with each category. Note the caseloads shown are the average monthly number over each year and will fluctuate throughout the year.

Healthcare Affordability and Sustainability Fee Fund HB 09-1293, the "Colorado Health Care Affordability Act" provided funding to provide health care coverage for uninsured Coloradans in FY 2009-10 and beyond. The Department began collecting fees from hospitals in April 2010 for the Hospital Provider Fee cash fund and started extending benefits to expansion members in May 2010. In SB 17-267, The Hospital Provider Fee was changed to the Healthcare Affordability and Sustainability Fee Fund which provides for the costs of the following populations that impact the Behavioral Health budget:

#### MAGI Parents/Caretakers 60% to 68% FPL

Historically, clients who fell under the Expansion Parents to 133% FPL eligibility category (any client over 60% FPL) were considered expansion clients and the State's share of funding was provided through the Hospital Provider Fee Fund. The MAGI conversion has resulted in some clients with over 60% FPL falling into the MAGI Parents/Caretakers 60% to 68% FPL category. The State share of funding for these clients comes from the HAS Fee Fund, effective July 1, 2017, in compliance with statute.

The Department uses caseload figures from S-1A Medical Service Premiums, Exhibit J and per capita costs for Low Income Adults in Exhibit DD to forecast the total costs for this population.

# MAGI Parents/Caretakers 69% to 133% FPL

The Health Care Expansion Fund originally provided funding for parents of children enrolled in Medicaid from approximately 24% to at least 60% of the federal poverty level. This expansion population receives standard Medicaid benefits. SB 13-200 extended this eligibility through 133% FPL, effective July 1, 2013; the Hospital Provider Fee Fund had funded this population up to 100% FPL in the interim before the Affordable Care Act's 100% enhanced federal match began and the population expanded to 133% FPL on January 1, 2014. On January 1, 2018, it fell to 94%. Then on January 1, 2019, it fell to 93%, and on January 1, 2020 it falls to 90%, where it will remain. Effective July 1, 2017, this population is financed with the HAS Fee for the State share of expenditure.

The Department uses caseload figures from S-1A Medical Service Premiums, Exhibit J and per capita costs for Expansion Parents & Caretakers in Exhibit DD to forecast the total costs for this population.

# **MAGI Adults**

With the advent of SB 13-200, effective July 1, 2013, MAGI Adults are covered up to 133% FPL as of January 1, 2014. Similar to MAGI Parents/Caretakers 69% to 133% FPL, the Hospital Provider Fee Fund had funded this population in the interim before the

population expanded and the enhanced federal match began on January 1, 2014. On January 1, 2018, it fell to 94%. Then on January 1, 2019 if fell to 93% and it will fall to 90% on January 1, 2020, where it will remain. Effective July 1, 2017, the State share of expenditure for this population is financed with the HAS Fee.

The Department uses caseload figures from S-1A Medical Service Premiums, Exhibit J and per capita costs for MAGI Adults in Exhibit DD to forecast the total costs for this population.

### Non-Newly Eligible

Medicaid expansion clients who were eligible for Medicaid prior to 2009 are not eligible for the enhanced expansion federal medical assistance percentage (FMAP) that began January 1, 2014. Clients who may be eligible for Medicaid through Home- and Community-Based Services waivers due to a disability are required to provide asset information to be determined eligible for Medicaid waiver services. With Medicaid expansion, clients who may have been eligible but did not provide asset information can still be eligible under different eligibility categories, such as MAGI Adults. It is difficult for the State to prove whether these clients would have been eligible for Medicaid services prior to 2009, had they provided their asset information at that time. For this reason, some clients under expansion categories are not eligible for the full enhanced expansion FMAP. Instead, with the approval of a resource proxy for the non-newly eligible, 75% of expenditure receives expansion FMAP while the remaining 25% receives the standard FMAP, funded from the HAS Fee Fund. The Department has incorporated the resource proxy in this request.

The Department uses caseload figures from S-1A Medical Service Premiums, Exhibit J and per capita costs for MAGI Adults in Exhibit DD to forecast the total costs for this population.

#### **Buy-In for Disabled Individuals**

This expansion allows for individuals with disabilities with income up to 450% of the federal poverty level to pay premiums to purchase Medicaid benefits. Eligibility for the working adults with disabilities with income up to 450% of the FPL began in March 2012, with eligibility to children with disabilities with income up to 300% of the FPL following in June 2012. The Department does not have an implementation timeframe for non-working adults with disabilities at this time.

The Department uses caseload figures from S-1A Medical Service Premiums, Exhibit J and per capita costs for Disabled Individuals in Exhibit DD to forecast the total costs for this population.

## Continuous Eligibility for Children

HB 09-1293, the Colorado Health Care Affordability Act of 2009, established continuous eligibility for twelve months for children on Medicaid, even if the family experiences an income change during any given year, contingent on available funding. The Department implemented continuous eligibility for children in March 2014 and has the authority to use the HAS Fee Cash Fund to fund the state

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share of continuous eligibility for Medicaid children. Because this population is not an expansion population, it receives standard FMAP. Previously, the Department showed this adjustment in funding as a General Fund offset under Cash Funds Financing.

The Department uses caseload figures from S-1A Medical Service Premiums, Exhibit J and per capita costs for Eligible Children in Exhibit DD to forecast the total costs for this population.

Aligning Medicaid Eligibility for Children and Eligibility for Pregnant Women in Medicaid

SB 11-008, "Aligning Medicaid Eligibility for Children," extended Medicaid eligibility to up to 133% of the FPL for all children under the age of 19. Formerly, the eligibility limit for children ages six through 18 was 100% of the FPL and 133% of the FPL for children five and under. The bill shifted impacted children from the CHP+ to Medicaid beginning January 1, 2013. As with most of the Healthcare Affordability and Sustainability Fee populations, the Department assumed the per-capita costs for this expansion population would be the same as for the traditional population since the majority of behavioral health expenditure is paid through the capitation program.

SB 11-250, "Eligibility for Pregnant Women in Medicaid," extended Medicaid eligibility from 133% to 185% of the FPL for all pregnant women. This bill shifted impacted women from CHP+ Medicaid on January 1, 2013. The Department assumes the expenditure for these women will continue to have per-capita costs that will be the same as for the traditional population.

#### EXHIBIT KK - MEDICAID BEHAVIORAL HEALTH FEE-FOR-SERVICE PAYMENTS

Medicaid Behavioral Health Fee-for-Service Payments is a separate budget line item in Behavioral Health Community Programs. Expenditures for this line are calculated in Exhibit KK. The data from Exhibit KK also appear in Exhibit BB, where the fund splits relating to the fee-for-service payments are calculated.

The Medicaid Behavioral Health Fee-for-Service Payments appropriation allows Medicaid members not enrolled in a regional accountable entity to receive behavioral health services or enrolled Medicaid members to receive behavioral health services not covered by the regional accountable entities. The services are not covered either because the client is not enrolled in a regional accountable entity regional accountable entity or the services are outside the scope of the regional accountable entity contract. Medicare crossover claims are included in the fee-for-service category; these are regional accountable entity regional accountable entity covered services for members enrolled in a regional accountable entity who are eligible for both Medicare and Medicaid.

Fee-for-service providers include, but are not limited to hospitals, psychiatrists, psychologists, primary care physicians, and behavioral health centers. The State also reimburses providers through fee-for-service if either the diagnosis or the procedure is not included in the RAE contract or the patient is not enrolled in a RAE.

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# EXHIBIT LL - GLOBAL REASONABLENESS TEST FOR BEHAVIORAL HEALTH CAPITATION PAYMENTS

The Global Reasonableness Test presented in Exhibit LL compares the percent change between behavioral health capitation expenditures as reported in Exhibit DD and forecasted in Exhibit EE.

Annual Total Expenditures	Title of Exhibit
	Calculation of Current Total Long Bill Group Impact
	Calculation of Fund Splits
	Cash Funds Report
Exhibit CC	Behavioral Health Community Programs Summary
Exhibit DD	Behavioral Health Community Programs, Caseload
Exhibit DD	Behavioral Health Community Programs, Behavioral Health Capitation Payments Per Capita Historical Summary
Exhibit DD	Behavioral Health Community Programs, Expenditures Historical Summary
Exhibit EE	Expenditure Calculations by Eligibility Category
Exhibit EE	Incurred But Not Reported Runout by Fiscal Period
Exhibit EE	Incurred But Not Reported Expenditures by Fiscal Period
Exhibit FF	Medicaid Behavioral Health Retroactivity Adjustment
Exhibit FF	Medicaid Behavioral Health Partial Month Adjustment Multiplier
Exhibit GG	Medicaid Behavioral Health Capitation Rate Trends and Forecasts
Exhibit HH	Forecast Model Comparisons - Final Forecasts
Exhibit HH	Forecast Model Comparisons - Capitation Trend Models
Exhibit II	Reconciliations
Exhibit JJ	Alternative Financing Populations
Exhibit KK	Medicaid Behavioral Health Fee-for-Service Forecast
Exhibit LL	Global Reasonableness Test for Medicaid Behavioral Health Capitation Payments

Exhibit AA - Calculation of Current Total Long Bill Group Impact											
FY 20	20-21 Behavioral H	ealth Capitation									
Annual Total Expenditures	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds					
FY 2020-21 Behavioral Health Capitation Appropriation											
FY 2020-21 Long Bill Appropriation (HB20-1360)	\$945,357,559	\$246,481,122	\$0	\$54,045,515	\$0	\$644,830,922					
FY 2020-21 Total Behavioral Health Capitation Spending Authority	\$945,357,559	\$246,481,122	\$0	\$54,045,515	\$0	\$644,830,922					
Projected Total FY 2020-21 Behavioral Health Capitation Expenditure	\$846,208,590	\$204,938,832	\$0	\$55,646,289	\$0	\$585,623,469					
FY 2020-21 Behavioral Health Capitation Estimated Change from Appropriation	(\$99,148,969)	(\$41,542,290)	\$0	\$1,600,774	\$0	(\$59,207,453)					
Percent Change from Spending Authority	-10.49%	-16.85%	0.00%	2.96%	0.00%	-9.18%					
FY 2020-	-21 Behavioral Hea	lth Fee-for-Service									
FY 2020-21 Behavioral Health Fee-For-Service Appropriation											
FY 2020-21 Long Bill Appropriation (HB20-1360)	\$14,052,680	\$3,378,980	\$0	\$814,923	\$0	\$9,858,777					
FY 2020-21 Total Behavioral Health Fee-For-Service Spending Authority	\$14,052,680	\$3,378,980	\$0	\$814,923	\$0	\$9,858,777					
Projected Total FY 2020-21 Behavioral Health Fee-for-Service Expenditure	\$14,370,820	\$2,639,596	\$0	\$945,710	\$0	\$10,785,514					
Total FY 2020-21 Behavioral Health Fee-For-Service Change from Appropriation	\$318,140	(\$739,384)	\$0	\$130,787	\$0	\$926,737					
Percent Change from Spending Authority	2.26%	-21.88%	0.00%	16.05%	0.00%	9.40%					
FY 2020-21	Medicaid Behavio	oral Health Program	ms								
FY 2020-21 Total Spending Authority	\$959,410,239	\$249,860,102	\$0	\$54,860,438	\$0	\$654,689,699					
Total Projected FY 2020-21 Expenditures	\$860,579,410	\$207,578,428	\$0	\$56,591,999	\$0	\$596,408,983					
FY 2020-21 Estimated Change from Appropriation	(\$98,830,829)	(\$42,281,674)	\$0	\$1,731,561	\$0	(\$58,280,716)					
Percent Change from Spending Authority	-10.30%	-16.92%	0.00%	3.16%	0.00%	-8.90%					

Exhibit AA - Calculation of Current Total Long Bill Group Impact											
FY 202	21-22 Behavioral H	ealth Capitation									
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds					
FY 2020-21 Behavioral Health Capitation Appropriation Plus Special Bills	\$945,357,559	\$246,481,122	\$0	\$54,045,515	\$0	\$644,830,922					
Bill Annualizations	\$130,401,052	\$25,611,411	\$0	\$8,628,370	\$0	\$96,161,271					
FY 2021-22 Behavioral Health Capitation Base Amount	\$1,075,758,611	\$272,092,533	\$0	\$62,673,885	\$0	\$740,992,193					
Projected Total FY 2021-22 Behavioral Health Capitation Expenditure	\$1,019,635,808	\$254,078,621	\$0	\$70,754,734	\$0	\$694,802,453					
Total FY 2021-22 Behavioral Health Capitation Request	(\$56,122,803)	(\$18,013,912)	\$0	\$8,080,849	\$0	(\$46,189,740)					
Percent Change from FY 2021-22 Behavioral Health Capitation Base	-5.22%	-6.62%	0.00%	12.89%	0.00%	-6.23%					
Percent Change from FY 2020-21 Estimated Behavioral Health Capitation Expenditure	20.49%	23.98%	0.00%	27.15%	0.00%	18.64%					
FY 2021-	22 Behavioral Hea	lth Fee-for-Service									
FY 2020-21 Behavioral Health Fee-For-Service Appropriation Plus Special Bills	\$14,052,680	\$3,378,980	\$0	\$814,923	\$0	\$9,858,777					
Bill Annualizations	(\$19,483)	(\$4,153)	\$0	(\$1,375)	\$0	(\$13,955)					
FY 2021-22 Behavioral Health Fee-For-Service Base Amount	\$14,033,197	\$3,374,827	\$0	\$813,548	\$0	\$9,844,822					
Projected Total FY 2021-22 Behavioral Health Fee-for-Service Expenditure	\$14,894,752	\$3,017,097	\$0	\$983,930	\$0	\$10,893,725					
Total FY 2021-22 Behavioral Health Fee-For-Service Request	\$861,555	(\$357,730)	\$0	\$170,382	\$0	\$1,048,903					
Percent Change from FY 2021-22 Behavioral Health Fee-For-Service Base	6.14%	-10.60%	0.00%	20.94%	0.00%	10.65%					
Percent Change from FY 2020-21 Estimated Behavioral Health Fee-For-Service Expenditure	3.65%	14.30%	0.00%	4.04%	0.00%	1.00%					
FY 2021-22	Medicaid Behavio	ral Health Progran	18								
FY 2021-22 Base Amount	\$1,089,791,808	\$275,467,360	\$0	\$63,487,433	\$0	\$750,837,015					
Total Projected FY 2021-22 Expenditure	\$1,034,530,560	\$257,095,718	\$0	\$71,738,664	\$0	\$705,696,178					
Total FY 2021-22 Request	(\$55,261,248)	(\$18,371,642)	\$0	\$8,251,231	\$0	(\$45,140,837)					
Percent Change from Spending Authority	-5.07%	-6.67%	0.00%	13.00%	0.00%	-6.01%					

Exhibit AA - Calcu	lation of Current T	otal Long Bill Gro	up Impact			
FY 202	22-23 Behavioral He	ealth Capitation				
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2021-22 Behavioral Health Capitation Appropriation Plus Special Bills	\$1,075,758,611	\$272,092,533	\$0	\$62,673,885	\$0	\$740,992,193
Bill Annualizations	\$176,755	(\$15,537)	\$0	\$103,914	\$0	\$88,378
FY 2022-23 Behavioral Health Capitation Base Amount	\$1,075,935,366	\$272,076,996	\$0	\$62,777,799	\$0	\$741,080,571
Projected Total FY 2022-23 Behavioral Health Capitation Expenditure	\$1,125,737,354	\$278,959,811	\$0	\$79,086,465	\$0	\$767,691,078
Total FY 2022-23 Behavioral Health Capitation Continuation Amount	\$49,801,988	\$6,882,815	\$0	\$16,308,666	\$0	\$26,610,507
Percent Change from FY 2022-23 Behavioral Health Capitation Base	4.63%	2.53%	0.00%	25.98%	0.00%	3.59%
Percent Change from FY 2021-22 Estimated Behavioral Health Capitation Expenditure	10.41%	9.79%	0.00%	11.78%	0.00%	10.49%
FY 2022-	23 Behavioral Heal	th Fee-for-Service				
FY 2021-22 Behavioral Health Fee-For-Service Appropriation Plus Special Bills	\$14,033,197	\$3,374,827	\$0	\$813,548	\$0	\$9,844,822
FY 2022-23 Behavioral Health Fee-For-Service Base Amount	\$14,033,197	\$3,374,827	\$0	\$813,548	\$0	\$9,844,822
Projected Total FY 2022-23 Behavioral Health Fee-for-Service Expenditure	\$16,378,982	\$3,241,045	\$0	\$1,143,963	\$0	\$11,993,974
Total FY 2022-23 Behavioral Health Fee-For-Service Continuation Amount	\$2,345,785	(\$133,782)	\$0	\$330,415	\$0	\$2,149,152
Percent Change from FY 2021-22 Behavioral Health Fee-For-Service Base	16.72%	-3.96%	0.00%	40.61%	0.00%	21.83%
Percent Change from FY 2021-22 Estimated Behavioral Health Fee-For-Service Expenditure	9.96%	7.42%	0.00%	16.26%	0.00%	10.10%
FY 2022-23	Medicaid Behavior	ral Health Progran	ns			
FY 2022-23 Base Amount	\$1,089,968,563	\$275,451,823	\$0	\$63,591,347	\$0	\$750,925,393
Total Projected FY 2022-23 Expenditure	\$1,142,116,336	\$282,200,856	\$0	\$80,230,428	\$0	\$779,685,052
Total FY 2022-23 Continuation Amount	\$52,147,773	\$6,749,033	\$0	\$16,639,081	\$0	\$28,759,659
Percent Change from Spending Authority	4.78%	2.45%	0.00%	26.17%	0.00%	3.83%

		Exh	ibit BB - Calcula	tion of Fund Split	S		
	(	Calculation of Fur	nd Splits - FY 202	0-21 Behavioral I	Health Estimate		
Item	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate (1)	Source of Funding
Behavioral Health Capitation Base Traditional Clients	\$384,264,965	\$174,264,162	\$0	\$0	\$210,000,803		General Fund
Breast and Cervical Cancer Program	\$62,619	\$0	\$19,875	\$0	\$42,744	68.26%	CF: Breast and Cervical Cancer Prevention and Treatment Fund
MAGI Parents and Caretakers 60% - 68% FPL	\$2,460,915	\$0	\$1,116,025	\$0	\$1,344,890	54.65%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
HB 09-1293: MAGI Parents and Caretakers 69% - 133% FPL and MAGI Adults	\$304,896,451	\$0	\$30,489,645	\$0	\$274,406,806	90.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Non Newly Eligible	\$2,265,021	\$0	\$426,730	\$0	\$1,838,291	81.16%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Disabled Buy-In	\$21,556,856	\$0	\$9,776,034	\$0	\$11,780,822	54.65%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Continuous Eligibility for Children	\$6,289,471	\$0	\$2,852,275	\$0	\$3,437,196	54.65%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
SB 11-008 Eligible Children	\$22,537,316	\$6,506,523	\$0	\$0	\$16,030,793	71.13%	General Fund
SB 11-250 Eligible Pregnant Adults	\$1,499,084	\$432,786	\$0	\$0	\$1,066,298	71.13%	General Fund
Estimated FY 2020-21 Capitation Expenditure Before	\$745,832,698	£101 202 471	\$44,680,584	\$0	\$519,948,643		
Adjustments	\$745,652,096	\$181,203,471	544,000,504	30	\$519,946,045		
Estimated Date of Death Retractions	(\$2,556,725)	(\$600,044)	(\$162,044)	\$0	(\$1,794,637)	70.19%	CF: Variable
Estimated Incentive Payment	\$32,127,670	\$9,464,819	\$6,599,016	\$0	\$16,063,835	50.00%	CF: Variable
Health Insurance Provider Fee Payment (2)	\$5,337,930	\$1,662,128	\$256,755	\$0	\$3,419,047	64.05%	CF: Variable
Substance Abuse Disorder Treatment	\$43,467,017	\$6,332,036	\$3,238,492	\$0	\$33,896,489	77.98%	CF: Variable
Risk Corridor Payment	\$22,000,000	\$6,876,422	\$1,033,486	\$0	\$14,090,092	64.05%	
Estimated FY 2020-21 Capitation Expenditure	\$846,208,590	\$204,938,832	\$55,646,289	\$0	\$585,623,469		
Behavioral Health Fee-for-Service Traditional Clients	\$5,658,654	\$2,566,200	\$0	\$0	\$3,092,454		General Fund
Breast and Cervical Cancer Program	\$2,977	\$0	\$945	\$0	\$2,032	68.26%	CF: Breast and Cervical Cancer Prevention and Treatment Fund
MAGI Parents and Caretakers 60% - 68% FPL	\$73,983	\$0	\$33,551	\$0	\$40,432	54.65%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
HB 09-1293: MAGI Parents and Caretakers 69% - 133% FPL and MAGI Adults	\$8,138,251	\$0	\$813,825	\$0	\$7,324,426	90.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Non Newly Eligible	\$47,862	\$0	\$9,017	\$0	\$38,845	81.16%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Disabled Buy-In	\$124,967	\$0	\$56,673	\$0	\$68,294	54.65%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Continuous Eligibility for Children	\$69,898	\$0	\$31,699	\$0	\$38,199	54.65%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
SB 11-008: Aligning Medicaid Eligibility for Children	\$250,474	\$72,312	\$0	\$0	\$178,162	71.13%	General Fund
SB 11-250: Eligibility for Pregnant Women in Medicaid	\$3,754	\$1,084	\$0	\$0	\$2,670	71.13%	General Fund
Estimated FY 2020-21 Fee-for-Service Payments	\$14,370,820	\$2,639,596	\$945,710	\$0	\$10,785,514		
Final Estimated FY 2020-21 Medicaid Behavioral Health Community Programs Expenditure	\$860,579,410	\$207,578,428	\$56,591,999	\$0	\$596,408,983		

Using a weighted average FFP because the match rate changes on various timelines.

The ACA mandated that the Department pay for the HIPF on behalf of all for profit health providers. The mandate was repealed starting January 2020. The Department will pay the final payment in FY 2020-21 for services incurred in the second half of 2019.

		Exh	ibit BB - Calcula	tion of Fund Split	s		
		Calculation of Fur	nd Splits - FY 202	1-22 Behavioral I	Health Estimate		
Item	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate (1)	Source of Funding
Behavioral Health Capitation Base Traditional Clients	\$412,539,695	\$206,269,849	(\$1)	\$0	\$206,269,847		General Fund
Breast and Cervical Cancer Program	\$64,503	\$0	\$22,576	\$0	\$41,927		CF: Breast and Cervical Cancer Prevention and Treatment Fund
MAGI Parents and Caretakers 60% - 68% FPL	\$2,692,776	\$0	\$1,346,388	\$0	\$1,346,388	50.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
HB 09-1293: MAGI Parents and Caretakers 69% - 133% FPL and MAGI Adults	\$331,646,178	\$0	\$33,164,618	\$0	\$298,481,560	90.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Non Newly Eligible	\$2,712,328	\$0	\$542,466	\$0	\$2,169,862	80.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Disabled Buy-In	\$20,928,569	(\$1)	\$10,464,285	\$0	\$10,464,285	50.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Continuous Eligibility for Children	\$6,562,300	\$0	\$3,281,150	\$0	\$3,281,150	50.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
SB 11-008 Eligible Children	\$23,246,304	\$8,136,206	\$0	\$0	\$15,110,098	65.00%	General Fund
SB 11-250 Eligible Pregnant Adults	\$1,571,349	\$549,972	\$0	\$0	\$1,021,377	65.00%	General Fund
Estimated FY 2021-22 Capitation Expenditure Before Adjustments	\$801,964,002	\$214,956,026	\$48,821,482	\$0	\$538,186,494		
Estimated Date of Death Retractions	(\$2,556,725)	(\$661,655)	(\$167,146)	\$0	(\$1,727,924)	67.58%	CF: Variable
Estimated Incentive Payment	\$37,292,208	\$10,207,908	\$8,438,196	\$0	\$18,646,104		CF: Variable
Substance Abuse Disorder Treatment	\$182,936,323	\$29,576,342	\$13,662,202	\$0	\$139,697,779		CF: Variable
Estimated FY 2021-22 Capitation Expenditure	\$1,019,635,808	\$254,078,621	\$70,754,734	\$0	\$694,802,453	7012070	o
Behavioral Health Fee-for-Service Traditional Clients	\$5,855,944	\$2,927,972	\$0	\$0	\$2,927,972	50.00%	General Fund
Breast and Cervical Cancer Program	\$2,794	\$0	\$978	\$0	\$1,816	65.00%	CF: Breast and Cervical Cancer Prevention and Treatment Fund
MAGI Parents and Caretakers 60% - 68% FPL	\$78,594	\$0	\$39,297	\$0	\$39,297	50.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
HB 09-1293: MAGI Parents and Caretakers 69% - 133% FPL and MAGI Adults	\$8,477,598	\$0	\$847,760	\$0	\$7,629,838	90.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Non Newly Eligible	\$55,647	\$0	\$11,129	\$0	\$44,518	80.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Disabled Buy-In	\$117,784	\$0	\$58,892	\$0	\$58,892	50.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
Continuous Eligibility for Children	\$51,748	\$0	\$25,874	\$0	\$25,874	50.00%	CF: Healthcare Affordability and Sustainability Fee Cash Fund
SB 11-008: Aligning Medicaid Eligibility for Children	\$250,824	\$87,788	\$0	\$0	\$163,036		General Fund
SB 11-250: Eligibility for Pregnant Women in Medicaid	\$3,819	\$1,337	\$0	\$0	\$2,482	65.00%	General Fund
Estimated FY 2021-22 Fee-for-Service Payments	\$14,894,752	\$3,017,097	\$983,930	\$0	\$10,893,725		
Final Estimated FY 2021-22 Medicaid Behavioral Health Community Programs Expenditure	\$1,034,530,560	\$257,095,718	\$71,738,664	\$0	\$705,696,178		
Using a weighted average FFP because the match rate changes on va	irious timelines.						

		Exh	ibit BB - Calcula	tion of Fund Splits	S	
	(	Calculation of Fur	nd Splits - FY 202	2-23 Behavioral H	lealth Estimate	
Item	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate (1) Source of Funding
Behavioral Health Capitation Base Traditional Clients	\$460,249,916	\$230,124,958	(\$1)	\$0	\$230,124,959	50.00% General Fund
Breast and Cervical Cancer Program	\$66,894	\$0	\$23,413	\$0	\$43,481	65.00% CF: Breast and Cervical Cancer Prevention and Treatment Fund
MAGI Parents and Caretakers 60% - 68% FPL	\$8,727,744	\$0	\$4,363,872	\$0	\$4,363,872	50.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
HB 09-1293: MAGI Parents and Caretakers 69% - 133% FPL and MAGI Adults	\$377,856,351	\$1	\$37,785,635	\$0	\$340,070,715	90.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
Non Newly Eligible	\$5,704,030	\$1	\$1,140,806	\$0	\$4,563,223	80.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
Disabled Buy-In	\$24,007,762	\$0	\$12,003,881	\$0	\$12,003,881	50.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
Continuous Eligibility for Children	\$1,312	\$0	\$656	\$0	\$656	50.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
SB 11-008 Eligible Children	\$26,783,624	\$9,374,268	\$0	\$0	\$17,409,356	65.00% General Fund
SB 11-250 Eligible Pregnant Adults	\$1,684,775	\$589,671	\$0	\$0	\$1,095,104	65.00% General Fund
Estimated FY 2022-23 Capitation Expenditure Before Adjustments	\$905,082,408	\$240,088,899	\$55,318,262	\$0	\$609,675,247	
Date of Death Retractions	(\$2,556,725)	(\$661,655)	(\$167,146)	\$0	(\$1,727,924)	67.58% General Fund
Estimated Incentive Payment	\$40,098,593	\$10,934,255	\$9,115,041	\$0	\$20,049,297	50.00% CF: Variable
HB 18-1136 "Residential and Inpatient SUD"	\$182,936,323	\$28,613,850	\$14,716,393	\$0	\$139,606,080	76.31% CF: Variable
Annualize SB 20-033 Medicaid Buy-in Age 65 and Over	\$176,755	(\$15,538)	\$103,915	\$0	\$88,378	50.00% CF: HAS
Estimated FY 2022-23 Capitation Expenditure	\$1,125,737,354	\$278,959,811	\$79,086,465	\$0	\$767,691,078	
Behavioral Health Fee-for-Service Traditional Clients	\$6,282,923	\$3,141,461	\$0	\$0	\$3,141,462	50.00% General Fund
Breast and Cervical Cancer Program	\$0	\$0	\$0	\$0	\$0	65.00% CF: Breast and Cervical Cancer Prevention and Treatment Fund
MAGI Parents and Caretakers 60% - 68% FPL	\$247,442	\$0	\$123,721	\$0	\$123,721	50.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
HB 09-1293: MAGI Parents and Caretakers 69% - 133% FPL and MAGI Adults	\$9,319,307	\$0	\$931,931	\$0	\$8,387,376	90.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
Non Newly Eligible	\$113,608	\$0	\$22,722	\$0	\$90,886	80.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
Disabled Buy-In	\$131,178	\$0	\$65,589	\$0	\$65,589	50.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
Continuous Eligibility for Children	\$0	\$0	\$0	\$0	\$0	50.00% CF: Healthcare Affordability and Sustainability Fee Cash Fund
SB 11-008: Aligning Medicaid Eligibility for Children	\$280,548	\$98,192	\$0	\$0	\$182,356	65.00% General Fund
SB 11-250: Eligibility for Pregnant Women in Medicaid	\$3,976	\$1,392	\$0	\$0	\$2,584	65.00% General Fund
Estimated FY 2022-23 Fee-for-Service Payments	\$16,378,982	\$3,241,045	\$1,143,963	\$0	\$11,993,974	
Final Estimated FY 2022-23 Medicaid Behavioral Health Community Programs Expenditure	\$1,142,116,336	\$282,200,856	\$80,230,428	\$0	\$779,685,052	
<sup>1</sup> Using a weighted average FFP because the match rate changes on va	arious timelines.					

	Cash Funds Report												
	]	FY 2020-21			FY 2021-22		FY 2022-23						
Cash Fund	Spending Authority	Estimate	Change	Base Spending Authority	Estimate		Base Spending Authority Estimate		Change				
Behavioral Health Capitations													
Healthcare Affordability and Sustainability Fee Cash Fund	\$54,005,555	\$55,622,235	\$1,616,680	\$62,633,717	\$70,720,711	\$8,086,994	\$62,737,631	\$79,051,560	\$16,313,929				
Breast and Cervical Cancer Prevention and Treatment Fund	\$39,960	\$24,055	(\$15,905)	\$40,168	\$34,023	(\$6,145)	\$40,168	\$34,907	(\$5,261)				
Behavioral Health Capitations Total Cash Funds	\$54,045,515	\$55,646,290	\$1,600,775	\$62,673,885	\$70,754,734	\$8,080,849	\$62,777,799	\$79,086,467	\$16,308,668				
Behavioral Health Fee-for-Service													
Healthcare Affordability and Sustainability Fee Cash Fund	\$723,982	\$944,765	\$220,783	\$722,980	\$982,952	\$259,972	\$722,980	\$1,143,963	\$420,983				
Breast and Cervical Cancer Prevention and Treatment Fund	\$90,941	\$945	(\$89,996)	\$90,568	\$978	(\$89,590)	\$90,568	\$0	(\$90,568)				
Behavioral Health Fee-for-Service Total Cash Funds	\$814,923	\$945,710	\$130,787	\$813,548	\$983,930	\$170,382	\$813,548	\$1,143,963	\$330,415				

					F	xhibit CC - Med		Health Commur tions and Estimates			nary							
Annual Total Expenditures	FY 2019-20 Actual FY		FY 2020-21 Appropriated		FY 2020-21 Estimate		FY 2020-21 Change from Appropriation		FY 2021-22 Estimate		FY 2021-22 Change from FY 2020- 21 Estimate		FY 2021-22 Change from FY 2020- 21 Appropriation		FY 2022-23 Estimate		FY 2022-23 Change from FY 202 22 Estimate	
Annual Fotal Expenditures	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure
Behavioral Health Capitation Payments																		
Adults 65 and Older (OAP-A)	47,551	\$13,729,724	61,658	18,319,801	48,301	\$12,843,483	(13,357)	(\$5,476,318)	48,558	\$13,297,357	257	\$453,874	(13,100)	(\$5,022,444)	50,169	\$14,152,935	1,611	\$855,578
Disabled Individuals	90,234	\$145,078,274	115,406	194,112,464	93,979	138,953,555	(21,427)	(\$55,158,909)	96,873	147,532,773	2,894	\$8,579,218	(18,533)	(\$46,579,691)	100,605	157,815,247	3,732	\$10,282,474
Low Income Adults	178,223	\$65,634,680	221,367	87,537,526	189,113	82,235,758	(32,254)	(\$5,301,768)	222,133	99,491,790	33,020	\$17,256,032	766	\$11,954,264	265,505	122,475,016	43,372	\$22,983,226
Expansion Parents & Caretakers	59,499	\$17,094,962	80,379	24,782,268	81,695	23,419,267	1,316	(\$1,363,001)	80,208	23,685,845	(1,487)	\$266,578	(171)	(\$1,096,423)	83,255	25,319,482	3,047	\$1,633,637
MAGI Adults	322,951	\$230,357,768	403,669	314,794,409	381,763	283,742,205	(21,906)	(\$31,052,204)	405,854	310,672,661	24,091	\$26,930,456	2,185	(\$4,121,748)	454,361	358,240,897	48,507	\$47,568,236
Eligible Children	463,472	\$139,057,078	582,612	184,982,624	503,854	172,489,287	(78,758)	(\$12,493,337)	492,981	173,831,852	(10,873)	\$1,342,565	(89,631)	(\$11,150,772)	528,643	192,017,671	35,662	\$18,185,819
Foster Care	21,320	\$31,551,146	27,464	44,443,237	20,887	32,086,524	(6,577)	(\$12,356,713)	21,100	33,387,221	213	\$1,300,697	(6,364)	(\$11,056,016)	21,472	34,994,266	372	\$1,607,045
Breast and Cervical Cancer Program	137	\$49,771	168	66,434	144	62,619	(24)	(\$3,815)	144	64,503	0	\$1,884	(24)	(\$1,931)	145	66,894	1	\$2,391
Sub-total Behavioral Health Capitation Payments	1,183,387	\$642,553,403	1,492,723	\$869,038,763	1,319,736	\$745,832,698	(172,987)	(\$123,206,065)	1,367,851	\$801,964,002	48,115	\$56,131,304	(124,872)	(\$67,074,761)	1,504,154	\$905,082,408	136,303	\$103,118,406
Date of Death Retractions		(\$2,556,725)		\$28,165,635		(\$2,556,725)		(\$30,722,360)		(\$2,556,725)		\$0		(\$30,722,360)		(\$2,556,725	)	SC
HB 17-1353 "Implement Medicaid Delivery and Payment Incentives" - Incentive Payments		\$22,587,965		\$5,708,251		\$32,127,670		\$26,419,419		\$37,292,208		\$5,164,538		\$31,583,957		\$40,098,593		\$2,806,385
Health Insurance Provider Fee Payment		\$0		\$173,868,069		\$5,337,930		(\$168,530,139)		\$0		\$168,530,139		(\$173,868,069)		\$0		SC
HB 18-1136 "Residential and Inpatient SUD"		\$0		\$43,467,017		\$43,467,017		\$0		\$182,936,323		\$182,936,323		\$139,469,307		\$182,936,323		SC
Risk Corridor Payment		\$0		\$0		\$22,000,000		\$0		\$0		\$0		\$0		\$0		SC
Annualize SB 20-033 Medicaid Buy-in Age 65 and Over		\$0		\$0		\$0		\$0		\$0		\$0		\$0		\$176,755		\$176,755
Total Behavioral Health Capitation Payments	1,183,387	\$662,584,643	1,492,723	\$1,120,247,735	1,319,736	\$846,208,589	(172,987)	(\$296,039,145)	1,367,851	\$1,019,635,808	48,115	\$412,762,304	(124,872)	(\$100,611,927)	1,504,154	\$1,125,737,354	136,303	\$106,101,546
Incremental Percent Change							-11.59%	-24.46%			3.65%	20.49%	-8.37%	-8.98%			9.96%	10.419
Behavioral Health Fee-for-Service Payments																		
Inpatient Services		\$1,221,675		\$1,304,501		\$1,334,033		\$29,532		\$1,382,670		\$48,637		\$78,169		\$1,520,450		\$137,780
Outpatient Services		\$11,692,840		\$12,738,442		\$13,026,829		\$288,387		\$13,501,762		\$474,933		\$763,320		\$14,847,184		\$1,345,422
Physician Services		\$9,119		\$9,737		\$9,957		\$220		\$10,320		\$363		\$583		\$11,349		\$1,029
Total Behavioral Health Fee-for-Service Payments		\$12,923,634		\$14,052,680		\$14,370,820		\$318,140		\$14,894,752		\$523,932		\$842,072		\$16,378,983		\$1,484,231
Total Behavioral Health Community Programs		\$675,508,277		\$1,134,300,415		\$860,579,409		(\$273,721,005)		\$1,034,530,560		\$173,951,151		(\$99,769,855)		\$1,142,116,337		\$107,585,777
Incremental Percent Change								-24.13%				20.21%		-8 80%				10.40

			it DD - Medicaid Behavioral Health Community Pr						
		Medica	id Behavioral Health Community Programs Averag	e Monthly Caselo	ad				
Item	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Breast and Cervical Cancer Program	TOTAL BEHAVIORAL HEALTH
FY 2010-11 Actuals	38,921	64,052	88,982	27,167	-	302,410	18,393	531	540,456
FY 2010-11 Actuals	39,740	67,869	100,854	35,461	1,134	334,633	18,034	597	598,322
% Change from FY 2010-11	2.10%	5.96%	13.34%	30.53%	0.00%	10.66%	-1.95%	12.43%	10.71%
FY 2012-13 Actuals	40,827	71,859	107,760	41,545	10,634	368,079	17,777	623	659,104
% Change from FY 2011-12	2.74%	5.88%	6.85%	17.16%	837.74%	9.99%	-1.43%	4.36%	10.16%
FY 2013-14 Actuals	41,836	76,837	138,897	47,082	87,243	424,377	18,267	559	835,098
% Change from FY 2012-13	2.47%	6.93%	28.89%	13.33%	720.42%	15.30%	2.76%	-10.27%	26.70%
FY 2014-15 Actuals	41,817	80,641	178,328	71,989	241,392	495,836	20,036	351	1,130,390
% Change from FY 2013-14	-0.05%	4.95%	28.39%	52.90%	176.69%	16.84%	9.68%	-37.21%	35.36%
FY 2015-16 Actuals	42,403	85,546	179,514	86,964	320,374	526,694	19,935	322	1,261,752
% Change from FY 2014-15	1.40%	6.08%	0.67%	20.80%	32.72%	6.22%	-0.50%	-8.26%	11.62%
FY 2016-17 Actuals	43,941	85,111	176,957	101,059	347,848	534,204	20,310	235	1,309,665
% Change from FY 2015-16	3.63%	-0.51%	-1.42%	16.21%	8.58%	1.43%	1.88%	-27.02%	3.80%
FY 2017-18 Actuals	45,907	87,503	192,207	74,610	352,607	503,118	21,473	155	1,277,580
% Change from FY 2016-17	4.47%	2.81%	8.62%	-26.17%	1.37%	-5.82%	5.73%	-34.04%	-2.45%
FY 2018-19 Actuals	47,686	90,347	190,316	63,563	330,524	479,628	21,815	145	1,224,024
% Change from FY 2017-18	3.88%	3.25%	-0.98%	-14.81%	-6.26%	-4.67%	1.59%	-6.45%	-4.19%
FY 2019-20 Actuals	47,551	90,234	178,223	59,499	322,951	463,472	21,320	137	1,183,387
% Change from FY 2018-19	-0.28%	-0.13%	-6.35%	-6.39%	-2.29%	-3.37%	-2.27%	-5.52%	-3.32%
FY 2020-21 Projections	48,301	93,979	189,113	81,695	381,763	503,854	20,887	144	1,319,736
% Change from FY 2019-20	1.58%	4.15%	6.11%	37.00%	18.00%	9.00%	-2.00%	5.00%	11.52%
FY 2021-22 Projections	48,558	96,873	222,133	80,208	405,854	492,981	21,100	144	1,367,851
% Change from FY 2020-21	0.53%	3.08%	17.46%	-1.82%	6.31%	-2.16%	1.02%	0.00%	3.65%
FY 2022-23 Projections	50,169	100,605	265,505	83,255	454,361	528,643	21,472	145	1,504,154
% Change from FY 2021-22	3.32%	3.85%	19.53%	3.80%	11.95%	7.23%	1.76%	1.00%	9.96%
FY 2020-21 Appropriation	49,615	93,640	194,250	70,601	343,167	479,492	22,808	131	1,253,704
Difference between the FY 2020-21 Appropriation and the FY 2020-21 Projection	(1,314)	339	(5,137)	11,094	38,596	24,362	(1,921)	13	66,032

				Expanded Me	dicaid Average M	onthly Caseload	for Behavioral He	alth Community l	Programs					
Item	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 Pregnant Adults	SB 11-250 Eligible Pregnant Adults	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	Breast & Cervical Cancer Program	TOTAL BEHAVIORAL HEALTH
FY 2010-11 Actuals	38,921	7,767	56,285	-	81,114	7,868	-	27,167	-	302,410	-	18,393	531	540,456
FY 2011-12 Actuals	39,740	8,383	59,434	52	93,224	7,630	-	35,461	1,134	334,633	-	18,034	597	598,322
% Change from FY 2010-11	2.10%	7.93%	5.59%	0.00%	14.93%	-3.02%	0.00%	30.53%	0.00%	10.66%	0.00%	-1.95%	12.43%	79.20%
FY 2012-13 Actuals	40,827	9,051	61,920	888	99,392	8,024	344	41,545	10,634	359,843	8,236	17,777	623	659,104
% Change from FY 2011-12	2.74%	7.97%	4.18%	1607.69%	6.62%	5.16%	0.00%	17.16%	837.74%	7.53%	0.00%	-1.43%	4.36%	2499.72%
FY 2013-14 Actuals	41,836	9,853	64,424	2,560	124,680	13,160	1,057	47,082	87,243	399,032	25,345	18,267	559	835,098
% Change from FY 2012-13	2.47%	8.86%	4.04%	188.29%	25.44%	64.01%	207.27%	13.33%	720.42%	10.89%	207.73%	2.76%	-10.27%	1445.23%
FY 2014-15 Actuals	41,817	10,466	66,548	3,627	161,682	14,897	1,749	71,989	241,392	445,723	50,113	20,036	351	1,130,390
% Change from FY 2013-14	-0.05%	6.22%	3.30%	41.68%	29.68%	13.20%	65.47%	52.90%	176.69%	11.70%	97.72%	9.68%	-37.21%	470.99%
FY 2015-16 Actuals	42,403	10,529	68,800	6,217	163,342	14,413	1,759	86,964	320,374	467,193	59,501	19,935	322	1,261,752
% Change from FY 2014-15	1.40%	0.60%	3.38%	71.41%	1.03%	-3.25%	0.57%	20.80%	32.72%	4.82%	18.73%	-0.50%	-8.26%	143.45%
FY 2016-17 Actuals	43,941	11,241	67,619	6,251	161,422	13,567	1,968	101,059	347,848	469,297	64,907	20,310	235	1,309,665
% Change from FY 2015-16	3.63%	6.76%	-1.72%	0.55%	-1.18%	-5.87%	11.88%	16.21%	8.58%	0.45%	9.09%	1.88%	-27.02%	23.24%
FY 2017-18 Actuals	45,907	11,797	67,531	8,175	179,853	10,125	2,229	74,610	352,607	438,772	64,346	21,473	155	1,277,580
% Change from FY 2016-17	4.47%	4.95%	-0.13%	30.78%	11.42%	-25.37%	13.26%	-26.17%	1.37%	-6.50%	-0.86%	5.73%	-47.46%	-34.52%
FY 2018-19 Actuals	47,686	12,721	68,639	8,987	175,827	12,196	2,293	63,563	330,524	420,253	59,375	21,815	145	1,224,024
% Change from FY 2017-18	3.88%	7.83%	1.64%	9.93%	-2.24%	20.45%	2.87%	-14.81%	-6.26%	-4.22%	-7.73%	1.59%	-6.45%	6.48%
FY 2019-20 Actuals	47,551	13,029	66,530	10,675	164,467	11,547	2,209	59,499	322,951	407,548	55,924	21,320	137	1,183,387
% Change from FY 2018-19	-0.28%	2.42%	-3.07%	18.78%	-6.46%	-5.32%	-3.66%	-6.39%	-2.29%	-3.02%	-5.81%	-2.27%	-5.52%	-22.90%
FY 2020-21 Projections	48,301	13,435	65,964	14,580	172,515	13,150	3,448	81,695	381,763	438,020	65,834	20,887	144	1,319,736
% Change from FY 2019-20	1.58%	3.12%	-0.85%	36.58%	4.89%	13.88%	56.09%	37.30%	18.21%	7.48%	17.72%	-2.03%	5.11%	199.08%
FY 2021-22 Projections	48,558	13,669	69,462	13,742	204,182	14,443	3,508	80,208	405,854	427,055	65,926	21,100	144	1,367,851
% Change from FY 2020-21	0.53%	1.74%	5.30%	-5.75%	18.36%	9.83%	1.74%	-1.82%	6.31%	-2.50%	0.14%	1.02%	0.00%	34.90%
FY 2022-23 Projections	50,169	14,143	71,157	15,305	245,688	16,166	3,652	83,255	454,361	454,905	73,738	21,472	145	1,504,154
% Change from FY 2021-22	3.32%	3.47%	2.44%	11.37%	20.33%	11.93%	4.10%	3.80%	11.95%	6.52%	11.85%	1.76%	0.69%	93.53%
FY 2020-21 Appropriation	49,615	13,467	69,889	10,284	179,310	12,442	2,498	70,601	343,167	418,640	60,852	22,808	131	1,253,704
Difference between the Total FY 2020-21 Projection and Appropriation	(1,314)	(32)	(3,925)	4,296	(6,795)	708	950	11,094	38,596	19,380	4,982	(1,921)	13	66,032

		Exhibit DD - Medicaid Behavioral Health Co	ommunity Programs, Behavioral Health Capita	ntion Payments Pe	er Capita Historic	al Summary			
		Behav	vioral Health Capitation Payments Per Capita	History					
Item	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Breast and Cervical Cancer Program	TOTAL PER CAPITA
FY 2010-11 Actuals	\$158.01	\$1,438.40	\$191.35	-	-	\$144.55	\$3,086.22	\$137.62	\$399.41
FY 2011-12 Actuals	\$143.79	\$1,450.96	\$204.32	-	-	\$148.67	\$2,846.52	\$164.08	\$378.76
% Change from FY 2011-12	-9.00%	0.87%	6.78%	-	0.00%	2.85%	-7.77%	19.23%	-5.17%
FY 2012-13 Actuals	\$153.46	\$1,566.68	\$217.96	\$184.26	-	\$157.45	\$2,422.83	\$215.88	\$381.04
% Change from FY 2011-12	6.73%	7.98%	6.67%	0.00%	0.00%	5.90%	-14.88%	31.57%	0.60%
FY 2013-14 Actuals	\$155.41	\$1,572.92	\$195.57	\$215.33	-	\$159.71	\$2,125.00	\$282.78	\$325.12
% Change from FY 2012-13	1.27%	0.40%	-10.27%	16.86%	0.00%	1.44%	-12.29%	30.99%	-14.68%
FY 2014-15 Actuals	\$156.24	\$1,572.06	\$168.03	\$163.99	\$53.50	\$154.36	\$1,827.87	\$434.03	\$266.55
% Change from FY 2013-14	0.53%	-0.05%	-14.08%	-23.84%	0.00%	-3.35%	-13.98%	53.49%	-18.01%
FY 2015-16 Actuals	\$160.23	\$1,587.59	\$236.57	\$116.70	\$289.07	\$168.83	\$1,952.47	\$788.12	\$329.65
% Change from FY 2014-15	2.55%	0.99%	40.79%	-28.84%	440.32%	9.38%	6.82%	81.58%	23.67%
FY 2016-17 Actuals	\$157.62	\$1,664.11	\$315.82	\$311.26	\$479.26	\$215.67	\$2,560.57	\$574.14	\$435.20
% Change from FY 2015-16	-1.63%	4.82%	33.50%	166.72%	65.79%	27.74%	31.15%	-27.15%	32.02%
FY 2017-18 Actuals	\$163.44	\$1,445.22	\$281.18	\$725.15	\$581.35	\$235.95	\$1,736.19	\$801.59	\$472.16
% Change from FY 2016-17	3.69%	-13.15%	-10.97%	132.97%	21.30%	9.40%	-32.20%	39.62%	8.49%
FY 2018-19 Actuals	\$188.73	\$1,525.06	\$309.85	\$561.70	\$635.14	\$256.54	\$1,346.62	\$556.01	\$493.36
% Change from FY 2017-18	15.47%	5.52%	10.19%	-22.54%	9.25%	8.73%	-22.44%	-30.64%	4.49%
FY 2019-20 Actuals	\$289.03	\$1,659.88	\$382.19	\$296.03	\$734.04	\$309.66	\$1,531.98	\$377.15	\$559.87
% Change from FY 2018-19	53.14%	8.84%	23.35%	-47.30%	15.57%	20.70%	13.76%	-32.17%	13.48%
FY 2020-21 Projections	\$265.91	\$1,478.56	\$434.85	\$286.67	\$743.24	\$342.34	\$1,536.20	\$434.85	\$565.14
% Change from FY 2019-20	40.89%	-3.05%	40.34%	-48.96%	17.02%	33.44%	14.08%	-21.79%	0.94%
FY 2021-22 Projections	\$273.84	\$1,522.95	\$447.89	\$295.31	\$765.48	\$352.61	\$1,582.33	\$447.94	\$586.29
% Change from FY 2020-21	2.99%	3.00%	3.00%	3.01%	3.00%	3.00%	3.00%	3.01%	3.74%
FY 2022-23 Projections	\$282.10	\$1,568.66	\$461.29	\$304.12	\$788.45	\$363.23	\$1,629.79	\$461.34	\$601.72
% Change from FY 2021-22	3.02%	3.00%	2.99%	2.98%	3.00%	3.01%	3.00%	\$0.03	2.63%

				Expanded Me	dicaid Per Capit	a Summary for E	ehavioral Health	Capitation Paym	ents					
Item	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 Pregnant Adults	SB 11-250 Eligible Pregnant Adults	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	Breast & Cervical Cancer Program	TOTAL PER CAPITA
FY 2010-11 Actuals	\$158.01	\$1,254.68	\$1,463.76	-	\$191.15	\$193.41	-	-	-	\$144.55	-	\$3,086.22	\$137.62	\$399.4
FY 2011-12 Actuals	\$143.79	\$1,292.83	\$1,474.53	-	\$204.11	\$206.96	-	-	-	\$148.67	-	\$2,846.52	\$164.08	\$378.7
FY 2012-13 Actuals	\$153.46	\$1,424.23	\$1,609.97	-	\$219.03	\$214.04	-	\$184.26	-	\$161.05	-	\$2,422.83	\$215.88	\$381.0
% Change from FY 2011-12	6.73%	10.16%	9.19%	0.00%	7.31%	3.42%	0.00%	0.00%	0.00%	8.33%	0.00%	-14.88%	31.57%	0.60%
FY 2013-14 Actuals	\$155.41	\$1,441.06	\$1,654.17	-	\$203.82	\$133.12	-	\$215.33	-	\$169.85	-	\$2,125.00	\$282.78	\$325.1
% Change from FY 2012-13	1.27%	1.18%	2.75%	0.00%	-6.94%	-37.81%	0.00%	16.86%	0.00%	5.46%	0.00%	-12.29%	30.99%	-14.68%
FY 2014-15 Actuals	\$156.24	\$1,460.32	\$1,647.94	\$502.31	\$173.01	\$133.64	-	\$163.99	\$53.50	\$171.71	-	\$1,827.87	\$434.03	\$266.5
% Change from FY 2013-14	0.53%	1.34%	-0.38%	0.00%	-15.12%	0.39%	0.00%	-23.84%	0.00%	1.10%	0.00%	-13.98%	53.49%	-18.01%
FY 2015-16 Actuals	\$160.23	\$1,613.80	\$1,654.26	\$805.35	\$237.75	\$248.73	-	\$116.70	\$289.07	\$188.07	-	\$1,952.47	\$788.12	\$329.6
% Change from FY 2014-15	2.55%	10.51%	0.38%	60.33%	37.42%	86.12%	0.00%	-28.84%	440.32%	9.53%	0.00%	6.82%	81.58%	23.67%
FY 2016-17 Actuals	\$157.62	\$1,601.53	\$1,725.67	\$1,110.70	\$317.67	\$290.67	\$337.08	\$311.26	\$479.26	\$213.84	\$228.89	\$2,560.57	\$574.14	\$435.2
% Change from FY 2015-16	-1.63%	-0.76%	4.32%	37.92%	33.62%	16.86%	0.00%	166.72%	65.79%	13.70%	0.00%	31.15%	-27.15%	32.02%
FY 2017-18 Actuals	\$163.44	\$1,281.74	\$1,498.72	\$1,239.22	\$276.58	\$373.82	\$232.03	\$725.15	\$581.35	\$239.89	\$209.07	\$1,736.19	\$801.59	\$472.1
% Change from FY 2016-17	3.69%	-19.97%	-13.15%	11.57%	-12.93%	28.61%	-31.16%	132.97%	21.30%	12.18%	-8.66%	-32.20%	39.62%	8.49%
FY 2018-19 Actuals	\$188.73	\$1,408.76	\$1,598.26	\$1,130.65	\$309.02	\$325.53	\$289.96	\$561.70	\$635.14	\$254.49	\$271.05	\$1,346.62	\$556.01	\$493.3
% Change from FY 2017-18	15.47%	9.91%	6.64%	-8.76%	11.73%	-12.92%	24.97%	-22.54%	9.25%	6.09%	29.65%	-22.44%	-30.64%	4.49%
FY 2019-20 Actuals	\$289.03	\$1,655.06	\$1,678.87	\$1,547.39	\$383.24	\$371.02	\$362.45	\$296.03	\$734.04	\$304.27	\$348.91	\$1,531.98	\$377.15	\$559.8
% Change from FY 2018-19	53.14%	17.48%	5.04%	36.86%	24.02%	13.97%	25.00%	-47.30%	15.57%	19.56%	28.73%	13.76%	-32.17%	13.489
FY 2020-21 Projections	\$265.91	\$1,478.56	\$1,478.56	\$1,478.56	\$434.85	\$434.85	\$434.85	\$286.67	\$743.24	\$342.34	\$342.34	\$1,536.20	\$434.85	\$565.1
% Change from FY 2019-20	-8.00%	-10.66%	-11.93%	-4.45%	13.47%	17.20%	19.98%	-3.16%	1.25%	12.51%	-1.88%	0.28%	15.30%	0.94%
FY 2021-22 Projections	\$273.84	\$1,522.95	\$1,522.95	\$1,522.95	\$447.89	\$447.89	\$447.89	\$295.31	\$765.48	\$352.61	\$352.61	\$1,582.33	\$447.94	\$586.2
% Change from FY 2020-21	2.99%	3.00%	3.00%	3.00%	3.00%	3.00%	3.00%	3.01%	2.99%	3.00%	3.00%	3.00%	3.01%	3.74%
FY 2022-23 Projections	\$282.10	\$1,568.66	\$1,568.66	\$1,568.66	\$461.29	\$461.29	\$461.29	\$304.12	\$788.45	\$363.23	\$363.23	\$1,629.79	\$461.34	\$601.7
% Change from FY 2021-22	3.02%	3.00%	3.00%	3.00%	2.99%	2.99%	2.99%	2.98%	3.00%	3.01%	3.01%	3.00%	2.99%	2.63%

Exhibit DD - Medicaid Behavioral Health Community Programs, Expenditures Historical Summary  Annual Total Expenditures														
	Item	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Breast & Cervical Cancer Program	TOTAL BEHAVIORAL HEALTH				
	Capitations	\$6,533,297	\$126,772,700	\$29,964,300	\$11,805,595	\$12,914,408	\$76,537,197	\$36,623,205	\$152,344	\$301,303,0				
	Fee-for-Service													
	Inpatient Services	\$23,759	\$667,573	\$56,164	\$5,318	\$47,488	\$147,305	\$26,023	S(	\$973,62				
FY 2012-13	Outpatient Services	\$15,873	\$746,068	\$1,003,284	\$301,289	\$270,481	\$1,035,757	\$140,576	\$(	\$3,513,33				
	Physician Services	\$0	\$61,602	\$5,800	\$2,561	\$256	\$9,712	\$2,308	S(	\$82,24				
-	Subtotal Fee-for-Service	\$39,632	\$1,475,243	\$1,065,248	\$309,168		\$1,192,774	\$168,907	\$(	\$4,569,19				
	Total	\$6,572,929	\$128,247,943 \$135,811,614	\$31,029,548 \$42,468,350	\$12,114,763		\$77,729,971 \$88,922,742	\$36,792,112		\$305,872,24				
-	Capitations	\$6,794,071	\$135,811,614	542,468,330	\$10,148,824	\$92,611,488	\$88,922,742	\$38,922,470	\$253,774	\$415,933,33				
	Fee-for-Service Innatient Services	\$12,637	\$701.499	\$138,091	\$9.711	\$199,734	\$181,770	\$33,646	SI	\$1,277.0				
-	, , , , , , , , , , , , , , , , , , , ,		\$555,506	\$1,039,616			\$885,140	\$33,646 \$75,378	SI SI	. , , , , , , , , ,				
FY 2013-14	Outpatient Services Physician Services	\$10,423 \$50	\$32,316	\$7,787	\$276,800 \$1,262		\$10,754	\$1,877	SI SI	\$3,956,12				
	Subtotal Fee-for-Service	\$23,110	\$1,289,321	\$1,185,495	\$287,773		\$1,077,664	\$1,877	50	\$5,296,3				
	Total	\$6,817,181	\$137,100,935	\$43,653,845	\$10,436,597	\$93,933,574	\$90,000,406	\$39,033,371	\$253,774	\$421,229,61				
	% Change from Previous Year	3.72%	6.90%	40.68%	-13.85%	609,86%	15.79%	6.09%	66,58%	37.719				
	% Change from Frevious Year Capitations	\$6,926,061	\$141,634,009	\$55,885,779	\$31,455,667	\$166,708,082	\$115,210,684	\$52,005,193	\$134,923	\$569,960.3				
-	Fee-for-Service	30,720,001	\$141,054,007	333,003,779	331,433,007	3100,708,082	5.1.5,210,004	332,003,193	3134,923	3309,960,3				
	Inpatient Services	\$68,648	\$419,127	\$41,495	\$8,711	\$338,450	\$117,114	\$44,071	SC	\$1,037,6				
F	Outpatient Services	\$15,159	\$578,816	\$1,289,044	\$386,626	\$2,835,698	\$1,206,136	\$109.984	SC	\$6,421,40				
FY 2014-15	Physician Services	\$0	\$40,084	\$7,568	\$909		\$7,396	\$1,407	SC	\$66,34				
F	Subtotal Fee-for-Service	\$83,807	\$1,038,027	\$1,338,106	\$396,247	\$3,183,128	\$1,330,646	\$155,462	SC	\$7,525,4				
	Total	\$7,009,868	\$142,672,036	\$57,223,885	\$31,851,914		\$116,541,330	\$52,160,655	\$134,923	\$577,485,8				
ŀ	% Change from Previous Year	2.83%	4.06%	31.09%	205.19%	80.86%	29.49%	33.63%	-46.83%	37.10				
	Capitations	\$7,502,928	\$126,461,139	\$54,045,657	\$54,103,151	\$204,989,597	\$118,710,699	\$37,281,250	\$124,247	\$603,218,60				
ŀ	Fee-for-Service	0.,000,000			0. 1,,	0201,000,000			0.12.1,2.1					
	Inpatient Services	\$196,797	\$329,254	\$24,417	\$15,147	\$371,092	\$112,391	\$35,382	SC	\$1,084,4				
FY 2015-16	Outpatient Services	\$14,779	\$591,149	\$1,409,045	\$478,376	\$3,016,043	\$1,284,583	\$139,439	\$4,516	\$6,937,9				
FY 2015-16	Physician Services	\$117	\$40,917	\$9,413	\$935	\$8,821	\$1,974	\$2,254	SC	\$64,4				
	Subtotal Fee-for-Service	\$211,694	\$961,320	\$1,442,875	\$494,457	\$3,395,956	\$1,398,948	\$177,074	\$4,516	\$8,086,83				
- 1	Total	\$7,714,622	\$127,422,459	\$55,488,532	\$54,597,608	\$208,385,553	\$120,109,647	\$37,458,324	\$128,763	\$611,305,50				
	% Change from Previous Year	10.05%	-10.69%	-3.03%	71.41%	22.66%	3.06%	-28.19%	-4.57%	5.869				
	Capitations	\$8,999,674	\$137,785,026	\$58,968,966	\$35,703,386	\$209,929,370	\$123,045,127	\$29,376,555	\$80,621	\$603,888,7				
	Fee-for-Service													
	Inpatient Services	\$31,244	\$120,848	\$9,033	\$5,368	\$107,847	\$86,132	\$19,653	S(	\$380,12				
FY 2016-17	Outpatient Services	\$15,718	\$550,742	\$1,423,199	\$634,520	\$3,154,639	\$1,428,144	\$137,585	\$4,855	\$7,349,40				
	Physician Services	\$0	\$1,240	\$4,962	\$1,064		\$1,402	\$1,250		\$20,4				
-	Subtotal Fee-for-Service	\$46,962	\$672,830	\$1,437,194	\$640,953		\$1,515,679	\$158,488	\$4,911	\$7,749,9				
-	Total	\$9,046,636	\$138,457,856 8.66%	\$60,406,160 8.86%	\$36,344,339		\$124,560,806	\$29,535,043		\$611,638,69				
	% Change from Previous Year	17.27%	\$166% \$122,424,608	\$60,013,486	-33.43%	2.31%	3.71% \$103,102,542	-21.15%	-33.57%	0.059				
	Capitations Fee-for-Service	\$8,629,729	\$122,424,008	500,013,480	\$6,123,381	\$185,185,277	\$103,102,342	\$27,339,713	\$44,926	\$512,863,66				
-	Inpatient Services	\$40,632	\$115,736	\$49,246	\$101,011	\$703,434	\$169,692	\$4,622	Sc	\$1,184,3				
	Outpatient Services	\$10,978	\$758,657	\$1,887,442	\$1,220,134	\$3,127,821	\$2,001,342	\$174,562	\$250,522	\$9,431,43				
FY 2017-18	Physician Services	\$0	\$568	\$1,473	\$1,801	\$722	\$2,408	\$111	\$(	\$7,0				
-	Subtotal Fee-for-Service	\$51,611	\$874,961	\$1,938,161	\$1,322,946		\$2,173,441	\$179,294	\$250,522	\$10,622,9				
-	Total	\$8,681,340	\$123,299,569 -10.95%	\$61,951,647 2,56%	\$7,446,327		\$105,275,983 -15.48%	\$27,519,007	\$295,448	\$523,486,5				
	% Change from Previous Year	-4.04%	-10.95% \$152,252,743	2.56% \$69,663,107	-79.51%	-11.34% \$213,149,227	-15.48% \$122,179,061	-6.83%	245.42%	-14.419 \$615,262,7				
-	Capitations Fee-for-Service	\$11,990,404	\$152,252,743	\$69,663,107	\$14,611,428	\$213,149,227	\$122,179,061	\$31,364,940	\$51,823	3615,262,7.				
	Inpatient Services	\$40,632	\$115,736	\$49.246	\$101,011	\$703,434	\$169.692	\$4,622	Sr.	\$1,184,3				
F31 4040 44	Outpatient Services	\$10,978	\$758,657	\$1,887,442	\$1,220,134		\$2,001,342	\$174,562	\$250,522	\$9,431,4				
FY 2018-19	Physician Services	\$0	\$568	\$1,473	\$1,801	\$722	\$2,408	\$111	S(	\$7,0				
ļ.	Subtotal Fee-for-Service	\$51,611	\$874,961	\$1,938,161	\$1,322,946		\$2,173,441	\$179,294		\$10,622,9				
L	Total	\$12,042,015	\$153,127,704	\$71,601,268	\$15,934,374		\$124,352,502	\$31,544,234		\$625,885,6				
	% Change from Previous Year	38.71%	24.19%	15.58%	113.99%	14.79%	18.12%	14.63%	2.33%	19.569				
L	Capitations	\$13,744,754	\$149,788,038	\$68,119,392	\$17,615,002	\$237,073,838	\$143,527,878	\$32,664,067	\$51,674	\$662,584,6				
-	Fee-for-Service													
	Inpatient Services	\$0	\$80,152	\$64,040	\$148,676	\$782,088	\$132,157	\$14,562	S(	\$1,221,6				
FY 2019-20	Outpatient Services	\$12,459	\$1,344,127	\$2,188,220	\$1,410,076	\$4,287,624	\$2,230,913	\$216,743	\$2,677	\$11,692,8				
	Physician Services	\$0	\$833	\$1,483	\$1,785	\$2,209	\$2,573	\$235	S(	\$9,1				
ļ.	Subtotal Fee-for-Service	\$12,459	\$1,425,112	\$2,253,743	\$1,560,537	\$5,071,921	\$2,365,643	\$231,541	\$2,677	\$12,923,63				
	Total	\$13,757,213 14.24%	\$151,213,150	\$70,373,135	\$19,175,539		\$145,893,521	\$32,895,608 4.28%	\$54,351 -82.02%	\$675,508,2				
-	% Change from Previous Year		-1.25%	-1.72%	20.34%	11.60%	17.32%							

				Е	thibit DD - Medic		ded Annual Total		itures Historical S	ummary					
	Item	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 Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children (AFDC-C/BC)	SB 11-008 Eligible Children	Foster Care	Breast and Cervical Cancer Program	TOTAL BEHAVIORAL HEALTH
	Capitations	\$6,533,297	\$15,283,706	\$109,667,124	\$1,821,870	\$27,973,392	\$1,990,908	\$0	\$11,805,595	\$12,914,408	\$76,537,197	\$0	\$36,623,205	\$152,344	\$301,303,046
	Fee-for-Service	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FY 2012-13	Inpatient Services	\$23,759	\$89,128	\$568,472	\$9,972	\$56,164	S0	\$0	\$5,318	\$47,488	\$147,305	\$0	\$26,023	\$0	\$973,629
FY 2012-13	Outpatient Services	\$15,873	\$70,123	\$667,130	\$8,815 \$0	\$977,747	\$25,538	\$0	\$301,289	\$270,481	\$1,035,757	\$0	\$140,576	\$0	\$3,513,329
	Physician Services Subtotal Fee-for-Service	\$0 \$39,632	\$355 \$159,606	\$61,247 \$1,296,849	\$18,788	\$5,234 \$1,039,144	\$566 \$26,104	\$0 \$0	\$2,561 \$309,168	\$256 \$318.226	\$9,712 \$1,192,774	\$0 \$0	\$2,308 \$168.907	\$0 \$0	\$82,240 \$4,569,198
		,		. ,,	,	. ,,	, .		,		. , . ,				. , ,
	Total Capitations	\$6,572,929 \$6,794,071	\$15,443,312 \$16,991,711	\$110,963,973 \$113,813,015	\$1,840,658 \$5,006,888	\$29,012,536 \$38,834,657	\$2,017,012 \$3,584,933	\$0 \$48,760	\$12,114,763 \$10,148,824	\$13,232,634 \$92,611,488	\$77,729,971 \$87,866,710	\$1,056,032	\$36,792,112 \$38,922,470	\$152,344 \$253,774	\$305,872,244 \$415,933,333
	Fee-for-Service	\$6,794,071	\$10,991,711	\$113,813,013	\$3,000,888	\$38,834,637 \$0	\$3,384,933 \$0	\$48,760 \$0	\$10,148,824 \$0	592,611,488 \$0	\$87,800,710	\$1,036,032	\$38,922,470 \$0	\$233,774 \$0	\$415,935,333 \$0
	Inpatient Services	\$12,637	\$19,104	\$626,179	\$56,216	\$138,091	S0	\$0	\$9,711	\$199,734	\$169,677	\$12,092	\$33,646	S0	\$1,277,088
	Outpatient Services	\$12,637	\$38,587	\$526,179 \$501.652	\$15,268	\$987,859	\$49 120	\$2.637	\$276,800	\$1,113,265	\$820,427	\$64,713	\$75,378	\$0 \$0	\$3,956,127
FY 2013-14	Physician Services	\$10,423	\$38,387 \$1,324	\$30,834	\$13,268	\$6,611	\$1,176	\$2,637 \$0	\$1,262	\$1,113,263	\$10,578	\$176	\$1,877	\$0 \$0	\$63,135
	Subtotal Fee-for-Service	\$23,110	\$59,015	\$1,158,665	\$71,641	\$1,132,562	\$50,296	\$2,637	\$287,773	\$1,322,086	\$1,000,682	\$76,982	\$1,877	S0	\$5,296,351
	Total	\$6,817,181	\$17,050,726	\$114,971,680	\$5,078,529	\$39,967,219	\$3,635,229	\$51,397	\$10,436,597	\$93,933,574	\$88,867,392	\$1,133,014	\$39,033,371	\$253,774	\$421,229,684
	% Change from Previous Year	3,72%	10.41%	3.61%	175.91%	37.76%	80.23%	0.00%	-13.85%	609.86%	14.33%	0.00%	6.09%	66,58%	37.71%
	Capitations	\$6,926,061	\$18,002,789	\$116,688,242	\$6,942,978	\$51,278,862	\$3,943,543	\$663,374	\$31,455,667	\$166,708,082	\$100,354,417	\$14,856,267	\$52,005,193	\$134,923	\$569,960,398
	Fee-for-Service	S0	S0	\$0	S0	\$0	S0	\$0	S0	\$0	SO SO	SO SO	S0	\$0	SO.
	Inpatient Services	\$68,648	\$24,636	\$391,086	\$3,405	\$41,495	S0	\$0	\$8,711	\$338,450	\$106,174	\$10.940	\$44.071	SO SO	\$1,037,617
	Outpatient Services	\$15,159	\$52,567	\$513,707	\$12,542	\$1,229,177	\$53,357	\$6,510	\$386,626	\$2,835,698	\$916,742	\$289,394	\$109,984	SO.	\$6,421,463
FY 2014-15	Physician Services	S0	\$2,696	\$37,013	\$375	\$6,170	\$613	\$786	\$909	\$8,980	\$6,239	\$1,156	\$1,407	\$0	\$66,344
	Subtotal Fee-for-Service	\$83,807	\$79,898	\$941,806	\$16,323	\$1,276,841	\$53,969	\$7,296	\$396,247	\$3,183,128	\$1,029,155	\$301,491	\$155,462	S0	\$7,525,424
	Total	\$7,009,868	\$18,082,687	\$117,630,048	\$6,959,301	\$52,555,703	\$3,997,512	\$670,670	\$31,851,914	\$169,891,210	\$101,383,572	\$15,157,758	\$52,160,655	\$134,923	\$577,485,822
	% Change from Previous Year	2.83%	6.05%	2.31%	37.03%	31.50%	9.97%	0.00%	205.19%	80.86%	14.08%	0.00%	33.63%	-46.83%	37.10%
	Capitations	\$7,502,928	\$15,120,720	\$101,209,755	\$10,130,664	\$49,743,555	\$3,784,911	\$517,191	\$54,103,151	\$204,989,597	\$105,257,829	\$13,452,870	\$37,281,250	\$124,247	\$603,218,668
	Fee-for-Service	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S0	\$0	S0	\$0	\$0
	Inpatient Services	\$196,797	\$103,706	\$224,056	\$1,491	\$24,417	\$0	\$0	\$15,147	\$371,092	\$101,655	\$10,736	\$35,382	\$0	\$1,084,479
FY 2015-16	Outpatient Services	\$14,779	\$58,715	\$504,056	\$28,379	\$1,348,307	\$56,200	\$4,538	\$478,376	\$3,016,043	\$1,067,081	\$217,502	\$139,439	\$4,516	\$6,937,930
F 1 2013-10	Physician Services	\$117	\$1,385	\$39,249	\$282	\$3,924	\$5,301	\$187	\$935	\$8,821	\$1,741	\$233	\$2,254	\$0	\$64,431
	Subtotal Fee-for-Service	\$211,694	\$163,807	\$767,361	\$30,152	\$1,376,648	\$61,502	\$4,725	\$494,457	\$3,395,956	\$1,170,477	\$228,471	\$177,074	\$4,516	\$8,086,839
	Total	\$7,714,622	\$15,284,527	\$101,977,116	\$10,160,816	\$51,120,203	\$3,846,413	\$521,916	\$54,597,608	\$208,385,553	\$106,428,306	\$13,681,341	\$37,458,324	\$128,763	\$611,305,508
	% Change from Previous Year	10.05%	-15.47%	-13.31%	46.00%	-2.73%	-3.78%	-22.18%	71.41%	22.66%	4.98%	-9.74%	-28.19%	-4.57%	5.86%
	Capitations	\$8,999,674	\$17,920,858 \$0	\$109,703,026 \$0	\$10,161,142 \$0	\$54,333,943 \$0	\$3,970,150 \$0	\$664,873 \$0	\$35,703,386 \$0	\$209,929,370 \$0	\$106,951,722 \$0	\$16,093,405 \$0	\$29,376,555 \$0	\$80,621	\$603,888,725 \$0
	Fee-for-Service	\$31,244	\$12,197	\$108,652	S0	\$9,033	S0	\$0 \$0	\$5,368	\$107.847	\$86,132	\$0 \$0	\$19.653	\$0 \$0	\$380.126
FY 2016-17	Outpatient Services	\$15,718	\$54,312	\$496,430	\$0	\$1,351,952	\$68,106	\$3,142	\$634,520	\$3,154,639	\$1,297,910	\$130,235	\$137,585	\$4,855	\$7,349,403
	Physician Services	\$0	\$1,240	\$0	\$0	\$1,552	\$3,070					\$1,376			\$20,437
	Subtotal Fee-for-Service							\$340	\$1,064	\$10,463	\$26		\$1,250	\$56	
		\$46,962	\$67,749	\$605,082	\$0 \$10.161.142	\$1,362,536	\$71,176	\$3,482	\$640,953	\$3,272,950	\$1,384,068	\$131,611	\$158,488	\$4,911	\$7,749,966
	Total % Change from Previous Year	\$9,046,636	\$67,749 \$17,988,606 17,69%	\$605,082 \$110,308,108 8.17%	\$10,161,142 0.00%	\$1,362,536 \$55,696,479 8,95%			\$640,953 \$36,344,339				\$158,488 \$29,535,043	\$4,911 \$85,532 -33,57%	\$611,638,692
	Total % Change from Previous Year Capitations	\$9,046,636 17.27% \$8,629,729	\$17,988,606 17.69% \$16,193,719	\$110,308,108 8.17% \$95,252,770	\$10,161,142 0.00% \$10,978,119	\$55,696,479 8.95% \$56,355,586	\$71,176 \$4,041,326 5.07% \$2,947,186	\$3,482 \$668,355 28.06% \$710,714	\$640,953 \$36,344,339 -33.43% \$6,123,381	\$3,272,950 \$213,202,320 2,31% \$185,185,277	\$1,384,068 \$108,335,790 1.79% \$87,738,823	\$131,611 \$16,225,016 18.59% \$15,363,719	\$158,488 \$29,535,043 -21.15% \$27,339,713	\$4,911 \$85,532 -33.57% \$44,926	\$611,638,692 0.05% \$512,863,662
	% Change from Previous Year Capitations Fee-for-Service	\$9,046,636 17.27% \$8,629,729 \$0	\$17,988,606 17.69% \$16,193,719 \$0	\$110,308,108 8.17% \$95,252,770 \$0	\$10,161,142 0.00% \$10,978,119 \$0	\$55,696,479 8.95% \$56,355,586 \$0	\$71,176 \$4,041,326 5.07% \$2,947,186 \$0	\$3,482 \$668,355 28.06% \$710,714 \$0	\$640,953 \$36,344,339 -33.43% \$6,123,381 \$0	\$3,272,950 \$213,202,320 2.31% \$185,185,277 \$0	\$1,384,068 \$108,335,790 1,79% \$87,738,823 \$0	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0	\$4,911 \$85,532 -33.57% \$44,926 \$0	\$611,638,692 0.05% \$512,863,662 \$0
	% Change from Previous Year Capitations Fee-for-Service Inpatient Services	\$9,046,636 17.27% \$8,629,729 \$0 \$40,632	\$17,988,606 17.69% \$16,193,719 \$0 \$4,329	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394	\$55,696,479 8.95% \$56,355,586 \$0 \$49,246	\$71,176 \$4,041,326 5.07% \$2,947,186 \$0 \$0	\$3,482 \$668,355 28.06% \$710,714 \$0 \$0	\$640,953 \$36,344,339 -33.43% \$6,123,381 \$0 \$101,011	\$3,272,950 \$213,202,320 2.31% \$185,185,277 \$0 \$703,434	\$1,384,068 \$108,335,790 1,79% \$87,738,823 \$0 \$169,692	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0 \$0	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0 \$4,622	\$4,911 \$85,532 -33.57% \$44,926 \$0 \$0	\$611,638,692 0.05% \$512,863,662 \$0 \$1,184,373
FY 2017-18	% Change from Previous Year Capitations Fee-for-Service Inpatient Services Outpatient Services	\$9,046,636 17.27% \$8,629,729 \$0	\$17,988,606 17.69% \$16,193,719 \$0	\$110,308,108 8.17% \$95,252,770 \$0	\$10,161,142 0.00% \$10,978,119 \$0	\$55,696,479 8.95% \$56,355,586 \$0	\$71,176 \$4,041,326 5.07% \$2,947,186 \$0	\$3,482 \$668,355 28.06% \$710,714 \$0	\$640,953 \$36,344,339 -33.43% \$6,123,381 \$0	\$3,272,950 \$213,202,320 2.31% \$185,185,277 \$0	\$1,384,068 \$108,335,790 1,79% \$87,738,823 \$0	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0	\$4,911 \$85,532 -33.57% \$44,926 \$0	\$611,638,692 0.05% \$512,863,662 \$0
FY 2017-18	% Change from Previous Year Capitations Fee-for-Service Inpatient Services Outpatient Services Physician Services Subtotal Fee-for-Service	\$9,046,636 17.27% \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611	\$17,988,606 17.69% \$16,193,719 \$0 \$4,329 \$90,168 \$0 \$94,497	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014 \$617,406 \$160 \$715,579	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884	\$55,696,479 8.95% \$56,355,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533	\$71,176 \$4,041,326 5.07% \$2,947,186 \$0 \$0 \$86,688 \$962 \$87,650	\$3,482 \$668,355 28.06% \$710,714 \$0 \$0 \$7,977 \$0 \$7,977	\$640,953 \$36,344,339 -33,43% \$6,123,381 \$0 \$101,011 \$1,220,134 \$1,801 \$1,322,946	\$3,272,950 \$213,202,320 2.31% \$185,185,277 \$0 \$703,434 \$3,127,821 \$722 \$3,831,977	\$1,384,068 \$108,335,790 1.79% \$87,738,823 \$0 \$169,692 \$1,604,442 \$2,408 \$1,776,542	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0 \$0 \$396,900 \$396,900 \$396,900	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0 \$4,622 \$174,562 \$111 \$179,294	\$4,911 \$85,532 -33,57% \$44,926 \$0 \$0 \$250,522 \$0 \$250,522	\$611,638,692 0.05% \$512,863,662 \$0 \$1,184,373 \$9,431,458 \$7,082 \$10,622,912
FY 2017-18	% Change from Previous Year Capitations Fee-for-Service Inpatient Services Outpatient Services Physician Services Subtotal Fee-for-Service Total	\$9,046,636 17.27% \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611	\$17,988,606 17.69% \$16,193,719 \$0 \$4,329 \$90,168 \$0 \$94,497 \$16,288,216	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014 \$617,406 \$160 \$715,579 \$95,968,349	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884 \$11,043,003	\$55,696,479 8.95% \$56,355,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533 \$58,198,119	\$71,176 \$4,041,326 5.07% \$2,947,186 \$0 \$86,688 \$962 \$87,650 \$3,034,836	\$3,482 \$668,355 28.06% \$710,714 \$0 \$0 \$7,977 \$0 \$7,977 \$718,691	\$640,953 \$36,344,339 -33,43% \$6,123,381 \$0 \$101,011 \$1,220,134 \$1,801 \$1,322,946 \$7,446,327	\$3,272,950 \$213,202,320 2.31% \$185,185,277 \$0 \$703,434 \$3,127,821 \$722 \$3,831,977 \$189,017,254	\$1,384,068 \$108,335,790 1.799% \$87,738,823 \$0 \$169,692 \$1,604,442 \$2,408 \$1,776,542 \$89,515,365	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0 \$0 \$396,900 \$0 \$396,900 \$15,760,619	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0 \$4,622 \$174,562 \$111 \$179,294	\$4,911 \$85,532 -33.57% \$44,926 \$0 \$0 \$250,522 \$0 \$250,522 \$250,522 \$250,522	\$611,638,692 0.05% \$512,863,662 \$0 \$1,184,373 \$9,431,485 \$7,082 \$10,622,912 \$523,486,574
FY 2017-18	% Change from Previous Year  Contations Fee-for-Service Inpution Services Outpution Services Physician Services Subtotal Fee-for-Service Total % Change from Previous Year	\$9,046,636 17.27% \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611 \$8,681,340	\$17,988,606 17,69% \$16,193,719 \$0 \$4,329 \$90,168 \$0 \$94,497 \$16,288,216 -9,45%	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014 \$617,406 \$160 \$715,579 \$95,968,349 -13,00%	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884 \$11,043,003 8.68%	\$55,696,479 8.95% \$56,355,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533 \$58,198,119 4.49%	\$71,176 \$4,041,326 5.07% \$2,947,186 \$0 \$0 \$86,688 \$962 \$87,650 \$3,034,836	\$3,482 \$668,355 28.06% \$710,714 \$0 \$0 \$7,977 \$0 \$7,977 \$718,691 7.53%	\$640,953 \$36,344,339 \$6,123,381 \$0 \$101,011 \$1,220,134 \$1,801 \$1,322,946 \$7,446,327 -79,51%	\$3,272,950 \$213,202,320 2,319% \$185,185,277 \$0 \$703,434 \$3,127,821 \$722 \$3,831,977 \$189,017,254	\$1,384,068 \$108,335,790 1.79% \$87,738,823 \$0 \$169,692 \$1,604,442 \$2,408 \$1,776,542 \$89,515,365 -17,37%	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0 \$0 \$396,900 \$396,900 \$396,900 \$15,760,619	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0 \$4,622 \$174,562 \$111 \$179,294 \$27,519,007 -6.83%	\$4,911 \$85,532 -33,57% \$44,926 \$0 \$0 \$250,522 \$0 \$250,522 \$295,448 245,42%	\$611,638,692 0.05% \$512,863,662 50 \$1,184,373 \$9,431,458 \$7,082 \$10,622,912 \$523,486,574 -14.41%
FY 2017-18	% Change from Previous Year Capitations Fee-for-Service Inpatient Services Outpatient Services Physician Services Subtotal Fee-for-Service Total	\$9,046,636 17.27% \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611	\$17,988,606 17.69% \$16,193,719 \$0 \$4,329 \$90,168 \$0 \$94,497 \$16,288,216	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014 \$617,406 \$160 \$715,579 \$95,968,349	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884 \$11,043,003	\$55,696,479 8.95% \$56,355,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533 \$58,198,119	\$71,176 \$4,041,326 5.07% \$2,947,186 \$0 \$86,688 \$962 \$87,650 \$3,034,836	\$3,482 \$668,355 28.06% \$710,714 \$0 \$0 \$7,977 \$0 \$7,977 \$718,691	\$640,953 \$36,344,339 -33,43% \$6,123,381 \$0 \$101,011 \$1,220,134 \$1,801 \$1,322,946 \$7,446,327	\$3,272,950 \$213,202,320 2.31% \$185,185,277 \$0 \$703,434 \$3,127,821 \$722 \$3,831,977 \$189,017,254	\$1,384,068 \$108,335,790 1.799% \$87,738,823 \$0 \$169,692 \$1,604,442 \$2,408 \$1,776,542 \$89,515,365	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0 \$0 \$396,900 \$0 \$396,900 \$15,760,619	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0 \$4,622 \$174,562 \$111 \$179,294	\$4,911 \$85,532 -33.57% \$44,926 \$0 \$0 \$250,522 \$0 \$250,522 \$250,522 \$250,522	\$611,638,692 0.05% \$512,863,662 \$0 \$1,184,373 \$9,431,485 \$7,082 \$10,622,912 \$523,486,574
FY 2017-18	% Change from Previous Year Capatization Fee for Services Inputient Services Outputient Services Outputient Services Subtotal Fee for Services Subtotal Fee for Service Total % Change from Previous Year Capatizon Fee for Service Inputient Services	\$9,046,636 17.27% \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611 \$8,681,340 -4,04% \$11,990,404 \$0 \$40,632	\$17,988,606 17,69% \$16,193,719 \$0 \$4,329 \$90,168 \$0 \$94,497 \$16,288,216 -9,45% \$21,501,218 \$0 \$4,329	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014 \$617,406 \$160 \$715,579 \$95,968,349 -13,00% \$116,166,042 \$0 \$98,014	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884 \$11,043,003 8.68% \$14,585,483 \$0 \$13,394	\$55,696,479 8.95% \$56,355,586 \$49,246 \$1,792,777 \$511 \$1,842,533 \$58,198,119 4.49% \$64,665,397	\$71,176 \$4,041,326 \$5,07% \$2,947,186 \$0 \$6,088,6,588 \$962 \$87,650 \$3,034,836 24,99% \$4,136,771 \$0 \$0	\$3,482 \$668,355 28,06% \$710,714 \$0 \$5,977 \$0 \$7,977 \$718,691 7,539% \$860,939 \$0 \$0	\$640,953 \$26,344,339 \$33,43% \$6,123,381 \$10,011 \$1,220,134 \$1,801 \$1,322,946 \$7,446,327 -79,51% \$14,611,428 \$0 \$10,011	\$3,272,950 \$213,202,320 \$2,31% \$185,185,277 \$50 \$703,434 \$3,127,821 \$3,831,977 \$189,017,254 \$11,134% \$213,149,227 \$50 \$703,434	\$1,384,068 \$108,335,790 \$87,738,823 \$1,604,442 \$2,408 \$1,776,542 \$89,515,365 -17,379% \$105,377,433 \$0 \$169,692	\$131,611 \$16,225,016 18,59% \$15,363,719 \$0 \$306,900 \$396,900 \$15,760,619 -2,86% \$16,801,627 \$0	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0 \$4,622 \$174,562 \$111 \$179,294 \$27,519,007 -6.83% \$31,364,940 \$0 \$4,622	\$4,911 \$85,532 -33,57% \$44,926 \$0 \$0 \$250,522 \$295,448 245,42% \$51,823 \$0 \$0	\$611,638,692 0.05%; \$512,863,662 \$0 \$1,184,373 \$7,082 \$10,622,912 \$23,486,574 -14.41%; \$615,262,734 \$0 \$1,184,373
FY 2017-18	% Change from Previous Year Capitations Fee for Service Impatient Services Outpatient Services Substata Fee for Service Substata Fee for Service Substata Fee for Service Total % Change from Previous Capitation Fee for Service Impatient Services Unpatient Services Outpatient Services	\$9,046,636 17.2176 \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611 \$8,681,340 -4,0476 \$11,99,404 \$0 \$40,632 \$10,978	\$17,988,606 17,699% \$16,193,719 \$0 \$4,329 \$90,168 \$0 \$94,497 \$16,288,216 -9,457% \$21,501,218 \$0 \$4,329 \$90,168	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014 \$617,406 \$160 \$715,579 \$95,968,349 -13,00% \$16,166,042 \$0 \$98,014 \$617,406	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884 \$11,043,003 8,68% \$14,585,483 \$0 \$13,394	\$55,696,479 8.95% \$6,355,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533 \$58,198,119 4.49% \$64,665,397 \$0 \$4,665,397	\$71,176 \$4,041,326 \$5,977,186 \$2,947,186 \$0 \$86,688 \$962 \$87,650 \$3,034,836 -24,90% \$4,136,771 \$0 \$86,688	\$3,482 \$668,355 28,06% \$710,714 \$0 \$0 \$7,977 \$718,691 7,53% \$860,939 \$0 \$5,977	\$640,933 \$36,344,339 -33,43% \$6,123,381 \$0 \$101,011 \$1,220,134 \$1,801 \$1,322,946 \$7,446,327 -79,51% \$14,611,428 \$0 \$101,011 \$1,220,134	\$3,272,950 \$313,202,320 \$2,313** \$185,185,277 \$30 \$703,434 \$3,127,821 \$722 \$3,831,977 \$189,017,254 \$-11,34% \$513,149,227 \$570,3434 \$3,127,821	\$1,384,068 \$108,335,790 0.1,79% \$87,738,823 \$0 \$1,604,442 \$2,408 \$1,776,240 \$89,515,365 -17,377,433 \$105,377,433 \$169,692 \$1,604,442	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0 \$0 \$396,900 \$396,900 \$15,760,619 -2,86% \$16,801,627 \$0 \$396,900	\$158,488 \$29,535,043 -21,15% \$27,339,713 \$0 \$4,622 \$174,562 \$111 \$179,294 \$27,519,007 -6.83% \$31,364,940 \$0 \$4,622 \$14,562	\$4,911 \$85,532 -33,57% \$44,926 \$0 \$0 \$250,522 \$0 \$250,522 \$250,522 \$252,428 \$51,823 \$0 \$0 \$0 \$0 \$250,522	\$611,638,627 0.85% \$12,863,662 \$0.851,843,73 \$9,431,458 \$1,0622,912 \$22,486,574 -14,419% \$615,262,734 \$1,1843,73 \$1,1843,73 \$9,431,458
	% Change from Previous Vear Capations Fee fee Service Inguistre Services Outgotient Services Outgotient Services Subtoal Fee fee Service Total % Change from Previous Vear Ceptations Fee fee Service Inguistre Services Outgotient Services Outgotient Services Options of the Service Previous Vear Projection Services Outgotient Services Options Services	\$9,046,636 17,27% \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611 \$3,681,344 \$11,990,404 \$40,632 \$40,632 \$10,978 \$50 \$10,978	\$17,988,606 17.69%, \$16,193,719 \$0 \$4.329 \$90,168 \$0 \$94,497 \$16,288,216 \$21,501,218 \$0 \$4.329 \$90,168	\$110,308,108 8.17% \$95,252,770 \$08,014 \$617,406 \$160 \$715,539 \$116,166,042 \$08,014 \$617,406 \$116,166,042	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884 \$11,043,003 8.68% \$14,585,483 \$13,394 \$51,082	\$55,696,479 8,95% \$56,355,586 \$0 \$49,246 \$1,792,777 \$1,842,533 \$58,198,119 4,499 \$64,665,397 \$1,792,777 \$511	\$71,176 \$4,041,326 \$.507% \$2,947,186 \$0 \$6,588 \$86,688 \$9622 \$87,650 \$3,034,836 \$4,136,771 \$0 \$0 \$86,688	\$3,482 \$668,355 28,865% \$710,714 \$0 \$7,977 \$18,691 7,335% \$860,939 \$0 \$7,977 \$0	\$640,953 \$36,344,339 \$6,123,381 \$0,001 \$1,220,134 \$1,801 \$1,322,946 \$7,446,237 \$7,46,247 \$14,611,428 \$10,001 \$10,101 \$1,220,134 \$1,801	\$3,272,950 \$213,202,320 2,319% \$185,185,277 \$503,434 \$3,127,821 \$7222 \$3,831,977 \$189,017,254 -11,349% \$213,149,227 \$703,434 \$3,127,821 \$703,434 \$3,127,821	\$1,384,068 \$108,335,790 \$87,738,823 \$87,738,823 \$1,604,442 \$2,408 \$1,776,542 \$89,515,365 1-17,3743 \$105,377,433 \$105,377,433 \$105,474 \$1,604,442 \$1,604,442	\$131,611 \$16,225,016 \$18,59% \$15,363,719 \$0 \$0 \$0 \$306,900 \$306,900 \$15,760,619 -2.86% \$16,801,627 \$0 \$396,900 \$396,900	\$158,488 \$29,535,043 -21,15% \$27,339,713 \$4,622 \$174,562 \$1111 \$179,294 \$27,519,007 -6.83% \$31,364,940 \$4,622 \$174,562 \$174,562 \$174,562	\$4,911 \$85,532 -33,57% \$44,926 \$0 \$0 \$250,522 \$295,448 245,42% \$51,823 \$0 \$0	\$11,638,052 0.85% \$512,863,662 \$1,184,373 \$9,471,453 \$10,622,912 \$23,466,574 -144,19% \$615,262,734 \$615,262,734 \$615,373 \$9,431,655 \$7,082
	% Change from Previous Year Capitations Fee for Service Impatient Services Outpatient Services Substata Fee for Service Substata Fee for Service Substata Fee for Service Total % Change from Previous Capitation Fee for Service Impatient Services Unpatient Services Outpatient Services	\$9,046,636 17.2176 \$8,629,729 \$0 \$40,632 \$10,978 \$0 \$51,611 \$8,681,340 -4,0476 \$11,99,404 \$0 \$40,632 \$10,978	\$17,988,606 17,699% \$16,193,719 \$0 \$4,329 \$90,168 \$0 \$94,497 \$16,288,216 -9,457% \$21,501,218 \$0 \$4,329 \$90,168	\$110,308,108 8.17% \$95,252,770 \$0 \$98,014 \$617,406 \$160 \$715,579 \$95,968,349 -13,00% \$16,166,042 \$0 \$98,014 \$617,406	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$408 \$64,884 \$11,043,003 8,68% \$14,585,483 \$0 \$13,394	\$55,696,479 8.95% \$6,355,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533 \$58,198,119 4.49% \$64,665,397 \$0 \$4,665,397	\$71,176 \$4,041,326 \$5,977,186 \$2,947,186 \$0 \$86,688 \$962 \$87,650 \$3,034,836 -24,90% \$4,136,771 \$0 \$86,688	\$3,482 \$668,355 28,06% \$710,714 \$0 \$0 \$7,977 \$718,691 7,53% \$860,939 \$0 \$5,977	\$640,933 \$36,344,339 -33,43% \$6,123,381 \$0 \$101,011 \$1,220,134 \$1,801 \$1,322,946 \$7,446,327 -79,51% \$14,611,428 \$0 \$101,011 \$1,220,134	\$3,272,950 \$313,202,320 \$2,313** \$185,185,277 \$30 \$703,434 \$3,127,821 \$722 \$3,831,977 \$189,017,254 \$-11,34% \$513,149,227 \$570,3434 \$3,127,821	\$1,384,068 \$108,335,790 0.1,79% \$87,738,823 \$0 \$1,604,442 \$2,408 \$1,776,240 \$89,515,365 -17,377,433 \$105,377,433 \$169,692 \$1,604,442	\$131,611 \$16,225,016 18.59% \$15,363,719 \$0 \$0 \$396,900 \$396,900 \$15,760,619 -2,86% \$16,801,627 \$0 \$396,900	\$158,488 \$29,535,043 -21,15% \$27,339,713 \$0 \$4,622 \$174,562 \$111 \$179,294 \$27,519,007 -6.83% \$31,364,940 \$0 \$4,622 \$14,562	\$4,911 \$85,532 -33,57% \$44,926 \$0 \$250,522 \$0 \$250,522 \$250,522 \$255,448 245,42% \$1,823 \$0 \$0 \$250,522	\$611,638,627 0.85% \$12,863,662 \$0.851,843,73 \$9,431,458 \$1,0622,912 \$22,486,574 -14,419% \$615,262,734 \$1,1843,73 \$1,1843,73 \$9,431,458
	5 Change fron Previous Vear Capitations Fee fire Service Injustion Services Outpatient Services Outpatient Services Subsola Fee for Service Subsola Fee for Service Capitations Capitations Injustion Services Injustion Services Physician Services Physician Services Subsola Fee for Services	\$9,046,636 17,27% \$6,629,729 \$0,035 \$10,978 \$1,047 \$1,047 \$1,199,404 \$1,199,4	\$17,988,696 \$17,69% \$16,193,719 \$90,168 \$0,497 \$15,288,26 \$9,45% \$2,50,218 \$2,50,218 \$30,068 \$34,497 \$2,50,218 \$30,068 \$34,497 \$21,505,716 \$32,505,716	\$110,308,108 8.179 \$59,252,770 \$59,014 \$617,406 \$115,579 \$13,00% \$116,166,042 \$16,166,042 \$16,166,042 \$16,166,042 \$1715,579 \$11,579 \$11,579 \$11,579 \$11,579 \$11,579 \$11,579	\$10,161,142 0.00% \$10,978,119 \$0 \$13,304 \$51,082 \$40,884 \$11,043,003 \$1,043,003 \$13,304 \$51,082 \$40,884 \$54,884 \$14,585,483 \$54,884 \$54,884 \$14,650,657	\$55,696,479 \$.95% \$5,335,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533 \$58,198,199 \$4,49% \$0 \$1,792,777 \$0 \$1,792,777 \$513 \$1,792,777 \$513 \$1,842,533 \$6,653,793 \$1,792,777 \$1,792,777 \$1,792,777 \$1,792,777	\$71,176 \$4,041,326 \$.97% \$2,947,186 \$0,00 \$86,688 \$962 \$7,650 \$3,034,836 -24,99% \$4,136,771 \$0 \$86,688 \$962 \$2,650 \$4,24,421 \$3,224,421 \$3,224,421 \$3,224,421 \$3,224,421	\$3,482 \$668,355 28,865% \$710,714 \$0 \$0 \$7,797 \$718,691 7,535% \$860,399 \$0 \$7,977 \$1,977 \$1,977 \$2,977 \$2,977 \$2,977 \$2,995%	\$640,953 \$36,344,339 -33,343% \$6,123,381 \$1,001 \$1,220,134 \$1,322,946 \$7,446,327 -79,51% \$14,611,428 \$0 \$1,220,134 \$1,220,134 \$1,20,134 \$1,322,946 \$1,322,946	\$3,272,950 \$213,202,329 \$2,31% \$185,185,277 \$185,185,277 \$703,434 \$5,127,821 \$722 \$13,917,254 \$11,34% \$213,149,277 \$189,017,254 \$313,497 \$213,497 \$3,383,977 \$216,981,203 \$4,797 \$216,981,203 \$14,7996	\$1,384,068 \$108,335,790 \$87,738,823 \$169,692 \$1,694,422 \$2,408 \$1,776,542 \$1,604,442 \$1,765,542 \$1,604,442 \$1,776,542 \$1,776,542 \$1,776,542 \$1,776,542	\$131,611 \$1,622,60 \$15,563,719 \$15,563,719 \$15,563,719 \$15,560,619 \$15,760,619 \$2,864,619 \$51,500,627 \$0 \$306,000 \$51,760,619 \$0 \$536,000 \$51,760,619 \$0 \$51,801,627 \$0 \$0 \$51,801,627 \$0 \$0 \$51,801,627 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$158,488 \$29,535,043 -21,15% \$27,339,713 \$4,622 \$174,562 \$111 \$179,204 \$3,000 \$4,622 \$111,500 \$4,622 \$174,562 \$174,562 \$174,562 \$174,562 \$171,542,244 \$1,544,234 \$1,544,234	\$4,911 \$85,532 -33,57% \$44,926 \$0 \$250,522 \$250,522 \$255,448 \$51,823 \$0 \$250,522 \$250,522 \$250,522 \$250,522 \$250,522 \$250,522	\$611,638,007  0.05% \$512,863,667  \$61,843,737  \$54,311,458  \$7,002  \$522,486,574  -14,41% \$615,202,712  \$615,202,713  \$54,314,658  \$7,002  \$1,1843,73  \$54,314,658  \$7,002  \$10,022,912  \$622,885,646  \$15,502
	5 Change from Previous Vear Capitations Fee feet Service Inguited Services Outguited Services Outguited Services Subtotal Fee feet Service Total 5 Change from Previous Vear Capitations Fee feet Service Outguited Services Outguited Services Outguited Services Subtotal Fee feet Service Feet Service Outguited Services Outguited Services Subtotal Fee feet Service Total 5 Change from Previous Vear Capitations Capitations	\$9,046,636 17,27% \$6,529,729 \$0,000 \$40,632 \$10,978 \$51,611 \$1,990,404 \$40,632 \$10,978 \$0,032 \$10,978 \$3,000 \$11,990,404 \$11,9	\$17,988,666 17,6996 \$16,193,719 \$90,168 \$9,168 \$94,497 \$12,591,218 \$4,329 \$9,168 \$9,4576 \$21,501,218 \$1,329 \$9,168 \$1,329 \$1,501,718	\$110,308,108  8.17% \$95,252,707 \$0 \$08,034 \$617,406 \$160,032 \$715,579 \$05,968,349 \$116,166,042 \$180,044 \$116,062 \$116,062 \$116,063 \$116,063 \$116,063 \$116,063 \$116,063 \$117,073,073	\$10,161,142 0.00% \$10,978,119 \$30 \$13,304 \$51,082 \$408 \$64,834 \$14,585,483 \$13,304 \$51,585,483 \$408 \$408 \$41,585,483 \$10,585 \$408 \$51,585 \$408 \$51,585 \$408 \$51,585	\$55,696,479 \$.855% \$55,355,586 \$0 \$49,246 \$1,792,777 \$511 \$1,842,533 \$64,655,397 \$49,246 \$1,792,777 \$51,511 \$1,1842,533 \$66,507,930 \$49,246 \$1,792,777 \$51,11 \$1,1842,533	\$71,176 \$4,941,326 \$5,07% \$2,947,186 \$0 \$0 \$0 \$0,000 \$3,034,836 \$3,034,836 \$4,136,771 \$0 \$0 \$0 \$5,00	\$3,482 \$668,355 28,06% \$710,714 \$0 \$0 \$7,977 \$718,691 7,35% \$860,939 \$0 \$5,977 \$0 \$0 \$5,977 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$640,953 \$36,44,339 -33,4394 \$6,123,881 \$0 \$101,011 \$1,220,134 \$1,801 \$1,801 \$1,22,946 \$7,446,327 7-79,519 \$101,011 \$1,220,134 \$1,501 \$	\$3,272,950 \$213,202,339 2.31% \$185,185,277 \$185,185,277 \$703,434 \$5,127,254 \$722 \$3,831,977 \$189,017,254 \$11,145,227 \$703,434 \$213,149,227 \$703,434 \$1,145,217 \$722 \$3,831,977 \$216,981,203 \$1,792 \$213,149,277 \$216,981,203	\$1,384,068 \$108,335,790 \$1,7996 \$87,738,823 \$169,6492 \$1,604,642 \$2,408 \$1,776,542 \$2,408 \$1,776,542 \$2,509,513,365 \$1,73,565 \$1,73,565 \$1,743,365 \$1,76,542 \$2,408 \$2,408 \$2,408 \$2,408 \$2,408 \$2,408 \$2,176,542 \$2,408 \$2,176,542 \$2,101,15,375 \$19,1006	\$131,611 \$16,225,06 \$18,59% \$515,363,719 \$0 \$0 \$306,000 \$0 \$306,000 \$536,000 \$15,760,619 \$2,86% \$516,801,627 \$6,801,627 \$6,801,627 \$6,801,627 \$7,906,900 \$7,900 \$	\$158,488 \$29,535,043 -21,15% \$27,339,713 \$0 \$4,622 \$111 \$179,294 \$27,519,007 -6,83% \$31,364,940 \$4,622 \$111 \$179,294 \$4,622 \$11,550 \$4,622 \$11,550 \$4,622 \$11,550 \$4,622 \$11,550 \$11,5	\$4,911 \$85,532 -33,579 \$44,926 \$0 \$250,522 \$250,522 \$295,448 \$1,823 \$0 \$250,522 \$250,	\$611,638,602 0.65% \$512,863,662 \$0 \$1,184,173 \$54,311,458 \$7,062 \$322,486,774 -144,196 \$615,262,77 \$9,431,458 \$7,082 \$10,622,912 \$10,622,912 \$22,886,465 \$10,622,912 \$22,885,465 \$15,586,485 \$55,584,645 \$25,584,645 \$25,584,645 \$25,584,645 \$25,584,645 \$25,584,645
	5: Change from Previous Vear Peafors Service Inpatient Services Outpatient Services Outpatient Services Outpatient Services Subdodal Fee for Service Subdodal Fee for Service Total Schange from Previous Vear Capitations Outpatient Services Input Services Outpatient Services Physician Services Subdoal Fee for Service Total Schange from Previous Vear Capitations Subdoal Fee for Services Fee for Services Total Schange from Previous Vear Fee for Services Fee for Services Fee for Services	\$9,046,636 17,127% \$3,629,729 \$0 \$40,632 \$10,978 \$5,1611 \$4,04% \$11,990,404 \$11,990,404 \$10,978 \$10,978 \$10,978 \$11,042,014 \$3,1744,754	\$17,988,696 \$17,69% \$10,193,719 \$90,168 \$0,168 \$0,497 \$15,028,18 \$21,501,218 \$90,168 \$0,945% \$0,945% \$0,945% \$1,501,218 \$0,945% \$0,945% \$1,501,218 \$0,945% \$0	\$110,308,108  8.179* \$59,252,770  \$59,014  \$617,406  \$715,579  \$13,009*  \$116,60,422  \$59,508,144  \$617,406  \$116,60,422  \$10,500  \$10,500  \$10,500  \$111,703,226	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$4088 \$64,884 \$11,043,033 8.68% \$13,083 \$13,584 \$15,082 \$40,088 \$44,884 \$14,689,367 \$32,67% \$16,519,529	\$55,696,479  \$.95% \$5,335,586  \$5,035,586  \$1,992,777  \$511  \$1,842,533  \$58,1981,792,777  \$6,665,307  \$1,192,777  \$511  \$1,842,533  \$6,665,907,939  \$1,292,777  \$511  \$1,842,533	\$71,176 \$4,941,356 \$5,97% \$2,947,186 \$0,90 \$0,00 \$0,00 \$36,688 \$3662 \$47,650 \$3,034,836 \$4,136,771 \$4,136,771 \$5,24,99% \$5,556 \$5,576,550 \$5,576,570 \$5,57	\$3,482 \$668,355 28,06% \$10,714 \$0 \$0 \$7,977 \$718,691 7,535% \$860,939 \$5,977 \$0 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50	\$640,953 \$3,344,339 \$3,344,339 \$1,349,45 \$6,123,381 \$1,200,134 \$1,300 \$1,300 \$1,300 \$1,300 \$1,300 \$1,300 \$1,460,227 \$7,95,195 \$14,611,428 \$1,501 \$1,200 \$1,301 \$1,302,046 \$1,303,2046 \$1,304,374 \$1,302 \$1,302,046 \$1,304,374 \$11,309,495 \$17,615,002	\$3,272,950 \$231,902,520 2.31% \$185,185,277 \$185,185,277 \$180,434 \$3,127,821 \$722 \$3,881,977 \$180,017,284 \$-11,34% \$213,149,227 \$703,434 \$3,127,821 \$722 \$3,881,977 \$216,981,203 \$14,99% \$237,073,838	\$1,384,068 \$108,35,799 \$1,79% \$87,738,823 \$109,6492 \$1,604,492 \$2,408 \$1,776,429 \$3,408 \$1,776,437 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,433	\$131,611 \$1,622,60 \$15,563,719 \$15,563,719 \$15,563,719 \$15,563,719 \$15,560,619 \$15,760,619 \$2,864,619 \$51,500,627 \$50 \$50 \$536,500 \$51,750,619 \$50 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619	\$158,488 \$29,535,439 -21.15% \$27,339,713 \$4,622 \$174,562 \$174,562 \$179,294 \$27,519,007 -6,83% \$31,364,940 \$4,622 \$111,517,294 \$1,519,194 \$1,519,194 \$1,544,244 \$1,544,594 \$31,544,244 \$1,643% \$32,664,067	\$4.911 \$85,532 33,579 \$44,926 \$0 \$0 \$25,522 \$0 \$25,522 \$25,448 \$11,823 \$0 \$245,429 \$25,522 \$25,52	\$611.638,907 0.65% \$112.863,606 \$1.843,73 \$9.431,438 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73 \$1.943,73
FY 2018-19	5. Change from Previous Vear Capitations Peo for Service Inguister Services Outputsent Services Outputsent Services Substant Feo for Service Forstant 5. Change from Previous Vear Capitations Feo for Service Inguister Services Outputsent Services Outputsent Services Substant Feo for Service Physician Services Substant Feo for Service The Capitations Feo for Service Capitations Feo for Service Capitations Feo for Service Inguister Services Inguister Ing	\$9,046,636 17,27% \$8,629,729 \$40,642 \$10,978 \$5,601 \$5,611,340 \$11,990,404 \$0 \$40,632 \$10,978 \$5,1611 \$3,871% \$13,744,734 \$13,744,734 \$0 \$0 \$0 \$13,744,734 \$13,744,734	\$17,988,666 17,699,719 \$16,193,719 \$43,29 \$90,168 \$94,497 \$15,288,158 \$91,497 \$1,588,158 \$90,168 \$94,497 \$21,591,258 \$1,502,503 \$21,502,503 \$21,503,503 \$1,503 \$1,503	\$110,308,108 8.17% \$52,22,770 \$50,000 \$50,000 \$50,000 \$510,7406 \$115,579 \$53,988,349 -13,00% \$116,166,042 \$50,000 \$715,579 \$116,881,621 \$21,79% \$116,881,621 \$21,79% \$117,03,226 \$50,985	\$10,161,142 0.00% \$10,978,119 \$13,394 \$51,082 \$408 \$408 \$11,043,003 8.68% \$11,043,003 \$13,394 \$51,082 \$408 \$4,884 \$1,082 \$408 \$54,884 \$1,682 \$408 \$54,884 \$1,682 \$408 \$54,884 \$1,682 \$408 \$54,884 \$1,682 \$408 \$54,884 \$1,682 \$408 \$64,884 \$1,682 \$64,884 \$64,88	\$55,696,479  8.55% \$56,355,586  \$49,246  \$1,792,777  \$1,842,533  \$58,198,119  4.49% \$4,99% \$4,99% \$4,99% \$4,266 \$1,792,777  \$511 \$4,2533 \$65,597,277  \$511 \$51,842,533 \$65,597,297  \$51,842,533 \$65,597,297 \$51,842,533	\$71,176 \$4,94,135 \$5,97% \$5,947,186 \$9,947,186 \$9,96 \$86,688 \$96(2) \$87,650 \$1,30,448,86 \$24,99% \$0,586,688 \$96(2) \$87,650 \$36,688 \$96(2) \$87,650 \$4,24,244 \$9,29% \$4,24,24,24 \$9,29% \$4,24,24,24 \$9,28,499 \$5,287	\$3.482 \$668,355 28.66% \$710,714 \$0 \$7,977 \$0 \$7,977 \$718,69 \$60,939 \$60,939 \$7,977 \$0 \$0 \$7,977 \$0 \$7,977 \$0 \$7,977 \$0 \$7,977 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$640,953 \$3,444,399 \$33,4394 \$5,123,881 \$0,123,881 \$1,500 \$10,101 \$1,220,134 \$1,801 \$1,322,946 \$14,61,429 \$1,61,120 \$1,20,134 \$1,801 \$1,220,134 \$1,801 \$1,322,946 \$1,	\$3,272,950 \$213,202,339 2.315% \$185,185,277 \$185,185,277 \$703,434 \$5,127,254 \$189,017,254 \$11,145,227 \$189,017,254 \$11,145,227 \$189,017,254 \$11,145,227 \$213,149,227 \$189,017,254 \$11,145,227 \$215,018,018,018,018,018,018,018,018,018,018	\$1.384,086 \$198,335,790 1.79% 1.79% \$87,738,233 \$1,604,442 \$2,408 \$1,176,542 \$1,604,437 \$105,377,433 \$105,377,433 \$105,377,433 \$105,377,432 \$1,604,442 \$2,408 \$1,176,542 \$1,970% \$1,776,542 \$1,970% \$1,776,542 \$1,970% \$1,776,542 \$1,970% \$1,776,542 \$1,970% \$1,776,542 \$1,970% \$1,776,542 \$1,970% \$1,776,542 \$1,970%	\$131,611 \$1,622,606 \$18,59% \$15,363,70 \$0 \$0 \$306,000 \$50 \$306,000 \$51,760,619 \$2,86% \$516,801,627 \$51,801,627 \$0,5306,000 \$50 \$51,798,527 \$1,12% \$51,91,91,91,91,91,91,91,91,91,91,91,91,91	\$158,488 \$29,535,043 -21,15% \$27,339,713 \$0 \$4,622 \$1111 \$179,294 \$27,519,007 -6,83% \$31,364,940 \$4,622 \$1115 \$179,294 \$11,163% \$4,622 \$114,637 \$110 \$179,294 \$11,463%	\$4.911 \$85,35 -33,57% \$44,926 \$0 \$0 \$0 \$25,05,22 \$25,05,22 \$0,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$611.638,60° 0.65° \$11.2863,60° \$1.184,37° \$9.431,45° \$10.622,91° \$22,486,57° -14.41° \$11.84,37° \$9.431,45° \$1.0622,91° \$1.0622,91° \$1.0622,91° \$66.5885,64° \$1.56° \$66.584,64° \$1.21,76°
	5: Change from Previous Vear Peafors Service Inpatient Services Outpatient Services Outpatient Services Outpatient Services Subdodal Fee for Service Subdodal Fee for Service Total Schange from Previous Vear Capitations Outpatient Services Input Services Outpatient Services Physician Services Subdoal Fee for Service Total Schange from Previous Vear Capitations Subdoal Fee for Services Fee for Services Total Schange from Previous Vear Fee for Services Fee for Services Fee for Services	\$9,046,636 17,127% \$3,629,729 \$0 \$40,632 \$10,978 \$5,1611 \$4,04% \$11,990,404 \$11,990,404 \$10,978 \$10,978 \$10,978 \$11,042,014 \$3,1744,754	\$17,988,696 \$17,69% \$10,193,719 \$90,168 \$0,168 \$0,497 \$15,028,18 \$21,501,218 \$90,168 \$0,945% \$0,945% \$0,945% \$1,501,218 \$0,945% \$0,945% \$1,501,218 \$0,945% \$0	\$110,308,108  8.179* \$59,252,770  \$59,014  \$617,406  \$116,007  \$115,579  \$13,009*  \$116,166,042  \$160  \$115,579  \$116,851,621  \$111,703,226	\$10,161,142 0.00% \$10,978,119 \$0 \$13,394 \$51,082 \$4088 \$64,884 \$11,043,033 8.68% \$13,083 \$13,584 \$15,082 \$40,088 \$44,884 \$14,689,367 \$32,67% \$16,519,529	\$55,696,479  8.55% \$56,355,586  \$49,246 \$1,792,777 \$51,842,533 \$58,198,119  4.49% \$4,99% \$1,842,533 \$65,697,277 \$51,142,283 \$65,597,277 \$51,142,283 \$65,597,246 \$1,792,777 \$51,142,533	\$71,176 \$4,941,356 \$5,97% \$2,947,186 \$0,90 \$0,00 \$0,00 \$36,688 \$3662 \$47,650 \$3,034,836 \$4,136,771 \$4,136,771 \$5,24,99% \$5,556 \$5,576,550 \$5,576,570 \$5,57	\$3,482 \$668,355 28,06% \$10,714 \$0 \$0 \$7,977 \$718,691 7,535% \$860,939 \$5,977 \$0 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$5,977 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50	\$640,953 \$3,344,339 \$3,344,339 \$1,349,45 \$6,123,381 \$1,200,134 \$1,300 \$1,300 \$1,300 \$1,300 \$1,300 \$1,300 \$1,460,227 \$7,95,195 \$14,611,428 \$1,501 \$1,200 \$1,301 \$1,302,046 \$1,303,2046 \$1,304,374 \$1,302 \$1,302,046 \$1,304,374 \$11,309,495 \$17,615,002	\$3,272,950 \$213,002,31% \$231,902,31% \$185,185,277 \$185,185,277 \$19,002,002 \$1,102,002 \$1	\$1,134,085 \$108,335,790 1.79% 1.79% \$57,738,233 \$160,542 \$2,408 \$1,176,542 \$1,472 \$10,577,433 \$105,377,433 \$1	\$131,611 \$1,622,60 \$15,563,719 \$15,563,719 \$15,563,719 \$15,563,719 \$15,560,619 \$15,760,619 \$2,864,619 \$51,500,627 \$50 \$50 \$536,500 \$51,750,619 \$50 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619 \$51,750,619	\$158,480 \$29,535,403 -21,15% \$27,339,713 \$ \$4,622 \$174,562 \$171,562 \$171,562 \$27,519,044 \$31,364,940 \$31,364,940 \$31,364,940 \$4,622 \$174,562 \$174,562 \$174,562 \$174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562	\$4.911 \$85,532 -33,579 \$44,926 \$0 \$0 \$0 \$0 \$0 \$250,522 \$250,522 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$611,638,905  0.65% \$11,843,73  \$0,431,458  \$7,000 \$1,184,73  \$0,431,458  \$1,002,912  \$22,466,774  -14,419  \$10,20,913  \$1,184,73  \$9,43,458  \$1,184,73  \$9,43,458  \$1,184,73
FY 2018-19	5- Change from Previous Vear Pedia Service Inguistre Services Outputions Services Outputions Services Outpution Services Substati Fee-fee-Service Fee-fee-fee-fee-fee-fee-fee-fee-fee-fee-	\$9,046,636 17,27% \$8,629,729 \$40,632 \$10,978 \$5,00 \$1,611 \$8,681,340 \$11,990,404 \$11,990,404 \$11,990,404 \$10,632 \$10,978 \$5,00 \$1,611 \$12,042,014 \$3,744,754 \$14,744 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,754 \$14,744,7	\$17,988,606 17,969,606 \$16,193,719 \$4,329 \$90,168 \$90 \$94,497 \$16,288,216 \$21,501,218 \$00 \$4,329 \$4,329 \$4,329 \$91,618 \$00 \$4,497 \$21,595,716 \$2	\$110,308,108 \$95,252,770 \$95,252,770 \$98,014 \$617,406 \$160 \$160 \$160 \$150 \$15,155 \$15,157 \$13,007 \$11,1007 \$11,	\$10,161,142 0.00% \$10,978,119 \$13,304 \$51,082 \$408 \$11,043,003 \$6,868 \$14,585,483 \$11,458,043 \$11,043,003 \$6,868 \$14,585,483 \$14,585,483 \$14,585,483 \$14,585,367 \$16,519,529 \$7,377 \$84,007 \$12,11 \$12,121 \$12,121 \$12,121 \$12,121 \$12,121 \$13,121 \$13,121 \$13,121 \$13,121 \$13,121 \$13,121 \$14,	\$56,064.79  \$.85% \$56,355,866  \$49,246 \$1,792,77 \$511 \$1,842,531 \$58,198,119 \$4,946 \$4,665,397 \$51,792,77 \$51,181 \$1,812,531 \$1,812,	\$71,176 \$4,941,316 \$5,97% \$2,947,186 \$9,075 \$9,075 \$86,688 \$96,62 \$87,650 \$1,034,386 \$24,99% \$4,186,770 \$4,186,770 \$4,186,770 \$4,284,499 \$4,284,499 \$4,284,499 \$5,2387,590 \$5,	\$3,482 \$668,355 28,66%,55 \$710,714 \$0 \$7,977 \$7,977 \$7,977 \$718,69 \$60,99 \$5,977 \$7,977 \$5,977 \$7,977 \$868,917 \$2,907 \$5,907 \$5,007 \$5,	\$640,933 \$63,443,439 \$33,4394 \$51,230,134 \$1,220,134 \$1,322,046 \$7,446,237 \$7,95,194 \$1,322,046 \$1,	\$3,272,950 \$213,002,319 2.315% \$213,002,319% \$183,185,782,75 \$183,185,127,821 \$770,3434 \$3,127,821 \$182,017,75 \$182,017,25 \$131,019,75 \$210,019,019,019,019,019,019,019,019,019,0	\$1.384,085 \$108,355,790 1.79% \$87,78,830 \$109,690 \$1,604,442 \$2,408 \$1,776,542 \$39,915,307 \$109,090 \$109,090 \$109,090 \$107,514 \$1,000 \$107,514 \$1,000 \$107,514 \$1,141,000 \$1,141	\$131,611 \$16,225,016 \$18,59%, \$15,363,719 \$0, \$0, \$30,500 \$0, \$306,500 \$15,760,619 \$2,86%, \$515,710,619 \$51,710,619	\$158,488 \$29,535,043 -21.15% \$27,339,713 \$0,56,622 \$174,562 \$1111 \$179,294 \$27,519,007 -6,633% \$31,564,940 \$1,562 \$111 \$179,294 \$31,544,234 \$1,	\$4.911 \$85,532 -33.57% \$44.926 \$0 \$0 \$0 \$250,522 \$295,522 \$295,522 \$295,522 \$250,522	\$611.638,925 0.635 \$12.863,665 \$60 \$1.184.737 \$9.431.458 \$57.602 \$10.62.2012 \$522.466,674 \$51.526,774 \$51.526,774 \$51.526,774 \$51.526,774 \$51.526,774 \$51.62.2015 \$622.885,644 \$15.5504 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015 \$51.62.2015
FY 2018-19	% Change from Previous Vear Capitations Fee-fee-Service Inguister Services Outpatient Services Outpatient Services Substantia Fee-fee-Service Substantia Fee-fee-Service Substantia Fee-fee-Service Fee-fee-Service Inguister Services Inguister Services Physician Services Substantia Fee-fee-Service Fee-fee-Service Fee-fee-Service Total % Change from Previous Vean Computed Services Physician Services Inguister Services Inguister Services Outpatient Services Outpatient Services Outpatient Services Physician Services Physician Services Physician Services	\$9,046,636 17,27% \$8,629,729 \$40,642 \$10,978 \$5,681,340 4,045 \$11,990,404 \$0,00 \$10,978 \$3,681,340 \$4,681,340 \$3,681,340 \$4,681,340 \$4,681,340 \$4,681,340 \$4,681,340	\$17,988,606 \$17,989,606 \$16,193,719 \$4,329 \$90,168 \$00 \$54,437 \$16,288,216 \$94,559 \$21,501,218 \$00 \$94,407 \$12,505,218 \$21	\$110,308,108 8,17% \$52,22,770 \$50,000 \$50,000 \$50,000 \$51,000	\$10,161,142 0.00% \$10,978,119 \$13,304 \$51,082 \$408 \$408 \$11,043,003 8.68% \$11,043,003 \$13,304 \$13,304 \$13,304 \$13,304 \$13,304 \$14,585,406 \$4,884 \$14,685,407 \$16,595,507 \$16,507	\$55,696,479  8.55% \$56,355,586  \$49,246 \$1,792,777 \$51,842,533 \$58,198,119  4.49% \$4,99% \$1,842,533 \$65,697,277 \$51,142,283 \$65,597,277 \$51,142,283 \$65,597,246 \$1,792,777 \$51,142,533	\$71,176 \$4,941,316 \$5,97% \$2,947,186 \$9,047,186 \$9,06 \$86,688 \$96(2) \$87,650 \$1,30,448,36 \$24,90% \$0,56,688 \$96(2) \$87,650 \$1,30,750 \$1,30,750 \$1,30,750 \$1,30,750 \$2,30,750 \$2,30,750 \$3,00,750 \$3,00,750 \$3,00,750 \$3,00,750 \$3,00,750 \$3,00,750 \$3,00,750 \$3,00,750 \$3,00,750 \$3,00,775 \$3,00,775	\$3.482 \$668,355 28.66% \$710,714 \$0 \$7,977 \$0 \$7,977 \$718,69 \$5,977 \$0 \$7,977 \$0 \$0 \$7,977 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$640,953 \$3,444,399 \$33,4394 \$5,123,881 \$0,123,881 \$1,000 \$1,000 \$1,000 \$1,220,134 \$1,322,946 \$14,61,429 \$1,61,429 \$1,61,429 \$1,61,429 \$1,61,61,629 \$1,61,62	\$3,272,950 \$213,002,31% \$231,902,31% \$185,185,277 \$185,185,277 \$19,002,002 \$1,102,002 \$1	\$1,134,085 \$108,335,790 1.79% 1.79% \$57,738,233 \$160,542 \$2,408 \$1,176,542 \$1,472 \$10,577,433 \$105,377,433 \$1	\$131,611 \$16,225,016 \$18,59%, \$15,363,79 \$50 \$50 \$50,500 \$515,606,619 \$15,766,619 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50	\$158,480 \$29,535,403 -21,15% \$27,339,713 \$ \$4,622 \$174,562 \$171,562 \$171,562 \$27,519,044 \$31,364,940 \$31,364,940 \$31,364,940 \$4,622 \$174,562 \$174,562 \$174,562 \$174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562 \$5174,562	\$4.911 \$85,532 -33,579 \$44,926 \$0 \$0 \$0 \$0 \$0 \$250,522 \$250,522 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$611,688,69  \$612,863,66  \$12,863,66  \$1,184,37, \$9,431,45  \$7,00  \$10,622,91  \$623,486,57,  14,419  \$615,262,73  \$1,184,37, \$5,431,45  \$1,162,27, \$5,431,45  \$1,162,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$5,62,27, \$6,62,2

Exhibit EE - Expenditure Calculations by Eligibility Category												
	Behavioral I	Health Capitation Ca	lculations by Eligib	ility Category for FY	2020-21							
Service Expenditures	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Breast and Cervical Cancer Program	Totals			
Weighted Capitation Rate	\$24.16	\$124.52	\$36.34	\$24.04	\$62.14	\$28.69	\$128.17	\$36.34				
Adjusted Weighted Capitation Rate	\$22.16	\$123.21	\$36.24	\$23.89	\$61.93	\$28.53	\$128.02	\$36.24				
Estimated Monthly Caseload (1)	48,301	93,979	189,113	81,695	381,763	503,854	20,887	144	1,319,736			
Number of Months Rate is Effective	12	12	12	12	12	12	12	12				
Total Estimated Costs for FY 2020-21 Capitated Payments	\$12,843,942	\$138,952,696	\$82,245,732	\$23,423,613	\$283,733,613	\$172,495,441	\$32,086,491	\$62,626	\$745,844,154			
Estimated Percentage of Claims Paid in Current Period with Current Period Dates of Service (2)	100.06%	99.99%	99.93%	99.93%	100.02%	99.98%	99.99%	99.93%				
Estimated Expenditures for Claims Paid in Current Period with Current Period Dates of Service	\$12,851,648	\$138,938,801	\$82,188,160	\$23,407,216	\$283,790,360	\$172,460,942	\$32,083,282	\$62,582	\$745,782,991			
Estimated Expenditures for Prior Period Dates of Service	(\$8,166)	\$14,753	\$47,598	\$12,051	(\$48,155)	\$28,345	\$3,242	\$37	\$49,704			
Total Estimated Expenditures in FY 2020-21 Before Adjustments	\$12,843,482	\$138,953,554	\$82,235,758	\$23,419,267	\$283,742,205	\$172,489,287	\$32,086,524	\$62,619	\$745,832,695			
Estimated Date of Death Retractions	(\$425,171)	(\$879,847)	(\$72,810)	(\$16,385)	(\$1,109,217)	(\$14,725)	(\$38,571)	\$0	(\$2,556,725)			
Estimated Incentive Payment	\$686,486	\$7,253,914	\$3,281,734	\$854,748	\$11,517,888	\$6,952,854	\$1,577,557	\$2,489	\$32,127,670			
Health Insurance Provider Fee Payment	\$214,489	\$407,021	\$803,914	\$268,383	\$1,456,742	\$2,090,593	\$96,169	\$618	\$5,337,930			
Substance Abuse Disorder Treatment	\$452,435	\$2,877,598	\$10,447,466	\$1,817,840	\$26,786,823	\$771,610	\$306,537	\$6,708	\$43,467,017			
Risk Corridor Payment	\$857,085	\$1,623,852	\$3,420,645	\$1,142,450	\$5,940,674	\$8,620,596	\$392,092	\$2,606	\$22,000,000			
Total Estimated FY 2020-21 Expenditures Including Adjustments	\$14,628,807	\$150,236,092	\$100,116,707	\$27,486,303	\$328,335,116	\$190,910,214	\$34,420,308	\$75,040	\$846,208,586			
Estimated FY 2020-21 Adjusted Per Capita Expenditure	\$265.91	\$1,478.56	\$434.85	\$286.67	\$743.24	\$342.34	\$1,536.20	\$434.85	\$565.14			
This number is based on the projected average monthly caseload for the entire fiscal year, as applied through each month's trended growth in caseload.												
<sup>2</sup> Exhibit EE, pages 4 and 5 present the estimated percentage of incurred claims from any six month period	od that will be paid in th	at same six month period	d.									

		hibit EE - Expenditu								
	Behavioral H	lealth Capitation Ca		lity Category for FY	2021-22					
Service Expenditures	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Breast and Cervical Cancer Program	Totals	
Weighted Capitation Rate	\$24.88	\$128.26	\$37.43	\$24.76	\$64.00	\$29.55	\$132.02	\$37.43		
Adjusted Weighted Capitation Rate	\$22.82	\$126.91	\$37.33	\$24.61	\$63.79	\$29.38	\$131.86	\$37.33		
Estimated Monthly Caseload (1)	48,558	96,873	222,133	80,208	405,854	492,981	21,100	144	1,367,8	
Number of Months Rate is Effective	12	12	12	12	12	12	12	12		
Total Estimated Costs for FY 2021-22 Capitated Payments	\$13,297,085	\$147,533,630	\$99,503,870	\$23,686,029	\$310,667,276	\$173,832,121	\$33,387,351	\$64,504	\$801,971,86	
Estimated Percentage of Claims Paid in Current Period with Current Period Dates of Service (2)	100.06%	99.99%	99.93%	99.93%	100.02%	99.98%	99.99%	99.93%		
Estimated Expenditures for Claims Paid in Current Period with Current Period Dates of Service	\$13,305,063	\$147,518,877	\$99,434,217	\$23,669,449	\$310,729,409	\$173,797,355	\$33,384,012	\$64,459	\$801,902,84	
Estimated Expenditures for Prior Period Dates of Service	(\$7,706)	\$13,895	\$57,572	\$16,397	(\$56,747)	\$34,499	\$3,209	\$44	\$61,16	
Total Estimated Expenditures in FY 2021-22	\$13,297,357	\$147,532,772	\$99,491,789	\$23,685,846	\$310,672,662	\$173,831,854	\$33,387,221	\$64,503	\$801,964,00	
Estimated Date of Death Retractions	(\$425,171)	(\$879,847)	(\$72,810)	(\$16,385)	(\$1,109,217)	(\$14,725)	(\$38,571)	\$0	(\$2,556,72	
Estimated Incentive Payment	\$642,197	\$6,947,635	\$4,112,287	\$1,171,181	\$14,186,681	\$8,624,772	\$1,604,325	\$3,131	\$37,292,20	
Health Insurance Provider Fee Payment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	S	
Substance Abuse Disorder Treatment	\$1,904,129	\$12,110,729	\$43,969,455	\$7,650,603	\$112,735,662	\$3,247,415	\$1,290,097	\$28,233	\$182,936,32	
Total Estimated FY 2021-22 Expenditures Including Adjustments	\$15,418,512	\$165,711,289	\$147,500,720	\$32,491,244	\$436,485,788	\$185,689,316	\$36,243,072	\$95,867	\$1,019,635,80	
Estimated FY 2021-22 Adjusted Per Capita Expenditure	\$273.84	\$1,522.95	\$447.89	\$295.31	\$765.48	\$352.61	\$1,582.33	\$447.94	\$586.2	
his number is based on the projected average monthly caseload for the entire fiscal year, as applied through each month's trended growth in caseload.										

Exhibit EE - Expenditure Calculations by Eligibility Category												
	Behavioral I	Iealth Capitation Ca	alculations by Eligib	ility Category for FY	2022-23							
Service Expenditures	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Breast and Cervical Cancer Program	Totals			
Weighted Capitation Rate	\$25.63	\$132.11	\$38.55	\$25.50	\$65.92	\$30.44	\$135.98	\$38.55				
Adjusted Weighted Capitation Rate	\$23.51	\$130.72	\$38.45	\$25.34	\$65.70	\$30.27	\$135.82	\$38.45				
Estimated Monthly Caseload (1)	50,169	100,605	265,505	83,255	454,361	528,643	21,472	145	1,504,154			
Number of Months Rate is Effective	12	12	12	12	12	12	12	12				
Total Estimated Costs for FY 2022-23 Capitated Payments	\$14,152,422	\$157,816,275	\$122,491,107	\$25,320,626	\$358,231,384	\$192,021,310	\$34,994,427	\$66,896	\$905,094,447			
Estimated Percentage of Claims Paid in Current Period with Current Period Dates of Service (2)	100.06%	99.99%	99.93%	99.93%	100.02%	99.98%	99.99%	99.93%				
Estimated Expenditures for Claims Paid in Current Period with Current Period Dates of Service	\$14,160,913	\$157,800,493	\$122,405,363	\$25,302,902	\$358,303,030	\$191,982,906	\$34,990,928	\$66,849	\$905,013,384			
Estimated Expenditures for Prior Period Dates of Service	(\$7,978)	\$14,753	\$69,653	\$16,580	(\$62,133)	\$34,766	\$3,339	\$45	\$69,025			
Total Estimated Expenditures in FY 2022-23	\$14,152,935	\$157,815,246	\$122,475,016	\$25,319,482	\$358,240,897	\$192,017,672	\$34,994,267	\$66,894	\$905,082,409			
Estimated Date of Death Retractions	(\$425,171)	(\$879,847)	(\$72,810)	(\$16,385)	(\$1,109,217)	(\$14,725)	(\$38,571)	\$0	(\$2,556,725)			
Estimated Incentive Payment	\$664,854	\$7,376,682	\$4,975,194	\$1,184,301	\$15,533,364	\$8,691,606	\$1,669,368	\$3,225	\$40,098,593			
Health Insurance Provider Fee Payment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
Substance Abuse Disorder Treatment	\$1,904,129	\$12,110,729	\$43,969,455	\$7,650,603	\$112,735,662	\$3,247,415	\$1,290,097	\$28,233	\$182,936,323			
Annualize SB 20-033 Medicaid Buy-in Age 65 and Over	(\$31,074)	\$207,829	\$0	\$0	\$0	\$0	\$0	\$0	\$176,755			
Total Estimated FY 2022-23 Expenditures Including Adjustments	\$16,265,673	\$176,630,639	\$171,346,854	\$34,138,002	\$485,400,706	\$203,941,968	\$37,915,161	\$98,352	\$1,125,737,355			
Estimated FY 2022-23 Adjusted Per Capita Expenditure		\$1,568.66	\$461.29	\$304.12	\$788.45	\$363.23	\$1,629.79	\$461.34	\$601.72			
This number is based on the projected average monthly caseload for the entire fiscal year, as applied through each month's trended growth in caseload.												
Exhibit EE, pages 4 and 5 present the estimated percentage of incurred claims from any six month per	iod that will be paid in th	nat same six month perio	d.									

Evhibit EE	- Incurred But Not Reported R	unout by Fiscal Pariod	
EXHIDIT EF	Adults 65 and Older (OAP		
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	-0.06%	-	- I Ma III I I 2022 20
Incurred in FY 2020-21	100.06%	-0.06%	
Incurred in FY 2021-22	-	100.06%	-0.06%
Incurred in FY 2022-23	-	_	100.06%
	Disabled Individuals		
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	0.01%	-	
Incurred in FY 2020-21	99.99%	0.01%	
Incurred in FY 2021-22	-	99.99%	0.01%
Incurred in FY 2022-23	-	-	99.99%
	Low Income Adults		
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	0.07%	-	
Incurred in FY 2020-21	99.93%	0.07%	
Incurred in FY 2021-22	-	99.93%	0.07%
Incurred in FY 2022-23	-	-	99.93%
	Expansion Parents & Careta	ikers	
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	0.07%	-	
Incurred in FY 2020-21	99.93%	0.07%	
Incurred in FY 2021-22	-	99.93%	0.07%
Incurred in FY 2022-23	-	-	99.93%
	MAGI Adults		
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	-0.02%	-	
Incurred in FY 2020-21	100.02%	-0.02%	
Incurred in FY 2021-22	-	100.02%	-0.02%
Incurred in FY 2022-23	-	-	100.02%
	Eligible Children		
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	0.02%	-	
Incurred in FY 2020-21	99.98%	0.02%	
Incurred in FY 2021-22	-	99.98%	0.02%
Incurred in FY 2022-23	-	-	99.98%
	Foster Care		
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	0.01%	-	
Incurred in FY 2020-21	99.99%	0.01%	
Incurred in FY 2021-22	-	99.99%	0.01%
Incurred in FY 2022-23	-	-	99.99%
	Breast and Cervical Cancer Pr		
	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previous periods	0.07%	-	
Incurred in FY 2020-21	99.93%	0.07%	
Incurred in FY 2021-22	-	99.93%	0.07%
Incurred in FY 2022-23	-	-	99.93%

		But Not Reported Expen Adults 65 and Older (OAP-A		
	T	Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previ	ious periods	(\$8,777)	-	
Incurred in FY 2020-21		\$14,628,807	(\$9,251)	
Incurred in FY 2021-22		-	\$15,418,512	(\$9,75
Incurred in FY 2022-23			-	\$16,265,67
	Total Paid in Current Period	\$14,628,807	\$15,418,512	\$16,265,67
	Total IBNR Amount	(\$8,777)	(\$9,251)	(\$9,75
To	otal Paid for All Incurred Dates	\$14,620,030	\$15,409,261	\$16,255,91
		Disabled Individuals	, ,	, ,
		Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previ	ious periods	\$15,024	-	
Incurred in FY 2020-21		\$150,236,093	\$16,571	
Incurred in FY 2021-22		-	\$165,711,290	\$17,66
Incurred in FY 2022-23		-	-	\$176,630,64
	Total Paid in Current Period	\$150,236,093	\$165,711,290	\$176,630,64
	Total IBNR Amount	\$15,024	\$16,571	\$17,66
To	otal Paid for All Incurred Dates	\$150,251,116	\$165,727,861	\$176,648,30
		Low Income Adults		
		Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previ	ious periods	\$70,082	-	
Incurred in FY 2020-21		\$100,116,708	\$103,251	
Incurred in FY 2021-22		-	\$147,500,721	\$119,94
Incurred in FY 2022-23		-	-	\$171,346,85
	Total Paid in Current Period	\$100,116,708	\$147,500,721	\$171,346,85
	Total IBNR Amount	\$70,082	\$103,251	\$119,94
To	otal Paid for All Incurred Dates	\$100,186,789	\$147,603,972	\$171,466,79
-		Expansion Parents & Caretak		4,,
		Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previ	ious periods	\$19,240	-	
Incurred in FY 2020-21	-	\$27,486,303	\$22,744	
Incurred in FY 2021-22		-	\$32,491,244	\$23,89
Incurred in FY 2022-23		_		\$34,138,00
	Total Paid in Current Period	\$27,486,303	\$32,491,244	\$34,138,00
	Total IBNR Amount	\$19,240	\$22,744	\$23,89
T <sub>C</sub>	otal Paid for All Incurred Dates	\$27,505,543	\$32,513,988	\$34,161,89
		But Not Reported Expen		451,101,05
	Eamon EE Incurred	MAGI Adults	ditures by 1 iscui 1 criou	
		Paid in FY 2020-21	Paid in FY 2021-22	Paid in FY 2022-23
Incurred in all other previ	ious periods	(\$65,667)	-	
Incurred in FY 2020-21		\$328,335,116	(\$87,297)	
Incurred in FY 2021-22		_	\$436,485,787	(\$97,08
Incurred in FY 2022-23			-	\$485,400,70
	Total Paid in Current Period	\$328,335,116	\$436,485,787	\$485,400,70
				(\$97,08
	Total IBNR Amount	(\$65,667)	(\$87.297)	
To	Total IBNR Amount	(\$65,667) \$328,269,449	(\$87,297) \$436,398,490	
To	Total IBNR Amount otal Paid for All Incurred Dates	\$328,269,449	\$436,398,490	\$485,303,62
To		\$328,269,449 Eligible Children	\$436,398,490	\$485,303,62
To	otal Paid for All Incurred Dates	\$328,269,449		
	otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21	\$436,398,490	\$485,303,62
Incurred in all other previ	otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182	\$436,398,490  Paid in FY 2021-22	\$485,303,62
Incurred in all other previ	otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182	\$436,398,490 Paid in FY 2021-22	\$485,303,62 Paid in FY 2022-23
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22	otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215	\$436,398,490 Paid in FY 2021-22 - \$37,138 \$185,689,314	\$485,303,62  Paid in FY 2022-23  \$40,78 \$203,941,96
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 - \$190,910,215	\$436,398,490  Paid in FV 2021-22	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total IBNR Amount	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 - \$190,910,215 \$38,182	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  - \$185,689,314  \$37,138	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period	\$328,269,449 Eligible Children Paid in FV 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397	\$436,398,490  Paid in FV 2021-22	\$485,303,62  Paid in FY 2022-23  \$40,78
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total IBNR Amount	\$328,269,449 Elligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care	\$436,398,490  Paid in FV 2021-22  \$37,138 \$185,689,314  \$37,138 \$185,726,452	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FV 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  - \$185,689,314  \$37,138	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FV 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$3,442	\$436,398,490  Paid in FV 2021-22  \$37,138 \$185,689,314  \$37,138 \$185,726,452	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FV 2020-21 Paid in FV 2020-21 \$38,182 \$190,910,215 \$190,948,397 Foster Care Paid in FV 2020-21	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  \$3,624	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75  Paid in FY 2022-23
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FV 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$3,442	\$436,398,490  Paid in FY 2021-22  \$37,138 \$185,689,314 \$37,138 \$185,726,452  Paid in FY 2021-22	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75  Paid in FY 2022-23
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total IBNR Amount otal Paid for All Incurred Dates ious periods	\$328,269,449 Eligible Children Paid in FV 2020-21 \$38,182 \$190,910,215 \$38,182 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FV 2020-21 \$3,442 \$34,420,308	\$436,398,490  Paid in FV 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FV 2021-22  \$3,624  \$36,243,072	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$203,942,75  Paid in FY 2022-23  \$3,79  \$37,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total BNR Amount otal Paid for All Incurred Dates ious periods  Total Paid in Current Period	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$34,420,308	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  \$3,624  \$36,243,072  \$36,243,072	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total BNR Amount otal Paid for All Incurred Dates ious periods  Total Paid in Current Period  Total BNR Amount	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 \$38,182 \$190,940,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$3,442 \$34,420,308 \$34,420,308 \$53,442	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  Paid in FY 2021-22  \$36,243,072  \$36,243,072  \$36,243,072  \$36,243,072	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount otal Paid in Current Period	\$328,269,449 Eligible Children Paid in FV 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FV 2020-21 \$3,442 \$34,420,308 \$34,420,308 \$3,442 \$34,423,750	\$436,398,490  Paid in FY 2021-22  \$37,138 \$185,689,314 \$37,138 \$185,726,452  Paid in FY 2021-22  \$36,243,072 \$36,243,072 \$36,243,072 \$36,245,072	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount otal Paid in Current Period	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 \$38,182 \$190,940,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$3,442 \$34,420,308 \$34,420,308 \$34,420,308 \$34,420,308 \$34,420,308 \$34,420,308	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  Paid in FY 2021-22  \$36,243,072  \$36,243,072  \$36,243,072  \$36,243,076  \$36,246,696  gram	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,75  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16  \$33,79  \$337,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 To Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2021-22	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FV 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FV 2020-21 \$3,442 \$34,420,308 \$34,420,308 \$3,442 \$34,423,750	\$436,398,490  Paid in FY 2021-22  \$37,138 \$185,689,314 \$37,138 \$185,726,452  Paid in FY 2021-22  \$36,243,072 \$36,243,072 \$36,243,072 \$36,245,072	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$40,78  \$203,982,73  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23  To Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21 Paid in FY 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$34,420,308	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  Paid in FY 2021-22  \$36,243,072  \$36,243,072  \$36,243,072  \$36,243,076  \$36,246,696  gram	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,941,96  \$203,982,73  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16  \$37,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 Incurred in FY 2022-23 Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2021-23 To	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 \$38,182 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$3,442 \$34,420,308 \$34,420,308 \$33,422 \$34,420,308 \$34,420,308 \$34,420,308	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  Paid in FY 2021-22  \$36,243,072  \$36,243,072  \$36,243,072  \$36,243,072  \$78,624	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,942,96  \$203,982,73  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16  \$37,915,16  \$37,915,16  \$37,915,16
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2022-23 Incurred in FY 2022-23 Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2021-22 Incurred in FY 2021-22 Incurred in FY 2021-22	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21 Paid in FY 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$34,420,308	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  \$3,624  \$36,243,072  \$36,243,072  \$36,246,696  gram  Paid in FY 2021-22	\$485,303,62  Paid in FY 2022-23  \$40.78  \$203,941,96  \$203,941,96  \$203,982,75  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,26  \$37,915,16  \$37,915
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2022-23 Incurred in FY 2022-23 Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2021-23 To	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total BNR Amount otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total BNR Amount otal Paid for All Incurred Dates Britous periods  Britous periods	\$328,269,449 Eligible Children Paid in FY 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$34,420,308	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  \$36,243,072  \$36,243,072  \$36,243,072  \$36,246,696  gram  Paid in FY 2021-22  \$567  \$95,867	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,945,96  \$203,982,75  Paid in FY 2022-23  \$37,915,16  \$37,915,16  \$37,918,95  Paid in FY 2022-23
Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2022-23 Incurred in FY 2022-23 Incurred in all other previ Incurred in FY 2020-21 Incurred in FY 2021-22 Incurred in FY 2021-22 Incurred in FY 2021-22 Incurred in FY 2021-22	otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates ious periods  Total Paid in Current Period Total IBNR Amount, otal Paid for All Incurred Dates	\$328,269,449 Eligible Children Paid in FY 2020-21 Paid in FY 2020-21 \$38,182 \$190,910,215 \$190,910,215 \$38,182 \$190,948,397 Foster Care Paid in FY 2020-21 \$34,420,308	\$436,398,490  Paid in FY 2021-22  \$37,138  \$185,689,314  \$37,138  \$185,726,452  Paid in FY 2021-22  Paid in FY 2021-22  \$36,243,072  \$36,243,072  \$36,243,072  \$36,243,072  \$78,624	\$485,303,62  Paid in FY 2022-23  \$40,78  \$203,941,96  \$203,942,96  \$203,982,73  Paid in FY 2022-23  \$3,79  \$37,915,16  \$37,915,16  \$37,915,16  \$37,915,16  \$37,915,16

		Exhibit FF - Medicaio	d Behavioral Health RA	E Enrollment Adjustme	nt			
	Fiscal Year	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care
	Estimated Average Monthly RAE Enrollment	44,323	89,510	189,803	63,202	329,569	477,435	21,794
FY 2018-19	Average Caseload	47,686	90,347	190,316	63,563	330,524	479,628	21,815
	RAE Enrollment as a Percentage of Caseload	92.95%	99.07%	99.73%	99.43%	99.71%	99.54%	99.90%
	Estimated Average Monthly RAE Enrollment	43,615	89,289	177,733	59,139	321,901	460,897	21,294
FY 2019-20	Average Caseload	47,551	90,234	178,223	59,499	322,951	463,472	21,320
	RAE Enrollment as a Percentage of Caseload	91.72%	98.95%	99.73%	99.39%	99.67%	99.44%	99.88%
Adjustment Factor	Source	Adults 65 and Older (OAP- A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care
FY 2020-21	FY 2019-20 RAE Enrollment as a Percentage of Caseload	-8.28%	-1.05%	-0.27%	-0.61%	-0.33%	-0.56%	-0.12%
FY 2021-22	Assumed Constant	-8.28%	-1.05%	-0.27%	-0.61%	-0.33%	-0.56%	-0.12%
FY 2022-23	Assumed Constant	-8.28%	-1.05%	-0.27%	-0.61%	-0.33%	-0.56%	-0.12%

Exhibit GG - Medicaid Behavioral Health Capitation Rate Trends and Forecasts														
	Capitation Rate Trends													
Fiscal Year <sup>(1)</sup>	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Weighted Behavioral Health Total <sup>(2)</sup>						
FY 2012-13 Actuals (3)	\$13.65	\$140.33	\$21.90	\$21.89	\$108.85	\$16.76	\$171.84	\$40.28						
% Change from FY 2012-13	-1.73%	-0.40%	1.06%	1.02%	7.94%	2.63%	-4.16%	9.23%						
FY 2013-14 Actuals	\$13.96	\$144.99	\$24.02	\$24.02	\$79.38	\$17.22	\$174.80	\$40.28						
% Change from FY 2012-13	2.27%	3.32%	9.68%	9.73%	-27.07%	2.74%	1.72%	0.00%						
FY 2014-15 Actuals	\$14.22	\$146.82	\$25.96	\$26.01	\$55.52	\$19.20	\$215.40	\$40.86						
% Change from FY 2013-14	1.86%	1.26%	8.08%	8.28%	-30.06%	11.50%	23.23%	1.43%						
FY 2015-16 Actuals	\$16.49	\$130.24	\$26.66	\$19.37	\$56.17	\$19.89	\$165.94	\$39.71						
% Change from FY 2014-15	15.96%	-11.29%	2.70%	-25.53%	1.17%	3.59%	-22.96%	-2.82%						
FY 2016-17 Actuals	\$18.35	\$137.78	\$28.47	\$15.65	\$52.42	\$19.46	\$123.59	\$38.40						
% Change from FY 2015-16	11.28%	5.79%	6.79%	-19.20%	-6.68%	-2.16%	-25.52%	-3.28%						
FY 2017-18 Actuals	\$19.51	\$132.94	\$29.12	\$14.43	\$46.23	\$19.55	\$120.92	\$37.52						
% Change from FY 2016-17	6.32%	-3.51%	2.28%	-7.80%	-11.81%	0.46%	-2.16%	-2.30%						
FY 2018-19 Actuals	\$21.63	\$137.12	\$31.22	\$16.65	\$53.10	\$20.65	\$120.40	\$41.26						
% Change from FY 2017-18	10.87%	3.14%	7.21%	15.38%	14.87%	5.63%	-0.43%	9.96%						
FY 2019-20 Actuals	\$25.66	\$137.53	\$31.88	\$24.25	\$62.31	\$25.60	\$126.84	\$46.86						
% Change from FY 2018-19	18.63%	0.30%	2.11%	45.65%	17.34%	23.97%	5.35%	13.57%						
FY 2020-21 Estimated Weighted Average Rate	\$24.16	\$124.52	\$36.34	\$24.04	\$62.14	\$28.69	\$128.17	\$47.40						
% Change from FY 2019-20	-5.85%	-9.46%	13.99%	-0.87%	-0.27%	12.07%	1.05%	1.15%						
FY 2021-22 Estimated Weighted Average Rate	\$24.88	\$128.26	\$37.43	\$24.76	\$64.00	\$29.55	\$132.02	\$49.17						
% Change from FY 2020-21	2.98%	3.00%	3.00%	3.00%	2.99%	3.00%	3.00%	3.72%						
FY 2022-23 Estimated Weighted Average Rate	\$25.63	\$132.11	\$38.55	\$25.50	\$65.92	\$30.44	\$135.98	\$50.47						
% Change from FY 2021-22	\$0.03	3.00%	2.99%	2.99%	3.00%	3.01%	3.00%	2.65%						

<sup>1</sup> Breast and Cervical Cancer Program participants share a capitation rate with the remainder of the Low Income Adult population, and comprise less than 1% of that total population. As such, a separate analysis was not performed.

<sup>&</sup>lt;sup>2</sup> The Weighted Behavioral Health Total is the weighted capitation rate distributed by Regional Accountable Entity (RAE) across each eligibility category based on the total number of claims processed (i.e. Adults 65 and older make up a percentage of all client claims, and each RAE services some subset of the total number of claims for Adults 65 and older).

	Exhibit GG - Medicaid Behavioral Health Capitation Rate Trends and Forecasts													
			Capitation Rate Act	ross Eligibility Categorie	S									
Fiscal Year	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	Total						
FY 2012-13 Average Caseload	40,827	71,859	107,760	41,545	10,634	368,079	17,777	658,481						
Percentage of Total Caseload	6.20%	10.91%	16.36%	6.31%	1.61%	55.90%	2.70%	100.00%						
FY 2012-13 Average Weighted Capitation Rate	\$13.65	\$140.33	\$21.90	\$21.89	\$108.85	\$16.76	\$171.84	\$36.88						
FY 2013-14 Average Caseload	41,836	76,837	138,897	47,082	87,243	424,377	18,267	834,539						
Percentage of Total Caseload	5.01%	9.21%	16.64%	5.64%	10.45%	50.85%	2.19%	100.00%						
FY 2013-14 Average Weighted Capitation Rate	\$13.96	\$144.99	\$24.02	\$24.02	\$79.38	\$17.22	\$174.80	\$40.28						
FY 2014-15 Average Caseload	41,817	80,641	178,328	71,989	241,392	495,836	20,036	1,130,039						
Percentage of Total Caseload	3.70%	7.14%	15.78%	6.37%	21.36%	43.88%	1.77%	100.00%						
FY 2014-15 Average Weighted Capitation Rate	\$14.22	\$146.82	\$25.96	\$26.01	\$55.52	\$19.20	\$215.40	\$40.86						
FY 2015-16 Average Caseload	42,403	85,546	179,514	86,964	320,374	526,694	19,935	1,261,430						
Percentage of Total Caseload	3.36%	6.78%	14.23%	6.89%	25.40%	41.75%	1.58%	100.00%						
FY 2015-16 Average Weighted Capitation Rate	\$16.49	\$130.24	\$26.66	\$19.37	\$56.17	\$19.89	\$165.94	\$39.71						
FY 2016-17 Average Caseload	43,941	85,111	176,957	101,059	347,848	534,204	20,310	1,309,430						
Percentage of Total Caseload	3.36%	6.50%	13.51%	7.72%	26.56%	40.80%	1.55%	100.00%						
FY 2016-17 Average Weighted Capitation Rate	\$18.35	\$137.78	\$28.47	\$15.65	\$52.42	\$19.46	\$123.59	\$38.40						
FY 2017-18 Average Estimated Caseload	45,907	87,503	192,207	74,610	352,607	503,118	21,473	1,277,425						
Percentage of Total Caseload	3.59%	6.85%	15.05%	5.84%	27.60%	39.39%	1.68%	100.00%						
FY 2017-18 Average Weighted Capitation Rate	\$19.51	\$132.94	\$29.12	\$14.43	\$46.23	\$19.55	\$120.92	\$37.52						
FY 2018-19 Average Estimated Caseload	47,686	90,347	190,316	63,563	330,524	479,628	21,815	1,223,879						
Percentage of Total Caseload	3.90%	7.38%	15.55%	5.19%	27.01%	39.19%	1.78%	100.00%						
FY 2018-19 Average Weighted Capitation Rate	\$21.63	\$137.12	\$31.22	\$16.65	\$53.10	\$20.65	\$120.40	\$41.26						
FY 2019-20 Average Estimated Caseload	47,551	90,234	178,223	59,499	322,951	463,472	21,320	1,183,250						
Percentage of Total Caseload	4.02%	7.63%	15.06%	5.03%	27.29%	39.17%	1.80%	100.00%						
FY 2019-20 Average Weighted Capitation Rate	\$25.66	\$137.53	\$31.88	\$24.25	\$62.31	\$25.60	\$126.84	\$46.86						
FY 2020-21 Average Estimated Caseload	48,301	93,979	189,113	81,695	381,763	503,854	20,887	1,319,592						
Percentage of Total Caseload	3.66%	7.12%	14.33%	6.19%	28.93%	38.18%	1.58%	100.00%						
FY 2020-21 Average Weighted Capitation Rate	\$24.16	\$124.52	\$36.34	\$24.04	\$62.14	\$28.69	\$128.17	\$47.40						
FY 2021-22 Average Estimated Caseload	48,558	96,873	222,133	80,208	405,854	492,981	21,100	1,367,707						
Percentage of Total Caseload	3.55%	7.08%	16.24%	5.86%	29.67%	36.04%	1.54%	103.65%						
FY 2021-22 Average Weighted Capitation Rate	\$24.88	\$128.26	\$37.43	\$24.76	\$64.00	\$29.55	\$132.02	\$49.17						
FY 2022-23 Average Estimated Caseload	50,169	100,605	265,505	83,255	454,361	528,643	21,472	1,504,009						
Percentage of Total Caseload	3.34%	6.69%	17.65%	5.54%	30.21%	35.15%	1.43%	113.98%						
FY 2022-23 Average Weighted Capitation Rate	\$25.63	\$132.11	\$38.55	\$25.50	\$65.92	\$30.44	\$135.98	\$50.47						
<sup>1</sup> Breast and Cervical Cancer Program participants share	a capitation rate with the remai	nder of the Low Income Adult	population, and comprise les	ss than 1% of that total populat	tion. As such, a separate analy-	sis was not performed.								

Exhibit HH - Forecast Model Comparisons - Final Forecasts													
		Adjustr	nent Factors for Forecasted l	Rates									
Model (1)	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care						
FY 2020-21 Estimated Rate													
Weighted Capitation Point Estimate	\$24.16	\$124.52	\$36.34	\$24.04	\$62.14	\$28.69	\$128.17						
Retroactivity Adjustment Multiplier (Exhibit FF)	-8.28%	-1.05%	-0.27%	-0.61%	-0.33%	-0.56%	-0.12%						
FY 2020-21 Estimated Rate Final Paid	\$22.16	\$123.21	\$36.24	\$23.89	\$61.93	\$28.53	\$128.02						
FY 2021-22 Estimated Rate							·						
Weighted Capitation Point Estimate	\$24.88	\$128.26	\$37.43	\$24.76	\$64.00	\$29.55	\$132.02						
Retroactivity Adjustment Multiplier (Exhibit FF)	-8.28%	-1.05%	-0.27%	-0.61%	-0.33%	-0.56%	-0.12%						
FY 2021-22 Estimated Rate Final Paid	\$22.82	\$126.91	\$37.33	\$24.61	\$63.79	\$29.38	\$131.86						
FY 2022-23 Estimated Rate													
Weighted Capitation Point Estimate	\$25.63	\$132.11	\$38.55	\$25.50	\$65.92	\$30.44	\$135.98						
Retroactivity Adjustment Multiplier (Exhibit FF)	-8.28%	-1.05%	-0.27%	-0.61%	-0.33%	-0.56%	-0.12%						
FY 2022-23 Estimated Rate Final Paid	\$23.51	\$130.72	\$38.45	\$25.34	\$65.70	\$30.27	\$135.82						

Breast and Cervical Cancer Program participants share a capitation rate with the remainder of the Low Income Adult population, and comprise less than 1% of that total population. As such, a forecast for BCCP program eligible was not performed.

The number presented here reflects the final outcome of payment of payment of partial capitations and the estimate of full IBNR based on that component of IBNR runout that has been completed. Because the IBNR component is estimated, this final figure is estimated and may change in future requests

	Exhibit HH - Forecast Model Comparisons - Capitation Trend Models							
	Capitation Rate Forecast Model							
Model (1)	Adults 65 and Older (OAP-A)	Disabled Individuals	Low Income Adults	Expansion Parents & Caretakers	MAGI Adults	Eligible Children	Foster Care	
FY 2019-20 Actuals	\$25.66	\$137.53	\$31.88	\$24.25	\$62.31	\$25.60	\$126.84	
FY 2020-21 Estimated Weighted Average Rate			\$36.34		\$62.14	\$28.69	\$128.17	
% Growth from FY 2019-20 to FY 2020-21 Rate	-5.85%	-9.46%	13.99%	-0.87%	-0.27%	12.07%	1.05%	
Selected Trend Models								
Average Growth Model			\$38.67				\$129.39	
% Difference from FY 2020-21			6.41%				0.95%	
Two Period Moving Average Model			\$34.11				\$127.51	
% Difference from FY 2020-21	3.10%	5.23%	-6.14%	0.46%	0.14%	-5.37%	-0.51%	
Exponential Growth Model			\$38.49			\$34.39	\$133.16	
% Difference from FY 2020-21	9.85%	-3.07%	5.92%	28.12%	11.15%	19.87%	3.89%	
Linear Growth Model <sup>2</sup>	\$17.70	\$91.31	\$23.39	\$19.20	\$47.53	\$21.69	\$102.43	
% Difference from FY 2020-21	-26.74%	-26.67%	-35.64%	-20.13%	-23.51%	-24.40%	-20.08%	
2020 S-2 Trend	2.69%	2.99%	5.30%	7.35%	5.57%	4.78%	3.71%	
CY 2019 Forecast Minimum	\$17.70	\$91.31	\$23.39	\$19.20	\$47.53	\$21.69	\$102.43	
CY 2019 Forecast Maximum	\$26.54		\$38.67			\$34.39	\$133.16	
% Change from FY 2020-21 Rate to Selected FY 2021-22								
Capitation Rate (2)	3.00%	3.00%	3.00%	3.00%	3.00%	3.00%	3.00%	
FY 2021-22 Forecast Point Estimate	\$24.88	\$128.26	\$37.43	\$24.76	\$64.00	\$29.55	\$132.02	
% Change from FY 2021-22 Rate to Selected FY 2022-23	3,00%	3.00%	3.00%	3.00%	3,00%	3.00%	3.00%	
Capitation Rate (3)	3.00%	3.00%	3.00%	3.00%	3.00%	3.00%	3.00%	
FY 2022-23 Forecast Point Estimate			\$38.55		\$65.92	\$30.44	\$135.98	
<sup>1</sup> Breast and Cervical Cancer Program participants share a capitation	rate with the remainder of the Low Inc	ome Adult population and comprise less t	han 1% of that total population. As s	such, a forecast for BCCP program e	ligible was not performed.			
	Adults 65 and Older (OAP-A)	Assumed actuarily sound based on case	load growth		MAGI Adults/ Expansion Parents & Caretakers	Assumed actuarily sound based on case	load growth	
<sup>2</sup> Percentage selected to modify capitation rates for FY 2021-22	Disabled Individuals			<sup>3</sup> Percentage selected to modify capitation rates for FY 2022-23	Eligible Children	Assumed actuarily sound based on caseload growth		
	Low Income Adults				Foster Care	Assumed actuarily sound based on case	oad growth	

	Exhibit II - Reconciliations							
Total Reconciliations by Fiscal Year								
	FY 2018-19 Actual	FY 2019-20 Actual	FY 2020-21 Estimate	FY 2021-22 Estimate	FY 2022-23 Estimate			
Estimated Reconciliation for FY 2017-18 (1)	\$27,042,726	\$0	\$0	\$0	\$0			
Estimated Reconciliation for FY 2018-19 <sup>(2)</sup>	\$0	\$22,587,965	\$0	\$0	\$0			
Estimated Reconciliation for FY 2019-20 <sup>(3)</sup>	\$0	\$0	\$59,465,600	\$0	\$0			
Estimated Reconciliation for FY 2020-21 <sup>(4)</sup>	\$0	\$0	\$0	\$37,292,208	\$0			
Estimated Reconciliation for FY 2021-22 <sup>(5)</sup>	\$0	\$0	\$0	\$0	\$40,098,593			
Net Impact of Estimated Reconciliations	\$27,042,726	\$22,587,965	\$59,465,600	\$37,292,208	\$40,098,593			

- (1) This reconciliation is made up of \$21,623,666 for the Incentive Payments, and \$5,419,060 for the HIPF P (ayment for service dates in FY 2017-18
- (2) This reconciliation is made up of \$22,587,965 for the Incentive payments for service dates in FY 2018-19
- (3) This reconciliation is made up of \$5,337,930 for the HIPF Payment, \$32,127,670 for the Incentive payments and \$22,000,000 for the Risk Corridor Payment for service dates in FY 2019-20
- (4) This reconciliation is made up of \$37,292,208 for the Incentive payments for service dates in FY 2020-21
- (5) This reconciliation is made up of \$40,098,593 for the Incentive payments for service dates in FY 2021-22

Reconciliation Fund Splits							
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds		
Estimated Reconciliation for FY 2020-21	\$59,465,600	\$18,003,369	\$7,889,257	\$0	\$33,572,974		
Estimated Reconciliation for FY 2021-22	\$37,292,208	\$10,207,908	\$8,438,196	\$0	\$18,646,104		
Estimated Reconciliation for FY 2022-23	\$40,098,593	\$10,934,255	\$9,115,041	\$0	\$20,049,297		

	Exhi	ibit JJ - Alternati	ve Financing Pop	ulations (1)				
		FY 2020-	-21 Calculation					
		Ca	pitations					
DESCRIPTION OF I	ESTIMATE				CALC	CULATION OF MAT	ГСН	
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate
Healthcare Affordability and Sustainability Fee Cash Fund:								
MAGI Parents and Caretakers 60% - 68% FPL	5,659	\$434.87	\$2,460,915	\$0	\$1,116,025	\$0	\$1,344,890	54.65%
Expansion Parents & Caretakers	81,695	\$286.67	\$23,419,267	\$0	\$2,341,927	\$0	\$21,077,340	90.00%
MAGI Adults	381,763	\$743.24	\$283,742,205	\$0	\$28,374,220	\$0	\$255,367,985	90.00%
Non Newly Eligible	3,048	\$743.21	\$2,265,021	\$0	\$426,730	\$0	\$1,838,291	81.16%
Disabled Buy-In	14,580	\$1,478.52	\$21,556,856	\$0	\$9,776,034	\$0	\$11,780,822	54.65%
Continuous Eligibility for Children	18,372	\$342.34	\$6,289,471	\$0	\$2,852,275	\$0	\$3,437,196	54.65%
Total from Healthcare Affordability and Sustainability Fee Fund	-	-	\$339,733,735	\$0	\$44,887,211	\$0	\$294,846,524	
SB 11-008 Eligible Children								
Former CHP+ Kids	65,834	\$342.34	\$22,537,316	\$6,506,523	\$0	\$0	\$16,030,793	71.13%
SB 11-250 Eligible Pregnant Adults								
Former CHP+ Prenatal	3,448	\$434.77	\$1,499,084	\$432,786	\$0	\$0	\$1,066,298	71.13%
		Fee-	for-Service	-				
DESCRIPTION OF I	ESTIMATE			CALCULATION OF MATCH				
Eligibility Category	Caseload	Estimated Per Capita Cost	<b>Total Estimate</b>	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate
Healthcare Affordability and Sustainability Fee Cash Fund:								
MAGI Parents and Caretakers 60% - 68% FPL	5,659	\$13.07	\$73,983	\$0	\$33,551	\$0	\$40,432	54.65%
Expansion Parents & Caretakers	81,695	\$26.23	\$2,142,693	\$0	\$214,269	\$0	\$1,928,424	90.00%
MAGI Adults	381,763	\$15.70	\$5,995,558	\$0	\$599,556	\$0	\$5,396,002	90.00%
Non Newly Eligible	3,048	\$15.70	\$47,862	\$0	\$9,017	\$0	\$38,845	81.16%
Disabled Buy-In	14,580	\$8.57	\$124,967	\$0	\$56,673	\$0	\$68,294	54.65%
Continuous Eligibility for Children	18,372	\$3.80	\$69,898	\$0	\$31,699	\$0	\$38,199	54.65%
Total from Healthcare Affordability and Sustainability Fee Fund	-	-	\$8,454,961	\$0	\$944,765	\$0	\$7,510,196	
SB 11-008 Eligible Children								
Former CHP+ Kids	65,834	\$3.80	\$250,474	\$72,312	\$0	\$0	\$178,162	71.13%
SB 11-250 Eligible Pregnant Adults								
Former CHP+ Prenatal	3,448	\$1.09	\$3,754	\$1,084	\$0	\$0	\$2,670	71.13%
<sup>1</sup> The Department's allocation methodology is described in the Alternative Fir	ancing Populations sect	tion of this Budget Re	quest.				<del></del>	

	Exhi	bit JJ - Alternati	ve Financing Pop	oulations (1)				
		FY 2021-	-22 Calculation					
		Ca	pitations					
DESCRIPTION OF I	ESTIMATE				CALC	CULATION OF MAT	СН	
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate
Healthcare Affordability and Sustainability Fee Cash Fund:								
MAGI Parents and Caretakers 60% - 68% FPL	6,012	\$447.92	\$2,692,776	\$0	\$1,346,388	\$0	\$1,346,388	50.00%
Expansion Parents & Caretakers	80,208	\$295.31	\$23,685,845	\$0	\$2,368,584	\$0	\$21,317,261	90.00%
MAGI Adults	405,854	\$765.48	\$310,672,661	\$0	\$31,067,266	\$0	\$279,605,395	90.00%
Non Newly Eligible	3,543	\$765.49	\$2,712,328	\$0	\$542,466	\$0	\$2,169,862	80.00%
Disabled Buy-In	13,742	\$1,522.96	\$20,928,569	\$0	\$10,464,284	\$0	\$10,464,285	50.00%
Continuous Eligibility for Children	18,611	\$352.61	\$6,562,300	\$0	\$3,281,150	\$0	\$3,281,150	50.00%
Total from Healthcare Affordability and Sustainability Fee Fund	-	-	\$367,254,479	\$0	\$49,070,138	\$0	\$318,184,341	
SB 11-008 Eligible Children								
Former CHP+ Kids	65,926	\$352.61	\$23,246,304	\$8,136,206	\$0	\$0	\$15,110,098	65.00%
SB 11-250 Eligible Pregnant Adults								
Former CHP+ Prenatal	3,508	\$447.93	\$1,571,349	\$549,972	\$0	\$0	\$1,021,377	65.00%
		Fee-	for-Service					
DESCRIPTION OF I	ESTIMATE			CALCULATION OF MATCH				
Eligibility Category	Caseload	Estimated Per Capita Cost	<b>Total Estimate</b>	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate
Healthcare Affordability and Sustainability Fee Cash Fund:								
MAGI Parents and Caretakers 60% - 68% FPL	6,012	\$13.07	\$78,594	\$0	\$39,297	\$0	\$39,297	50.00%
Expansion Parents & Caretakers	80,208	\$26.23	\$2,103,692	\$0	\$210,369	\$0	\$1,893,323	90.00%
MAGI Adults	405,854	\$15.70	\$6,373,906	\$0	\$637,391	\$0	\$5,736,515	90.00%
Non Newly Eligible	3,543	\$15.70	\$55,647	\$0	\$11,129	\$0	\$44,518	80.00%
Disabled Buy-In	13,742	\$8.57	\$117,784	\$0	\$58,892	\$0	\$58,892	50.00%
Continuous Eligibility for Children	18,611	\$2.78	\$51,748	\$0	\$25,874	\$0	\$25,874	50.00%
Total from Healthcare Affordability and Sustainability Fee Fund	-	-	\$8,781,371	\$0	\$982,952	\$0	\$7,798,419	
SB 11-008 Eligible Children								
Former CHP+ Kids	65,926	\$3.80	\$250,824	\$87,788	\$0	\$0	\$163,036	65.00%
SB 11-250 Eligible Pregnant Adults								
Former CHP+ Prenatal	3,508	\$1.09	\$3,819	\$1,337	\$0	\$0	\$2,482	65.00%
<sup>1</sup> The Department's allocation methodology is described in the Alternative Fir	ancing Populations sect	ion of this Budget Re	quest.				<del></del>	<u> </u>

	Exh	ibit JJ - Alternati	ve Financing Pop	ulations <sup>(1)</sup>				
			-23 Calculation					
			pitations					
DESCRIPTION OF E	STIMATE		F		CAL	CULATION OF MA	ТСН	
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate
Healthcare Affordability and Sustainability Fee Cash Fund:								
MAGI Parents and Caretakers 60% - 68% FPL	7,234	\$461.29	\$3,336,922	\$0	\$1,668,461	\$0	\$1,668,461	50.00%
Expansion Parents & Caretakers	83,255	\$304.12	\$25,319,482	\$0	\$2,531,948	\$0	\$22,787,534	90.00%
MAGI Adults	454,361	\$788.45	\$358,240,897	\$0	\$35,824,090	\$0	\$322,416,807	90.00%
Non Newly Eligible	3,967	\$788.45	\$3,127,525	\$0	\$625,505	\$0	\$2,502,020	80.00%
Disabled Buy-In	15,305	\$1,568.65	\$24,007,761	\$0	\$12,003,880	\$0	\$12,003,881	50.00%
Continuous Eligibility for Children	18,927	\$363.23	\$6,874,860	\$0	\$3,437,430	\$0	\$3,437,430	50.00%
Total from Healthcare Affordability and Sustainability Fee Fund	-	-	\$420,907,447	\$0	\$56,091,314	\$0	\$364,816,133	
SB 11-008 Eligible Children								
Former CHP+ Kids	73,738	\$363.22	\$26,783,624	\$9,374,268	\$0	\$0	\$17,409,356	65.00%
SB 11-250 Eligible Pregnant Adults								
Former CHP+ Prenatal	3,652	\$461.33	\$1,684,775	\$589,671	\$0	\$0	\$1,095,104	65.00%
		Fee-	for-Service					
DESCRIPTION OF E	STIMATE				CAL	CULATION OF MA	ТСН	
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate
Healthcare Affordability and Sustainability Fee Cash Fund:								
MAGI Parents and Caretakers 60% - 68% FPL	7,234	\$13.07	\$94,573	\$0	\$47,286	\$0	\$47,287	50.00%
Expansion Parents & Caretakers	83,255	\$26.23	\$2,183,608	\$0	\$218,361	\$0	\$1,965,247	90.00%
MAGI Adults	454,361	\$15.70	\$7,135,699	\$0	\$713,569	\$0	\$6,422,130	90.00%
Non Newly Eligible	3,967	\$15.70	\$62,296	\$0	\$12,459	\$0	\$49,837	80.00%
Disabled Buy-In	15,305	\$8.57	\$131,178	\$0	\$65,589	\$0	\$65,589	50.00%
Continuous Eligibility for Children	18,927	\$2.78	\$52,627	\$0	\$26,313	\$0	\$26,314	50.00%
Total from Healthcare Affordability and Sustainability Fee Fund			\$9,659,981	\$0	\$1,083,577	\$0	\$8,576,404	
SB 11-008 Eligible Children					_			_

\$3.80

\$1.09

73,738

3,652

<sup>1</sup> The Department's allocation methodology is described in the Alternative Financing Populations section of this Budget Request.

\$280,548

\$3,976

\$98,192

\$1,392

\$0

\$0

\$0

\$0

\$182,356

\$2,584

65.00%

65.00%

Former CHP+ Kids

Former CHP+ Prenatal

SB 11-250 Eligible Pregnant Adults

Ex	hibit KK - Medica	id Behavioral Healt	h Fee-For-Ser	vice Forecast			
		FY 2020-21 Calcul	ation				
			Estimated Cha	nge in Total Beh Caseload	avioral Health		
Components	FY 2019-20 YTD Actual	FY 2020-21 Appropriation	FY 2019-20 Caseload	FY 2020-21 Projected Caseload	Forecasted Change in Caseload	FY 2020-21 Estimate	FY 2020-21 Change from Appropriation
Inpatient Services	\$1,221,675	\$1,304,501	1,183,387	1,319,736	11.52%	\$1,334,033	\$29,532
Outpatient Services	\$11,929,644	\$12,738,442	1,183,387	1,319,736	11.52%	\$13,026,829	\$288,387
Physician Services	\$9,119	\$9,737	1,183,387	1,319,736	11.52%	\$9,957	\$220
Total After Prior Year Adjustments	\$13,160,438	\$14,052,680				\$14,370,820	\$318,140
		FY 2021-22 Calcul	ation				
Components		FY 2020-21 Estimate	Estimated Change in Total Behavioral Health Caseload		FY 2021-22	FY 2021-22 Change from	
Components	11 2020 21 Estimate	FY 2020-21 Forecasted Caseload	FY 2021-22 Forecasted Caseload	Forecasted Change in Caseload	Estimate	FY 2020-21 Estimate	
Inpatient Services		\$1,334,033	1,319,736	1,367,851	3.65%	\$1,382,670	\$48,636
Outpatient Services		\$13,026,829	1,319,736	1,367,851	3.65%	\$13,501,762	\$474,933
Physician Services		\$9,957	1,319,736	1,367,851	3.65%	\$10,320	\$363
Total After Prior Year Adjustments		\$14,370,820				\$14,894,752	\$523,932
		•			•		
		FY 2022-23 Calcul	ation				
			Estimated Cha	nge in Total Beh Caseload	avioral Health		
Components		FY 2020-21 Estimate (2)	FY 2021-22 Average Monthly Caseload	FY 2022-23 Forecasted Average Monthly Caseload	Forecasted Change in Caseload	FY 2022-23 Estimate	FY 2022-23 Change from FY 2021-22 Estimate
Inpatient Services		\$1,382,670	1,367,851	1,504,154	9.96%	\$1,520,450	\$137,780
Outpatient Services		\$13,501,762	1,367,851	1,504,154	9.96%	\$14,847,184	\$1,345,422
Physician Services		\$10,320	1,367,851	1,504,154	9.96%	\$11,349	\$1,028
Total After Prior Year Adjustments	\$14,894,752				\$16,378,982	\$1,484,231	
<sup>2</sup> The FY 2020-21 estimates are the base for the FY 2021-22 estimates.							

	Exhibit LL - Global Reasonableness Test for Medicaid Behavioral Health Capitation Payments (1)								
	Actual/Estimated Expenditures	Percent Change	Dollar Change	Two-year Rolling Average	Percent Change Two-year Average	Three-year Rolling Average	Percent Change Three-year Average		
FY 2007-08 Actual	\$197,346,769	-	-	-	-	-	-		
FY 2008-09 Actual	\$217,637,190	10.28%	\$20,290,421	\$207,491,980	-	-	-		
FY 2009-10 Actual	\$229,208,480	5.32%	\$11,571,290	\$223,422,835	7.68%	\$214,730,813	-		
FY 2010-11 Actual	\$255,016,621	11.26%	\$25,808,141	\$242,112,551	8.37%	\$233,954,097	8.95%		
FY 2011-12 Actual	\$275,399,032	7.99%	\$20,382,411	\$265,207,827	9.54%	\$253,208,045	8.23%		
FY 2012-13 Actual	\$305,872,244	11.07%	\$30,473,212	\$290,635,638	9.59%	\$278,762,633	10.09%		
FY 2013-14 Actual	\$421,229,684	37.71%	\$115,357,440	\$363,550,964	25.09%	\$334,166,987	19.88%		
FY 2014-15 Actual	\$577,485,822	37.10%	\$156,256,138	\$499,357,753	37.36%	\$434,862,583	30.13%		
FY 2015-16 Actual	\$611,305,508	5.86%	\$33,819,686	\$594,395,665	19.03%	\$536,673,671	23.41%		
FY 2016-17 Actual	\$611,638,692	0.05%	\$333,184	\$611,472,100	2.87%	\$600,143,341	11.83%		
FY 2017-18 Actual	\$523,486,574	-14.41%	(\$88,152,118)	\$567,562,633	-7.18%	\$582,143,591	-3.00%		
FY 2018-19 Actual	\$625,885,645	2.33%	\$14,246,953	\$587,003,637	-4.00%	\$593,079,105	-1.18%		
FY 2020-21 Appropriation vs. FY 2019-20 Actual	\$1,120,247,735	78.99%	\$494,362,089	\$698,512,831	17.52%	\$678,341,663	14.38%		
FY 2020-21 Estimate vs. FY 2019-20 Actual	\$846,208,589	35.20%	\$220,322,944	\$736,047,117	23.83%	\$651,804,875	9.90%		
FY 2020-21 Estimate vs. FY 2020-21 Appropriation	\$846,208,589	-24.46%	(\$274,039,145)	\$736,047,117	5.37%	\$651,804,875	-3.91%		
FY 2021-22 Estimate vs. FY 2020-21 Appropriation	\$1,019,635,808	-8.98%	(\$100,611,927)	\$1,069,941,771	53.17%	\$727,097,969	7.19%		
FY 2021-22 Estimate vs. FY 2020-21 Estimate	\$1,019,635,808	20.49%	\$173,427,219	\$932,922,198	26.75%	\$814,443,406	24.95%		
FY 2022-23 Estimate vs. FY 2020-21 Appropriation	\$1,125,737,354	0.49%	\$5,489,619	\$1,122,992,544	60.77%	\$1,088,540,299	60.47%		
FY 2022-23 Estimate vs. FY 2021-22 Estimate	\$1,125,737,354	10.41%	\$106,101,546	\$1,072,686,581	14.98%	\$997,193,917	22.44%		
<sup>1</sup> This analysis compares the per	rcent change between B	ehavioral Health Capita	ation Payments Report	ed in Exhibit DD. Oth	er Medicaid Behaviora	Health Payments have	e been excluded.		

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY 2021-22 Budget Cycle							
Request Title								
	R-03 Child Health Plan Plus							
Dept. Approval By:	BC		Supplemental FY 2020-21					
OSPB Approval By:	askey Cano		Budget Amendment FY 2021-22					
		<u>x</u>	Change Request FY 2021-22					

		FY 202	20-21	FY 20	21-22	FY 2022-23	
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$244,867,093	\$0	\$244,826,174	(\$31,086,304)	(\$20,320,541)	
	FTE	0.0	0.0	0.0	0.0	0.0	
Total of All Line Items	GF	\$23,311,123	\$0	\$23,307,075	\$10,398,339	\$13,581,058	
Impacted by Change Request	CF	\$51,011,989	\$0	\$51,009,606	(\$8,994,295)	(\$8,388,180)	
	RF	\$0	\$0	\$0	\$0	\$0	
	FF	\$170,543,981	\$0	\$170,509,493	(\$32,490,348)	(\$25,513,419)	

		FY 202	20-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$5,083,274	\$0	\$5,033,274	\$0	\$0
05. Indigent Care	FTE	0.0	0.0	0.0	0.0	0.0
Program, (A) Indigent	GF	\$0	\$0	\$0	\$0	\$0
Care Program, (1) Indigent Care Program -	CF	\$1,632,747	\$0	\$1,622,437	\$139,209	\$139,209
Children's Basic Health Plan Administration	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$3,450,527	\$0	\$3,410,837	(\$139,209)	(\$139,209)
	Total	\$239,783,819	\$0	\$239,792,900	(\$31,086,304)	(\$20,320,541)
05. Indigent Care	FTE	0.0	0.0	0.0	0.0	0.0
Program, (A) Indigent Care Program, (1)	GF	\$23,311,123	\$0	\$23,307,075	\$10,398,339	\$13,581,058
Indigent Care Program -	CF	\$49,379,242	\$0	\$49,387,169	(\$9,133,504)	(\$8,527,389)
Children's Basic Health Plan Medical and Dental	RF	\$0	\$0	\$0	\$0	\$0
Costs	FF	\$167,093,454	\$0	\$167,098,656	(\$32,351,139)	(\$25,374,210)

		Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact



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

FY 2020-21, FY 2021-22, and FY 2022-23 Budget Request

November 2020

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#### CHILDREN'S BASIC HEALTH PLAN

The following is a description of the budget projection for the Children's Basic Health Plan.

## Points of Interest

- Federal funding for the CHIP program was reauthorized, retroactive to October 1, 2017. The program has been reauthorized for six years initially then an additional four years, expiring September 30, 2027.
- Federal financial participation was also reauthorized at the additional 23% increase for FFY 2017-18 and FFY 2018-19. Beginning in FFY 2019-20, the federal match rate was reduced by 11.50% and by FFY 2020-21 the federal match rate reduces to 65.00%.
- With the passage of the ACA and the enhanced federal financial participation, the Department has been able to pay for the state's share of costs entirely with cash funds. With the expiration of the enhanced match in FY 2020-21, the Department anticipates that it will need to start funding a portion of the expenses with General Fund. This is due to the exhaustion of the CHP+ Trust fund, which will take place sometime in FY 2020-21.
- In the 2017 legislative session, SB 17-267 "Sustainability of Rural Colorado" was passed and creates the Colorado Healthcare Affordability and Sustainability Enterprise within the Department to manage the Healthcare Affordability and Sustainability (HAS) Fee, which replaces the Hospital Provider Fee assess under current law. Beginning in FY 2017-18, the state share of the populations with FPL greater than 205% will be paid with the HAS Fee.
- Beginning January 2014, an income rating code used to identify clients from 201%-205% changed to 201%-213% as part of the MAGI conversion. Clients under 205% FPL receive funding from the CHP Trust Fund while clients over 205% FPL receive funding from the Healthcare Affordability and Sustainability (HAS) fee fund. With the implementation of the interChange, the Department is now able to identify discrete FPLs for CHP+ members. Between January 2014 and March 2017, the Department used a distribution of clients over 200% FPL prior to January 2014 to assign clients with that particular income rating code to the appropriate cohorts.
- Following the declaration of a public health emergency by the Secretary of Health and Human Services during the COVID-19 pandemic, CMS notified states that an increased FMAP would be available for each calendar quarter occurring during the public health emergency, including retroactively to January 1, 2020. To be eligible to receive the 6.2 percentage point FMAP increase, states must adhere to a set of requirements which include, but are not limited to, maintaining eligibility standards, methodologies, and procedures; covering medical costs related to the testing, services, and treatment of COVID-19; and not terminating individuals from Medicaid if such individuals were enrolled in the Medicaid program as of the date of the beginning of the emergency period or during the emergency period.

## History and Background Information

Children's Basic Health Plan (CBHP), also known as Children's Health Plan *Plus* (CHP+), provides affordable health insurance to children under the age of 19 and pregnant women in low-income families (up to 260% of the federal poverty level) who do not qualify for Medicaid and do not have private insurance. CHP+ offers a defined benefit package that uses privatized administration.

The federal government implemented this program in 1997, giving states an enhanced match on state expenditures for the program. Colorado began serving children in April of 1998. Where available, children enroll in a health maintenance organization. CHP+ also has an extensive self-insured managed care network that provides services to children until they enroll in a selected health maintenance organization, and to those children who do not have geographic access to a health maintenance organization. All pregnant women enrolled in CHP+ receive services through the State's self-funded network.

The number of CHP+ enrollees and their per capita costs fluctuate due to changes in economic conditions, federal and state policies, and a number of other factors, resulting in changes in CHP+ program expenditures. Changes in funding from sources such as the Tobacco Master Settlement Agreement and Tobacco Taxes also increase the volatility in funding needs. Thus, the Department periodically updates its caseload and expenditure forecast based on recent experience and submits funding requests to the General Assembly. This ensures that the Department has sufficient spending authority to cover expenditures for CHP+ clients and the program's administration.

The eligible CHP+ populations are:

- Children to 205% FPL (Medical and Dental)
- Children 206%-260% FPL (Medical and Dental)
- Prenatal to 205% FPL
- Prenatal 206%-260% FPL

#### **CBHP CAPITATION PAYMENTS**

The CBHP Capitation Payments line item reflects the appropriation that funds CBHP services throughout Colorado through managed care providers contracted by the Department. CHP+ children are served by either a health maintenance organization (HMO) at a fixed monthly cost, or by the State's managed care network (SMCN), which is administered by a no-risk provider. Actual and estimated caseload ratios between HMOs and the self-funded network are used to develop blended capitation rates and per capita costs. All clients

in the prenatal program are served by the self-funded program (SMCN) administered by Colorado Access and the costs of their services are billed in full directly to the State.

In FY 2013-14, there was a budget amendment passed (BA-11) to align the CHP+ oral health care benefits with the CHIPRA legislation of 2009. CHP+ dental coverage had been lacking periodontics care, orthodontic care, prosthodontic care, and the required coverage of all medically necessary oral health care. Such services were added to the scope of coverage and the dental program's annual maximum was increased from \$600 to \$1000. These changes in the oral health care benefits led to significant increases in the dental rates beginning in FY 2014-15.

Effective July 1, 2010, the Department implemented a new reimbursement schedule for inpatient hospital payments and effective October 31, 2016 implemented a new reimbursement schedule for outpatient hospital payments. The Department is now using the Colorado Medicaid Diagnosis Related Groups (DRGs) for inpatient services and the Colorado Medicaid Enhanced Ambulatory Patient Groups (EAPGs) for outpatient services.

## Analysis of Historical Expenditure Allocations across Eligibility Categories

Historical expenditure allocations across eligibility categories reflects the expenditures reported in the Colorado Financial Reporting System (COFRS). Beginning July 1, 2014, the Department transitioned from COFRS to Colorado Operations Resource Engine (CORE). Historical expenditure through FY 2013-14 is from COFRS and historical expenditure from FY 2014-15 and ongoing is from CORE.

## Description of Transition to New Methodology

As part of its ongoing efforts to continuously improve the projections, as well as to provide access to information more specific than overall per-capita rates, the Department has moved to a capitation trend forecast model beginning with the FY 2014-15 Request. In short, the methodology examines the trend in capitation rates across each eligibility category and applies that trend to the average per-claim, incurred expense rate. By examining the capitation rate trends for each eligibility category, rather than a weighted rate for all categories, future expenditures are forecasted per the characteristics of a specific eligibility category: the actuarially agreed-upon capitation rate and caseload for the nine categories rather than the previous three (children's medical, children's dental, and prenatal). In addition to viewing the nine eligibility categories separately, the Department has divided up the categories further to analyze each group that has a specific rate. This grouping separates by age as well as FPL. The different age groups apply only to children: 0-1, 2-5, and 6-18. The same FPL brackets apply to both children and prenatal: under 100%, 101%-156%, 157%-200%, 201%-205%, and 206%-260%. These individual analyses are then aggregated in the FPL brackets 0%-205% and 206%-260%. The age groups are each considered separately. By tying forecasted capitation rates directly to each category, the methodology may provide more accurate

estimates of expenditures by eligibility category as well as provide an additional window of transparency into the forecasting process by presenting a clear link between total expenditure and the rates being paid to health maintenance organizations and the state managed care network.

In estimating the future per capita costs, the Department has also started incorporating claims distribution and retroactivity adjustments to the projected rates beginning with the November 2013 request. The adjustments are described in further detail in Exhibit C8.

Additionally, the Department has incorporated an incurred but not reported methodology similar to the Medicaid Behavioral Health Program Request submitted by the Department. The Department is adjusting its request to capture the reality that some CBHP claims incurred in any one fiscal year may not be paid during that same fiscal year. Similarly, some portion of expenditure in any fiscal year will be payments on claims incurred in prior fiscal years.

The following narrative describes in greater detail the assumptions and calculations used in developing the current year and out-year for the Children's Basic Health Plan. It should be noted that the data and values in many of the exhibits are contained and/or calculated in one or more other exhibits which may come before or after the exhibit being described. When this occurs, the source exhibit will be noted.

## EXHIBIT C1 - CALCULATION OF CURRENT TOTAL LONG BILL GROUP IMPACT

Effective with the November 1, 2013 Budget Request, the Department includes Exhibit C1 which presents a concise summary of spending authority affecting Children's Basic Health Plan. In this exhibit the Department sums the total spending authority by fund source, including the Long Bill and any special bills which have appropriations that affect the Department. The total spending authority is compared to the total projected current year expenditures from Exhibit C2. The difference between the two figures is the Department's Supplemental Request for the current fiscal year.

For the request year, the Department starts with the prior year's appropriation including special bills and adds in any required annualizations. This total is the Base Amount for the Request year. The total Base Amount is compared to the total projected request year expenditure from Exhibit C2. The difference between the two figures is the Department's Funding Request in the November Budget Request and the Department's Budget Amendment in the February Supplemental Budget Request.

## **EXHIBIT C2 - CALCULATION OF FUND SPLITS**

Exhibit C2 details fund splits for all Children's Basic Health Plan budget lines for the current fiscal year Supplemental and the out-year Budget Request. Capitation expenditures are split between traditional clients and expansion clients. The State share for the traditional clients (0%-205% FPL) is funded from the CBHP Trust fund and the State share for expansion clients (206%-260% FPL) is funded from the Healthcare Affordability and Sustainability Fee Fund (SB 17-267).

The Patient Protection and Affordable Care Act (Sec. 2101 (a)) enhanced the CHP+ FMAP 23 percentage points beginning October 1, 2015 through September 30, 2019 (SSA 2105 (b)). The average for the State Fiscal Year (SFY) 2018-19 was 88.00% and would have been 79.38% in SFY 2019-20 and 67.88% in SFY 2020-21 with the expiration of the enhanced 23 percentage point bump. However, the Families First Coronavirus Response Act passed in response to the COVID-19 pandemic allows states to claim an enhanced FMAP through the end of the calendar quarter in which the Secretary of Health and Human Services has declared a public health emergency or extended that emergency. This has increased the actual FMAP in SFY 2019-20 to 81.55% and the projected FMAP for FY 2020-21 to 71.13%. In addition, beginning in FY 2020-21, the Department expects that it will need to begin funding the program with a combination of General Fund and CHP+ Trust Fund for members to 205% FPL. The Department is also expecting to recover payments in FY 2019-20 for prior year dates of service but is unsure of the magnitude at this time. Due to state fiscal rules, the Department is unable to offset current year expenditure for prior year recoveries, and therefore, the recoveries are counted as revenue to cash funds.

## EXHIBIT C3 - CHILDREN'S BASIC HEALTH PLAN SUMMARY

Exhibit C3 presents a summary of Children's Basic Health Plan caseload and capitation expenditures itemized by eligibility category and a summary of the bottom line adjustments to expenditure, as well as expenditures for CBHP Administration. The net capitation payments include the impacts of the reconciliations for manual enrollments. Exhibit C6 illustrates the build to the final expenditure estimates presented in this exhibit.

## EXHIBIT C4 - CBHP CASELOAD

Exhibit C4 contains the caseload history for each of the eligibility categories broken down by poverty level (0%-205% and 206%-260%) and also broken down by age group for children's categories (ages 0-1, 2-5, and 6-18). Each of the tables that comprise Exhibit C4 is described below. Forecast details for CHP+ caseload can be found starting on page 20 of this narrative.

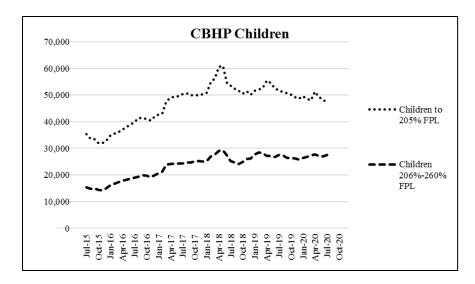
## Children's Basic Health Plan Caseload by Fiscal Year

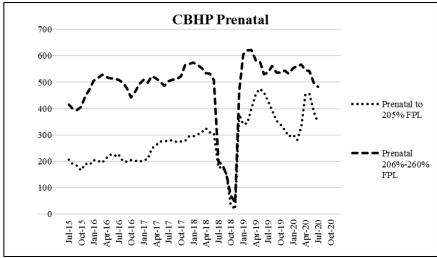
Caseload for the Children's Basic Health Plan is displayed in one table showing caseload by all CHP+ eligibility categories. Figures for fiscal years up to the present fiscal year are actual caseloads, while the current fiscal year and the request year caseloads are estimates. The caseload numbers are used in numerous exhibits throughout the Children's Basic Health Plan Exhibits and narrative. Caseload numbers for children are used twice, once for medical and once for dental.

#### Children's Basic Health Plan Caseload by Month

These tables show the actual caseload by month as reported in the JBC monthly report for the three most recent fiscal years. The Department uses data for members attributed to HMOs as the basis for thee forecast because it is a more accurate reflection of actual caps that will be paid in the fiscal year. All capitations paid for clients not initially tied to an HMO is captured in bottom line impacts.

As can be seen in the graphs shown below and on page C4-5, From January 2013 to January 2014 caseload decreased steadily for populations under 205% FPL, due to the implementation of SB 11-008 and SB 11-250 and the MAGI conversion, and increasing for populations above 205% FPL. The most recent months (January 2020 – June 2020) have seen caseload declining due to the continuous coverage policy associated with the Families First Coronavirus Response Act. As a condition of claiming a higher FMAP under the Act, the Department must maintain continuous coverage for clients, meaning it cannot disenroll members if they were enrolled in the program as of the beginning of the emergency period or becomes enrolled during the emergency period. This continuous coverage policy has effectively ceased all churn of children from Medicaid onto CHP+. However, because CHP+ clients can still churn onto Medicaid this has caused caseload to fall as families lose income and qualify for Medicaid.





Children's Basic Health Plan Per Capita Historical Summary

Children's Basic Health Plan per capita is displayed in one table. The table displays per capita by all CBHP eligibility categories; children categories are displayed twice to show medical and dental per capita. Figures for fiscal years up to the present fiscal year are actual per capita, while the current fiscal year and the request year per capita are estimates. Calculated per capita in Exhibit C4-Per Capita Historical Summary represent the estimated per capita including all expenditure adjustments for the given fiscal year. Forecasted per capita without bottom line adjustments can be found in exhibit C6. Calculations are described in exhibits C6 through C10.

## Children's Basic Health Plan Historical Expenditures Summary

The history of expenditures shows total capitation expenditures for all CBHP eligibility categories. Medical and dental expenditures are listed separately. Actual expenditures through FY 2013-14 by eligibility category are available from the Colorado Financial Reporting System (COFRS) and actual expenditures for FY 2013-14 are also reported in exhibit C3-Expenditure Summary. Actual expenditure from FY 2014-15 and forward are from the Colorado Operations Resource Engine (CORE). This exhibit also includes a similar summary of expenditure for all forecast years.

## EXHIBIT C5 - CHILDREN'S BASIC HEALTH PLAN FUNDING SOURCES

## Traditional Population Expenditures and Funding

This exhibit shows expenditures for the traditional population in isolation and provides additional detail to the calculation of fund splits. Traditional populations include those from 0%-205% FPL. These populations receive the enhanced CHP+ Federal Match and receive cash funds from the CHP Trust Fund, CO Immunization Fund, and Health Care Expansion Fund. Once the available cash funds have been used, the General Fund covers the remaining State share of expenditures for clients under 205% FPL. The available funding from the CHP Trust Fund and the CO Immunization Fund is forecasted using the published projections in the 2019 Tobacco MSA Payment Forecast, allocation changes from HB 16-1408 "Cash Fund Allocations for Health-related Programs", and the actual expenditures from prior years. Calculations can be seen in exhibit C5.

As described above for exhibit C2, the CHP+ Federal Match increased by 23 percentage points in October 2015 and remained in effect until September 30, 2019. Beginning October 1, 2020, when the enhanced federal match rate steps down to 67.88% (not accounting for any potential enhanced FMAP from the Families First Coronavirus Response Act) the Department expects General Fund will be needed for this population as there will no longer be enough revenue in the CHP+ Trust Fund to support expenditures.

## Expansion Population Expenditures and Funding

HB 09-1293 established a funding mechanism for a series of expansion clients. The set of expansion clients that are funded through the bill are children and prenatal clients with income 206%-260% FPL. These populations also receive the enhanced CHP+ Federal Match. Services for these clients are funded through the Healthcare Affordability and Sustainability Fee Cash Fund. This exhibit shows expenditures for the expansion population in isolation and provides additional detail to the calculation of fund splits.

#### Children's Health Plan Plus Enrollment Fees

Clients above 157% FPL owe an enrollment fee prior to accessing benefits. There is a fee for enrolling either one child, or more than one child. This exhibit shows the assumptions and calculations used to predict the collected enrollment fees. The amount accrued in enrollment fees is exempt from the federal match, so this amount is subtracted from the estimated CHP+ expenditures that can receive a federal match for fund split calculations seen in exhibits C2 and C5.

## EXHIBIT C6 - ESTIMATE AND REQUEST BY ELIGIBILITY CATEGORY

Exhibit C6 provides capitation expenditure calculations for the current fiscal year and the request year.

The Department has adopted a methodology based on forecasting a capitation rate, multiplying that rate by monthly caseload, multiplying again by the number of months that the forecasted rate will be in effect, and then adjusting for incurred claims that will be paid in subsequent years as well as for claims from former years that will be paid in the year of the request. The methodology is a zero-based budget tool that allows the Department to examine projected expenditures each year without building in inappropriate assumptions, estimates, or calculations from preceding years.

The forecasted capitation rate is derived from exhibits C8 through C10 and will be presented in more detail below. The caseload is the same as displayed in exhibit C4.

In order to adjust the calculations for cash accounting, the Department makes two adjustments to the calculation: first, the Department subtracts the incurred amount estimated to be paid in subsequent periods; then, the Department adds the claims incurred in prior periods expected to be paid in the forecast period. These adjustments transform the estimated incurred expenditure to a cash-based figure. The basis for these adjustments is described in this narrative below and is shown in the exhibit C6.

After calculating total expenditure for capitations, the anticipated reconciliation payments for manual enrollments for each fiscal year are estimated and added to total expenditure. The sum of expenditure for capitation payments and reconciliation payments for manual enrollments is the total CBHP Capitation Payments summarized in exhibit C3. Following the addition of projected reconciliation payments for manual enrollments are any applicable bottom-line impacts to expenditure. Details are discussed below in exhibit C7.

## Actuarially Certified Capitation Rates

Capitated rates for the health maintenance organizations are required to be actuarially certified and approved by CMS, thus actuarially certified rate increases could reasonably be expected to be good predictors of future costs. As such, the Department used trends on the

historically certified capitation rates to derive the capitation rate presented in Exhibit C6. The methodology for determining the forecasted capitation rate is the subject of exhibits C8 through C10.

## Incurred-but-not-Reported Estimates

In order to estimate the necessary adjustments to convert the projection to a cash basis, the Department estimates monthly incurred-but-not-reported (IBNR) adjustments based on historical data. Monthly adjustments are required because, for example, claims incurred in July of the current fiscal year have 11 more months of the fiscal year in which the claims can be paid; however, claims incurred in June of the fiscal year only have the remainder of that month in which to be paid before the payment becomes part of the next fiscal year's expenditure.

The Department examined historical data from the last five fiscal years and determined the prior fiscal years would provide a representative model for the likelihood of claims being paid in the year in which they are incurred. Page C6-4 presents the percentage of claims paid in a twelve-month period that come from that same period and those which come from previous periods.

#### EXHIBIT C7 - CHILDREN'S BASIC HEALTH PLAN BOTTOM LINE IMPACTS TO EXPENDITURE

Reconciliation payments for manual enrollments

As mentioned above, the Department makes reconciliation payments for clients that were manually enrolled. These are projected by applying growth rates from projected caseload (exhibit C4) and rate inflation (exhibit C9) to the expenditure for reconciliation payments for manual enrollments in the previous fiscal year. In FY 2018-19, the Department did not make any manual enrollment reconciliation payments for FY 2018-19; the payments made were only for prior fiscal years. Going forward the Department estimates that these reconciliations will no longer be necessary.

#### Delta Dental MLR Reconciliation

The Department requires its dental contractor to maintain a medical loss ratio of 80% or greater. In the past, the department has recouped funds from the contractor due to having a ratio of less than 80%. The Department expects to recoup funding again from the contractor in FY 2019-20 and beyond, but is unsure of the magnitude at this time. Therefore, the Department is estimating about \$100,000 in recoupments.

#### Health Insurance Providers Fee (HIPF)

The Affordable Care Act imposed a requirement that for-profit health insurers are required to pay a fee. The amount of the fee is determined through a series of calculations that accounts for the total required collection and number of insurers. The fee was assessed in CY 2016 and will be assessed in CY 2018. There was a moratorium on the fees in CY 2019, but the fees will resume in CY 2020, which the CHP+ HMOs will need to pay through the Department. The Tax Cuts and Jobs Act of 2017 repealed this tax on for-profit health insurers and FY 2020-21 will be the last year this tax is collected.

#### HB 19-1038 Dental Services for Pregnant Women

In 2019, the state legislature passed HB 19-1038 which provides dental services to all prenatal CHP+ clients. Starting October 1, 2019 all pregnant women will benefit from the same dental services as CHP+ children except for orthodontics (braces). The benefits include diagnostic services (exams and x-rays), preventive (fluoride, sealants, and cleanings), basic restorative services (fillings), endodontics (roots canals), and emergency dental services. The annual maximum allowable benefit is \$1,000 per calendar year (July 1st through June 30th) while the member is eligible and enrolled.

#### SMCN Medical Advance Reconciliation

New members on the CHP+ plan are enrolled in to one of five HMOs. Prior to enrollment in an HMO, the member is enrolled in the State Managed Care Network (SMCN) where the members receive services in a fee-for-service delivery model. The Department pays the SMCN a prospective capitation payment for services. At the end of the year, the Department reconciles with the SMCN based on actual costs. If the prospective capitation payment is more than actual services, the Department recoups money; if it was insufficient the Department owes money to the SMCN. In FY 2020-21 the Department has identified nearly five million dollars that it owes the SMCN for the period April 2019 – April 2020.

## EXHIBIT C8 - CBHP RETROACTIVITY ADJUSTMENT AND CLAIMS DISTRIBUTION ADJUSTMENT MULTIPLIER

Capitations are paid for clients from the date the client's eligibility is effective, resulting in claims paid retroactively. As such, any projection which derives expenditure by using non-retroactive caseload must take into account these retroactive claims. Since expenditures are calculated as the estimated capitation rate multiplied by the non-retroactive caseload, an adjustment for retroactivity can be applied to either the forecasted capitation rate or the caseload figure. In order to maintain the uniform presentation of caseload across all Departmental estimates and requests, the Department chose to make its retroactivity adjustment to the forecasted capitation rate itself.

Page R-3.12

Additionally, claims-based data (as it is derived from literally the money spent on each claim) is the actual driver of expenditure. Examining the capitation rate for forecasting allows the Department and policy makers to see the relationship of the capitation payments paid to the health maintenance organizations (HMOs) and State Managed Care Network (SMCN) to total expenditure. Forecasting based on trends in the capitation rate will only be as accurate as the relationship between that capitation trend and any trends in the rates of per-claim expenditure. These two rates can trend similarly, but any difference in trends needs to be captured in order to ensure the accuracy of the forecast. The different trends are usually related to the incidence of payments for partial months of eligibility, which fluctuate for reasons unrelated to the CBHP Capitation program. This difference is captured through a partial-month adjustment multiplier.

## Retroactivity Adjustment Multiplier

For the purpose of adjusting the forecasted capitation rate to capture the omission of retroactivity from caseload, the Department analyzed the last seven years of claims and caseload data. Exhibit C8 presents the average monthly claims as compared to the average monthly caseload for those years across eligibility categories. The Department did experience a significant amount of duplicate claims through calendar year 2013, but these duplicate claims have been removed from this analysis. Historically, the Department's methodology for calculating the retroactivity factor was to use claims and caseload data for each cohort (i.e. Children to 205% FPL Medical, Children to 205% FPL Dental, Children 206%-260% FPL Medical, etc.), but due to trouble identifying a subset of the population, 201%-205% FPL, retroactivity is skewed. As a result, the new methodology used is to calculated an aggregate retroactivity factor based on all children for medical and dental, and all prenatal adults across all FPL groups and use that single factor for both FPL groups for children and prenatal women. Details on the selected retroactivity adjustment can be found on page C8-1.

## Claims Distribution Adjustment Multiplier

To derive the claims distribution adjustment multiplier for the purpose of capturing any difference in trends between the capitation rate trends and the trends on per-claim expenditure, the last seven years of data were examined.

As presented in Exhibit C8, for each eligibility category, the amount paid divided by claims was compared to the weighted capitation rate (weighted by proportion of total claims within an eligibility category covered by an individual HMO or SMCN). Then, the claims-based rate as a percentage of the capitation rate was calculated, providing a simple comparison of any trend in claims-based rates as compared to capitation rates. Details on the selected claims distribution adjustment for each eligibility in Exhibit C8.

## EXHIBIT C9 - CBHP CAPITATION RATE TRENDS AND FORECASTS

As presented above, the expenditure forecast was derived by examining the trend on the capitation rate and then applying that trend to the monthly cost per client (i.e., the claims-based rate). For the purpose of trend analysis, the weighted capitation rate (weighted by proportion of total claims within an eligibility category covered by an individual health maintenance organization or state managed care network) was examined. Exhibit C9 presents historical data as well as the forecasted weighted rates. Rates are first presented by poverty level and age group, and then aggregated by poverty level for all ages.

The weighted rate is presented along with the percentage change from the previous fiscal year. The multiple forecast trend models and the criteria for selecting the forecasted capitation rate point estimate are presented in Exhibit C10.

Based on the Department's calculations and rate-setting process and input from the health maintenance organizations, the Department's actuaries certify a capitation rate range for each HMO, SMCN, and eligibility type; the Department is permitted to pay any rate within this range and maintain an actuarially sound capitation payment. To develop the range, the actuaries calculate a single rate (the "point estimate") and the upper and lower bounds around this rate that maintain actuarial soundness.

It is important to note the overall weighted point estimate presented in the exhibit is weighted across several factors. First, the rate is weighted within an eligibility category. Within an eligibility category, the rate is weighted by the health maintenance organizations' and state managed care network's proportion of claims processed within that eligibility category, the proportion attributable to each FPL category (0%-100%, 101%-156%, 157%-200%, and above 200%), and for children the proportion for each age range (ages 0-1, 2-5, and 6-18). Next, that rate is then weighted across all eligibility categories (with the weight derived from the total number of claims processed within an eligibility category as a percentage of total claims processed across all eligibility categories). Because caseload can be increasing or decreasing independently of any one capitation rate, the weighted CBHP total rate may not be a clear indicator of the rate trends across all eligibility categories.

Exhibit C9 presents the weighted point estimate rates, and the trend of those rates is used for forecasting. The weighted point estimates differ from paid rates, which can change within the upper and lower bounds of the established rate range in response to new rate-setting processes and budget reduction measures. The paid rates, which are discussed below, are not presented in Exhibit C6 in order to allow for comparison across years and so as to not artificially inflate or deflate the rate trend and bias the estimated rate in future years. Below is a table showing the actual weighted rate for FY 2019-20, and the projected weighted rates through FY 2022-23.

Fiscal Year	Children Medical to 205% FPL	Children Medical 206%-259% FPL	Children Dental to 205% FPL	Children Dental 206%-259% FPL	Prenatal to 205% FPL	Prenatal 206%- 259% FPL	Weighted CBHP Total
<b>FY 2019-20 Actuals</b>	\$170.82	\$171.97	\$19.82	\$19.37	\$980.81	\$970.08	\$199.81
FY 2020-21 Estimated Rate	\$170.66	\$171.60	\$19.93	\$19.53	\$980.81	\$970.08	\$199.00
% Change from FY 2019-20	-0.06%	-0.22%	0.55%	0.83%	0.01%	0.00%	-0.46%
FY 2021-22 Estimated Rate	\$179.43	\$180.15	\$20.63	\$20.22	\$980.81	\$970.08	\$209.16
% Change from FY 2020-21	3.49%	3.65%	1.06%	0.35%	0.00%	0.00%	5.11%
FY 2022-23 Estimated Rate	\$187.96	\$183.09	\$21.19	\$20.77	\$980.61	\$970.08	\$224.63
% Change from FY 2021-22	4.75%	1.63%	2.71%	2.72%	0.00%	0.00%	7.40%

#### EXHIBIT C10 - FORECAST MODEL COMPARISONS

Exhibit C10 produces the final capitation rate estimates that are used as the source of the expenditure calculations provided in exhibit C6. Exhibit C10 present the final rate estimates in their entirety. The final rate estimates are a product of model selection (discussed below) and the necessary adjustments as presented in exhibit C8.

Exhibit C10 also presents, a series of forecast models each eligibility category. From the models or from historical changes, a point estimate is selected as an input. Based on the point estimates, the adjustments presented in Exhibit C8 are then applied and the final, adjusted point estimate is then used in the expenditure calculations of Exhibit C6.

#### Final Forecasts

Exhibit C10 begins by presenting the known rates from those already set through the actuarial process and the remaining point estimates of each eligibility category's rate as selected in Exhibit C10 (see below).

The forecasted rate is then adjusted by the claims distribution adjustment multiplier, calculated in Exhibit C8. The multiplier is applied to account for the distribution of clients amongst the different HMO's and the SMCN. The average amount paid may not perfectly reflect the estimated claims distribution. Therefore, the multiplier is applied to convert capitation rates to a figure which is more likely to reflect actual expenditure.

Then the claims-based rate is adjusted a second time, this time by the retroactivity adjustment. From Exhibit C8, this second adjustment is made to capture the retroactivity not captured by the caseload figures. As described in the narrative for Exhibit C8, since caseload does not capture retroactivity, and since projected total expenditure is equal to caseload times the projected rate, either the rate or the Page R-3.15

caseload must be adjusted to capture retroactivity. To keep CBHP caseload matched to other caseload figures presented by the Department, the adjustment is made to the projected rate yielding the final forecasted rate, which is the rate used to derive the expenditure calculation presented in exhibit C6. A similar methodology is applied to the rates in each eligibility category and for each fiscal period.

## Capitation Trend Models

The forecasted capitation rates are the result of a point estimate selection from among several forecast trend models and historical information. These models are presented in Exhibit C10.

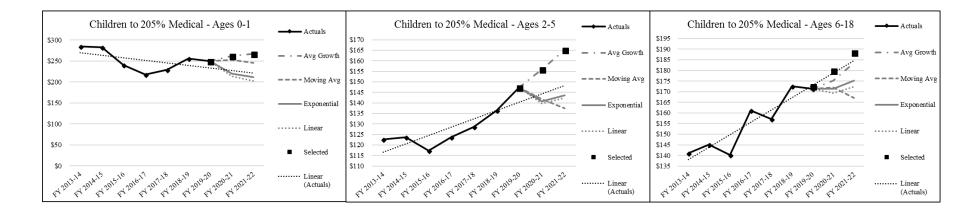
For each eligibility category, four different trend model forecasts were performed: an average growth model, a two-period moving average model, an exponential growth model, and a linear growth model. The average growth model examines the rate of change in the capitation rate and applies the average rate of change to the forecast period. The two-period moving average model projects the forecast period will see a change in the capitation rate that is the average of the last two changes in the capitation rate. The exponential growth model assumes the capitation rate is increasing faster as time moves forward (a best-fit exponential equation is applied to the historical data and trended into the future). The linear growth model is a regression model on time, fitting a linear equation line to the historical data and forecasting that line into the future. Each model in the exhibit also shows what the percent change would be from the prior period.

The Department's decisions for trend factors are informed, in part, by preliminary calculations from the actual rate setting process. Because those calculations remain preliminary, the Department does not explicitly use them in estimating trend factors.

Capitation rates are required to be actuarially sound and are built from a blend of historical rates. The trends models, as presented in this exhibit, are an attempt to predict the final outcome of this rate setting process. However, the use of historical, final rates as data points for predicting future rates is limited when future periods are likely to be fundamentally different than historical periods. The Department has used the trend models to establish a range of reasonable rate values and has selected trends by considering the various factors that impact the respective eligibility populations as well as the impact that encounter data will have on the rate setting process. The tables beginning on the next page show the trends selected for the current and request years by eligibility category.

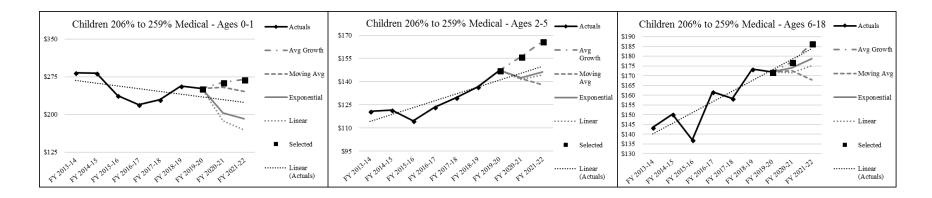
FY 2021-22 BUDGET REQUEST: CHILDREN'S BASIC HEALTH PLAN NARRATIVE

	Rate Trends for Children Medical to 205% FPL				
Aid Category	FY 2020-21 Trend Selection	FY 2021-22 Trend Selection	Justification		
	-2.51%	4.94%	Due to the emergency caused by the COVID-19 pandemic		
Children to 205% FPL Medical Ages 0-1	Average Growth Model	Average Growth Model	rates have been re-negotiated and have been lowered for FY 2020-21. FY 2021-22 rates are expected to increase due to enrollment increases and the dissolution of the SMCN.		
	7.85%	5.99%	Despite some lowering due to the public health emergency,		
Children to 205% FPL Medical Ages 2-5	Average Growth Model	Average Growth Model	FY 2020-21 rates overall grew substantially due to higher utilization and enrollment. The Department forecasts rates to increase due to enrollment increases and the dissolution of the SMCN.		
C1 '11	-0.63%	4.94%	Due to the emergency caused by the COVID-19 pandemic		
Children to 205% FPL Medical Ages 6-18	Average Growth Model	Average Growth Model	rates have been re-negotiated and have been lowered for FY 2020-21. FY 2021-22 rates are expected to increase due to enrollment increases and the dissolution of the SMCN.		



FY 2021-22 BUDGET REQUEST: CHILDREN'S BASIC HEALTH PLAN NARRATIVE

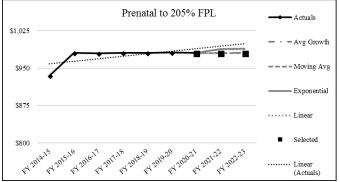
Rate Trends for Children Medical 206% to 260% FPL				
Aid Category FY 2020-21 Trend Selection		FY 2021-22 Trend Selection	Justification	
Children 206% to	-2.06%	4.75%	Due to the emergency caused by the COVID-19 pandemic	
260% FPL Medical Ages 0-1	Growth from FY 2016- 17 to FY 2017-18	Two Period Moving Average	rates have been re-negotiated and have been lowered for FY 2020-21. FY 2021-22 rates are expected to increase due to enrollment increases and the dissolution of the SMCN.	
Children 206% to	7.70%	6.06%	Despite some lowering due to the public health emergency, FY 2020-21 rates overall grew substantially due to higher utilization	
260% FPL Medical Ages 2-5	A C 1 - M - 1 - 1   A C		and enrollment. The Department forecasts rates to increase due to enrollment increases and the dissolution of the SMCN.	
C1 '11 20(0/ )	-0.83%	4.75%	Due to the emergency caused by the COVID-19 pandemic rates	
Children 206% to 260% FPL Medical Ages 6-18	have been FY 2021-2		have been re-negotiated and have been lowered for FY 2020-21. FY 2021-22 rates are expected to increase due to enrollment increases and the dissolution of the SMCN.	

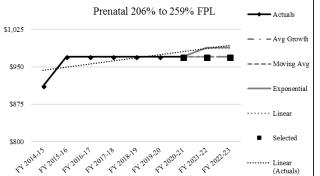


	Ra	ate Trends for Children	Dental to 205% FPL
Aid Category	FY 2020-21 Trend Selection	Justification	
Children to 205%	10.54%	4.16%	Rates for this cohort increased again in FY 2019-20. This is due
FPL Dental Ages 0-1	Growth from FY 2017-18 to FY 2018-19 Rate	Growth from FY 2017-18 to FY 2018-19 Rate	growing utilization. As caseload is expected to grow the Department forecasts a small positive trend in FY 2021-22.
Children to 205%	-1.08%	2.74%	Rates for this cohort decreased in FY 2019-20. This is due to a
FPL Dental Ages 2-5	Average Growth Model	Average Growth Model	decrease in utilization. As caseload is expected to grow the Department forecasts a small positive trend in FY 2021-22.
Children to 205%	-5.12%	3.67%	Rates for this cohort increased again in FY 2019-20. This is due
FPL Dental Ages 6-18	Two Period Moving Average Model	Two Period Moving Average Model	growing utilization. As caseload is expected to grow the Department forecasts a small positive trend in FY 2021-22.
Children to 205%	6 Dental - Ages 0-1	Children to 205% Dental - A	Ages 2-5 — Actuals Children to 205% Dental - Ages 6-18 — Actuals
\$8	Actuals	\$22	- · - Avg Growth S25 - · - Avg Growth
\$6		\$20	Moving Avg
\$4	\	\$16	Exponential S21 Exponential
\$2	······ Linear	\$14	Linear \$17
\$0	■ Selected	\$10	Selected \$15
F4 2013-14 2014-15 2015-16 2016-17 2017-18 201	RY 2019 PA 2020 PA 202	RA 300 2 KA 300 KA 300 2 KA 300 KA 300 KA 300 KA 300 KA	ngth 21 Linear (Actuals) Hy 2013-14 H

Rate Trends for Children Dental 206% to 260% FPL					
Aid Category	FY 2020-21 Trend Selection	FY 2021-22 Trend Selection	Justification		
C1 '1.1 20(0/ 4	10.54%	4.16%	D (		
Children 206% to 260% FPL Dental Ages 0-1	Growth from FY 2017-18 to FY 2018- 19 Rate	Growth from FY 2017-18 to FY 2018- 19 Rate	Rates trend similarly for dental regardless of FPL and the Department has chosen to stick with the trends for the Children 0-205% FPL.		
Children 206% to	-1.08%	2.74%	Rates trend similarly for dental regardless of FPL and the		
260% FPL Dental Ages 2-5	Trend from 0-205% FPL Ages 2-5	Trend from 0-205% FPL Ages 2-5	Department has chosen to stick with the trends for the Children 0-205% FPL.		
Children 206% to	-5.12%	3.67%	Rates trend similarly for dental regardless of FPL and the		
260% FPL Dental Ages 6-18	Trend from 0-205% FPL Ages 6-18	Trend from 0-205% FPL Ages 6-18	Department has chosen to stick with the trends for the Children 0-205% FPL.		
Children 206% to 259%  57  56  55  54  53  52  FY INDA-NA FY INDA-	Actuals  - Avg Growth  - S18  - Exponential  Linear  S12  S20  S20  S18  S18  S18  S18  S18  S18  S18  S1		Selected   S27		

Rate Trends for Prenatal					
Aid Category	FY 2020-21 Trend Selection	FY 2021-22 Trend Selection	Justification		
	0.00%	0.00%	In the past the Department has recouped money from the SMCN due to systems issues. The		
Prenatal to 205% FPL	Average Growth Model	Average Growth Model	Department has trued up its payments with the SMCN and is not expecting to recoup payments as the system is paying out correctly.		
	0.00%	0.00%	In the past the Department has recouped money from the SMCN due to systems issues. The		
Prenatal 206%-260% FPL	Average Growth Model	Exponential Growth Model	Department has trued up its payments with the SMCN and is not expecting to recoup payments as the system is paying out correctly.		





## CBHP CASELOAD

## Length of Stay

CBHP caseload is not only affected by the number of individuals served but also the length of time they remain in the program. The Department has started tracking the average length of stay for each eligibility category to further understand the behavior of the CHP+ clients. Results for FY 2015-16 (shaded) is subject to change as there may not be sufficient run out to capture the true length of stay for all clients. The Department anticipates an increase in the average length of stay as continuous eligibility for Medicaid Eligible Children and CHP+ Children was implemented March 1<sup>st</sup>, 2014.

		CHP Children 0%-205%	CHP Children 206%-260%	CHP Prenatal 0%-205%	CHP Prenatal 206%-260%
Y 5-16	Avg. LOS Mo's	16.30	15.89	8.75	8.08
FY 2015-16	% > 12 Mo's	81.51%	78.49%	12.72%	9.30%
r -17	Avg. LOS Mo's	15.55	16.07	7.23	7.06
FY 2016-17	% > 12 Mo's	54.26%	59.42%	2.22%	1.54%
FY 2017-	Avg. LOS Mo's	17.23	17.19	7.95	8.28
F 20	% > 12 Mo's	67.92%	69.85%	9.31%	8.72%
۲ 9-19	Avg. LOS Mo's	15.52	16.11	8.77	8.70
FY 2018-19	% > 12 Mo's	65.18%	67.78%	13.89%	10.09%
r 1-20	Avg. LOS Mo's	9.69	10.96	5.23	6.27
FY 2019-20	% > 12 Mo's	13.85%	16.53%	2.00%	2.44%

#### CBHP Caseload Models

The Department's caseload projections utilize statistical forecasting methodologies to predict CBHP caseload by eligibility category. Historical monthly caseload data is used from July 2007 to December 2018. CBHP caseload increased significantly in FY 2016-17 and coincides with the implementation of the interChange. A large percentage of the growth experienced are for members that are not tied to an HMO. For the purpose of forecasting caseload, the Department has chosen to forecast based on those clients that are actively tied to an HMO because that appears to be the best representation of actual enrollment and expenditure. As a result, caseload figures in the

exhibits may not tie directly to those mentioned below for forecasting. The following forecasting models are used to forecast CBHP caseload: trend and monthly seasonal dummy variables, ARIMA models, trend stationary, and difference stationary. The Department is now using the software EViews 6 to estimate these models.

## Trend and Seasonality Model

CBHP caseload is a non-stationary series with a positive trend and many of the categories experience some level of seasonality. One of the models used incorporates a time trend and monthly seasonal dummy variables.

#### ARIMA Model

ARIMA models, once referred to as Box-Jenkins models, rely on the past behavior of the series being forecasted. Relying on the past behavior of a series mandates that a series be stationary. Most of the eligibilities in Medicaid caseload have a positive growth trend (non-stationary) and require differencing to be made stationary.

## Trend Stationary and Difference Stationary

Series that are stationary have a constant mean, caseload series frequently do not have this characteristic and often have a trending mean. Two popular models used for non-stationary series with a trending mean are trend stationary and difference stationary. The trend stationary serves as an effective model if the series has a deterministic trend. The difference stationary model proves effect should the trend be stochastic. Differencing the dependent variable gives a stationary series. The basic forms of the two models are listed below.

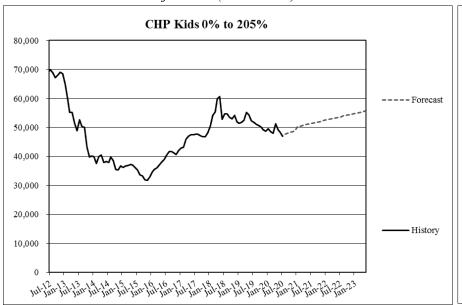
- Trend Stationary:  $log(y) = c + trend + \varepsilon$
- Difference Stationary: differenced(log(y)) =  $c + \varepsilon$

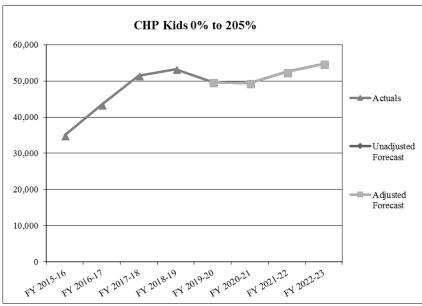
#### **Model Selection**

Models are created for each individual group that receives a separate rate. These groups are separated by FPL for both children and prenatal: under 100%, 101%-156%, 157%-200%, 201%-205%, and 206%-260%. Children's groups are also separated by age: age groups 0-1, 2-5, and 6-18. A model is selected to forecast each group After several different forecasts are produced, the Department normally chooses one for each category and then aggregated to the FPL categories for children and prenatal; under 205% and 206%-260%. When selecting a model, the Department closely analyzes the historical data as well as the goodness of fit of the model.

## CHILDREN'S BASIC HEALTH PLAN CASELOAD FORECAST

Children's Caseload Projections (Exhibit C4)





- This population before the COVID-19 pandemic was mostly flat with either little growth or declines, but since the start of the pandemic has been declining as this population is churning into Medicaid as incomes fall. Regular churn from Medicaid to CHP+ has stopped as a result of the continuous coverage policy. The Department expects that once the continuous coverage policy expires, there will be an influx of clients from Medicaid to CHP+ but that this will be netted out by the disenrollements of clients who have been locked into CHP+.
- This population includes the subpopulation created through SB 07-097 and was implemented beginning March 1, 2008. Children in this population have family incomes between 201% and 205% FPL.

	Actuals	Monthly Change	% Change
Jun-18	52,727	-	-
Jul-18	54,597	1,870	3.55%
Aug-18	54,705	108	0.20%
Sep-18	53,563	(1,142)	-2.09%
Oct-18	52,994	(569)	-1.06%
Nov-18	54,213	1,219	2.30%
Dec-18	51,990	(2,223)	-4.10%
Jan-19	51,443	(547)	-1.05%
Feb-19	51,783	340	0.66%
Mar-19	52,429	646	1.25%
Apr-19	55,174	2,745	5.24%
May-19	54,418	(756)	-1.37%
Jun-19	52,215	(2,203)	-4.05%
Jul-19	51,765	(450)	-0.86%
Aug-19	51,007	(758)	-1.46%
Sep-19	50,774	(233)	-0.46%
Oct-19	50,192	(582)	-1.15%
Nov-19	49,242	(950)	-1.89%
Dec-19	48,657	(585)	-1.19%
Jan-20	49,553	896	1.84%
Feb-20	48,577	(976)	-1.97%
Mar-20	48,077	(500)	-1.03%
Apr-20	51,230	3,153	6.56%
May-20	49,125	(2,105)	-4.11%
Jun-20	48,337	(788)	-1.60%

Actuals				
	Monthly Change	% Change		
6-month average	(53)	-0.05%		
12-month average	(323)	-0.61%		
18-month average	(203)	-0.37%		

24-month average

-0.33%

(183)

			Total Child	ren 0 to 205%
	Caseload	% Change	Level Change	
FY 2011-12	63,216	-0.04%	(28)	
FY 2012-13	62,261	-1.51%	(955)	
FY 2013-14	42,510	-31.72%	(19,751)	
FY 2014-15	37,036	-12.88%	(5,474)	
FY 2015-16	34,940	-5.66%	(2,096)	
FY 2016-17	43,453	24.36%	8,513	
FY 2017-18	51,478	18.47%	8,025	
FY 2018-19	53,294	3.53%	1,816	FY 2018
FY 2019-20	49,711	-6.72%	(3,583)	FY 2019
FY 2020-21	49,426	-0.57%	(285)	FY 2020
FY 2021-22	52,500	6.22%	3,074	FY 2021
FY 2022-23	54,789	4.36%	2,289	

May 2020 Projection					
FY 2018-19	53,294	-0.41%	1,816		
FY 2019-20	49,829	-6.50%	(3,465)		
FY 2020-21	54,173	8.72%	4,344		
FY 2021-22	56,575	4.43%	2,402		

FY 2014-15 1st Half	(224)	-0.48%	
FY 2014-15 2nd Half	101	0.28%	
FY 2014-15	(80)	-0.14%	
FY 2015-16 1st Half	(709)	-1.96%	
FY 2015-16 2nd Half	1,003	2.84%	
FY 2015-16	147	0.44%	
FY 2016-17 1st Half	514	1.30%	
FY 2016-17 2nd Half	916	2.09%	
FY 2016-17	715	1.69%	
FY 2017-18 1st Half	116	0.25%	
FY 2017-18 2nd Half	753	1.77%	
FY 2017-18	435	1.01%	
FY 2018-19 1st Half	(123)	-0.20%	
FY 2018-19 2nd Half	38	0.11%	
FY 2018-19	(43)	-0.04%	
FY 2019-20 1st Half	(593)	-1.17%	
FY 2019-20 2nd Half	(53)	-0.05%	
FY 2019-20	(323)	-0.61%	
25 (1)	- 4.6		
Monthly Average Growth Comparisons			

386

241

192

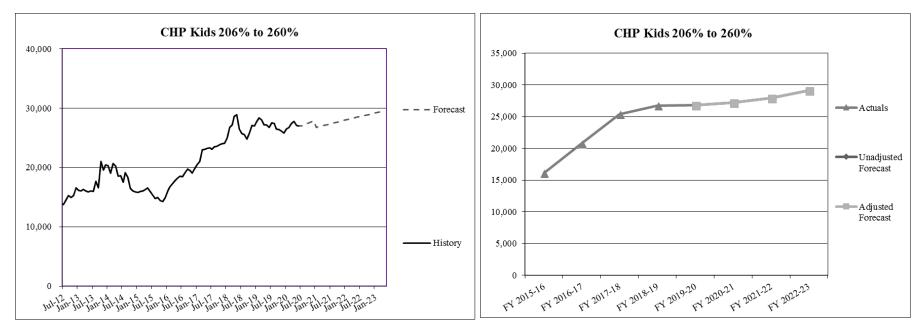
Monthly Average Growth Actuals

Request	Monthly Change		
•	S-3	R-3	
FY 2020-21 1st Half	2,293		
FY 2020-21 2nd Half	(1,508)	3	
FY 2020-21	392	2	
FY 2021-22 1st Half	(1,591)	1	
FY 2021-22 2nd Half	80	1	
FY 2021-22	(755)	1	
FY 2022-23 1st Half		1	
FY 2022-23 2nd Half		1	

FY 2022-23

May 2020 Forecast	
Forecasted June 2020 Level	59,130

Base trend from June 2020 level			
FY 2020-21	48,337	-2.76%	(1,374)



- This population before the COVID-19 pandemic was mostly flat with either little growth or declines, and since the start of the pandemic this population has maintained this trend. There has been less churn into Medicaid from this eligibility group. The Department expects that once the continuous coverage policy expires, there will be an influx of clients from Medicaid to CHP+ but that this will be netted out by the disenrollements of clients who have been locked into CHP+.
- This population was created through HB 09-1293, and was implemented beginning May 1, 2010. Children in this population have family incomes between 206% and 260% of the federal poverty level.

	Actuals	Monthly Change	% Change
Jun-18	26,473	-	-
Jul-18	25,694	(779)	-2.94%
Aug-18	25,515	(179)	-0.70%
Sep-18	24,805	(710)	-2.78%
Oct-18	25,835	1,030	4.15%
Nov-18	27,062	1,227	4.75%
Dec-18	26,976	(86)	-0.32%
Jan-19	27,664	688	2.55%
Feb-19	28,377	713	2.58%
Mar-19	27,988	(389)	-1.37%
Apr-19	27,128	(860)	-3.07%
May-19	27,150	22	0.08%
Jun-19	26,710	(440)	-1.62%
Jul-19	27,516	806	3.02%
Aug-19	27,411	(105)	-0.38%
Sep-19	26,478	(933)	-3.40%
Oct-19	26,373	(105)	-0.40%
Nov-19	26,170	(203)	-0.77%
Dec-19	25,793	(377)	-1.44%
Jan-20	26,447	654	2.54%
Feb-20	26,731	284	1.07%
Mar-20	27,431	700	2.62%
Apr-20	27,800	369	1.35%
May-20	27,110	(690)	-2.48%
Jun-20	26,958	(152)	-0.56%

May 2020 Forecast	
Forecasted June 2019 Level	27,345

Base trend from June 2019 level			
FY 2020-21	26,958	0.40%	106

		Children 20	06% to 260%	
	Caseload	% Change	Level Change	
FY 2009-10	136	#N/A	#N/A	
FY 2010-11	4,023	2858.09%	3,887	
FY 2011-12	11,049	174.65%	7,026	
FY 2012-13	15,575	40.96%	4,526	
FY 2013-14	19,043	22.27%	3,468	
FY 2014-15	16,668	-12.47%	(2,375)	
FY 2015-16	16,100	-3.41%	(568)	
FY 2016-17	20,808	29.24%	4,708	
FY 2017-18	25,411	22.12%	4,603	
FY 2018-19	26,742	5.24%	1,331	
FY 2019-20	26,852	0.41%	110	FY 2018-19
FY 2020-21	27,231	1.41%	379	FY 2019-20
FY 2021-22	27,950	2.64%	719	FY 2020-2
FY 2022-23	29,169	4.36%	1,219	FY 2021-22

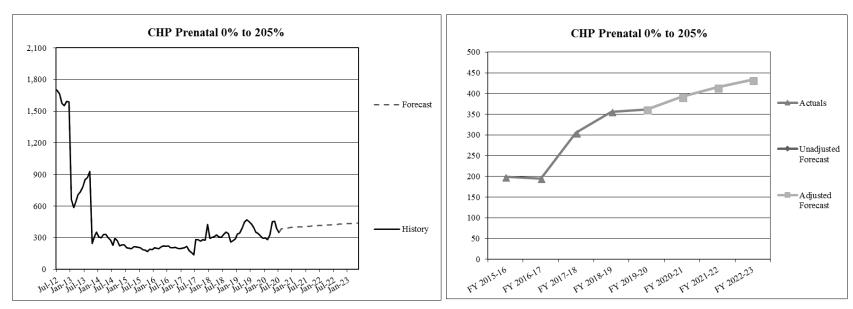
May 2020 Projection				
FY 2018-19	26,742	5.24%	1,331	
FY 2019-20	26,875	-29.54%	133	
FY 2020-21	29,628	10.24%	2,753	
FY 2021-22	30,915	4.34%	1,287	

Actuals			
	Monthly Change	% Change	
6-month average	194	0.76%	
12-month average	21	0.10%	
18-month average	(1)	0.02%	
24-month average	20	0.10%	

Monthly Average Growth Actuals				
FY 2014-15 1st Half	(541)	-3.00%		
FY 2014-15 2nd Half	119	0.75%		
FY 2014-15	(247)	-1.34%		
FY 2015-16 1st Half	(237)	-1.44%		
FY 2015-16 2nd Half	610	3.74%		
FY 2015-16	187	1.15%		
FY 2016-17 1st Half	203	1.09%		
FY 2016-17 2nd Half	587	2.81%		
FY 2016-17	395	1.95%		
FY 2017-18 1st Half	132	0.56%		
FY 2017-18 2nd Half	397	1.71%		
FY 2017-18	264	1.14%		
FY 2018-19 1st Half	84	0.36%		
FY 2018-19 2nd Half	(44)	-0.14%		
FY 2018-19	20	0.11%		
FY 2019-20 1st Half	(153)	-0.56%		
FY 2019-20 2nd Half	194	0.76%		
FY 2019-20	21	0.10%		

Monthly Average Growth Comparisons		
Dagwaat	Monthly Change	
Request	S-3	R-3
FY 2019-20 1st Half	1,151	153
FY 2019-20 2nd Half	(757)	(98)
FY 2019-20	197	27
FY 2020-21 1st Half	(528)	102
FY 2020-21 2nd Half	49	102
FY 2020-21	(240)	102
FY 2021-22 1st Half		102
FY 2021-22 2nd Half		102
FY 2021-22		102

## Prenatal Caseload Projections (Exhibit C4)



- The caseload of prenatal clients with FPL 0% to 205% was stable before the pandemic and there has been little growth since the start of the pandemic. In contrast to the CHP+ children, the Department does not forecast the same caseload changes in pregnant women due to the COVID-19 pandemic. As clients in this population are disenrolled from CHP+ when the pregnancy comes to term, total caseload of CHP+ pregnant women will not experience the same degree of churn as in the CHP+ children's populations. Instead, the Department expects women with completed pregnancies would either fall off public medical assistance or churn into a non-pregnant eligibility group on Medicaid.
- Along with the children's expansion to 205% FPL, this population includes the subpopulation that was created through SB 07-097 and was implemented beginning March 1, 2008. Prenatal women in this subpopulation have family incomes between 201 and 205% of the federal poverty level.

	Actuals	Monthly	%
		Change	Change
Jun-17	230	-	
Jul-17	503	273	118.70%
Aug-17	509	6	1.19%
Sep-17	512	3	0.59%
Oct-17	523	11	2.15%
Nov-17	565	42	8.03%
Dec-17	568	3	0.53%
Jan-18	575	7	1.23%
Feb-18	564	(11)	-1.91%
Mar-18	554	(10)	-1.77%
Apr-18	534	(20)	-3.61%
May-18	533	(1)	-0.19%
Jun-18	507	(26)	-4.88%
Jul-18	509	2	0.39%
Aug-18	552	43	8.45%
Sep-18	560	8	1.45%
Oct-18	534	(26)	-4.64%
Nov-18	574	40	7.49%
Dec-18	580	6	1.05%
Jan-19	606	26	4.48%
Feb-19	620	14	2.31%
Mar-19	623	3	0.48%
Apr-19	582	(41)	-6.58%
May-19	578	(4)	-0.69%
Jun-19	531	(47)	-8.13%

February 2019 Forecast			
Forecasted June 2019 Level	581		

Base	e trend from	June 2019 l	evel
FY 2019-20	531	-7.01%	(40)

	CHP+	Prenatal 20	06% to 260	% FLP: Historical Case	eload and Pr	ojections
	Caseload	% Change	Level Change			
FY 2010-11	272	24	-			
FY 2011-12	448	64.51%	176			
FY 2012-13	463	3.46%	16			
FY 2013-14	502	8.26%	38			
FY 2014-15	460	-8.23%	(41)			
FY 2015-16	469	1.96%	9			
FY 2016-17	431	-8.17%	(38)			
FY 2017-18	537	24.62%	106	February 2	019 Project	ion Before
FY 2018-19	571	6.28%	34	FY 2017-18	537	24.599
FY 2019-20	564	-1.18%	(7)	FY 2018-19	575	7.089
FY 2020-21	625	10.82%	61	FY 2019-20	598	4.000
FY 2021-22	693	10.88%	68	FY 2020-21	632	5.69%

Actuals					
Act	Monthly Change	% Change			
6-month average	(8)	-1.35%			
12-month average	2	0.51%			
18-month average	(2)	-0.28%			
24-month average	13	5.26%			

February 2019 Projection Before Adjustments					
FY 2017-18	537	24.59%	106		
FY 2018-19	575	7.08%	38		
FY 2019-20	598	4.00%	23		
FY 2020-21	632	5.69%	34		

Monthl	y Average Gr	owth Compa	risons		
Request	Monthly	Monthly Change		Percent Change	
1	S-3	R-3	S-3	R-3	
FY 2019-20 1st Half	3	5	1.24%	0.92%	
FY 2019-20 2nd Half	3	5	1.24%	0.86%	
FY 2019-20	3	5	1.24%	0.89%	
FY 2020-21 1st Half	3	5	1.24%	0.86%	
FY 2020-21 2nd Half	3	5	1.24%	0.86%	
FY 2020-21	3	5	1.24%	0.86%	
FY 2021-22 1st Half	#DIV/0!	6	#DIV/0!	0.86%	
FY 2021-22 1st Half	#DIV/0!	6		0.86%	

Monthly Average Growth Comparisons						
Request	Monthly	Change	Percent Change			
•	S-3	R-3	S-3	R-3		
FY 2019-20 1st Half	3	5	1.24%	0.92%		
FY 2019-20 2nd Half	3	5	1.24%	0.86%		
FY 2019-20	3	5	1.24%	0.89%		
FY 2020-21 1st Half	3	5	1.24%	0.86%		
FY 2020-21 2nd Half	3	5	1.24%	0.86%		
FY 2020-21	3	5	1.24%	0.86%		
FY 2021-22 1st Half	#DIV/0!	6		0.86%		
FY 2021-22 1st Half	#DIV/0!	6		0.86%		
FY 2021-22 1st Half	#DIV/0!	6		0.86%		

Monthly Average Growth Actuals

6.24%

-0.21%

3.02%

-2.54%

-1.02%

-1.78% 2.24%

1.47%

1.86%

-0.42%

-11.64%

-6.03%

21.86%

-1.85%

10.00%

2.36%

-1.35%

0.51%

(2)

11

(14)

(9)

(3)

(45)

(24)

56

23

12

(8)

FY 2013-14 1st Half

FY 2013-14 2nd Half

FY 2014-15 1st Half

FY 2014-15 2nd Half

FY 2015-16 1st Half

FY 2015-16 2nd Half FY 2015-16

FY 2016-17 1st Half

FY 2016-17 2nd Half

FY 2017-18 1st Half

FY 2017-18 2nd Half

FY 2018-19 1st Half FY 2018-19 2nd Half

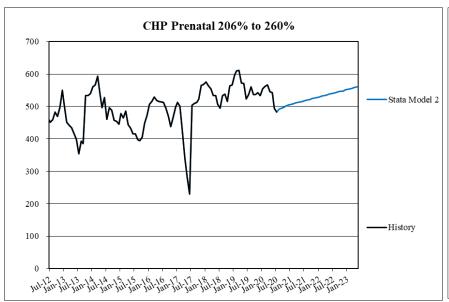
FY 2013-14

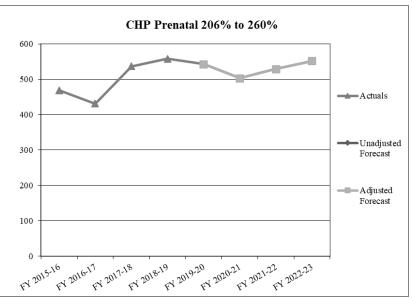
FY 2014-15

FY 2016-17

FY 2017-18

FY 2018-19





- The caseload of prenatal clients with FPL 0% to 205% was stable before the pandemic and there has been little growth since the start of the pandemic. In contrast to the CHP+ children, the Department does not forecast the same caseload changes in pregnant women due to the COVID-19 pandemic. As clients in this population are disenrolled from CHP+ when the pregnancy comes to term, total caseload of CHP+ pregnant women will not experience the same degree of churn as in the CHP+ children's populations. Instead, the Department expects women with completed pregnancies would either fall off public medical assistance or churn into a non-pregnant eligibility group on Medicaid.
- This population was created through HB 09-1293, and was implemented beginning May 1, 2010. Pregnant women in this population have family incomes between 206% and 260% of the federal poverty level.

# FY~2021-22~BUDGET~REQUEST:~CHILDREN'S~BASIC~HEALTH~PLAN~NARRATIVE

	Actuals	Monthly Change	% Change
Jun-18	507		
Jul-18	494	(13)	-2.56%
Aug-18	534	40	8.10%
Sep-18	538	4	0.75%
Oct-18	515	(23)	-4.28%
Nov-18	563	48	9.32%
Dec-18	566	3	0.53%
Jan-19	596	30	5.30%
Feb-19	610	14	2.35%
Mar-19	612	2	0.33%
Apr-19	572	(40)	-6.54%
May-19	571	(1)	-0.17%
Jun-19	523	(48)	-8.41%
Jul-19	537	14	2.68%
Aug-19	561	24	4.47%
Sep-19	537	(24)	-4.28%
Oct-19	536	(1)	-0.19%
Nov-19	543	7	1.31%
Dec-19	533	(10)	-1.84%
Jan-20	554	21	3.94%
Feb-20	562	8	1.44%
Mar-20	566	4	0.71%
Apr-20	545	(21)	-3.71%
May-20	542	(3)	-0.55%
Jun-20	495	(47)	-8.67%

	CHP	+ Prenatal 20	6% to 260%	FLP: Historical Caseload	and Projectio	ns
	Caseload	% Change	Level Change			
FY 2011-12	448	1	176			
FY 2012-13	463	3.35%	15			
FY 2013-14	502	8.42%	39			
FY 2014-15	460	-8.37%	(42)			
FY 2015-16	469	1.96%	9			
FY 2016-17	431	-8.10%	(38)			
FY 2017-18	537	24.59%	106			
FY 2018-19	558	3.91%	21		May 2020 I	Proj
FY 2019-20	543	-2.69%	(15)	FY 2018-19	558	
FY 2020-21	503	-7.37%	(40)	FY 2019-20	547	
FY 2021-22	529	5.17%	26	FY 2020-21	597	
FY 2022-23	552	4.35%	23	FY 2021-22	625	

May 2020 Projection						
FY 2018-19	558	3.91%	21			
FY 2019-20	547	-1.97%	(11)			
FY 2020-21	597	9.14%	50			
FY 2021-22 625 4.61% 28						

Monthly Average Growth Actuals						
FY 2014-15 1st Half	(10)	-2.08%				
FY 2014-15 2nd Half	(1)	0.08%				
FY 2014-15	(6)	-1.12%				
FY 2015-16 1st Half	5	1.19%				
FY 2015-16 2nd Half	7	1.47%				
FY 2015-16	6	1.33%				
FY 2016-17 1st Half	(3)	-0.42%				
FY 2016-17 2nd Half	(45)	-11.64%				
FY 2016-17	(24)	-6.03%				
FY 2017-18 1st Half	56	21.86%				
FY 2017-18 2nd Half	(10)	-1.85%				
FY 2017-18	23	10.00%				
FY 2018-19 1st Half	10	1.98%				
FY 2018-19 2nd Half	(7)	-1.19%				
FY 2018-19	1	0.39%				
FY 2019-20 1st Half	2	0.36%				
FY 2019-20 2nd Half	(6)	-1.14%				
FY 2019-20	(2)	-0.39%				
		•				

554	21	3.94%	Act	uals	
562	8	1.44%		Monthly Change	% Change
566	4	0.71%	6-month average	(6)	-1.149
545	(21)	-3.71%	12-month average	(2)	-0.399
542	(3)	-0.55%	18-month average	(4)	-0.669
495	(47)	-8.67%	24-month average	(1)	0.009

Monthly Average Growth Comparisons								
Request	Monthly	Change	Percent Change					
1	S-3	R-3	S-3	R-3				
FY 2020-21 1st Half	19	3	3.20%	0.67%				
FY 2020-21 2nd Half	(12)	2	-1.67%	0.38%				
FY 2020-21	4	3	0.77%	0.52%				
FY 2021-22 1st Half	5	2	0.83%	0.37%				
FY 2021-22 2nd Half	5	2	0.79%	0.36%				
FY 2021-22	5	2	0.81%	0.37%				
FY 2022-23 1st Half	0	2	0.00%	0.35%				
FY 2022-23 2nd Half	0	2	0.00%	0.35%				
FY 2022-23	0	2	0.00%	0.35%				

May 2020 Forecast	
Forecasted June 2020 Level	548

Base trend from June 2019 level						
	FY 2020-21	495	-8.84%	(48)		

Exhibit	Title of Exhibit
Exhibit C1	Calculation of Current Total Long Bill Group Impact
Exhibit C2	Calculation of Fund Splits
Exhibit C2	Cash Fund Report
Exhibit C2	Disallowance Repayment Schedule
Exhibit C3	CBHP Expenditure Summary
Exhibit C4	CBHP Caseload by Fiscal Year
Exhibit C4	CBHP Caseload by Month
Exhibit C4	CBHP Capitation Payments Per Capita Historical Summary
Exhibit C4	CBHP Historical Expenditure Summary
Exhibit C5	CBHP Trust Fund Population Exhibit
Exhibit C5	Healthcare Affordability and Sustainability Fee Population Exhibit
Exhibit C5	Enrollment Fees Exhibit
Exhibit C6	Expenditure Calculations by Eligibility Category
Exhibit C6	Incurred But Not Reported Runout by Fiscal Period
Exhibit C6	Incurred But Not Reported Expenditures by Fiscal Period
Exhibit C7	Bottom Line Impact Summary
Exhibit C7	Bottom Line Impact Calculations
Exhibit C8	CBHP Retroactivity Adjustment
Exhibit C8	CBHP Claims Distribution Adjustment Multiplier
Exhibit C9	CBHP Capitation Rate Trends and Forecasts
Exhibit C10	Forecast Model Comparisons - Capitation Trend Models - Final Forecasts

Exhibit C1 - Calculation of Current Total Long Bill Group Impact									
FY 2020-21 Children's Basic Health Plan Capitation									
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds			
FY 2020-21 Children's Basic Health Plan Capitation Appropriation									
FY 2020-21 Long Bill Appropriation (HB 20-1360)	\$239,783,819	\$22,923,991	\$387,132	\$49,379,242	\$0	\$167,093,454			
FY 2020-21 Total Children's Basic Heath Plan Capitation Spending Authority	\$239,783,819	\$22,923,991	\$387,132	\$49,379,242	\$0	\$167,093,454			
Projected Total FY 2020-21 CBHP Capitation Expenditure	\$187,202,766	\$8,888,281	\$387,132	\$45,769,511	\$0	\$132,157,842			
FY 2020-21 Children's Basic Health Plan Capitation Estimated Change from Appropriation	(\$52,581,053)	(\$14,035,710)	\$0	(\$3,609,731)	\$0	(\$34,935,612)			
Percent Change from Spending Authority	-21.93%	-61.23%	0.00%	-7.31%	0.00%	-20.91%			
FY 2	020-21 CBHP Exte	rnal Admin							
FY 2020-21 CBHP External Admin Appropriation									
FY 2020-21 Total CBHP External Admin Spending Authority	\$5,083,274	\$0	\$0	\$1,632,747	\$0	\$3,450,527			
Projected Total FY 2020-21 CBHP External Admin Expenditure	\$5,083,274	\$0	\$0	\$1,467,541	\$0	\$3,615,733			
Total FY 2020-21 CBHP External Admin Change from Appropriation	\$0	\$0	\$0	(\$165,206)	\$0	\$165,206			

Exhibit C1 - Calculation of Current Total Long Bill Group Impact									
FY 2021-22 Children's Basic Health Plan Capitation									
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds			
FY 2020-21 CBHP Capitation Appropriation Plus Special Bills	\$239,783,819	\$22,923,991	\$387,132	\$49,379,242	\$0	\$167,093,454			
Bill Annualizations									
Ammendment 35 Adjustment	\$0	\$9,540	(\$9,540)	\$0	\$0	\$0			
HB 19-1038 Annualizations	\$18,621	\$5,492	\$0	\$7,927	\$0	\$5,202			
Total Annualizations	\$18,621	\$15,032	(\$9,540)	\$7,927	\$0	\$5,202			
FY 2021-22 CBHP Capitation Base Amount	\$239,802,440	\$22,939,023	\$377,592	\$49,387,169	\$0	\$167,098,656			
Projected Total FY 2021-22 CBHP Capitation Expenditure	\$208,716,136	\$33,337,362	\$377,592	\$40,253,665	\$0	\$134,747,517			
Total FY 2021-22 CBHP Capitation Request	(\$31,086,304)	\$10,398,339	\$0	(\$9,133,504)	\$0	(\$32,351,139)			
Percent Change from FY 2021-22 CBHP Capitation Base	-12.96%	45.33%	0.00%	-18.49%	0.00%	-19.36%			
Percent Change from FY 2020-21 Estimated CBHP Capitation Expenditure	11.49%	275.07%	-2.46%	-12.05%	0.00%	1.96%			
DV 6	1021 22 CDHD E 4	141 .							
	021-22 CBHP Exte								
FY 2020-21 CBHP External Admin Appropriation Plus Special Bills	\$5,083,274	\$0	\$0	\$1,632,747	\$0	\$3,450,527			
Bill Annualizations									
HB 19-1038 Dental Services for Pregnant Women	(\$50,000)	\$0	\$0	(\$10,310)	* * *	(\$39,690)			
Total Annualizations	(\$50,000)	\$0	\$0	(\$10,310)		(\$39,690)			
FY 2021-22 CBHP External Admin Base Amount	\$5,033,274	\$0	\$0	\$1,622,437	\$0	\$3,410,837			
Projected Total FY 2021-22 CBHP External Admin Expenditure	\$5,033,274	\$0	\$0	\$1,761,646	\$0	\$3,271,628			
Total FY 2021-22 CBHP External Admin Request	\$0	\$0	\$0	\$139,209	\$0	(\$139,209)			
Percent Change from FY 2021-22 CBHP External Admin Base	0.00%	0.00%	0.00%	8.58%	0.00%	-4.08%			
Percent Change from FY 2020-21 Estimated CBHP External Admin Expenditure	-0.98%	0.00%	0.00%	20.04%	0.00%	-9.52%			

Exhibit C1 - Calculation of Current Total Long Bill Group Impact									
FY 2022-23 Children's Basic Health Plan Capitation									
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds			
FY 2021-22 CBHP Capitation Appropriation Plus Special Bills	\$239,802,440	\$22,939,023	\$377,592	\$49,387,169	\$0	\$167,098,656			
FY 2022-23 CBHP Capitation Base Amount	\$239,802,440	\$22,939,023	\$377,592	\$49,387,169	\$0	\$167,098,656			
Projected Total FY 2022-23 CBHP Capitation Expenditure	\$219,479,787	\$36,520,081	\$375,480	\$40,859,780	\$0	\$141,724,446			
Total FY 2022-23 CBHP Capitation Continuation Amount	(\$20,322,653)	\$13,581,058	(\$2,112)	(\$8,527,389)	\$0	(\$25,374,210)			
Percent Change from FY 2022-23 CBHP Capitation Base	-8.47%	59.21%	-0.56%	-17.27%	0.00%	-15.19%			
Percent Change from FY 2021-22 Estimated CBHP Capitation Expenditure	5.16%	9.55%	-0.56%	1.51%	0.00%	5.18%			
FY	2022-23 CBHP Exte	rnal Admin							
FY 2021-22 CBHP External Admin Appropriation Plus Special Bills	\$5,033,274	\$0	\$0	\$1,622,437	\$0	\$3,410,837			
FY 2022-23 CBHP External Admin Base Amount	\$5,033,274	\$0	\$0	\$1,622,437	\$0	\$3,410,837			
Projected Total FY 2022-23 CBHP External Admin Expenditure	\$5,033,274	\$0	\$0	\$1,761,646	\$0	\$3,271,628			
Total FY 2022-23 CBHP External Admin Continuation Amount	\$0	\$0	\$0	\$139,209	\$0	(\$139,209)			
Percent Change from FY 2022-23 CBHP External Admin Base	0.00%	0.00%	0.00%	8.58%	0.00%	-4.08%			
Percent Change from FY 2021-22 Estimated CBHP External Admin Expenditure	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%			

Exhibit C2 - Calculation of Fund Splits									
Calculation of Fu	nd Splits - FY 202	0-21 Children's Ba	sic Health Plan	Estimate					
Item	<b>Total Estimate</b>	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FMAP Rate			
CBHP Expenditure to be matched	\$185,896,094	\$53,668,202	\$0	\$0	\$132,227,892	71.13%			
Enrollment Fees CBHP Trust Fund	\$378,736	\$0	\$378,736	\$0	\$0	0.00%			
Enrollment Fees Healthcare Affordability and Sustainability Fee Fund	\$927,936	\$0	\$927,936	\$0	\$0	0.00%			
Total CBHP Expenditure	\$187,202,766	\$53,668,202	\$1,306,672	\$0	\$132,227,892	70.63%			
Cash Fund Financing									
CBHP Trust Fund	\$0	(\$23,822,459)	\$23,822,459	\$0	\$0	NA			
CO Immunization Fund	\$0	(\$386,100)	\$386,100	\$0	\$0	NA			
Health Care Expansion Fund	\$0	(\$1)	\$1	\$0	\$0	NA			
Healthcare Affordability and Sustainability Fee Fund	\$0	(\$20,184,229)	\$20,184,229	\$0	\$0	NA			
Estimated FY 2020-21 Capitation Expenditure	\$187,202,766	\$9,275,413	\$45,699,461	\$0	\$132,227,892	70.63%			
Department Recoveries for Prior Year Expenditure (1)									
Department Recoveries	\$100,000	\$0	\$100,000	\$0	\$0	0.00%			
Impact to Cash Funds	(\$100,000)	\$0	(\$29,950)	\$0	(\$70,050)	70.05%			
Disallowance Payments	\$0	\$0	\$0	\$0	\$0	0.00%			
Final Estimated FY 2020-21 Capitation Expenditure	\$187,202,766	\$9,275,413	\$45,769,511	\$0	\$132,157,842	70.60%			
CBHP Admin Payments	\$5,083,274	\$0	\$1,467,541	\$0	\$3,615,733	71.13%			
Final Estimated FY 2020-21 CBHP Expenditure	\$192,286,040	\$9,275,413	\$47,237,052	\$0	\$135,773,575	70.61%			

<sup>(1)</sup> The Department expects to recover expenditure in FY 2020-21 from prior years, which cannot offset expenditure in the current year due to State fiscal rules. Therefore, the Department's estimate shows that recovery as an increase to cash funds.

<sup>(2)</sup> Starting October 1, 2020, CBHP programs no longer receive an additional 23 percentage points on the federal match, which drops to 65.00%. The Department will receive an enhanced bump of 4.34% for the duration of the COVID-19 public health emergency, which is currently projected through March 2021. The FY 2020-21 projected weighted match rate is 71.13%.

Starting October 1, 2021, CBHP programs no longer receive an additional 23 percentage points on the federal match, which drops to 65.00%. The FY 2021-22 projected match rate is 65.00%.

#### **Exhibit C2 - Calculation of Fund Splits** Calculation of Fund Splits - FY 2021-22 Children's Basic Health Plan Estimate **FMAP** Reappropriated **Total Estimate General Fund** Cash Funds **Federal Funds** Item Rate<sup>(1)</sup> **Funds** CBHP Expenditure to be matched \$207,403,873 \$72,591,356 \$0 \$0 \$134,812,517 65.00% Enrollment Fees CBHP Trust Fund \$377,917 \$377,917 \$0 \$0 \$0 0.00%\$934,346 \$0 \$0 \$0 0.00% Enrollment Fees Hospital Provider Fee \$934,346 \$72,591,356 **\$0** \$134,812,517 **Total CBHP Expenditure** \$208,716,136 \$1,312,263 64.59% Cash Fund Financing CBHP Trust Fund \$11,303,294 \$0 (\$11,303,294)\$0 \$0 NA \$0 \$0 CO Immunization Fund \$0 NA (\$367,575)\$367,575 Health Care Expansion Fund \$0 \$0 \$0 NA (\$1) \$1 (\$27,205,532)\$27,205,532 \$0 \$0 Healthcare Affordability and Sustainability Fee Fund \$0 NA Estimated FY 2021-22 Capitation Expenditure \$208,716,136 \$33,714,954 \$40,188,665 **\$0** \$134,812,517 64.59% Department Recoveries for Prior Year Expenditure (1) \$0 Department Recoveries \$100,000 \$0 \$100,000 \$0 0.00% (\$100,000)(\$65,000)65.00% Impact to Cash Funds (\$35,000)\$40,253,665 \$0 64.56% **Estimated FY 2021-22 Capitation Expenditure** \$208,716,136 \$33,714,954 \$134,747,517 **CBHP Admin Payments** \$5,033,274 **\$0** \$1,761,646 **\$0** \$3,271,628 65.00% **\$0** 64.57% Final Estimated FY 2021-22 CBHP Expenditure \$213,749,410 \$33,714,954 \$42,015,311 \$138,019,145

#### **Exhibit C2 - Calculation of Fund Splits** Calculation of Fund Splits - FY 2022-23 Children's Basic Health Plan Estimate **FMAP** Reappropriated **Total Estimate General Fund** Cash Funds Federal Funds Item Rate<sup>(1)</sup> **Funds** CBHP Expenditure to be matched \$218,137,609 \$76,348,163 \$0 \$0 \$141,789,446 65.00% Enrollment Fees CBHP Trust Fund \$0 \$0 \$385,805 \$0 \$385.805 0.00% \$0 \$0 \$0 0.00% Enrollment Fees Hospital Provider Fee \$956,373 \$956,373 **\$0** \$141,789,446 **Total CBHP Expenditure** \$219,479,787 \$76,348,163 \$1,342,178 64.60% Cash Fund Financing CBHP Trust Fund \$0 (\$11,417,860) \$11,417,860 \$0 \$0 NA \$0 \$0 CO Immunization Fund \$0 NA (\$369,525)\$369,525 Health Care Expansion Fund \$0 \$0 \$0 NA (\$1) \$1

\$0

\$0

\$219,479,787

\$100,000

(\$100,000)

\$219,479,787

\$5,033,274

(\$27,665,216)

\$36,895,561

\$36,895,561

\$0

\$0

\$0

\$27,665,216

\$40,794,780

\$100,000

(\$35,000)

\$40,859,780

\$1,761,646

\$0

\$0

**\$0** 

\$0

\$0

**\$0** 

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\$0

\$0

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(\$65,000)

\$141,724,446

\$144,996,074

\$3,271,628

\$141,789,446

NA

64.60%

0.00%

0.00%

65.00% 64.57%

65.00%

64.58%

Final Estimated FY 2022-23 CBHP Expenditure \$224,513,061 \$36,895,561 \$42,621,426 \$

(1) Starting October 1, 2020, CBHP programs no longer receive an additional 23 percentage points on the federal match, which drops to 65.00%. The FY 2022-23 projected match rate is 65.00%.

Healthcare Affordability and Sustainability Fee Fund

Department Recoveries

Impact to Cash Funds

Estimated FY 2022-23 Capitation Expenditure

Department Recoveries for Prior Year Expenditure (1)

Final Estimated FY 2022-23 Capitation Expenditure

Disallowance Payments

**CBHP Admin Payments** 

					Exhil	oit C3 - Childre Actuals, A		ealth Plan Pros and Estimates P			ary							
ITEM	FY 201	9-20 Actual	FY 2020-21	Appropriated	FY 2020	-21 Estimate		Change from opriation	FY 2021-	-22 Estimate		Change from 21 Estimate		Change from Appropriation	FY 2022-	-23 Estimate		Change from 22 Estimate
HEM	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure	Caseload	Expenditure
CHP+ Capitation Payments																		
Children to 205% FPL Medical	49,712	\$103,689,777	62,000	\$133,192,096	48,816	\$101,360,806	(13,184)	(\$31,831,290)	51,263	\$111,919,208	2,447	\$10,558,402	(10,737)	(\$21,272,888)	53,498	\$122,348,375	2,235	\$10,429,167
Children 206%-260% FPL Medical	26,852	\$57,019,314	33,031	\$70,249,748	27,608	\$57,562,847	(5,423)	(\$12,686,901)	28,894	\$63,310,521	1,286	\$5,747,674	(4,137)	(\$6,939,227)	30,154	\$67,156,607	1,260	\$3,846,086
Children to 205% FPL Dental	49,712	\$10,669,743	62,000	\$14,679,081	48,816	\$10,664,029	(13,184)	(\$4,015,052)	51,263	\$11,587,148	2,447	\$923,119	(10,737)	(\$3,091,933)	53,498	\$12,422,709	2,235	\$835,561
Children 206%-260% FPL Dental	26,852	\$6,300,302	33,031	\$7,528,351	27,608	\$5,913,823	(5,423)	(\$1,614,528)	28,894	\$6,407,601	1,286	\$493,778	(4,137)	(\$1,120,750)	30,154	\$6,869,898	1,260	\$462,297
Prenatal to 205% FPL	362	\$4,049,291	420	\$4,626,875	395	\$4,324,228	(25)	(\$302,647)	415	\$4,565,818	20	\$241,590	(5)	(\$61,057)	433	\$4,763,854	18	\$198,036
Prenatal 206%-260% FPL	543	\$6,610,703	700	\$7,635,150	503	\$5,460,889	(197)	(\$2,174,261)	529	\$5,767,580	26	\$306,691	(171)	(\$1,867,570)	552	\$6,018,344	23	\$250,764
Bottom Line Impacts																		
Delta Dental MLR Reconciliation		\$0		(\$100,000)		(\$100,000)		\$0		(\$100,000)		\$0		\$0		(\$100,000)		\$0
Reconciliation Payments		\$0		\$956,374		\$0		(\$956,374)				\$0		(\$956,374)		\$0		\$0
SMCN Med Advance Reconciliation		\$0		\$0		\$4,961,975		\$4,961,975		\$5,000,000		\$38,025		\$5,000,000		\$0		(\$5,000,000)
HB 19-1038 Dental Services for Pregnant Women		\$0		\$239,639		\$239,639		\$0		\$258,260		\$18,621		\$18,621		\$0		(\$258,260)
HIPF		\$0		\$776,505		\$776,505		\$0		\$0		(\$776,505)		(\$776,505)		\$0		\$0
FY 2019-20 Retroactive Rate Reduction		\$0		\$0		(\$3,961,975)		(\$3,961,975)		\$0								
Sub-total CBHP Program Expenditure	77,469	\$188,339,130	96,151	\$239,783,819	77,322	\$187,202,766	(18,829)	(\$52,581,053)	81,101	\$208,716,136	3,779	\$21,513,370	(15,050)	(\$31,067,683)	84,637	\$219,479,787	3,536	\$10,763,651
Enrollment Fees		\$1,001,760		\$1,135,948		\$1,306,672		\$170,724		\$1,312,262		\$5,590		\$176,315		\$1,342,178		\$29,916
Children to 200%		\$539,766		\$346,283		\$371,343		\$25,060		\$370,442		(\$901)		\$24,159		\$378,195		\$7,753
Children 201%-205% Children 206%-260%		\$47,804 \$414.190		\$6,824 \$782.840		\$7,393 \$927.936		\$569 \$145.095		\$7,474 \$934.346		\$81 \$6.410		\$650 \$151.505		\$7,610 \$956,373		\$135 \$22.028
Total CBHP Program Expenditure	77,469	\$188,339,130	96,151	\$239,783,819	77,322	\$187,202,766	(18,829)	(\$52,581,053)	81,101	\$208,716,136	3,779	\$21,513,370	(15,050)	(\$31,067,683)	84,637	\$219,479,787	3,536	\$10,763,651
Incremental Percent Change							-19.58%	-21.93%			4.89%	11.49%	-15.65%	-12.96%			4.36%	5.16%
CBHP Admin Payments																		
External Admin		\$1,948,101		\$5,083,274		\$5,083,274		\$0		\$5,033,274		(\$50,000)		(\$50,000)		\$5,033,274		\$0
Incremental Percent Change								0.00%				-0.98%						0.00%
Total CBHP Admin Payments		\$1,948,101		\$5,083,274		\$5,083,274		\$0		\$5,033,274		(\$50,000)		(\$50,000)		\$5,033,274		\$0
Total CBHP Programs		\$190,287,231		\$244,867,093		\$192,286,040		(\$52,581,053)		\$213,749,410		\$21,463,370		(\$31,117,683)		\$224,513,061		\$10,763,651
Incremental Percent Change								-21.47%				11.16%		-12.71%				5.04%

					- Children's		, , , , , , , , , , , , ,						
			C	Children's Basic	Health Plan	Average Ca	seload By F	iscal Year					
Item	Chil	dren 0%-20	5%	Children 0%-205%	Child	ren 206%-2	60%	Children 206%-260%	Total	Prenatal	Prenatal	Total	Total
	Ages 0-1	Ages 2-5	Ages 6-18	All Ages	Ages 0-1	Ages 2-5	Ages 6-18	All Ages	Children	0%-205%	206%-260%	Prenatal	
FY 2012-13 Actuals	5,187	11,299	45,774	62,261	1,398	3,377	10,800	15,574	77,835	1,148	463	1,611	79,446
FY 2013-14 Actuals	3,081	9,993	29,437	42,511	1,319	4,411	13,312	19,042	61,553	451	502	953	62,506
% Change from FY 2012-13	-40.61%	-11.56%	-35.69%	-31.72%	-5.65%	30.63%	23.27%	22.27%	-20.92%	-60.71%	8.42%	-40.84%	-21.32%
FY 2014-15 Actuals	2,869	8,383	25,785	37,036	1,349	3,680	11,639	16,668	53,704	227		687	54,391
% Change from FY 2013-14		-16.11%	-12.41%	-12.88%	2.26%	-16.57%	-12.57%	-12.47%	-12.75%	-49.67%		-27.91%	-12.98%
FY 2015-16 Actuals	2,736	8,025	24,179	34,939	1,446	3,475	11,179		51,040	199		668	51,708
% Change from FY 2014-15	-4.61%	-4.27%	-6.23%	-5.66%	7.20%	-5.56%	-3.95%	-3.40%	-4.96%	-12.33%	1.96%	-2.77%	-4.93%
FY 2016-17 Actuals	3,114	9,704	30,636	43,453	1,695	4,556	14,557	20,808	64,262	195		626	64,888
% Change from FY 2015-16		20.92%	26.70%	24.37%	17.25%	31.09%	30.22%	29.24%	25.91%	-2.01%		-6.29%	25.49%
FY 2017-18 Actuals	3,345	11,546	36,587	51,477	1,772	5,540	18,100	- ,	76,888	305		842	77,730
% Change from FY 2016-17	7.43%	18.98%	19.43%	18.46%	4.50%	21.60%	24.34%	22.12%	19.65%	56.41%		34.50%	19.79%
FY 2018-19 Actuals	3,247	11,903	38,143	53,294	1,786	5,727	19,229		80,035	356		914	80,949
% Change from FY 2017-18		3.10%	4.25%	3.53%	0.82%	3.37%	6.24%	5.23%	4.09%	16.72%		8.55%	4.14%
FY 2019-20 Actuals	2,999	10,764	35,948	49,712	1,686	5,458	19,707	26,852	76,564	362		905	77,469
% Change from FY 2018-19	-7.63%	-9.57%	-5.76%	-6.72%	-5.60%	-4.70%	2.49%	0.41%	-4.34%	1.69%		-0.98%	-4.30%
FY 2020-21 Projection	2,727	10,461	35,628	48,816	1,626	5,610	20,372	27,608	76,424	395		898	77,322
% Change from FY 2019-20	-9.08%	-2.82%	-0.89%	-1.80%	-3.56%	2.78%	3.37%	2.82%	-0.18%	9.12%	-7.37%	-0.77%	-0.19%
FY 2021-22 Projection	2,870	10,984	37,409	51,263	1,706	5,879	21,309	28,894	80,157	415	529	944	81,101
% Change from FY 2020-21	5.24%	5.00%	5.00%	5.01%	4.92%	4.80%	4.60%	4.66%	4.88%	5.06%	5.17%	5.12%	4.89%
FY 2022-23 Projection	2,995	11,463	39,040	53,498	1,780	6,136	22,238	30,154	83,652	433	552	985	84,637
% Change from FY 2021-22	4.36%	4.36%	4.36%	4.36%	4.34%	4.37%	4.36%	4.36%	4.36%	4.34%	4.35%	4.34%	4.36%
FY 2020-21 Appropriation	3,843	13,439	44,718	62,000	2,147	6,663	24,221	33,031	95,031	420	700	1,120	96,151
Difference between the FY 2020-21 Appropriation and Projection	(1,116)	(2,978)	(9,090)	(13,184)	(521)	(1,053)	(3,849)	(5,423)	(18,607)	(25)	(197)	(222)	(18,829)

	Exhil	bit C4 - Child	ren's Basic He	alth Plan Moi	nthly Caseload	l Historical Su	ummary				
		СВН	P CASELOAD I	FY 2015-16 with	out RETROAC	TIVITY					
FY 2015-16	Children to 205% FPL	Children 206%-260% FPL	Total Children	Prenatal to 205% FPL	Prenatal 206%-260% FPL	Total Prentatal	TOTAL CBHP	Monthly Growth	Monthly Growth Rate		
July 2015	35,269	15,382	50,651	206	415	621	51,272	3,566	5.39%		
August 2015											
September 2015	33,333	14,936	48,269	183	394	577	48,846	(114)	-0.23%		
October 2015	32,011	14,444	46,455	167	405	572	47,027	(1,819)	-3.72%		
November 2015	31,821	14,212	46,033	192	449	641	46,674	(353)	-0.75%		
December 2015	32,921	14,908	47,829	187	472	659	48,488	1,814	3.89%		
January 2016	34,658	16,036	50,694	205	506	711	51,405	2,917	6.02%		
February 2016	35,557	16,728	52,285	202	515	717	53,002	1,597	3.11%		
March 2016	36,075	17,257	53,332	196	529	725	54,057	1,055	1.99%		
April 2016	37,075	17,763	54,838	212	519	731	55,569	1,512	2.80%		
May 2016	38,019	18,204	56,223	225	515	740	56,963	1,394	2.51%		
June 2016	38,938	18,568	57,506	220	514	734	58,240	1,277	2.24%		
Year-to-Date Average	34,940	16,100	51,040	199	469	668	51,708	878	1.56%		

<sup>(1)</sup> Caseload has been restated for Children above 200% FPL and Prenatal above 200% FPL back to January 2014 and going forward. Due to the MAGI conversion in January 2014, clients that are between 201%-205% of FPL can not be explicitly identified. The Department is using a rolling 6 month average (prior to the MAGI conversion) of the proportion of clients that are 201%-205% and 206%-260% FPL and applying this distribution to the total caseload that is above 200% FPL.

		СВН	P CASELOAD	FY 2016-17 with	out RETROAC	TIVITY			
FY 2016-17	Children to 205% FPL	Children 206%-260% FPL	Total Children	Prenatal to 205% FPL	Prenatal 206%-260% FPL	Total Prentatal	TOTAL CBHP	Monthly Growth	Monthly Growth Rate
July 2016	39,962	18,968	58,930	227	509	736	59,666	1,426	2.45%
August 2016	41,345	19,419	60,764	200	497	697	61,461	1,795	3.01%
September 2016	41,419	19,945	61,364	199	477	676	62,040	579	0.94%
October 2016	40,987	19,751	60,738	205	443	648	61,386	(654)	-1.05%
November 2016	40,451	19,205	59,656	202	464	666	60,322	(1,064)	-1.73%
December 2016	41,974	19,860	61,834	199	494	693	62,527	2,205	3.66%
January 2017	42,653	20,732	63,385	204	510	714	64,099	1,572	2.51%
February 2017	43,074	21,191	64,265	208	498	706	64,971	872	1.36%
March 2017	47,726	23,839	71,565	248	523	771	72,336	7,365	11.34%
April 2017	49,020	24,052	73,072	261	515	776	73,848	1,512	2.09%
May 2017	49,447	24,214	73,661	276	502	778	74,439	591	0.80%
June 2017	49,587	24,293	73,880	275	486	761	74,641	202	0.27%
Year-to-Date Average	43,970	21,289	65,260	225	493	719	65,978	1,367	2.14%

<sup>(1)</sup> Caseload has been restated for Children above 200% FPL and Prenatal above 200% FPL back to January 2014 and going forward. Due to the MAGI conversion in January 2014, clients that are 201%-205% FPL's can not be explicitly identified. The Department is using a rolling 6 month average (prior to the MAGI conversion) of the proportion of clients that are 201%-205% and 206%-260% FPL and applying this distribution to the total caseload that is above 200% FPL.

		СВН	P CASELOAD	FY 2017-18 with	out RETROAC	TIVITY			
FY 2017-18	Children to 205% FPL	Children 206%-260% FPL	Total Children	Prenatal to 205% FPL	Prenatal 206%-260% FPL	Total Prentatal	TOTAL CBHP	Monthly Growth	Monthly Growth Rate
July 2017	50,236	24,236	74,472	279	503	782	75,254	815	1.09%
August 2017	50,635	24,652	75,287	279	509	788	76,075	821	1.09%
September 2017	49,863	24,686	74,549	273	512	785	75,334	(741)	-0.97%
October 2017	49,855	25,018	74,873	275	523	798	75,671	337	0.45%
November 2017	50,032	25,301	75,333	277	565	842	76,175	504	0.67%
December 2017	50,276	24,999	75,275	294	568	862	76,137	(38)	-0.05%
January 2018	50,891	25,260	76,151	294	575	869	77,020	883	1.16%
February 2018	54,854	27,049	81,903	302	564	866	82,769	5,749	7.46%
March 2018	56,287	27,694	83,981	311	554	865	84,846	2,077	2.51%
April 2018	60,590	29,115	89,705	325	534	859	90,564	5,718	6.74%
May 2018	61,037	29,160	90,197	310	533	843	91,040	476	0.53%
June 2018	54,475	27,300	81,775	306	507	813	82,588	(8,452)	-9.28%
Year-to-Date Average	53,253	26,206	79,458	294	537	831	80,289	679	0.95%

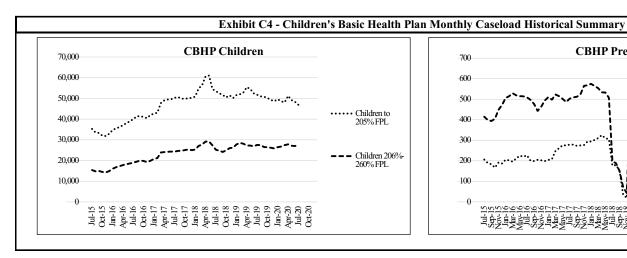
<sup>(1)</sup> Caseload has been restated for Children above 200% FPL and Prenatal above 200% FPL back to January 2014 and going forward. Due to the MAGI conversion in January 2014, clients that are between 201%-205% of FPL can not be explicitly identified. The Department is using a rolling 6 month average (prior to the MAGI conversion) of the proportion of clients that are 201%-205% and 206%-259% FPL and applying this distribution to the total caseload that is above 200% FPL.

		СВН	P CASELOAD	FY 2018-19 with	out RETROAC	TIVITY			
FY 2018-19	Children to 205% FPL	Children 206%-260% FPL	Total Children	Prenatal to 205% FPL	Prenatal 206%-260% FPL	Total Prentatal	TOTAL CBHP	Monthly Growth	Monthly Growth Rate
July 2018	53,507	25,166	78,673	176	198	374	79,047	(3,541)	-3.89%
August 2018	52,453	24,734	77,187	179	188	367	77,554	(1,493)	-1.89%
September 2018	51,663	24,114	75,777	151	149	300	76,077	(1,477)	-1.90%
October 2018	50,509	24,897	75,406	36	73	109	75,515	(562)	-0.749
November 2018	51,460	25,969	77,429	19	43	62	77,491	1,976	2.629
December 2018	50,139	26,188	76,327	380	464	844	77,171	(320)	-0.419
January 2019	51,644	27,763	79,407	341	606	947	80,354	3,183	4.129
February 2019	51,991	28,465	80,456	344	620	964	81,420	1,066	1.339
March 2019	52,857	28,118	80,975	398	623	1,021	81,996	576	0.719
April 2019	55,395	27,227	82,622	455	582	1,037	83,659	1,663	2.039
May 2019	54,542	27,214	81,756	475	578	1,053	82,809	(850)	-1.029
June 2019	52,436	26,823	79,259	462	531	993	80,252	(2,557)	-3.099
ear-to-Date Average <sup>(2)</sup>	52,383	26,390	78,773	285	388	673	79,445	(195)	-0.18%

<sup>(1)</sup> Caseload has been restated for Children above 200% FPL and Prenatal above 200% FPL between January 2014 and February 2017. Due to the MAGI conversion in January 2014, clients that are between 201%-205% of FPL can not be explicitly identified. The Department is using a rolling 6 month average (prior to the MAGI conversion) of the proportion of clients that are 201%-205% and 206%-259% FPL and applying this distribution to the total caseload that is above 200% FPL. Beginning in March 2017, the Department is able to accuractly identify all clients by FPL so a distribution is no longer needed.

<sup>(2)</sup> Caseload Year-to-Date Average does not tie out to exhibit C4 - CBHP Caseload because the Department is experiencing issues related to the implementation of the interChange and believes that the caseload by month may be overstated.

		СВН	P CASELOAD I	FY 2019-20 with	out RETROAC	TIVITY			
FY 2019-20	Children to 205% FPL	Children 206%-260% FPL	Total Children	Prenatal to 205% FPL	Prenatal 206%-260% FPL	Total Prentatal	TOTAL CBHP	Monthly Growth	Monthly Growth Rat
July 2019	51,765	27,516	79,281	429	537	966	80,247	(5)	-0.019
August 2019	51,007	27,411	78,418	394	561	955	79,373	(874)	-1.099
September 2019	50,774	26,478	77,252	354	537	891	78,143	(1,230)	-1.55%
October 2019	50,192	26,373	76,565	339	536	875	77,440	(703)	-0.90%
November 2019	49,242	26,170	75,412	319	543	862	76,274	(1,166)	-1.519
December 2019	48,657	25,793	74,450	294	533	827	75,277	(997)	-1.31%
January 2020	49,553	26,447	76,000	301	554	855	76,855	1,578	2.10%
February 2020	48,577	26,731	75,308	282	562	844	76,152	(703)	-0.91%
March 2020	48,077	27,431	75,508	331	566	897	76,405	253	0.33%
April 2020	51,230	27,800	79,030	453	545	998	80,028	3,623	4.749
May 2020	49,125	27,110	76,235	456	542	998	77,233	(2,795)	-3.49%
June 2020	48,337	26,958	75,295	387	495	882	76,177	(1,056)	-1.37%
Year-to-Date Average	49,711	26,852	76,563	362	543	904	77,467	(340)	-0.41%
		СВН	P CASELOAD I	FY 2020-21 with	out RETROAC	ΓΙVΙΤΥ			
FY 2020-21	Children to 205% FPL	Children 206%-260% FPL	Total Children	Prenatal to 205% FPL	Prenatal 206%-260% FPL	Total Prentatal	TOTAL CBHP	Monthly Growth	Monthly Growth Rat
July 2020	46,898	27,442	74,340	347	482	829	75,169	(1,008)	-1.329



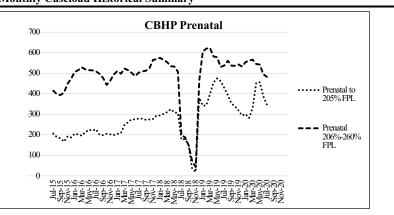


	Exhibit C4	- Children's Basic He	alth Plan Capitation	Payments Per Capita 1	Historical Summary		
Item	Children 0%-205% FPL Medical	Children 206%-260% FPL Medical	Children 0%-205% FPL Dental	Children 206%-260% FPL Dental	Prenatal 0%-205% FPL	Prenatal 206%-260% FPL	Total
FY 2013-14 Actuals	\$2,715.46	\$2,178.88	\$232.15	\$207.39	\$14,172.67	\$11,189.55	\$2,924
FY 2014-15 Actuals	\$2,230.43	\$1,941.36	\$227.61	\$193.64	\$16,784.57	\$12,544.25	\$2,504.14
% Change from FY 2013-14	-17.86%	-10.90%	-1.95%	-6.63%	18.43%	12.11%	-14.35%
FY 2015-16 Actuals	\$2,012.94	\$1,993.72	\$232.22	\$221.88	\$12,036.03	\$13,111.16	\$2,372.18
% Change from FY 2014-15	-9.75%	2.70%	2.02%	14.59%	-28.29%	4.52%	-5.27%
FY 2016-17 Actuals	\$1,958.11	\$2,101.88	\$238.75	\$248.09	\$6,527.07	\$10,733.53	\$2,315.71
% Change from FY 2015-16	-2.72%	5.43%	2.81%	11.81%	-45.77%	-18.13%	-2.38%
FY 2017-18 Actuals	\$2,257.88	\$4,573.84	\$2,257.88	\$4,573.86	\$381,075.06	\$216,439.28	\$1,495.28
% Change from FY 2016-17	15.31%	117.61%	845.70%	1743.62%	5738.38%	1916.48%	-35.43%
FY 2018-19 Actuals	\$1,954.21	\$1,992.21	\$209.51	\$213.59	\$18,615.99	\$13,650.69	\$2,329.16
% Change from FY 2017-18	-13.45%	-56.44%	-90.72%	-95.33%	-95.11%	-93.69%	55.77%
FY 2019-20 Actuals	\$2,085.84	\$2,123.51	\$214.63	\$234.64	\$11,185.89	\$12,174.41	\$2,431.19
% Change from FY 2018-19	6.74%	6.59%	2.44%	9.85%	-39.91%	-10.81%	4.38%
FY 2020-21 Projection	\$2,042.96	\$2,052.37	\$213.11	\$208.49	\$15,767.31	\$16,749.03	\$2,421.08
% Change from FY 2019-20	-2.06%	-3.35%	-0.71%	-11.14%	40.96%	37.58%	-0.42%
FY 2021-22 Projection	\$2,182.11	\$2,190.99	\$224.96	\$220.20	\$16,043.61	\$17,004.34	\$2,573.53
% Change from FY 2020-21	6.81%	6.75%	5.56%	5.62%	1.75%	1.52%	6.30%
FY 2022-23 Projection	\$2,286.97	\$2,227.12	\$231.18	\$226.33	\$11,001.97	\$10,902.80	\$2,593.19
% Change from FY 2021-22	4.81%	1.65%	2.77%	2.78%	-31.42%	-35.88%	0.76%

	Exhibit C4 - Childr		Plan Program, H Total Expenditu		ares Summary		
	Item	Children to 205% FPL	Children 206%- 260% FPL	Prenatal to 200% FPL	Prenatal 206%- 260% FPL	Other Payments	CBHP TOTAL
	Medical Per Capita	\$2,230.43	\$1,941.36	\$16,784.57	\$12,544.25		
	Dental Per Capita	\$227.61	\$193.64	\$0.00	-		
FY 2014-15	Caseload	37,036	16,668	227	460		54,391
Actuals	Medical Expenditure	\$82,606,338	\$32,358,023	\$3,810,098	\$5,770,354		\$124,544,813
	Dental Expenditure	\$8,429,697	\$3,227,513	\$0	-		\$11,657,21
	Total FY 2014-15 Expenditures	\$91,036,036	35,585,536	\$3,810,098	5,770,354		\$136,202,023
	Medical Per Capita	\$2,012.94	\$1,993.72	\$12,036.03	\$13,111.16		
	Dental Per Capita	\$232.22	\$221.88	-	-		
	Caseload	34,939	16,100	199	469		51,707
	Medical Expenditure	\$70,330,793	\$32,099,349	\$2,395,170	\$6,149,132		\$110,974,44
FY 2015-16	Dental Expenditure	\$8,113,517	\$3,572,391	-	-		\$11,685,90
Actuals	Other Payments	\$242,154	\$60,609	(\$6,702,661)	-	\$970,237	(\$5,429,661
	Recoveries	(\$8,087,772)	(\$2,709,359)	(\$1,292,200)	(\$514,542)	\$12,603,873	-
	Total FY 2015-16 Expenditures	\$70,598,692	\$33,022,989	-\$5,599,690	\$5,634,591	\$13,574,110	\$117,230,692
	% Change from FY 2014-15	-22.45%	-7.20%	-246.97%	-2.35%	, . ,	-13.93%
	Medical Per Capita	\$1,958.11	\$2,101.88	\$6,527.07	\$10,733.53		
	Dental Per Capita	\$238.75	\$248.09				
	Caseload	43,453	20,808	195	431		64,888
	Medical Expenditure	\$85,085,917	\$43,736,282	\$1,272,778	\$4,626,150		\$134,721,127
FY 2016-17	Dental Expenditure	\$10,374,516	\$5,162,311	\$1,272,770	\$ 1,020,120		\$15,536,827
Actuals	Other Payments	\$279,825	\$127,554	\$0	_	\$3,162,548	\$3,569,928
	Recoveries	(\$2,679,982)	(\$1,452,293)	(\$105,868)	(\$229,408)	\$4,467,551	\$3,309,928
<del>-</del>	Total FY 2016-17 Expenditures	\$93,060,276	\$47,573,854	\$1,166,910	\$4,396,742	\$7,630,099	\$153,827,882
	% Change from FY 2015-16	31.82%	44.06%	-120.84%	-21.97%	\$7,030,099	31.22%
	Medical Per Capita	\$2,257.88	\$4,573.84	\$381,075.06	\$216,439.28		31.22 /
	Dental Per Capita	\$2,257.88	\$4,573.86	\$381,073.00	\$210,439.28		
	Caseload	51,477	25,411	305	537		77,729
		\$116,227,894	\$116,227,386	\$116,227,894	\$116,227,894		\$464,911,069
FY 2017-18	Medical Expenditure			\$116,227,894	\$116,227,894		
Actuals	Dental Expenditure	\$116,227,894	\$116,227,894	-	-	62.501.056	\$232,455,788
	Other Payments	\$193,132	\$107,992	\$0	- (0.10 / 0.00)	\$2,501,956	\$2,803,080
<u> </u>	Recoveries	(\$2,673,527)	(\$1,584,102)	(\$100,157)	(\$436,838)	\$4,794,624	(0
	Total FY 2017-18 Expenditures	\$229,975,393	\$230,979,170	\$116,127,737	\$115,791,056	\$7,296,580	\$700,169,937
	% Change from FY 2016-17	147.13%	385.52%	9851.73%	2533.57%		355.16%
	Medical Per Capita	\$1,954	\$2,009.41	\$18,616	\$13,651		
	Dental Per Capita	\$209.51	\$222.19	-	-		
	Caseload	53,294	26,740	356	558		80,948
FY 2018-19	Medical Expenditure	\$104,146,849	\$53,732,420	\$6,627,292	\$7,617,083		\$172,123,64
Actuals	Dental Expenditure	\$11,165,729	\$5,941,314	-	-		\$17,107,04
	Other Payments	\$235,515	\$0	\$0	-	\$386,101	\$621,616
	Recoveries	(\$923,094)	(\$31,923)	\$0	\$0	\$955,016	-
	Total FY 2018-19 Expenditures	\$114,625,000	\$59,641,811	\$6,627,292	\$7,617,083	\$1,341,117	\$189,852,303
	% Change from FY 2017-18	-50.16%	-74.18%	-94.29%	-93.42%		-72.88%
	Medical Per Capita	\$2,085.84	\$2,123.51	\$11,185.89	\$12,174.41		
	Dental Per Capita	\$214.63	\$234.64	362	543		77.440
<u> </u>	Caseload Medical Expenditure	49,711 \$103,689,777	26,852 \$57,019,314	\$4,049,291	\$6,610,703		77,468 \$171,369,08
FY 2019-20	Meaical Expenditure  Dental Expenditure	\$103,689,777	\$6,300,302	\$4,049,291	\$0,010,703		\$171,369,08
Actuals	Other Payments	\$10,009,743	\$0,500,502	\$0	- 1	\$0	\$10,970,04
	Recoveries			\$0	\$0		
	Total FY 2019-20 Expenditures	\$114,359,520	\$63,319,616	\$4,049,291	\$6,610,703	\$0	\$188,339,130
	% Change from FY 2018-19	-0.23%	6.17%	-38.90%	-13.21%	-100.00%	-0.80%

	Exhibit C4 - Childr	en's Basic Health	Plan Program, H	istorical Expendit	ures Summary		
		Projecte	d Total Expenditu	ires			
	Item	Children to 205% FPL	Children 206%- 260% FPL	Prenatal to 205% FPL	Prenatal 206%- 260% FPL	Other Payments	СВНР ТОТАL
	Medical Per Capita	\$2,042.96	\$2,052.37	\$15,767.31	\$16,749.03		
	Dental Per Capita	\$213.11	\$208.49	-	-		
L	Caseload	48,816	27,608	395	503		77,322
FY 2020-21	Medical Expenditure	\$99,729,028	\$56,661,699	\$6,228,240	\$8,424,442		\$171,043,409
Projection	Dental Expenditure	\$10,403,365	\$5,755,992	-	-		\$16,159,357
<u> </u>	Recoveries Total FY 2020-21 Expenditures	\$110,132,393	0 \$62,417,691	9 \$6,228,240	88,424,442		9 \$187,202,766
	% Change from FY 2019-20		-1.42%	50,228,240	\$8,424,442 27.44%		-0.60%
	Medical Per Capita	\$2,182.11	\$2,190.99		\$17,004.34		
	Dental Per Capita	\$224.96	\$220.20	-	-		
	Caseload	51,263	28,894	415	529		81,101
FY 2021-22 Projection	Medical Expenditure	\$111,861,451	\$63,306,543	\$6,658,099	\$8,995,294		\$190,821,387
Projection	Dental Expenditure	\$11,532,148	\$6,362,601	-	-		\$17,894,749
	Total FY 2021-22 Expenditures	\$123,393,599	\$69,669,144	\$6,658,099	\$8,995,294		\$208,716,136
	% Change from FY 2020-21	12.04%	11.62%	6.90%	6.78%		11.49%
	Medical Per Capita	\$2,286.97	\$2,227.12	\$11,001.97	\$10,902.80		
	Dental Per Capita	\$231.18	\$226.33	-	-		
	Caseload	53,498	30,154	433	552		84,637
FY 2022-23 Projection	Medical Expenditure	\$122,348,375	\$67,156,607	\$4,763,854	\$6,018,344		\$200,287,180
Trojection	Dental Expenditure	\$12,367,709	\$6,824,898	-	-		\$19,192,607
	Total FY 2022-23 Expenditures	\$134,716,084	\$73,981,505	\$4,763,854	\$6,018,344		\$219,479,787
	% Change from FY 2021-22	9.18%	6.19%	-28.45%	-33.09%		5.16%

Exhibit C5 - Trad	itional Population	<b>Expenditures and</b>	Funding	
FY	2020-21 Projected E	Expenditures	Ŭ	
	Children 0%- 205% Medical	Children 0%- 205% Dental	Prenatal 0%-205%	Totals
Caseload	48,816	48,816	395	49,211
Estimated Per Capita Cost	\$2,042.96	\$213.11	\$15,767.31	\$2,364.52
Total Estimated Expenditures FY 2020-21	\$99,729,028	\$10,403,365	\$6,228,240	\$116,360,633
FY	2021-22 Projected E	Expenditures		
	Children 0%- 205% Medical	Children 0%- 205% Dental	Prenatal <b>0%-205%</b>	Totals
Caseload	51,263	51,263	415	51,678
Estimated Per Capita Cost	\$2,182.11	\$224.96	\$16,043.61	\$2,516.58
Total Estimated Expenditures FY 2021-22	\$111,861,451	\$11,532,148	\$6,658,099	\$130,051,698
FY	2022-23 Projected E	Expenditures		
	Children 0%- 205% Medical	Children 0%- 205% Dental	Prenatal 0%-205%	Totals
Caseload	53,498	53,498	433	53,931
Estimated Per Capita Cost	\$2,286.97	\$231.18	\$11,001.97	\$2,586.27
Total Estimated Expenditures FY 2022-23	\$122,348,375	\$12,367,709	\$4,763,854	\$139,479,938

	Exhibit C5 - Traditional Population Expenditures and Funding												
			Ca	sh Funds Forecas	t <sup>(1)</sup>								
Row	Item	FY 2017-18 Actuals	FY 2018-19 Actuals	FY 2019-20 Actuals	FY 2020-21 Forecast	FY 2021-22 Forecast	FY 2022-23 Forecast	Notes					
A	CHP+ Trust Fund - 18% of settlement	\$16,617,777	\$13,700,000	\$15,156,991	\$14,256,000	\$13,572,000	\$13,644,000	2019 Tobacco MSA Payment Forecast and HB 16-1408 <sup>(1)</sup>					
В	Total Trust Fund Expenditure	Trust Fund Expenditure \$14,611,213 \$15,420,777 \$14,925,773 \$34,992,960 \$47,150,764		\$50,453,825	Actuals: Reported in CORE Forecast: Exhibit C-2 <sup>(2)</sup>								
С	CHP Premiums	\$14,163,658	\$14,819,200	\$14,655,693	\$33,476,609	\$45,396,165	\$48,699,226	Actuals: Reported in CORE Forecast: Row B - Row D					
D	CHP+ Admin	\$447,555	\$601,577	\$270,080	\$1,516,351	\$1,754,599	\$1,754,599	Actuals: Reported in CORE Forecast: Exhibit C1					
Е	% of Projection <sup>(3)</sup>	87.93%	112.56%	98.47%	245.46%	347.41%	369.79%	Row B / Row A					
F	Immunizations - 2.5% of settlement	\$2,189,338	\$1,980,000	\$2,072,503	\$1,980,000	\$1,885,000	\$1,895,000	2018 Tobacco MSA Payment Forecast and HB 16-1408 <sup>(1)</sup>					
G	% Appropriated to CHP+	19.50%	19.50%	19.50%	19.50%	19.50%	19.50%	Percentage appropriated to CHP+					
Н	Projected Amount	\$426,921	\$386,100	\$404,138	\$386,100	\$367,575	\$369,525	Row F * Row G					
I	Total CO Immunization Fund Expenditure	\$426,921	\$386,100	\$404,138	\$386,100	\$367,575	\$369,525	Actuals: Reported in CORE Forecast: Row H * Row J					
J	% of Projection	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	Actuals: Row I / Row H Forecast: Rolling 3 year average					

<sup>(1)</sup> https://leg.colorado.gov/publications/2019-tobacco-master-settlement-agreement-payment-forecast

<sup>(3)</sup> The Department has an existing balance in the CHP+ Trust fund that, along with new MSA settlement monies, is sufficent to cover all expenditure through FY 2019-20. FY 2020-21 will require the use of General Fund as well as the Trust fund.

rund.											
FY 2020-21 - Calculation of Fund Splits											
Item	Total Funds	General Fund	CBHP Trust Fund <sup>(1)</sup>	CO Immunization Fund <sup>(2)</sup>	Health Care Expansion Fund	Reappropriated Funds	Federal Funds	FMAP			
Expenditures to be matched	\$115,981,897	\$33,483,974	\$0	\$0	\$0	\$0	\$82,497,923.0	71.13%			
Estimated Enrollment Fees	\$378,736	\$0	\$378,736	\$0	\$0	\$0	\$0	0.00%			
Expenditures/No Cash Funds	\$116,360,633	\$33,483,974	\$378,736	\$0	\$0	\$0	\$82,497,923.0	70.90%			
Offset From Cash Funds (3)	\$0	(\$24,208,560)	\$23,822,459	\$386,100	\$1	\$0	\$0	NA			
Total Estimated Expenditures FY 2020-21	\$116,360,633	\$9,275,414	\$24,201,195	\$386,100	\$1	\$0	\$82,497,923.0	70.90%			
Offset from General Fund <sup>(3)</sup>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	NA			
Total Estimated Expenditures FY 2020-21	\$116,360,633	\$9,275,414	\$24,201,195	\$386,100	\$1	\$0	\$82,497,923.0	70.90%			

<sup>&</sup>lt;sup>1)</sup>Forecasted above in Cash Funds Forecast Table, Row C

<sup>(2)</sup> Values in FY 2016-17 are from the February 4, 2015 Tobacco Master Settlement and Amendment 35 Funding.

<sup>&</sup>lt;sup>2)</sup>Forecasted above in Cash Funds Forecast Table, Row I

<sup>&</sup>lt;sup>(3)</sup>Due to the increased FMAP, the projected funds from the CHP Trust Fund are sufficient to cover forecasted expenditures without funding from the General Fund.

		FY 2021-22	2 - Calculation of	Fund Splits				
Item	Total Funds	General Fund	CBHP Trust Fund <sup>(1)</sup>	CO Immunization Fund <sup>(2)</sup>	Health Care Expansion Fund	Reappropriated Funds	Federal Funds	FMAP
Expenditures to be matched	\$129,673,781	\$45,385,824	\$0	\$0	\$0	\$0	\$84,287,957	65.00%
Estimated Enrollment Fees	\$377,917	\$0	\$377,917	\$0	\$0	\$0	\$0	0.00%
Expenditures/No Cash Funds	\$130,051,698	\$45,385,824	\$377,917	\$0	\$0	\$0	\$84,287,957	64.81%
Offset From Cash Funds (3)	\$0	(\$11,670,870)	\$11,303,294	\$367,575	\$1	\$0	\$0	NA
<b>Total Estimated Expenditures FY 2021-22</b>	\$130,051,698	\$33,714,954	\$11,681,211	\$367,575	\$1	\$0	\$84,287,957	64.81%
Offset from General Fund (3)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	NA
Total Estimated Expenditures FY 2021-22	\$130,051,698	\$33,714,954	\$11,681,211	\$367,575	\$1	\$0	\$84,287,957	64.81%

<sup>(1)</sup>Forecasted above in Cash Funds Forecast Table, Row C

### FY 2022-23 - Calculation of Fund Splits

		1 1 2022 20	Calculation of	r unu Spints				
Item	Total Funds	General Fund	CBHP Trust Fund <sup>(1)</sup>	CO Immunization Fund <sup>(2)</sup>	Health Care Expansion Fund	Reappropriated Funds	Federal Funds	FMAP
Expenditures to be matched	\$139,094,133	\$48,682,947	\$0	\$0	\$0	\$0	\$90,411,186	65.00%
Estimated Enrollment Fees	\$385,805	\$0	\$385,805	\$0	\$0	\$0	\$0	0.00%
Expenditures/No Cash Funds	\$139,479,938	\$48,682,947	\$385,805	\$0	\$0	\$0	\$90,411,186	64.82%
Offset From Cash Funds	\$0	(\$11,787,386)	\$11,417,860	\$369,525	\$1	\$0	\$0	NA
Total Estimated Expenditures FY 2022-23	\$139,479,938	\$36,895,561	\$11,803,665	\$369,525	\$1	\$0	\$90,411,186	64.82%
Offset from General Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	NA
Total Estimated Expenditures FY 2022-23	\$139,479,938	\$36,895,561	\$11,803,665	\$369,525	\$1	\$0	\$90,411,186	64.82%

<sup>(1)</sup>Forecasted above in Cash Funds Forecast Table, Row C

<sup>(2)</sup> Forecasted above in Cash Funds Forecast Table, Row I

<sup>(3)</sup> Due to the increased FMAP, the projected funds from the CHP Trust Fund are sufficient to cover forecasted expenditures without funding from the General Fund.

<sup>&</sup>lt;sup>2)</sup>Forecasted above in Cash Funds Forecast Table, Row I

Exhibit C5 - Ex	pansion Population	Expenditures and	Funding	
	FY 2020-21 Projected	Expenditures	_	
	Children 206%- 260% Medical	Children 206%- 260% Dental	Prenatal 206%-260%	Totals
Caseload	27,608	27,608	503	28,111
Estimated Per Capita Cost	\$2,052.37	\$208.49	\$16,749.03	\$2,520.09
Total Estimated Expenditures FY 2020-21	\$56,661,699	\$5,755,992	\$8,424,442	\$70,842,133
	FY 2021-22 Projected	Expenditures		
	Children 206%- 260% Medical	Children 206%- 260% Dental	Prenatal 206%-260%	Totals
Caseload	28,894	28,894	529	29,423
Estimated Per Capita Cost	\$2,190.99	\$220.20	\$17,004.34	\$2,673.57
Total Estimated Expenditures FY 2021-22	\$63,306,543	\$6,362,601	\$8,995,294	\$78,664,438
	FY 2022-23 Projected	Expenditures		
	Children 206%- 260% Medical	Children 206%- 260% Dental	Prenatal 206%-260%	Totals
Caseload	30,154	30,154	552	30,706
Estimated Per Capita Cost	\$2,227.12	\$226.33	\$10,902.80	\$2,605.35
Total Estimated Expenditures FY 2022-23	\$67,156,607	\$6,824,898	\$6,018,344	\$79,999,849

Exh	ibit C5 - Expansi	on Population Ex	penditures and F	unding									
	FY 2020	)-21 - Calculation of	Fund Splits										
Item	Total Funds	General Fund	HAS Fee Cash Fund	Reappropriated Funds	Federal Funds	FMAP							
Expenditures to be matched	\$69,914,197	\$0	\$20,184,229	\$0	\$49,729,968	71.13%							
Estimated Enrollment Fees	\$927,936	\$0	\$927,936	\$0	\$0	NA							
Total Estimated Expenditures FY 2020-21	\$70,842,133	\$0	\$21,112,165	\$0	\$49,729,968.0	70.20%							
	FY 2021	1-22 - Calculation of	Fund Splits										
Item Total Funds General Fund HAS Fee Cash Funds Funds Federal Funds FMAP													
Expenditures to be matched	\$77,730,092	\$0	\$27,205,532	\$0	\$50,524,560	65.00%							
Estimated Enrollment Fees	\$934,346	\$0	\$934,346	\$0	\$0	NA							
Total Estimated Expenditures FY 2021-22	\$78,664,438	\$0	\$28,139,878	\$0	\$50,524,560	64.23%							
	FY 2022	2-23 - Calculation of	Fund Splits		1								
Item	Total Funds	General Fund	HAS Fee Cash Fund	Reappropriated Funds	Federal Funds	FMAP							
Expenditures to be matched	\$79,043,476	\$0	\$27,665,216	\$0	\$51,378,260	65.00%							
Estimated Enrollment Fees	\$956,373	\$0	\$956,373	\$0	\$0	NA							
Total Estimated Expenditures FY 2022-23	\$79,999,849	\$0	\$28,621,589	\$0	\$51,378,260	64.22%							

Exhibit C5 - Enrollment Fees Historical Summary and Projection													
Historical Enrollment Fees and Projections													
	Children 157%-200%	Children 201%-205%	Children 206%-260%	Enrollment Fees <sup>(1)</sup>	Average Enrollment Fee <sup>(2)</sup>								
FY 2014-15 Actuals	23,607	1,714	-	\$893,287	\$35.28								
FY 2015-16 Actuals	20,241	1,660	16,100	\$1,123,169	\$29.56								
% Change from FY 2014-15	-14.26%	-3.15%	-	25.73%	-16.22%								
FY 2016-17 Actuals	24,808	2,223	20,808	\$1,272,538	\$26.60								
% Change from FY 2015-16	22.56%	33.92%	29.24%	13.30%	-10.00%								
FY 2017-18 Actuals	30,313	2,717	25,411	\$1,127,546	\$19.29								
% Change from FY 2016-17	22.19%	22.23%	22.12%	-11.39%	-27.47%								
FY 2018-19 Actuals	31,486	2,849	26,958	\$1,264,903	\$20.64								
% Change from FY 2017-18	3.87%	4.84%	6.09%	12.18%	6.96%								
FY 2019-20 Actuals	29,432	2,607	22,585	\$1,001,760	\$18.34								
% Change from FY 2018-19	-6.52%	-8.50%	-16.22%	-20.80%	-11.14%								
FY 2020-21 Projection	29,072	2,563	26,296	\$1,306,672	\$22.56								
% Change from FY 2019-20	-1.22%	-1.68%	16.43%	30.44%	22.99%								
FY 2021-22 Projection	29,003	2,584	26,479	\$1,312,262	\$22.60								
% Change from FY 2020-21	-0.24%	0.82%	0.70%	0.43%	0.19%								
FY 2022-23 Projection	29,611	2,638	27,102	\$1,342,178	\$22.61								
% Change from FY 2021-22	2.10%	2.09%	2.35%	2.28%	0.07%								

<sup>(1)</sup>Enrollment Fees collected is amount reported in CORE.

<sup>&</sup>lt;sup>(2)</sup>This is the total enrollment fees collected reported in CORE divided by children's caseload over 157% FPL

	Exhibit C5 - Enrollment Fees Historical Summary and Projection												
	Projected Number of Enrollment Fees Calculations												
		Children 157%-200%	Children 201%-205%	Children 206%-212%	Children 213%-260%	Total							
.21	Projected New Enrollees <sup>(1)</sup>	15,507	307	3,729	11,612	31,155							
2020-21	Projected New Cases <sup>(2)</sup>	13,603	273	3,318	10,282	27,476							
	Projected Average Fee <sup>(3)</sup>	\$27.30	\$27.08	\$27.08	\$81.51	\$47.56							
FY	Total Estimated Paid	\$371,343	\$7,393	\$89,855	\$838,081	\$1,306,672							
-22	Projected New Enrollees <sup>(1)</sup>	15,470	310	3,755	11,693	31,228							
2021-	Projected New Cases <sup>(2)</sup>	13,570	276	3,341	10,353	27,540							
7 20	Projected Average Fee <sup>(3)</sup>	\$27.30	\$27.08	\$27.08	\$81.51	\$47.65							
FY	Total Estimated Paid	\$370,442	\$7,474	\$90,478	\$843,868	\$1,312,262							
-23	Projected New Enrollees <sup>(1)</sup>	15,794	316	3,843	11,968	31,921							
2022-	Projected New Cases <sup>(2)</sup>	13,854	281	3,420	10,597	28,152							
7 20	Projected Average Fee <sup>(3)</sup>	\$27.30	\$27.08	\$27.08	\$81.51	\$47.68							
FY	Total Estimated Paid	\$378,195	\$7,610	\$92,617	\$863,756	\$1,342,178							

<sup>(1)</sup> This is estimated by increasing the FY 2018-19 cases from CBMS for each FPL category by the forecasted CHP+ caseload increase for the

<sup>(3)</sup> This is estimated by applying FY 2018-19 distribution of the number of children one parent or caretaker has enrolled in the CHP+ program to the known enrollment fee.

Assumptions Use	ed in Estimations	1	
	Children 157%-200%	Children 201%-213%	Children 214%-260%
Fee to enroll one child <sup>(4)</sup>	\$25.00	\$25.00	\$75.00
Fee to enroll more than one child <sup>(4)</sup>	\$35.00	\$35.00	\$105.00

Distributio	n of household si	ze in CHP+ in F	Y 2018-19 <sup>(5)</sup>
HH Size	157%-200%	201%-213%	214%-260%
1	77.01%	79.19%	78.30%
2	18.64%	17.49%	18.32%
3	3.66%	2.75%	2.88%
4	0.57%	0.45%	0.44%
5	0.10%	0.09%	0.05%
6	0.01%	0.01%	0.00%
7	0.01%	0.00%	0.00%
8	0.00%	0.00%	0.00%
9	0.00%	0.01%	0.00%
10	0.00%	0.00%	0.00%

<sup>(4)</sup> https://www.colorado.gov/pacific/sites/default/files/2015%20Agency%20Letters%20CHP+Income%20Chart%20Final.pdf

<sup>(2)</sup> This is the average enrollment fee paid from FY 2018-19 based on CBMS enrollment data and total enrollment fees paid per FPL category.

<sup>(5)</sup> This is the average distribution of the number of children one parent or caretaker has enrolled in the CHP+ program in FY 2018-19, applied to all forecasted fiscal years.

				Exhibit C6	- Expenditur	e Calculation	ns by Eligibil	lity Category	ī						
			CB	HP Capitati		ons by Eligib	, ,	y for FY 202	0-21						
					FY:	2020-21 Calcul	ations								
Service Expenditure	Childre	en's Medical 0%		Children's Medical 206%-260%			Children's Dental 0%-205%			Children's Dental 206%-260%			Prenatal	Prenatal	Total
•	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%	
Weighted Capitation Rate	\$252.15	\$151.27	\$173.37	\$254.98	\$151.34	\$173.65	\$5.30	\$16.67	\$19.64	\$4.45	\$16.48	\$19.30	\$916.86	\$908.58	\$199.81
Estimated Monthly Caseload	2,727	10,461	35,628	1,628	5,610	20,373	2,727	10,461	35,628	1,628	5,610	20,373	396	503	77,326
Number of Months Rate is Effective	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
Total Estimated Costs for FY 2020-21	\$8,251,356	\$18,989,225	\$74,121,916	\$4,981,289	\$10,188,209	\$42,453,257	\$173,470	\$2,092,932	\$8,395,311	\$86,857	\$1,109,602	\$4,719,365	\$4,356,919	\$5,484,189	\$185,403,897
Capitated Payments	ψ0,251,350	\$10,707,223	\$74,121,510	\$1,701,207	\$10,100,209	\$12,133,237	Ψ173,170	Ψ2,072,732	\$6,575,511	\$60,057	\$1,100,002	Ψ1,717,505	ψ1,550,717	\$5,101,107	\$105,105,077
Estimated Percentage of Claims Paid in Current Period with	98.48%	99.17%	99.30%	98.50%	99.17%	99.37%	99.55%	99.52%	99.61%	99.72%	99.58%	99.69%	98.17%	98.16%	99.21%
Current Period Dates of Service	70.1070	33.1770	77.5070	70.5070	33.1770	77.5770	77.5570	77.5270	33.0170	22.7270	77.5670	77.0770	70.1770	70.1070	JJ.2170
Estimated Expenditure for Claims Paid in Current Period	\$8,125,935	\$18,831,614	\$73,603,063	\$4,906,570	\$10,103,647	\$42,185,801	\$172,689	\$2,082,886	\$8,362,569	\$86,614	\$1,104,942	\$4,704,735	\$4,277,187	\$5,383,280	\$183,931,532
with Current Period Dates of Service	ψ0,1 <b>2</b> υ,7υυ	\$10,031,011	\$75,005,005	\$ 1,500,570	Ψ10,103,017	0.2,100,001	Ψ172,003	\$2,002,000	\$0,502,505	\$00,011	ψ1,101,712	ψ 1,7 O 1,7 D D	ψ.,2//,10/	\$5,505,200	ψ103,731,03 <u>2</u>
Estimated Expenditure for Prior Period	\$142,235	\$152,965	\$504,994	\$73,373	\$72,883	\$220,573	\$690	\$10.894	\$34,301	\$220	\$4,375	\$12,937	\$47,041	\$77,609	\$1,355,090
Dates of Service								,					,.		
Total Estimated Expenditure in FY 2020-21			\$74,108,057	\$4,979,943	\$10,176,530	\$42,406,374	\$173,379	\$2,093,780	\$8,396,870	\$86,834	\$1,109,317	\$4,717,672	\$4,324,228	\$5,460,889	\$185,286,622
Unadjusted Per Capitas in FY 2020-21	\$3,031.97	\$1,814.80	\$2,080.05	\$3,058.93	\$1,814.00	\$2,081.50	\$63.58	\$200.15	\$235.68	\$53.34	\$197.74	\$231.56	\$10,919.77	\$10,856.64	\$2,396.17
			L			GIRL LD LL									
	Ci	hildren's Medic	eal	Children's Medical		Children's Dental		Children's Dental			Prenatal	Prenatal	Total		
		0%-205%	0404 060 006		206%-260%	055 560 045		0%-205%	210 ((1020	206%-260%			0%-205%	206%-260%	
Total Estimated Expenditure in FY 2020-21			\$101,360,806			\$57,562,847			\$10,664,029			\$5,913,823	\$4,324,228	\$5,460,889	\$185,286,622
Delta Dental MLR Reconciliation			\$0 \$505,948			\$0 \$270,557			(\$55,000)	2		· · · /	\$0	\$0	(\$100,000)
HIPF Payments			\$303,948			\$270,557			\$0 \$0			\$0 \$0	\$0	\$0	\$776,506
HB 19-1038 Dental Services for Pregnant Women			(\$57,318)			(\$3,948)			\$0			\$0	\$89,735 \$1,979,072	\$149,904	\$239,639
SMNC Medical Advance Reconciliation			( , , ,			(\$1,167,757)			(\$205,664)			(\$112,831)	(\$164,795)	\$3,044,168	\$4,961,975 (\$3,961,975)
FY 2019-20 Retroactive Rate Reduction		(\$2,080,409)				(\$1,167,737)			(\$203,004)			(\$112,031)	(\$104,/95)	(\$230,519)	(\$3,961,973)
Total Estimated FY 2020-21 Expenditure Including Bottom Line Impacts	\$99,729,028				\$56,661,699			\$10,403,365	\$5,755,992		\$5,755,992	\$6,228,240	\$8,424,442	\$187,202,766	
Estimated Monthly Caseload			48,816			27,611	48,816		48,816	27,611			396	503	77,326
Final Estimated Per Capita			\$2,042.96			\$2,052.14	\$213.11		\$208.47		\$15,727.88	\$16,748.39	\$2,420.95		
Unadjusted Per Capita			\$2,076.38			\$2,084.78			\$218.45				\$10,919.77	\$10,856.64	\$2,396.17

	Exhibit C6 - Expenditure Calculations by Eligibility Category														
			CB	HP Capitati	on Calculati	ons by Eligib	ility Categor	y for FY 202	1-22						
					FY	2021-22 Calcul	ations								
Service Expenditure		n's Medical 0%	0 = 00 / 0	Children's Medical 206%-260%			Children's Dental 0%-205%			Children's Dental 206%-260%			Prenatal	Prenatal	Total
_	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%	
Weighted Capitation Rate	\$264.61	\$160.34	\$181.94	\$267.10	\$160.52	\$181.91	\$5.53	\$17.13	\$20.36	\$4.64	\$16.93	\$20.02	\$916.86	\$908.58	\$209.16
Estimated Monthly Caseload	2,870	10,984	37,409	1,706	5,879	21,310	2,870	10,984	37,409	1,706	5,879	21,310	415	529	81,102
Number of Months Rate is Effective	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
Total Estimated Costs for FY 2021-22 Capitated Payments	\$9,113,168	\$21,134,095	\$81,674,322	\$5,468,071	\$11,324,365	\$46,518,025	\$190,419	\$2,257,673	\$9,139,094	\$94,908	\$1,194,307	\$5,118,619	\$4,565,963	\$5,767,666	\$203,560,695
Estimated Percentage of Claims Paid in Current Period with Current Period Dates of Service	98.48%	99.17%	99.30%	98.50%	99.17%	99.37%	99.55%	99.52%	99.61%	99.72%	99.58%	99.69%	98.17%	98.16%	99.21%
Estimated Expenditure for Claims Paid in Current Period with Current Period Dates of Service	\$8,974,648	\$8,974,648 \$20,958,682 \$81,102,602		\$5,386,050	\$11,230,373	\$46,224,961	\$189,562	\$2,246,836	\$9,103,452	\$94,642	\$1,189,291	\$5,102,751	\$4,482,406	\$5,661,541	\$201,947,797
Estimated Expenditure for Prior Period Dates of Service	\$138,271	\$174,636	\$570,369	\$81,841	\$94,190	\$293,106	\$854	\$10,904	\$35,540	\$269	\$5,027	\$15,621	\$83,412	\$106,039	\$1,610,079
Total Estimated Expenditure in FY 2021-22	\$9,112,919	\$21,133,318	\$81,672,971	\$5,467,891	\$11,324,563	\$46,518,067	\$190,416	\$2,257,740	\$9,138,992	\$94,911	\$1,194,318	\$5,118,372	\$4,565,818	\$5,767,580	\$203,557,876
Unadjusted Per Capitas in FY 2021-22	\$3,175.23	\$1,924.01	\$2,183.24	\$3,205.09	\$1,926.27	\$2,182.92	\$66.35	\$205.55	\$244.30	\$55.63	\$203.15	\$240.19	\$11,001.97	\$10,902.80	\$2,509.90
	Cł	nildren's Medic	al	Cl	nildren's Medic	al	Children's Dental		Children's Dental		al	Prenatal	Prenatal	Total	
		0%-205%	0444 040 000		206%-260%	262 242 524		0%-205%	044 505 440		206%-260%	05.10=501	0%-205%	206%-260%	
Total Estimated Expenditure in FY 2021-22			\$111,919,208			\$63,310,521			\$11,587,148				\$4,565,818	1.,,	\$203,557,876
Delta Dental MLR Reconciliation			\$0			\$0			(\$55,000)	(\$45,000		(\$45,000)	\$0	\$0	(\$100,000)
HB 19-1038 Dental Services for Pregnant Women Annualization			\$0			\$0			\$0	\$0		\$98,043	\$160,217	\$258,260	
Annuarization HIPF Payments			(\$57.757)			(\$3,978)			\$0			\$0	\$1,994,238	\$3,067,497	\$5,000,000
Total Estimated FY 2021-22 Expenditure Including		(\$57,757)				( , , ,							\$1,794,238	\$5,007,497	\$5,000,000
Bottom Line Impacts	\$111,861,451		\$63,306,543		\$11,532,148		\$6,362,601		\$6,658,099	\$8,995,294	\$208,716,136				
Estimated Monthly Caseload			51,263	28,895		51,263		28,895			415	529	81,102		
Final Estimated Per Capita			\$2,182.11	\$2,190.92			\$224.96				\$16,043.61	\$17,004.34	\$2,573.50		
Unadjusted Per Capita			\$2,183.24			\$2,191.05			\$226.03			\$221.75	\$11,001.97	\$10,902.80	\$2,509.90

	Exhibit C6 - Expenditure Calculations by Eligibility Category														
			CB	HP Capitati	on Calculati	ons by Eligib	ility Categor	y for FY 202	2-23						
					FY	2022-23 Calcul	ations								
Service Expenditure		n's Medical 0%			's Medical 206			en's Dental 0%			n's Dental 2069		Prenatal	Prenatal	Total
Service Expenditure	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%	
Weighted Capitation Rate	\$269.91	\$169.74	\$190.62	\$273.20	\$170.78	\$182.66	\$5.76	\$17.59	\$20.91	\$4.83	\$17.39	\$20.56	\$916.86	\$908.58	\$216.20
Estimated Monthly Caseload	2,995	11,463	39,040	1,780	6,136	22,239	2,995	11,463	39,040	1,780	6,136	22,239	433	552	84,638
Number of Months Rate is Effective	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
Total Estimated Costs for FY 2022-23 Capitated Payments	\$9,700,565	\$23,348,755	\$89,301,658	\$5,835,552	\$12,574,873	\$48,746,109	\$206,907	\$2,420,160	\$9,795,683	\$103,083	\$1,280,792	\$5,486,272	\$4,764,005	\$6,018,434	\$219,582,848
Estimated Percentage of Claims Paid in Current Period with Current Period Dates of Service	98.48%	99.17%	99.30%	98.50%	99.17%	99.37%	99.55%	99.52%	99.61%	99.72%	99.58%	99.69%	98.17%	98.16%	99.21%
Estimated Expenditure for Claims Paid in Current Period with Current Period Dates of Service	\$9,553,116	\$23,154,960	\$88,676,546	\$5,748,019	\$12,470,502	\$48,439,009	\$205,976	\$2,408,543	\$9,757,480	\$102,794	\$1,275,413	\$5,469,265	\$4,676,824	\$5,907,695	\$217,846,142
Estimated Expenditure for Prior Period Dates of Service	\$147,183	\$192,936	\$623,634	\$87,341	\$104,591	\$307,145	\$928	\$11,688	\$38,094	\$292	\$5,391	\$16,743	\$87,030	\$110,649	\$1,733,645
Total Estimated Expenditure in FY 2022-23	\$9,700,299	\$23,347,896	\$89,300,180	\$5,835,360	\$12,575,093	\$48,746,154	\$206,904	\$2,420,231	\$9,795,574	\$103,086	\$1,280,804	\$5,486,008	\$4,763,854	\$6,018,344	\$219,579,787
Unadjusted Per Capitas in FY 2022-23	\$3,238.83	\$2,036.81	\$2,287.40	\$3,278.29	\$2,049.40	\$2,191.92	\$69.08	\$211.13	\$250.91	\$57.91	\$208.74	\$246.68	\$11,001.97	\$10,902.80	\$2,594.34
	Cl	hildren's Medic 0%-205%	al	Cł	ildren's Medic 206%-260%	cal	C	hildren's Denta 0%-205%	ıl	С	hildren's Denta 206%-260%	ıl	Prenatal 0%-205%	Prenatal 206%-260%	Total
Total Estimated Expenditure in FY 2022-23			\$122,348,375			\$67,156,607			\$12,422,709			\$6,869,898	\$4,763,854	\$6,018,344	\$219,579,787
Delta Dental MLR Reconciliation			\$0			\$0			(\$55,000)			(\$45,000)	\$0	\$0	(\$100,000)
Total Estimated FY 2022-23 Expenditure Including Bottom Line Impacts			\$122,348,375			\$67,156,607			\$12,367,709			\$6,824,898	\$4,763,854	\$6,018,344	\$219,479,787
Estimated Monthly Caseload	•	53,498			•	30,155		•	53,498	•	•	30,155	433	552	84,638
Final Estimated Per Capita		\$2,286.97				\$2,227.05			\$231.18			\$226.33	\$11,001.97	\$10,902.80	\$2,593.16
Unadjusted Per Capita		\$2,286.97			7 \$2,227.05 \$232.21					\$227.82	\$11,001.97	\$10,902.80	\$2,594.34		

				Exh	ibit C6 - Incurr	ed But Not Repo	rted Expend	liture by Fisca	l Period						ĺ
					Incurred But Not	Reported Estimate	d Percentages	for all Fiscal Per	riods						
	Child	lren's Medical 0%-		Child	en's Medical 206%	<b>%-260%</b>	Chil	dren's Dental 0%	%-205%	Child	ren's Dental 206	5%-260%	Prenatal	Prenatal	Total
	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%	Total
Estimated Percent of Claims Paid in Current Period	98.48%	99.17%	99.30%	98.50%	99.17%	99.37%	99.55%	99.52%	99.61%	99.72%	99.58%	99.69%	98.17%	98.16%	99.14%
Estimated Percent of Claims Paid in Prior Period	1.52%	0.83%	0.70%	1.50%	0.83%	0.63%	0.45%	0.48%	0.39%	0.28%	0.42%	0.31%	1.83%	1.84%	0.86%
					FY 2020-21 Estin	nated Expenditure	for Prior Peri	od Dates of Serv	ice						
Estimated Expenditure for Claims Incurred in Prior Period	\$9,374,434	\$18,511,536	\$72,312,945	\$4,902,271	\$8,762,714	\$35,006,538	\$153,813	\$2,255,686	\$8,820,372	\$77,684	\$1,039,330	\$4,239,142	\$2,574,988	\$4,221,334	\$172,252,789
Estimated Percent of Prior Period Claims Paid in Current Period	1.52%	0.83%	0.70%	1.50%	0.83%	0.63%	0.45%	0.48%	0.39%	0.28%	0.42%	0.31%	1.83%	1.84%	0.79%
Estimated Expenditure for Prior Period Dates of Service	\$142,235	\$152,965	\$504,994	\$73,373	\$72,883	\$220,573	\$690	\$10,894	\$34,301	\$220	\$4,375	\$12,937	\$47,041	\$77,609	\$1,355,090
					FY 2021-22 Estin	nated Expenditure	for Prior Peri	od Dates of Serv	ice						
Estimated Expenditure for Claims Incurred in Prior Period	\$9,113,168	\$21,134,095	\$81,674,322	\$5,468,071	\$11,324,365	\$46,518,025	\$190,419	\$2,257,673	\$9,139,094	\$94,908	\$1,194,307	\$5,118,619	\$4,565,963	\$5,767,666	\$203,560,695
Estimated Percent of Prior Period Claims Paid in Current Period	1.52%	0.83%	0.70%	1.50%	0.83%	0.63%	0.45%	0.48%	0.39%	0.28%	0.42%	0.31%	1.83%	1.84%	0.79%
Estimated Expenditure for Prior Period Dates of Service	\$138,271	\$174,636	\$570,369	\$81,841	\$94,190	\$293,106	\$854	\$10,904	\$35,540	\$269	\$5,027	\$15,621	\$83,412	\$106,039	\$1,610,079
					FY 2022-23 Estin	nated Expenditure	for Prior Peri	od Dates of Serv	ice						
Estimated Expenditure for Claims Incurred in Prior Period	\$9,700,565	\$23,348,755	\$89,301,658	\$5,835,552	\$12,574,873	\$48,746,109	\$206,907	\$2,420,160	\$9,795,683	\$103,083	\$1,280,792	\$5,486,272	\$4,764,005	\$6,018,434	\$219,582,848
Estimated Percent of Prior Period Claims Paid in Current Period	1.52%	0.83%	0.70%	1.50%	0.83%	0.63%	0.45%	0.48%	0.39%	0.28%	0.42%	0.31%	1.83%	1.84%	0.79%
Estimated Expenditure for Prior Period Dates of Service	\$147,183	\$192,936	\$623,634	\$87,341	\$104,591	\$307,145	\$928	\$11,688	\$38,094	\$292	\$5,391	\$16,743	\$87,030	\$110,649	\$1,733,645

	Exhibit C7 - Bottom Line Impacts Summary  Children Children Children Dental Children Dental Propagal to Prenatal													
	Item	Children Medical to 205% FPL		Children Dental to 205% FPL	Children Dental 206%-260% FPL	Prenatal to 205% FPL	Prenatal 206%-260% FPL	Total						
slı	Reconciliation Payments <sup>(1)</sup>	\$800,962	\$324,950	\$0	\$0	\$0	\$0	\$1,125,912						
Actua	SMCN Retro Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0						
9-20	SMCN Medical Advance Reconciliation	\$59,571	\$4,103	\$0	\$0	(\$2,056,872)	(\$3,163,839)	(\$5,157,038)						
FY 2019-20 Actuals	Delta Dental MLR Reconciliation	\$0	\$0	\$0	\$0	\$0	\$0	\$0						
F	Total Bottom Line Adjustments for FY 2018-19	\$860,533	\$329,053	\$0	\$0	(\$2,056,872)	(\$3,163,839)	(\$4,031,126)						
n	Delta Dental MLR Reconciliation	\$0	\$0	(\$55,000)	(\$45,000)	\$0	\$0	(\$100,000)						
ection	HIPF Payments <sup>(2)</sup>	\$505,948	\$270,557	\$0	\$0	\$0	\$0	\$776,505						
Proj	HB 19-1038 Dental Services for Pregnant Women	\$0	\$0	\$0	\$0	\$89,735	\$149,904	\$239,639						
20-21	FY 2019-20 Retroactive Rate Reduction	(\$2,080,408.61)	(\$1,167,757)	(\$205,664)	(\$112,831)	(\$164,795)	(\$230,519)	(\$3,961,975)						
FY 2020-21 Projection	SMCN Medical Advance Recociliation	(\$57,318)	(\$3,948)	\$0	\$0	\$1,979,072	\$3,044,168	\$4,961,975						
	Total Bottom Line Adjustments for FY 2019-20	(\$1,631,778)	(\$901,148)	(\$260,664)	(\$157,831)	\$1,904,012	\$2,963,553	\$1,916,145						
tion	Delta Dental MLR Reconciliation	\$0	\$0	(\$55,000)	(\$45,000)	\$0	\$0	(\$100,000)						
rojec	HIPF Payments <sup>(3)</sup>	\$0	\$0	\$0	\$0	\$0	\$0	\$0						
2021-22 Projection	HB 19-1038 Dental Services for Pregnant Women Annualization	\$0.00	\$0	\$0	\$0	\$98,043	\$160,217	\$258,260						
2021	SMCN Medical Advance Recociliation	(\$57,757)	(\$3,978)	\$0	\$0	\$1,994,238	\$3,067,497	\$5,000,000						
FY	Total Bottom Line Adjustments for FY 2020-21	(\$57,757)	(\$3,978)	(\$55,000)	(\$45,000)	\$2,092,281	\$3,227,714	\$5,158,260						
tion	Reconciliation Payments <sup>(1)</sup>	\$0	\$0											
rojec	Delta Dental MLR Reconciliation	\$0	\$0	(\$55,000)	(\$45,000)	\$0	\$0	(\$100,000)						
FY 2022-23 Projection	HB 19-1038 Dental Services for Prenant Women Annualization	\$0	\$0	\$0	\$0	\$0	\$0	\$0						
2022	HIPF Payments <sup>(2)</sup>	\$0	\$0	\$0	\$0			\$0						
FY	Total Bottom Line Adjustments for FY 2021-22	\$0	\$0	(\$55,000)	(\$45,000)	\$0	\$0	(\$100,000)						

<sup>(1)</sup> There exists a manual reconciliation process for CHP+ clients. These claims are accounted for as expenditure adjustments, calculations can be found on page R-3.C7-2

<sup>(2)</sup> Adjustment accounts for the provider fee that for profit insurers are required to pay as a result of the Affordable Care Act.

	Exhibi	t C7 - Bottom Li	ne Impact Calc	culations			
	Proje	ected Reconciliation	Payments Calcu	lations			
		Estimated FY 2021	-22 Reconciliation	ns			
	Children Medical to 205% FPL	Children Medical 206%-260% FPL		Children Dental 206%-260% FPL	Prenatal to 205% FPL	Prenatal 206% 260% FPL	Average Total
Actual FY 2019-20 Reconciliation Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FY 2020-21 Projected Rate Inflation Exhibit C9	-0.09%	-0.22%	0.55%	0.83%	0.01%	0.00%	0.00%
Estimated Reconciliations After Rate Inflation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FY 2020-21 Projected Base Caseload Growth Exhibit C4	-7.78%	-2.46%	-7.78%	-2.46%	-9.04%	-4.73%	0.00%
	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Final Estimated FY 2020-21 Reconciliations	\$0	\$0	\$0	\$0	\$0	\$0	\$0
			AA D 111 11				
	T	Estimated FY 2022	-23 Reconciliation	ns			
	Children Medical to 205% FPL	Children Medical 206%-260% FPL		Children Dental 206%-260% FPL	Prenatal to 205% FPL	Prenatal 206% 260% FPL	Average Total
FY 2020-21 Projected Reconciliation Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FY 2021-22 Projected Rate Inflation Exhibit C9	5.14%	4.98%	3.51%	3.53%	0.00%	0.00%	0.00%
Estimated Reconciliations After Rate Inflation	\$0	\$0	\$0	\$0	\$0.00	\$0.00	\$0
FY 2021-22 Projected Base Caseload Growth Exhibit C4	5.01%	4.66%	5.01%	4.66%	5.86%	5.17%	0.00%
Final Estimated FY 2021-22 Reconciliations	\$0	\$0	\$0	\$0	\$0	\$0	\$0

			Exhibi	t C8 - Chi	ldren's Ba	sic Health	Plan Reti	roactivity	Adjustme	nt <sup>(1)</sup>					
		Children'	s Medical (		Children's				ı's Dental 0		Children'	s Dental 20	6%-260%	Prenatal	Prenatal
		Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%
	Average Monthly Claims	4,241	9,006	38,373	909	1,942	5,147	4,395	9,255	41,666	951	2,139	6,220	1,412	347
FY 2012-13	Average Caseload	5,187	11,299	45,774	1,398	3,377	10,800	5,187	11,299	45,774	1,398	3,377	10,800	1,148	463
	Claims as a Percentage of Caseload	81.76%	79.70%	83.83%	65.01%	57.50%	47.66%	84.74%	81.91%	91.03%	68.02%	63.35%	57.60%	123.03%	74.91%
	Average Monthly Claims	6,556	13,570	52,298	1,533	3,386	10,320	4,827	10,102	41,267	1,215	2,815	8,723	1,450	470
FY 2013-14	Average Caseload	3,081	9,993	29,437	1,319	4,411	13,312	3,081	9,993	29,437	1,319	4,411	13,312	451	502
	Claims as a Percentage of Caseload	212.79%	135.79%	177.66%	116.23%	76.76%	77.52%	156.68%	101.09%	140.19%	92.09%	63.82%	65.52%	321.45%	93.53%
	Average Monthly Claims	4,725	12,191	34,517	1,710	4,448	13,145	3,667	10,173	29,089	1,313	3,772	11,163	546	468
FY 2014-15	Average Caseload	2,869	8,383	25,785	1,349	3,680	11,639	2,869	8,383	25,785	1,349	3,680	11,639	227	460
	Claims as a Percentage of Caseload	164.69%	145.42%	133.86%	126.76%	120.88%	112.94%	127.81%	121.35%	112.81%	97.30%	102.50%	95.91%	240.71%	101.63%
	Average Monthly Claims	3,664	9,632	28,959	1,381	3,521	11,032	3,068	8,588	25,958	1,111	3,093	9,682	300	435
FY 2015-16	Average Caseload	2,736	8,025	24,179	1,446	3,475	11,179	2,736	8,025	24,179	1,446	3,475	11,179	199	469
	Claims as a Percentage of Caseload	133.92%	120.03%	119.77%	95.51%	101.31%	98.68%	112.15%	107.02%	107.36%	76.84%	89.00%	86.61%	150.80%	92.75%
	Average Monthly Claims	3,547	9,713	29,044	1,425	3,204	10,154	2,959	8,530	25,803	1,175	2,814	8,968	290	439
FY 2016-17	Average Caseload	3,114	9,704	30,636	1,695	4,556	14,557	3,114	9,704	30,636	1,695	4,556	14,557	195	431
	Claims as a Percentage of Caseload	113.91%	100.09%	94.80%	84.08%	70.32%	69.75%	95.01%	87.90%	84.22%	69.33%	61.76%	61.60%	148.72%	101.95%
	Average Monthly Claims	3,655	10,748	33,689	1,604	4,252	13,470	3,387	10,190	32,029	1,473	4,025	12,823	202	309
FY 2017-18	Average Caseload	3,345	11,546	36,587	1,772	5,540	18,100	3,345	11,546	36,587	1,772	5,540	18,100	305	537
	Claims as a Percentage of Caseload	109.27%	93.09%	92.08%	90.53%	76.75%	74.42%	101.26%	88.25%	87.54%	83.12%	72.65%	70.85%	66.09%	57.59%
	Average Monthly Claims	3,400	11,806	37,390	1,666	5,327	17,392	3,021	11,510	36,927	1,516	5,276	17,738	366	510
FY 2018-19	Average Caseload	3,247	11,903	38,143	1,786	5,727	19,229	3,247	11,903	38,143	1,786	5,727	19,229	356	558
	Claims as a Percentage of Caseload	104.71%	99.18%	98.03%	93.26%	93.01%	90.45%	93.05%	96.70%	96.81%	84.85%	92.13%	92.25%	102.83%	91.41%
	Average Monthly Claims	3,038	10,934	36,771	1,685	5,472	18,836	2,783	10,421	34,871	1,515	5,194	18,836	366	499
FY 2019-20	Average Caseload	2,999	10,764	35,948	1,686	5,458	19,707	2,999	10,764	35,948	1,686	5,458	19,707	362	543
	Claims as a Percentage of Caseload	101.31%	101.58%	102.29%	99.95%	100.26%	95.58%	92.79%	96.81%	97.00%	89.88%	95.17%	95.58%	100.97%	91.97%
Weighted Av	verage Claims as a Percentage of Caseload <sup>(2)</sup>	101.31%	101.58%	102.29%	101.31%	101.58%	102.29%	101.26%	96.81%	97.00%	101.26%	96.81%	97.00%	93.61%	93.61%
	Retroactivity Adjustment Factor	1.31%	1.58%	2.29%	1.31%	1.58%	2.29%	1.26%	-3.19%	-3.00%	1.26%	-3.19%	-3.00%	-6.39%	-6.39%
(1) The retroactivi	e retroactivity adjustment captures the difference in total claims paid versus caseload due to retroactive eligibility.														
		Children Med	ical to 260% -	Due to method	lology used to	identify the 20	1% to 205% F	PL grouping, t	he Departmen	t calculates a si	ngle retroactiv	ity factor for a	all children with	hin each age categ	ory and uses that
										recent period	with complete	run-out, the p	ercentage was	chosen with the nu	mber of
(2)Percentage		unattributed c									-1	C C 11		n each age categor	
selected to														n each age categor	
modify		unattributed c								recent period	with complete	run out, the p	creentage was	mosen with the na	moer or
capitation rates														n each age categor	
										t recent period	with complete	run-out, the p	ercentage was	chosen with the nu	imber of
	Prenatal factor for both the 0% - 205% FPL and 206% - 260% FPL groups. FY 2018-19 was chosen due to it being the most recent period with complete run-out, the percentage was chosen with the number of unattributed clients included. The number as reported in this exhibit does not included the unattributed clients.														

			Exhibi	t C8 - Child	ren's Basic	Health Plan (	Claims Disti	ribution Adju	ıstment Mu	ltiplier <sup>(1)</sup>					
		Children'	s Medical 0			s Medical 20			's Dental 0°		Children'	s Dental 206	5%-260%	Prenatal	Prenatal
		Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%
	Weighted Claims-Based Rate	\$397.04	\$122.31	\$143.98	\$382.70	\$119.61	\$139.71	\$2.82	\$13.87	\$16.85	\$2.79	\$13.52	\$16.43	\$1,147.26	\$1,138.60
FY 2012-13	Weighted Capitation Rate	\$301.26	\$121.14	\$139.64	\$289.34	\$119.37	\$135.86	\$3.21	\$14.03	\$18.11	\$3.18	\$13.65	\$17.67	\$934.69	\$912.11
	Claims as a Percentage of Capitation	131.79%	100.97%	103.11%	132.27%	100.20%	102.83%	87.85%	98.86%	93.04%	87.74%	99.05%	92.98%	122.74%	124.83%
	Weighted Claims-Based Rate	\$301.19	\$121.06	\$139.61	\$289.34	\$119.37	\$135.81	\$3.20	\$14.02	\$18.10	\$3.18	\$13.65	\$17.66	\$934.60	\$912.11
FY 2013-14	Weighted Capitation Rate	\$285.23	\$122.59	\$140.98	\$283.15	\$120.84	\$143.41	\$3.35	\$13.99	\$17.78	\$3.35	\$13.65	\$17.67	\$980.64	\$0.00
	Claims as a Percentage of Capitation	105.60%	98.75%	99.03%	102.19%	98.78%	94.70%	95.52%	100.21%	101.80%	94.93%	100.00%	99.94%	95.31%	0.00%
	Weighted Claims-Based Rate	\$285.21	\$122.68	\$141.23	\$283.04	\$120.84	\$143.41	\$3.17	\$13.29	\$16.82	\$3.17	\$12.97	\$16.79	\$981.83	\$970.08
FY 2014-15	Weighted Capitation Rate	\$282.53	\$123.65	\$145.21	\$281.79	\$121.48	\$150.23	\$4.73	\$15.60	\$20.89	\$4.69	\$15.13	\$20.47	\$980.16	\$970.08
	Claims as a Percentage of Capitation	100.95%	99.22%	97.26%	100.44%	99.47%	95.46%	67.02%	85.19%	80.52%	67.59%	85.72%	82.02%	100.17%	100.00%
	Weighted Claims-Based Rate	\$282.07	\$123.55	\$145.47	\$281.56	\$121.50	\$150.23	\$4.51	\$14.81	\$19.84	\$4.48	\$14.37	\$19.45	\$978.40	\$969.91
FY 2015-16	Weighted Capitation Rate	\$240.75	\$117.42	\$140.20	\$238.13	\$114.60	\$137.03	\$5.51	\$16.25	\$21.74	\$5.33	\$15.84	\$21.32	\$980.47	\$970.08
	Claims as a Percentage of Capitation	117.16%	105.22%	103.76%	118.24%	106.02%	109.63%	81.85%	91.14%	91.26%	84.05%	90.72%	91.23%	99.79%	99.98%
	Weighted Claims-Based Rate	\$240.47	\$117.20	\$139.96	\$238.13	\$114.60	\$137.03	\$5.22	\$15.41	\$20.62	\$5.06	\$15.05	\$20.25	\$976.98	\$969.78
FY 2016-17	Weighted Capitation Rate	\$217.29	\$123.69	\$161.17	\$220.03	\$123.45	\$161.86	\$4.35	\$18.71	\$22.65	\$2.97	\$17.07	\$21.95	\$980.55	\$970.08
	Claims as a Percentage of Capitation	110.67%	94.75%	86.84%	108.23%	92.83%	84.66%	120.00%	82.36%	91.04%	170.37%	88.17%	92.26%	99.64%	99.97%
	Weighted Claims-Based Rate	\$218.29	\$123.45	\$158.78	\$223.74	\$123.08	\$159.22	\$3.97	\$16.91	\$20.96	\$3.85	\$16.53	\$20.58	\$976.62	\$969.88
FY 2017-18	Weighted Capitation Rate	\$229.37	\$128.71	\$157.12	\$229.40	\$129.67	\$158.34	\$4.22	\$17.66	\$21.74	\$4.08	\$17.23	\$21.39	\$981.27	\$970.08
	Claims as a Percentage of Capitation	95.17%	95.91%	101.06%	97.53%	94.92%	100.56%	94.08%	95.75%	96.41%	94.36%	95.94%	96.21%	99.53%	99.98%
	Weighted Claims-Based Rate	\$231.75	\$133.23	\$163.51	\$231.06	\$133.19	\$162.57	\$4.01	\$16.55	\$20.54	\$3.88	\$16.16	\$20.16	\$979.20	\$970.54
FY 2018-19	Weighted Capitation Rate	\$242.14	\$128.16	\$159.95	\$244.10	\$128.69	\$160.90	\$4.25	\$16.65	\$20.73	\$4.11	\$16.24	\$20.32	\$980.61	\$970.08
	Claims as a Percentage of Capitation	95.71%	103.96%	102.23%	94.66%	103.50%	101.04%	94.35%	99.40%	99.08%	94.40%	99.51%	99.21%	99.86%	100.05%
	Weighted Claims-Based Rate	\$255.32	\$138.08	\$170.58	\$256.97	\$138.33	\$171.19	\$4.90	\$17.11	\$21.25	\$3.90	\$16.55	\$20.55	\$980.75	\$970.94
FY 2019-20	Weighted Capitation Rate	\$256.37	\$136.52	\$172.56	\$257.07	\$136.72	\$173.34	\$5.22	\$18.44	\$22.67	\$4.08	\$17.80	\$21.85	\$980.86	\$970.08
	Claims as a Percentage of Capitation	99.59%	101.14%	98.85%	99.96%	101.18%	98.76%	93.87%	92.79%	93.74%	95.59%	92.98%	94.05%	99.99%	100.09%
	Weighted Claims-Based Rate	\$255.32	\$138.08	\$170.58	\$256.97	\$138.33	\$171.19	\$4.91	\$17.13	\$21.28	\$3.90	\$16.55	\$20.55	\$980.72	\$971.04
FY 2020-21	Weighted Capitation Rate	\$249.93	\$147.24	\$171.47	\$251.78	\$147.25	\$171.90	\$5.77	\$18.24	\$21.51	\$4.90	\$18.01	\$21.12	\$980.81	\$970.08
	Claims as a Percentage of Capitation	102.16%	93.78%	99.48%	102.06%	93.94%	99.59%	85.10%	93.91%	98.93%	79.59%	91.89%	97.30%	99.99%	100.10%
Average	Claims as a Percentage of Capitation (2)	99.59%	101.14%	98.85%	99.96%	101.18%	98.76%	95.59%	99.40%	99.08%	94.40%	99.51%	99.21%	99.86%	100.05%
	ims Distribution Adjustment Multiplier		1.14%	-1.15%	-0.04%	1.18%	-1.24%	-4.41%	-0.60%	-0.92%	-5.60%	-0.49%	-0.79%	-0.14%	0.05%
	bution adjustment captures the difference in the					111070	-1-170	.,,,		****		*****	*******		
	Children Medical	1		<u> </u>		n Medical 206%	TO 260% - A	ge 0-1, FY 2018	-19; Ages 2-18	, FY 2018-19					
(2) Percentage selected to modify capitation rates	Children Dental	Children Dental	to 205% - FY	2018-19; Child	lren Dental 200	5%-260% - FY	2018-19								
Capitation rates	Prenatal	Prenatal to 2059	atal to 205% - FY 2018-19; Prenatal 206%-260% - FY 2018-19												

	Exhibit C9 - Children's Basic Health Plan Capitation Rate Trends and Forecasts													
					Capit	tation Rate	Trends							
	Children	's Medical 0	%-205%	Children's	Medical 20	6%-260%	Children	ı's Dental 0%	<b>%-205%</b>	Children'	s Dental 206	<b>%-260%</b>	Prenatal	Prenatal
	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%
FY 2012-13 Actuals	\$301.26	\$121.14	\$139.64	\$289.34	\$119.37	\$135.86	\$3.21	\$14.03	\$18.11	\$3.18	\$13.65	\$17.67	\$934.69	\$912.11
FY 2013-14 Actuals	\$285.23	\$122.59	\$140.98	\$283.15	\$120.84	\$143.41	\$3.35	\$13.99	\$17.78	\$3.35	\$13.65	\$17.67	\$980.64	\$970.08
% Change	-5.32%	1.20%	0.96%	-2.14%	1.23%	5.56%	4.36%	-0.29%	-1.82%	5.35%	0.00%	0.00%	4.92%	6.36%
FY 2014-15 Actuals	\$282.53	\$123.65	\$145.21	\$281.79	\$121.48	\$150.23	\$4.73	\$15.60	\$20.89	\$4.69	\$15.13	\$20.47	\$980.16	\$970.08
% Change	-0.95%	0.86%	3.00%	-0.48%	0.53%	4.76%	41.19%	11.51%	17.49%	40.00%	10.84%	15.85%	-0.05%	0.00%
FY 2015-16 Actuals	\$240.75	\$117.42	\$140.20	\$238.13	\$114.60	\$137.03	\$5.51	\$16.25	\$21.74	\$5.33	\$15.84	\$21.32	\$980.47	\$970.08
% Change	-14.79%	-5.04%	-3.45%	-15.49%	-5.66%	-8.79%	16.49%	4.17%	4.07%	13.65%	4.69%	4.15%	0.03%	0.00%
FY 2016-17 Actuals	\$217.29	\$123.69	\$161.17	\$220.03	\$123.45	\$161.86	\$4.35	\$18.71	\$22.65	\$2.97	\$17.07	\$21.95	\$980.55	\$970.08
% Change	-9.74%	5.34%	14.96%	-7.60%	7.72%	18.12%	-21.05%	15.14%	4.19%	-44.28%	7.77%	2.95%	0.01%	0.00%
FY 2017-18 Actuals	\$229.37	\$128.71	\$157.12	\$229.40	\$129.67	\$158.34	\$4.22	\$17.66	\$21.74	\$4.08	\$17.23	\$21.39	\$981.27	\$970.08
% Change	5.56%	4.06%	-2.51%	4.26%	5.04%	-2.17%	-2.99%	-5.61%	-4.02%	37.37%	0.94%	-2.55%	0.07%	0.00%
FY 2018-19 Actuals	\$242.14	\$128.16	\$159.95	\$244.10	\$128.69	\$160.90	\$4.25	\$16.65	\$20.73	\$4.11	\$16.24	\$20.32	\$980.61	\$970.08
% Change	5.57%	-0.43%	1.80%	6.41%	-0.76%	1.62%	0.71%	-5.72%	-4.65%	0.74%	-5.75%	-5.00%	-0.07%	0.00%
FY 2019-20 Actuals	\$256.37	\$136.52	\$172.56	\$257.07	\$136.72	\$173.34	\$5.22	\$18.44	\$22.67	\$4.08	\$17.80	\$21.85	\$980.86	\$970.08
% Change	11.77%	6.07%	9.83%	12.06%	5.44%	9.47%	23.70%	4.42%	4.28%	0.00%	3.31%	2.15%	-0.04%	0.00%
FY 2020-21 Estimated Rate	\$249.93	\$147.24	\$171.47	\$251.78	\$147.25	\$171.90	\$5.77	\$18.24	\$21.51	\$4.90	\$18.01	\$21.12	\$980.81	\$970.08
% Change	-2.51%	7.85%	-0.63%	-2.06%	7.70%	-0.83%	10.54%	-1.08%	-5.12%	20.10%	1.18%	-3.34%	-0.01%	0.00%
FY 2021-22 Estimated Rate	\$262.28	\$156.06	\$179.94	\$263.75	\$156.18	\$180.07	\$6.01	\$18.74	\$22.30	\$5.10	\$18.50	\$21.90	\$980.81	\$970.08
% Change	4.94%	5.99%	4.94%	4.75%	6.06%	4.75%	4.16%	2.74%	3.67%	4.08%	2.72%	3.69%	0.00%	0.00%
FY 2022-23 Estimated Rate	\$267.53	\$165.21	\$188.53	\$269.77	\$166.16	\$180.82	\$6.26	\$19.25	\$22.90	\$5.31	\$19.01	\$22.49	\$980.81	\$970.08
% Change	2.00%	5.86%	4.77%	2.28%	6.39%	0.42%	4.16%	2.72%	2.69%	4.12%	2.76%	2.69%	0.00%	0.00%

	Exhibit C9 - Children's Basic Health Plan Capitation Rate Trends and Forecasts													
	Weighted Capitation Rate Trends													
	Children's Medical 0%-205%	Children's Medical 206%-260%	Children's Dental 0%-205%	Children's Dental 206%-260%	Prenatal 0%-205%	Prenatal 206%-260%								
FY 2012-13 Actuals	\$150.62	\$151.70	\$16.12	\$15.40	\$1,147.48	\$1,138.60								
FY 2013-14 Actuals	\$154.24	\$155.80	\$18.30	\$17.90	\$934.90	\$912.11								
% Change	2.40%	2.70%	13.52%	16.23%	-18.53%	-19.89%								
FY 2014-15 Actuals	\$142.10	\$138.84	\$19.28	\$18.94	\$981.44	\$970.08								
% Change	-7.87%	-10.89%	5.36%	5.81%	4.98%	6.36%								
FY 2015-16 Actuals	\$157.01	\$158.09	\$20.45	\$19.34	\$980.15	\$970.08								
% Change	10.49%	13.86%	6.07%	2.11%	-0.13%	0.00%								
FY 2016-17 Actuals	\$156.23	\$158.53	\$19.43	\$18.94	\$980.46	\$970.08								
% Change	-0.50%	0.28%	-4.99%	-2.07%	0.03%	0.00%								
FY 2017-18 Actuals	\$158.73	\$160.62	\$18.64	\$18.11	\$980.57	\$970.08								
% Change	1.60%	1.32%	-4.07%	-4.38%	0.01%	0.00%								
FY 2018-19 Actuals	\$169.91	\$171.20	\$20.62	\$19.73	\$980.79	\$970.08								
% Change	7.04%	6.59%	10.62%	8.95%	0.02%	0.00%								
FY 2019-20 Actuals	\$170.82	\$171.97	\$19.82	\$19.37	\$980.68	\$970.08								
% Change	0.54%	0.45%	-3.88%	-1.82%	-0.01%	0.00%								
FY 2020-21 Estimated Rate	\$170.66	\$171.60	\$19.93	\$19.53	\$980.81	\$970.08								
% Change	-0.09%	-0.22%	0.55%	0.83%	0.01%	0.00%								
FY 2021-22 Estimated Rate	\$179.43	\$180.15	\$20.63	\$20.22	\$980.81	\$970.08								
% Change	5.14%	4.98%	3.51%	3.53%	0.00%	0.00%								
FY 2022-23 Estimated Rate	\$187.96	\$183.09	\$21.19	\$20.77	\$980.81	\$970.08								
% Change	4.75%	1.63%	2.71%	2.72%	0.00%	0.00%								

	Exhibit C10 - Forecast Model Comparisons - Final Forecasts													
			A	Adjustment	Factors f	or Forecas	ted Rates							
Item	Children'	s Medical 0	%-205%	Children's	Medical 20	6%-260%	Children	's Dental 0	%-205%	Children'	s Dental 200	5%-260%	Prenatal	Prenatal
nem	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%
FY 2020-21 Estimated Rate	\$249.93	\$147.24	\$171.47	\$251.78	\$147.25	\$171.90	\$5.77	\$18.24	\$21.51	\$4.90	\$18.01	\$21.12	\$980.81	\$970.08
Retroactivity Adjustment Multiplier (Exhibit C8)	1.31%	1.58%	2.29%	1.31%	1.58%	2.29%	1.26%	-3.19%	-3.00%	1.26%	-3.19%	-3.00%	-6.39%	-6.39%
Claims Distribution Adjustment Multiplier (Exhibit C8)	-0.41%	1.14%	-1.15%	-0.04%	1.18%	-1.24%	-4.41%	-0.60%	-0.92%	-5.60%	-0.49%	-0.79%	-0.14%	0.05%
Final Adjustment Factor	0.89%	2.74%	1.11%	1.27%	2.78%	1.02%	-3.21%	-3.77%	-3.89%	-4.41%	-3.66%	-3.77%	-6.52%	-6.34%
FY 2020-21 Final Estimated Rate	\$252.15	\$151.27	\$173.37	\$254.98	\$151.34	\$173.65	\$5.58	\$17.55	\$20.67	\$4.68	\$17.35	\$20.32	\$916.86	\$908.58
Item	Children'	s Medical 0	%-205%	Children's	Medical 20	6%-260%	Children	's Dental 0	%-205%	Children'	s Dental 200	6%-260%	Prenatal	Prenatal
nem	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%
FY 2021-22 Estimated Rate	\$262.28	\$156.06	\$179.94	\$263.75	\$156.18	\$180.07	\$6.01	\$18.74	\$22.30	\$5.10	\$18.50	\$21.90	\$980.81	\$970.08
Retroactivity Adjustment Multiplier (Exhibit C8)	1.31%	1.58%	2.29%	1.31%	1.58%	2.29%	1.26%	-3.19%	-3.00%	1.26%	-3.19%	-3.00%	-6.39%	-6.39%
Claims Distribution Adjustment Multiplier (Exhibit C8)	-0.41%	1.14%	-1.15%	-0.04%	1.18%	-1.24%	-4.41%	-0.60%	-0.92%	-5.60%	-0.49%	-0.79%	-0.14%	0.05%
Final Adjustment Factor	0.89%	2.74%	1.11%	1.27%	2.78%	1.02%	-3.21%	-3.77%	-3.89%	-4.41%	-3.66%	-3.77%	-6.52%	-6.34%
FY 2021-22 Final Estimated Rate	\$264.61	\$160.34	\$181.94	\$267.10	\$160.52	\$181.91	\$5.82	\$18.03	\$21.43	\$4.88	\$17.82	\$21.07	\$916.86	\$908.58
Item	Children'	s Medical 0	%-205%	Children's	Medical 20	6%-260%	Children	's Dental 0	%-205%	Children'	s Dental 200	5%-260%	Prenatal	Prenatal
item	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%
FY 2022-23 Estimated Rate	\$267.53	\$165.21	\$188.53	\$269.77	\$166.16	\$180.82	\$6.26	\$19.25	\$22.90	\$5.31	\$19.01	\$22.49	\$980.81	\$970.08
Retroactivity Adjustment Multiplier (Exhibit C8)	1.31%	1.58%	2.29%	1.31%	1.58%	2.29%	1.26%	-3.19%	-3.00%	1.26%	-3.19%	-3.00%	-6.39%	-6.39%
Claims Distribution Adjustment Multiplier (Exhibit C8)	-0.41%	1.14%	-1.15%	-0.04%	1.18%	-1.24%	-4.41%	-0.60%	-0.92%	-5.60%	-0.49%	-0.79%	-0.14%	0.05%
Final Adjustment Factor	0.89%	2.74%	1.11%	1.27%	2.78%	1.02%	-3.21%	-3.77%	-3.89%	-4.41%	-3.66%	-3.77%	-6.52%	-6.34%
FY 2022-23 Final Estimated Rate	\$269.91	\$169.74	\$190.62	\$273.20	\$170.78	\$182.66	\$6.06	\$18.52	\$22.01	\$5.08	\$18.31	\$21.64	\$916.86	\$908.58

		Exhib	oit C10 - F	orecast Mo	del Comp	arisons - C	apitation	Trend Mo	dels					
			Cap	itation Rat	te Forecast	Model for	· FY 2017-	18						
Model	Children	's Medical 0	%-205%	Children's	Medical 20	6%-260%	Children	ı's Dental 0	%-205%	Children'	s Dental 200	5%-260%	Prenatal	Prenatal
	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	Ages 0-1	Ages 2-5	Ages 6-18	0%-205%	206%-260%
FY 2018-19 Full Year Average Rate	\$242.14	\$128.16	\$159.95	\$244.10	\$128.69	\$160.90	\$4.25	\$16.65	\$20.73	\$4.11	\$16.24	\$20.32	\$980.61	\$970.08
FY 2019-20 Full Year Average Rate	\$256.37	\$136.52	\$172.56	\$257.07	\$136.72	\$173.34	\$5.22	\$18.44	\$22.67	\$4.08	\$17.80	\$21.85	\$980.86	\$970.08
FY 2020-21 Estimated Average Rate	\$249.93	\$147.24	\$171.47	\$251.78	\$147.25	\$171.90	\$5.77	\$18.24	\$21.51	\$4.90	\$18.01	\$21.12	\$980.81	\$970.08
Recent Growth Rates														
% Growth from FY 2018-19 to FY 2019-20 Rate	5.88%	6.52%	7.88%	5.31%	6.24%	7.73%	22.82%	10.75%	9.36%	-0.73%	9.61%	7.53%	0.03%	0.00%
% Growth from FY 2019-20 to FY 2020-21 Rate	-2.51%	7.85%	-0.63%	-2.06%	7.70%	-0.83%	10.54%	-1.08%		20.10%	1.18%	-3.34%	-0.01%	0.00%
Selected Trend Models														
Average Growth Model	\$262.28	\$156.06	\$175.29	\$263.75	\$156.18	\$177.08	\$5.76	\$17.53	\$22.30	\$4.86	\$18.12	\$21.58	\$980.95	\$970.08
% Difference from FY 2020-21 Rate	4.94%	5.99%	2.23%	4.75%	6.06%	3.01%	-0.17%	-3.89%	-	-0.82%	0.61%	-	0.01%	0.00%
% Difference from FY 2021-22 Rate	2.00%	5.86%	4.77%	2.28%	6.39%	5.35%	4.17%	2.74%		6.38%	2.98%	0.37%	0.01%	0.00%
Two Period Moving Average Model	\$253.15	\$141.88	\$172.02	\$254.43	\$141.99	\$172.62	\$5.50	\$18.34	\$22.09	\$4.49	\$17.91	\$21.49	\$980.84	\$970.08
% Difference from FY 2020-21 Rate	1.29%	-3.64%	0.32%	1.05%	-3.58%	0.42%	-4.77%	0.55%		-8.37%	-0.58%		0.00%	0.00%
% Difference from FY 2021-22 Rate	-3.13%	-3.04%	-2.89%	-3.28%	-2.89%	-2.76%	-7.73%	-1.24%		-3.04%	-1.26%		0.00%	0.00%
Exponential Growth Model	\$214.13	\$151.76												
% Difference from FY 2020-21 Rate	-14.32%	3.07%												
% Difference from FY 2021-22 Rate	-3.87%	2.14%	2.30%	-5.67%	2.64%	2.68%	0.42%	3.91%		-1.97%	3.63%	4.09%	0.78%	0.78%
Linear Growth Model	\$233.27	\$159.94	\$184.74	\$205.85	\$160.50	\$186.20	\$3.22	\$19.56	\$24.03	\$5.92	\$18.96	\$23.31	\$987.40	\$976.60
% Difference from FY 2020-21 Rate	-6.67%	8.63%	7.74%	-18.24%	9.00%	8.32%	-44.28%	7.25%	-	20.85%	5.28%	10.37%	0.67%	0.67%
% Difference from FY 2021-22 Rate	-5.37%	1.82%	1.84%	-9.50%	2.21%	2.10%	-23.52%	2.63%		4.20%	2.41%	3.13%	-0.01%	-0.01%
70 Bird Boil 1 2021 22 Raid	-3.5770	1.0270	1.04/0	-7.5070	2.2170	2.1070	-23.3270	2.0370	3.2370	4.2070	2.71/0	3.1370	-0.0170	-0.0170
% change from FY 2017-18 Rate to Selected FY 2018-19														
S	4.94%	5.99%	4.94%	4.75%	6.06%	4.75%	4.17%	2.74%	3.67%	4.17%	2.74%	3.67%	0.00%	0.00%
Capitation Rate (1) FY 2020-21 Forecast Point Estimate	02/2.20	0176.06	0150.04	02/2.75	015(10	0100.05	06.01	610.54	#22.20	05.10	010.50	021.00	¢000 01	#0 <b>=</b> 0.00
	\$262.28	\$156.06	\$179.94	\$263.75	\$156.18	\$180.07	\$6.01	\$18.74	\$22.30	\$5.10	\$18.50	\$21.90	\$980.81	\$970.08
% change from FY 2018-19 Rate to Selected FY 2019-20 Capitation Rate (1)	2.00%	5.86%	4.77%	2.28%	6.39%	0.42%	4.17%	2.74%	2.70%	4.17%	2.74%	2.70%	0.00%	0.00%
FY 2021-22 Forecast Point Estimate	\$267.53	\$165.21	\$188.53	\$269.77	\$166.16	\$180.82	\$6.26	\$19.25	\$22.90	\$5.31	\$19.01	\$22.49	\$980.81	\$970.08
(1) Selected trends are described below.														
	FY 2020-21			Growth Model		) to FY 2020-2	1: Ages 2-5 - Li	inear Growth N	Model					
Children Medical	FY 2021-22	Children 206%-260%: Ages 0-1 - Growth From FY 2019-20 to FY 2020-21; Ages 2-5 - Linear Growth Model Children 0%-205%: Average Growth Model												
		Children 206%-260%: Ages 0-1 - Growth From FY 2020-21 to FY 2021-22; Ages 2-5 - Linear Growth Model Children 0%-205%: Ages 0-1 - Two Period Moving Average Model; Ages 2-5 - Average Growth Model; Ages 6-18 - Two Period Moving Average Model												
Children Dental	FY 2020-21			- Two Period N 0-1 - Two Perio										
Cindici Dellai	FY 2021-22			- Two Period N 0-1 - Two Perio										
	EV 2020 21	Prenatal 0%-20	05%: No Grow	th				,	. ,					
Prenatal	FY 2020-21		-260%: No Gro											
	FY 2021-22	Prenatal 0%-20 Prenatal 206%												
	Prenatal 206%-260%: No Growth													

FY 2021-22 Funding Request

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-4 Request Detail: Medicare Modernization Act**

Summary of Funding Change for FY 2021-22												
	Tot	als	Increment	al Change								
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23								
	Appropriation	Base	Request	Request								
Total Funds	\$168,297,340	\$168,297,340	\$21,592,081	\$32,362,737								
FTE	0.0	0.0	0.0	0.0								
General Fund	\$168,297,340	\$168,297,340	\$21,592,081	\$32,362,737								
Cash Funds	\$0	\$0	\$0	\$0								
Reappropriated Funds	\$0	\$0	\$0	\$0								
Federal Funds	\$0	\$0	\$0	\$0								

# Summary of Request:

The Department requests a reduction of \$14,430,417 General Fund for FY 2020-21; an increase of \$21,592,081 General Fund for FY 2021-22; and an increase of \$32,632,737 General Fund for FY 2022-23 to true up funding related to the State's share of the costs of the Medicare Part D outpatient prescription drug benefit for dual-eligible clients. This request does not require any additional FTE.

# Current Program:

On January 1, 2006, the federal Centers for Medicare and Medicaid Services (CMS) assumed responsibility for the Medicare Part D prescription-drug benefit that replaced the Medicaid prescription-drug coverage for dual-eligible clients, who are individuals eligible for both Medicare and Medicaid. States are required to make mandatory state payments to the federal government, known as the "clawback" payment, to help finance the Medicaid Part D benefit for the dual-eligible population for the states' share of the costs of outpatient prescription drugs. The amount of each state's clawback payment roughly reflects the expenditures of its own funds that the state would make if it continued to pay for outpatient prescription drugs through Medicaid on behalf of dual-eligible clients. These clawback payments, if left unpaid, are subject to automatic deduction – plus interest – from the federal funds the State receives for the Medicaid program.

# Problem or Opportunity:

Current projections indicate that an incremental funding decrease to the appropriation for FY 2020-21 is appropriate. The Departments anticipates that the appropriation for Medicare Modernization Act in FY 2021-22 and FY 2022-23 are not sufficient to make payments for the required clawback payments in those years.

## **Proposed Solution:**

The Department requests a reduction of \$14,430,417 General Fund for FY 2020-21; an increase of \$21,592,081 General Fund for FY 2021-22; and an increase of \$32,362,737 General Fund for FY 2022-23 for funding adjustment to the Medicare Modernization Act State Contribution Payment line item to cover the State's share of the costs of the Medicare Part D outpatient prescription drug benefit for dual-eligible clients. The Medicare Modernization Act State Contribution Payment line item is entirely General Fund, as it is a reimbursement to the federal government and is not eligible to receive a federal match.

### Anticipated Outcomes:

One of the Department's top priorities in its Performance Plan is cost control within the Medicaid program. The approval of this request would be a direct implementation of this goal by allowing the Department to meet its obligation to the federal government and ensuring that no amount of federal funds owed to the State for Medicaid would be subject to deduction plus interest.

### Assumptions and Calculations:

Detailed calculations for the request are included in the attached appendix.

A summary of the funding request for the Medicare Modernization Act State Contribution Payment line item by fund type is provided for FY 2020-21, FY 2021-22, and FY 2022-23 in tables 1.1, 1.2, and 1.3, respectively.

The State's clawback payment is calculated according to three factors:

- 1. The projected number of Medicare and Medicaid dual-eligible clients enrolled in a Part D plan;
- 2. A per member per month (PMPM) estimate of the amount the State otherwise would have spent on Medicaid prescription drugs for dual-eligible clients; and
- 3. A "phasedown" percentage of the State's obligation for the PMPM rate was set forth by the MMA starting at 90% in 2006 and declined by 1.67% each year thereafter until 2015 when it reached 75%, where it will remain ongoing.

The Department's current estimates of the clawback payment are \$153,866,923 for FY 2020-21; \$189,889,421 for FY 2021-22; and \$200,660,077 for FY 2022-23, based on the Department's most recent caseload projections and actual and projected per member per month (PMPM) rates paid by the State as required by federal regulations.

The total caseload and expenditure estimates for FY 2020-21, FY 2021-22, and FY 2022-23 are calculated in tables 2.1a, 2.1b, 2.1c, and 2.1d; 2.2a, 2.2b, and 2.2c; and 2.3a, 2.3b, and 2.3c, respectively. The Department assumes the dual-eligible caseload will follow a 1.31% annual growth trend, consistent with growth over three years from August 2017 through July 2020. This method estimates caseload by increasing the total caseload incurred each month by 0.14% to forecast the total caseload for the following month. Rows A through L on tables 2.1a, 2.2a and 2.3a of the appendix show the actual and projected caseload for a given month by the calendar year for which the caseload is attributed. Due to a two-month delay between when the Department receives an invoice from CMS and when the invoice is paid, the amount paid in the state fiscal year includes invoices received between May and April. Retroactivity is also considered in this forecast because clients can be retroactively enrolled and disenrolled for up to 36 months. Tables 2.1b, 2.1c, 2.2b, 2.2c, 2.3b, and 2.3c provide calculations of caseload and expenditures for dualeligible clients by the various PMPM rates for the calendar year resulting from changes in the Federal Medical Assistance Percentage (FMAP). The PMPM rates are also adjusted based on changes in the FMAP rate which occur on a federal fiscal year (October 1 through September 30 timespan) as follows:

• FFY 2016: 50.72%

• FFY 2017: 50.02%

• FFY 2018: 50.00%

• FFY 2019: 50.00%

• FFY 2020: 50.00%

In July 2020, CMS notified the Department that the temporary increase to the federal medical assistance percentage (FMAP) provided by the Families First Coronavirus Act (P. L. 116-127)

would also apply to the State's share of the costs of the Medicare Part D outpatient prescription drug benefit for dual-eligible clients. The increase was effective retroactive to January 1, 2020. The Department assumes that the temporary increase to the FMAP will be effective through March 31<sup>st</sup>, 2021. A billing adjustment of (\$6,701,559.80) for CY 2020 caseload that was paid in FY 2019-20 was processed to reflect the retroactive rate change and appeared on a subsequent invoice received by the Department in FY 2020-21. Table 2.1d shows the estimated breakdown of the retroactive credit received through the temporary increase to the FMAP for the CY 2020 PMPM rate.

The changes in the PMPM rate are based on a prescribed methodology established by CMS. Table 3.1 shows the actual CY 2020 PMPM for January through December 2020 at an enhanced FMAP. The estimated PMPM rates for CY 2021, CY 2022, and CY 2023 are calculated in tables 3.2, 3.3, and 3.4, respectively. The CY 2021 change in percentage of growth in table 3.2 row G is calculated by dividing the projected 2020 National Health Expenditure (NHE) percentage growth rate of per capita prescription drug expenditure between years 2003 and 2006 in row F by the 2019 NHE percentage of growth in row C, minus 1. For CY 2022 and CY 2023, the Department uses the average of the last seven years of the annual percentage increase (API) in average per capita Part D expenditures from CY 2012 to CY 2020 to project the percentage change in the rate (found in row J of tables 3.2 and 3.3). The final percentage change in the PMPM rate is calculated in row K of tables 3.3 and 3.4.

Table 4.1 provides actual caseload history from FY 2006-07 through FY 2019-20 and caseload projections based on current trends for FY 2020-21 through FY 2022-23. Table 4.2 provides actual and projected aggregate monthly caseload history by number of member months and average monthly caseload. Table 4.3 shows the PMPM rate history from CY 2014 to CY 2020 and projected PMPM rates for CY 2021 to CY 2023. Table 4.4 shows the actual PMPM rates for CY 2021 to CY 2020 and projected PMPM rates for CY 2021 to CY 2023.

## Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The supplemental request is necessary as a result of changes in dual-eligible caseload, which impacts the amount paid in the clawback payment.

#### R-4 Medicare Modernization Act State Contribution Payment Appendix A: Calculations and Assumptions

	Tal FY 2020-21 Summary of I LBG (6) Other Medical Services, Medicare Mode		0 1	n Payment Line Item								
Row	v Item Total Funds General Fund Source											
A	A FY 2020-21 Spending Authority \$168,297,340 \$168,297,340 Long Bill Appropriation (HB20-1360)											
В	B Projected FY 2020-21 Expenditures \$153,866,923 \$153,866,923 Table 2.1a Row O + Table 2.1c Row Q											
C	C FY 2020-21 Estimated Change from Appropriation (\$14,430,417) (\$14,430,417) Row B - Row A											

Table 1.2 FY 2021-22 Summary of Incremental Funding Request LBG (6) Other Medical Services, Medicare Modernization Act State Contribution Payment Line Item							
Row	Item	Total Funds	General Fund	Source			
A	FY 2021-22 Spending Authority	\$168,297,340	\$168,297,340	Long Bill Appropriation (HB20-1360)			
В	Projected FY 2021-22 Expenditures	\$189,889,421	\$189,889,421	Table 2.2a Row O			
С	FY 2021-22 Estimated Change from Appropriation	\$21,592,081	\$21,592,081	Row B - Row A			

Table 1.3 FY 2022-23 Summary of Incremental Funding Request LBG (6) Other Medical Services, Medicare Modernization Act State Contribution Payment Line Item							
Row	Item	Total Funds	General Fund	Source			
A	FY 2022-23 Spending Authority	\$168,297,340	\$168,297,340	Long Bill Appropriation (HB20-1360)			
В	Projected FY 2022-23 Expenditures	\$200,660,077	\$200,660,077	Table 2.3a Row O			
С	FY 2022-23 Estimated Change from Appropriation	\$32,362,737	\$32,362,737	Row B - Row A			

	Table 2.1a FY 2020-21 Projected Caseload and Expenditures							
Row	Month	CY 2018	CY 2019	CY 2020	CY 2021	FY 2020-21 TOTAL		
A	May 2020	(65)	418	82,167	0	82,520		
В	June 2020	(118)	249	83,353	0	83,484		
С	July 2020	140	416	82,505	0	83,061		
D	August 2020	46	477	86,658	0	87,181		
Е	September 2020	33	402	88,105	0	88,540		
F	October 2020	21	341	89,640	0	90,002		
G	November 2020	9	289	88,500	0	88,798		
Н	December 2020	0	244	87,285	0	87,529		
I	January 2021	0	205	5,235	80,786	86,226		
J	February 2021	0	167	3,096	83,026	86,289		
K	March 2021	0	140	1,990	84,262	86,392		
L	April 2021	0	118	1,328	85,052	86,498		
M	CY Client Total	66	3,466	699,862	333,126	1,036,520		
N	CY PMPM Rate	\$160.92	\$164.04	Varies	Varies			
О	Expenditures	\$10,621	\$568,563	\$105,805,137	\$54,096,850	\$160,481,171		

Table 2.1b Caseload Breakdown for FY 2020-21 with CY 2020 Rates						
Row	Rate Period	Caseload Forecast	Rates	Total	Source	
A	Jan - Sept 2020	435,863	\$151.18	\$65,893,830	Caseload forecast * rate	
В	Oct - Dec 2020	263,999	\$151.18	\$39,911,307	Caseload forecast * rate	
С	CY 2020 Total	699,862		\$105,805,137	Row A + Row B	

Table 2.1c Caseload Breakdown for FY 2020-21 with CY 2021 Rates						
Row	Row Rate Period Caseload Rates Total Source					
A	Jan - Mar 2021	251,995	\$156.98	\$39,558,175	Caseload forecast * rate	
В	Apr - Dec 2021	81,131	\$179.20	\$14,538,675	Caseload forecast * rate	
C	CY 2021 Total	333,126		\$54,096,850	Row A + Row B	

			Table 2.1d					
	Enhanced FMAP Credit for CY 2020 Caseload Paid in FY 2019-20							
Row	Month	CY 2017	CY 2018	CY 2019	CY 2020	FY 2020-21 TOTAL		
A	May 2019	189	961	76,537	0	77,687		
В	June 2019	582	3,879	83,857	0	88,318		
C	July 2019	104	523	78,624	0	79,251		
D	August 2019	217	712	83,595	0	84,524		
E	September 2019	82	153	77,793	0	78,028		
F	October 2019	82	153	77,243	0	77,478		
G	November 2019	82	153	76,692	0	76,927		
Н	December 2019	82	153	75,035	0	75,270		
I	January 2020	(20)	509	6,867	74,757	82,113		
J	February 2020	8	81	1,952	76,015	78,056		
K	March 2020	189	526	2,636	78,296	81,647		
L	April 2020	(107)	(116)	693	80,009	80,479		
M	CY Client Total	1,490	7,687	641,524	309,077	959,778		
N	Previous CY PMPM Rate	Varies	\$160.92	\$164.04	\$172.58			
О	Enhanced CY PMPM Rate	Varies	\$160.92	\$164.04	\$151.18			
P	Difference in CY PMPM Rate	\$0.00	\$0.00	\$0.00	(\$21.40)	_		
Q	Retroactive Expenditures	\$0	\$0	\$0	(\$6,614,248)	(\$6,614,248)		

	Table 2.2a FY 2021-22 Projected Caseload and Expenditures							
Row	Month	CY 2019	CY 2020	CY 2021	CY 2022	FY 2021-22 TOTAL		
A	May 2021	99	956	85,564	0	86,619		
В	June 2021	79	756	85,904	0	86,739		
С	July 2021	65	620	86,176	0	86,861		
D	August 2021	48	517	86,421	0	86,986		
E	September 2021	33	435	86,640	0	87,108		
F	October 2021	22	366	86,840	0	87,228		
G	November 2021	9	309	87,033	0	87,351		
Н	December 2021	0	265	87,214	0	87,479		
I	January 2022	0	218	5,207	82,176	87,601		
J	February 2022	0	182	3,089	84,455	87,726		
K	March 2022	0	152	1,989	85,712	87,853		
L	April 2022	0	127	1,335	86,515	87,977		
M	CY Client Total	355	4,903	703,412	338,858	1,047,528		
N	CY PMPM Rate	\$164.04	Varies	Varies	\$186.06			
О	Expenditures	\$58,234	\$741,236	\$126,042,032	\$63,047,919	\$189,889,421		

Table 2.2b Caseload Breakdown for FY 2021-22 with CY 2020 Rates						
Row	Rate Period	Caseload Forecast	Rates	Total	Source	
A	Jan - Sept 2020	2,521	\$151.18	\$381,125	Caseload forecast * rate	
В	Oct - Dec 2020	2,382	\$151.18	\$360,111	Caseload forecast * rate	
С	CY 2020 Total	4,903		\$741,236	Row A + Row B	

	Table 2.2c Caseload Breakdown for FY 2021-22 with CY 2021 Rates						
Row	Row Rate Period Caseload Rates Total Source						
A	Jan - Mar 2021	423	\$156.98	\$66,403	Caseload forecast * rate		
В	Apr - Dec 2021	702,989	\$179.20	\$125,975,629	Caseload forecast * rate		
С	CY 2021 Total	703,412		\$126,042,032	Row A + Row B		

	Table 2.3a FY 2022-23 Projected Caseload and Expenditures							
Row	Month	CY 2020	CY 2021	CY 2022	CY 2023	FY 2022-23 TOTAL		
A	May 2022	106	957	87,037	0	88,100		
В	June 2022	88	759	87,381	0	88,228		
С	July 2022	70	623	87,660	0	88,353		
D	August 2022	51	520	87,908	0	88,479		
E	September 2022	38	433	88,127	0	88,598		
F	October 2022	23	374	88,338	0	88,735		
G	November 2022	11	309	88,529	0	88,849		
Н	December 2022	0	271	88,715	0	88,986		
I	January 2023	0	215	5,298	83,590	89,103		
J	February 2023	0	186	3,143	85,908	89,237		
K	March 2023	0	152	2,022	87,186	89,360		
L	April 2023	0	125	1,357	88,005	89,487		
M	CY Client Total	387	4,924	715,515	344,689	1,065,515		
N	CY PMPM Rate	Varies	Varies	\$186.06	\$193.19			
О	Expenditures	\$58,507	\$882,381	\$133,128,721	\$66,590,468	\$200,660,077		

Table 2.3b Caseload Breakdown for FY 2021-22 with CY 2020 Rates						
Row	Rate Period	Caseload Forecast	Rates	Total	Source	
A	Jan - Sept 2020	122	\$151.18	\$18,444	Caseload forecast * rate	
В	Oct - Dec 2020	265	\$151.18	\$40,063	Caseload forecast * rate	
C	CY 2020 Total	387		\$58,507	Row A + Row B	

Table 2.3c Caseload Breakdown for FY 2021-22 with CY 2021 Rates						
Row	Rate Period	Caseload Forecast	Rates	Total	Source	
Α	Jan - Mar 2021	0	\$156.98	\$0	Caseload forecast * rate	
В	Apr - Dec 2021	4,924	\$179.20	\$882,381	Caseload forecast * rate	
С	CY 2021 Total	4,924	_	\$882,381	Row A + Row B	

	Table 3.1 CY 2020 PMPM Rate					
Row	Item		Source			
A	A CY 2020 PMPM Rate (January through December 2020 with Enhanced FMAP)		Centers for Medicare and Medicaid Services (CMS) (1)			
(1) Cer	1) Centers for Medicare and Medicaid Services (CMS), Revised Calendar Year (CY) 2020 Jan - Sep Phased-down State Contribution Final Per-Capita Rates					

Table 3.2 Estimated CY 2021 PMPM Rate Calculation					
Row Item		Source			
2019 NHE Estimates					
A Estimated 2003 Per Capita Rx Drug Expenditures	\$609	Department estimate			
B Estimated 2006 Per Capita Rx Drug Expenditures	\$752	Department estimate			
C Percentage Growth	23.48%	(Row B ÷ Row A) - 1			
Projected 2020 NHE Estimates					
D Estimated 2003 Per Capita Rx Drug Expenditures	\$609	Department estimate			
E Estimated 2006 Per Capita Rx Drug Expenditures	\$752	Department estimate			
F Percentage Growth	23.48%	(Row E ÷ Row D) - 1			
G Change in Percentage Growth	0.00%	$(1 + \text{Row F}) \div (1 + \text{Row C}) - 1$			
Projected Figures from Announcements of CY 2013 through CY 2020 Medicare Advantage Capitation	Rates and Medicare Advantage and Part D Pay	ment Policies			
H Projected Annual percentage trend for July 2020	3.87%	Average Change from CY 2013 to CY 2020			
I Projected Prior Year Revisions of the Annual Percentage Trend	-0.05%	Median Change from CY 2013 to CY 2020			
J Projected Annual Percentage Increase in Average Per Capita Aggregate Part D Expenditures for 20	20 3.83%	$(1 + \text{Row H}) \times (1 + \text{Row I}) - 1$			
K FINAL Percentage Change in Rate Prior to Applying Phasedown for CY 2021	3.83%	Row G + Row H			
L CY 2020 PMPM Rate Prior to FMAP and Phasedown	\$460.24	Prior year actual			
M Projected CY 2021 PMPM Rate Prior to FMAP and Phasedown	\$477.86	$Row L \times (1 + Row K)$			
N Projected CY 2021 FMAP State Share with Enhanced FMAP (January through March 2021)	43.80%	Enhanced FMAP of 56.2% through first quarter of CY 2021			
O Projected CY 2021 FMAP State Share (April through December 2021)	50.00%	Estimated FFY 21 FMAP is 50.00%			
P Ongoing Phasedown Percentage Rate	75.00%	Statutory rate: Sec. 1935. (C) (5) [42 U.S.C. 1396u-5]			
Q Estimated CY 2021 PMPM Rate (January through March 2021 with Enhanced 56.2% FMA	P) \$156.98	Row M x Row N x Row Q			
R Estimated CY 2021 PMPM Rate (April through December 2021 with 50.00% FMAP)	\$179.20	Row M $\times$ Row O x Row Q			

3752 .48% 3609 3752 .48%	Department estimate Department estimate [Row B ÷ Row A) - 1  Department estimate Department estimate [Row E ÷ Row D) - 1 [1 + Row F) ÷ (1 + Row C) - 1
3752 .48% 3609 3752 .48%	Department estimate  (Row B ÷ Row A) - 1  Department estimate Department estimate  (Row E ÷ Row D) - 1
3752 .48% 3609 3752 .48%	Department estimate  (Row B ÷ Row A) - 1  Department estimate Department estimate  (Row E ÷ Row D) - 1
.48% .6609 .752 .48%	(Row B ÷ Row A) - 1
3609 3752 .48%	Department estimate Department estimate (Row E ÷ Row D) - 1
752 .48%	Department estimate (Row E ÷ Row D) - 1
752 .48%	Department estimate (Row E ÷ Row D) - 1
.48%	(Row E ÷ Row D) - 1
.00%	$(1 + Row F) \div (1 + Row C) - 1$
	(1 + KOW 1 ) · (1 + KOW C) - 1
) Pay	ment Policies
.87%	Average Change from CY 2013 to CY 2020
	Median Change from CY 2013 to CY 2020
.83%	$(1 + \text{Row H}) \times (1 + \text{Row I}) - 1$
83%	Row G + Row H
7.86	Table 3.2 Row M
6.17	$Row L \times (1 + Row K)$
.00%	Estimated FFY 22 FMAP is 50.00%
8.08	$Row M \times Row N$
0.00	Statutory rate : Sec. 1935. (C) (5) [42 U.S.C. 1396u-5]
	Row O × Row P
١.	.00% 8.08 .00%

Table 3.4 Estimated CY 2023 PMPM Rate Calculation					
Row Item	Source				
Projected 2021 NHE Estimates					
A Estimated 2003 Per Capita Rx Drug Expenditures	\$609 Department estimate				
B Estimated 2006 Per Capita Rx Drug Expenditures	\$752 Department estimate				
C Percentage Growth	23.48% (Row B ÷ Row A) - 1				
Projected 2022 NHE Estimates					
D Estimated 2003 Per Capita Rx Drug Expenditures	\$609 Department estimate				
E Estimated 2006 Per Capita Rx Drug Expenditures	\$752 Department estimate				
F Percentage Growth	23.48% (Row E ÷ Row D) - 1				
G Change in Percentage Growth	$0.00\% (1 + \text{Row F}) \div (1 + \text{Row C}) - 1$				
Projected Figures from Announcements of CY 2012 through CY 2019 Medicare Advantage Capitation Rates and Medicar	e Advantage and Part D Payment Policies				
H Projected Annual percentage trend for July 2020	3.87% Average Change from CY 2013 to CY 2020				
I Projected Prior Year Revisions of the Annual Percentage Trend	-0.05% Median Change from CY 2013 to CY 2020				
J Projected Annual Percentage Increase in Average Per Capita Aggregate Part D Expenditures for 2020	$3.83\% (1 + \text{Row H}) \times (1 + \text{Row I}) - 1$				
K FINAL Percentage Change in Rate Prior to Applying Phasedown for CY 2023	3.83% Row G + Row H				
L CY 2022 PMPM Rate Prior to FMAP and Phasedown	\$496.17 Table 3.3 Row M				
M Projected CY 2023 PMPM Rate Prior to FMAP and Phasedown	\$515.17 Row L × (1 + Row K)				
N Projected FFY 23 FMAP State Share	50.00% Estimated FFY 23 FMAP is 50.00%				
O Projected CY 2023 PMPM Rate Prior to Phasedown	\$257.59 Row M × Row N				
P Ongoing Phasedown Percentage Rate	75.00% Statutory rate : Sec. 1935. (C) (5) [42 U.S.C. 1396u				
Q Estimated CY 2023 PMPM Rate (January through December 2022 with 50.00% FMAP)	\$193.19   Row O × Row P				

Table 4.1					
Invoice Caseload History					
	Total Member	Average Monthly			
Item	Months Caseload	Caseload			
FY 2006-07	611,212	50,934			
FY 2007-08	642,840	53,570			
% Change from FY 2006-07	5.17%	5.18%			
FY 2008-09	651,968	54,331			
% Change from FY 2007-08	1.42%	1.42%			
FY 2009-10	664,292	55,358			
% Change from FY 2008-09	1.89%	1.89%			
FY 2010-11	697,817	58,151			
% Change from FY 2009-10	5.05%	5.05%			
FY 2011-12	725,075	60,423			
% Change from FY 2010-11	3.91%	3.91%			
FY 2012-13	750,509	62,542			
% Change from FY 2011-12	3.51%	3.51%			
FY 2013-14	812,812	62,542			
% Change from FY 2012-13	8.30%	0.00%			
FY 2014-15	865,253	72,104			
% Change from FY 2013-14	6.45%	15.29%			
FY 2015-16	877,707	73,142			
% Change from FY 2014-15	1.44%	1.44%			
FY 2016-17	882,749	73,562			
% Change from FY 2015-16	0.57%	0.57%			
FY 2017-18	897,632	74,803			
% Change from FY 2016-17	1.69%	1.69%			
FY 2018-19	919,107	76,592			
% Change from FY 2017-18	2.39%	1.69%			
FY 2019-20	959,778	80,004			
% Change from FY 2018-19	4.43%	2.39%			
FY 2020-21 Projection	1,036,520	86,374			
% Change from FY 2019-20	8.00%	7.96%			
FY 2021-22 Projection	1,047,528	87,294			
% Change from FY 2020-21 Projection	1.06%	1.07%			
FY 2022-23 Projection	1,065,515	87,149			
% Change from FY 2021-22 Projection	1.72%	-0.17%			

Table 4.2							
Aggregate Monthly Caseload History							
Item	Total Member	Average Monthly					
item	Months Caseload	Caseload					
FY 2006-07	618,862	51,572					
FY 2007-08	630,715	52,560					
% Change from FY 2006-07	1.92%	1.92%					
FY 2008-09	649,533	54,128					
% Change from FY 2007-08	2.98%	2.98%					
FY 2009-10	665,732	55,478					
% Change from FY 2008-09	2.49%	2.49%					
FY 2010-11	693,267	57,772					
% Change from FY 2009-10	4.14%	4.13%					
FY 2011-12	728,875	60,740					
% Change from FY 2010-11	5.14%	5.14%					
FY 2012-13	757,424	63,119					
% Change from FY 2011-12	3.92%	3.92%					
FY 2013-14	803,259	66,938					
% Change from FY 2012-13	6.05%	6.05%					
FY 2014-15	860,591	71,716					
% Change from FY 2013-14	7.14%	7.14%					
FY 2015-16	864,799	72,067					
% Change from FY 2014-15	0.49%	0.49%					
FY 2016-17	890,604	74,217					
% Change from FY 2015-16	2.98%	2.98%					
FY 2017-18	915,636	76,303					
% Change from FY 2016-17	2.81%	2.81%					
FY 2018-19	931,908	77,659					
% Change from FY 2017-18	1.78%	1.78%					
FY 2019-20	964,574	80,381					
% Change from FY 2018-19	3.51%	3.51%					
FY 2020-21 Projection	1,042,089	86,841					
% Change from FY 2019-20	8.04%	8.04%					
FY 2021-22 Projection	1,047,786	87,315					
% Change from FY 2020-21 Projection	0.55%	0.55%					
FY 2022-23 Projection	1,065,815	88,818					
% Change from FY 2021-22 Projection	1.72%	1.72%					

_	Table 4.3					
Summ	ary of PMPM Rates by Cale	ndar Year (	CY) with I	FMAP Adjustments		
Row	Year	Rate	FMAP	Source		
	CY 2014	•	•			
A	Jan-Sept 2014	\$125.50	50.00%	Actual CMS		
В	Oct-Dec 2014	\$122.97	51.01%	Actual CMS		
	CY 2015	•				
С	Jan-Sept 2015	\$124.68	51.01%	Actual CMS		
D	Oct-Dec 2015	\$125.42	50.72%	Actual CMS		
	CY 2016	•				
E	Jan-Sept 2016	\$139.98	50.72%	Actual CMS		
F	Oct-Dec 2016	\$141.97	50.02%	Actual CMS		
	CY 2017	•	•			
G	Jan-Sept 2017	\$158.91	50.02%	Actual CMS		
Н	Oct-Dec 2017	\$158.97	50.00%	Actual CMS		
	CY 2018	•	•			
I	Jan-Dec 2018	\$160.92	50.00%	Actual CMS		
J	Oct-Dec 2018	\$160.92	50.00%	Actual CMS		
	CY 2019	•				
K	Jan-Dec 2019	\$164.04	50.00%	Actual CMS		
	CY 2020	•	•			
L	Estimated Jan-Dec 2020	\$151.18	56.20%	Actual CMS		
	CY 2021					
M	Estimated Jan-Mar 2021	\$156.98	56.20%	Table 3.2 Row Q		
N	Estimated Apr-Dec 2021	\$179.20	50.00%	Table 3.2 Row R		
	CY 2022	•				
О	Estimated Jan-Dec 2022	\$186.06	50.00%	Table 3.3 Row Q		
	CY 2023					
P	Estimated Jan-Dec 2023	\$193.19	50.00%	Table 3.4 Row Q		

Table 4.4 Quarterly PMPM Rate History						
Item	Q1	Q2	Q3	Q4	Average PMPM Rate	
CY 2006	\$114.71	\$114.71	\$114.71	\$114.71	\$114.71	
CY 2007	\$120.30	\$120.30	\$120.30	\$120.30	\$120.30	
% Change from CY 2006					4.87%	
CY 2008	\$120.03	\$120.03	\$120.03	\$98.95	\$114.76	
% Change from CY 2007					-4.61%	
CY 2009	\$106.03	\$98.81	\$98.81	\$98.81	\$100.62	
% Change from CY 2008					-12.33%	
CY 2010	\$101.49	\$101.49	\$101.49	\$101.49	\$101.49	
% Change from CY 2009					0.87%	
CY 2011	\$107.07	\$111.97	\$129.84	\$129.84	\$119.68	
% Change from CY 2010					17.92%	
CY 2012	\$132.41	\$132.41	\$132.41	\$132.41	\$132.41	
% Change from CY 2011					10.64%	
CY 2013	\$133.62	\$133.62	\$133.62	\$133.62	\$133.62	
% Change from CY 2012					0.91%	
CY 2014	\$125.50	\$125.50	\$125.50	\$122.97	\$124.87	
% Change from CY 2013					-6.55%	
CY 2015	\$124.68	\$124.68	\$124.68	\$125.42	\$124.87	
% Change from CY 2014					0.00%	
CY 2016	\$139.98	\$139.98	\$139.98	\$141.97	\$140.48	
% Change from CY 2015					12.50%	
CY 2017	\$158.91	\$158.91	\$158.91	\$158.97	\$158.93	
% Change from CY 2016					13.13%	
CY 2018	\$160.92	\$160.92	\$160.92	\$160.92	\$160.92	
% Change from CY 2017					1.26%	
CY 2019	\$164.04	\$164.04	\$164.04	\$164.04	\$164.04	
% Change from CY 2018					1.94%	
CY 2020	\$151.18	\$151.18	\$151.18	\$151.18	\$151.18	
% Change from CY 2019					-7.84%	
CY 2021 Projection	\$156.98	\$179.20	\$179.20	\$179.20	\$173.65	
% Change from CY 2020					14.86%	
CY 2022 Projection	\$186.06	\$186.06	\$186.06	\$186.06	\$186.06	
% Change from CY 2021 Projection					7.15%	
CY 2023 Projection	\$193.19	\$193.19	\$193.19	\$193.19	\$193.19	
% Change from CY 2022 Projection					3.83%	

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY 2021-22 Budget Cycle					
Request Title						
	R-05 Office of Community Living					
Dept. Approval By:	BL		Supplemental FY 2020-21			
OSPB Approval By:	askey Caro		Budget Amendment FY 2021-22			
		<u>x</u>	Change Request FY 2021-22			

		FY 2020-21		FY 2021-22		FY 2022-23	
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$692,646,401	\$0	\$695,400,814	\$32,484,690	\$65,380,228	
	FTE	0.0	0.0	0.0	0.0	0.0	
Total of All Line Items	GF	\$325,373,367	\$0	\$333,472,702	\$36,115,020	\$51,808,554	
Impacted by Change Request	CF	\$10,311,233	\$0	\$3,580,742	\$707,025	\$1,131,060	
	RF	\$0	\$0	\$0	\$0	\$0	
	FF	\$356,961,801	\$0	\$358,347,370	(\$4,337,355)	\$12,440,614	

		FY 202	20-21	FY 20:	FY 2021-22	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$525,769,703	\$0	\$528,136,058	\$28,506,192	\$59,437,345
04. Office of Community Living, (A) Division of	FTE	0.0	0.0	0.0	0.0	0.0
Intellectual and	GF	\$239,180,185	\$0	\$247,091,465	\$30,429,659	\$46,196,487
Developmental Disabilities, (2) Medicaid	CF	\$7,520,047	\$0	\$791,945	\$8,056	(\$594,448)
Programs - Adult	RF	\$0	\$0	\$0	\$0	\$0
Comprehensive Services	FF	\$279,069,471	\$0	\$280,252,648	(\$1,931,523)	\$13,835,306
	Total	\$71,889,381	\$0	\$72,230,580	\$924,371	\$3,355,778
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and Developmental Disabilities, (2) Medicaid Programs - Adult	GF	\$33,352,698	\$0	\$33,523,841	\$1,285,669	\$2,501,373
	CF	\$389,750	\$0	\$389,554	\$1,378,412	\$1,378,412
	RF	\$0	\$0	\$0	\$0	\$0
Supported Living Services	FF	\$38,146,933	\$0	\$38,317,185	(\$1,739,710)	(\$524,007)

		FY 202	0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$29,961,574	\$0	\$30,014,841	\$1,237,203	\$2,542,138
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$14,082,730	\$0	\$14,109,363	\$1,516,659	\$2,169,127
Developmental Disabilities, (2) Medicaid	CF	\$0	\$0	\$0	\$0	\$0
Programs - Children's	RF	\$0	\$0	\$0	\$0	\$0
Extensive Support Services	FF	\$15,878,844	\$0	\$15,905,478	(\$279,456)	\$373,011
	Total	\$4,779,680	\$0	\$4,824,927	\$2,308,291	\$2,308,291
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$2,390,029	\$0	\$2,412,653	\$1,153,956	\$1,153,956
Developmental Disabilities, (2) Medicaid	CF	\$0	\$0	\$0	\$0	\$0
Programs - Children's	RF	\$0	\$0	\$0	\$0	\$0
Habilitation Residential Program	FF	\$2,389,651	\$0	\$2,412,274	\$1,154,335	\$1,154,335
	Total	\$40,420,895	\$0	\$40,386,832	(\$549,263)	(\$2,263,324)
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$18,862,830	\$0	\$18,845,933	\$644,642	(\$212,389)
Developmental	CF	\$81,163	\$0	\$81,114	\$347,096	\$347,096
Disabilities, (2) Medicaid Programs - Case	RF	\$0	\$0	\$0	\$0	\$0
Management	FF	\$21,476,902	\$0	\$21,459,785	(\$1,541,001)	(\$2,398,031)
	Total	\$7,515,264	\$0	\$7,508,899	(\$7,483)	\$0
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$7,136,298	\$0	\$7,130,254	\$0	\$0
Developmental Disabilities, (3) State Only Programs - Family	CF	\$378,966	\$0	\$378,645	(\$7,483)	\$0
	RF	\$0	\$0	\$0	\$0	\$0
Support Services	FF	\$0	\$0	\$0	\$0	\$0
	Total	\$9,893,584	\$0	\$9,884,576	\$57,656	\$0
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$8,228,509	\$0	\$8,221,066	\$1,084,435	\$0
Developmental Disabilities, (3) State	CF	\$1,665,075	\$0	\$1,663,510	(\$1,026,779)	\$0
Only Programs - State	RF	\$0	\$0	\$0	\$0	\$0
Supported Living	FF	\$0		\$0		

	FY 2020-21		0-21	FY 20	FY 2022-23	
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$2,416,320	\$0	\$2,414,101	\$7,723	\$0
04. Office of Community Living, (A) Division of	FTE	0.0	0.0	0.0	0.0	0.0
Intellectual and	GF	\$2,140,088	\$0	\$2,138,127	\$0	\$0
Developmental Disabilities, (3) State	CF	\$276,232	\$0	\$275,974	\$7,723	\$0
Only Programs - State Supported Living	RF	\$0	\$0	\$0	\$0	\$0
Services Case Management	FF	\$0	\$0	\$0	\$0	\$0

		Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-5** Request Detail: Office of Community Living Cost and Caseload

Summary of Funding Change for FY 2021-22									
	Tot	tals	Incremental Change						
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23					
	Appropriation	Base	Request	Request					
Total Funds	\$692,646,401	\$695,400,814	\$32,484,690	\$65,380,228					
FTE	0.0	0.0	0.0	0.0					
General Fund	\$325,373,367	\$333,472,702	\$36,115,020	\$51,808,554					
Cash Funds	\$10,311,233	\$3,580,742	\$707,025	\$1,131,060					
Reappropriated Funds	\$0	\$0	\$0	\$0					
Federal Funds	\$356,931,801	\$358,347,370	(\$4,337,355)	\$12,440,614					

# Summary of Request:

In FY 2020-21 the Department requests a decrease of \$4,860,971 total funds, including a decrease of \$14,512,191 General Fund, an increase of \$650,200 Individuals with Intellectual and Development Disabilities (IDD) Cash Fund, an increase of \$1,112,250 Healthcare Affordability & Sustainability Fee Cash Fund, and a decrease of \$125,193 Family Support Loan Program Fund. For FY 2021-22 the Department requests an increase of \$32,484,690 total funds, including an increase of \$36,115,020 General Fund, a decrease of \$424,035 Individuals with Intellectual and Development Disabilities (IDD) Cash Fund, an increase of \$1,318,557 Healthcare Affordability & Sustainability Fee Cash Fund, and a decrease of \$187,497 Family Support Loan Program Fund. These funds would be used to fund Home and Community Based Services (HCBS) waiver program costs. The request includes funding for Adult Comprehensive (HCBS-DD) reserved capacity and emergency enrollments totaling 411 enrollments in FY 2020-21, 411 enrollments in FY 2021-22, and 411 enrollments in FY 2022-23.

### Current Program:

Effective July 2018, the Department manages four Medicaid HCBS waiver programs for people with developmental disabilities: Adult Comprehensive Services (HCBS-DD), Supported Living Services (HCBS-SLS), Children's Extensive Services (HCBS-CES), and Children's Habilitation Residential Program (HCBS-CHRP). These programs provide services such as residential care, day habilitation services and behavioral services, as well as case management, and are delivered through a variety of approved providers.

# Problem or Opportunity:

Each year, the Department's appropriations for programs serving individuals with intellectual and developmental disabilities are set in advance of the fiscal year, based on prior year utilization and expenditure. As more recent data becomes available, the appropriation needs to be adjusted to account for the most recent projections of expenditure and caseload in order to minimize any potential over or under-expenditures. The Department requests to adjust existing appropriations and designated full program equivalents (FPE) within four Medicaid waiver programs for people with developmental disabilities: Home and Community Based Services Adult Comprehensive Services (HCBS-DD), Supported Living Services (HCBS-SLS), Children's Extensive Services (HCBS-CES), and Children's Habilitation Residential Program (HCBS-CHRP); further, the Department's request accounts for associated changes to the Targeted Case Management (TCM) service. Adjustments to targeted appropriations accurately reflect the current cost per FPE, based upon current spending trends, and maximize the number of individuals that can be served in the programs.

The Home and Community Based Services, Adult Comprehensive services program (HCBS-DD) provides services to adults with developmental disabilities who require extensive supports to live safely in the community and who do not have the resources available to meet their needs. The Home and Community Based Services - Supported Living Services program (HCBS-SLS) is for adults who can either live independently with limited to moderate supports or who need more extensive support provided by other persons, such as their family. The Home and Community Based Services - Children's Extensive Services program (HCBS-CES) provides benefits to children who have a developmental disability or delay, and who need near constant line of sight supervision due to behavioral or medical needs. The Home and Community Based Services – Children's Habilitation Residential Program (HCBS-CHRP) provides treatment and out of home services for children with intellectual and developmental disabilities and very high needs. The CHRP waiver was transferred from the Colorado Department of Human Services (DHS) to the Department effective July 1, 2018. HB 18-1328 "Redesign Residential Child Health Care Waiver" gave the Department authority to operate the waiver and directed the Department to redesign the waiver and receive federal approval from the Centers for Medicare and Medicaid Services (CMS) on the newly redesign waiver. The Department received approval from CMS on the redesigned waiver in June 2019 and the redesigned waiver went into effect July 1, 2019.

In FY 2012-13, the Department of Human Services requested and received funding to eliminate the waiting list for the HCBS-CES program. In FY 2013-14, the Department of Health Care Policy and Financing requested and received funding to eliminate the waiting list for the HCBS-SLS program. In order to prevent new waiting lists the General Assembly must provide new funding each year to allow for growth in both programs. In contrast, the HCBS-DD program continues to have a waiting list for services; as of the November 1, 2020 Update to the Strategic Plan for Assuring Timely Access to Services for Individuals with Intellectual and Developmental Disabilities (House Bill 14-1051), there were 2,959 people waiting to receive HCBS-DD waiver services. The waiting lists may include those requiring emergency enrollments as well as those transitioning out of institutional settings. Additionally, the list may include current Medicaid recipients being served in an alternative waiver that does not fully meet their needs and may also include individuals being served in nursing facilities or hospitals that are not as cost-effective as the HCBS waivers.

Each year, additional enrollments in the HCBS-DD waiver are needed to provide resources for emergency placements, individuals transitioning out of foster care, from a youth waiver, or transitions from an institutional setting. Without additional enrollments each year, people with intellectual and developmental disabilities would transition to other less appropriate, costlier settings or become vulnerable to abuse, neglect or homelessness as an increasing number of people continue to wait on the list to receive the services they need.

# **Proposed Solution:**

In order to adjust the current appropriations for the programs administered by the Office of Community Living in FY 2020-21 the Department requests a decrease of \$4,860,971 total funds, including a decrease of \$14,512,191 General Fund, an increase of \$650,200 Individuals with Intellectual and Development Disabilities (IDD) Cash Fund, an increase of \$1,112,250 Healthcare Affordability & Sustainability Fee Cash Fund, and a decrease of \$125,193 Family Support Loan Program Fund. For FY 2021-22 the Department requests an increase of \$32,484,690 total funds, including an increase of \$35,115,020 General Fund, a decrease of \$424,035 Individuals with Intellectual and Development Disabilities (IDD) Cash Fund, an increase of \$1,318,557 Healthcare Affordability & Sustainability Fee Cash Fund, and a decrease of \$187,497 Family Support Loan Program Fund.

Based on the assumptions used in this request, the Department calculated maximum enrollment figures for each waiver program and the number of full-program equivalents (FPE) for each fiscal year. If this request is approved, the Department calculates that by the end of FY 2020-21 it would serve: 6,790 FPE on the HCBS-DD waiver, 4,379 FPE on the HCBS-SLS waiver, 1,909 FPE on the HCBS-CES waiver, and 93 FPE on the HCBS-CHRP waiver. For the years covered in the request, the Department would limit HCBS-DD enrollments to the maximum enrollment figure. However, for the HCBS-SLS, HCBS-CES, and HCBS-CHRP programs, the Department would

adhere to the policy of maintaining no waiting lists; therefore, the enrollment numbers are for information only, and the Department would exceed those figures if necessary and use the regular budget process to account for any change in the estimates. The number of associated FPE for each fiscal year is shown in exhibit D.3 of the appendix.

### **Anticipated Outcomes:**

The Office of Community Living finances long term services and supports in the community to adults and children with developmental disabilities who would otherwise receive services in more restrictive and expensive institutional settings or who would be without services altogether. The Department strives to provide the right services to the right people at the right time and place.

The Department's request includes funding to provide needed services for the highest number as well as most at-risk eligible people as possible. If the Department's request is approved, the Department would have resources to cover 13,901 people on average per month in FY 2020-21, and 14,573 people on average per month in FY 2021-22, thereby improving their physical, mental, and social well-being and quality of life.

### Assumptions and Calculations:

The Department's calculations are contained in the appendix. The appendix is organized into a series of exhibits, providing both calculation information and historical cost and caseload detail. The section below describes each exhibit individually. In many cases, the specific assumptions and calculations are contained in the exhibits directly; the narrative information below provides additional information and clarification where necessary.

### Exhibit A.1.1 – A.1.3: Calculation of Request

This exhibit provides the final calculation of the incremental request, by line item. Values in the total request column are taken from calculations in exhibits A.2 through A.4, as well as exhibit C which relates to projected expenditure. The adjusted spending authority amounts reflect the estimated appropriation for each line and can be found in Tables G.1 through G.3. The incremental request is the sum of the differences between total request and spending authority for each line item.

# Exhibit A.2 through A2.4: Current, Request, and Out Year Fund Splits

These exhibits provide a breakdown for each line item's expenditure estimate including fund splits for each program. This exhibit also allows for adjustments in the federal financial participation rate (FFP) based on the type of services delivered within each program. Following the declaration of a public health emergency by the Secretary of Health and Human Services during the COVID-19 pandemic, CMS notified states that an increased FMAP would be available for each calendar quarter occurring during the public health emergency, including retroactively to January 1, 2020. To be eligible to receive the 6.2 percentage point FMAP increase, states must adhere to a set of

requirements which include, but are not limited to, maintaining eligibility standards, methodologies, and procedures; covering medical costs related to the testing, services, and treatment of COVID-19; and not terminating individuals from Medicaid if such individuals were enrolled in the Medicaid program as of the date of the beginning of the emergency period or during the emergency period. The Department is compliant with all requirements and assumes that the State will be eligible for the enhanced FMAP through March 31<sup>st</sup>, 2021. This translates into a blended FMAP of 54.65% for SFY 2020-21. The Department anticipates that the FMAP will decrease to its normal level beginning on April 1, 2021 following the end of the public health emergency. As such, the Department assumes a 50.00% FMAP for SFY 2021-22 and SFY 2022-23. FMAP forecasts can be found in exhibit R of the Department's FY 2021-22 R-1 "Medical Services Premiums Request".

The state portion of Buy-In expenditure is paid for with Healthcare Affordability & Sustainability Fee Cash Fund dollars, while standard HCBS-SLS and TCM are paid for with General Fund dollars. Costs associated with Buy-In HCBS-SLS and TCM services are separated in these exhibits to reflect the difference in funding source.

# **Exhibit A.5: Cash Funds Report**

Recent iterations of the Department's forecast include the addition of several cash fund sources. Because of this, the Department has added Exhibit A.5 to clarify the amount of and source of cash funds allocated and requested in each year.

For FY 2020-21, the Department is requesting an increase to the Individuals with Intellectual and Development Disabilities (IDD) Cash Fund. As part of the Joint Budget Committee's FY 2020-21 funding decisions, a 1% across the board rate decrease was approved. This reduction resulted in a decrease in the appropriated IDD Cash Fund. Because IDD Cash Fund expenditure is not directly tied to claims impacted by the approved 1% across the board rate decrease, the Department is requesting an increase to return to previous levels. For FY 2021-22, the Department is requesting a decrease to IDD Cash Fund. The Department is adjusting the State Only Supported Living Services request from the original FY 2020-21 R-16 Case Management & State-Only Programs Modernization request and subsequent appropriation. This adjustment results in a decrease in IDD Cash Fund for State Only Supported Living Services, and a net reduction to IDD Cash Fund in FY 2021-22 and beyond.

The Department is requesting to use the existing balance of the Family Support Loan Program Fund to partially fund the Family Support Services Program (FSSP). For FY 2020-21 and beyond, the Department is requesting a decrease to the Family Support Loan Program Fund to align the request with the current balance of the fund.

### **Exhibit A.6: Buy-In Adjustments**

HB 16-1321 "Medicaid Buy-In Certain Waivers" created a buy-in option for working adults who would otherwise not qualify due to income or asset limits for the HCBS-SLS waiver. The program was implemented on December 1, 2017.

This tab separates expected expenditure on HCBS-SLS clients using the disabled buy-in eligibility criteria to access the waiver. Expected expenditure for this population is included in the total expenditure values calculated in Exhibit B and C but is funded with Healthcare Affordability & Sustainability Fee Cash Fund (CHASE) dollars instead of General Fund dollars. Exhibit A.6 services to isolate the amount expected to be spent on this population and to calculate the amount of funding required from CHASE. This exhibit can also be used to track cost and caseload trends in the HCBS-SLS Buy-In program.

In FY 2019-20, the Department began to automatically move clients who met criteria for Working Adults with Disabilities (WAwD), the Department's Medicaid Buy-In program, into the appropriate Buy-In category. This is intended to allow clients who are able to work to earn more and accumulate more resources. The change was requested and reviewed with the stakeholder community. Clients who are automatically moved have the option to opt-out of the WAwD program and remain under the more restrictive criteria of their existing waiver. As a result of this change, the Department saw a significant increase in the number of SLS Buy-In clients. The Department has increased the Buy-In adjustment accordingly.

### **Exhibit B: Summary of Program Costs**

This exhibit provides a summary of historical program expenditure, as paid for through the Department's Medicaid Management Information System (MMIS), and projected totals as calculated in exhibit C.

### **Exhibit C: Calculation of Projected Expenditure**

This exhibit provides the calculation of projected expenditure using revised assumptions about caseload and per FPE cost (calculated in exhibits D.3 and E, respectively). The exhibit then calculates the difference between the appropriated or base request amounts which results in the estimated over/under-expenditure for each waiver, by fiscal year. In fiscal years where systemic under-expenditure exists, this exhibit would also calculate an additional number of people that could be enrolled within existing resources and converts the total enrollment figures into new paid enrollments and calculated the new cost for additional enrollments for each fiscal year. This exhibit calculates costs for Medicaid matched services only and does not include State-Only programs. Therefore, the appropriation reflected in this exhibit does not match the adjusted appropriation in Exhibit A.1.

### **Exhibit D.1: Calculation of Maximum Enrollment**

To forecast the number of enrollments, the Department took the appropriated enrollments from the Long Bill and estimated a base trend. Selection of trends for each waiver are discussed below. Once the base enrollments are determined, the Department adds in additional enrollments authorized through special bills or other initiatives, as Bottom Line Adjustments, to reach the final estimated maximum enrollment. This process is repeated for the request year and the out year. Information on trend selection and Bottom Line Adjustments for each program are provided below.

As of FY 2014-15 there is no longer a waiver cap in the HCBS-SLS or HCBS-CES waivers, so the maximum enrollment forecast for these waivers has been removed from the exhibits.

## Adult Comprehensive Waiver (DD)

For FY 2020-21 the Department was appropriated funding for 7,289 enrollments through HB 20-1360 "FY 2020-21 Long Appropriations Bill" which included a request to increase the HCBS-DD enrollment cap by 398 clients as bottom line adjustments. These bottom line adjustments were composed of 228 emergency enrollments, 36 foster care transitions, 2 clients expected to move from an institutional setting, 75 youth transitions expected to move to the HCBS-DD waiver as they age out of the youth, and 57 enrollments due to new aging caregiver criteria established in HB 18-1407 "Access to Disability Services and Stable Workforce". The Department has updated all categories of anticipated emergency enrollments to more closely resemble actual enrollment numbers from FY 2019-20, resulting in an additional 13 enrollments compared to current Long Bill. The Department has decreased the estimated number of emergency enrollments to 189, increased the estimated number of foster care transitions to 43, increased the number of clients expected to move from an institutional setting onto HCBS-DD to 41, increased the number of youth transitions to 91, and decreased the estimated number of enrollments due to aging caregiver criteria to 47. Therefore, the Department is requesting 7,302 enrollments for FY 2020-21 for the HCBS-DD waiver, an increase of 13 enrollments over the current FY 2020-21 appropriation.

In FY 2021-22 the Department requests an additional 411 HCBS-DD enrollments, which includes the same changes to the estimated bottom line adjustments mentioned above. With the requested additions, the maximum enrollment number for FY 2021-22 would be 7,713. In FY 2022-23 the Department requests an additional 411 enrollments to reach a maximum enrollment figure of 8,124.

The Department bases its emergency enrollment forecast on the number of emergency enrollments that enrolled in the HCBS-DD waiver during the most recent fiscal year, FY 2019-20. In FY 2014-15 and FY 2015-16 the Department provided increased training to Community Centered Boards (CCBs) on the emergency enrollment criteria and process, while at the same time updating the forms necessary to initiate an emergency enrollment. The Department believes that part of the

increase in emergency enrollments is a result of CCBs becoming more adept at identifying potential emergency enrollments, and more aware of the steps necessary enroll a client as an emergency enrollment.

The Department also believes that trends in the Colorado housing market have impacted the number of emergency enrollments into the HCBS-DD waiver. A common cause of an emergency enrollment is impending homelessness. Many individuals have lost housing due to rent increases, homes being sold after elderly caregivers and parents pass away, and limited access to Section 8 housing. The Department has received feedback from stakeholders that there has been an increase in the age of caregivers. As caregivers age, some become less willing or able to provide the level of care needed by the client, leaving them neglected and more likely to qualify as an emergency enrollment.

Clients authorized as emergency enrollments, who may or may not be on the HCBS-DD waitlist, are allowed to enroll in the HCBS-DD waiver prior to clients on the waitlist. Without additional enrollments allocated for these clients, they would continue to take priority over clients on the HCBS-DD waitlist thereby increasing the size of the waitlist and waiting period for clients on the waitlist. If there are no allocated enrollments available, clients meeting the emergency criteria may find themselves in settings that do not meet their needs, leave them open to abuse or neglect, or leave them vulnerable to homelessness. Emergency enrollment, however, has been more constant throughout the most recent fiscal years. The Department believes this is due to the focus on authorizing enrollments through churn and increased resources for managing the waiting list. Therefore, this forecast does not include any substantial changes to the way emergency enrollments are forecast.

Using updated data through July 2020, the Department estimates that 43 clients are likely to transition to HCBS-DD as foster care transitions in FY 2020-21, which is an increase in seven enrollments from the Department's FY 2020-21 S-5. Also, using updated data through July 2020, the Department anticipates that 91 youth will transition to the HCBS-DD waiver from the HCBS-CES waiver. This estimate is based on the previous forecast and FY 2019-20 actuals.

Additionally, the Department is now predicting that 41 clients will transition from institutions to the HCBS-DD waiver in FY 2020-21. Transitions from institutions include from Intermediate Care Facilities (ICF), Regional Centers, or the Colorado Choice Transitions (CCT) program. CCT is a grant-funded program that will end December 31, 2020 and is currently being transitioned into the existing waiver programs through HB 18-1326 "Support for Transition from Institutional Settings".

### **Exhibit D.2: Conversion of Enrollment to Full Program Equivalent (FPE)**

In order to properly calculate expenditure, the Department must use a consistent caseload metric that directly ties to expenditure. In this exhibit, and throughout the request, the Department uses

average monthly paid enrollment to determine the number of clients for which it anticipates paying claims for in each fiscal year. This caseload metric is referred to as "full-program equivalents," or FPE. The Department notes, however, that the number of FPE is not always equal to the enrollment for each waiver. The relationship of FPE to maximum enrollment can vary based on a large number of factors including lag between enrollment and delivery of services and the lag between delivery of services and billing of claims; however, in order to accurately set the appropriation and manage the program, it is critical to explicitly identify both the number of FPE, enrollment, and the interaction between the two.

The Department's methodology to account for the above-mentioned variation includes the selection of an FPE conversion factor which is based on the ratio of average monthly enrollments (as calculated in Exhibit D.3) to FPE in historical data. Enrollments are derived from the number of unique waiver clients in a given month with an active prior authorization request (PAR) which means that these clients have been authorized by the CCBs to receive services. The Department then uses this metric to convert the average monthly enrollment forecast to projected FPE in Exhibit D.3.

For each waiver, the selected FPE current year conversion factor is calculating using an average of historical data. For all HCBS waivers, the Department used an average of the previous 18 months. The selected factors for FY 2020-21 are also the conversion factors for the request year and out year.

The Department assumes that the conversion factor for HCBS-SLS Buy-In services will match that of non-Buy-In HCBS-SLS services because Buy-In clients will exist in the same provider environment, with the same barriers to access, as non-Buy-In clients. Furthermore, the Department expects Buy-In clients to exhibit fluctuations in service demand similar to those of non-Buy-In clients based on their similar medical conditions that qualify them for the service, though varying due to their unique physical, psychological, and social states. The Department will reassess this assumption after the program exists for long enough to collect adequate data.

# Exhibit D.3: Calculation of Average Monthly Enrollment, FPE, and Per-FPE Expenditure

This exhibit provides a summary of historical average monthly enrollment and estimates average monthly enrollment and FPE as well as a summary of historical per FPE expenditure and calculates estimated per FPE expenditure for the years covered in this request.

### Calculation of Average Monthly Enrollment and FPE

The Department's methodology involves three steps and begins with the enrollment level at the end of the prior fiscal year. First, the final estimated average monthly enrollment under current policy is calculated by waiver specific methods, discussed below; these enrollments are then adjusted based on a linear enrollment ramp-up over the fiscal year. The Department assumes that by the end of each fiscal year, enrollment will be at the maximum appropriated or maximum

assumed level and that the increase in enrollments from the beginning of the fiscal year to the end will happen evenly across 12 months.

Finally, the FPE adjustment factor, described in the conversion of enrollment to FPE, Exhibit D.2, is applied to the final estimated average monthly enrollment to arrive at the estimated FPE for the fiscal year. The steps described above are repeated for each waiver and fiscal year with the request and out years beginning with the FY 2020-21 and through FY 2022-23 estimated maximum enrollment levels.

### Maximum Assumed Enrollment for the HCBS-DD Waiver

For the HCBS-DD waiver, maximum enrollment comes from total appropriated enrollments. This is due to the existence of the enrollment cap in this waiver. In most fiscal years, the Department assumes that a number of members equal to the appropriated enrollment amount will be authorized for services for each year in this request, which is the case in this request. To calculate average monthly enrollment in the HCBS-DD waiver, the maximum authorized enrollment is adjusted downwards based on the ratio of authorized to enrolled clients using the monthly linear enrollment calculation. The calculation of Maximum Assumed Enrollment is shown in table 1.1.

Row	Item	FY 2020-21	FY 2021-22	Notes
A	Requested Maximum HCBS-DD Enrollment	7,302	7,713	Appendix A - Exhibit D.1
В	Ratio of Enrollments Authorized HCBS-DD Enrollments to Enrolled with a Prior Authorization (PAR)	96.27%	96.47%	Actuals
C	Maximum Assumed HCBS-DD Enrollment	7,030	7,441	Row A * Row B

### Calculation of Per-FPE Expenditure

The Department included a base trend for FY 2020-21 only on the HCBS-DD waiver as there has been indication of changes in the utilization of services based off updated data through July 2020. The Department did not include a base trend on cost per utilizer projections for the HCBS-SLS, HCBS-CES, or HCBS-CHRP waivers as there has been no indication of an increase or decrease in utilization of services. Other adjustments to the cost per utilizer trend stem from rate changes or legislative impacts in FY 2020-21 and FY 2021-22. There were several different rate changes for FY 2020-21 and the request year that included an across the board rate decrease.

In addition to the rate adjustments, bottom line adjustments account for the expected effect of approved policy in the Long Bill and any special bills.

A bottom line adjustment was added to account for increased costs in the HCBS-SLS waiver due to the expansion of access to Consumer Directed Attendant Support Services (CDASS) as requested in the Departments FY 2015-16 R-7: "Participant Directed Programs Expansion". This policy was implemented August 15, 2018. Using the assumption that CDASS will continue to ramp up over time to reach full utilization, the increase in costs for the HCBS-SLS waiver were annualized in each year with full utilization expected to be reached in FY 2021-22.

Now that CDASS is available on the HCBS-SLS waiver, the waiver has all services offered by the 1915(i) waiver along with additional services and supports. All 1915(i) clients have transitioned to the HCBS-SLS waiver since the policy change. Due to higher than average utilization of consumer directed services amongst this population, these clients are expected to increase the aggregate cost per-client on the HCBS-SLS waiver as they transition.

There were 53 pay periods in FY 2019-20 compared to the normal number of 52. Therefore, a bottom line impact was added in FY 2020-21 to adjust for the impact of the extra pay period in FY 2019-20.

A bottom line impact is included for HB 18-1326 "Community Transition Services". The Department's 2018-19 R-7 "HCBS Transition Services Continuation and Expansion" Request, and the accompanying bill, moved services previously available under the CCT program to the HCBS waivers and to the Medicaid State Plan. The CCT grant program had been in operation since April 2013 but will expire on December 31, 2020. HB 18-1326 appropriated the continuation of 5.0 FTE to administer the new program once the CCT grant ends which will provide community transition services and supports to persons who are in an institutional setting, who are eligible for Medicaid, and who desire to transition to an HCBS setting.

Several rate increases were passed in the 2019 legislative session including a 1% across the board rate increase and several targeted rate increases. There were targeted rate increases to every support level of Group Residential Services and Supports (GRSS) of the HCBS-DD waiver. There was also a targeted rate increase in FY 2019-20 for homemaker and personal care services for the SLS and CES waivers. All targeted rate increases were implemented January 1, 2020.

Following the declaration of the public health emergency in FY 2019-20, the General Assembly approved a series of enhanced rates to guarantee that members would continue to have appropriate access to care and to ensure that providers could remain operable and solvent. The enhanced rates were applicable to services provided in the last quarter of FY 2019-20. A portion of these services were paid during FY 2020-21 due to the lag between when a service is provided and when the provider submits a claim. As such, the Department has included a bottom line impact in FY 2020-

21 and FY 2021-22 to account for the temporary increase in expenditure due to the temporarily enhanced rates.

As part of the FY 2020-21 R-10 Provider Rate Adjustment request, the Joint Budget Committee (JBC) approved a 1% across the board rate decrease for all HCBS services except for negotiated rates or services with targeted rate increases. As part of the same request, the JBC approved a targeted rate increase for Residential Child Care Facilities (RCCF) to ensure appropriate access to care for children enrolled in HCBS-CHRP. These actions are included as bottom line adjustments where applicable.

The Denver City Council approved an ordinance to increase the minimum wage to \$15.87 an hour by January 1, 2022, starting with an increase on January 1, 2020. To account for an increase to local minimum wage, a rate increase for certain HCBS services was passed by the General Assembly during the 2020 session. The Department has included a bottom line impact for FY 2020-21 through FY 2022-23 to adjust for the increase in certain HCBS rates for Denver.

### **Exhibit E: Regional Center Information**

This exhibit details the historical average enrollment and costs for clients receiving HCBS-DD services in Regional Centers. Regional Center claims are paid for from an appropriation within the Department via a transfer to the Department of Human Services (CDHS) who manages Regional Center programs. The cost of these clients is not forecasted in this request. Clients in Regional Centers do however receive TCM services as well as administrative Case Management payments which are managed and paid for by HCPF, so Regional Center enrollment information is included in this request to fully account for these costs. To determine utilization of these services the Department predicts that enrollment will remain constant over the request period.

### **Exhibit F: Case Management Services Forecast**

This exhibit forecasts Per Member Per Month (PMPM) Targeted Case Management (TCM), Monitoring, Intakes and Assessments, and Administrative costs. These services are provided on a monthly, yearly, or periodic basis for members. As a result, utilization and expenditure for these services are directly tied to the number of clients enrolled in the waiver programs for individuals with Intellectual and Developmental Disabilities (IDD).

Effective July 1, 2020 the Department started paying a PMPM TCM payment for each client instead of the previous rate structure of 15-minute unit TCM claims. The PMPM includes case manager tasks such as: assessing a client's long-term care needs, developing and implementing personalized care plans, coordinating and monitoring the delivery of services, and evaluating the effectiveness of services. To calculate PMPM TCM costs, the exhibit takes the estimated total monthly enrollment trend from Table D.3 and multiplies that by the PMPM TCM projected costs of FY 2019-20 expenditure.

The Department provides four monitoring visits per year for each client. Monitoring visits are face to face visits between a client and case manager that occur quarterly. Monitoring activities include at a minimum: evaluation of the delivery and quality of services and supports for the health, safety and welfare of the member; satisfaction with services and choice in providers; and the promotion of self-determination, self-representation, and self-advocacy. To calculate monitoring costs, the exhibit takes the total estimated monthly enrollment trend from Table D.3 and multiplies that by the monitoring projected costs of FY 2019-20 expenditure.

The Department requires intake, Supports Intensity Scale (SIS) and Continued Stay Review (CSR) assessments for IDD clients. Members receive an initial functional assessment during the intake process and then a CSR assessment annually thereafter. Their intake assessment includes the determination of an individual's functional eligibility. Once an individual is determined eligible, case managers work with the member to determine needs and appropriate services which works to identify the best waiver to meet the member's needs and develop a person-centered Support Plan for Long Term Services and Supports (LTSS). The intake assessment evaluates the members functioning level for activities of daily living, composed of the supervision of needs related to behaviors, memory and cognition. This same assessment is completed upon application for initial enrollment and annually thereafter as a CSR. SIS includes an assessment of the individual's support needs in personal, work-related, and social activities in order to identify and describe the types and intensity of support an individual requires. The SIS measures support needs in the areas of: home living, community living, lifelong learning, employment, health and safety, social activities, and protection and advocacy. The scale ranks each activity according to frequency (none, at least once a month), amount (none, less than 30 minutes), and type of support (monitoring or verbal gesturing). Finally, a Support Level is determined based on the Total Support Needs Index, which is a standard score generated from the items tested by the Scale. The Support Level determines the rate for some services and is used to determine a Service Plan Authorization Limit (SPAL) for members enrolled in the Supported Living Services (SLS) waiver. CSRs are required yearly to ensure waiver members continue to be functionally eligible and are also being provided the correct amount of support. Unscheduled functional assessments may also be completed on an unscheduled basis, outside the initial and annual CSR, if there is a significant event that could result in a change in the individual's functioning. The exhibit assumes that all new enrollments would receive an intake assessment and all current members will receive a CSR assessment. To calculate assessment costs, the exhibit takes the estimated total monthly enrollment trend from Table D.3 and multiplies that by the costs of the projected FY 19-20 expenditure.

In addition to the intake and CSR functional needs assessment, the Department uses a separate tool for members enrolled in the CHRP waiver called The Inventory for Client and Agency Planning or (ICAP) assessment. The support level score results from the ICAP are used to determine the reimbursement rate for habilitation services. The ICAP measures support needs by determining "adaptive behavior skills" (motor skills, social and communication skills, personal living skills,

and community living skills) and "maladaptive behavior skills" or problem behaviors (hurtful to self or others, destructive to property, disruptive or offensive behavior, unusual or repetitive habits, socially offensive behaviors, withdrawal or inattentive behaviors and uncooperative behaviors). The tool measures the child/youth's maladaptive behaviors according to frequency and severity. Scores are determined by the total Adaptive Behavior Raw Score and the General Maladaptive Behavior Score. Final scores are then translated to a support level that are used for habilitation purposes.

The Department pays for administrative deliverables related to quality including: operations guides, community outreach reports, complaint trend analyses, critical incident reports, critical incident trend analysis, case manager training deliverables, appeals, and the Human Rights Committee (HRC). These activities are paid either by fixed deliverables per agency or by number of times an activity is required, such as appeals or HRC.

SB 16-192 "Assessment Tool Intellectual & Developmental Disabilities" requires the Department to design and implement a new assessment tool for individuals receiving long-term services and supports, including services for persons with intellectual and developmental disabilities. This entails the reassessment of everyone receiving these services in FY 2020-21 and FY 2021-22. A bottom line impact has been added to the forecast tables in these fiscal years to account for increased assessments. The Department includes three months of funding for reassessments in FY 2020-21 and the remaining nine months impact in FY 2021-22.

### **Exhibit G.1 through G.3: Appropriation Build**

Exhibit G.1 through G.3 build the appropriation for the current, request and out years based on Long Bill and special bill appropriations and changes made to spending authority through budget requests. The appropriation builds for each year then separates out the programs within each appropriation with assumed amounts attributed to each of them.

This exhibit also includes the Department's FY 2020-21 R-16 Case Management & State-Only Programs Modernization budget request, which moved State Only SLS and State Only case management into separate appropriations where before they were combined with the Medicaid-funded programs. In addition, the reorganization created a new Long Bill group for all of the state-only programs together, titled as sub- group 3 within OCL Long Bill Group 4.

To build the request and out-year appropriations the Department begins each exhibit with the prior year's final estimated appropriation for each program and adjusts the appropriation based on incremental amounts for each approved request or bill.

# Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The supplemental request is necessary because of changes in enrollment, per utilizer trends, and legislative policy implementations.

Table A1.1 - Calculation of Request									
FY 2020-21									
Item	Total Request	General Fund	Cash Funds	Reappropriated Funds	Federal Funds				
Adult Comprehensive Services (HCBS-DD)	0505.005.445		07.500.047		0000 054 000				
Total Request Adjusted Spending Authority	\$525,827,447 \$525,769,703	\$230,942,700 \$239,180,185	\$7,520,047 \$7,520,047	\$0 \$0	\$287,364,700 \$279,069,471				
Incremental Request	\$525,769,703 \$57,744	(\$8,237,485)	\$7,520,047	\$0	\$2/9,069,4/1				
•	\$57,744	(30,237,403)	φ0	30	\$6,293,229				
Adult Supported Living Services (HCBS-SLS) Total Request	\$69,031,947	\$29,702,197	\$1,603,791	\$0	\$37,725,959				
Adjusted Spending Authority	\$71,889,381	\$33,352,698	\$389,750	\$0	\$37,725,939				
Incremental Request	(\$2,857,434)	(\$3,650,501)	\$1,214,041	\$0	(\$420,974)				
Children's Extensive Support Services (HCBS-CES)									
Total Request	\$30,587,543	\$13,871,451	\$0	\$0	\$16,716,092				
Adjusted Spending Authority	\$29,961,574	\$14,082,730	\$0	\$0	\$15,878,844				
Incremental Request	\$625,969	(\$211,279)	\$0	\$0	\$837,248				
Children's Habilitation Residential Program (HCBS-CHRP)									
Total Request	\$6,434,595	\$2,918,089	\$0	\$0	\$3,516,506				
Adjusted Spending Authority	\$4,779,680	\$2,390,029	\$0	\$0	\$2,389,651				
Incremental Request	\$1,654,915	\$528,060	\$0	\$0	\$1,126,855				
Case Management									
Total Request	\$35,960,674	\$15,921,844	\$386,323	\$0	\$19,652,507				
Adjusted Spending Authority	\$40,420,895	\$18,862,830	\$81,163	\$0	\$21,476,902				
Incremental Request	(\$4,460,221)	(\$2,940,986)	\$305,160	\$0	(\$1,824,395)				
State Supported Living Services									
Total Request	\$9,949,675	\$8,228,509	\$1,721,166	\$0	\$0				
Adjusted Spending Authority	\$9,893,584	\$8,228,509	\$1,665,075	\$0	\$0				
Incremental Request	\$56,091	\$0	\$56,091	\$0	\$0				
State Supported Living Services Case Management									
Total Request	\$2,423,785	\$2,140,088	\$283,697	\$0	\$0				
Adjusted Spending Authority	\$2,416,320	\$2,140,088	\$276,232	\$0	\$0				
Incremental Request	\$7,465	\$0	\$7,465	\$0	\$0				
Family Support Services									
Total Request	\$7,569,764	\$7,136,298	\$433,466	\$0	\$0				
Adjusted Spending Authority  Incremental Request	\$7,515,264 \$54,500	\$7,136,298 \$0	\$378,966 \$54,500	\$0 \$0	\$0 \$0				
	\$34,300	20	\$34,300	20	20				
Preventive Dental Hygiene	0.4.004	#C4.004	60	\$0	60				
Total Request Adjusted Spending Authority	\$64,894 \$64,894	\$64,894 \$64,894	\$0 \$0	\$0 \$0	\$0 \$0				
Incremental Request	\$04,894	\$04,894	\$0	\$0	\$0				
1	50	\$0	90	<b>40</b>	<b>4</b> 0				
Eligibility Determination and Waiting List Management Total Request	\$3,170,663	\$2,802,904	\$0	\$0	\$367,759				
Adjusted Spending Authority	\$3,170,663	\$2,802,904	\$0	\$0	\$367,759				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Supported Employment Provider & Certification Reimbursement									
Total Request	\$303,158	\$303,158	\$0	\$0	\$0				
Adjusted Spending Authority	\$303,158	\$303,158	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Supported Employment Pilot		·	·						
Total Request	\$500,000	\$0	\$500,000	\$0	\$0				
Adjusted Spending Authority	\$500,000	\$0	\$500,000	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Office of Community Living Total									
Total Request	\$691,824,145	\$314,032,132	\$12,448,490	\$0	\$365,343,523				
Adjusted Spending Authority	\$696,685,116	\$328,544,323	\$10,811,233	\$0	\$357,329,560				
Incremental Request	(\$4,860,971)	(\$14,512,191)	\$1,637,257	\$0	\$8,013,963				

Table A1.2 - Calculation of Request									
FY 2021-22									
Item	Total Request	General Fund	Cash Funds	Reappropriated Funds	Federal Funds				
Adult Comprehensive Services (HCBS-DD)									
Total Request	\$556,642,250	\$277,521,124	\$800,001	\$0	\$278,321,125				
Adjusted Spending Authority	\$528,136,058	\$247,091,465	\$791,945	\$0	\$280,252,648				
Incremental Request	\$28,506,192	\$30,429,659	\$8,056	\$0	(\$1,931,523)				
Adult Supported Living Services (HCBS-SLS)									
Total Request	\$73,154,951	\$34,809,510	\$1,767,966	\$0	\$36,577,475				
Adjusted Spending Authority	\$72,230,580	\$33,523,841	\$389,554	\$0	\$38,317,185				
Incremental Request	\$924,371	\$1,285,669	\$1,378,412	\$0	(\$1,739,710)				
Children's Extensive Support Services (HCBS-CES)									
Total Request	\$31,252,044	\$15,626,022	\$0	\$0	\$15,626,022				
Adjusted Spending Authority	\$30,014,841	\$14,109,363	\$0	\$0	\$15,905,478				
Incremental Request	\$1,237,203	\$1,516,659	\$0	\$0	(\$279,456)				
Children's Habilitation Residential Program (HCBS-CHRP)									
Total Request	\$7,133,218	\$3,566,609	\$0	\$0	\$3,566,609				
Adjusted Spending Authority	\$4,824,927	\$2,412,653	\$0	\$0	\$2,412,274				
Incremental Request	\$2,308,291	\$1,153,956	\$0	\$0	\$1,154,335				
Case Management									
Total Request	\$39,837,569	\$19,490,575	\$428,210	\$0	\$19,918,784				
Adjusted Spending Authority	\$40,386,832	\$18,845,933	\$81,114	\$0	\$21,459,785				
Incremental Request	(\$549,263)	\$644,642	\$347,096	\$0	(\$1,541,001)				
State Supported Living Services									
Total Request	\$9,942,232	\$9,305,501	\$636,731	\$0	\$0				
Adjusted Spending Authority	\$9,884,576	\$8,221,066	\$1,663,510	\$0	\$0				
Incremental Request	\$57,656	\$1,084,435	(\$1,026,779)	\$0	\$0				
State Supported Living Services Case Management									
Total Request	\$2,421,824	\$2,138,127	\$283,697	\$0	\$0				
Adjusted Spending Authority	\$2,414,101	\$2,138,127	\$275,974	\$0	\$0				
Incremental Request	\$7,723	\$0	\$7,723	\$0	\$0				
Family Support Services									
Total Request	\$7,501,416	\$7,130,254	\$371,162	\$0	\$0				
Adjusted Spending Authority	\$7,508,899	\$7,130,254	\$378,645	\$0	\$0				
Incremental Request	(\$7,483)	\$0	(\$7,483)	\$0	\$0				
Preventive Dental Hygiene									
Total Request	\$64,839	\$64,839	\$0	\$0	\$0				
Adjusted Spending Authority	\$64,839	\$64,839	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Eligibility Determination and Waiting List Management									
Total Request	\$3,167,978	\$2,800,219	\$0	\$0	\$367,759				
Adjusted Spending Authority	\$3,167,978	\$2,800,219	\$0	\$0	\$367,759				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Supported Employment Provider & Certification Reimbursement									
Total Request	\$303,158	\$303,158	\$0	\$0	\$0				
Adjusted Spending Authority	\$303,158	\$303,158	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Supported Employment Pilot									
Total Request	\$575,000	\$0	\$575,000	\$0	\$0				
Adjusted Spending Authority	\$575,000	\$0	\$575,000	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Office of Community Living Total									
Total Request	\$731,996,479	\$372,755,938	\$4,862,767	\$0	\$354,377,774				
Adjusted Spending Authority	\$699,511,789	\$336,640,918	\$4,155,742	\$0	\$358,715,129				
Incremental Request	\$32,484,690	\$36,115,020	\$707,025	\$0	(\$4,337,355)				

Table A1.3 - Calculation of Request									
FY 2022-23									
Item	Total Request	General Fund	Cash Funds	Reappropriated Funds	Federal Funds				
Adult Comprehensive Services (HCBS-DD)									
Total Request	\$588,952,499	\$294,476,248	\$1	\$0	\$294,476,250				
Adjusted Spending Authority	\$529,515,154	\$248,279,761 \$46,196,487	\$594,449 (\$594,448)	\$0 \$0	\$280,640,944 \$13,835,306				
Incremental Request	\$59,437,345	\$46,196,487	(\$394,448)	20	\$13,835,306				
Adult Supported Living Services (HCBS-SLS)									
Total Request Adjusted Spending Authority	\$75,734,927 \$72,379,149	\$36,099,498 \$33,598,125	\$1,767,966 \$389,554	\$0 \$0	\$37,867,463 \$38,391,470				
Incremental Request	\$3,355,778	\$2,501,373	\$1,378,412	\$0	(\$524,007)				
·	\$5,555,776	32,301,373	\$1,576,412	30	(3324,007)				
Children's Extensive Support Services (HCBS-CES)	\$32,586,264	\$16,293,132	\$0	\$0	\$16,293,132				
Total Request Adjusted Spending Authority	\$30,044,126	\$14,124,005	\$0	\$0	\$15,920,121				
Incremental Request	\$2,542,138	\$2,169,127	\$0	\$0	\$373,011				
Children's Habilitation Residential Program (HCBS-CHRP)	\$2,5 12,130	92,102,127	40	90	\$373,011				
Total Request	\$7,133,218	\$3,566,609	\$0	\$0	\$3,566,609				
Adjusted Spending Authority	\$4,824,927	\$2,412,653	\$0	\$0	\$2,412,274				
Incremental Request	\$2,308,291	\$1,153,956	\$0	\$0	\$1,154,335				
Case Management									
Total Request	\$38,123,508	\$18,633,544	\$428,210	0	\$19,061,754				
Adjusted Spending Authority	\$40,386,832	\$18,845,933	\$81,114	\$0	\$21,459,785				
Incremental Request	(\$2,263,324)	(\$212,389)	\$347,096	\$0	(\$2,398,031)				
State Supported Living Services									
Total Request	\$8,221,066	\$8,221,066	\$0	\$0	\$0				
Adjusted Spending Authority	\$8,221,066	\$8,221,066	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
State Supported Living Services Case Management									
Total Request	\$2,138,127	\$2,138,127	\$0	\$0	\$0				
Adjusted Spending Authority	\$2,138,127	\$2,138,127	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Family Support Services									
Total Request	\$7,130,254	\$7,130,254	\$0	\$0	\$0				
Adjusted Spending Authority	\$7,130,254	\$7,130,254	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Preventive Dental Hygiene									
Total Request	\$64,839	\$64,839	\$0	\$0	\$0				
Adjusted Spending Authority	\$64,839	\$64,839	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Eligibility Determination and Waiting List Management									
Total Request	\$3,167,978	\$2,800,219	\$0	\$0	\$367,759				
Adjusted Spending Authority	\$3,167,978	\$2,800,219	\$0	\$0	\$367,759				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Supported Employment Provider & Certification Reimbursement									
Total Request	\$303,158	\$303,158	\$0	\$0	\$0				
Adjusted Spending Authority	\$303,158	\$303,158	\$0	\$0	\$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Supported Employment Pilot									
Total Request	\$0	\$0	\$0	\$0	\$0				
Adjusted Spending Authority	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0				
Incremental Request	\$0	\$0	\$0	\$0	\$0				
Office of Community Living Total	0000 000	6000 FB 6	60.40		0001 000				
Total Request	\$763,555,838 \$698,175,610	\$389,726,694 \$337,918,140	\$2,196,177 \$1,065,117	\$0 \$0	\$371,632,967 \$359,192,353				
Adjusted Spending Authority									
Incremental Request	\$65,380,228	\$51,808,554	\$1,131,060	\$0	\$12,440,614				

Table A.2 - Calculation of Fund Splits									
FY 2020-21									
Item	Total Request	General Fund	Cash Funds	Federal Funds	FFP	Source			
Adult Comprehensive Services (HCBS-DD)									
Medicaid Services <sup>(1)(2)</sup>	\$525,827,447	\$230,942,700	\$7,520,047	\$287,364,700	54.65%	Table B.1 Row M			
Subtotal	\$525,827,447	\$230,942,700	\$7,520,047	\$287,364,700	54.65%				
Adult Supported Living Services (HCBS-SLS)									
Medicaid Services	\$65,495,473	\$29,702,197	\$0	\$35,793,276	54.65%	Table A.6.5 Row C			
Medicaid Services (Buy-In) <sup>(3)</sup>	\$3,536,474	\$0	\$1,603,791	\$1,932,683	54.65%	Table A.6.5 Row B			
Subtotal	\$69,031,947	\$29,702,197	\$1,603,791	\$37,725,959	54.65%				
Children's Extensive Support Services (HCBS-CES)									
Subtotal	\$30,587,543	\$13,871,451	\$0	\$16,716,092	54.65%	Table B.1 Row M			
Children's Habilitation Residential Program (HCBS-CHRP)									
Subtotal	\$6,434,595	\$2,918,089	\$0	\$3,516,506	54.65%	Table B.1 Row M			
Case Management									
Medicaid Services	\$35,108,806	\$15,921,844	\$0	\$19,186,962	54.65%	Table F.1 Row E			
Medicaid Services (Buy-In) <sup>(3)</sup>	\$851,868	\$0	\$386,323	\$465,545	54.65%	Table A.6.5 Row B			
Subtotal	\$35,960,674	\$15,921,844	\$386,323	\$19,652,507	54.65%				
Eligibility Determination and Waiting List Management									
Medical Eligibility Determination	\$3,170,663	\$2,802,904	\$0	\$367,759	11.60%	Table G.1 Row AR			
Subtotal	\$3,170,663	\$2,802,904	\$0	\$367,759	11.60%				
State Only Programs									
Family Support Services <sup>(2)(4)</sup>	\$7,569,764	\$7,136,298	\$433,466	\$0	0.00%	Table G.1 Row BI			
State Supported Living Services <sup>(2)</sup>	\$9,949,675	\$8,228,509	\$1,721,166	\$0	0.00%	Table G.1 Row BN			
State Supported Living Services Case Management <sup>(2)</sup>	\$2,423,785	\$2,140,088	\$283,697	\$0	0.00%	Table G.1 Row BS			
Preventive Dental Hygiene	\$64,894	\$64,894	\$0	\$0	0.00%	Table G.1 Row BW			
Supported Employment Provider & Certification Reimbursement	\$303,158	\$303,158	\$0	\$0	0.00%	Table G.1 Row CB			
Supported Employment Pilot <sup>(2)</sup>	\$500,000	\$0	\$500,000	\$0	0.00%	Table G.1 Row CE			
Subtotal	\$20,811,276	\$17,872,947	\$2,938,329	\$0	0.00%				
Grand Total	\$691,824,145	\$314,032,132	\$12,448,490	\$365,343,523					

Definitions: FFP: Federal financial participation rate

<sup>(1)</sup> Cash funds sourced from the Health Care Expansion Fund.

<sup>(2)</sup> Cash funds sourced from the Intellectual and Developmental Disabilities Cash Fund.

<sup>(3)</sup> Cash funds sourced from the Healthcare Affordability & Sustainability Fee Cash Fund. Premiums from clients in Buy-In programs are credited to the Medical Services Premiums line item, and as such are excluded from this request.

<sup>(4)</sup> Cash funds from the Family Support Loan Program Fund

	Table A.3 -	Calculation of Fund S	plits						
FY 2021-22									
Item	Total Request	General Fund	Cash Funds	Federal Funds	FFP	Source			
Adult Comprehensive Services (HCBS-DD)									
Medicaid Services <sup>(1)(2)</sup>	\$556,642,250	\$277,521,124	\$800,001	\$278,321,125	50.00%	Table B.1 Row N			
Subtotal	\$556,642,250	\$277,521,124	\$800,001	\$278,321,125	50.00%	Table B.1 Row N			
Adult Supported Living Services (HCBS-SLS)									
Medicaid Services (Standard)	\$69,619,020	\$34,809,510	\$0	\$34,809,510	50.00%	Table A.6.6 Row C			
Medicaid Services (Buy-In) <sup>(3)</sup>	\$3,535,931	\$0	\$1,767,966	\$1,767,965	50.00%	Table A.6.6 Row B			
Subtotal	\$73,154,951	\$34,809,510	\$1,767,966	\$36,577,475	50.00%				
Children's Extensive Support Services (HCBS-CES)									
Subtotal	\$31,252,044	\$15,626,022	\$0	\$15,626,022	50.00%	Table B.1 Row N			
Children's Habilitation Residential Program (HCBS-CHRP)									
Subtotal	\$7,133,218	\$3,566,609	\$0	\$3,566,609	50.00%	Table B.1 Row N			
Case Management									
Medicaid Services (Standard)	\$38,981,149	\$19,490,575	\$0	\$19,490,574	50.00%	Table F.1 Row I			
Medicaid Services (Buy-In) <sup>(3)</sup>	\$856,420	\$0	\$428,210	\$428,210	50.00%	Table A.6.6 Row B			
Subtotal	\$39,837,569	\$19,490,575	\$428,210	\$19,918,784	50.00%				
Eligibility Determination and Waiting List Management									
Medical Eligibility Determination	\$3,167,978	\$2,800,219	\$0	\$367,759	11.61%	Table G.2 Row Y			
Subtotal	\$3,167,978	\$2,800,219	\$0	\$367,759	11.61%				
Other Programs									
Family Support Services (2)(4)	\$7,501,416	\$7,130,254	\$371,162	\$0	0.00%	Table G.2 Row AI			
State Supported Living Services <sup>(2)</sup>	\$9,942,232	\$9,305,501	\$636,731	\$0	0.00%	Table G.2 Row AM			
State Supported Living Services Case Management <sup>(2)</sup>	\$2,421,824	\$2,138,127	\$283,697	\$0	0.00%	Table G.2 Row AP			
Preventive Dental Hygiene	\$64,839	\$64,839	\$0	\$0	0.00%	Table G.2 Row AS			
Supported Employment Provider & Certification Reimbursement	\$303,158	\$303,158	\$0	\$0	0.00%	Table G.2 Row AU			
Supported Employment Pilot <sup>(2)</sup>	\$575,000	\$0	\$575,000	\$0	0.00%	Table G.2 Row AY			
Subtotal	\$20,808,469	\$18,941,879	\$1,866,590	\$0	0.00%				
Grand Total	\$731,996,479	\$372,755,938	\$4,862,767	\$354,377,774					

Definitions: FFP: Federal financial participation rate

<sup>(1)</sup> Cash funds sourced from the Health Care Expansion Fund.

<sup>(2)</sup> Cash funds sourced from the Intellectual and Developmental Disabilities Cash Fund.

<sup>(3)</sup> Cash funds sourced from the Healthcare Affordability & Sustainability Fee Cash Fund. Premiums from clients in Buy-In programs are credited to the Medical Services Premiums line item, and as such are excluded from this request.

<sup>(4)</sup> Cash funds from the Family Support Loan Program Fund

	Table A.4 -	Calculation of Fund S	plits						
FY 2022-23									
Item	Total Request	General Fund	Cash Funds	Federal Funds	FFP	Source			
Adult Comprehensive Services (HCBS-DD)									
Medicaid Services <sup>(1)(2)</sup>	\$588,952,499	\$294,476,248	\$1	\$294,476,250	50.00%	Table B.1 Row O			
Subtotal	\$588,952,499	\$294,476,248	\$1	\$294,476,250	50.00%	Table B.1 Row O			
Adult Supported Living Services (HCBS-SLS)									
Medicaid Services (Standard)	\$72,198,996	\$36,099,498	\$0	\$36,099,498	50.00%	Table A.6.7 Row C			
Medicaid Services (Buy-In) <sup>(3)</sup>	\$3,535,931	\$0	\$1,767,966	\$1,767,965	50.00%	Table A.6.7 Row B			
Subtotal	\$75,734,927	\$36,099,498	\$1,767,966	\$37,867,463	50.00%				
Children's Extensive Support Services (HCBS-CES)									
Subtotal	\$32,586,264	\$16,293,132	\$0	\$16,293,132	50.00%	Table B.1 Row O			
Children's Habilitation Residential Program (HCBS-CHRP)									
Subtotal	\$7,133,218	\$3,566,609	\$0	\$3,566,609	50.00%	Table B.1 Row O			
Case Management									
Medicaid Services (Standard)	\$37,267,088	\$18,633,544	\$0	\$18,633,544	50.00%	Table F.1 Row K			
Medicaid Services (Buy-In) <sup>(3)</sup>	\$856,420	\$0	\$428,210	\$428,210	50.00%	Table A.6.7 Row B			
Subtotal	\$38,123,508	\$18,633,544	\$428,210	\$19,061,754	50.00%				
Eligibility Determination and Waiting List Management									
Medical Eligibility Determination	\$3,167,978	\$2,800,219	\$0	\$367,759	11.61%	Table G.3 Row P			
Subtotal	\$3,167,978	\$2,800,219	\$0	\$367,759	11.61%				
Other Programs									
Family Support Services (2)(4)	\$7,130,254	\$7,130,254	\$0	\$0	0.00%	Table G.3 Row X			
State Supported Living Services <sup>(2)</sup>	\$8,221,066	\$8,221,066	\$0	\$0	0.00%	Table G.3 Row AB			
State Supported Living Services Case Management <sup>(2)</sup>	\$2,138,127	\$2,138,127	\$0	\$0	0.00%	Table G.3 Row AG			
Preventive Dental Hygiene	\$64,839	\$64,839	\$0	\$0	0.00%	Table G.3 Row AI			
Supported Employment Provider & Certification Reimbursement	\$303,158	\$303,158	\$0	\$0	0.00%	Table G.3 Row AL			
Supported Employment Pilot <sup>(2)</sup>	\$0	\$0	\$0	\$0	0.00%	Table G.3 Row AO			
Subtotal	\$17,857,444	\$17,857,444	\$0	\$0	0.00%				
Grand Total	\$763,555,838	\$389,726,694	\$2,196,177	\$371,632,967					

Definitions: FFP: Federal financial participation rate

<sup>(1)</sup> Cash funds sourced from the Health Care Expansion Fund.

<sup>(2)</sup> Cash funds sourced from the Intellectual and Developmental Disabilities Cash Fund.

<sup>(3)</sup> Cash funds sourced from the Healthcare Affordability & Sustainability Fee Cash Fund. Premiums from clients in Buy-In programs are credited to the Medical Services Premiums line item, and as such are excluded from this request.

<sup>(4)</sup> Cash funds from the Family Support Loan Program Fund

		Table A.5 -	Office of Comm	unity Living Cash F	unds Report						
		FY 2020-21			FY 2021-22			FY 2022-23			
Cash Fund	Base Spending Authority	Estimate	Change	Base Spending Authority	Estimate	Change	Base Spending Authority	Estimate	Change		
Medicaid Services											
Adult Comprehensive Services (HCBS-DD)											
Health Care Expansion Fund	\$1	\$1	\$0	\$1	\$1	\$0	\$1	\$1	\$0		
Intellectual and Developmental Disabilities Cash Fund	\$6,925,598	\$7,520,046	\$594,448	\$197,496	\$800,000	\$602,504	\$0	\$0	\$0		
Healthcare Affordability & Sustainability Fee Cash Fund	\$406,951	\$0	(\$406,951)	\$406,951	\$0	(\$406,951)	\$406,951	\$0	(\$406,951)		
Family Support Loan Program Fund	\$187,497	\$0	(\$187,497)	\$187,497	\$0	(\$187,497)	\$187,497	\$0	(\$187,497)		
Subtotal	\$7,520,047	\$7,520,047	\$0	\$791,945	\$800,001	\$8,056	\$594,449	\$1	(\$594,448)		
Adult Supported Living Services (HCBS-SLS)											
Healthcare Affordability & Sustainability Fee Cash Fund	\$389,750	\$1,603,791	\$1,214,041	\$389,554	\$1,767,966	\$1,378,412	\$389,554	\$1,767,966	\$1,378,412		
Subtotal	\$389,750	\$1,603,791	\$1,214,041	\$389,554	\$1,767,966	\$1,378,412	\$389,554	\$1,767,966	\$1,378,412		
Case Management											
Healthcare Affordability & Sustainability Fee Cash Fund	\$81,163	\$386,323	\$305,160	\$81,114	\$428,210	\$347,096	\$81,114	\$428,210	\$347,096		
Subtotal	\$81,163	\$386,323	\$305,160	\$81,114	\$428,210	\$347,096	\$81,114	\$428,210	\$347,096		
State Only Programs	•				•	•		•			
State Only Supported Living Services											
Intellectual and Developmental Disabilities Cash Fund	\$1,665,075	\$1,721,166	\$56,091	\$1,663,510	\$636,731	(\$1,026,779)	\$0	\$0	\$0		
Subtotal	\$1,665,075	\$1,721,166	\$56,091	\$1,663,510	\$636,731	(\$1,026,779)	\$0	\$0	\$0		
State Only Case Management											
Intellectual and Developmental Disabilities Cash Fund	\$276,232	\$283,697	\$7,465	\$275,974	\$283,697	\$7,723	\$0	\$0	\$0		
Subtotal	\$276,232	\$283,697	\$7,465	\$275,974	\$283,697	\$7,723	\$0	\$0	\$0		
Family Support Services Program											
Family Support Loan Program Fund	\$0	\$62,304	\$62,304	\$0	\$0	\$0	\$0	\$0	\$0		
Intellectual and Developmental Disabilities Cash Fund	\$378,966	\$371,162	(\$7,804)	\$378,645	\$371,162	(\$7,483)	\$0	\$0	\$0		
Subtotal	\$378,966	\$433,466	\$54,500	\$378,645	\$371,162	(\$7,483)	\$0	\$0	\$0		
Supported Employment Pilot											
Intellectual and Developmental Disabilities Cash Fund	\$500,000	\$500,000	\$0	\$575,000	\$575,000	\$0	\$0	\$0	\$0		
Subtotal	\$500,000	\$500,000	\$0	\$575,000	\$575,000	\$0	\$0	\$0	\$0		
Total Cash Funds	\$10,811,233	\$12,448,490	\$1,637,257	\$4,155,742	\$4,862,767	\$707,025	\$1,065,117	\$2,196,177	\$1,131,060		

	Table A.6.1 - Historic Expenditure on Buy-In HCBS-SLS Programs										
Row	Fiscal Year	HCBS-SLS	TCM	QA/UR	SIS	Total					
A	FY 2008-09	\$0	\$0	\$0	\$0	\$0					
В	FY 2009-10	\$0	\$0	\$0	\$0	\$0					
C	FY 2010-11	\$0	\$0	\$0	\$0	\$0					
D	FY 2011-12	\$0	\$0	\$0	\$0	\$0					
Е	FY 2012-13	\$0	\$0	\$0	\$0	\$0					
F	FY 2013-14	\$0	\$0	\$0	\$0	\$0					
G	FY 2014-15	\$0	\$0	\$0	\$0	\$0					
Н	FY 2015-16	\$0	\$0	\$0	\$0	\$0					
I	FY 2016-17	\$0	\$0	\$0	\$0	\$0					
J	FY 2017-18	\$197,857	\$248,662	\$1,371	\$0	\$447,890					
K	FY 2018-19	\$412,388	\$105,517	\$17,141	\$0	\$535,046					
L	FY 2019-20	\$1,935,553	\$383,241	\$14,614	\$0	\$2,333,408					
M	Estimated FY 2020-21	\$3,536,474	\$731,627	\$118,941	\$1,300	\$4,388,342					
N	Estimated FY 2021-22	\$3,535,931	\$731,627	\$118,941	\$5,852	\$4,392,351					
О	Estimated FY 2022-23	\$3,535,931	\$731,627	\$118,941	\$5,852	\$4,392,351					

	Table A.6.2 - FY 2020-21 HB 16-1321 Buy-In Expansion Cost and Caseload Estimate								
Row	Item	HCBS-SLS	TCM	QA/UR	SIS	Notes			
A	Previous Year Average Monthly Enrollment	220	153	106	0	FY 2019-20 enrollment actuals			
В	Selected Trend	85.03%	123.53%	67.92%	N/A	Based on FY 2019-20 Growth			
С	Estimated Average Monthly Enrollment	407	342	178	4	Row A * (1 + Row B)			
D	Anticipated Buy-In Cost/Client	\$8,687.79	\$2,139.26	\$668.21	\$325.09	Projected FY 2020-21 Cost Per Client			
Е	Anticipated Buy-in Cost	\$3,536,474	\$731,627	\$118,941	\$1,300	Row C * Row D			

		Table A.o	6.3 - FY 2021-22 HI	3 16-1321 Buy-In E	xpansion Cost and	Caseload Estimate
Row	Item	HCBS-SLS	TCM	QA/UR	SIS	Notes
A	Previous Year Average Monthly Enrollment	407	342	178	4	Table A.6.2 Row C
В	Selected Trend	0.00%	0.00%	0.00%	350.00%	Assuming stable enrollment
C	Estimated Average Monthly Enrollment	407	342	178	18	Row A * (1 + Row B)
D	Anticipated Buy-In Cost/Client	\$8,687.79	\$2,139.26	\$668.21	\$325.09	Based off of fixed Rates
Е	Anticipated Buy-in Cost	\$3,535,931	\$731,627	\$118,941	\$5,852	Row C * Row D

		Table A.6	6.4 - FY 2022-23 HI	3 16-1321 Buy-In E	xpansion Cost and (	Caseload Estimate
Row	Item	HCBS-SLS	TCM	QA/UR	SIS	Notes
A	Previous Year Average Monthly Enrollment	407	342	178	18	Table A.6.3 Row C
В	Selected Trend	0.00%	0.00%	0.00%	0.00%	Assuming stable enrollment
C	Estimated Average Monthly Enrollment	407	342	178	18	Row A * (1 + Row B)
D	Anticipated Buy-In Cost/Client	\$8,687.79	\$2,139.26	\$668.21	\$325.09	Based off of fixed Rates
E	Anticipated Buy-in Cost	\$3,535,931	\$731,627	\$118,941	\$5,852	Row C * Row D

	Table A.6.5 - FY 2020-21 Buy-In Breakout							
Row	Row Item SLS TCM QA/UR/SIS Source							
Α	HCBS-SLS Total Request	\$69,031,947	\$29,772,157	\$6,188,517	Table B.1 Row M, Table F.1 Row E			
В	HCBS-SLS Buy-In	\$3,536,474	\$731,627	\$120,241	Table A.6.2 Row E			
С	HCBS-SLS Standard	\$65,495,473	\$0	\$6,068,276	Row A - Row B			

	Table A.6.6 - FY 2021-22 Buy-In Breakout							
Row	Row Item SLS TCM QA/UR/SIS Source							
Α	HCBS-SLS Total Request	\$73,154,951	\$31,210,152	\$8,627,417	Table B.1 Row N, Table F.1 Row I			
В	HCBS-SLS Buy-In	\$3,535,931	\$731,627	\$124,793	Table A.6.3 Row E			
С	HCBS-SLS Standard	\$69,619,020	\$30,478,525	\$8,502,624	Row A - Row B			

	Table A.6.7 - FY 2022-23 Buy-In Breakout							
Row	Row Item SLS TCM QA/UR/SIS Source							
Α	HCBS-SLS Total Request	\$75,734,927	\$32,645,819	\$5,477,689	Table B.1 Row O, Table F.1 Row K			
В	HCBS-SLS Buy-In	\$3,535,931	\$731,627	\$124,793	Table A.6.4 Row E			
С	HCBS-SLS Standard	\$72,198,996	\$31,914,192	\$5,352,896	Row A - Row B			

		Table B.1 - Division	for Intellectual and Developme	ntal Disabilities (DIDD) Total P	rogram Expenditure and Forec	ast	
Row	Fiscal Year	HCBS - Waiver for Persons with Developmental Disabilities (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS) (1)	HCBS - Children's Extensive Support Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	HCBS - Targeted Case Management (TCM) <sup>(1)</sup>	Total
A	FY 2008-09	\$223,362,025	\$46,391,718	\$6,913,410	N/A	\$13,848,967	\$290,516,120
В	FY 2009-10	\$253,798,612	\$37,399,799	\$7,158,025	N/A	\$16,484,735	\$314,841,171
C	FY 2010-11	\$273,096,876	\$37,579,497	\$7,956,073	N/A	\$19,114,672	\$337,747,118
D	FY 2011-12	\$264,899,518	\$37,030,578	\$7,361,601	\$4,167,690	\$16,875,522	\$330,334,909
E	FY 2012-13	\$261,817,957	\$37,273,663	\$7,015,707	\$3,410,635	\$16,117,073	\$325,635,035
F	FY 2013-14	\$282,475,249	\$39,288,448	\$9,125,302	\$3,089,752	\$17,441,960	\$351,420,711
G	FY 2014-15	\$314,878,204	\$44,654,327	\$14,967,843	\$2,793,542	\$20,230,023	\$397,523,939
Н	FY 2015-16	\$330,217,987	\$53,275,897	\$21,074,423	\$2,084,490	\$22,103,255	\$428,756,052
I	FY 2016-17	\$347,057,913	\$58,395,990	\$25,113,943	\$1,889,200	\$22,242,358	\$454,699,404
J	FY 2017-18	\$372,706,454	\$64,188,404	\$25,698,431	\$1,556,384	\$30,164,217	\$494,313,890
K	FY 2018-19	\$422,166,719	\$64,028,039	\$23,559,173	\$1,747,427	\$29,560,074	\$541,061,432
L	FY 2019-20	\$493,903,708	\$67,042,737	\$28,486,561	\$1,826,561	\$30,231,811	\$621,491,378
M	Estimated FY 2020-21	\$525,827,447	\$69,031,947	\$30,587,543	\$6,434,595	\$35,960,674	\$667,842,206
N	Estimated FY 2021-22	\$556,642,250	\$73,154,951	\$31,252,044	\$7,133,218	\$39,837,569	\$708,020,032
О	Estimated FY 2022-23	\$588,952,499	\$75,734,927	\$32,586,264	\$7,133,218	\$38,123,508	\$742,530,416

		Table B.1.2- Percent Ch	ange in Division for Intellectua	l and Developmental Disabilitie	s (DIDD) Total Program Expen	diture	
Row	Fiscal Year	HCBS - Waiver for Persons with Developmental Disabilities (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS) <sup>(1)</sup>	HCBS - Children's Extensive Support Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	HCBS - Targeted Case Management (TCM) <sup>(1)</sup>	Total
A	FY 2008-09	10.06%	17.13%	17.29%		1.37%	10.84%
В	FY 2009-10	13.63%	-19.38%	3.54%		19.03%	8.37%
C	FY 2010-11	7.60%	0.48%	11.15%		15.95%	7.28%
D	FY 2011-12	-3.00%	-1.46%	-7.47%		-11.71%	-2.19%
Е	FY 2012-13	-1.16%	0.66%	-4.70%	-18.16%	-4.49%	-1.42%
F	FY 2013-14	7.89%	5.41%	30.07%	-9.41%	8.22%	7.92%
G	FY 2014-15	11.47%	13.66%	64.03%	-9.59%	15.98%	13.12%
Н	FY 2015-16	4.87%	19.31%	40.80%	-25.38%	9.26%	7.86%
I	FY 2016-17	5.10%	9.61%	19.17%	-9.37%	0.63%	6.05%
J	FY 2017-18	7.39%	9.92%	2.33%	-17.62%	35.62%	8.71%
K	FY 2018-19	13.27%	-0.25%	-8.32%	12.27%	-2.00%	9.46%
L	FY 2019-20	16.99%	4.71%	20.91%	4.53%	2.27%	14.87%
M	Estimated FY 2020-21	6.46%	2.97%	7.38%	252.28%	18.95%	7.46%
N	Estimated FY 2021-22	5.86%	5.97%	2.17%	10.86%	10.78%	6.02%
О	Estimated FY 2022-23	5.80%	3.53%	4.27%	0.00%	-4.30%	4.87%

<sup>(1)</sup> Program expenditure amounts do not include State Only Programs - total program expenditure shown on Tables A.2 - A.4

	Table C.1 - FY 2020-21 Projected Expenditure								
Row	Item	HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD)	Disabilities Supported	HCBS - Developmental Disabilities Children's Extensive Services Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total	Source/Calculation		
A	Adjusted Appropriation	\$525,769,703	\$71,889,381	\$29,961,574	\$4,779,680	\$632,400,338	Table G.1, See Footnote (1)		
В	Projected FPE	6,790.40	4,378.50	1,909.38	92.57	N/A	Table D.3.5 Row G		
С	Projected Per FPE Expenditure	\$77,436.89	\$15,766.12	\$16,019.62	\$69,510.59	N/A	Table D.3.3 Row M		
D	Total Projected Expenditure	\$525,827,447	\$69,031,947	\$30,587,543	\$6,434,595	\$631,881,532	Row B * Row C		
E	Estimated Over/(Under-expenditure)	\$57,744	(\$2,857,434)	\$625,969	\$1,654,915	(\$518,806)	Row D - Row A		

	Table C.2 - FY 2021-22 Projected Expenditure								
Row	Item	HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD)	HCBS - Developmental Disabilities Supported Living Services Waiver (HCBS-SLS)	Disabilities Children's	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total	Source/Calculation		
A	Adjusted Appropriation	\$528,136,058	\$72,230,580	\$30,014,841	\$4,824,927	\$635,206,406	Table G.2, See Footnote (1)		
В	Projected FPE	7,198.36	4,524.27	1,988.98	102.09	N/A	Table D.3.6 Row G		
С	Projected Per FPE Expenditure	\$77,329.04	\$16,169.45	\$15,712.60	\$69,871.86	N/A	Table D.3.3 Row N		
D	Total Projected Expenditure	\$556,642,250	\$73,154,951	\$31,252,044	\$7,133,218	\$668,182,463	Row B * Row C		
E	Estimated Over/(Under-expenditure)	\$28,506,192	\$924,371	\$1,237,203	\$2,308,291	\$32,976,057	Row D - Row A		

	Table C.3 - FY 2022-23 Projected Expenditure								
Row	Item	HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD)	HCBS - Developmental Disabilities Supported Living Services Waiver (HCBS-SLS)	HCBS - Developmental Disabilities Children's Extensive Services Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total	Source/Calculation		
A	Adjusted Appropriation	\$529,515,154	\$72,379,149	\$30,044,126	\$4,824,927	\$636,763,356	Table G.3, See Footnote (1)		
В	Projected FPE	7,606.32	4,674.64	2,072.03	102.09	N/A	Table D.3.7 Row G		
С	Projected Per FPE Expenditure	\$77,429.36	\$16,201.23	\$15,726.73	\$69,871.86	N/A	Table D.3.3 Row O		
D	Total Projected Expenditure	\$588,952,499	\$75,734,927	\$32,586,264	\$7,133,218	\$704,406,908	Row B * Row C		
E	Estimated Over/(Under-expenditure)	\$59,437,345	\$3,355,778	\$2,542,138	\$2,308,291	\$67,643,552	Row D - Row A		

<sup>(1)</sup> All appropriation amounts above are for Medicaid funded individuals only and do not include state-only funded individuals, clients served at regional centers, payments made through client cash sources, or administrative costs.

Tal	Table D.1.1 -FY 2020-21 HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD) Maximum Enrollment Forecast						
Row	Item	HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD)					
A	Prior Year Maximum Enrollment	6,891					
В	Base Trend Increase	0.00%					
С	Initial Estimated FY 2020-21 Enrollment	6,891					
	Bottom Line Adjustments						
D	Transitions from Institutions	41					
Е	Aging Caregiver Enrollments	47					
F	Emergency Enrollments	189					
G	Foster Care Transitions	43					
Н	Youth Transitions	91					
I	Total Bottom Line Adjustments	411					
J	Estimated FY 2020-21 Maximum Enrollment	7,302					
K	Churn and Enrollment Lag Adjustment <sup>(1)</sup>	96.27%					
L	Estimated Year End-Enrollment	7,030					

<sup>(1)</sup> Accounts for clients entering and leaving waiver, and the time necessary to enroll an individual with an HCBS-DD PAR once authorized by the Department.

Tal	Table D.1.2 -FY 2021-22 HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD) Maximum Enrollment Forecast							
Row	Item	HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD)						
Α	Estimated FY 2020-21 Maximum Enrollment	7,302						
В	Base Trend Increase	0.00%						
С	Initial Estimated FY 2021-22 Enrollment	7,302						
	Bottom Line Adjustments							
D	Transitions from Institutions	41						
E	Aging Caregiver Enrollments	47						
F	Emergency Enrollments	189						
G	Foster Care Transitions	43						
Н	Youth Transitions	91						
I	Total Bottom Line Adjustments	411						
J	Estimated FY 2020-21 Maximum Enrollment	7,713						
K	Churn and Enrollment Lag Adjustment	96.47%						
L	Estimated Year End-Enrollment	7,441						

<sup>(1)</sup> Accounts for clients entering and leaving waiver, and the time necessary to enroll an individual with an HCBS-DD PAR once authorized by the Department.

Tal	Table D.1.3 - FY 2022-23 HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD) Maximum Enrollment Forecast							
Row	Item	HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD)						
Α	Estimated FY 2020-21 Maximum Enrollment	7,713						
В	Base Trend Increase	0.00%						
С	Initial Estimated FY 2022-23 Enrollment	7,713						
	Bottom Line Adjustments							
D	Transitions from Institutions	41						
Е	Aging Caregiver Enrollments	47						
F	Emergency Enrollments	189						
G	Foster Care Transitions	43						
Н	Youth Transitions	91						
I	Total Bottom Line Adjustments	411						
J	Estimated FY 2022-23 Maximum Enrollment	8,124						
K	Churn and Enrollment Lag Adjustment	96.65%						
L	Estimated Year End-Enrollment	7,852						

<sup>(1)</sup> Accounts for clients entering and leaving waiver, and the time necessary to enroll an individual with an HCBS-DD PAR once authorized by the Department.

			Table D.2 - DIDD Average	Monthly Enrollment vs. Full Program Equ	iivalent (FPE)		
Row		Fiscal Year	HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD)	HCBS - Developmental Disabilities Supported Living Services Waiver (HCBS-SLS)	HCBS - Developmental Disabilities Children's Extensive Services Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total
A		Average Monthly Enrollment	4,390	2,992	400	-	7,782
В	FY 2008-09	FPE	3,854	2,369	328	-	6,551
C		FPE as a Percentage of Average Monthly Enrollment	87.79%	79.18%	82.00%	-	84.18%
D		Average Monthly Enrollment	4,401	3,104	404	-	7,909
E	FY 2009-10	FPE	4,063	2,625	325	-	7,013
F		FPE as a Percentage of Average Monthly Enrollment	92.32%	84.57%	80.45%	-	88.67%
G		Average Monthly Enrollment	4,397	3,116	385	-	7,898
Н	FY 2010-11	FPE	4,123	2,848	358	-	7,329
I		FPE as a Percentage of Average Monthly Enrollment	93.77%	91.40%	92.99%	-	92.80%
J		Average Monthly Enrollment	4,397	3,140	373	-	7,910
K	FY 2011-12	FPE	4,113	2,860	338	-	7,311
L		FPE as a Percentage of Average Monthly Enrollment	93.54%	91.08%	90.62%	-	92.43%
M		Average Monthly Enrollment	4,384	3,178	377	72	8,011
N	FY 2012-13	FPE	4,156	3,021	347	67	7,591
О		FPE as a Percentage of Average Monthly Enrollment	94.80%	95.06%	92.04%	93.06%	94.76%
P		Average Monthly Enrollment	4,392	3,183	607	64	8,246
Q	FY 2013-14	FPE	4,339	3,015	498	64	7,916
R		FPE as a Percentage of Average Monthly Enrollment	98.79%	94.72%	82.04%	100.00%	96.00%
S		Average Monthly Enrollment	4,685	3,678	971	51	9,385
T	FY 2014-15	FPE	4,617	3,381	836	53	8,887
U		FPE as a Percentage of Average Monthly Enrollment	98.55%	91.92%	86.10%	103.92%	94.69%
V		Average Monthly Enrollment	4,903	4,311	1,373	36	10,623
W	FY 2015-16	FPE	4,832	3,896	1,200	36	9,964
X		FPE as a Percentage of Average Monthly Enrollment	98.55%	90.37%	87.40%	100.00%	93.80%
Y		Average Monthly Enrollment	5,077	4,637	1,602	34	11,350
Z	FY 2016-17	FPE	4,933	4,136	1,395	30	10,494
AA		FPE as a Percentage of Average Monthly Enrollment	97.16%	89.20%	87.08%	88.24%	92.46%
AB		Average Monthly Enrollment	5,162	4,778	1,696	31	11,667
AC	FY 2017-18	FPE	5,119	4,475	1,547	24	11,165
AD		FPE as a Percentage of Average Monthly Enrollment	99.17%	93.66%	91.21%	77.42%	95.70%
AE		Average Monthly Enrollment	5,741	4,788	1,861	30	12,420
AF	FY 2018-19	FPE	5,664	4,313	1,583	21	11,581
AG		FPE as a Percentage of Average Monthly Enrollment	98.66%	90.08%	85.06%	70.00%	93.24%
AH		Average Monthly Enrollment	6,316	4,652	2,037	52	13,057
ΑI	FY 2019-20	FPE	6,291	4,341	1,767	28	12,427
AJ		FPE as a Percentage of Average Monthly Enrollment	99.60%	93.31%	86.75%	53.85%	95.18%
AK		FY 2020-21 Selected FPE Conversion Factor	99.26%	92.26%	86.51%	86.51%	N/A
AL		FY 2021-22 and FY 2022-23 Selected FPE Conversion Factor	99.26%	92.26%	86.51%	86.51%	N/A

		Table D.3.1 - Division for Intellec	ctual and Developmental Disabilities (Di	(DD) Average Monthly Enrollment Fore	ecast	
Row	Fiscal Year	HCBS - Adult Comprehensive Waiver (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS)	HCBS - Children's Extensive Services Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total <sup>(1)</sup>
A	FY 2008-09	4,390	2,992	400	-	7,911
В	FY 2009-10	4,401	3,104	404	-	8,027
C	FY 2010-11	4,397	3,116	385	-	8,020
D	FY 2011-12	4,397	3,140	373	-	8,032
E	FY 2012-13	4,384	3,178	377	72	8,074
F	FY 2013-14	4,392	3,183	607	64	8,309
G	FY 2014-15	4,685	3,678	971	51	9,458
Н	FY 2015-16	4,903	4,311	1,373	36	10,703
I	FY 2016-17	5,077	4,637	1,602	34	11,428
J	FY 2017-18	5,162	4,778	1,696	31	11,740
K	FY 2018-19	5,741	4,788	1,861	30	12,523
L	FY 2019-20	6,316	4,652	2,037	52	13,129
M	Estimated FY 2020-21	6,841	4,746	2,207	107	13,901
N	Estimated FY 2021-22	7,252	4,904	2,299	118	14,573
О	Estimated FY 2022-23	7,663	5,067	2,395	118	15,243

(1) Total average monthly enrollment includes HCBS-Regional Center enrollment from Exhibit E.1

		Table D.3.2 - Percent Change in Divis	ion for Intellectual and Developmental l	Disabilities (DIDD) Average Monthly En	rollment	
Row	Fiscal Year	HCBS - Adult Comprehensive Waiver (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS)	HCBS - Children's Extensive Services Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total
A	FY 2009-10	0.25%	3.74%	1.00%	-	1.47%
В	FY 2010-11	-0.09%	0.39%	-4.70%	-	-0.09%
C	FY 2011-12	0.00%	0.77%	-3.12%	1	0.15%
D	FY 2012-13	-0.30%	1.21%	1.07%	1	0.52%
E	FY 2013-14	0.18%	0.16%	61.01%	-11.11%	2.91%
F	FY 2014-15	6.67%	15.55%	59.97%	-20.31%	13.83%
G	FY 2015-16	4.65%	17.21%	41.40%	-29.41%	13.17%
H	FY 2016-17	3.55%	7.56%	16.68%	-5.56%	6.77%
I	FY 2017-18	1.67%	3.04%	5.87%	-8.82%	2.73%
J	FY 2018-19	11.22%	0.21%	9.73%	-3.23%	6.67%
K	FY 2019-20	10.02%	-2.84%	9.46%	73.33%	4.84%
L	Estimated FY 2020-21	8.31%	2.02%	8.35%	105.77%	5.88%
M	Estimated FY 2021-22	6.01%	3.33%	4.17%	10.28%	4.83%
N	Estimated FY 2022-23	5.67%	3.32%	4.18%	0.00%	4.60%

	Table I	D.3.3 - Division for Intellectual and De	velopmental Disabilities (DIDD) Per Fu	ıll Program Equivalent (FPE) Expenditu	re and Forecast	
Row	Fiscal Year	HCBS - Adult Comprehensive Waiver (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS)	HCBS - Children's Extensive Support Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Average HCBS Waiver FPE Expenditure and Forecast
A	FY 2008-09	\$57,955.90	\$19,582.83	\$21,077.47	-	\$32,872.07
В	FY 2009-10	\$62,465.82	\$14,247.54	\$22,024.69	-	\$32,912.68
C	FY 2010-11	\$66,237.42	\$13,195.05	\$22,223.67	-	\$33,885.38
D	FY 2011-12	\$64,405.43	\$12,947.75	\$21,779.88	-	\$33,044.35
E	FY 2012-13	\$62,997.58	\$12,338.19	\$20,218.18	\$50,905.00	\$36,614.74
F	FY 2013-14	\$65,101.46	\$13,030.99	\$18,323.90	\$48,277.38	\$36,183.43
G	FY 2014-15	\$68,199.74	\$13,207.43	\$17,904.12	\$52,708.34	\$38,004.91
Н	FY 2015-16	\$68,339.82	\$13,674.51	\$17,562.02	\$57,902.50	\$39,369.71
I	FY 2016-17	\$70,354.33	\$14,118.95	\$18,002.83	\$62,973.33	\$41,362.36
J	FY 2017-18	\$72,808.45	\$14,343.78	\$16,611.78	\$64,849.33	\$42,153.34
K	FY 2018-19	\$74,535.08	\$14,845.36	\$14,882.61	\$83,210.82	\$46,868.47
L	FY 2019-20	\$78,509.57	\$15,444.08	\$16,121.43	\$65,234.33	\$43,827.35
M	Estimated FY 2020-21	\$77,436.89	\$15,766.12	\$16,019.62	\$69,510.59	\$44,683.31
N	Estimated FY 2021-22	\$77,329.04	\$16,169.45	\$15,712.60	\$69,871.86	\$44,770.74
O	Estimated FY 2022-23	\$77,429.36	\$16,201.23	\$15,726.73	\$69,871.86	\$44,807.30

	Tal	ble D.3.4 - Percent Change in Division	for Intellectual and Developmental Dis	abilities (DIDD) Per FPE Expenditure a	nd Forecast	
Row	Fiscal Year	HCBS - Adult Comprehensive Waiver (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS)	HCBS - Children's Extensive Support Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Average HCBS Waiver FPE Expenditure and Forecast
A	FY 2009-10	7.78%	-27.24%	4.49%	-	0.12%
В	FY 2010-11	6.04%	-7.39%	0.90%	-	2.96%
C	FY 2011-12	-2.77%	-1.87%	-2.00%	-	-2.48%
D	FY 2012-13	-2.19%	-4.71%	-7.17%	-	10.80%
E	FY 2013-14	3.34%	5.62%	-9.37%	-5.16%	-1.18%
F	FY 2014-15	4.76%	1.35%	-2.29%	9.18%	5.03%
G	FY 2015-16	0.21%	3.54%	-1.91%	9.85%	3.59%
Н	FY 2016-17	2.95%	3.25%	2.51%	8.76%	5.06%
I	FY 2017-18	3.49%	1.59%	-7.73%	2.98%	1.91%
J	FY 2018-19	2.37%	3.50%	-10.41%	28.31%	11.19%
K	FY 2019-20	5.33%	4.03%	8.32%	-21.60%	-6.49%
L	Estimated FY 2020-21	-1.37%	2.09%	-0.63%	6.56%	1.95%
M	Estimated FY 2021-22	-0.14%	2.56%	-1.92%	0.52%	0.20%
N	Estimated FY 2022-23	0.13%	0.20%	0.09%	0.00%	0.08%

		Table D.3.5 - Calculation of FY 2020	-21 Division for Intellectual and Develo	pmental Disabilities (DIDD) Average M	onthly Enrollment and Full Program Eq	uivalent (FPE)	
Row	FY 2020-21	HCBS - Adult Comprehensive Waiver (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS)	HCBS - Children's Extensive Services Waiver (HCBS-CES)	Waiver HCBS - Children's Habilitation  Posidential Program (HCBS CHDB)		Source/Calculation
A	Prior Year Average Monthly Enrollment	6,316	4,652	2,037	52	13,057	Table D.3.1 Row L
В	Base Trend Increase	8.31%	2.03%	8.35%	105.77%	6.46%	Trend based on previous enrollment growth (HCBS-DD growth due to additional appropriated enrollments Table D.1.1)
С	Preliminary Average Monthly Enrollment	6,841	4,746	2,207	107	13,901	Row A * (1 + Row B)
	Bottom Line Adjustments						See narrative
D	Total Bottom Line Adjustments	0	0	0	0	0	Sum of enrollment bottom line adjustments
E	Average Monthly Enrollment	6,841	4,746	2,207	107	13,901	Row C + Row D
F	FPE Adjustment Factor	99.26%	92.26%	86.51%	86.51%	94.75%	Table D.2, Row AK
G	Estimated FPE	6,790.40	4,378.50	1,909.38	92.57	13,170.85	Row E * Row F
Н	Previous Year Expenditure Per-Capita Actuals	\$78,509.57	\$15,444.08	\$16,121.43	\$65,234.33	\$43,827.35	Table D.3.3 Row L
I	Base Trend	1.34%	0.00%	0.00%	0.00%	0.60%	Assuming stable utilization
J	Estimated Base Per FPE Expenditure	\$79,561.60	\$15,444.08	\$16,121.43	\$65,234.33	\$44,090.36	Row H* (1+ Row I)
K	Estimated FY 2020-21 Base Expenditure	\$540,255,089	\$67,621,904	\$30,781,936	\$6,038,742	\$644,697,671	Row J * Row G
	Bottom Line Adjustments						
L	Annualization of FY 2015-16 R-7 Participant Directed Programs Expansion	\$0	\$792,622	\$0	\$0	\$792,622	Addition of CDASS + Impact of 1915i clients
M	FY 2019-20 53 Pay Periods	(\$7,616,293)	(\$1,039,973)	(\$387,581)	(\$76,621)	(\$9,120,468)	Additional pay period in FY 2019-20
N	HB 18-1326 Support for Transition From Institutional Settings	\$617,797	\$0	\$0	\$0	\$617,797	5 CCT demonstration services added to DD waiver
0	FY 2019-20 1% Across the Board Rate Increase	\$403,606	\$73,697	\$14,574	\$3,358	\$495,235	1% Across the board effective 7/1/2019
P	FY 2019-20 R-13 Provider Rate Adjustments	\$1,351,288	\$643,660	\$360,022	\$0	\$2,354,970	Targeted rate increases effective 1/1/2020
Q	FY 2019-20 Long Bill Action on IHSS and CDASS	\$0	\$331,309	\$0	\$0	\$331,309	CDASS Rate Increase effective 1/1/2020
R	SB 19-238 Improve Wages And Accountability Home Care Workers	\$0	\$1,149,775	\$78,961	\$0	\$1,228,736	Personal care and homemaker rate increase effective 1/1/2020
S	FY 2019-20 COVID Emergency Spending	(\$5,111,792)	(\$88,713)	(\$25,544)	(\$28,606)	(\$5,254,655)	Temporary emergency rate increases
T	FY 2020-21 R-10 Provider Rate Adjustments	(\$4,962,456)	(\$729,276)	(\$289,574)	\$497,722	(\$5,483,584)	1% Across the board effective 7/1/2020 and TRI for CHRP RCCF
U	Denver Local Minimum Wage Rate Adjustments	\$890,208	\$276,942	\$54,749	\$0	\$1,221,899	Denver minimum wage increases effective 1/1/2021
v	Total Bottom Line Impacts	(\$14,427,642)	\$1,410,043	(\$194,393)	\$395,853	(\$12,816,139)	Sum of Rows L thru U
W	Estimated FY 2020-21 Expenditure	\$525,827,447	\$69,031,947	\$30,587,543			Row V + Row K
X	Estimated FY 2020-21 Cost per FPE	\$77,436.89	\$15,766.12	\$16,019.62	\$69,510.59	\$44,683.31	Row W/ Row G

		Table D.3.6 - Calculation of FY 2021	-22 Division for Intellectual and Develo	pmental Disabilities (DIDD) Average M	onthly Enrollment and Full Program Equ	iivalent (FPE)	
Row	FY 2021-22	HCBS - Adult Comprehensive Waiver (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS)	HCBS - Children's Extensive Services Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total	Source/Calculation
A	Prior Year Average Monthly Enrollment	6,841	4,746	2,207	107	13,901	Table D.3.1 Row M
В	Base Trend Increase	6.01%	3.32%	4.18%	10.28%	4.83%	Trend based on previous enrollment growth (HCBS-DD growth due to additional appropriated enrollments Table D.1.1)
C	Preliminary Average Monthly Enrollment	7,252	4,904	2,299	118	14,573	Row A * (1 + Row B)
	Bottom Line Adjustments						See narrative
D	Total Bottom Line Adjustments	0	0	0	0	0	Sum of enrollment bottom line adjustments
E	Average Monthly Enrollment	7,252	4,904	2,299	118	14,573	Row C + Row D
F	FPE Adjustment Factor	99.26%	92.26%	86.51%	86.51%	94.79%	Table D.2 Row AL
G	Estimated FPE	7,198.36	4,524.27	1,988.98	102.09	13,813.70	Row E * Row F
Н	Previous Year Expenditure Per-Capita Actuals	\$77,436.89	\$15,766.12	\$16,019.62	\$69,510.59	\$44,683.31	Table D.3 Row X
I	Base Trend	0.00%	0.00%	0.00%	0.00%	0.00%	Assuming stable utilization
J	Estimated Base Per FPE Expenditure	\$77,436.89	\$15,766.12	\$16,019.62	\$69,510.59	\$44,683.31	Row H* (1+ Row I)
K	Estimated FY 2021-22 Base Expenditure	\$557,418,612	\$71,330,184	\$31,862,704	\$7,096,336	\$667,707,836	Row J * Row G
	Bottom Line Adjustments						
L	Annualization of FY 2015-16 R-7 Participant Directed Programs Expansion	\$0	\$1,678,186	\$0	\$0	\$1,678,186	Addition of CDASS + Impact of 1915i clients
M	FY 2019-20 53 Pay Periods	\$0	\$0	\$0	\$0	\$0	Additional pay period in FY 2019-20
N	HB 18-1326 Support for Transition From Institutional Settings	\$596,261	\$0	\$0	\$0	\$596,261	5 CCT demonstration services added to DD waiver
О	FY 2019-20 1% Across the Board Rate Increase	\$0	\$0	\$0	\$0	\$0	1% Across the board effective 7/1/2019
P	FY 2019-20 R-13 Provider Rate Adjustments	\$0	\$0	\$0	\$0	\$0	Targeted rate increases effective 1/1/2020
Q	FY 2019-20 Long Bill Action on IHSS and CDASS	\$0	\$0	\$0	\$0	\$0	CDASS Rate Increase effective 1/1/2020
R	SB 19-238 Improve Wages And Accountability Home Care Workers	\$0	\$0	\$0	\$0	\$0	Personal care and homemaker rate increase effective 1/1/2020
S	FY 2019-20 COVID Emergency Spending	(\$2,517,574)	(\$194,618)	(\$663,927)	(\$8,365)		Temporary emergency rate increases
T	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	(\$451,132)	(\$62,740)	(\$26,369)	\$45,247	(\$494,994)	1% Across the board effective 7/1/2020 and TRI for CHRP RCCF
U	Denver Local Minimum Wage Rate Adjustments	\$1,596,083	\$403,939	\$79,636	\$0	\$2,079,658	Denver minimum wage increases effective 1/1/2021
V	Total Bottom Line Impacts	(\$776,362)	\$1,824,767	(\$610,660)	\$36,882		Sum of Rows L - U
W	Estimated FY 2021-22 Expenditure	\$556,642,250	\$73,154,951	\$31,252,044	\$7,133,218		Row V + Row K
X	Estimated FY 2021-22 Cost per FPE	\$77,329.04	\$16,169.45	\$15,712.60	\$69,871.86	\$44,770.74	Row W/ Row G

		Table D.3.7 - Calculation of FY 2022	-23 Division for Intellectual and Develo	pmental Disabilities (DIDD) Average M	onthly Enrollment and Full Program Equ	uivalent (FPE)	
Row	FY 2022-23	HCBS - Adult Comprehensive Waiver (HCBS-DD)	HCBS - Supported Living Services Waiver (HCBS-SLS)	HCBS - Children's Extensive Services Waiver (HCBS-CES)	HCBS - Children's Habilitation Residential Program (HCBS-CHRP)	Total	Source/Calculation
A	Prior Year Average Monthly Enrollment	7,252	4,904	2,299	118	14,573	Table D.3.1 Row N
В	Base Trend Increase	5.67%	3.32%	4.18%	0.00%	4.60%	Trend based on previous enrollment growth (HCBS-DD growth due to additional appropriated enrollments Table D.1.1)
C	Preliminary Average Monthly Enrollment	7,663	5,067	2,395	118	15,243	Row A * (1 + Row B)
	Bottom Line Adjustments						See narrative
D	Total Bottom Line Adjustments	0	0	0	0	0	Sum of enrollment bottom line adjustments
E	Average Monthly Enrollment	7,663	5,067	2,395	118	15,243	Row C + Row D
F	FPE Adjustment Factor	99.26%	92.26%	86.51%	86.51%	94.83%	Table D.2 Row AL
G	Estimated FPE	7,606.32	4,674.64	2,072.03	102.09	14,455.08	Row E * Row F
Н	Previous Year Expenditure Per-Capita Actuals	\$77,329.04	\$16,169.45	\$15,712.60	\$69,871.86	\$44,770.74	Table D.3 Row X
I	Base Trend	0.00%	0.00%	0.00%	0.00%	0.00%	Assuming stable utilization
J	Estimated Base Per FPE Expenditure	\$77,329.04	\$16,169.45	\$15,712.60	\$69,871.86	\$44,770.74	Row H* (1+ Row I)
K	Estimated FY 2022-23 Base Expenditure	\$588,189,424	\$75,586,358	\$32,556,979	\$7,133,218	\$703,465,979	Row J * Row G
	Bottom Line Adjustments						
L	Annualization of FY 2015-16 R-7 Participant Directed Programs Expansion	\$0	\$0	\$0	\$0	\$0	Addition of CDASS + Impact of 1915i clients
M	FY 2019-20 53 Pay Periods	\$0	\$0	\$0	\$0	\$0	Additional pay period in FY 2019-20
N	HB 18-1326 Support for Transition From Institutional Settings	\$0	\$0	\$0	\$0	\$0	5 CCT demonstration services added to DD waiver
О	FY 2019-20 1% Across the Board Rate Increase	\$0	\$0	\$0	\$0	\$0	1% Across the board effective 7/1/2019
P	FY 2019-20 R-13 Provider Rate Adjustments	\$0	\$0	\$0	\$0	\$0	Targeted rate increases effective 1/1/2020
Q	FY 2019-20 Long Bill Action on IHSS and CDASS	\$0	\$0	\$0	\$0		CDASS Rate Increase effective 1/1/2020
R	SB 19-238 Improve Wages And Accountability Home Care Workers	\$0	\$0	\$0	\$0	\$0	Personal care and homemaker rate increase effective 1/1/2020
S	FY 2019-20 COVID Emergency Spending	\$0	\$0	\$0	\$0		Temporary emergency rate increases
T	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	\$0	\$0	\$0	\$0	\$0	1% Across the board effective 7/1/2020 and TRI for CHRP RCCF
U	Denver Local Minimum Wage Rate Adjustments	\$763,075	\$148,569	\$29,285	\$0	\$940,929	Denver minimum wage increases effective 1/1/2021
V	Total Bottom Line Impacts	\$763,075	\$148,569	\$29,285			Sum of Rows L - U
W	Estimated FY 2022-23 Expenditure	\$588,952,499	\$75,734,927	\$32,586,264	\$7,133,218		Row V + Row K
X	Estimated FY 2022-23 Cost per FPE	\$77,429.36	\$16,201.23	\$15,726.73	\$69,871.86	\$44,807.30	Row W/ Row G

	Table E.1 - HCBS - Developmental Disabilities Comprehensive Waiver (HCBS-DD) - Regional Centers										
Row	Fiscal Year	Average Monthly Enrollment	Total Cost	Per Utilizer Cost	Percent Change in Enrollment	Percent Change in Total Cost	Percent Change in Per-Utilizer Cost				
A	FY 2008-09	129	\$26,028,730	\$201,773	7.50%	31.36%	22.20%				
В	FY 2009-10	118	\$28,360,034	\$240,339	-8.53%	8.96%	19.11%				
С	FY 2010-11	122	\$24,142,015	\$197,885	3.39%	-14.87%	-17.66%				
D	FY 2011-12	122	\$25,276,720	\$207,186	0.00%	4.70%	4.70%				
Е	FY 2012-13	135	\$24,167,096	\$179,016	10.66%	-4.39%	-13.60%				
F	FY 2013-14	127	\$22,225,364	\$175,003	-5.93%	-8.03%	-2.24%				
G	FY 2014-15	124	\$21,454,023	\$173,016	-2.36%	-3.47%	-1.14%				
Н	FY 2015-16	116	\$19,900,398	\$171,186	-6.25%	-7.24%	-1.06%				
I	FY 2016-17	112	\$19,175,157	\$171,207	-3.66%	-3.64%	0.01%				
J	FY 2017-18	104	\$31,987,342	\$307,571	-7.14%	66.82%	79.65%				
K	FY 2018-19	102	\$25,474,050	\$248,730	-1.52%	-20.36%	-19.13%				
L	FY 2019-20	96	\$25,422,597	\$263,902	-5.94%	-0.20%	6.10%				

	Та	ble F.1 - Intellectual	and Developmental	Disabilities (IDD) F	Y 2020-21 Case Ma	nagement Expenditu	ire Forecast
Row	Service	PMPM	Monitoring	Intake and CSR	Admin	Total	Source/Calculation
A	Projected FY 2019-20 Expenditure	\$22,693,214	\$5,425,559	\$3,980,852	\$855,931	\$32,955,556	Projection of FY 19-20 Utilization using Rates Methodology
В	FY 2020-21 Enrollment Trend	5.88%	5.88%	5.88%	0.00%	N/A	Table D.3.2 Row L
С	Base Target Case Management Expenditure FY 2020-21	\$24,027,575	\$5,744,582	\$4,214,926	\$855,931	\$34,843,014	Row A * (1+ Row B)
D	Bottom Line Impact: SB 16-192	\$0	\$0	\$1,117,660	\$0	\$1,117,660	Table F.3 Row D
E	Total Case Management Expenditure for FY 2020-21	\$24,027,575	\$5,744,582	\$5,332,586	\$855,931	\$35,960,674	Row C + Row D
F	FY 2021-22 Enrollment Trend	4.83%	4.83%	4.83%	0.00%	N/A	Table D.3.2 Row M
G	Estimated TCM Expenditure FY 2021-22	\$25,188,107	\$6,022,045	\$4,418,507	\$855,931	\$36,484,590	Row C * (1+ Row F)
Н	Bottom Line Impact: SB 16-192	\$0	\$0	\$3,352,979	\$0	\$3,352,979	Table F.3 Row E
I	Total TCM Expenditure FY 2021-22	\$25,188,107	\$6,022,045	\$7,771,486	\$855,931	\$39,837,569	Row G + Row H
J	FY 2022-23 Enrollment Trend	4.60%	4.60%	4.60%	0.00%	N/A	Table D.3.2 Row N
K	Estimated TCM Expenditure FY 2022-23	\$26,346,760	\$6,299,059	\$4,621,758	\$855,931	\$38,123,508	Row G * (1+ Row J)

	Table F.3 - Intellectual and Developmen	tal Disabilities (IDD) SB 16-192 Estimat	ed Bottom Line Impact
Row	Item	Estimated IDD Waiver Enrollments	Source/Calculation
A	Estimated Total Average Monthly Enrollment	13,752	FY 2020-21 Estimated IDD Waiver Enrollment
В	SIS Rate	\$325.09	FY 2020-21 Rate
C	Estimated Total Expenditure	\$4,470,638	Row A * Row B
D	FY 2020-21 Impact Adjusted Implementation for 3/12 Months	\$1,117,660	Row C * (3/12)
E	FY 2021-22 Impact Adjusted Implementation for 9/12 Months	\$3,352,979	Row C * (9/12)
F	FY 2022-23 Impact	\$0	Fully annualized

	Table G.1 FY 2020-	21 Office of Comm	unity Liv	ving Appropriation	Build			
Row	Item	Total Funds	FTE	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
	Adult Comprehensive Services				•			
Α	FY 2019-20 Final Spending Authority	\$498,515,638	0.0	\$230,677,046	\$0	\$3,210,919	\$0	\$264,627,673
В	Annualization of HB 18-1326 Support for Transition from Institutional Settings	\$617,816	0.0	\$308,908	\$0	\$0	\$0	\$308,908
С	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for People with IDD	\$0	0.0	(\$289,618)	\$0	\$289,618	\$0	\$0
D	Annualization of JBC Action on IDD Enrollments	(\$1,770,579)	0.0	\$2,114,711	\$0	(\$3,000,000)	\$0	(\$885,290)
E	Annualization of FY 2019-20 R-13 Provider Rate Adjustments	\$690,632	0.0	\$345,316	\$0	\$0	\$0	\$345,316
F	FY 2020-21 R-10 Provider Rate Adjustments	(\$4,962,456)	0.0	(\$2,473,843)	\$0	(\$7,385)	\$0	(\$2,481,228)
G	FY 2020-21 S-05 Office of Community Living Cost and Caseload	\$36,831,999	0.0	\$18,116,535	\$0	\$299,464	\$0	\$18,416,000
Н	JBC Action on IDD Cash Fund	\$0	0.0	(\$6,727,431)	\$0	\$6,727,431	\$0	
I	JBC Action on Minimum Wage	\$890,208	0.0	\$445,104	\$0	\$0	\$0	\$445,104
J	Annualization of May 2020 COVID Forecast	(\$5,043,555)	0.0	(\$3,336,543)	\$0	\$0	\$0	(\$1,707,012)
K	Total FY 2020-21 Spending Authority	\$525,769,703	0.0	\$239,180,185	\$0	\$7,520,047	\$0	\$279,069,471
	Adult Supported Living Services							
L	FY 2019-20 Final Spending Authority	\$78,095,269	0.0	\$39,951,867	\$0	\$2,059,947	\$0	\$36,083,455
М	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for People with IDD	\$0	0.0	\$0	\$0	\$0	\$0	\$0
N	Annualization of FY 2019-20 R-13 Provider Rate Adjustments	(\$859,118)	0.0	(\$426,763)	\$0	\$604	\$0	(\$432,959)
О	Annualization of Long Bill Personal Care and Homemaker Rate Increases	\$245,821	0.0	\$122,911	\$0	\$0	\$0	\$122,910
P	Annualization of SB 19-238 Home Care Wages	\$853,065	0.0	\$426,533	\$0	\$0	\$0	\$426,532
Q	FY 2020-21 R-10 Provider Rate Adjustments	(\$789,227)	0.0	(\$420,975)	\$0	(\$19,370)	\$0	(\$348,882)
R	FY 2020-21 S-05 Office of Community Living Cost and Caseload	\$3,173,902	0.0	\$1,568,082	\$0	\$15,469	\$0	\$1,590,351
S	JBC Action on Minimum Wage	\$276,942	0.0	\$138,471	\$0	\$0	\$0	\$138,471
T	Annualization of May 2020 COVID Forecast	\$785,151	0.0	\$239,069	\$0	(\$997)	\$0	\$547,079
U	JBC Adjustment	\$1,160	0.0	(\$17,988)	\$0	(\$828)	\$0	,
V	FY 2020-21 R-16 Case Management and State-Only Program Modernization	(\$9,893,584)	0.0	(\$8,228,509)	\$0	(\$1,665,075)	\$0	\$0
W	Total FY 2020-21 Spending Authority	\$71,889,381	0.0	\$33,352,698	\$0	\$389,750	\$0	\$38,146,933
	Children's Extensive Support Services							
X	FY 2019-20 Final Spending Authority	\$28,677,892	0.0	\$13,479,265	\$0	\$0	\$0	\$15,198,627
Y	Annualization of FY 2019-20 R-13 Provider Rate Adjustments	(\$21,329)	0.0	(\$10,665)	\$0	\$0	\$0	(\$10,664)
Z	Annualization of SB 19-238 Home Care Wages	\$39,485	0.0	\$19,742	\$0	\$0	\$0	\$19,743
AA	FY 2020-21 R-10 Provider Rate Adjustments	(\$290,060)	0.0	(\$145,030)	\$0	\$0		(\$145,030)
AB	JBC Adjustments	(\$1)	0.0	\$0	\$0	\$0		(\$1)
AC	JBC Action on Minimum Wage	\$54,749	0.0	\$27,375	\$0	\$0		\$27,374
AD	FY 2020-21 S-05 Office of Community Living Cost and Caseload	\$1,780,887	0.0	\$890,445	\$0	\$0		\$890,442
AE	Annualization of May 2020 COVID Forecast	(\$280,536)	0.0	(\$178,645)	\$0	\$0		(* ' ) )
AF	JBC Adjustment	\$487	0.0	\$243	\$0	\$0	4.0	
AG	Total FY 2020-21 Spending Authority	\$29,961,574	0.0	\$14,082,730	\$0	\$0	\$0	\$15,878,844
	Children's Habilitation Residential Program Waiver					·		
AH	FY 2019-20 Final Spending Authority	\$2,757,208	0.0	\$1,292,111	\$0	\$0	\$0	\$1,465,097
AI	Annualization of FY 2019-20 R-13 Provider Rate Adjustments	\$3,358	0.0	\$1,679	\$0	\$0		
AJ	FY 2020-21 R-10 Provider Rate Adjustments	\$497,722	0.0	\$248,861	\$0	\$0		\$248,861
AK	FY 2020-21 S-05 Office of Community Living Cost and Caseload	\$1,557,342	0.0	\$778,670	\$0	\$0		\$778,672
AL	Annualization of May 2020 COVID Forecast	(\$35,950)	0.0	\$68,708	\$0	\$0		
AM	Total FY 2020-21 Spending Authority	\$4,779,680	0.0	\$2,390,029	\$0	\$0	\$0	\$2,389,651
	Eligibility Determination and Waitlist Management	#c						
AN	FY 2019-20 Final Spending Authority	\$3,197,573	0.0	\$3,197,573	\$0	\$0		\$0
AO	Annualization of FY 2019-20 R-13 Provider Rate Adjustments	\$2,630	0.0	\$2,630	\$0	\$0	\$0	\$0
AP	FY 2020-21 R-10 Provider Rate Adjustments	(\$29,540)	0.0	(\$29,540)	\$0	\$0		
AQ	FY 2020-21 R-16 Case Management and State-Only Program Modernization	\$0	0.0	(\$367,759)	\$0	\$0		\$367,759
AR	Total FY 2020-21 Spending Authority	\$3,170,663	0.0	\$2,802,904	\$0	\$0	\$0	\$367,759

	Table G.1 FY 2020-	21 Office of Comm	unity Li	ving Appropriation	Build			
Row	Item	Total Funds	FTE	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
	Case Management							
AS	FY 2019-20 Final Spending Authority	\$41,208,904	0.0	\$20,353,572	\$0	\$424,688	\$0	,, .
AT	Annualization of FY 2019-20 R-13 Provider Rate Adjustments	\$37,028	0.0	\$19,285	\$0	\$125	\$0	\$17,618
AU	Annualization of FY 2018-19 R-17 Single Assessment Tool Financing	\$3,260,155	0.0	\$1,630,077	\$0	\$0	\$0	
AV AW	SB 16-192 Needs Assessment for Persons Eligible for LTSS Annualization	(\$3,260,156)	0.0	(\$1,630,078)	\$0 \$0	\$0	\$0 \$0	(\$1,630,078
AX	FY 2020-21 R-10 Provider Rate Adjustments FY 2020-21 S-05 Office of Community Living Cost and Caseload	(\$399,104) \$2,811,599	0.0	(\$207,439) \$1,467,368	\$0 \$0	(\$3,377) (\$62,462)	\$0	(\$188,288 \$1,406,693
AY	Annualization of May 2020 COVID Forecast	(\$821,210)	0.0	(\$627,228)	\$0 \$0	(\$1,535)	\$0	(\$192,447
AZ	JBC Adjustment	(\$1)	0.0	(\$2,639)	\$0	(\$44)	\$0	\$2,682
BA	FY 2020-21 R-16 Case Management and State-Only Program Modernization	(\$2,416,320)	0.0	(\$2,140,088)	\$0	(\$276,232)	\$0	
BB	Total FY 2020-21 Re-10 Case Management and State-Only Flogram Modernization  Total FY 2020-21 Spending Authority	\$40,420,895	0.0	\$18.862.830	\$0	\$81,163	\$0	
BC	Targeted Case Management	\$33,164,246	0.0	\$15,484,978	\$0	\$55,645	\$0	, , ,
BD	OA, UR and SIS	\$7,256,649	0.0	\$3,377,852	\$0	\$25,518	\$0	\$3,853,279
DD	* /	\$7,230,047	0.0	\$3,377,632	<b>\$</b> 0	\$25,516		\$3,633,27
BE	FY 2019-20 Final Spending Authority	\$7,755,304	0.0	\$7,196,645	\$0	\$558,659	\$0	\$(
BF	Annualization FY 2019-20 R-13 Provider Rate Adjustments	\$6,140	0.0	\$6,140	\$0 \$0	\$556,659	\$0	\$(
BG	FY 2020-21 R-10 Provider Rate Adjustments	(\$70,018)	0.0	(\$66,487)	\$0	(\$3,531)	\$0	\$(
BH	FY 2020-21 S-05 Office of Community Living Cost and Caseload	(\$176,162)	0.0	\$0	\$0	(\$176,162)	\$0	\$(
BI	Total FY 2020-21 Spending Authority	\$7,515,264	0.0	\$7,136,298	\$0	\$378,966	\$0	
ы	^	\$7,515,204	0.0	\$7,130,270	90	\$376,700	\$0	J.C
DI	State Supported Living Services	00 000 510	0.0	00.107.252	40	01.701.166		
BJ BK	FY 2019-20 Final Spending Authority	\$9,908,518	0.0	\$8,187,352 \$0	\$0	\$1,721,166 \$0	\$0 \$0	\$(
BL	FY 2020-21 R-16 Case Management and State-Only Program Modernization	\$0	0.0	4.0	\$0 \$0	4.0	\$0	
BM	FY 2020-21 R-10 Provider Rate Adjustments	(\$99,085)	0.0	(\$81,874)	* * *	(\$17,211)		
	JBC Adjustments	\$84,151	0.0	\$123,031	\$0	(\$38,880)	\$0	
BN	Total FY 2020-21 Spending Authority	\$9,893,584	0.0	\$8,228,509	\$0	\$1,665,075	\$0	\$0
	State Supported Living Services Case Management							
ВО	FY 2019-20 Final Spending Authority	\$2,440,632	0.0	\$2,156,935	\$0	\$283,697	\$0	
BP	FY 2020-21 R-16 Case Management and State-Only Program Modernization	\$0	0.0	\$0	\$0	\$0	\$0	
BQ	FY 2020-21 R-10 Provider Rate Adjustments	(\$24,406)	0.0	(\$21,569)	\$0	(\$2,837)	\$0	\$0
BR	JBC Adjustments	\$94	0.0	\$4,722	\$0	(\$4,628)	\$0	
BS	Total FY 2020-21 Spending Authority	\$2,416,320	0.0	\$2,140,088	\$0	\$276,232	\$0	\$(
	Preventive Dental Hygiene							
BT	FY 2019-20 Final Spending Authority	\$65,445	0.0	\$65,445	\$0	\$0	4.0	\$0
BU	Annualization of R-13 Provider Rate Adjustments	\$54	0.0	\$54	\$0	\$0		
BV	FY 2020-21 R-10 Provider Rate Adjustments	(\$605)	0.0	(\$605)	\$0	\$0		
BW	Total FY 2020-21 Spending Authority	\$64,894	0.0	\$64,894	\$0	\$0	\$0	\$(
	Supported Employment Provider & Certification Reimbursement	·				·		
BX	FY 2019-20 Final Spending Authority	\$303,158	0.0	\$303,158	\$0	\$0	\$0	\$0
BY	Total FY 2020-21 Spending Authority	\$303,158	0.0	\$303,158	\$0	\$0	\$0	\$(
	Supported Employment Pilot Program					-		
BZ	FY 2019-20 Final Spending Authority	\$500,000	0.0	\$0	\$0	\$500,000	\$0	\$0
CA	Total FY 2020-21 Spending Authority	\$500,000	0.0	\$0	\$0	\$500,000	\$0	
СВ	Grand Total FY 2020-21 Spending Authority	\$696,685,116	0.0	\$328,544,323	\$0	\$10,811,233	\$0	

	Table G.2 FY 2021-22 Office of Community Living Appropriation Build											
Row	Item	Total Funds	FTE	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds				
A	Adult Comprehensive Services FY 2020-21 Final Spending Authority	\$525,769,703	0.0	\$239,180,185	\$0	\$7,520,047	\$0	\$279,069,471				
В	Annualization of HB 18-1326 Support for Transition from Institutional Settings	\$596,263	0.0	\$298,132	\$0	\$0	\$0	\$298,131				
С	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for	\$0	0.0	\$0	\$0	\$0	\$0	\$0				
D	People with IDD Annualization of JBC Action on IDD Enrollments	\$625,141	0.0	\$312,570	\$0	\$0	\$0	\$312,571				
E	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	(\$451,132)	0.0	(\$224,895)	\$0	(\$671)	\$0	(\$225,566)				
F	JBC Action - IDD Cash Fund	\$0	0.0	\$6,727,431	\$0	(\$6,727,431)	\$0	\$0				
G	Annualization of JBC Action on Denver Minimum Wage	\$1,596,083	0.0	\$798,042	\$0	\$0	\$0	\$798,041				
Н	Total FY 2021-22 Spending Authority	\$528,136,058	0.0	\$247,091,465	\$0	\$791,945	\$0	\$280,252,648				
I J	Adult Supported Living Services FY 2020-21 Final Spending Authority	\$71,889,381	0.0	\$33,352,698	\$0	\$389,750	\$0	\$38,146,933				
	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for	, ,		, ,		,						
K	People with IDD	\$0	0.0	\$0	\$0	\$0	\$0	\$0				
L	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	(\$62,740)	0.0	(\$30,827)	\$0	(\$196)	\$0	(\$31,717)				
M	Annualization of JBC Action on Denver Minimum Wage	\$403,939	0.0	\$201,970	\$0	\$0	\$0	\$201,969				
N O	Total FY 2021-22 Spending Authority	\$72,230,580	0.0	\$33,523,841	\$0	\$389,554	\$0	\$38,317,185				
P	Children's Extensive Support Services FY 2020-21 Final Spending Authority	\$29,961,574	0.0	\$14.082.730	\$0	\$0	\$0	\$15.878.844				
0	Annualization of FY 2020-21 Final Spending Additional Annualization of FY 2020-21 R-10 Provider Rate Adjustments	(\$26,369)	0.0	(\$13,185)	\$0	\$0	\$0	(\$13,184)				
R	Annualization of JBC Action on Denver Minimum Wage	\$79,636	0.0	\$39,818	\$0	\$0	\$0	\$39,818				
S	Total FY 2021-22 Spending Authority	\$30,014,841	0.0	\$14,109,363	\$0	\$0	\$0	\$15,905,478				
	Children's Habilitation Residential Program Waiver											
T	FY 2020-21 Final Spending Authority	\$4,779,680	0.0	\$2,390,029	\$0	\$0	\$0	\$2,389,651				
U	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	\$45,247	0.0	\$22,624	\$0	\$0	\$0	\$22,623				
V	Total FY 2021-22 Spending Authority	\$4,824,927	0.0	\$2,412,653	\$0	\$0	\$0	\$2,412,274				
W	Eligibility Determination and Waitlist Management	62 170 ((2	0.0	62 002 004	\$0	60	0.0	62/7.750				
X	FY 2019-20 Final Spending Authority Annualization of FY 2020-21 R-10 Provider Rate Adjustments	\$3,170,663 (\$2,685)	0.0	\$2,802,904 (\$2,685)	\$0 \$0	\$0 \$0	\$0 \$0	\$367,759 \$0				
Y	Total FY 2021-22 Spending Authority	\$3,167,978	0.0	\$2,800,219	\$0	\$0	\$0	\$367,759				
	Case Management	40,100,000		,,	-		4.	400,,000				
Z	FY 2020-21 Final Spending Authority	\$40,420,895	0.0	\$18,862,830	\$0	\$81,163	\$0	\$21,476,902				
AB	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	(\$34,063)	0.0	(\$16,897)	\$0	(\$49)	\$0	(\$17,117)				
AC	Total FY 2021-22 Spending Authority	\$40,386,832	0.0	\$18,845,933	\$0	\$81,114	\$0	\$21,459,785				
AD AE	Targeted Case Management	\$33,130,183	0.0	\$15,468,081 \$3,377,852	\$0 \$0	\$55,596 \$25,518	\$0 \$0	\$17,606,506 \$3,853,279				
AŁ	QA, UR and SIS	\$7,256,649	0.0	\$3,377,852	\$0	\$25,518	\$0	\$3,853,279				
AF	Family Support Services FY 2020-21 Final Spending Authority	\$7,515,264	0.0	\$7,136,298	\$0	\$378,966	\$0	\$0				
	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for							\$0				
AG	People with IDD	(\$6,365)	0.0	(\$6,044)	\$0	(\$321)	\$0					
AH	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	\$0	0.0	\$0	\$0	\$0	\$0	\$0				
AI	Total FY 2020-21 Spending Authority	\$7,508,899	0.0	\$7,130,254	\$0	\$378,645	\$0	\$0				
AJ	State Supported Living Services			00.000.000								
AK AL	FY 2020-21 Spending Authority Annualization of FY 2020-21 R-10 Provider Rate Adjustments	\$9,893,584 (\$9,008)	0.0	\$8,228,509 (\$7,443)	\$0 \$0	\$1,665,075 (\$1,565)	\$0 \$0	\$0 \$0				
AM	Total FY 2020-21 Spending Authority	\$9,884,576	0.0	\$8,221,066	\$0	\$1,663,510	\$0 \$0	\$0				
	State Supported Living Services Case Management	42,221,070		2.,,000	30	,,	40					
AN	FY 2020-21 Final Spending Authority	\$2,416,320	0.0	\$2,140,088	\$0	\$276,232	\$0	\$0				
AO	Annualization of FY 2020-21 R-10 Provider Rate Adjustments	(\$2,219)	0.0	(\$1,961)	\$0	(\$258)	\$0	\$0				
AP	Total FY 2021-22 Spending Authority	\$2,414,101	0.0	\$2,138,127	\$0	\$275,974	\$0	\$0				
	Preventive Dental Hygiene											
AQ	FY 2020-21 Final Spending Authority	\$64,894	0.0	\$64,894	\$0 \$0	\$0 \$0	\$0 \$0	\$0				
AR AS	Annualization of FY 2020-21 R-10 Provider Rate Adjustments Total FY 2021-22 Spending Authority	(\$55) \$64,839	0.0	(\$55) \$64,839	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0				
210	Supported Employment Provider & Certification Reimbursement	904,039	0.0	ф <del>04,039</del>	30	\$0	30	30				
AT	Supported Employment Provider & Certification Reimoursement  FY 2020-21 Final Spending Authority	\$303,158	0.0	\$303,158	S0	\$0	\$0	\$n				
AU	Total FY 2021-22 Spending Authority	\$303,158	0.0	\$303,158	\$0	\$0	\$0	\$0				
	Supported Employment Pilot Program	42.03,100		40.0,100	30	\$0	Ψ0					
AV	FY 2020-21 Final Spending Authority	\$500,000	0.0	\$0	\$0	\$500,000	\$0	\$0				
	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for					,						
	. amount and of the 2017-20 IC-10 Employment this initiatives and state Flograms 101	\$75,000	0.0	\$0	\$0	\$75,000	\$0	\$0				
AW	People with IDD	\$75,000										
AW	People with IDD  Total FY 2021-22 Spending Authority	\$575,000	0.0	\$0	\$0	\$575,000	\$0	\$0				

	Table G.3 FY 2022-	23 Office of Comn	unity Li	ving Appropriation	Build			
Row	Item	Total Funds	FTE	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
A	Adult Comprehensive Services FY 2021-22 Final Spending Authority	\$528,136,058	0.0	\$247,091,465	\$0	\$791,945	\$0	\$280,252,648
В	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for  People with IDD	\$0	0.0	\$800,000	•	(\$800,000)	\$0	\$0
С	Annualization of JBC Action on IDD Enrollments	\$13,517	0.0	\$6,759	\$0	\$0	\$0	\$6,758
D	Annualization of JBC Action on Denver Minimum Wage	\$763,075	0.0	\$381,537	\$0	\$0	\$0	\$381,538
E	IDD CF Adjustment	\$602,504	0.0	\$0	\$0	\$602,504	\$0	\$0
F	Total FY 2022-23 Spending Authority	\$529,515,154	0.0	\$248,279,761	\$0	\$594,449	\$0	\$280,640,944
	Adult Supported Living Services							
G	FY 2021-22 Final Spending Authority	\$72,230,580	0.0	\$33,523,841	\$0	\$389,554	\$0	
Н	Annualization of JBC Action on Denver Minimum Wage	\$148,569	0.0	\$74,284	\$0	\$0		
I	Total FY 2022-23 Spending Authority	\$72,379,149	0.0	\$33,598,125	\$0	\$389,554	\$0	\$38,391,470
	Children's Extensive Support Services							
J	FY 2021-22 Final Spending Authority	\$30,014,841	0.0	\$14,109,363	\$0	\$0	\$0	\$15,905,478
K	Annualization of JBC Action on Denver Minimum Wage	\$29,285	0.0	\$14,642	\$0	\$0		. ,
L	Total FY 2022-23 Spending Authority	\$30,044,126	0.0	\$14,124,005	\$0	\$0	\$0	\$15,920,121
	Children's Habilitation Residential Program Waiver							
M	FY 2021-22 Final Spending Authority	\$4,824,927	0.0	\$2,412,653	\$0	\$0		
N	Total FY 2022-23 Spending Authority	\$4,824,927	0.0	\$2,412,653	\$0	\$0	\$0	\$2,412,274
	Eligibility Determination and Waitlist Management							
О	FY 2019-20 Final Spending Authority	\$3,167,978	0.0	\$2,800,219	\$0	\$0		\$367,759
P	Total FY 2022-23 Spending Authority	\$3,167,978	0.0	\$2,800,219	\$0	\$0	\$0	\$367,759
	Case Management							
Q	FY 2021-22 Final Spending Authority	\$40,386,832	0.0	\$18,845,933	\$0	\$81,114		
R	Total FY 2022-23 Spending Authority	\$40,386,832	0.0	\$18,845,933	\$0	\$81,114	\$0	
S	Targeted Case Management	\$33,130,183	0.0	\$15,468,081	\$0	\$55,596	\$0	\$17,606,506
T	QA, UR and SIS	\$7,256,649	0.0	\$3,377,852	\$0	\$25,518	\$0	\$3,853,279
	Family Support Services							
U	FY 2021-22 Final Spending Authority	\$7,508,899	0.0	\$7,130,254	\$0	\$378,645	\$0	\$0
W	CF Adjustment Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for	(\$7,483) (\$371,162)	0.0	\$0 \$0	\$0 \$0	(\$7,483) (\$371,162)	\$0 \$0	\$0 \$0
	People with IDD	, , ,						
X	Total FY 2020-21 Spending Authority	\$7,130,254	0.0	\$7,130,254	\$0	\$0	\$0	\$0
	State Supported Living Services							
Y	FY 2020-21 Spending Authority	\$9,884,576	0.0	\$8,221,066	\$0	\$1,663,510	\$0	\$0
Z	IDD CF Adjustment	\$57,656	0.0	\$0	\$0	\$57,656	\$0	\$0
AA	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for People with IDD	(\$1,721,166)	0.0	\$0		(\$1,721,166)	\$0	
AB	Total FY 2020-21 Spending Authority	\$8,221,066	0.0	\$8,221,066	\$0	\$0	\$0	\$0
AC	State Supported Living Services Case Management							
AD	FY 2021-22 Final Spending Authority	\$2,414,101	0.0	\$2,138,127	\$0	\$275,974	\$0	\$0
AE	IDD CF Adjustment	\$7,723	0.0	\$0	\$0	\$7,723	\$0	\$0
AF	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for People with IDD	(\$283,697)	0.0	\$0	\$0	(\$283,697)	\$0	\$0
AG	Total FY 2022-23 Spending Authority	\$2,138,127	0.0	\$2,138,127	\$0	\$0	\$0	\$0
	Preventive Dental Hygiene							
AH	FY 2021-22 Final Spending Authority	\$64,839	0.0	\$64,839	\$0	\$0	\$0	\$0
AI	Total FY 2022-23 Spending Authority	\$64,839	0.0	\$64,839	\$0	\$0	\$0	\$0
AJ	Supported Employment Provider & Certification Reimbursement							
AK	FY 2021-22 Final Spending Authority	\$303,158	0.0	\$303,158	\$0	\$0	\$0	\$0
AL	Total FY 2022-23 Spending Authority	\$303,158	0.0	\$303,158	\$0	\$0	\$0	\$0
	Supported Employment Pilot Program							
AM	FY 2021-22 Final Spending Authority	\$575,000	0.0	\$0	\$0	\$575,000	\$0	\$0
AN	Annualization of FY 2019-20 R-16 Employment First Initiatives and State Programs for People with IDD	(\$575,000)	0.0	\$0		(\$575,000)	\$0	\$0
AO	Total FY 2022-23 Spending Authority	\$0	0.0	\$0	\$0	\$0	\$0	\$0
AP								
Aľ	Grand Total FY 2022-23 Spending Authority	\$698,175,610	0.0	\$337,918,140	\$0	\$1,065,117	\$0	\$359,192,353

## Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY	/ 2021-22 Budget Cyc	le
Request Title			
R	-06 Remote Supports for HCBS Programs		
Dept. Approval By:  OSPB Approval By:	BC Cant		Supplemental FY 2020-21
	0		Budget Amendment FY 2021-22
		<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,098,281,335	\$0	\$9,056,424,979	(\$716,616)	(\$2,149,847)
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$2,278,577,901	\$0	\$2,456,210,499	(\$348,345)	(\$1,045,040)
Impacted by Change Request	CF	\$1,393,675,650	\$0	\$1,202,307,021	(\$9,962)	(\$29,883)
rtoquoot	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
	FF	\$5,384,423,824	\$0	\$5,354,281,733	(\$358,309)	(\$1,074,924)

	_	FY 202	20-21	FY 20:	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	(\$639,397)	(\$1,918,189)
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$310,810)	(\$932,432)
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	(\$8,888)	(\$26,662)
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
Jervices Fremiums	FF	\$5,346,276,891	\$0	\$5,315,964,548	(\$319,699)	(\$959,095)
	Total	\$71,889,381	\$0	\$72,230,580	(\$77,219)	(\$231,658)
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$33,352,698	\$0	\$33,523,841	(\$37,535)	(\$112,608)
Developmental Disabilities, (2) Medicaid	CF	\$389,750	\$0	\$389,554	(\$1,074)	(\$3,221)
Programs - Adult	RF	\$0	\$0	\$0	\$0	\$0
Supported Living Services	FF	\$38,146,933	\$0	\$38,317,185	(\$38,610)	(\$115,829)

Auxiliary Data

Requires Legislation? YES

Type of Request? Department of Health Care Policy and Financing Prioritized Request Interagency Approval or Related Schedule 13s:

No Other Agency Impact

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

#### Department Priority: R-6 Request Detail: Remote Supports for HCBS Programs

	Summary of I	<b>Funding Change fo</b>	or FY 2021-22	
	Tot	tals	Increment	al Change
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23
	Appropriation	Base	Request	Request
Total Funds	\$9,098,281,335	\$9,056,424,979	(\$716,616)	(\$2,149,847)
FTE	0.0	0.0	0.0	0.0
General Fund	\$2,278,577,901	\$2,456,210,499	(\$348,345)	(\$1,045,040)
Cash Funds	\$1,393,675,650	\$1,202,307,021	(\$9,962)	(\$29,883)
Reappropriated Funds	\$41,603,960	\$43,625,726	\$0	\$0
Federal Funds	\$5,384,423,824	\$5,354,281,733	(\$358,309)	(\$1,074,924)

### Summary of Request:

The Department requests to implement a remote support option into existing electronic monitoring services in several Home and Community-Based Services (HCBS) waivers. Remote Supports is an emerging service model that combines technology and direct care to support people with disabilities and reduces the use of in-person services. Examples of remote supports include monitors, sensors, and communication devices that allow attendants in a separate location to provide verbal prompts to members in their homes. Remote supports can provide a convenient means for members to stay in contact with caregivers and reduce risks associated with in-person contact amid concerns of the pandemic. Expanding electronic monitoring to include remote supports would result in cost savings to the State and would increase independence for HCBS waiver members. Remote supports have been implemented in other states which saw members shift utilization away from higher cost, in-person care to the remote option. This request represents a decrease of less than 0.5% of the Department's FY 2020-21 Long Bill total funds appropriation.

This request aligned with Step 2 on the Evidence Continuum based on studies examining a similar program in Ohio, which measured program impacts including the adoption rate of the technology.



#### Current Program:

The Department currently operates ten Home and Community Based Services (HCBS) programs that served an estimated 56,997 people in FY 2019-20. Each HCBS program is an extra set of Health First Colorado benefits that a member could qualify for in certain cases. These benefits help a member remain in their home and community instead of institutions.

Electronic monitoring services include the installation, purchase, or rental of electronic monitoring devices which enable the individual to secure help in the event of an emergency and may be used to provide reminders to the individual of medical appointments, treatments, or medication schedules. These services are required because of an individual's illness, impairment, or disability as documented on the member's assessment, and are essential to prevent institutionalization of the individual. Examples of electronic monitoring services include Personal Emergency Response System (PERS), Medication Reminders, and Assistive Technology that exist in all adult waivers except the Home and Community-Based Services Waiver For Persons With Developmental Disabilities (HCBS-DD).

Remote supports are a new, different kind of electronic monitoring that would be made available in these waivers within the Electronic Monitoring Service umbrella. Remote supports enable people to use technology in their homes, such as monitors, sensors, and communication devices and allow attendants in a separate location to provide verbal prompts to members in their homes. For example, some HCBS members might currently be receiving in-person homemaker services for meal preparation for someone with memory or other cognitive issues. Instead of having an attendant come to their home, sensors on the refrigerator could notify a remote support worker if the person hasn't opened the refrigerator by a certain time, prompting the worker to reach out. The remote support worker could then prompt the person through the meal preparation process, and sensors on the stove could alert a remote support worker if left on. Similar sensor and prompting combinations are possible for many in-person supports, such as bathing, laundry, and for safety concerns such as open windows and doors or fall detection.

#### Problem or Opportunity:

The Department has an opportunity to achieve cost savings by offering remote services as an alternative option to in-person care for HCBS members.

During the COVID-19 pandemic, many seniors and people with disabilities receiving long-term care in their homes face serious difficulties. HCBS members rely on attendants coming into their home to help with tasks such as bathing, dressing, and preparing meals which can be challenging or even risky under normal circumstances. Many HCBS members have weaker immune systems

<sup>&</sup>lt;sup>1</sup> "White Paper: Use of Remote Support in Ohio and Emerging Technologies on the Horizon". Nisonger Center, The Ohio State University. 2018. https://nisonger.osu.edu/wp-content/uploads/2017/02/White-Paper-Use-of-Remote-Support-in-Ohio-and-Emerging-Technologies-on-the-Horizon.pdf

putting them at higher risk all the time and especially during outbreaks like COVID-19 or the seasonal flu. HCBS services during public health emergencies can be critical to preventing increased needs for nursing facilities or hospitals by helping members stay safely in their homes and communities.<sup>2</sup>

A report completed by University of Colorado with Disability Cocoon found that the Department's current electronic monitoring services are "antiquated" and do "not reflect the modernization of technology or service deliver often associated with emerging remote supports". The Department sees an opportunity to modernize electronic monitoring by offering a remote supports benefit. This would also align with the current direction of health care to allow for more virtual access to services considering the COVID-19 pandemic.

#### **Proposed Solution:**

The Department requests a reduction of \$716,616 total funds including a reduction of \$348,345 General Fund, a reduction of \$9,962 cash funds, and a reduction of \$358,309 federal funds in FY 2021-22, a reduction of \$2,149,847 total funds including a reduction of \$1,045,040 General Fund, a reduction of \$29,883 cash funds, and a reduction of \$1,074,924 federal funds in FY 2022-23, and a reduction of \$2,866,462 total funds including a reduction of \$1,393,387 General Fund, a reduction of \$39,843 cash funds, and a reduction of \$1,433,232 federal funds in FY 2023-24 and ongoing to implement a remote support option into existing electronic monitoring services in several Home and Community-Based Services (HCBS) waivers. This request requires statutory changes to authorize these services in some instances.

The Department is requesting to implement remote supports into the following HCBS waivers: Elderly, Blind, and Disabled (HCBS-EBD), Community Mental Health Supports (HCBS-CMHS), Brain Injury (HCBS-BI), Spinal Cord Injury (HCBS-SCI), and Supported Living Services (HCBS-SLS). This would require one statute change for HCBS-EBD as the current definition of electronic monitoring is too specific to allow for a remote support option. For all the waivers, the Department would need to obtain approval from the Centers for Medicare and Medicaid Services (CMS) prior to implementation. Waiver members would have the option to use remote supports. The Department would not mandate use of this technology, and members may choose to continue to receive in-person services.

If the request is not approved the Department would miss an opportunity to achieve cost savings without reducing services to members or risking worsening health outcomes. This request presents

<sup>&</sup>lt;sup>2</sup> "How Are States Supporting Medicaid Home and Community-Based Services During the COVID-19 Crisis?". Kaiser Family Foundation. May 5, 2020. https://www.kff.org/coronavirus-covid-19/issue-brief/how-are-states-supporting-medicaid-home-and-community-based-services-during-the-covid-19-crisis/

<sup>&</sup>lt;sup>3</sup> "Remote Supports". D1 Colorado Technology Advancement Project. https://www.colorado.gov/pacific/hcpf/legislator-resource-center

a unique opportunity to achieve cost savings by adding a service that provides more efficiency and independence to members rather than reducing services or care.

The Department has consulted other states and used contractor resources to support the claim that remote supports would result in cost savings. In particular, the Department has done extensive research on the service delivery model used in Ohio and would implement remote supports similarly in Colorado with adjustments from lessons learned. The Department believes there are opportunities to achieve higher utilization and more savings faster than Ohio did by focusing on areas Ohio state staff have noted as necessary for service implementation success: outreach to members and stakeholders, training for case managers, and provider recruitment.

For member outreach and education, the Department plans to leverage an existing relationship with the Coleman Institute for Cognitive Disabilities at the University of Colorado to connect users from other states with Colorado members to discuss the increased independence they experienced once utilizing remote supports. Existing national providers would be invited to conduct regional and virtual demonstration sessions. Extensive stakeholder engagement on regulatory framework and implementation processes would occur both prior to implementation and during the six months immediately following to address questions and issues. Member outreach done partway through or after implementation was noted by multiple states as a major impediment to member uptake and satisfaction with remote supports.

To address case manager education and preparedness, the Department plans to create a training for case managers that emphasizes assessing if someone's needs can be met through remote supports first before looking at in-person services. This process change would likely result in remote supports being added to service authorizations for HCBS members faster than what was seen in Ohio, which would lead to a faster ramp-up and quicker realization of cost savings.

Lastly, the Department plans to actively recruit providers prior to implementation so that the provider pool is ready to accept members right away. The Department has already identified existing providers of remote supports for other states' HCBS programs that are active but limited in Colorado. The Department would first outreach to those providers if this request is approved, followed by outreach to national providers not currently active in Colorado, and invitations to expand into remote supports to existing in-state providers of HCBS.

The Department believes this request is on Step 2, "Identify Outputs," of the Office of State Planning and Budgeting (OSPB) Evidence Continuum. Ohio has implemented a similar program and has studies impacts such as the extent to which the remote supports were adopted by patients.<sup>4</sup>.

<sup>&</sup>lt;sup>4</sup> "White Paper: Use of Remote Support in Ohio and Emerging Technologies on the Horizon". Nisonger Center, The Ohio State University. 2018. https://nisonger.osu.edu/wp-content/uploads/2017/02/White-Paper-Use-of-Remote-Support-in-Ohio-and-Emerging-Technologies-on-the-Horizon.pdf

The Department has also consulted with other states on utilization and uptake measures to estimate savings but has not yet collected data or evaluated whether the cost savings were achieved since the program has not been implemented yet.

#### **Anticipated Outcomes:**

Modernizing electronic monitoring by offering a remote supports benefit has the potential to reduce HCBS expenditures by providing services at a lower cost than residential or in-person care, would increase independence for members while ensuring safety and support, could address workforce shortages by increasing provider efficiency, and improve access to care in rural areas.

In addition, this request aligns with the Health Cabinet's WIG 3: Leverage New Normal Opportunities. Adopting remote support options for HCBS waivers means driving a "new normal" that enhances remote health care. A study from The Human Services Research Institute (HSRI) published in 2016 discusses usage of remote technology by people with intellectual and development disabilities and states, "As a service for increasing independence at home, remote technology can be a good option for individuals needing either sporadic support, or full-time support not requiring hands-on assistance"<sup>5</sup>. The Department believes that statement describes the needs of many HCBS members enrolled on waivers. Remote supports are a way to leverage existing technology to reduce the number of in-home visits while still providing members with the care they need.

Remote supports would reduce HCBS expenditure because the rate for remote supports is about one-third of the rate for in-person services. This aligns with the Department's WIG "Medicaid Cost Control" as the Department believes this would lower per-utilizer costs for those who access it. The Department estimated cost savings by examining data from other states that have already implemented remote supports, particularly Ohio. The savings come from the lower rate and individuals shifting care from in-person to remote as well as shifting members with lower acuity out of residential services and into their homes. The Department would evaluate service plan authorizations to determine the savings and costs avoided after implementation. This would be easy to trace because case managers must authorize a certain amount of in-person and remote care therefore the Department could easily quantify the change in both service delivery options post-implementation.

The Department anticipates that many HCBS members would shift some of their current utilization of in-person services to a remote support option if available, resulting in cost savings since the rate for remote services is about one third of the rate for in-person services such as personal care or homemaker. The Department believes that this request would also have a positive effect on

<sup>&</sup>lt;sup>5</sup> "Remote Technology. Application of Remote Technology in Supporting People with Intellectual and Developmental Disabilities". Human Services Research Institute. December, 2016. https://onlinelibrary.wiley.com/doi/abs/10.1111/jar.12709

member care. In a paper examining the effect of remote supports on Ohio's Medicaid members, authors found that about half of people interviewed reported increased independence<sup>4</sup>. Researchers also found that safety was the most frequently endorsed response among satisfaction metrics with the use of remote supports. The study surveyed and interviewed HCBS members utilizing remote supports through one of three of Ohio's waivers that included a remote support option.

Remote supports have the possibility to lower the turnover rate of direct service providers. Nationwide, turnover rates annually are estimated to be between 38.2% and 50% annually<sup>6</sup>. For example, a staff person who typically provides eight hours of in-person care per day may be able to provide remote supervisory support to up to fifty individuals per day with the assistance of monitoring sensors and two-way communication due to the intermittent nature of engagement. Easing the known workforce shortage crisis could also alleviate wage and rate pressure, leading to additional long-term cost savings.

Access to care could be improved for users in all areas due to increased efficiencies in worker distribution, however, rural member access to care has the most opportunity for improvement with the addition of remote supports. Rural access could be improved by eliminating or reducing the need for locally-based staff or costly travel. The increases in workforce efficiency are especially powerful when connecting chronically underserved communities to provider pools not limited by geographic considerations.

#### Assumptions and Calculations:

Please see Appendix A for details of calculations and tables.

The Department estimates savings in several areas from implementing remote supports in HCBS waivers. First, utilizers of personal care, homemaker, and Independent Living Skills Training (ILST) may shift some of their in-person care to the remote options which would have a lower rate and result in savings. To estimate savings, the Department looked at other states that have implemented remote supports. Overall, there are 19 other states with remote support options but most of these options reside under a residential service and are reimbursed within the residential per diem rate. Only two states have implemented remote supports as its own, independent service: Ohio and Indiana. The Department's proposed service and implementation plan is closest to Ohio, so the estimated impact to utilization is based on information from Ohio only.

Savings to personal care, homemaker, and ILST come from a portion of utilizers shifting part of their units from in-person care to remote support. The Department examined forecasts from Ohio that were approved by the Centers for Medicare and Medicaid Services (CMS) to estimate the shift in Colorado. Ohio's forecasts were based on actual data since implementation of the remote

<sup>6</sup> "White Paper: Use of Remote Support in Ohio and Emerging Technologies on the Horizon". Nisonger Center, The Ohio State University. 2018.

support option. The Department calculated the ratio of remote support users to personal care and homemaker users for each service delivery model (agency-based care or participant direction). The Department estimates a similar take-up rate for waivers with similar populations to Ohio's Comprehensive Waiver, such as HCBS-BI, HCBS-CMHS, BI, and HCBS-SLS. The Department estimates a dampened take up rate for waivers for members who primarily have physical disabilities, such as HCBS-EBD and HCBS-SCI. Ohio's waiver is for people with intellectual and development disabilities (IDD) and the Department believes the rate of utilization may be slightly lower for those waivers that primarily enroll members with physical disabilities rather than IDD or other cognitive disabilities due to different needs for in-person, hands-on care.

The Department also looked at the forecasts from Ohio to estimate how many units per utilizer would shift from in-person to remote. The Department calculated the ratio of remote support units to in-person personal care and homemaker units and applied this ratio to current utilization data of the affected waivers. The Department altered this assumption where appropriate, in the same way the utilizer assumptions were altered for HCBS-EBD and HCBS-SCI and applied it to the waivers where remote supports would be added.

The savings from utilization shifts come from the lower rate for remote supports. The Department assumes its rate would align with Ohio's which is \$8.56. Although this is lower than the current minimum wage, the Department does not believe this is an issue because agencies would be receiving payments for multiple members during an attendant's shift and the attendant would still be receiving a wage above the required minimum. This rate is blended between daytime and overnight care and aligns with Ohio's rate model.

In addition to the hourly rate for care, there would be a small installation fee for any necessary equipment. The Department believes this would operate similarly to the existing installation service Personal Emergency Response Systems (PERS), a service offered on other waivers. The Department estimated costs by applying the average PERS installation cost per utilizer for FY 2019-20 to the forecasted number of remote support users each year. PERS installations range from basic pendants with a call button to sensor systems similar to what would be used under remote supports, such as door sensors and out-of-bed sensors, but with more limited monitoring and communication able to be initiated only by the member. The Department believes this to be a good proxy for what remote support installations could cost.

Another effect of adding remote supports would be cost savings to the Supportive Living Program (SLP) in the Brain Injury (BI) waiver. The Supportive Living Program (SLP) is a specialized assisted living services for people with brain injuries. Services include 24-hour oversight; assessment, training and supervision of self-care; medication management; behavioral management; and cognitive supports. They also include interpersonal and social skills development. The Department believes members with lower acuity scores that are currently

utilizing the SLP service may be able to stay in their homes and stop using SLP if remote supports were available. In addition, there may be some avoided enrollments into SLP from members who are able to stay in their homes if remote supports are an option. This would cause significant cost savings since the rate for the residential service is much higher than the remote option. The Department assumes that a quarter of SLP utilizers with acuity scores in the lowest two levels would either shift out of SLP or avoid a future enrollment. Savings for this populations comes from the reduction in SLP units where daily rates range from \$197.91 to \$369.67. For the detailed calculation, please see table 9.1 in Appendix A.

Implementing remote supports could potentially result in long-term savings for HCBS-DD. From May 2018 through December 2019, 63% of members enrolled onto HCBS-DD had a needs-assessment score of 1 or 2. Support Intensity Scale (SIS) scores range from 1 at the lowest acuity to 7 at the highest. By offering remote supports on HCBS-SLS paired with targeted outreach, the Department could potentially reduce the number of HCBS-DD emergency enrollments needed throughout the year. Most members on HCBS-SLS are also on the waiting list for HCBS-DD. The Department believes if more services are offered on HCBS-SLS that meet people where they are, fewer people would need an emergency enrollment into HCBS-DD.

The Department is currently forecasting 189 emergency enrollments for FY 2021-22. Over time, with more service options in HCBS-SLS that meet people where they are and fill any existing gaps in care, the number of emergency enrollments each fiscal year could decrease, resulting in long-term cost savings from people staying on the HCBS-SLS waiver longer, which has significantly lower costs per utilizer than HCBS-DD. While this diversion is not included in potential cost savings due to the unpredictability of the size of diversion, it is included here due to the potential for future savings. This would potentially increase average cost per utilizer on HCBS-SLS while reducing demand for and utilization of more costly HCBS-DD services, lowering overall expenditures. Even with moderate increases in HCBS-SLS expenditures, the potential to capture cost savings and address waitlist concerns adds to the urgency of this request.

The Department included a ramp-up timeline for both implementation and utilization in Table 3.1 through Table 3.3 of Appendix A. The Department would need to submit and gain CMS approval for waiver amendments in order to implement the service. The Department also believes this new service would require a statutory amendment to HCBS-EBD to broaden the definition of "electronic monitoring services" to allow for remote support options. Given these requirements, the Department estimates the earliest implementation date could be January 1, 2022. In addition, the Department expects that it would take up to three years for service utilization to ramp-up as members become aware of the services and case managers start working with members to add this option to their determined service plan.

In addition to members ramping up their utilization, the Department expects the provider network to ramp up over time as well. There are several national remote support providers currently operating in Colorado and the Department anticipates there are more providers that could be outreached to provide services in the state. The Department also believes some providers of other services like Personal Emergency Response System (PERS) and home care agencies would shift into offering remote supports to expand their client base, avoid losing existing members, and take advantage of the increases in workforce efficiency that would reduce the impact of employee turnover, workforce shortages, and wage increase pressure.

	Table 1.1 Summary by Line Item FY 2021-22											
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	(2) Medical Services Premiums	(\$639,397)	0.0	(\$310,810)	(\$8,888)	\$0	(\$319,699)	50.00%	Table 2.1 Sum of Rows A thru F			
В	(4) Office of Community Living (A) Division of Intellectual and Development Disabilities (2) Medicaid Programs, Adult Supported Living Services	(\$77,219)	0.0	(\$37,535)	(\$1,074)	\$0	(\$38,610)	50.00%	Table 2.1 Sum of Rows G thru I			
С	Total Request	(\$716,616)	0.0	(\$348,345)	(\$9,962)	\$0	(\$358,309)		Sum of Rows A thru B			

	Table 1.2 Summary by Line Item											
	FY 2022-23											
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	(2) Medical Services Premiums	(\$1,918,189)	0.0	(\$932,432)	(\$26,662)	\$0	(\$959,095)	50.00%	Table 2.2 Sum of Rows A thru F			
В	(4) Office of Community Living (A) Division of Intellectual and Development Disabilities (2) Medicaid Programs, Adult Supported Living Services	(\$231,658)	0.0	(\$112,608)	(\$3,221)	\$0	(\$115,829)	50.00%	Table 2.2 Sum of Rows G thru I			
C	Total Request	(\$2,149,847)	0.0	(\$1,045,040)	(\$29,883)	\$0	(\$1,074,924)		Sum of Rows A thru B			

	Table 1.3 Summary by Line Item FY 2023-24											
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	(2) Medical Services Premiums	(\$2,557,584)	0.0	(\$1,243,242)	(\$35,550)	\$0	(\$1,278,792)	50.00%	Table 2.3 Sum of Rows A thru F			
В	(4) Office of Community Living (A) Division of Intellectual and Development Disabilities (2) Medicaid Programs, Adult Supported Living Services	(\$308,878)	0.0	(\$150,145)	(\$4,293)	\$0	(\$154,440)	50.00%	Table 2.3 Sum of Rows G thru I			
C	Total Request	(\$2,866,462)	0.0	(\$1,393,387)	(\$39,843)	\$0	(\$1,433,232)		Sum of Rows A thru B			

Table 2.1
Summary by Initiative
FY 2021-22

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
Savings t	avings to Non-Intellectual and Development Disabilities (IDD) Waivers										
A	Agency-Based Care Savings	(\$270,700)	0.0	(\$131,587)	(\$3,763)	\$0	(\$135,350)	50.00%	Table 3.1 Row A		
В	In-Home Support Services (IHSS) Savings	(\$95,778)	0.0	(\$46,558)	(\$1,331)	\$0	(\$47,889)	50.00%	Table 3.1 Row B		
С	Consumer Directed Attendant Support Services (CDASS) Savings	(\$113,652)	0.0	(\$55,246)	(\$1,580)	\$0	(\$56,826)	50.00%	Table 3.1 Row C		
D	Independent Life Skills Training Savings	(\$12,423)	0.0	(\$6,038)	(\$173)	\$0	(\$6,212)	50.00%	Table 3.1 Row D		
Е	Supported Living Program Savings	(\$172,290)	0.0	(\$83,750)	(\$2,395)	\$0	(\$86,145)	50.00%	Table 3.1 Row E		
F	Installation Costs	\$25,446	0.0	\$12,369	\$354	\$0	\$12,723	50.00%	Table 3.1 Row F		
Savings t	to Supported Living Services (SLS) Waiver										
G	Agency-Based Care Savings	(\$66,008)	0.0	(\$32,086)	(\$918)	\$0	(\$33,004)	50.00%	Table 3.1 Row G		
Н	CDASS Savings	(\$15,241)	0.0	(\$7,408)	(\$212)	\$0	(\$7,621)	50.00%	Table 3.1 Row H		
I	Installation Costs	\$4,030	0.0	\$1,959	\$56	\$0	\$2,015	50.00%	Table 3.1 Row I		
J	Total Request	(\$716,616)	0.0	(\$348,345)	(\$9,962)	\$0	(\$358,309)		Sum of all rows		

Table 2.2
Summary by Initiative
EV 2022-23

				F Y 2022-	-23						
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
Savings t	avings to Non-Intellectual and Development Disabilities (IDD) Waivers										
A	Agency-Based Care Savings	(\$812,099)	0.0	(\$394,761)	(\$11,288)	\$0	(\$406,050)	50.00%	Table 3.2 Row A		
В	In-Home Support Services (IHSS) Savings	(\$287,333)	0.0	(\$139,672)	(\$3,994)	\$0	(\$143,667)	50.00%	Table 3.2 Row B		
C	CDASS Socience	(\$340,956)	0.0	(\$165,739)	(\$4,739)	\$0	(\$170,478)	50.00%	Table 3.2 Row C		
D	Independent Life Skills Training Savings	(\$37,268)	0.0	(\$18,116)	(\$518)	\$0	(\$18,634)	50.00%	Table 3.2 Row D		
E	Supported Living Program Savings	(\$516,870)	0.0	(\$251,251)	(\$7,184)	\$0	(\$258,435)	50.00%	Table 3.2 Row E		
F	Installation Costs	\$76,337	0.0	\$37,107	\$1,061	\$0	\$38,169	50.00%	Table 3.2 Row F		
Savings t	to Supported Living Services (SLS) Waiver										
G	Agency-Based Care Savings	(\$198,023)	0.0	(\$96,258)	(\$2,753)	\$0	(\$99,012)	50.00%	Table 3.2 Row G		
Н	CDASS Savings	(\$45,724)	0.0	(\$22,226)	(\$636)	\$0	(\$22,862)	50.00%	Table 3.2 Row H		
I	Installation Costs	\$12,089	0.0	\$5,876	\$168	\$0	\$6,045	50.00%	Table 3.2 Row I		
J	Total Request	(\$2,149,847)	0.0	(\$1,045,040)	(\$29,883)	\$0	(\$1,074,924)		Sum of all rows		

#### Table 2.3 Summary by Initiative FY 2022-23

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
avings to Non-Intellectual and Development Disabilities (IDD) Waivers										
A	Agency-Based Care Savings	(\$1,082,799)	0.0	(\$526,348)	(\$15,051)	\$0	(\$541,400)	50.00%	Table 3.3 Row A	
В	In-Home Support Services (IHSS) Savings	(\$383,110)	0.0	(\$186,230)	(\$5,325)	\$0	(\$191,555)	50.00%	Table 3.3 Row B	
C	Consumer Directed Attendant Support Services (CDASS) Savings	(\$454,608)	0.0	(\$220,985)	(\$6,319)	\$0	(\$227,304)	50.00%	Table 3.3 Row C	
D	Independent Life Skills Training Savings	(\$49,690)	0.0	(\$24,154)	(\$691)	\$0	(\$24,845)	50.00%	Table 3.3 Row D	
Е	Supported Living Program Savings	(\$689,160)	0.0	(\$335,001)	(\$9,579)	\$0	(\$344,580)	50.00%	Table 3.3 Row E	
F	Installation Costs	\$101,783	0.0	\$49,476	\$1,415	\$0	\$50,892	50.00%	Table 3.3 Row F	
avings	to Supported Living Services (SLS) Waiver									
G	Agency-Based Care Savings	(\$264,031)	0.0	(\$128,345)	(\$3,670)	\$0	(\$132,016)	50.00%	Table 3.3 Row G	
Н	CDASS Savings	(\$60,965)	0.0	(\$29,635)	(\$847)	\$0	(\$30,483)	50.00%	Table 3.3 Row H	
I	Installation Costs	\$16,118	0.0	\$7,835	\$224	\$0	\$8,059	50.00%	Table 3.3 Row I	
J	Total Request	(\$2,866,462)	0.0	(\$1,393,387)	(\$39,843)	\$0	(\$1,433,232)		Sum of all rows	

	Table 3.1 Implementation Adjustments for Year 1 of Implementation									
Row	Implementation Adjustments	Full Impact	Ramp Up Factor	Implementation Factor	<b>Estimated Savings</b>					
Non-Intel	Non-Intellectual and Developmental Disabilities (IDD) Waivers									
A	Agency-Based Services Savings	(\$1,082,799)	50.00%	50.00%	(\$270,700)					
В	IHSS Savings	(\$383,110)	50.00%	50.00%	(\$95,778)					
С	CDASS Savings	(\$454,608)	50.00%	50.00%	(\$113,652)					
D	ILST Savings	(\$49,690)	50.00%	50.00%	(\$12,423)					
E	Savings to SLP	(\$689,160)	50.00%	50.00%	(\$172,290)					
F	Installation Costs	\$101,783	50.00%	50.00%	\$25,446					
Supporte	d Living Services Waiver									
G	Agency-Based Services Savings	(\$264,031)	50.00%	50.00%	(\$66,008)					
Н	CDASS Savings	(\$60,965)	50.00%	50.00%	(\$15,241)					
I	Installation Costs	\$16,118	50.00%	50.00%	\$4,030					
J	Total	(\$2,866,462)	50.00%	50.00%	(\$716,616)					

		Table 3.2			
Row	Implementation Implementation Adjustments	Full Impact	ar 2 of Implementat	Implementation	Estimated Savings
	1	•	rump ep ractor	Factor	Listinated Savings
Non-Inte	ellectual and Developmental Disabilities (I	DD) Waivers	ı		
A	Agency-Based Services Savings	(\$1,082,799)	75.00%	100.00%	(\$812,099)
В	IHSS Savings	(\$383,110)	75.00%	100.00%	(\$287,333)
С	CDASS Savings	(\$454,608)	75.00%	100.00%	(\$340,956)
D	ILST Savings	(\$49,690)	75.00%	100.00%	(\$37,268)
Е	Savings to SLP	(\$689,160)	75.00%	100.00%	(\$516,870)
F	Installation Costs	\$101,783	75.00%	100.00%	\$76,337
Support	ed Living Services Waiver				
G	Agency-Based Services Savings	(\$264,031)	75.00%	100.00%	(\$198,023)
Н	CDASS Savings	(\$60,965)	75.00%	100.00%	(\$45,724)
I	Installation Costs	\$16,118	75.00%	100.00%	\$12,089
J	Total	(\$2,866,462)	75.00%	100.00%	(\$2,149,847)
	T 1	Table 3.3			
Row	Implementation	n Adjustments for Yea	ar 3 of Implementat	ion	
Kow	Implementation Adjustments		nr 3 of Implementat	ion Implementation Factor	Estimated Savings
	<u> </u>	Full Impact		Implementation	Estimated Savings
	Implementation Adjustments	Full Impact		Implementation	Estimated Savings
Non-Inte	Implementation Adjustments	Full Impact DD) Waivers	Ramp Up Factor	Implementation Factor	
Non-Inte	Implementation Adjustments Ellectual and Developmental Disabilities (I Agency-Based Services Savings	Full Impact DD) Waivers (\$1,082,799)	Ramp Up Factor	Implementation Factor	(\$1,082,799) (\$383,110)
Non-Inte	Implementation Adjustments Ellectual and Developmental Disabilities (I Agency-Based Services Savings IHSS Savings	Full Impact DD) Waivers (\$1,082,799) (\$383,110)	Ramp Up Factor  100.00% 100.00%	Implementation Factor 100.00% 100.00%	(\$1,082,799 (\$383,110 (\$454,608
Non-Inte	Implementation Adjustments  Ellectual and Developmental Disabilities (I  Agency-Based Services Savings IHSS Savings CDASS Savings	Full Impact  DD) Waivers  (\$1,082,799) (\$383,110) (\$454,608)	100.00% 100.00% 100.00%	Implementation Factor 100.00% 100.00% 100.00%	(\$1,082,799) (\$383,110) (\$454,608) (\$49,690)
A B C D	Implementation Adjustments Electual and Developmental Disabilities (I Agency-Based Services Savings IIHSS Savings CDASS Savings ILST Savings	Full Impact  DD) Waivers  (\$1,082,799) (\$383,110) (\$454,608) (\$49,690)	100.00% 100.00% 100.00% 100.00%	Implementation Factor  100.00% 100.00% 100.00% 100.00%	(\$1,082,799 (\$383,110 (\$454,608 (\$49,690
A B C D E F	Implementation Adjustments Electual and Developmental Disabilities (I Agency-Based Services Savings IHSS Savings CDASS Savings ILST Savings Savings to SLP	Full Impact  DD) Waivers  (\$1,082,799) (\$383,110) (\$454,608) (\$49,690) (\$689,160)	100.00% 100.00% 100.00% 100.00% 100.00%	Implementation Factor  100.00% 100.00% 100.00% 100.00% 100.00%	(\$1,082,799) (\$383,110) (\$454,608) (\$49,690) (\$689,160)
A B C D E F	Implementation Adjustments Electual and Developmental Disabilities (I Agency-Based Services Savings IHSS Savings CDASS Savings ILST Savings Savings to SLP Installation Costs	Full Impact  DD) Waivers  (\$1,082,799) (\$383,110) (\$454,608) (\$49,690) (\$689,160)	100.00% 100.00% 100.00% 100.00% 100.00%	Implementation Factor  100.00% 100.00% 100.00% 100.00% 100.00%	(\$1,082,799) (\$383,110) (\$454,608) (\$49,690) (\$689,160)
Non-Inte	Implementation Adjustments Electual and Developmental Disabilities (I Agency-Based Services Savings IHSS Savings CDASS Savings ILST Savings Savings to SLP Installation Costs ed Living Services Waiver	Full Impact  DD) Waivers  (\$1,082,799) (\$383,110) (\$454,608) (\$49,690) (\$689,160) \$101,783	100.00% 100.00% 100.00% 100.00% 100.00%	Implementation Factor  100.00% 100.00% 100.00% 100.00% 100.00%	(\$1,082,799 (\$383,110 (\$454,608 (\$49,690 (\$689,160 \$101,783

(\$2,866,462)

100.00%

100.00%

(\$2,866,462)

Total

	Table 4.1 Estimated Savings by Service and Waiver									
Row	Item	Non-IDD Waivers	Supported Living Services Waiver	Source						
A	Savings to Agency-Based Care	(\$1,082,799)	(\$264,031)	Table 6.1 Row J						
В	Savings to IHSS	(\$383,110)	\$0	Table 9.1 Row M						
C	Savings to CDASS	(\$454,608)	(\$60,965)	Table 7.1 Row J and Table 8.1 Row J						
D	Savings to ILST	(\$49,690)	\$0	Table 10.1 Row J						
E	Savings to Supported Living Program (SLP)	(\$689,160)	\$0	Table 11.1 Row J						
F	Installation Costs	\$101,783	\$16,118	Table 5.1 Row F						
G	Total	(\$2,557,584)	(\$308,878)	Sum of all rows						

	Table 5.1 Estimated Installation Costs								
Row	Item	EBD	CMHS	BI	SCI	SLS	Source		
A	Remote Support Users from Agency-Based Care	1,044	220	18	3	265	Table 6.1 Row G		
В	Remote Support Users from In-Home Support Services (IHSS)	258	N/A	N/A	2	N/A	Table 9.1 Row J		
С	Remote Support Users from Consumer Directed Attendant Support Services (CDASS)	218	27	9	5	11	Table 7.1 Row G (non-SLS waivers) and Table 8.1 Row G (SLS waiver)		
D	Total Remote Support Users	1,520	247	27	10	276	Sum of Rows A - C		
Е	Estimated Annual Installation Cost per Utilizer	\$56.40	\$56.40	\$57.40	\$57.40		Average Personal Emergency Response System (PERS) Installation Costs for FY 2019-20		
F	Total Estimated Installation Costs	\$85,728	\$13,931	\$1,550	\$574	\$16,118	Row D * Row E		

	Table 6.1 Estimated Agency Based Personal Care and Homemaker Savings												
Row	Item	EBD	CMHS	BI	SCI	SLS	Total	Notes					
A	FY 2018-19 Utilizers	20,122	2,120	178	50	2,555	25,025	Actuals					
В	FY 2018-19 Hours per Utilizer	410.07	269.86	403.63	548.14	197.61	376.73	Actuals					
C	FY 2018-19 Cost per Hour	\$19.11	\$19.14	\$19.11	\$19.17	\$22.40	\$19.29	Actuals					
D	Proposed RS Cost per Hour	\$8.56	\$8.56	\$8.56	\$8.56	\$8.56	\$8.56	Assumption: same rate as Ohio					
E	Savings per Hour	(\$10.55)	(\$10.58)	(\$10.55)	(\$10.61)	(\$13.84)	(\$10.73)	Row D - Row C					
F	Estimated Utilizer Rate	5.19%	10.37%	10.37%	5.19%	10.37%	N/A	Assumption: based on actuals data & forecast from Ohio					
G	Estimated RS Utilizers	1,044	220	18	3	265	1,550	Row A * Row F					
Н	Estimated Unit Substitution	18.22%	36.43%	36.43%	18.22%	36.43%	N/A	Assumption: based on actuals data & forecast from Ohio					
I	Estimated RS Hours	74.71	98.31	147.04	99.87	71.99	491.92	Row B * Row H					
J	Estimated Savings	(\$822,871)	(\$228,826)	(\$27,923)	(\$3,179)	(\$264,031)	(\$1,346,830)	Row E* Row G * Row I					

	Table 7.1 Consumer Directed Attendant Support Services (CDASS) Personal Care and Homemaker Savings												
Row	Item	EBD	CMHS	BI	SCI	Total	Notes						
A	FY 2018-19 Utilizers	4,201	260	83	99	4,643	Actuals						
В	FY 2018-19 Hours per Utilizer	1,142.69	2,200.37	865.63	276.84	N/A	Actuals						
С	FY 2018-19 Cost per Hour	\$17.48	\$6.24	\$35.00	\$107.38	N/A	Actuals						
D	Proposed RS Cost per Hour	\$8.56	\$8.56	\$8.56	\$8.56	\$8.56	Assumption: same rate as Ohio						
E	Savings per Hour	(\$8.92)	\$2.32	(\$26.44)	(\$98.82)	N/A	Row D - Row C						
F	Estimated Utilizer Rate	5.20%	10.40%	10.40%	5.20%	N/A	Assumption: based on actuals data & forecast from Ohio						
G	Estimated RS Utilizers	218	27	9	5	259	Row A * Row F						
H Estimated Unit Substitution 18.22%		18.22%	36.43%	36.43%	18.22%	N/A	Assumption: based on actuals data & forecast from Ohio						
I	Estimated RS Hours	208.20	801.59	315.35	50.44	1,376	Row B * Row H						
J	Estimated Savings	(\$404,857)	\$50,212	(\$75,041)	(\$24,922)	(\$454,608)	Row E* Row G * Row I						

	Table 8.1  Consumer Directed Attendant Support Services (CDASS) Personal Care and Homemaker Savings for Supported Living Services (SLS) Waiver Only													
Row	Item	Personal Care	Homemaker	Homemaker Enhanced	Total	Notes								
A	FY 2018-19 Utilizers	110	110	110	110	Actuals								
В	FY 2018-19 Hours per Utilizer	370.90	478.68	297.30	N/A	Actuals								
C	FY 2018-19 Cost per Hour	\$22.76	\$17.24	\$28.04	N/A	Actuals								
D	Proposed RS Cost per Hour	\$8.56	\$8.56	\$8.56	\$8.56	Assumption: same rate as Ohio								
E	Savings per Hour	(\$14.20)	(\$8.68)	(\$19.48)	N/A	Row D - Row C								
F	Estimated Utilizer Rate	10.40%	10.40%	10.40%	10.40%	Assumption: based on actuals data & forecast from Ohio								
G	Estimated RS Utilizers	11	11	11	11	Row A * Row F								
Н	Estimated Unit Substitution	36.43%	36.43%	36.43%	36.43%	Assumption: based on actuals data & forecast from Ohio								
I	Estimated RS Hours	135.12	174.38	108.31	417.81	Row B * Row H								
J	Estimated Savings	(\$21,106)	(\$16,650)	(\$23,209)	(\$60,965)	Row E* Row G * Row I								

	Table 9.1 Estimated In-Home Support Services (IHSS) Personal Care and Homemaker Savings											
Row Item EBD SCI Total Notes												
	In Home Support Services (IHSS) Personal Care and Homemaker											
A	FY 2018-19 Utilizers	4,956	43	4,999	Actuals							
В	FY 2018-19 Expenditure	\$72,427,159	\$513,925	\$72,941,084	Actuals							
C	FY 2018-19 Units	15,088,445	106,894	15,195,339	Unit = 15 minutes							
D	FY 2018-19 Hours	3,772,111	26,724	3,798,835	(Row C)/4							
E	FY 2018-19 Hours per Utilizer	761.12	621.49	759.92	Actuals							
F	FY 2018-19 Cost per Hour	\$19.20	\$19.23	\$19.20	Actuals							
G	Proposed RS Cost per Hour	\$8.56	\$8.56	\$8.56	Assumption: same rate as Ohio							
Н	Savings per Hour	(\$10.64)	(\$10.67)	(\$10.64)	Row G - Row F							
I	Estimated Utilizer Rate	5.20%	5.20%	N/A	Assumption: based on actuals data & forecast from Ohio							
J	Estimated RS Utilizers	258	2	260	Row A * Row I							
K	Estimated Unit Substitution	18.22%	18.22%	N/A	Assumption: based on actuals data & forecast from Ohio							
L	Estimated RS Hours	138.68	113.24	252	Row E * Row K							
M	Estimated Savings	(\$380,693)	(\$2,417)	(\$383,110)	Row H* Row J * Row L							

#### R-6 Remote Supports for HCBS Programs Appendix A: Assumptions and Calculations

	Table 10.1 Savings to Independent Living Skills Training (ILST)										
Row	Item	BI	Notes								
A	FY 2018-19 Utilizers	124	Actuals								
В	FY 2018-19 Hours per Utilizer	93.00	Actuals								
С	FY 2018-19 Cost per Hour	\$120.98	Actuals								
D	Proposed RS Cost per Hour	\$8.56	Assumption: same rate as Ohio								
Е	Savings per Hour	(\$112.42)	Row D - Row C								
F	Estimated Utilization Rate	10.37%	Assumption: based on actuals data & forecast from Ohio								
G	Estimated RS Utilizers	13	Row A * Row F								
Н	Estimated Unit Substitution	36.43%	Assumption: based on actuals data & forecast from Ohio								
I	Estimated RS Hours	34	Row B * Row H								
J	Estimated Savings	(\$49,690)	Row E* Row G * Row I								

	Table 11.1 Supported Living Program (SLP) Utilization Avoided										
Row	Item	Amount	Description								
A	Estimated FY 2020-21 SLP Utilizers	215	FY 2020-21 S-1 Forecast								
В	Projected Number of Utilizers in Levels 1 & 2	23	2020 SLP Acuity Data								
С	Avoidance/Deferral Percentage	25.00%	Assumption: estimated % of Level 1 or 2 members that could transition off SLP with availability of remote services								
D	Avoided SLP Utilizers	6	Row B* Row C								
Е	Current Non-SLP Utilizer Cost	\$33,492.04	FY 2018-19 average waiver costs for non SLP utilizers								
F	Current SLP Average Cost	\$158,399.75	FY 2018-19 average waiver costs for level 1 and 2 SLP utilizers								
G	Utilization Increase	30.00%	Assumption: members who stay on SLP would increase their overall spending by 30% through CDASS/remote services/etc.								
Н	Estimated New Non-SLP Utilizer Cost	\$43,539.65	Row F *(1+ Row G)								
I	Incremental Savings	(\$114,860)	Row H - Row F								
J	Total Estimated Savings	(\$689,160)	Row D * Row I								

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request for The	e FY 2021-22 Budget Cyc	le
Request Title		
R-07 Nurse Advice Line		
Dept. Approval By:  OSPB Approval By:  OSPB Approval By:		Supplemental FY 2020-21
Обі в Арріочаї ву.		Budget Amendment FY 2021-22
	<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2021-22		
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$24,377,498	\$0	\$24,377,498	\$0	\$0	
	FTE	0.0	0.0	0.0	0.0	0.0	
Total of All Line Items	GF GF	\$6,182,153	\$0	\$6,182,153	\$898,265	\$898,265	
Impacted by Change Request	CF	\$1,592,103	\$0	\$1,592,103	(\$88,166)	(\$88,166)	
rroquost	RF	\$0	\$0	\$0	\$0	\$0	
	FF	\$16,603,242	\$0	\$16,603,242	(\$810,099)	(\$810,099)	

	_	FY 202	20-21	FY 20	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$24,377,498	\$0	\$24,377,498	\$0	\$0
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (E) Utilization and Quality Review	GF	\$6,182,153	\$0	\$6,182,153	\$898,265	\$898,265
Contracts, (1) Utilization	CF	\$1,592,103	\$0	\$1,592,103	(\$88,166)	(\$88,166)
and Quality Review Contracts - Professional	RF	\$0	\$0	\$0	\$0	\$0
Service Contracts	FF	\$16,603,242	\$0	\$16,603,242	(\$810,099)	(\$810,099)

Auxiliary Data								
Requires Legislation?	NO							
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact					

FY 2021-22 Funding Request

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-7** Request Detail: Nurse Advice Line

	Summary of Funding Change for FY 2021-22										
	Tot	als	Increment	al Change							
	FY 2020-21 Appropriation	FY 2021-22 Base	FY 2021-22 Request	FY 2022-23 Request							
Total Funds	\$24,377,498	\$24,377,498	\$0	\$0							
FTE	0.0	0.0	0.0	0.0							
General Fund	\$6,182,153	\$6,182,153	\$898,265	\$898,265							
Cash Funds	\$1,592,103	\$1,592,103	(\$88,166)	(\$88,166)							
Reappropriated Funds	\$0	\$0	\$0	\$0							
Federal Funds	\$16,603,242	\$16,603,242	(\$810,099)	(\$810,099)							

#### Summary of Request:

The Department requests a funding adjustment to continue operation of the Nurse Advice Line (NAL) services. The Centers for Medicare and Medicaid Services (CMS) have informed the Department that the Nurse Advice Line does not qualify for federal financial participation (FFP). To continue the NAL, the Department proposes to backfill the loss of federal match with additional General Fund. In addition, the Department requests a footnote to exclude the amount of the NAL program costs from the (M) headnote requirements applied to the Professional Services Contracts line item.

The Department also requests supplemental funding in FY 2020-21 to allow the Department to reimburse CMS for the federal funds claimed in prior years. Cash funds included in this request are from the Healthcare Affordability and Sustainability Fee Cash Fund. This request represents a decrease of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation.

This request will allow the Department to continue offering Medicaid members a valuable service that can improve care and help reduce health care costs. The NAL aligns with Step 4 on the evidence continuum.



### Current Program:

The Department contracts with a vendor to operate a Nurse Advice Line Contact Center (NAL-CC). The central mission of the NAL-CC is to offer Health First Colorado (Colorado's Medicaid Program) members free, around-the-clock access to medical information and advice via a Nurse Advice Line (NAL). The NAL is a 24-hour phone line, available 365 days a year, whose primary purpose is to triage callers to the right level of care needed for their acute medical issues through use of evidence-based triage guidelines. Secondary purposes of the NAL include helping members with questions about managing medical conditions and connecting members to community resources when indicated.

The NAL-CC consists of registered nurses (RNs), health information aides (HIAs), nurse team leads, a clinical nurse educator and a program manager. All team members are experienced in medical terminology, medical telephone triage, patient education strategies, and directing callers toward the right resource at the right place at the right time. The NAL-CC adheres to the Utilization Review Accreditation Commission's (URAC) Health Call Center standards (www.urac.org) and uses the nationally recognized Schmitt-Thompson Nurse Telephone Triage Guidelines (www.stcc-triage.com).

When a Medicaid member calls the NAL, they are connected to a RN who immediately assesses the member's concern and ultimately directs the member to the right level of care using evidence-based triage guidelines. This process is known as telephone triage. The primary goal of telephone triage and the ensuing discussion is to direct patients to the most appropriate level of care setting. This includes both keeping members out of the emergency room when they should seek a lower level of care as well as mitigating risk for members that are unaware of the urgency of their condition warranting a higher level of care.

Utilization of the NAL leads to an overall reduction in health care costs because the attending RN directs the member to the right resource at the right place at the right time. Often this direction results in a 'downgrade' of a caller's original intent when they place the call. An analysis of Department's NAL calls during FY 2019-20 shows that thirty-four percent of the calls resulted in RN downgrades. RN downgrades are a recommended level of care by the RN that is lower than the caller's original intent. This can include a recommendation for an urgent care visit instead of an emergency department visit, or a recommendation of home care instead of an office visit. Sixteen percent of the calls resulted in an 'upgrade' to a higher level of care, which ensures member safety.

A 2014 study in the *Nursing Journal Management*<sup>1</sup> found that diverting from emergency level room" to "lower level of care" saved an average of \$4,688 per member and diverting from "non-

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<sup>&</sup>lt;sup>1</sup> Navratil-Strawn, Jessica L, et al. (2014) "Listening to the Nurse Pays off: An Integrated Nurse HealthLine Programme Was Associated with Significant Cost Savings." Journal of Nursing Management, U.S. National Library of Medicine

emergency room/office visit to a lower level of care" saved on average \$1,381 per member. Diverting care from "non-emergency level visit to higher level of non-emergency level of care" saved on average \$453. The mechanism by which consultation achieved these savings was through avoidance of care through high cost settings within the health care system, such as emergency department care.

# Problem or Opportunity:

CMS has informed the Department that the Nurse Advice Line does not qualify for federal financial participation (FFP) and without the federal matching funds, the Department does not have sufficient State funding to continue operations of the existing NAL for an entire fiscal year. The CMS decision is based on a CMS letter to State Medicaid Directors on April 4, 1995, SMDL #04041995, that states that NAL "activities are not necessary for the proper and efficient administration of State Medicaid programs." In July 2020, CMS directed the Department to return federal funds claimed for the NAL back to July 1, 2019 and to discontinue further claiming of federal funds going forward. CMS has issued deferrals against the Department's claiming federal match of NAL services. To reimburse CMS, additional State share would be required to backfill the reduction in FFP back to July 1, 2019. Additionally, General Fund would be needed to continue the program going forward without federal matching funds and without use of HAS Fee which cannot be used unless federal matching funds are allowable. Historically, the Department has claimed an enhanced 75% match on these services.

The Utilization and Quality Review Contracts, Professional Services Contracts line item, which contains spending authority for the NAL, is restricted with an (M) headnote. The headnotes to the Long Bill explain that when an (M) appears next to a General Fund appropriation in the Long Bill, the appropriated General Fund is expected to receive matching federal funds; and, if the actual federal funds received is less (or more) than the amount that appears in the Long Bill for that line item, then the General Fund spending authority must be reduced. Since the NAL program would no longer be federally supported, payments made through the Utilization and Quality Review Contracts line item made without federal financial participation would reduce the available General Fund spending authority, jeopardizing the Department's ability to fund other activities through this line item, notably the Department's Utilization Management program. To maintain operations, the Department would need to shut down the NAL program if the (M) headnote restrictions remain in place. If the NAL is discontinued, this may result in increased costs in Medicaid services, such as emergency room and inpatient hospital utilization, which may exceed the cost of maintaining a NAL program.

The Department submitted an emergency supplemental request, FY 2020-21 ES-1 Nurse Advice Line Continuation request to remove the (M) headnote on the (1) Executive Director's Office, (E) Utilization and Quality Review Contracts; Professional Services Contracts line item in the Long Bill and allow the Department to continue operations of the NAL services within the existing funding in FY 2020-21. The Joint Budget Committee heard and approved this request on

September 18, 2020. To fund the operation of the NAL services in FY 2020-21, the Department is using flexibility within existing spending authority to fund NAL services. The Department anticipates that the (M) headnote would be restored in FY 2021-22 without further action by the General Assembly.

#### **Proposed Solution:**

The Department requests a reduction of \$0 total funds, including an increase of \$898,265 General Fund, a reduction of \$88,166 cash funds, and a reduction of \$810,099 federal funds in FY 2021-22; and a reduction of \$0 total funds, including an increase of \$898,265 General Fund, a reduction of \$88,166 cash funds, and a reduction of \$810,099 federal funds in FY 2022-23 and ongoing to fund the continuation of Nurse Advice Line services and functionality that includes data sharing with the Regional Accountable Entities (RAEs), data analytics and reporting. Further, the Department requests that the appropriations for the NAL be exempted from the (M) headnote.

The requested General Fund would backfill lost federal funding due to the recent determination by CMS that the NAL services are not allowable for federal financial participation (FFP). In addition, the Department anticipates the need for \$966,896 total funds, including an increase of \$1,117,028 General Fund, and reduction of \$150,132 federal funds for FY 2020-21. The Department and CMS have reached an agreement to settle prior claims of federal funds for NAL services back to July 1, 2019, with the Department agreeing to return \$966,896 by March 31, 2021. The Department needs an increase of \$150,132 General Fund to partially backfill the loss of the federal match to continue NAL services in FY 2020-21. The Department plans to absorb the remaining amount of General Fund needed to continue the NAL services by restructuring and renegotiating the NAL and other contracts funded within the existing appropriation.

The (M) headnote prevents the Department from operating a program without federal funds, meaning that the Department would be required to cease Nurse Advice Line activities without a change to the headnote on the General Fund appropriated to the line. The Department requests a footnote in the FY 2021-22 Long Bill that excludes \$1,080,132 in General Fund, the amount needed to fund the NAL services in FY 2021-22 and ongoing, from the (M) headnote requirements.

The NAL aligns with Step 4 of the OSPB evidence continuum. The collection and analysis of caller data and corresponding claims data provides the basis for performance measures from which the Department makes informed decisions. In addition to analysis of the care plan outcomes and fiscal impact of the NAL calls, the member-facing operational process of responsive customer service is monitored and subject to performance measures established by the Department. Furthermore, peer-reviewed studies have analyzed the impacts of NAL programs, as mentioned above.

If this request is not funded the NAL would be at risk. If the NAL program costs are not excluded from the (M) headnote, the Department would be prohibited from using any General Fund to fund

the NAL and the program would have to be discontinued. Analysis of the NAL utilization supports the conclusion that without the teletriage offered by the NAL, emergency room and urgent care utilization would increase. Further, member's health outcomes would be at greater risk if the NAL is not available to upgrade certain cases where a member is unaware of the potential seriousness of the condition.

#### **Anticipated Outcomes:**

Approval of this request would allow the Department to continue the Nurse Advice Line. Approval of this request would allow the NAL to continue offering members free, around-the-clock access to medical information and advice. Utilization of the NAL leads to an overall reduction in health care costs because the attending registered nurse (RN) directs the member to the right resource at the right place at the right time.

Additional considerations and ancillary benefits provided by the NAL are its availability to assist new members who have not selected or developed provider relationships, assisting primary care medical providers who do not have infrastructure for 24/7 access for members, and receiving calls that would otherwise go to the Department's customer service center. The RAEs also rely on the NAL to serve their members as the RAEs themselves are not required to offer any sort of teletriage.

Continuation of the NAL strongly supports two of the Governor's wildly important goals (WIGs):

- WIG #1 Care Access and Customer Service: The Department expects the continuation of the NAL would deliver improved health care coverage, service and access supports to Coloradans especially during this economic downturn amid the pandemic.
- WIG #2 Medicaid Cost Control: The Department expects the NAL to support the responsible management of health care costs and provide savings to Medicaid program as of members are directed to the right level of care needed for their acute medical issues

Further, the NAL would encompasses four of the Department's five strategic pillars that were established to ensure customer-focused performance management.

- Medicaid Cost Control Ensure the right services for the right people at the right price
- *Member Health* Improve member health
- Customer Service Improve service to members, care providers, and partners
- *Operational Excellence* Create compliant, efficient, and effective business practices that are person- and family-centered

An effective NAL is a critical touchpoint of member customer service that serves the Department as a progressive and efficient business practice striving to direct members toward the right services for the right people at the right price.

The Department is continuing discussions with CMS in the hope that a favorable resolution can be reached to restore that ability to obtain federal matching funds for the NAL.

### Assumptions and Calculations:

Detailed assumptions and calculations are provided in Appendix A.

Tables 1.1, 1.2 and 1.3 show a summary by line item and tables 2.1, 2.2 and 2.3 show a summary by initiative for this request for each fiscal year.

Table 3 shows the calculation of the amount to be returned to CMS that settles the issue of prior year claiming of federal match for NAL services.

Tables 4.1 and 4.2 show the calculation of the incremental costs to maintain the NAL services in FY 2020-21. This presumes that part of the funds needed to backfill the loss of federal match would be absorbed by restructuring and renegotiating the NAL and other contracts funded within the existing appropriation, but those are temporary solutions that cannot be sustained in FY 2021-22 and ongoing.

Tables 5.1 and 5.2 show the calculation to continue the NAL in FY 2021-22 and ongoing. The fund splits of the incremental costs reflect the necessity to rebalance the State share against the federal funds based on recent direction by CMS that compels the Department to assume 0% FFP on the required budget amount (table 5.1 row B) instead of the enhanced 75% FFP of the existing budget (table 5.1 row A). Table 5.2 shows the spending authority for the line item from which the NAL services are paid, including the FY 2021-22 base budget and incremental impact of the budget request.

The Department is continuing discussions with CMS to pursue the possibility of a federal match for the NAL. If CMS determines that FFP is available, the Department would seek a funding adjustment through the normal budget process.

#### R-7 Nurse Advice Line Appendix A: Assumptions and Calculations

	Table 1.1 Summary by Line Item FY 2020-21									
R	ow	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
	А	(1) Executive Director's Office, (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$966,896	0.0	\$1,117,028	\$0	\$0	(\$150,132)	NA	Table 2.1, Row C
	В	Total Request	\$966,896	0.0	\$1,117,028	\$0	\$0	(\$150,132)	NA	Row A

		Table 1.2 Summary by Line Item FY 2021-22										
R	ow	Line Item	Total Funds	FTE	General Fund	Cash Funds <sup>1</sup>	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
4	4	(1) Executive Director's Office, (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$0	0.0	\$898,265	(\$88,166)	\$0	(\$810,099)	NA	Table 2.2, Row A		
	В	Total Request	\$0	0.0	\$898,265	(\$88,166)	\$0	(\$810,099)	NA	Row A		

<sup>&</sup>lt;sup>1</sup> Cash funds are from the Healthcare Affordability and Sustainability Fee Cash Fund.

	Table 1.3 Summary by Line Item FY 2022-23										
Rov	v Line Item	Total Funds	FTE	General Fund	Cash Funds <sup>1</sup>	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
A	(1) Executive Director's Office, (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$0	0.0	\$898,265	(\$88,166)	\$0	(\$810,099)	NA	Table 2.3, Row A		
В	Total Request	\$0	0.0	\$898,265	(\$88,166)	\$0	(\$810,099)	NA	Row A		

<sup>&</sup>lt;sup>1</sup> Cash funds are from the Healthcare Affordability and Sustainability Fee Cash Fund.

#### R-7 Nurse Advice Line Appendix A: Assumptions and Calculations

	Table 2.1 Summary by Initiative FY 2020-21											
Ro	Row Item Total Funds FTE General Fund Cash Funds Reappropriated Funds Funds Federal Funds Federal Funds Reappropriated Funds F							Notes/Calculations				
A	Federal Funds Reimbursement to CMS	\$966,896	0.0	\$966,896	\$0	\$0	\$0	NA	Table 3, Row R			
В	Partial Federal Funds Backfill	\$0	0.0	\$150,132	\$0	\$0	(\$150,132)	NA	Table 4.1 Row B			
C Total \$966,896 0.0 \$1,117,028 \$0 \$0 (\$150,132) NA								NA	Row A + Row B			

	Table 2.2										
	Summary by Initiative										
	FY 2021-22 and Ongoing										
Row	/ Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
-						runus		Kate			
A	Federal Funds Backfill to Continue NAL	\$0	0.0	\$898,265	(\$88,166)	\$0	(\$810,099)	NA	Table 5.1 Row C		

	Table 2.3										
	Summary by Initiative										
	FY 2022-23										
Rov	v Item	Total Funds	FTE	General Fund	HAS Fee CF	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
A	Federal Funds Backfill to Continue NAL	\$0	0.0	\$898,265	(\$88,166)	\$0	(\$810,099)	NA	Table 5.1 Row C		

#### R-7 Nurse Advice Line Appendix A: Assumptions and Calculations

#### Table 3 CMS Deferral - Nurse Advice Line FY 2020-21

					FY 2020-21			
Row	Invoice #	Invoice Date	Invoice Period	CMS-64 QTR	Services	Invoice Amount	Fed Share Claimed (75%)	Source
Α	92078	4/26/2019	03/1/19 - 03/31/19	4Q19	Nurse Advice Line Base	\$85,321	\$63,991	
В	92080	5/20/2019	04/1/19 - 04/30/19	4Q19	Nurse Advice Line Base	\$85,321	\$63,991	
С	92095	6/17/2019	05/1/19 - 05/31/19	4Q19	Nurse Advice Line Base	\$85,321	\$63,991	
D	92097	7/11/2019	06/1/19 - 06/30/19	4Q19	Nurse Advice Line Base	\$85,321	\$63,991	
Е	92097R	8/19/2019	06/01/19 - 06/30/19	1Q20	Nurse Advice Line Base	\$85,321	\$63,991	
F	95008	8/19/2019	07/01/19 - 07/31/19	1Q20	Nurse Advice Line Base	\$90,011	\$67,508	
G	95019	9/24/2019	08/01/19 - 08/31/19	1Q20	Nurse Advice Line Base	\$90,011	\$67,508	
Н	92029	10/18/2019	09/01/19 - 09/30/19	2Q20	Nurse Advice Line Base	\$85,321	\$63,991	Department Depart Approved by CMS
I	95036	11/18/2019	10/01/19 - 10/31/19	2Q20	Nurse Advice Line Base	\$85,321	\$63,991	Department Report Approved by CMS,
J	95044	12/18/2019	11/01/19 - 11/30/19	2Q20	Nurse Advice Line Base	\$85,321	\$63,991	September 9, 2020
K	95051	1/15/2020	12/01/19 - 12/31/19	2Q20	Nurse Advice Line Base	\$85,321	\$63,991	
L	95068	3/18/2020	02/01/20 - 02/28/20	2Q20	Nurse Advice Line Base	\$85,321	\$63,991	
M	Reverse out Invoice 92097			2Q20	Nurse Advice Line Base	(\$85,321)	(\$63,991)	
N	95061	2/14/2020	01/01/20 - 01/31/20	3Q20	Nurse Advice Line Base	\$85,321	\$63,991	
О	95075	4/16/2020	03/01/20 - 03/31/20	3Q20	Nurse Advice Line Base	\$85,321	\$63,991	
P	95080	5/15/2020	04/01/20 - 04/30/20	3Q20	Nurse Advice Line Base	\$85,321	\$63,991	
Q	95085	6/15/2020	05/01/20 - 05/31/20	3Q20	Nurse Advice Line Base	\$85,321	\$63,991	
R	Total					-	\$966,896	Sum of Row A to Row Q

	Table 4.1 - FY 2020-21 Nurse Advice Line Incremental Amount Requested									
Ro w	Description	Total Funds	General Fund	HAS Fee Cash Fund	Federal Funds	FFP Rate	Source			
Nurs	se Advice Line Continuation									
A	Partial Federal Funds Backfill	\$0	\$150,132	\$0	(\$150,132)	NA	General Fund Required To Maintain Current Level of Nurse Advice Line Services			
В	Incremental Request	\$0	\$150,132	\$0	(\$150,132)	NA				

	Table 4.2 - Nurse Advice Line Line Item Build FY 2020-21											
Ro w	Description   Total Funds   Fig.   FFP Rate   Source											
(1) E	Executive Director's Office, (E) Utilization and Quality Revi	ew Contracts,	Professional S	ervices Contro	icts							
A	Base Budget	\$24,377,498	\$6,182,153	\$1,592,103	\$16,603,242	68.11%	FY 2020-21 Long Bill (HB 20-1360)					
В	Federal Funds Backfill	\$0	\$150,132	\$0	(\$150,132)	0.00%	Table 4.1, Row C					
С	Requested Spending Authority	\$24,377,498	\$6,332,285	\$1,592,103	\$16,453,110	67.49%	Row A + Row B					

		Tab	le 5.1 - Nurse	Advice Line								
	Incremental Amount Requested											
	FY 2021-22 and Ongoing											
Ro	Description	Total Funds	General	HAS Fee	Federal	FFP Rate	Source					
w	Description	1 otal Fullus	Fund	Cash Fund	Funds	rrr Kate	Source					
Nurs	e Advice Line Continuation											
Α.	FY 2019-20 NAL Budget at 75% FFP	\$1,080,132	\$181,867	\$88,166	\$810,099	75.000/	Department Spending Plan for Professional					
Α	F 1 2019-20 NAL Budget at 75% FFF	\$1,080,132	\$101,007	\$66,100	\$810,099	73.0076	Services line item					
D	Nurse Advice Line Program at 0% FFP	0.00%	Contract with Denver Health for minimum									
Ь	Indise Advice Line Flogram at 0% FFF	level of services; \$77,500 per month										
C	Incremental Request	\$0	\$898,265	(\$88,166)	(\$810,099)	NA	Row B - Row A					

	Table 5.2 - Nurse Advice Line Line Item Build FY 2021-22 and Ongoing										
Ro w	Description   Total Funds   To										
(1) E	Executive Director's Office, (E) Utilization and Quality Revi	ew Contracts,	Professional S	ervices Contro	acts						
A	Base Budget	\$24,377,498	\$6,182,153	\$1,592,103	\$16,603,242	68.11%	FY 2020-21 Long Bill (HB 20-1360)				
В	FY 2021-22 R-7 Nurse Advice Line Continuation Budget Request	\$0	\$898,265	(\$88,166)	(\$810,099)	0.00%	Table 4.1, Row C				
C	Requested Spending Authority	\$24,377,498	\$7,080,418	\$1,503,937	\$15,793,143	64.79%	Row A + Row B				

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY	' 2021-22 Budget Cy	cle
Request Title			
	R-08 Supported Living Services Flexibility		
Dept. Approval By:	BL		Supplemental FY 2020-21
OSPB Approval By:	Cishly Chron		Budget Amendment FY 2021-22
		<u> </u>	Change Request FY 2021-22

		FY 202	20-21	FY 20	21-22	FY 2022-23
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total \$96,2		\$0	\$96,608,078	\$940,718	\$1,881,437
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$39,534,851	\$0	\$39,705,994	\$470,359	\$940,719
Impacted by Change Request	CF	\$1,981,853	\$0	\$1,981,657	\$0	\$0
rtoquoot	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$54,750,175	\$0	\$54,920,427	\$470,359	\$940,718

		FY 202	0-21	FY 20:	21-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$24,377,498	\$0	\$24,377,498	\$73,200	\$146,400
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (E) Utilization and Quality Review	GF	\$6,182,153	\$0	\$6,182,153	\$36,600	\$73,200
Contracts, (1) Utilization	CF	\$1,592,103	\$0	\$1,592,103	\$0	\$0
and Quality Review Contracts - Professional	RF	\$0	\$0	\$0	\$0	\$0
Service Contracts	FF	\$16,603,242	\$0	\$16,603,242	\$36,600	\$73,200
	Total	\$71,889,381	\$0	\$72,230,580	\$867,518	\$1,735,037
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$33,352,698	\$0	\$33,523,841	\$433,759	\$867,519
Developmental Disabilities, (2) Medicaid	CF	\$389,750	\$0	\$389,554	\$0	\$0
Programs - Àdult	RF	\$0	\$0	\$0	\$0	\$0
Supported Living Services	FF	\$38,146,933	\$0	\$38,317,185	\$433,759	\$867,518

		Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-8** Request Detail: Supported Living Services Flexibility

Summary of Funding Change for FY 2021-22											
	Tot	tals	<b>Incremental Change</b>								
	FY 2020-21 Appropriation	FY 2021-22 Base	FY 2021-22 Request	FY 2022-23 Request							
Total Funds	\$96,266,879	\$96,608,078	\$940,718	\$1,881,437							
FTE	0.0	0.0	0.0	0.0							
General Fund	\$39,534,851	\$39,705,994	\$470,359	\$940,719							
Cash Funds	\$1,981,853	\$1,981,657	\$0	\$0							
Reappropriated Funds	\$0	\$0	\$0	\$0							
Federal Funds	\$54,750,175	\$54,920,427	\$470,359	\$940,718							

#### Summary of Request:

The Department requests to expand access to care for adults with intellectual or developmental disabilities who are likely on the waiting list for the Home and Community-Based Services Waiver For Persons With Developmental Disabilities (HCBS-DD) by offering additional long-term services and supports to members enrolled in the Home and Community Based Services Support Living Services (HCBS-SLS) waiver program to avoid emergency enrollment into HCBS-DD. For individuals who demonstrate a need for additional services and supports in the community, this would ensure that members are placed in a program that most closely meets their level of care requirements. This request represents an increase of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation.

This request aligns with Step 2 on the evidence continuum, as the Department collects data on the driving cause for an individual's emergency enrollment onto HCBS-DD as well as the utilization of services and supports for members enrolled in an HCBS waiver.



### Current Program:

In Colorado, there are two home and community-based services (HCBS) waiver programs that support adults with intellectual or developmental disabilities: the Home and Community-Based Services Waiver For Persons With Developmental Disabilities (HCBS-DD) and the Supported Living Services waiver (HCBS-SLS).

HCBS-DD provides participants with access to twenty-four hour, seven days a week supports or supervision through Residential Habilitation and Day Habilitation services. HCBS-DD also provides living arrangements, which can range from host homes settings, individualized settings, and group settings, as well as residential supports for participants who live in their own home or with members of their family. HCBS-SLS offers similar services and supports to HCBS-DD but requires that the member be responsible for their own living arrangements. HCBS-SLS does not provide twenty-four-hour supervision on a continuous basis. This allows individuals to remain in their homes and communities with minimal impacts to their community and social supports.

Members enrolled in an HCBS waiver are limited to authorized services and supports as determined by their case manager and within their Service Plan level. This is enforced through restrictions on unit limits, service categories, and the member's Service Plan Authorization Limit (SPAL), which is a limit on the overall amount of services that a member can access based on their Support Level, as determined by their Supports Intensity Scale (SIS) assessment. The Department has only made small adjustments to the SPALs in the last several years to keep pace with rate increases for the services within each SPAL.

Currently, HCBS-DD is the only HCBS waiver that has a waiting list. The average cost per person for HCBS-SLS is forecasted to be just over \$17,000 in FY 2020-21, compared to the average cost per person for HCBS-DD of almost \$79,500.

#### Problem or Opportunity:

HB 14-1051 required the Department, in collaboration with stakeholders, to develop a strategic plan to ensure that Coloradans with intellectual and developmental disabilities (IDD) and their families are able to access the services and supports they need and want at the time that they need and want those services and supports. Progress has been made toward providing timely access to services for people with IDD through eliminating waiting lists for certain programs, focusing on waiting list management, and implementing initiatives to create more robust services through programs without waiting lists to meet the needs of individuals with IDD. However, there are nearly 3,000 individuals with IDD on the waiting list for HCBS-DD. Over the last five years, the waiting list for HCBS-DD has grown by 99%, despite a 24% growth in enrollment in HCBS-DD. The Department estimates that eliminating the HCBS-DD waiting list permanently over the course of seven years would cost approximately \$231 million total funds annually, once fully implemented. Many of the individuals currently on the waiting list are served through HCBS-SLS, which may not meet their level of care needs.

Although HCBS-DD and HCBS-SLS offer similar services and supports outside of living arrangements and twenty-four-hour supervision, members enrolled on HCBS-DD are generally afforded more access to care due to their higher level of care needs. Members enrolled in HCBS-SLS must prioritize which services they receive. The most commonly utilized services with utilization limitations on HCBS-SLS include Personal Care, Respite, Day Habilitation, and Behavioral Services. Members may not be able to access the quantity and scope of services they need, as they are constrained by service caps and a service plan authorization limit (SPAL). By prioritizing certain services, a member can be prevented from accessing other much needed services and supports that they otherwise would choose to receive. The limitations on both Behavioral Services and Day Habilitation in HCBS-SLS is frequently noted as a barrier to accessing more supports. A member's need for additional supports, driven by limits within HCBS-SLS, may culminate into requiring an emergency enrollment into HCBS-DD, which is a far more expensive program.

Because HCBS-DD has a maximum enrollment number as determined by the General Assembly, an emergency enrollment displaces other members and prevents other high-needs individuals from receiving the care they need.

#### **Proposed Solution:**

The Department requests \$940,718 total funds, including \$470,359 General Fund in FY 2021-22 and \$1,881,437 total funds, including \$940,719 General Fund in FY 2022-23 and future years in order to provide additional services and supports to members on HCBS-SLS who demonstrate need. The requested funding would be used to offer exceptions to unit limits and Service Plan Authorization Limits (SPAL) to members on HCBS-SLS on a member-by-member basis. Members on HCBS-SLS who have met the total allowable units for a service or have filled their SPAL could request access to additional services and supports. The member's case manager would submit an exception form to the Department's Over Cost Containment (OCC) review contractor to review the member's utilization of services and supports and approve the member for additional care beyond their SPAL. These reviews would be performed annually and members seeking reauthorization for additional resources after one year of authorization would be required to receive an additional PAR review. This would ensure that a member's needs are being adequately met and that they are receiving all services that improve their health and well-being.

If this request is not approved, members on HCBS-SLS would continue to be strictly limited by the set unit caps and their SPALs for services offered through the waiver. Members who require specific additional supports, such as an increase in Behavioral Services or Day Habilitation, would be required to forgo other services they receive in order to make room under their existing SPAL, or may be prevented from accessing more services altogether if they have already met the maximum allowable units for that service. This may increase the likelihood of a member's need for an emergency enrollment into HCBS-DD, thereby leading to an increase in costs for that

member while concurrently displacing other individuals, who may require enhanced supports and supervision, from access to HCBS-DD.

The Department believes this request is on Step 2, "Identify Outputs" of the Office of State Planning and Budgeting (OSPB) Evidence Continuum. The Department has developed a conceptual link between allowing flexibility for services and supports on HCBS-SLS and a decrease in the number of emergency enrollments onto HCBS-DD. The Department collects data on the driving cause for an individual's emergency enrollment onto HCBS-DD as well as the utilization of services and supports for members enrolled in an HCBS waiver.

### **Anticipated Outcomes:**

Increasing the amount of additional long-term services and supports available to members enrolled in HCBS-SLS who demonstrate a need for additional care would improve member health while supporting and promoting their individual choice and decision-making and would ensure that enrollments on HCBS-DD are available to individuals who require that higher level of care and supervision.

By decreasing the disparity between the services available and the services needed by higher-needs members on HCBS-SLS, the Department could guarantee that members currently being served are not being prevented from accessing critically important care by currently imposed limits. Allowing members to receive additional services within their current program would minimize the impact to their community and social supports by allowing them to continue within their current program and would prevent the jeopardization of their health, safety, and well-being by a deficiency in their care. With the appropriate level of support in HCBS-SLS some members may be able to stay in HCBS-SLS for the remainder of their life and never require the move to the enhanced support provided in HCBS-DD, eliminating their need to be on HCBS-DD altogether. The Department could ultimately reduce the number of emergency enrollments into HCBS-DD, a program which is far more expensive and resource intensive than HCBS-SLS. The reduction in emergency enrollments would allow for timelier enrollment into HCBS-DD for individuals who require a higher level of care and twenty-four-hour supervision, which is not available through HCBS-SLS or any other waiver currently offered. These outcomes align with the Department's Performance Plan long-range goals of ensuring the right services for the right people at the right price, improving member health, and improving service to members, which are strategic pillars 2, 3, and 4, respectively.

To evaluate the effectiveness of the implementation of this program change, the Department would examine the number of emergency enrollments into HCBS-DD. An observed decrease in the number of emergency enrollments would indicate that the increase to services on HCBS-SLS are providing higher-needs members with a more appropriate amount of care and that the gap between the services they need and the services they receive has closed.

### Assumptions and Calculations:

Detailed calculations for this request are provided in the attached appendix.

To arrive at the estimated costs, the Department examined the number of members on HCBS-SLS who are currently using greater than 90% of their SPAL. The Department assumes that only members who are up against their SPAL limit would seek approval from the Department for additional resources. To estimate the increase in expenditure per capita, the Department reviewed claims data and compared the utilization of Behavioral Services and Day Habilitation by members who have transitioned from HCBS-SLS to HCBS-DD before and after they joined HCBS-DD. Through this, the Department estimated the overall increase in utilization by Support Level for members on HCBS-SLS who are currently restricted by their SPAL. The Department assumes that because members on HCBS-DD are allotted additional services and supports and are not as constrained on their access to services and supports by limits, a member's increase in utilization once they transition to HCBS-DD would accurately represent their additional need for services.

The Department currently contracts with eQHealth Solutions to perform Over Cost Containment (OCC) reviews when a member's average daily cost of HCBS and LTHH services is \$285 or more. This is to ensure there is no duplication of services and that the services requested reflect the needs identified in the member's assessment. In order to authorize a member for additional services and supports beyond their SPAL, the member's PAR would need to be reviewed to verify that the services and supports currently being received by the member are not duplicative and do not fall outside of the member's level of care assessment. Based on currently performed OCC reviews, the Department estimates the cost for each individual PAR review to be \$300.

The Department assumes that approval for amendments to HCBS-SLS from the Centers for Medicare & Medicaid Services (CMS) would be received during FY 2021-22 for an implementation date of January 1, 2022.

Table 1.1							
Summary by Line Item							
EV 2021-22							

_		r 1 #V#1~##									
I	ow	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
	A	(1) Executive Director's Office, (E) Utilization and Quality Review Contracts; Professional Services Contracts	\$73,200	0.0	\$36,600	\$0	\$0	\$36,600	50.00%	Table 2.1, Row B	
	В	(4) Office of Community Living, (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs; Adult Supported Living Services	\$867,518	0.0	\$433,759	\$0	\$0	\$433,759	50.00%	Table 2.1, Row A	
	C	Total Request	\$940,718	0.0	\$470,359	\$0	\$0	\$470,359		Row A + Row B	

Table 1.2
Summary by Line Item
FY 2022-23

Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
	(1) Executive Director's Office, (E) Utilization and Quality Review Contracts; Professional Services Contracts	\$146,400	0.0	\$73,200	\$0	\$0	\$73,200	50.00%	Table 2.2, Row B
В	(4) Office of Community Living, (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs; Adult Supported Living Services	\$1,735,037	0.0	\$867,519	\$0	\$0	\$867,518	50.00%	Table 2.2, Row A
C	Total Request	\$1,881,437	0.0	\$940,719	\$0	\$0	\$940,718	_	Row A + Row B

Table 1.3
Summary by Line Item
FV 2023-24

	1 1 #U#U-#T									
Row	v Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	(1) Executive Director's Office, (E) Utilization and Quality Review Contracts; Professional Services Contracts	\$146,400	0.0	\$73,200	\$0	\$0	\$73,200	50.00%	Table 2.3, Row B	
	(4) Office of Community Living, (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs; Adult Supported Living Services	\$1,735,037	0.0	\$867,519	\$0	\$0	\$867,518	50.00%	Table 2.3, Row A	
C	Total Request	\$1,881,437	0.0	\$940,719	\$0	\$0	\$940,718		Row A + Row B	

Table 2.1									
Summary by Initiative									
EV 2021-22									

	1 1 4041-44									
Rov	v Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	Increasing Services for Members on HCBS-SLS	\$867,518	0.0	\$433,759	\$0	\$0	\$433,759	50.00%	Table 3.1, Row E	
В	Prior Authorization Review and Determination	\$73,200	0.0	\$36,600	\$0	\$0	\$36,600	50.00%	Table 4.1, Row D	
C	Total Request	\$940,718	0.0	\$470,359	\$0	\$0	\$470,359		Row A + Row B	

#### Table 2.2 Summary by Initiative FY 2022-23

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Increasing Services for Members on HCBS-SLS	\$1,735,037	0.0	\$867,519	\$0	\$0	\$867,518	50.00%	Table 3.2, Row D
В	Prior Authorization Review and Determination	\$146,400	0.0	\$73,200	\$0	\$0	\$73,200	50.00%	Table 4.2, Row C
C	Total Request	\$1,881,437	0.0	\$940,719	\$0	\$0	\$940,718		Row A + Row B

Table 2.3
Summary by Initiative
FY 2023-24

	I I MUMU-MT										
R	ow Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
	Increasing Services for Members on HCBS-SLS	\$1,735,037	0.0	\$867,519	\$0	\$0	\$867,518	50.00%	Table 3.2, Row E		
	Prior Authorization Review and Determination	\$146,400	0.0	\$73,200	\$0	\$0	\$73,200	50.00%	Table 4.2, Row C		
	Total Request	\$1,881,437	0.0	\$940,719	\$0	\$0	\$940,718		Row A + Row B		

	Table 3.1: Increasing Services for Members on the HCBS-SLS Waiver FY 2021-22											
Row	Item	Support Level 1	Support Level 2	Support Level 3	Support Level 4	Support Level 5	Support Level 6	Total	Source/Calculation			
A	Number of Members on SLS Waiver Utilizing >=90% of Their SPAL	121	147	66	52	59	43	488	Department actuals			
В	Average Expenditure of High Utilizers	\$13,864.97	\$18,636.57	\$20,989.13	\$23,793.12	\$29,517.84	\$38,010.21	N/A	Department actuals			
С	Estimated Increase in Utilization	32.2%	17.3%	8.0%	9.5%	10.7%	18.8%	N/A	Table 3.3, Row C			
D	Partial Year Implementation	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	N/A	January 1, 2022 implementation			
E	Estimated Impact	\$269,890	\$237,053	\$55,203	\$58,587	\$92,821	\$153,964	\$867,518	Row A * Row B * Row C * Row D			

	Table 3.2: Increasing Services for Members on the HCBS-SLS Waiver FY 2022-23 and Ongoing											
Row	Item	Support Level 1	Support Support Support Level 2 Level 3 Level 4 Level 5			Support Level 6	Total	Source/Calculation				
A	Number of Members on SLS Waiver Utilizing >=90% of Their SPAL	121	147	66	52	59	43	488	Department actuals			
В	Average Expenditure of High Utilizers	\$13,864.97	\$18,636.57	\$20,989.13	\$23,793.12	\$29,517.84	\$38,010.21	N/A	Department actuals			
С	Estimated Increase in Utilization	32.2%	17.3%	8.0%	9.5%	10.7%	18.8%	N/A	Table 3.3, Row C			
D	Estimated Impact	\$539,781	\$474,105	\$110,407	\$117,175	\$185,642	\$307,927	\$1,735,037	Row A * Row B * Row C			

	Table 3.3: Average Increase in Utilization for Members Transitioning from HCBS-SLS to HCBS-DD											
Row	Item	Support Level 1	Support Level 2	Support Level 3	Support Level 4	Support Level 5	Support Level 6	Source / Calculation				
	Average Behavioral Services and Day Habilitation Expenditure Per Capita Pre-HCBS-DD Enrollment	\$726.05	\$1,004.93	\$1,300.72	\$1,579.03	\$1,969.27	\$1,908.43	Department actuals				
В	Average Behavioral Services and Day Habilitation Expenditure Per Capita Post-HCBS-DD Enrollment	\$959.65	\$1,178.85	\$1,404.39	\$1,728.58	\$2,179.19	\$2,267.97	Department actuals				
С	Average % Increase in Expenditure Per Capita	32.2%	17.3%	8.0%	9.5%	10.7%	18.8%	(Row B / Row A) - 1				

	Table 4.1: PAR Review and Determination FY 2021-22											
Row	Item	Support Level 1	Support Level 2	Support Level 3	Support Level 4	Support Level 5	Support Level 6	Total	Source/Calculation			
A	Number of Members Seeking Authorization for Increase in Services	121	147	66	52	59	43	488	Department estimate			
В	Average Cost of PAR Review	\$300.00	\$300.00	\$300.00	\$300.00	\$300.00	\$300.00	N/A	Based on current Department contracted amounts			
С	Partial Year Implementation	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	N/A	January 1, 2022 implementation			
D	Estimated Impact	\$18,150	\$22,050	\$9,900	\$7,800	\$8,850	\$6,450	\$73,200	Row A * Row B * Row C			

	Table 4.2: PAR Review and Determination FY 2022-23 and Ongoing												
Row	Item	Support Level 1	Support Level 2	Support Level 3	Support Level 4	Support Level 5	Support Level 6	Total	Source/Calculation				
A	Number of Members Seeking Authorization for Increase in Services	121	147	66	52	59	43	488	Department estimate				
В	Average Cost of PAR Review	\$300.00	\$300.00	\$300.00	\$300.00	\$300.00	\$300.00	N/A	Based on current Department contracted amounts				
C	Estimated Impact	\$36,300	\$44,100	\$19,800	\$15,600	\$17,700	\$12,900	\$146,400	Row A * Row B				

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for TI	ne FY 2021-22 Budget Cycle	
Request Title			
	R-09 Patient Access and Interoperability F	Rule Compliance	
Dept. Approval By:	13C		Supplemental FY 2020-21
OSPB Approval By:	askey Cano		Budget Amendment FY 2021-22
		<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$182,511,254	\$0	\$186,838,342	\$2,862,999	\$2,004,759
	FTE	520.4	0.0	521.2	1.0	1.0
Total of All Line Items	GF	\$40,245,521	\$0	\$42,336,424	(\$1,552)	\$303,157
Impacted by Change Request	CF	\$17,207,991	\$0	\$17,694,424	\$0	\$0
	RF	\$2,570,836	\$0	\$2,198,408	\$0	\$0
	FF	\$122,486,906	\$0	\$124,609,086	\$2,864,551	\$1,701,602

		FY 202	20-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$41,276,479	\$0	\$41,080,782	\$68,988	\$71,751
	FTE	520.4	0.0	521.2	1.0	1.0
01. Executive Director's Office, (A) General	GF	\$14,487,249	\$0	\$14,650,129	\$34,494	\$35,875
Administration, (1) General Administration -	CF	\$3,911,124	\$0	\$3,939,903	\$0	\$0
Personal Services	RF	\$2,305,357	\$0	\$1,892,777	\$0	\$0
	FF	\$20,572,749	\$0	\$20,597,973	\$34,494	\$35,876
	Total	\$5,264,801	\$0	\$6,826,728	\$10,042	\$10,042
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General	GF	\$1,342,322	\$0	\$2,480,588	\$5,021	\$5,021
Administration, (1)	CF	\$548,313	\$0	\$573,987	\$0	\$0
General Administration - Health, Life, and Dental	RF	\$138,532	\$0	\$173,157	\$0	\$0
	FF	\$3,235,634	\$0	\$3,598,996	\$5,021	\$5,021

		FY 202	0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$72,366	\$0	\$71.148	\$104	\$108
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General	GF	\$26,778	\$0	\$26,526	\$52	\$54
Administration, (1)	CF	\$5,695	\$0	\$5,510	\$0	\$0
General Administration - Short-term Disability	RF	\$1,607	\$0	\$1,644	\$0	\$0
	FF	\$38,286	\$0	\$37,468	\$52	\$54
	Total	\$2,188,905	\$0	\$2,223,320	\$3,070	\$3,193
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (A) General Administration, (1)	GF	\$810,157	\$0	\$828,912	\$1,535	\$1,596
General Administration -	CF	\$172,037	\$0	\$172,189	\$0	\$0
Amortization Equalization	RF	\$48,635	\$0	\$51,380	\$0	\$0
Disbursement	FF	\$1,158,076	\$0	\$1,170,839	\$1,535	\$1,597
	Total	\$2,188,905	\$0	\$2,223,320	\$3,070	\$3,193
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (A) General Administration, (1)	GF	\$810,157	\$0	\$828,912	\$1,535	\$1,596
General Administration - Supplemental	CF	\$172,037	\$0	\$172,189	\$0	\$0
Amortization	RF	\$48,635	\$0	\$51,380	\$0	\$0
Equalization Disbursement	FF	\$1,158,076	\$0	\$1,170,839	\$1,535	\$1,597
	Total	\$2,356,365	\$0	\$2,248,313	\$5,653	\$950
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General	GF	\$954,547	\$0	\$919,906	\$2,826	\$475
Administration, (1)	CF	\$214,413	\$0	\$200,711	\$0	\$0
General Administration - Operating Expenses	RF	\$13,297	\$0	\$13,297	\$0	\$0
	FF	\$1,174,108	\$0	\$1,114,399	\$2,827	\$475
	Total	\$73,227,142	\$0	\$76,228,440	\$3,572,211	\$2,715,661
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (C) Information Technology Contracts	GF	\$9,703,222	\$0	\$10,490,362	\$410,804	\$695,209
and Projects, (1) Information Technology	CF	\$6,312,421	\$0	\$6,757,984	\$0	\$0
Contracts and Projects -	RF	¢12.204	<b>C</b> O	<b>#40.004</b>	00	0.0
MMIS Maintenance and	INΓ	\$12,204	\$0	\$12,204	\$0	\$0

	_	FY 202	20-21	FY 20	21-22	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$48,332,662	\$0	\$48,332,662	\$150,000	\$150,000	
01. Executive Director's Office, (C) Information	FTE	0.0	0.0	0.0	0.0	0.0	
Technology Contracts	GF	\$10,194,988	\$0	\$10,194,988	\$17,250	\$38,400	
and Projects, (1) Information Technology	CF	\$5,871,951	\$0	\$5,871,951	\$0	\$0	
Contracts and Projects - Colorado Benefits	RF	\$2,569	\$0	\$2,569	\$0	\$0	
Management Systems, Operating & Contracts	FF	\$32,263,154	\$0	\$32,263,154	\$132,750	\$111,600	
	Total	\$7,603,629	\$0	\$7,603,629	(\$950,139)	(\$950,139)	
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0	
Office, (C) Information Technology Contracts	GF	\$1,916,101	\$0	\$1,916,101	(\$475,069)	(\$475,069)	
and Projects, (1) Information Technology	CF	\$0	\$0	\$0	\$0	\$0	
Contracts and Projects - Health Information	RF	\$0	\$0	\$0	\$0	\$0	
Exchange Maintenance and Projects	FF	\$5,687,528	\$0	\$5,687,528	(\$475,070)	(\$475,070)	

Auxiliary Data						
Requires Legislation?	NO					
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	Requires OIT Approval			

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-9** Request Detail: Patient Access and Interoperability Rule Compliance

Summary of Funding Change for FY 2021-22						
	Totals		Incremental Change			
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23		
	Appropriation	Base	Request	Request		
Total Funds	\$182,511,254	\$186,838,342	\$2,862,999	\$2,004,759		
FTE	520.4	521.2	1.0	1.0		
General Fund	\$40,245,521	\$42,336,424	(\$1,552)	\$303,157		
Cash Funds	\$17,207,991	\$17,694,424	\$0	\$0		
Reappropriated Funds	\$2,570,836	\$2,198,408	\$0	\$0		
Federal Funds	\$122,486,906	\$124,609,086	\$2,864,551	\$1,701,602		

#### Summary of Request:

The Department requests funding adjustments to comply with the Centers for Medicare and Medicaid Services (CMS) Patient Access and Interoperability final rule (CMS-9115-F). The resources would be used to facilitate patient access to their own Medicaid health care claims information via commonly available consumer third-party applications. Under the final rule, all state Medicaid agencies and all Medicaid and Children's Health Insurance Program (CHIP) plans must meet specific technology and data sharing standards that enables patient access to health care information that aligns with the United States Core Data for Interoperability (USCDI). The Department does not currently have the technology or data sharing arrangements in place to meet the standards set forth in the final rule on accessing this information.

Compliance with the federal rule for data access offers patients the ability to make more informed decisions regarding their health care. This request aligns with Step 2 on the evidence continuum based on studies that have examined similar models.



The Department anticipates that approval of the request would ensure that the Department is in compliance with the federal Patient Access and Interoperability rule no later than July 1, 2022. This request represents an increase of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation.

### Current Program:

Pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), all patients, including Medicaid and Children's Basic Health Plan Plus (CHP+) members, have the right to view their health care records. Currently, Medicaid members may exercise their right to access data by contacting the Department directly and requesting data to be sent to them. The Department must manually extract the information and provide the member their protected health record data. This work is often time consuming and the information may not be provided to members in enough time for them to consider the information before making their health care decisions.

# Problem or Opportunity:

On April 21, 2020 the Centers for Medicare and Medicaid Services (CMS) issued a final rule on Patient Access and Interoperability, with compliance required by July 1, 2021. <sup>1</sup> Failure to comply may result in the loss of federal financial participation.

Under the final rule, all state Medicaid agencies and all Medicaid and Children's Health Insurance Program (CHIP)<sup>2</sup> plans must meet specific technology and data sharing standards that enables patient access to health care information that aligns with the United States Core Data for Interoperability<sup>3</sup> (USCDI). The Department does not currently have the technology or data sharing arrangements in place to meet the standards set forth in the final rule on accessing this information.

The requirements are explicit in that the Department must make member health information accessible via third-party applications (apps). The rule does not require the Department to create or manage an app with the member information, but rather to facilitate the sharing of Medicaid member information with third-party apps, such as those available on the Apple Store or Google Play.

The current global environment of electronic health information availability is often siloed. Many health plan types offer some form of electronic health record (EHR), although most use proprietary applications specific to certain providers or health plans. Under this model individuals are tasked with managing their health care potentially through multiple systems or applications. Providers are also limited with the information they have available to inform health care recommendations because there is no central repository through which all data flows. For example, if a current Medicaid member experiences income instability and churns between private insurance and Medicaid, that member would need to manage access to both private and public health information repositories and likely need to aggregate that information on their own. This could become burdensome and dissuade the member from taking an active role in managing their own health.

<sup>&</sup>lt;sup>1</sup> https://www.cms.gov/files/document/cms-9115-f.pdf

<sup>&</sup>lt;sup>2</sup> Colorado's Children's Health Insurance Program operates under the name Child Health Plan *Plus* (CHP+)

<sup>&</sup>lt;sup>3</sup> https://www.healthit.gov/isa/sites/isa/files/2020-03/USCDI-Version1-2020-Final-Standard.pdf

This problem could also leave providers without the full picture of their patient's health, which makes managing health outcomes difficult.

On December 13, 2016 the 21<sup>st</sup> Century Cures Act (Cures Act) was signed into law. The bill promotes and funds several initiatives from accelerating research for serious illnesses, to addressing the opioid abuse crisis and improving mental health. The legislation also included several provisions to push for greater interoperability and adoption of EHRs universally. These provisions place an emphasis on providing patients access to their electronic health information that is easy to understand, secure and updated automatically. To address and provide guidance on these provisions, CMS issued the Patient Access and Interoperability final rule to break down the siloes and make managing one's health care as streamlined as possible.

To comply with the new federal regulations, the Department would need to work with multiple vendors to build the necessary infrastructure to facilitate the data exchange as well as maintain the infrastructure ongoing.

#### **Proposed Solution:**

The Department requests \$2,862,999 total funds, including a reduction of \$1,552 General Fund, an increase of \$2,864,551 federal funds and 1.0 FTE in FY 2021-22; \$2,004,759 total funds, including \$303,157 General Fund, \$1,701,602 federal funds and 1.0 FTE in FY 2022-23; and \$2,043,874 total funds, including \$313,171 General Fund, \$1,730,703 federal funds and 1.0 FTE in FY 2023-24 and ongoing to implement and maintain the project required under the Patient Access and Interoperability rule.

The Department has titled its implementation of the CMS Patient Access and Interoperability final rule the "Colorado Medicaid Blue Button" project which will model the Medicare "Blue Button Initiative". The Medicare Blue Button Initiative is a system for patients to view online and download their Medicare claims data. Several federal agencies, including the departments of Defense, Health and Human Services, and Veterans Affairs, implemented this capability for their beneficiaries. In addition, the Medicare Blue Button Initiative has pledges of support from numerous national health plans and some vendors of personal health record vendors across the United States. Data from Blue Button-enabled applications can be used to create portable medical histories that facilitate dialog among health care providers, caregivers, and other trusted individuals or entities. The Department would use the Medicare Blue Button Initiative framework as a model for complying with the Patient Access and Interoperability rule through its own Colorado Medicaid Blue Button project.

<sup>&</sup>lt;sup>4</sup> https://www.medicare.gov/manage-your-health/medicares-blue-button-blue-button-20

The requested funding would enhance or develop new system functionalities to meet rule standards and develop application programming interfaces (APIs) to facilitate the exchange of member claims data with third-party applications.

The four components of this request include:

- 1. Colorado Medicaid Blue Button Program Manager for management of the program.
- 2. Vendor infrastructure costs to facilitate the exchange of data.
- 3. Offset costs in FY 2020-21 and FY 2021-22 by leveraging existing vendor contracts and repurposing money in the existing appropriation.
- 4. Flexibility to receive additional federal funds when available.

#### Colorado Medicaid Blue Button Program Manager

The request includes 1.0 FTE to serve as the Colorado Medicaid Blue Button Program Manager to coordinate the implementation and ongoing efforts of the Interoperability rule. This position would serve as the single point of contact for the implementation of the Colorado Medicaid Blue Button project and facilitate collaboration between the Department and vendors creating the infrastructure. The project would require involvement from several of the Department's current vendors and the Department would require staff to provide oversight of the collaboration. This position would consult with the contracted vendor staff in areas of testing and results, deficiencies in existing functionality and resolving gaps in functionality that do not fully meet Department business needs. This position would ensure that all implemented functionality and changes into the system accurately reflect the technical rules and business logic to support the Department programs and initiatives.

#### **Vendor Costs**

The Department requests funding to support vendor hosting of an open, industry-standard application programming interface (API) framework that would make Medicaid claims data accessible by authorized third-party applications. The Department would leverage existing vendor contracts to begin the infrastructure design work. The technical components of the infrastructure required are outlined below.

# Medicaid Data Conversion and Hosting

The Department intends to make its Medicaid claims and provider data available to third-party applications using the Health Level Seven International (HL7)<sup>5</sup> Fast Healthcare Interoperability Resources (FHIR) industry standard as required by the CMS rule<sup>6</sup>. This requires new, separate hardware and software infrastructure to ensure that third-party data access does not interfere with existing Department claims and provider operations. The Department would leverage the existing

<sup>&</sup>lt;sup>5</sup> https://www.hl7.org/implement/standards/index.cfm?ref=nav

<sup>&</sup>lt;sup>6</sup>https://www.cms.gov/newsroom/fact-sheets/interoperability-and-patient-access-fact-

sheet#:~:text=CMS%20is%20adopting%20the%20standards,and%20security%20of%20patient%20information.&text=Patients%20have%20a%20right%20under%20HIPAA%20to%20access%20their%20health%20information.

Business Intelligence and Data Management System (BIDM) contract to provide the mechanism for exchanging electronic health information data through FHIR protocols.

# **User Authentication Licensing**

The Department would need to support secure user authentication when accessing information via the third-party apps. The Department would leverage the existing eligibility and enrollment system, Colorado Benefits Management Systems (CBMS), contract and its Program Eligibility and Application Kit (PEAK) to reuse authentication services to manage Medicaid members' username and password management. This work would require additional connections to the CBMS servers, resulting in additional licensing costs.

# **Third-Party Application Support**

Third-party app developers seeking to connect their mobile applications to Medicaid APIs need an online resource to facilitate their development and testing. The Department envisions an independent contractor would host the tools necessary to connect, authenticate, test, and administrate third-party applications both during and after the typical development life cycle. This resource would also be responsible for initiating the application approval process with the Department and ensuring third-party developers' adherence to all applicable legal and security policies. The Department would leverage existing contracts with the Colorado Regional Health Information Exchange (CORHIO) to implement this requirement.

# Technical Compliance

The Department does not maintain the expertise to implement developer APIs. Per the CMS rule, published open standards such as FHIR and OAuth 2.0—an industry-standard protocol for authorization need to be enforced for third-party applications. The Department would work with the Governor's Office of Information Technology (OIT) to assist with resources for evaluating data sharing via APIs to ensure the infrastructure meets all applicable state and federal security standards.

#### **External Interfaces**

The Department engages with smaller health plans serving Medicaid and/or CHIP members in Colorado that are required to comply with the CMS rule but would not have the resources to procure and/or maintain their own technology independently. In this case, the Department would interface directly to the plans and make data available on their behalf.

#### **Repurpose Existing Funding**

The Department is requesting to repurpose existing funding within the Medicaid Enterprise System appropriation in FY 2020-21 and FY 2021-22 to begin work on the Colorado Medicaid Blue Button Project. CMS has a stated deadline to comply with the rule by July 1, 2021. Given how late CMS published the final rule, the Department does not expect to be able to be fully implemented by July 1<sup>st</sup>. The Department does, however, expect to be fully implemented by July 1, 2022 if this budget request is approved. The Department does not expect CMS to issue any

disallowances regarding the failure to comply by July 1, 2021 as long as it can demonstrate that work has begun and there is a plan to become compliant by July 1, 2022.

During the FY 2015-16 budget cycle, the Department requested funding to begin planning for a Personal Health Record (PHR) without specifying a modality for patient access. Now that consumer mobile app technologies (and secure data standards) are ubiquitous in the marketplace, this request intends to make use of prior funding as well as new funding to implement the Colorado Blue Button platform that allows third-party applications (such as those available on the Apple Store or Google Play) to connect to Medicaid claims data as required by the CMS rule. Under the final rule, issued April 2020, all state Medicaid agencies, Medicaid and CHIP health plans must meet specific technology and data sharing standards to enable patient access to health care information through third-party applications.

The Department has engaged in discussions with its current Medicaid Enterprise System contractors and has negotiated several rate reductions to be as cost effective to the State as possible. The Department requests to use funding from those rate reductions as well as use existing and unallocated pool hours to begin this work immediately and continue into FY 2021-22. Examples of Department contractors where rate reductions were negotiated include, the MMIS vendor, BIDM vendor, Independent Verification and Validation (IV&V) vendor, Solicitation Drafter vendor, and Project Management vendor. The reductions negotiated above are primarily funded at 75% FFP, but when leveraged at 90% FFP for the design and development of the infrastructure, the Department could make existing resources stretch much further. In addition, the Department assessed other areas of the Medicaid Enterprise System (MES) budget and recognized that its mailing budget, appropriated at 50% FFP is larger than necessary. With approval of this request and because the General Assembly removed the (M) headnote restriction for this line item for FY 2020-21, the Department would be able to fund initial implementation work for the Colorado Medicaid Blue Button project without additional appropriations until FY 2022-23 for support of ongoing operations. Ongoing funding would be required to support the operations of the project, but that funding would not be needed until FY 2022-23.

## **Federal Funds Flexibility**

The Department requests permanent removal of the (M) headnote applied to General Fund for two Long Bill line items under Long Bill Group (1) Executive Director's Office; (C) Information Technology Contracts and Projects. Those appropriations are Medicaid Management Information System Maintenance and Projects and Office of eHealth Innovation Operations.

To maximize the appropriated state resources in the current and request year to fully fund initial implementation in a budget neutral manner, the Department requests that the General Assembly continue to allow unrestricted use of the appropriated General Fund for the Information Technology Contracts and Projects line items. When the Department requests funding for these lines, it estimates the costs and federal matching rates that might apply to those costs.

Appropriations are set in advance of federal approval on match rates; as federal approvals change, the Department's appropriations can become out of balance with federally approved fund splits, significantly impacting the ability to implement changes. CMS does not always approve federal financial participation rates as anticipated and there can be significant differences between the estimates and final approved rates. The match rates can vary from 50% FFP, 75% FFP, and 90% FFP for Medicaid, and in 65% FFP for CHIP.

In the past, the Department has experienced delayed implementations on projects where higher federal match rates were approved after the State budget process concluded. According to a study conducted by McKinsey & Company with the University of Oxford, large information technology projects run on average 45% over budget and 7% over time. If delays and overruns happen, the restriction imposed by the (M) headnote further inhibits the Department's ability to implement approved projects, leading to delayed implementation and potential cost increases.

With the (M) headnote removed permanently from Medicaid Enterprise System related appropriations, the flexibility to seek enhanced federal funding during the design, development, and implementation (DDI) phase and use any savings to offset potential over runs in future years would prevent the Department from having to delay implementation of projects pending further budgetary approvals. The lines requesting relief are administrative, rather than programmatic and would not limit the General Assembly's authority to dictate policy.

The programs impacted by this request would fall under Step 1: Program Design of the Evidence Continuum. To comply with federal requirements, the Department is modeling the solution after the Medicare Blue Button project. Although the Medicare Blue Button project would likely fall under Step 2: Identify Outputs of Continuum, the Department's project is in the initial stages of program design using the Medicare solution as a model.

## Anticipated Outcomes:

The Department anticipates that approval of the request would ensure that the Department is in compliance with the federal Patient Access and Interoperability rule no later than July 1, 2022.

The Department continuously seeks to improve all areas of operations, whether it relates to federal mandates or changes to improve the provider/member experience. The Department anticipates that approval of this request would further the Department's mission of improving health care access and outcomes for the people it services while demonstrating sound stewardship of financial resources. The funding in the request addresses critical needs that if left unfunded would negatively impact the Department's ability to meet the needs of Health First Colorado members.

<sup>&</sup>lt;sup>7</sup> <u>https://www.mckinsey.com/business-functions/mckinsey-digital/our-insights/delivering-large-scale-it-projects-on-time-on-budget-and-on-value#</u>

The request ties to the Governor's Wildly Important Goals, specifically "Save Coloradans money on health care". Specifically, the implementation of the Colorado Medicaid Blue Button project would give members access to more data one the services paid through Medicaid. This enables the member to make more informed choices on their health care needs, while saving money in the process.

The request aligns with all four of the Department's strategic pillars; Health Care Affordability for Coloradans, Improve Member Health, Medicaid Cost Control and Customer Service. Implementing the Colorado Medicaid Blue Button project would allow members to manage their health care needs while also investigating costs of services. The request would facilitate the improvement of member health through providing the data exchange necessary for members to ensure they receive the right services at the right price. Lastly the request would help deliver an improved customer experience by having a one-stop shop for members to access to their health care information.

Implementation of similar patient access models in the Veterans Administration health system indicate that patients take advantage of "blue button" tools. 8,9 There is little documented evidence of the extent to which patient access to data alters health care decisions, however. The Department believes the evidence for this program aligns with Step 2 on the evidence continuum.

## Assumptions and Calculations:

The Department assumes that it would not be fully implemented by the CMS deadline of July 1, 2021 but would have communicated with CMS on the Department's plan on how and when it expects to be fully operational, through an APD submission. The Department assumes implementation would be complete by July 1, 2022. The Department assumes that CMS would not penalize the Department for not meeting the deadline as long as the Department demonstrates that it has begun to work on implementation and has a plan to come into compliance.

## Colorado Medicaid Blue Button Program Manager

The Department would hire 1.0 FTE at the Project Management I classification beginning July 1, 2021. This position would be required indefinitely and as CMS rules and requirements regarding patient access to health data evolves, the FTE would lead and coordinate those efforts. The Department assumes that this FTE would be funded through the standard MMIS cost allocation methodology. The costs associated with the FTE would be included in a Department Advanced Planning Document (APD) update by April 2021 to ensure funding is approved prior to the start of the fiscal year.

<sup>&</sup>lt;sup>8</sup> Klein DM, Fix GM, Hogan TP, Simon SR, Nazi KM, Turvey CL. Use of the Blue Button Online Tool for Sharing Health Information: Qualitative Interviews With Patients and Providers. J Med Internet Res. 2015;17(8):e199.

<sup>&</sup>lt;sup>9</sup> Turvey C, Klein D, Fix G, et al. Blue Button use by patients to access and share health record information using the Department of Veterans Affairs' online patient portal. J Am Med Inform Assoc. 2014;21(4):657-663.

#### **Vendor Costs**

The Department assumes that work would begin in the current year and continue into FY 2021-22 and would be completed with existing pool hours already in vendor contracts. No additional funds would be required. The Department assumes that because the initial scope of the project would be completed with exiting pool hours and fall under the scope of the approved APD, a new federal APD request for project funding would not be required until October 1, 2022, which is federal fiscal year (FFY) 2022-23. The additional funding required in FY 2022-23 would require the Department to submit an APD for the additional scope. CMS requires 60 days for APD review, so the Department would submit an APD for the additional funding by June 1, 2022, giving adequate time for CMS's 60-day approval timeline.

The Department assumes that various roles would be required through the contracted vendors to design and implement the Colorado Medicaid Blue Button project and a list of those roles are provided below in Table 1: Third-Party Application Support Staffing Responsibilities. The Department has provided estimates for hourly rates and the number of hours required for each role in the appendix; the actual procured contractor may vary from the budget estimate based on results from competitive procurement.

**Table 1: Third-Party Application Support Staffing Responsibilities** 

Role	Responsibility
	P Control of the Cont
Project Manager(s)	The role is responsible for outlining and oversight of implementation projects. They design the project goals and success markers, determine how success will be measured and tracked. They ensure the project remains on time and on budget and help motivate team members to hit their goals. Project Managers also act as liaisons between the project team and upper level management. They prepare and present progress reports and ensure the project is furthering organizational goals.
Developer (API/FHIR)	This role shall design, develop, and configure application programing interfaces to the Fast Healthcare Interoperability Resource (FHIR) specification. Specifically, the role shall be responsible for and work collaboratively with other roles on programming and software development using various programming languages and related tools and frameworks, reviewing code written by other programmers, requirement gathering, bug fixing, testing, documenting and implementing software systems.

Role	Responsibility
Quality Assurance Tester	The role is primarily responsible for checking, for defects or issues related to the development of the platform. QA test data output to ensure all standards and guidelines are being met. This role will identify issues and run debugging programs as needed. The Tester will also generate reports, work with software developers to correct issues, and upgrade databases as required.
Business Analyst	The role is primarily responsible for completing business requirements and documenting technical design documentation. In addition, this role builds out the requirements traceability matrix to ensure that development efforts align with the expected outcomes.
Security Analyst	This role owns evaluation of all components and ensures their compliance with related security requirements to ensure that key privacy and security requirements are met and maintained by the Department's Application Programing Interfaces (APIs). These requirements shall include encryption of data in transit, input validation of API calls, access controls, data integrity protection, technical methods for revoking sharing permissions, and service provider and patient portal security.
System Administrator	This role shall monitor the daily operations of the API and will assist with prevention and mitigation of API performance issues. Additionally, the role is the point-of-contact for developers when they experience problems with the API. The system administrator will gather information to define the issue and will resolve issues by trouble shooting hardware liaising with vendors if needed for more information.
Support Analyst	The role will serve as the point of contact on system outages and initiate the incident management process.
Legal Analyst	This role shall help development of the Department's Colorado Medicaid Blue Button Trust Framework and Code of Conduct. The Framework and Code will protect Colorado Medicaid members by serving as a mechanism to hold participating application software developers to generally accepted, nationwide privacy and security standards and principles. The role will operationalize this Framework and Code as a part of the application registration process. Further, this role shall develop privacy policies and organizational security policies.

## **Repurpose Existing Funding**

The Department assumes that it would use 1,680 hours of existing pool hours at a rate of \$134 per hour from the CBMS contract and 9,090 hours of existing pool hours at a rate of \$165 per hour from the BIDM contract to fund the contract costs in FY 2020-21. The Department assumes that funding from the Department's FY 2015-16 R-9 "Personal Health Records and Online Health Education" would be used to fully offset the request in FY 2021-22 and partially offset the request in the out years.

See Appendix A: Assumptions and Calculations for calculation of reductions.

#### Table 1.1 Summary by Line Item FY 2021-22

	F1 2021-22								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (A) General Administration, Personal Services	\$68,988	1.0	\$34,494	\$0	\$0	\$34,494	50.00%	Table 2.1, Row B
В	(1) Executive Director's Office; (A) General Administration, Health, Life, Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021	50.00%	Table 2.1, Row C
С	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$104	0.0	\$52	\$0	\$0	\$52	50.00%	Table 2.1, Row D
D	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$3,070	0.0	\$1,535	\$0	\$0	\$1,535	50.00%	Table 2.1, Row E
Е	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$3,070	0.0	\$1,535	\$0	\$0	\$1,535	50.00%	Table 2.1, Row F
F	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$5,653	0.0	\$2,826	\$0	\$0	\$2,827	50.01%	Table 2.1, Row G
G	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$3,572,211	0.0	\$410,804	\$0	\$0	\$3,161,407	88.50%	Table 2.1, Row I
Н	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Health Information Exchange Maintenance and Projects	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	Table 2.1, Row K
I	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Colorado Benefits Management Systems, Operating and Contract Expenses	\$150,000	0.0	\$17,250	\$0	\$0	\$132,750	88.50%	Table 2.1, Row J
J	Total Request	\$2,862,999	1.0	(\$1,552)	\$0	\$0	\$2,864,551		Sum of Rows A thru I

#### Table 1.2 Summary by Line Item FY 2022-23

Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (A) General Administration, Personal Services	\$71,751	1.0	\$35,875	\$0	\$0	\$35,876	50.00%	Table 2.2, Row B
В	(1) Executive Director's Office; (A) General Administration, Health, Life, Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021	50.00%	Table 2.2, Row C
С	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$108	0.0	\$54	\$0	\$0	\$54	50.00%	Table 2.2, Row D
D	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 2.2, Row E
Е	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 2.2, Row F
F	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$950	0.0	\$475	\$0	\$0	\$475	50.00%	Table 2.2, Row G
G	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$2,715,661	0.0	\$695,209	\$0	\$0	\$2,020,452	74.40%	Table 2.2, Row I
Н	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Health Information Exchange Maintenance and Projects	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	Table 2.2, Row K
I	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Colorado Benefits Management Systems, Operating and Contract Expenses	\$150,000	0.0	\$38,400	\$0	\$0	\$111,600	74.40%	Table 2.2, Row J
J	Total Request	\$2,004,759	1.0	\$303,157	\$0	\$0	\$1,701,602		Sum of Rows A thru I

#### Table 1.3 Summary by Line Item FY 2023-24

	FY 2023-24									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	(1) Executive Director's Office; (A) General Administration, Personal Services	\$71,751	1.0	\$35,875	\$0	\$0	\$35,876	50.00%	Table 2.3, Row B	
В	(1) Executive Director's Office; (A) General Administration, Health, Life, Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021	50.00%	Table 2.3, Row C	
С	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$108	0.0	\$54	\$0	\$0	\$54	50.00%	Table 2.3, Row D	
D	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 2.3, Row E	
Е	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 2.3, Row F	
F	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$950	0.0	\$475	\$0	\$0	\$475	50.00%	Table 2.3, Row G	
G	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$2,754,776	0.0	\$705,223	\$0	\$0	\$2,049,553	74.40%	Table 2.3, Row I	
Н	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Health Information Exchange Maintenance and Projects	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	Table 2.3, Row K	
I	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Colorado Benefits Management Systems, Operating and Contract Expenses	\$150,000	0.0	\$38,400	\$0	\$0	\$111,600	74.40%	Table 2.3, Row J	
J	Total Request	\$2,043,874	1.0	\$313,171	\$0	\$0	\$1,730,703		Sum of Rows A thru I	

					Table 2.1								
				Sumi	mary by Initiati	ve							
	FY 2021-22												
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations				
A	FTE Costs												
В	Personal Services	\$68,988	1.0	\$34,494	\$0	\$0	\$34,494	50.00%	Table 5.2, Row A				
C	Health, Life and Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021	50.00%	Table 5.2, Row B				
D	Short-term Disability	\$104	0.0	\$52	\$0	\$0	\$52	50.00%	Table 5.2, Row C				
E	SB 04-257 Amortization Equalization	\$3,070	0.0	\$1,535	\$0	\$0	\$1,535	50.00%	Table 5.2, Row D				
F	SB 06-235 Supplemental Amortization Equalization Disbursement	\$3,070	0.0	\$1,535	\$0	\$0	\$1,535	50.00%	Table 5.2, Row E				
G	Operating Expenses	\$5,653	0.0	\$2,826	\$0	\$0	\$2,827	50.01%	Table 5.2, Row F				
Н	Contractor Costs												
I	MMIS	\$3,572,211	0.0	\$410,804	\$0	\$0	\$3,161,407	88.50%	Table 3.2 Rows J				
J	CBMS	\$150,000	0.0	\$17,250	\$0	\$0	\$132,750	88.50%	Table 3.2, Row K				
K	Refinancing Offset	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	Table 4, Row A				
L	Total Request	\$2,862,999	1.0	(\$1,552)	\$0	\$0	\$2,864,551		Sum of Rows A thru K				

	Table 2.2 Summary by Initiative												
	FY 2022-23												
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations				
A	FTE Costs												
В	Personal Services	\$71,751	1.0	\$35,875	\$0	\$0	\$35,876		Table 5.3, Row A				
С	Health, Life and Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021	50.00%	Table 5.3, Row B				
D	Short-term Disability	\$108	0.0	\$54	\$0	\$0	\$54	50.00%	Table 5.3, Row C				
Е	SB 04-257 Amortization Equalization	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 5.3, Row D				
F	SB 06-235 Supplemental Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 5.3, Row E				
G	Operating Expenses	\$950	0.0	\$475	\$0	\$0	\$475	50.00%	Table 5.3, Row F				
Н	Contractor Costs												
I	MMIS	\$2,715,661	0.0	\$695,209	\$0	\$0	\$2,020,452	74.40%	Table 3.2 Rows J				
J	CBMS	\$150,000	0.0	\$38,400	\$0	\$0	\$111,600		Table 3.2, Row K				
K	Refinancing Offset	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	Table 4, Row B				
L	Total Request	\$2,004,759	1.0	\$303,157	\$0	\$0	\$1,701,602	_	Sum of Rows A thru K				

					Table 2.3								
					mary by Initiativ	/e							
	FY 2023-24												
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations				
A	FTE Costs												
В	Personal Services	\$71,751	1.0	\$35,875	\$0	\$0	\$35,876	50.00%	Table 5.3, Row A				
C	Health, Life and Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021		Table 5.3, Row B				
D	Short-term Disability	\$108	0.0	\$54	\$0	\$0	\$54	50.00%	Table 5.3, Row C				
E	SB 04-257 Amortization Equalization	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 5.3, Row D				
F	SB 06-235 Supplemental Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597	50.02%	Table 5.3, Row E				
G	Operating Expenses	\$950	0.0	\$475	\$0	\$0	\$475	50.00%	Table 5.3, Row F				
Н	Contractor Costs												
I	MMIS	\$2,754,776	0.0	\$705,223	\$0	\$0	\$2,049,553	74.40%	Table 3.2 Rows J				
J	CBMS	\$150,000	0.0	\$38,400	\$0	\$0	\$111,600	74.40%	Table 3.2, Row K				
K	Refinancing Offset	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	Table 4, Row C				
L	Total Request	\$2,043,874	1.0	\$313,171	\$0	\$0	\$1,730,703		Sum of Rows A thru K				

	Table 3.1: Summary of Contractor Costs by Fund Split										
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes			
A	FY 2021-22	\$3,722,211	0.0	\$428,054	\$0	\$0	\$3,294,157	Table 3.2, Row L			
В	FY 2022-23	\$2,865,661	0.0	\$733,609	\$0	\$0	\$2,132,052	Table 3.2, Row L			
С	FY 2023-24 & Ongoing	\$2,904,776	0.0	\$743,623	\$0	\$0	\$2,161,153	Table 3.2, Row L			

		Table 3.2: Sumn	nary of Contracto	r Costs	
Row	Item	FY 2021-22	FY 2022-23	FY 2023-24 & Ongoing	Notes
Α	Medicaid Data Hosting Costs	\$500,000	\$500,000	\$500,000	Table 3.4, Row L
В	Third-Party Application Support Costs	\$2,057,011	\$1,755,005	\$1,785,914	Row C + Row D
C	Staffing Costs	\$1,332,011	\$1,030,005	\$1,060,914	Table 3.3, Row CC
D	Gateway / Hosting Costs	\$725,000	\$725,000	\$725,000	Table 3.4, Row M
Е	Technical Compliance Consultant	\$265,200	\$273,156	\$281,362	Table 3.4, Row D
F	User Authentication Costs	\$150,000	\$150,000	\$150,000	Table 3.4, Row K
G	External Interfacing Costs	\$750,000	\$187,500	\$187,500	Row H + Row G
H	Implementation	\$562,500	\$0	\$0	Table 3.4 Row H
Ι	Ongoing	\$187,500	\$187,500	\$187,500	Table 3.4, Row I
J	Total Contractor Costs - MMIS	\$3,572,211	\$2,715,661	\$2,754,776	Row A + Row C + Row D + Row E + Row H + Row I
K	Total Contractor Costs - CBMS	\$150,000	\$150,000	\$150,000	Row F
L	Total Contractor Costs	\$3,722,211	\$2,865,661	\$2,904,776	Row J + Row K

	Table	3.3: Third-Party A	pplication Suppo	rt Staffing Cost	
Row	Item	FY 2021-22	FY 2022-23	FY 2023-24 & Ongoing	Notes
Α	Project Manager	1	1	1	Number of staff.
В	Cost per hour	\$69.23	\$71.31		Current rate with 3% cost of living increase
С	Annual Hours	2,080	2,080		Full time position equals 2,080 hours.
D	Project Manager Staff Cost	\$143,998	\$148,325	\$152,776	Row A * Row B * Row C
Е	Legal / Policy / Contract Management	1	0		Number of staff.
F	Cost per hour	\$121.15	\$124.78		Current rate with 3% cost of living increase
G	Hours	2,080	2,080	2,080	Full time position equals 2,080 hours.
Н	Legal / Policy / Contract Management Cost	\$251,992	\$0	\$0	Row E * Row F * Row G
I	Developer	1	1.5	1.5	Number of staff.
J	Cost per hour	\$69.23	\$71.31	\$73.45	Current rate with 3% cost of living increase
K	Hours	2,080	2,080	2,080	Full time position equals 2,080 hours.
L	Developer Staff Cost	\$143,998	\$222,487	\$229,164	Row I * Row J * Row K
M	Business Analyst / QA Tester	2	1	1	Number of staff.
N	Cost per hour	\$73.08	\$75.27	\$77.53	Current rate with 3% cost of living increase
О	Hours	2,080	2,080	2,080	Full time position equals 2,080 hours.
P	Business Analyst / QA Tester Staff Cost	\$304,013	\$156,562	\$161,262	Row M * Row N * Row O
Q	Security Analyst	1	1		Number of staff.
R	Cost per hour	\$96.15	\$99.03	\$102.00	Current rate with 3% cost of living increase
S	Hours	2,080	2,080	2,080	Full time position equals 2,080 hours.
T	Security Analyst Staff Cost	\$199,992	\$205,982	\$212,160	Row Q * Row R * Row S
U	System Administrator	1	1	1	Number of staff.
V	Cost per hour	\$96.16	\$99.04	\$102.01	Current rate with 3% cost of living increase
W	Hours	2,080	2,080	2,080	Full time position equals 2,080 hours.
X	System Administrator Staff Cost	\$200,013	\$206,003	\$212,181	Row U * Row V * Row W
Y	Support Analyst	1	1		Number of staff.
Z	Cost per hour	\$42.31	\$43.58		Current rate with 3% cost of living increase
AA	Hours	2,080	2,080	2,080	Full time position equals 2,080 hours.
BB	Support Staff Cost	\$88,005	\$90,646	\$93,371	Row Y * Row Z * Row AA
CC	Total Third-Party Application Support Staffing Cost	\$1,332,011	\$1,030,005	\$1,060,914	Sum of Rows (D, H, L, P, T, X, BB)

	Table 3.4: Other Contractor Costs										
Row	Item	FY 2021-22	FY 2022-23	FY 2023-24 & Ongoing	Notes						
Α	Compliance Consultant	1.5	1.5	1.5	Number of staff.						
В	Cost per hour	\$85.00	\$87.55	\$90.18	Current rate with 3% cost of living increase						
С	Annual Hours	2,080	2,080	2,080	Full time position equals 2,080 hours.						
D	Compliance Consultant Staff Cost	\$265,200	\$273,156	\$281,362	Row A * Row B * Row C						
Е	External Interfaces	3	3	3	Estimated Numbers of Plans						
F	Implementation Fee	\$187,500	\$0	\$0	One-time fee per plan						
G	Ongoing Licensing	\$62,500	\$62,500	\$62,500	Ongoing annual licensing fee per plan						
Н	External Interfaces Implementation Total	\$562,500	\$0	\$0	Row E * Row F						
I	External Interfaces Ongoing Total	\$187,500	\$187,500	\$187,500	Row E * Row G						
J	External Interfaces Total Costs	\$750,000	\$187,500	\$187,500	Row E * (Row F + Row G)						
K	User Authentication Costs	\$150,000	\$150,000	\$150,000	Licensing Estimate						
L	Medicaid Data Hosting Costs	\$500,000	\$500,000	\$500,000	Licensing Estimate						
M	Third-Party Application Support Hosting Costs	\$725,000	\$725,000	\$725,000	Licensing Estimate						
N	Total Other Contractor Costs	\$2,390,200	\$1,835,656	\$1,843,862	Row D + Row J + Row K + Row L + Row M						

	Table 4.1: Personal Health Record Funding Refinancing										
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes			
A	FY 2021-22	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	Funding Currently in HIT Appropriation from FY 2015-16 R-9 "Personal Health Records and Online Health Education"			
В	FY 2022-23	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	Funding Currently in HIT Appropriation from FY 2015-16 R-9 "Personal Health Records and Online Health Education"			
С	FY 2023-24 & Ongoing	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	Funding Currently in HIT Appropriation from FY 2015-16 R-9 "Personal Health Records and Online Health Education"			

# **Table 5.1 FTE Calculations**

## **FTE Calculation Assumptions:**

<u>Operating Expenses</u> -- Base operating expenses are included per FTE for \$500 per year. In addition, for regular FTE, annual telephone costs assume base charges of \$450 per year.

<u>Standard Capital Purchases</u> -- Each additional employee necessitates the purchase of a Personal Computer (\$900), Office Suite Software (\$330), and office furniture (\$3,473).

General Fund FTE -- Beginning July 1, 2019, new employees will be paid on a bi-weekly pay schedule; therefore new full-time General Fund positions are reflected in Year 1 as 0.9615 FTE to account for the pay-date shift (25/26 weeks of pay). This applies to personal services costs only; operating costs are not subject to the pay-date shift.

Expenditure Detail		FY 2	2021-22	FY	2022-23
Personal Services:					
Classification Title	Biweekly Salary	FTE		FTE	
PROJECT MANAGER I	\$2,456	1.0	\$61,405	1.0	\$63,864
PERA			\$6,693		\$6,961
AED			\$3,070		\$3,193
SAED			\$3,070		\$3,193
Medicare			\$890		\$926
STD			\$104		\$108
Health-Life-Dental			\$10,042		\$10,042
Subtotal Position 1, #.# FTE		1.0	\$85,274	1.0	\$88,287
Subtotal Personal Services		1.0	\$85,274	1.0	\$88,287
Operating Expenses:					
		FTE		FTE	
Regular FTE Operating	\$500	1.0	\$500	1.0	\$500
Telephone Expenses	\$450	1.0	\$450	1.0	\$450
PC, One-Time	\$1,230	1.0	\$1,230	-	
Office Furniture, One-Time	\$3,473	1.0	\$3,473	-	
Other					
Subtotal Operating Expenses			\$5,653		\$950
TOTAL REQUEST		1.0	<u>\$90,927</u>	1.0	<u>\$89,237</u>

	Table 5.2 FTE Costs FY 2021-22										
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds				
A	Personal Services (Salary, PERA & Medicare)	\$68,988	1.0	\$34,494	\$0	\$0	\$34,494				
В	Health, Life and Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021				
С	Short-term Disability	\$104	0.0	\$52	\$0	\$0	\$52				
D	SB 04-257 Amortization Equalization Disbursement	\$3,070	0.0	\$1,535	\$0	\$0	\$1,535				
H	SB 06-235 Supplemental Amortization Equalization Disbursement	\$3,070	0.0	\$1,535	\$0	\$0	\$1,535				
F	Operating Expenses	\$5,653	0.0	\$2,826	\$0	\$0	\$2,827				
G	Total	\$90,927	1.0	\$45,463	\$0	\$0	\$45,464				

	Table 5.3 FT	E Costs FY 2022-2	3 and On	ngoing			
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds
A	Personal Services (Salary, PERA & Medicare)	\$71,751	1.0	\$35,875	\$0	\$0	\$35,876
В	Health, Life and Dental	\$10,042	0.0	\$5,021	\$0	\$0	\$5,021
С	Short-term Disability	\$108	0.0	\$54	\$0	\$0	\$54
D	SB 04-257 Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597
Е	SB 06-235 Supplemental Amortization Equalization Disbursement	\$3,193	0.0	\$1,596	\$0	\$0	\$1,597
F	Operating Expenses	\$950	0.0	\$475	\$0	\$0	\$475
G	Total	\$89,237	1.0	\$44,617	\$0	\$0	\$44,620

# Schedule 13

# **Department of Health Care Policy and Financing**

# Funding Request for The FY 2021-22 Budget Cycle Request Title R-10 Convert Contractor Resources to FTE Dept. Approval By: OSPB Approval By: X Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2022-23		
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$147,413,510	\$0	\$150,433,870	(\$1,028,965)	(\$719,409)	
	FTE	520.4	0.0	521.2	13.5	14.0	
Total of All Line Items	GF	\$34,558,055	\$0	\$36,238,130	\$0	\$0	
Impacted by Change Request	CF	\$14,566,504	\$0	\$15,237,552	(\$21,609)	(\$15,112)	
	RF	\$2,718,267	\$0	\$2,345,839	\$0	\$0	
	FF	\$95,570,684	\$0	\$96,612,349	(\$1,007,356)	(\$704,297)	

		FY 202	0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$41,276,479	\$0	\$41,080,782	\$878,910	\$910,588
	FTE	520.4	0.0	521.2	13.5	14.0
01. Executive Director's Office, (A) General	GF	\$14,487,249	\$0	\$14,650,129	\$224,021	\$232,179
Administration, (1)	CF	\$3,911,124	\$0	\$3,939,903	\$128,794	\$133,479
General Administration - Personal Services	RF	\$2,305,357	\$0	\$1,892,777	\$0	\$0
	FF	\$20,572,749	\$0	\$20,597,973	\$526,095	\$544,930
	Total	\$5,264,801	\$0	\$6,826,728	\$140,588	\$140,588
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General	GF	\$1,342,322	\$0	\$2,480,588	\$34,784	\$34,784
Administration, (1) General Administration -	CF	\$548,313	\$0	\$573,987	\$20,082	\$20,084
Health, Life, and Dental	RF	\$138,532	\$0	\$173,157	\$0	\$0
	FF	\$3,235,634	\$0	\$3,598,996	\$85,722	\$85,720

		FY 202	0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$72,366	\$0	\$71,148	\$1,330	\$1,378
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General	GF	\$26,778	\$0	\$26,526	\$339	\$351
Administration, (1)	CF	\$5,695	\$0	\$5,510	\$194	\$201
General Administration - Short-term Disability	RF	\$1,607	\$0	\$1,644	\$0	\$0
	FF	\$38,286	\$0	\$37,468	\$797	\$826
	Total	\$2,188,905	\$0	\$2,223,320	\$39,114	\$40,524
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (A) General	GF	\$810,157	\$0	\$828,912	\$9,969	\$10,332
Administration, (1) General Administration -	CF	\$172,037	\$0	\$172,189	\$5,731	\$5,940
Amortization Equalization	RF	\$48,635	\$0	\$51,380	\$0	\$0
Disbursement	FF	\$1,158,076	\$0	\$1,170,839	\$23,414	\$24,252
	Total	\$2,188,905	\$0	\$2,223,320	\$39,114	\$40,524
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (A) General Administration, (1)	GF	\$810,157	\$0	\$828,912	\$9,969	\$10,332
General Administration -	CF	\$172,037	\$0	\$172,189	\$5,731	\$5,940
Supplemental Amortization	RF	\$48,635	\$0	\$51,380	\$0	\$0
Equalization Disbursement	FF	\$1,158,076	\$0	\$1,170,839	\$23,414	\$24,252
	Total	<b>\$2.250.205</b>	<b>*</b> 0	<b>#0.040.040</b>	\$440.740	<b>\$50,500</b>
	FTE	<b>\$2,356,365</b> 0.0	<b>\$0</b> 0.0	<b>\$2,248,313</b> 0.0	<b>\$140,742</b> 0.0	<b>\$58,500</b>
01. Executive Director's	GF	\$954,547	\$0	\$919,906	\$34,442	\$12,988
Office, (A) General Administration, (1)	CF	\$214,413	<b>\$</b> 0	\$200,711	\$19,921	\$7,624
General Administration - Operating Expenses	RF	\$13,297	\$0	\$13,297	\$0	\$0
— Expenses	FF	\$1,174,108	\$0	\$1,114,399	\$86,379	\$37,888
	Total	¢20 020 E47	\$0	¢40 524 940	¢277 E00	60
01. Executive Director's	FTE	<b>\$20,838,547</b> 0.0	0.0	<b>\$19,531,819</b> 0.0	<b>\$277,500</b> 0.0	<b>\$0</b>
Office, (A) General	GF	\$6,423,623	\$0	\$6,012,795	\$87,384	\$0
Administration, (1) General Administration -	CF	\$3,230,464	\$0 \$0	\$3,415,079	\$48,867	\$0
General Professional Services and Special	RF	\$150,000	\$0	\$150,000	\$48,807	\$0
Projects	FF	\$11,034,460	\$0	\$9,953,945	\$141,249	\$0 \$0
	- ''	Ψ11,004,400	ΨΟ	ψυ,υυυ,υ4υ	Ψ171,273	ΨΟ

	_	FY 202	0-21	FY 20:	21-22	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$73,227,142	\$0	\$76,228,440	(\$2,546,263)	(\$1,911,511)	
01. Executive Director's Office, (C) Information	FTE	0.0	0.0	0.0	0.0	0.0	
Technology Contracts	GF	\$9,703,222	\$0	\$10,490,362	(\$400,908)	(\$300,966)	
and Projects, (1) Information Technology	CF	\$6,312,421	\$0	\$6,757,984	(\$250,929)	(\$188,380)	
Contracts and Projects - MMIS Maintenance and	RF	\$12,204	\$0	\$12,204	\$0	\$0	
Projects	FF	\$57,199,295	\$0	\$58,967,890	(\$1,894,426)	(\$1,422,165)	

		Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

Jared Polis Governor

Kim Bimestefer Executive Director

November 1, 2020

# <u>Department Priority: R-10</u> Request Detail: Convert Contractor Resources to FTE

	Summary of Funding Change for FY 2021-22									
	Tot	tals	Increment	al Change						
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23						
	Appropriation	Base	Request	Request						
Total Funds	\$147,413,510	\$150,433,870	(\$1,028,965)	(\$719,409)						
FTE	520.4	521.2	13.5	14.0						
General Fund	\$34,558,055	\$36,238,130	\$0	\$0						
Cash Funds	\$14,566,504	\$15,237,552	(\$21,609)	(\$15,112)						
Reappropriated Funds	\$2,718,267	\$2,345,839	\$0	\$0						
Federal Funds	\$95,570,684	\$96,612,349	(\$1,007,356)	(\$704,297)						

#### Summary of Request:

The Department requests to build internal efficiencies and develop institutional knowledge related to supporting providers through provider field representatives and strengthening the Department's portfolio and project management. This request would repurpose funding appropriated to the Department for contractor resources to hire state FTE to perform the duties, which is a more cost-effective solution and provides benefits such as building institutional knowledge and the ability to quickly refocus staff with changing priorities. This request is similar to the Department's FY 2020-21 BA-11 "Convert Contractor Resources to FTE," which also repurposed funding from contractor resources to hire FTE.

Cash funds included in this request are from the Healthcare Affordability and Sustainability Fee Cash Fund and the Children's Basic Health Plan Trust. This change represents less than a 0.5 percent change to the Department's budget.

The Department considers this request as aligning with Step 2 on the evidence continuum, as the Department collects data on the functions performed by provider field representatives and project management staff.



## Current Program:

The Department received funding for contracted provider field representatives in the Department's FY 2019-20 R-12 "Medicaid Enterprise Operations" request. This funding supports eight provider field representatives contracted with the Department's Medicaid Management Information System (MMIS) and Fiscal Agent Services vendor through the end of FY 2020-21. Provider field representatives are a valuable asset to the Department's provider services, offering personal outreach and attention to providers who either need extra help or who have problems resolving their issues with the provider call center.

The Department also received funding to establish the Medicaid Enterprise Project Management Office (PMO) in the Department's FY 2019-20 R-12 "Medicaid Enterprise Operations" request. This funding supports a contracted project management vendor and Department FTE to provide project management services, operational support, and administrative functions to the Medicaid Enterprise. The Medicaid Enterprise consists of four primary services including the Department's MMIS and Fiscal Agent Services, Business Intelligence and Data Management (BIDM) services, the Pharmacy Benefit Management System (PBMS), and Colorado Benefits Management System (CBMS).

## Problem or Opportunity:

The Department has identified an opportunity to improve its ability to support providers through field representatives and strengthen its portfolio and project management by repurposing funding already appropriated for contractor resources and hiring FTE to perform these duties instead. While the appropriated contractor resources would allow the Department to make progress in these areas, the Department could make more progress and provide more ongoing support by using the funding for in-house staffing resources. This could be done with no additional General Fund and would build ongoing in-house expertise and institutional knowledge, therefore accomplishing more of the Department's goals.

Outside vendors are a less cost-effective way to meet the Department's need for provider field representatives and additional portfolio and project management capacity. If the Department were to use contractor resources, then each contractor would require oversight and management by Department staff, which must be absorbed by existing staff in most cases. Contractor work typically is more expensive than FTE costs for equivalent work. The State frequently pays hourly rates to vendors that exceed the amount that would be paid for equivalent work by State FTE. In the past, the Department has experienced difficulty in maintaining continuity of knowledge and processes when the work is transitioned between vendors. Subject matter knowledge is not always preserved during the transition process. The transition period between vendors generally results

<sup>&</sup>lt;sup>1</sup> https://www.colorado.gov/pacific/sites/default/files/HCPF%2C%20FY20%2C%20R-12%20Medicaid%20Enterprise%20Operations.pdf

in delays in completion of deliverables as one vendor closes out and the other vendor ramps up to take on contractual responsibilities which would not occur with State FTE.

## **Provider Field Representatives**

Funding for provider field representatives expires at the end of FY 2020-21, but the Department considers them to be a valuable asset to provider services that should be available to providers on an ongoing basis. Eight provider field representatives were added to the MMIS and Fiscal Agent Services contract in the fall of 2017 to assist providers with new Colorado interChange functionality and ease frustration. The need for provider field representatives was highest during the Colorado interChange transition period, but there continues to be a need to address ongoing provider requests. The field representatives respond to provider requests submitted through the Department's website on issues related to claims, the provider web portal, enrollment, revalidation, and policy. They resolve escalations of complex issues identified by the call center, conduct onsite or virtual site visits to address provider requests, and assist with training as needed.

## **Project Management Office**

With the high demand on current PMO resources, the Department has insufficient capacity to manage Medicaid Enterprise projects and successfully establish a responsive strategic framework that allows the Department to optimize workflow and rapidly adjust project work as changes occur. The Department's current PMO can manage approximately 30 in-progress projects at a given time. This typically leaves over 150 other in-progress Medicaid Enterprise projects unmanaged by the PMO due to the limited capacity of available resources. As the Department continues to take on additional state and federal projects to improve operational excellence and stay in compliance with state and federal requirements, the demand on PMO resources will only increase. This includes meeting Centers for Medicare and Medicaid Services (CMS) requirements for Medicaid Enterprise modular system projects, which is required for continued federal financial participation (FFP). Beyond basic project management, there is an increasing recognition in Enterprise management that embracing continuous improvement through Agile and Lean practices is a necessity in the rapidly changing world of work. There is also an increasing recognition of the need for strong project management across all the Department's strategic initiatives, not just for the Medicaid Enterprise. The Department's current PMO has insufficient resources to establish a departmentwide project management framework necessary for ongoing success and performance amid continuous change.

The Department hired a contractor to perform an independent assessment regarding the need for a department-wide PMO and the recommendations from this assessment form the basis of this request. The assessment found that the Department needed to expand the current PMO to cover more than Medicaid Enterprise System projects and cover all the Department's strategic initiatives.

The assessment also provided the Department with the recommendations listed below.

- To improve project prioritization, the Department should establish a standard process that accounts for the priority efforts outlined in the Governor's Wildly Important Goals and the Department Performance Plan. The process should consistently be applied when onboarding projects so that the most important strategic initiatives are delivered first.
- As the new PMO develops an organization-wide project management framework they should consider how to incorporate Agile practices, continuous improvement, and feedback loops to reduce risks during the project.
- To support an enterprise-wide approach to Agile and Lean, the Department should procure contractor resources for at least 12 months to guide, develop and implement the approach to include training and coaching. The assessment noted that contractor resources can bring required industry knowledge and organization change management to ensure a successful transition and operation hand off to the Department.
- To promote continuous improvement and Agile practices in the PMO framework, the Department should improve staffing levels in the PMO. The assessment concluded that the PMO does not have enough positions to support the portfolio of projects. It noted that besides managing projects, the PMO supports various operational functions including contract management, vendor management, fiscal activities, advance planning documents, change and priority board meetings, and federal reporting requirements. The assessment estimated that those activities account for approximately 30% of staff time.

The assessment recommended at least 15.0 additional FTE for the PMO to improve the portfolio and project management framework and address operational issues that impact continuous project delivery.

#### **Proposed Solution:**

The Department requests a reduction of \$1,028,965 total funds, including \$0 General Fund, a reduction of \$21,609 cash funds, a reduction of \$1,007,356 federal funds, and an increase of 13.5 FTE in FY 2021-22; and a reduction of \$719,409 total funds, including \$0 General Fund, a reduction of \$15,112 cash funds, a reduction of \$704,297 federal funds and an increase of 14.0 FTE in FY 2022-23 and ongoing to support providers with ongoing provider field representatives and strengthen the Department's PMO with no additional General Fund and a reduction in total funds, cash funds, and federal funds. Further, the Department requests to move funding that has already been appropriated to a line item which would permit the hiring of additional staff. In addition to the increase in Department FTE, this change in funding would allow the Department to build internal efficiencies and develop institutional knowledge related to provider field representatives and the PMO. Cash funds are from the Healthcare Affordability and Sustainability Fee Cash Fund and the Children's Basic Health Plan Trust.

This request includes 6.0 FTE to serve as provider field representatives, including additional operating funds for these FTE for travel expenses related to onsite provider visits to address provider service requests, attending provider association meetings, and provider recruitment and retention activities. Although the provider field representative work has been performed by contractors to date, FTE performing these duties allows the Department to build on areas that are not generally possible with contractors. For example, FTE can be ingrained in the Department's culture, mission, and vision. There would be an increased line of sight into provider contacts and other activities. There would also be improved efficiency and customer service to providers achieved through direct oversight and the ability to quickly refocus staff based on Departmental priorities like provider recruitment. To accomplish this change, the Department has developed a spending plan for the FY 2020-21 MMIS Maintenance and Projects line item incorporating savings from negotiated contracts and leveraging rollforward funds to create efficiencies and reduce contractual obligations funded within the line which could be sustained ongoing. The Department proposes to utilize these savings to offset the costs to transition the provider field representatives from contract staff to State FTE and thus continue this important service to providers.

This request also includes 8.0 FTE to serve in the project management office. These FTE would work as a cohesive team and include one portfolio manager who would manage an overall portfolio of projects, five project managers responsible for day-to-day project management, and two project coordinators to assist the project managers. This request also includes additional operating funds to provide ongoing professional development and training for these staff. Although the assessment recommended a greater number of FTE, the Department is requesting less FTE than recommended to keep the request General Fund neutral. Having FTE perform these critical PMO functions provides a number of benefits to the Department not generally realized with contractors. For instance, FTE generally allows for better retention of institutional knowledge and subject matter expertise, which are critical for Medicaid Enterprise projects that typically involve overlapping state and federal regulations, technical requirements, policy concerns, and project management methodologies and tools. Having FTE do this work also allows for greater ability to reprioritize Enterprise projects and quickly refocus staff in response to changes in policy, federal regulations, and other circumstances.

Additionally, this request includes one-time funding for two consulting contracts that would focus on portfolio process improvements in the PMO and department-wide. One consultant would design and facilitate portfolio process improvements through training and coaching including Agile and Lean principles. The other consultant would provide organizational change management to plan, manage, and influence the adoption of Agile and Lean project practices across the Department.

This request also includes reductions to the Department's MMIS Maintenance and Projects line item, keeping the request General Fund-neutral. This line item contains funding appropriated to the Department for contractor resources related to the ongoing maintenance of the MMIS and

development projects. Reductions to this line item are possible due to recent vendor rate and payment reductions to contractors paid out of this line item, including reductions to the current PMO contractor budget. Instead of using these reductions to renew the contract for provider field representatives and procure a new contract for project management, this request proposes to reutilize these reductions to hire FTE for these functions. This would provide the Department with more overall resources than a contracted solution would within the same amount of funding, due to the efficiencies of FTE described above.

The programs in this request are in Step 2 on the Office of State Planning and Budget (OSPB) continuum of evidence. For provider field representatives, the Department's objective is to assist providers with complex system, policy, or other issues and has output measures in the number of provider requests being submitted through the Department's website for assistance from a provider field representative. This indicates an ongoing demand for provider field representatives from providers and is expected to decrease as the interChange system stabilizes after the initial transition period. For the PMO, the Department's objective is to provide effective project management services for the Department's large portfolio of projects and is actively involved in independent assessment of the Department's project management capacity, utilizing frameworks such as Agile, Lean, and 4DX to continually assess and improve the program. The Department has output measures in the number of projects in-progress across the Department versus the number actively managed by the PMO, with the objective of increasing the number of projects managed by the PMO and building project management capacity among non-PMO staff to manage smaller projects.

If this request is not approved, the Department would determine if some level of provider field representatives and increased project management capacity could be accomplished through efficiencies, negotiated contract reductions, or reprioritization of other contractor work to procure contractor resources for these purposes. This would provide the Department with overall fewer resources than could be provided through the FTE proposed in this request. Equivalent contract resources would cost more than the available MMIS line item reductions, and thus would not be a General Fund-neutral solution like the proposed solution is, which repurposes the reductions to hire FTE. A contractor-based solution would prevent the Department from realizing the benefits of bringing the work in-house, including greater efficiency, greater line of sight into the work, better ability to rapidly adjust to changes in priorities, and the building of institutional knowledge and best practices. Additionally, the Department risks the loss of enhanced FFP without a strong project management framework that can navigate the complex and evolving federal requirements for Medicaid Enterprise modular system projects.

#### **Anticipated Outcomes:**

The Department seeks to improve all areas of operations including ongoing support to providers through provider field representatives and increasing the capacity of the PMO and creating a responsive PMO framework that can be responsible for strategic projects department-wide. The

Department anticipates that approving this request would provide great return to the State by developing efficiencies and institutional knowledge on complex subject matter without additional General Fund and with a reduction in total funds, cash funds, and federal funds. The Department anticipates this request would enhance the work of provider field representatives by using State FTE that can be more responsive to Department priorities and more ingrained in the Department culture and operations. The Department also anticipates this request would add much-needed project management capacity to the PMO and position the Department to successfully manage an expanding portfolio of projects that are critical to implementing policy changes and staying in compliance with state and federal regulations.

If approved, this request would directly support the goals and initiatives in the Department's FY 2020-21 Performance Plan.<sup>2</sup> Specifically, this request would support the Department's WIG of Medicaid Cost Control through implementing strategic initiatives, as well as its pillar of Operational Excellence as the resources requested would drive more compliant, efficient, and effective business practices. This request would also represent a direct implementation of the Department's core values of accountability, person-centeredness, and employee engagement. Furthermore, this request would align with the Governor's Office of Operations focus on process improvement and professional development.

#### Assumptions and Calculations:

Detailed calculations for this request are included on the attached appendix. The Department made the following assumptions.

#### **Provider Field Representatives**

The Department assumes the requested 6.0 FTE would start work on July 1, 2021 and be filled at the Administrator III level. The Department assumes these FTE would require travel costs of \$400 per month, per FTE. The Department assumes the requested staffing level and travel costs would be sufficient to address the ongoing rate of provider requests for assistance and conducting onsite or virtual site visits and training. The Department assumes 1.0 FTE would specifically assist providers to correctly submit applications related to Home and Community Based Services (HCBS) provider revalidations.

#### **Project Management Office**

The Department assumes that the requested 8.0 FTE would start work on July 1, 2021 and be filled at various classification levels. The Department assumes that the 1.0 FTE portfolio manager would be filled at the Project Manager II level, 5.0 FTE project managers would be filled at the Project Coordinator level. The Department assumes professional development costs of \$4,100 per year, per FTE and assumes all FTE would go through professional development training in FY 2021-22, but that only half would in FY 2022-23 and ongoing in the case of turnover and continued skill advancement. The

<sup>&</sup>lt;sup>2</sup> https://www.colorado.gov/hcpf/performance-plan

Department assumes that the requested staffing level would not be sufficient to cover all of the Department's project management needs; however, the Department assumes it would be sufficient to build a strong PMO framework and help to build capacity across the Department so non-PMO staff can be leveraged to manage smaller projects. Of the 5.0 FTE project managers, the Department assumes 2.0 FTE would be focused and trained in traditional project management principles, and 3.0 FTE would be focused and trained in Agile project management.

The Department assumes a federal financial participation of 50% for these positions and related costs. This gives the new PMO staff the flexibility to work on projects that are not related to Medicaid Enterprise Design, Development, and Implementation (DDI), and which are therefore not necessarily eligible for enhanced FFP. Project management work for Medicaid Enterprise DDI is generally eligible for 90% FFP and this is the rate used by current PMO staff. The new PMO staff would still be able to utilize 90% FFP for work related to Medicaid Enterprise DDI because the PMO utilizes time-tracking tools to track staff hours. This allows the enhanced FFP rate to be used for all hours worked on Medicaid Enterprise DDI projects, but the flexibility to work on other Department projects that are funded at 50% FFP.

Table 1.1
Summary by Line Item
FY 2021-22

	FY 2021-22									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	(1) Executive Director's Office; (A) General Administration; Personal Services	\$878,910	13.5	\$224,021	\$128,794	\$0	\$526,095	59.86%	Table 3; Sum of Salary, PERA, and Medicare	
В	(1) Executive Director's Office; (A) General Administration; Health, Life, and Dental	\$140,588	0.0	\$34,784	\$20,082	\$0	\$85,722	60.97%	Table 3, Health-Life-Dental	
C	(1) Executive Director's Office; (A) General Administration; Short-term Disability	\$1,330	0.0	\$339	\$194	\$0	\$797	59.92%	Table 3, STD	
D	(1) Executive Director's Office; (A) General Administration; S.B. 04-257 Amortization Equalization Disbursement	\$39,114	0.0	\$9,969	\$5,731	\$0	\$23,414	59.86%	Table 3, AED	
Е	(1) Executive Director's Office; (A) General Administration; S.B. 06-235 Supplemental Amortization Equalization	\$39,114	0.0	\$9,969	\$5,731	\$0	\$23,414	59.86%	Table 3, SAED	
F	(1) Executive Director's Office; (A) General Administration; Operating Expenses	\$140,742	0.0	\$34,442	\$19,921	\$0	\$86,379	61.37%	Sum of Table 3, Operating Expenses; Table 4, Row D; and Table 5.1, Row C	
G	(1) Executive Director's Office; (A) General Administration; General Professional Services and Special Projects	\$277,500	0.0	\$87,384	\$48,867	\$0	\$141,249	50.90%	Table 6, Row G	
Н	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; MMIS Maintenance and Projects	(\$2,546,263)	0.0	(\$400,908)	(\$250,929)	\$0	(\$1,894,426)	74.40%	Table 7, Sum of Rows A and C	
I	Total Request	(\$1,028,965)	13.5	\$0	(\$21,609)	\$0	(\$1,007,356)	NA	Sum of Rows A through H	

Table 1.2
Summary by Line Item
FV 2022-23 and Ongoing

	FY 2022-23 and Ongoing												
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations				
A	(1) Executive Director's Office; (A) General Administration; Personal Services	\$910,588	14.0	\$232,179	\$133,479	\$0	\$544,930	59.84%	Table 3; Sum of Salary, PERA, and Medicare				
В	(1) Executive Director's Office; (A) General Administration; Health, Life, and Dental	\$140,588	0.0	\$34,784	\$20,084	\$0	\$85,720	60.97%	Table 3, Health-Life-Dental				
С	(1) Executive Director's Office; (A) General Administration; Short-term Disability	\$1,378	0.0	\$351	\$201	\$0	\$826	59.94%	Table 3, STD				
D	(1) Executive Director's Office; (A) General Administration; S.B. 04-257 Amortization Equalization Disbursement	\$40,524	0.0	\$10,332	\$5,940	\$0	\$24,252	59.85%	Table 3, AED				
Е	(1) Executive Director's Office; (A) General Administration; S.B. 06-235 Supplemental Amortization Equalization	\$40,524	0.0	\$10,332	\$5,940	\$0	\$24,252	59.85%	Table 3, SAED				
F	(1) Executive Director's Office; (A) General Administration; Operating Expenses	\$58,500	0.0	\$12,988	\$7,624	\$0	\$37,888	64.77%	Sum of Table 3, Operating Expenses; Table 4, Row D; and Table 5.1, Row E				
G	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; MMIS Maintenance and Projects	(\$1,911,511)	0.0	(\$300,966)	(\$188,380)	\$0	(\$1,422,165)	74.40%	Table 7, Sum of Rows B and D				
Н	Total Request	(\$719,409)	14.0	\$0	(\$15,112)	\$0	(\$704,297)	NA	Sum of Rows A through G				

	Table 2.1													
	Summary by Initiative													
	FY 2021-22													
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations					
Prov	ider Field Representatives													
Α	FTE Costs	\$459,482	5.8	\$72,345	\$45,277	\$0	\$341,860	74.40%	Sum of Rows B through D					
В	FTE Salary, PERA, Medicare	\$334,989	0.0	\$52,744	\$33,011	\$0	\$249,234	74.40%	Table 3, Positions 1 through 6					
C	FTE AED, SAED, STD and HLD	\$90,575	0.0	\$14,261	\$8,924	\$0	\$67,390	74.40%	Table 3, Positions 1 through 6					
D	FTE Operating Expenses	\$33,918	0.0	\$5,340	\$3,342	\$0	\$25,236	74.40%	Table 3, Positions 1 through 6					
Е	Travel	\$28,800	0.0	\$4,534	\$2,838	\$0	\$21,428	74.40%	Table 4, Row D					
F	Contractor Cost Reductions	(\$488,282)	0.0	(\$76,879)	(\$48,115)	\$0	(\$363,288)	74.40%	Table 7, Row A					
G	Subtotal	\$0	5.8	\$0	\$0	\$0	\$0	NA	Sum of Rows A, E, and F					
Proj	ect Management Office													
Н	FTE Costs	\$718,716	7.7	\$226,317	\$126,562	\$0	\$365,837	50.90%	Sum of Rows I through K					
I	FTE Salary, PERA, Medicare	\$543,921	0.0	\$171,277	\$95,783	\$0	\$276,861	50.90%	Table 3, Positions 7 through 14					
J	FTE AED, SAED, STD and HLD	\$129,571	0.0	\$40,800	\$22,814	\$0	\$65,957	50.90%	Table 3, Positions 7 through 14					
K	FTE Operating Expenses	\$45,224	0.0	\$14,240	\$7,965	\$0	\$23,019	50.90%	Table 3, Positions 7 through 14					
								·						
L	Professional Development	\$32,800	0.0	\$10,328	\$5,776	\$0	\$16,696	50.90%	Table 5.1, Row C					
M	Portfolio Process Improvement Consulting	\$277,500	0.0	\$87,384	\$48,867	\$0	\$141,249	50.90%	Table 6, Row G					
N	Contractor Cost Reductions	(\$2,057,981)	0.0	(\$324,029)	(\$202,814)	\$0	(\$1,531,138)	74.40%	Table 7, Row C					
0	Subtotal	(\$1,028,965)	7.7	\$0	(\$21,609)	\$0	(\$1,007,356)	NA	Sum of Rows H, L, M, and N					
P	Total Request	(\$1,028,965)	13.5	\$0	(\$21,609)	\$0	(\$1,007,356)	NA	Sum of Rows G and O					

	Table 2.2 Summary by Initiative FY 2022-23 and Ongoing												
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations				
Prov	ovider Field Representatives												
Α	FTE Costs	\$443,861	6.0	\$69,885	\$43,743	\$0	\$330,233	74.40%	Sum of Rows B through D				
В	FTE Salary, PERA, Medicare	\$346,541	0.0	\$54,563	\$34,152	\$0	\$257,826	74.40%	Table 3, Positions 1 through 6				
C	FTE AED, SAED, STD and HLD	\$91,620	0.0	\$14,425	\$9,029	\$0	\$68,166	74.40%	Table 3, Positions 1 through 6				
D	FTE Operating Expenses	\$5,700	0.0	\$897	\$562	\$0	\$4,241	74.40%	Table 3, Positions 1 through 6				
Е	Travel	\$28,800	0.0	\$4,534	\$2,838	\$0	\$21,428	74.40%	Table 4, Row D				
F	Contractor Cost Reductions	(\$472,661)	0.0	(\$74,419)	(\$46,581)	\$0	(\$351,661)	74.40%	Table 7, Row B				
G	Subtotal	\$0	6.0	\$0	\$0	\$0	\$0	NA	Sum of Rows A, E, and F				
Proj	ect Management Office												
Н	FTE Costs	\$703,041	8.0	\$221,383	\$123,800	\$0	\$357,858	50.90%	Sum of Rows I through K				
I	FTE Salary, PERA, Medicare	\$564,047	0.0	\$177,616	\$99,327	\$0	\$287,104	50.90%	Table 3, Positions 7 through 14				
J	FTE AED, SAED, STD and HLD	\$131,394	0.0	\$41,374	\$23,136	\$0	\$66,884	50.90%	Table 3, Positions 7 through 14				
K	FTE Operating Expenses	\$7,600	0.0	\$2,393	\$1,337	\$0	\$3,870	50.92%	Table 3, Positions 7 through 14				
L	Professional Development	\$16,400	0.0	\$5,164	\$2,887	\$0	\$8,349		Table 5.1, Row E				
M	Contractor Cost Reductions	(\$1,438,850)	0.0	(\$226,547)	(\$141,799)	\$0	(\$1,070,504)	74.40%	Table 7, Row D				
N	Subtotal	(\$719,409)	8.0	\$0	(\$15,112)	\$0	(\$704,297)	NA	Sum of Rows H, L, and M				
0	Total Request	(\$719,409)	14.0	\$0	(\$15,112)	\$0	(\$704,297)	NA	Sum of Rows G and N				

#### Table 3 - FTE Calculation Assumptions:

**Operating Expenses** -- Base operating expenses are included per FTE for \$500 per year. In addition, for regular FTE, annual telephone costs assume base charges of \$450 per year.

Standard Capital Purchases -- Each additional employee necessitates the purchase of a Personal Computer (\$900), Office Suite Software (\$330), and office furniture (\$3,473).

General Fund FTE -- Beginning July 1, 2019, new employees will be paid on a bi-weekly pay schedule; therefore new full-time General Fund positions are reflected in Year 1 as 0.9615 FTE to account for the pay-date shift (25/26 weeks of pay). This applies to personal services costs only; operating costs are not subject to the pay-date shift.

penditure Detail		FY 2	2021-22	FY 2	2022-23
Personal Services:					
Classification Title	Biweekly Salary	FTE		FTE	
ADMINISTRATOR III	\$1,977	5.8	\$298,166	6.0	\$308,4
PERA			\$32,500		\$33,6
AED			\$14,908		\$15,4
SAED			\$14,908		\$15,4
Medicare			\$4,323		\$4,4
STD			\$507		\$5
Health-Life-Dental			\$60,252		\$60,2
Subtotal Positions 1-6, 5.8 FT		5.8	\$425,564	6.0	\$438,1
Classification Title	Biweekly Salary	FTE		FTE	
PROJECT MANAGER II	\$3,073	1.0	\$79,908	1.0	\$79,9
PERA			\$8,710		\$8,7
AED			\$3,995		\$3,9
SAED			\$3,995		\$3,9
Medicare			\$1,159		\$1,1
STD			\$136		\$1
Health-Life-Dental			\$10,042		\$10,0
Subtotal Position 7, 1.0 FTE		1.0	\$107,945	1.0	\$107,9
Classification Title	Biweekly Salary	FTE		FTE	
PROJECT MANAGER I	\$2,456	4.8	\$306,547	5.0	\$319,3
PERA			\$33,414		\$34,8
AED			\$15,327		\$15,9
SAED			\$15,327		\$15,9
Medicare			\$4,445		\$4,6
STD			\$521		\$5
Health-Life-Dental			\$50,210		\$50,2
Subtotal Positions 8-12, 5.0 F		4.8	\$425,791	5.0	\$441,4
Classification Title	Biweekly Salary	FTE	005.555	FTE	0400
PROJECT COORDINATOR	\$1,977	1.9	\$97,675	2.0	\$102,8
PERA AED			\$10,647		\$11,2 \$5,1
SAED			\$4,884		
Medicare			\$4,884 \$1,416		\$5,1 \$1,4
STD			\$1,416 \$166		\$1, <sup>2</sup> \$1
Health-Life-Dental			\$20,084		\$20,0
	DADIO	1.9		2.0	
Subtotal Positions 13-14, 2.0	r 1 L		\$139,756	2.0	\$146,0
ubtotal Personal Services		13.5	\$1,099,056	14.0	\$1,133,0
perating Expenses:		FTE		FTE	
Regular FTE Operating	\$500	14.0	\$7,000	14.0	\$7,0
Telephone Expenses	\$450	14.0	\$6,300	14.0	\$6,3
PC. One-Time	\$1,230	14.0	\$17,220	-	Ψ0,.
Office Furniture, One-Time	\$3,473	14.0	\$48,622	-	
ubtotal Operating Expenses			\$79,142		\$13,3
TAL REQUEST		13.5	\$1,178,198	14.0	\$1,146,9
TAL KEQUEST		13.3	<u>\$1,1/8,198</u>	14.0	<u>31,140,</u>

	Table 4											
	Annual Travel Costs for Provider Field Representatives											
Row	Item	Amount	Notes/Calculations									
Α	Average monthly travel cost per FTE	\$400	Department estimate									
В	Number of FTE	6.0	Table 3, Positions 1 through 6									
С	Months per year	12	Full year									
D	Total Cost	\$28,800	Row A* Row B * Row C									

	Table 5.1 Professional Development Costs										
Row	Item	Amount	Notes/Calculations								
A	Professional Development Cost Per Person	\$4,100	Table 5.2, Row H								
В	Number of People Trained in FY 2021-22	8	Table 3, Positions 7 through 14								
C	FY 2021-22 Total Cost	\$32,800	Row A x Row B								
D	Number of People Trained in FY 2022-23 and Ongoing	4	Row B / 2								
E	FY 2022-23 and Ongoing Total Cost	\$16,400	Row A x Row D								

	Table 5.2 Professional Development Cost per Person											
Row	Item	Amount	Notes/Calculations									
A	Kanban Fundamentals	\$400	Current rate for online or in-person training									
В	Lean Fundamentals	\$400	Current rate for online or in-person training									
С	Root Cause Analysis	\$400	Current rate for online or in-person training									
D	PMP Certification	\$400	Current rate for online or in-person training									
E	Scrum Workshop and Certification	\$1,000	Current rate for online or in-person training									
F	PMI-ACP Workshop and Certification	\$500	Current rate for online or in-person training									
G	Scaled Agilist Workshop and Certification	\$1,000	Current rate for online or in-person training									
Н	Total Cost	\$4,100	Sum of Rows A through G									

	Table 6 FY 2021-22 Portfolio Process Improvement Consulting											
Row	Row Item Amount Notes/Calculations											
Proc	Process Improvement (Agile/Lean)											
Α	Estimated hours of work	1,000	Department estimate									
В	Hourly rate	\$185	Rate for PMI-ACP and SAFe certified consultant									
C	Total Cost	\$185,000	Row A * Row B									
Orga	nizational Change Management											
D	Estimated hours of work	500	Department estimate									
Е	Hourly rate	\$185	Rate for PROSCI certified consultant									
F Total Cost \$92,500 Row D * Row E												
G	Grand Total	\$277,500	Sum of Rows C and F									

	Table 7 Contractor Cost Reductions													
Row	Item	Total Funds	General	Cash Funds	Reappropriated	Federal Funds	FFP	Notes/Calculations						
KOW	Item	Fund   Funds   Funds		reuerai ruiius	Rate	Notes/Calculations								
Prov	Provider Field Representatives													
A	FY 2021-22	(\$488,282)	(\$76,879)	(\$48,115)	\$0	(\$363,288)	74.40%	Reduction to MMIS Maintenance and Projects line item						
В	FY 2022-23 and Ongoing	(\$472,661)	(\$74,419)	(\$46,581)	\$0	(\$351,661)	74.40%	Reduction to MMIS Maintenance and Projects line item						
Proj	ect Management Office													
С	FY 2021-22	(\$2,057,981)	(\$324,029)	(\$202,814)	\$0	(\$1,531,138)	74.40%	Reduction to MMIS Maintenance and Projects line item						
D	FY 2022-23 and Ongoing	(\$1,438,850)	(\$226,547)	(\$141,799)	\$0	(\$1,070,504)	74.40%	Reduction to MMIS Maintenance and Projects line item						

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY 2021-22 Budget Cycle								
Request Title									
	R-11 Medicaid Funding for Connect for Health								
Dept. Approval By:	BC		Supplemental FY 2020-21						
OSPB Approval By:	Clothey Clark		Budget Amendment FY 2021-22						
		<u> </u>	Change Request FY 2021-22						

	_	FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$5,144,208	\$0	\$5,144,208	\$4,509,043	\$4,991,706
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$0	\$0	\$0	\$0	\$0
Impacted by Change Request	CF	\$1,790,457	\$0	\$1,790,457	\$2,007,893	\$2,197,811
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$3,353,751	\$0	\$3,353,751	\$2,501,150	\$2,793,895

Line Item Information	Fund _	FY 2020-21		FY 2021-22		FY 2022-23
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$669,757	\$0	\$669,757	(\$669,757)	(\$669,757)
01. Executive Director's Office, (C) Information	FTE	0.0	0.0	0.0	0.0	0.0
Technology Contracts and Projects, (1) Information Technology Contracts and Projects - Connect for Health Colorado Systems  01. Executive Director's Office, (D) Eligibility Determinations and Client Services, (1) Eligibility Determinations and Client Services - Connect for Health Colorado Eligibility Determination	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$122,690	\$0	\$122,690	(\$122,690)	(\$122,690)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$547,067	\$0	\$547,067	(\$547,067)	(\$547,067)
	Total	\$4,474,451	\$0	\$4,474,451	\$5,178,800	\$5,661,463
	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$1,667,767	\$0	\$1,667,767	\$2,130,583	\$2,320,501
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$2,806,684	\$0	\$2,806,684	\$3,048,217	\$3,340,962

	_	FY 202	20-21 F		021-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
			Auxiliary Data			
Requires Legislation?	NO					
Type of Request?	Department of He Financing Prioritiz	alth Care Policy and ed Request	Interagency Approval or Related Schedule 13s:		No Other Agency Imp	act

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-11** Request Detail: Medicaid Funding for Connect for Health

	Summary of I	<b>Funding Change fo</b>	or FY 2021-22	
	Tot	tals	Increment	al Change
	FY 2020-21 Appropriation	FY 2021-22 Base	FY 2021-22 Request	FY 2022-23 Request
Total Funds	\$5,144,208	\$5,144,208	\$4,509,043	\$4,991,706
FTE	0.0	0.0	0.0	0.0
General Fund	\$0	\$0	\$0	\$0
Cash Funds	\$1,790,457	\$1,790,457	\$2,007,893	\$2,197,811
Reappropriated Funds	\$0	\$0	\$0	\$0
Federal Funds	\$3,353,751	\$3,353,751	\$2,501,150	\$2,793,895

#### Summary of Request:

The Department requests increased spending authority of certified public expenditures (CPE) and federal funds in FY 2020-21 and ongoing to reimburse Connect for Health Colorado (C4HCO) for costs related to customer service and eligibility determination functions. C4HCO provides these services for applicants and clients eligible for Medicaid and the Children's Health Insurance Program ("CHP+"). Although the Department has received federal approval for the increased costs, current appropriation levels are not sufficient to cover all allowable costs for administration of Department programs. Unless additional spending authority is granted, reimbursement of federal funds would be limited to the current appropriations and C4HCO would have unreimbursed costs which may impair its operations. This represents less than a 1 percent increase to the Department's total budget.

This request involves no General Fund expenditures, and the cash funds reflect expenditures made by C4HCO. Approval of this request will maximize the drawdown of federal funds. This funding enables C4HCO to perform



important services for Coloradans who rely on C4HCO to obtain health insurance. The Department routinely monitors eligibility and customer service data and believes this program is Step 2 on the evidence continuum.

#### Current Program:

C4HCO assists individuals, families and small employers across Colorado to apply for health insurance and enroll in Qualified Health Plans. The Medicaid and CHP+ eligibility determination process is a fundamental component to C4HCO's operations and services provided to Coloradans because in order to be eligible for financial assistance through C4HCO, including Advanced Premium Tax Credits (APTC) or cost sharing reductions, federal law requires that a person be determined not eligible for Medicaid or CHP+.

The General Assembly approved funding in FY 2016-17 as requested in the Department's S-13, BA-13, "Medicaid Funding for Connect for Health Colorado." After the budget request was approved, the Department received federal approval of the cost allocation methodology for shared eligibility determination services as set forth in federal cost allocation principles (2 CFR § 200) through the federal Centers for Medicare and Medicaid Services (CMS), which outlines which costs are eligible for federal reimbursement. The state share is paid through certified public expenditures (CPE) paid by C4HCO. The spending authority has remained the same since FY 2016-17.

#### **Cost Allocation Requirements**

To create the cost allocation plan, the Department contracted with a nationally recognized expert in cost allocation who held regular meetings with Department and C4HCO staff, completed site visits and interviews with C4HCO staff and identified several cost centers which are included in this request. These cost centers include the customer service center, exchange assistance network non-county partners sites, and medical assistance site, and systems, including the New Eligibility System (NES) and marketplace system. Additionally, federal rules allow for a portion of general and administrative costs to be allocated proportionally to Medicaid and CHP+.

Procedures have been implemented at C4HCO to support proper Medicaid reimbursement for worker activities for those portions of C4HCO's efforts that support the Medicaid and CHP+ programs. The Department works in conjunction with C4HCO to operate a Random Moment Time Study (RMTS) for C4HCO Customer Service Center staff. An RMTS is a federally approved statistical sampling technique and is used to calculate quarterly statistics needed to determine the appropriate amount of C4HCO costs per cost center that are attributable to Medicaid and CHP+ administration.

#### Problem or Opportunity:

There is a mismatch in the amount of funding appropriated for reimbursing C4HCO costs and the actual costs incurred for administering Department programs. In the winter of FY 2019-20, costs reports were received for FY 2018-19, which showed that reimbursable Medicaid and CHP+ costs were higher than the spending authority in the budget. The Department was able to fully reimburse costs for FY 2018-19 using a portion of the FY 2019-20 spending authority because C4HCO is always paid well past the quarter end date due to the complicated cost reconciliation process

required. Without additional spending authority, the Department would continue to need to use spending authority from future years to fully reimburse the federal share of costs for administering its programs, which could lead to payment delays or require payments to be reduced if spending authority is not available. Because the state share is certified public expenditure (CPE), no state funds are required to draw down additional federal match.

#### Proposed Solution:

The Department requests \$4,049,364 total funds, including \$0 General Fund in FY 2020-21 and \$4,509,043 total funds, including \$0 General Fund in FY 2021-22 and \$4,991,706 total funds, including \$0 General Fund and in FY 2022-23 and \$5,498,502 total funds, including \$0 General Fund in FY 2023-24 and future years. The requested funding would be used to reimburse C4HCO the federal share of their costs associated with administering Department programs. The Department received approval for \$6,806,208 total funds through an interim supplemental budget adjustment in FY 2020-21 to cover increased costs in FY 2018-19 and FY 2019-20, which will allow the Department to fully reimburse FY 2019-20 costs in the first half of FY 2020-21 without an overexpenditure. This request also includes a supplemental impact for FY 2020-21 to account for increased costs in the current year.

#### Anticipated Outcomes:

This request links to the Department's Performance Plan; by providing customer service and instilling a person- and family-centered approach to strengthen client experience by ensuring that the no wrong door approach to eligibility determination can be sustained by providing funding to C4HCO for their administrative work related to Department programs.

If this request is not approved, the Department may need to reduce or delay payment to C4HCO as it would not be able to fully draw federal funds for the Medicaid and CHP+ eligibility determination work that is currently being done by C4HCO. As a result, C4HCO would inappropriately absorb these costs within its existing revenue.

This request falls on Step 2 of the evidence continuum. The Department measures performance of C4HCO to assess outcomes through contract management and oversight, reviewing eligibility and customer service data pre and post open enrollment periods, and on an ongoing basis.

#### Assumptions and Calculations:

Detailed calculations can be found in the appendix.

To estimate costs that could be attributed to Medicaid and CHP+, the request uses FY 2018-19 Medicaid and CHP+ costs, with a 5% inflationary increase in each year to ensure funding is available to cover costs as they rise. As Medicaid and CHP+ caseload is rising due the current economic downturn, it is likely that C4HCO costs related to administering Department programs

will continue to rise. This estimate includes a blended match rate across 50%, 75% and CHP+ match rate based on FY 2018-19 actual cost allocation.

# Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The request meets supplemental criteria because new data resulting in substantive changes in funding needs was received in FY 2019-20 which showed that additional spending authority was needed to fully reimburse C4HCO for the federal share of costs related to administering Department programs.

Table 1.1
Summary by Line Item
EV 2020-21

		1 1 2020 21									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds (1)	Reappropriated Funds	Federal Funds	Notes/Calculations			
A	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	0.0	\$0	(\$122,690)	\$0	(\$547,067)	Table 3.1.H			
В	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$4,719,121	0.0	\$0	\$1,949,709	\$0	\$2,769,412	Table 3.1.I			
C	Total Request	\$4,049,364	0.0	\$0	\$1,827,019	\$0	\$2,222,345	Row A + Row B			
(1)	<u> </u>										

<sup>(1)</sup> This amount represents public funds certified as expenditures incurred by Connect for Health Colorado that are eligible for federal financial participation under the Medicaid program.

#### Table 1.1

#### **Summary by Line Item**

FY 2021-22

F	Row	Line Item	Total Funds	FTE	General Fund	Cash Funds (1)	Reappropriated Funds	Federal Funds	Notes/Calculations
	А	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	0.0	\$0	(\$122,690)	\$0	(\$547,067)	Table 3.2.G
	В	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$5,178,800	0.0	\$0	\$2,130,583	\$0	\$3,048,217	Table 3.2.H
L	C	Total Request	\$4,509,043	0.0	\$0	\$2,007,893	\$0	\$2,501,150	Row A + Row B

<sup>(1)</sup> This amount represents public funds certified as expenditures incurred by Connect for Health Colorado that are eligible for federal financial participation under the Medicaid program.

#### Table 1.2

#### **Summary by Line Item**

FY 2022-23

Ro	w Line Item	Total Funds	FTE	General Fund	Cash Funds (1)	Reappropriated Funds	Federal Funds	Notes/Calculations
Α	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	0.0	\$0	(\$122,690)	\$0	(\$547,067)	Table 3.3.G
Е	(1) Executive Director's Office (D) Eligibility  Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$5,661,463	0.0	\$0	\$2,320,501	\$0	\$3,340,962	Table 3.3.H
(	Total Request	\$4,991,706	0.0	\$0	\$2,197,811	\$0	\$2,793,895	Row A + Row B

<sup>(1)</sup> This amount represents public funds certified as expenditures incurred by Connect for Health Colorado that are eligible for federal financial participation under the Medicaid program.

#### Table 1.3

#### **Summary by Line Item**

FY 2023-24

Row	Line Item	Total Funds	FTE	General Fund	Cash Funds (1)	Reappropriated Funds	Federal Funds	Notes/Calculations		
Α	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	0.0	\$0	(\$122,690)	\$0	(\$547,067)	Table 3.4.G		
В	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$6,168,259	0.0	\$0	\$2,519,914	\$0	\$3,648,345	Table 3.4.H		
C	Total Request	\$5,498,502	0.0	\$0	\$2,397,224	\$0	\$3,101,278	Row A + Row B		
(1) Th	This amount represents public funds certified as expenditures incurred by Connect for Health Colorado that are eligible for federal financial participation under the Medicaid program.									

#### R-11 Medicaid Funding for Connect for Health Colorado Appendix A: Assumptions and Calculations

				Table 2	2.1						
				Summary by	Initiative						
	<del>_</del>			FY 2020	0-21						
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations			
A	Funding for Current Year Costs	\$4,049,364	0.0	\$0	\$1,827,019	\$0		Table 3.1.K			
В	Total Request	\$4,049,364	0.0	\$0	\$1,827,019	\$0	\$2,222,345	Row A			
				Table 2							
				Summary by							
			1	FY 2021	1-22	D 1.1					
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations			
				\$0	\$2,007,893	\$0	\$2.501.150	Table 3.2.I			
	Funding for Current Year Costs	\$4,509,043	0.0	7 -	. , ,						
	Funding for Current Year Costs  Total Request	\$4,509,043 \$4,509,043	0.0	<b>\$0</b>	\$2,007,893	\$0	\$2,501,150				
				Table 2	\$2,007,893 2.2 Initiative						
				\$0 Table 2	\$2,007,893 2.2 Initiative	\$0					
В				Table 2	\$2,007,893 2.2 Initiative						
B	Total Request	\$4,509,043	0.0	Table 2 Summary by FY 2022	\$2,007,893 2.2 Initiative 2-23	\$0 Reappropriated	\$2,501,150 Federal Funds	Row A			
B Row A	Total Request  Item	\$4,509,043 Total Funds	0.0	Table Summary by FY 2022	\$2,007,893  2.2 Initiative 2-23 Cash Funds	Reappropriated	\$2,501,150 Federal Funds	Row A  Notes/Calculations  Table 3.3.I			
B Row A	Total Request  Item  Funding for C4HCO Costs	\$4,509,043  Total Funds \$4,991,706	FTE 0.0	Table 2 Summary by FY 2022 General Fund	\$2,007,893  2.2 Initiative 2-23 Cash Funds \$2,197,811	Reappropriated Funds \$0	\$2,501,150 Federal Funds \$2,793,895	Row A  Notes/Calculations  Table 3.3.I			
B Row A	Total Request  Item  Funding for C4HCO Costs	\$4,509,043  Total Funds \$4,991,706	FTE 0.0	Table Summary by FY 2022 General Fund \$0 \$0	\$2,007,893  2.2 Initiative 2-23  Cash Funds \$2,197,811 \$2,197,811	Reappropriated Funds \$0	\$2,501,150 Federal Funds \$2,793,895	Row A  Notes/Calculations  Table 3.3.I			
B Row A	Total Request  Item  Funding for C4HCO Costs	\$4,509,043  Total Funds \$4,991,706	FTE 0.0	Table 2 Summary by FY 2022 General Fund \$0 \$0	\$2,007,893  2.2 Initiative 2-23  Cash Funds \$2,197,811 \$2,197,811	Reappropriated Funds \$0	\$2,501,150 Federal Funds \$2,793,895	Row A  Notes/Calculations  Table 3.3.I			
B Row A	Total Request  Item  Funding for C4HCO Costs	\$4,509,043  Total Funds \$4,991,706	FTE 0.0	Table 2 Summary by FY 2022 General Fund \$0 \$0 Table 2 Summary by	\$2,007,893  2.2 Initiative 2-23  Cash Funds \$2,197,811 \$2,197,811  2.3 Initiative	Reappropriated Funds \$0	\$2,501,150 Federal Funds \$2,793,895	Row A  Notes/Calculations  Table 3.3.I			
B Row A	Item Funding for C4HCO Costs Total Request	\$4,509,043  Total Funds \$4,991,706	FTE 0.0	Table 2 Summary by FY 2022 General Fund \$0 \$0	\$2,007,893  2.2 Initiative 2-23  Cash Funds \$2,197,811 \$2,197,811  2.3 Initiative	Reappropriated Funds \$0	\$2,501,150 Federal Funds \$2,793,895	Row A  Notes/Calculations  Table 3.3.I			
Row Row	Item Funding for C4HCO Costs Total Request	Total Funds \$4,991,706 \$4,991,706	FTE 0.0 0.0	Table Summary by FY 2022 General Fund \$0 \$0 Table Summary by FY 2023	\$2,007,893  2.2 Initiative 2-23 Cash Funds \$2,197,811 \$2,197,811  2.3 Initiative 3-24	Reappropriated Funds \$0 \$0	\$2,501,150 Federal Funds \$2,793,895 \$2,793,895	Notes/Calculations Table 3.3.I Row A  Notes/Calculations			

		_	Table 3.1			
		Lor	g Bill Adjustments FY 2020-21			
		Cur	rent Appropriation	1		
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source
A	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$669,757	\$0	\$122,690	\$547,067	HB 20-1360
В	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$4,474,451	\$0	\$1,667,767	\$2,806,684	HB 20-1360
С	Total	\$5,144,208	\$0	\$1,790,457	\$3,353,751	Row A + Row B
		Requ	ested Appropriation	n		
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source
D	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$0	\$0	\$0	\$0	Combine line items- remove systems line
E	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$9,193,572	\$0	\$3,617,476	\$5,576,096	Row F
F	Funding to Cover FY 2020-21 Costs	\$9,193,572	\$0	\$3,617,476	\$5,576,096	Table 4.1.C
G	Total	\$9,193,572	\$0	\$3,617,476	\$5,576,096	Row D + Row E
		Inci	remental Difference	2		
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source
Н	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	\$0	(\$122,690)	(\$547,067)	Row F - Row A
I	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$4,719,121	\$0	\$1,949,709	\$2,769,412	Row J
	Funding to Cover FY 2020-21 Costs	\$4,719,121	\$0	\$1,949,709	\$2,769,412	Row F - Row B
J		\$4,049,364	\$0	\$1,827,019	62 222 245	Row H + Row I

	Table 3.2										
	Long Bill Adjustments FY 2021-22										
	FY 2021-22  Current Appropriation										
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source					
A	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$669,757	\$0	\$122,690	\$547,067	HB 20-1360					
В	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$4,474,451	\$0	\$1,667,767	\$2,806,684	HB 20-1360					
С	Total	\$5,144,208	\$0	\$1,790,457	\$3,353,751	Row A + Row B					
	Requested Appropriation										
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source					
D	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$0	\$0	\$0	\$0	Combine line items- remove systems line					
Е	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$9,653,251	\$0	\$3,798,350	\$5,854,901	Table 4.1.F					
F	Total	\$9,653,251	\$0	\$3,798,350	\$5,854,901	Row D + Row E					
		Inc	remental Difference	e							
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source					
G	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	\$0	(\$122,690)	(\$547,067)	Row D - Row A					
Н	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$5,178,800	\$0	\$2,130,583	\$3,048,217	Row E - Row B					
I	Difference	\$4,509,043	\$0	\$2,007,893	\$2,501,150	Row G + Row H					

	Table 3.3									
		Loi	ng Bill Adjustments							
	FY 2022-23 Current Appropriation									
Row	Row Item Total Funds General Fund Cash Funds (CPE) Federal Funds Source									
A	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$669,757	\$0	\$122,690		HB 20-1360				
В	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$4,474,451	\$0	\$1,667,767	\$2,806,684	HB 20-1360				
С	Total	\$5,144,208	\$0	\$1,790,457	\$3,353,751	Row A + Row B				
	Requested Appropriation									
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source				
D	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$0	\$0	\$0	\$0	Combine line items- remove systems line				
E	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$10,135,914	\$0	\$3,988,268	\$6,147,646	Table 4.1.G				
F	Total	\$10,135,914	\$0	\$3,988,268	\$6,147,646	Row D + Row E				
		Inc	remental Difference	2						
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source				
G	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	\$0	(\$122,690)	(\$547,067)	Row D - Row A				
Н	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$5,661,463	\$0	\$2,320,501		Row E - Row B				
I	Difference	\$4,991,706	\$0	\$2,197,811	\$2,793,895	Row G + Row H				

	Table 3.4 Long Bill Adjustments FY 2023-24										
	Current Appropriation										
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source					
A	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$669,757	\$0	\$122,690	\$547,067	НВ 20-1360					
В	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$4,474,451	\$0	\$1,667,767	\$2,806,684	HB 20-1360					
C	Total	\$5,144,208	\$0	\$1,790,457	\$3,353,751	Row A + Row B					
	Requested Appropriation										
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source					
D	(1) Executive Director's Office (C) Connect for Health Colorado Systems	\$0	\$0	\$0	\$0	Combine line items- remove systems line					
E	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$10,642,710	\$0	\$4,187,681	\$6,455,029	Table 4.1 Row H					
F	Total	\$10,642,710	\$0	\$4,187,681	\$6,455,029	Row D + Row E					
		Inc	remental Difference	e							
Row	Item	Total Funds	General Fund	Cash Funds (CPE)	Federal Funds	Source					
G	(1) Executive Director's Office (C) Connect for Health Colorado Systems	(\$669,757)	\$0	(\$122,690)	(\$547,067)	Row D - Row A					
Н	(1) Executive Director's Office (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determinations	\$6,168,259	\$0	\$2,519,914	\$3,648,345	Row E - Row A					
I	Difference	\$5,498,502	\$0	\$2,397,224	\$3,101,278	Row G + Row H					

#### R-11 Medicaid Funding for Connect for Health Colorado Appendix A: Assumptions and Calculations

	Table 4.1 Medicaid and CHP+ Cost Estimates									
Row	Item	Total Funds	Cash Funds (CPE)	Federal Funds	Source/Calculation					
A	FY 2018-19 Medicaid and CHP+ Program Costs	\$8,338,841	\$3,281,157	\$5,057,684	C4HCO Cost Reports FY 2018- 19, paid in FY 2019-20. Blended match rates.					
В	FY 2019-20 Medicaid and CHP+ Program Costs	\$8,755,783	\$3,445,215	\$5,310,568	Estimate: 5% increase from FY 2018-19					
C	FY 2020-21 Medicaid and CHP+ Program Costs	\$9,193,572	\$3,617,476	\$5,576,096	Estimate: 5% increase from FY 2019-20					
D	FY 2021-22 Medicaid and CHP+ Program Costs	\$9,653,251	\$3,798,350	\$5,854,901	Estimate: 5% increase from FY 2020-21					
Е	FY 2022-23 Medicaid and CHP+ Program Costs	\$10,135,914	\$3,988,268	\$6,147,646	Estimate: 5% increase from FY 2021-22					
F	FY 2023-24 Medicaid and CHP+ Program Costs	\$10,642,710	\$4,187,681	\$6,455,029	Estimate: 5% increase from FY 2022-23					

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request for The FY 2021-22 Budget Cycle								
Request Title								
R-12 ARRA-HITECH Funding Transition								
Dept. Approval By:		Supplemental FY 2020-21						
OSPB Approval By: Ashly Carro		Budget Amendment FY 2021-22						
	<u>x</u>	Change Request FY 2021-22						

		FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$80,830,771	\$0	\$83,832,069	\$0	\$0
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$11,619,323	\$0	\$12,406,463	\$0	\$0
Impacted by Change Request	CF	\$6,312,421	\$0	\$6,757,984	\$0	\$0
	RF	\$12,204	\$0	\$12,204	\$0	\$0
	FF	\$62,886,823	\$0	\$64,655,418	\$0	\$0

		FY 202	0-21	FY 20:	FY 2022-23		
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$73,227,142	\$0	\$76,228,440	\$6,653,490	\$6,653,490	
01. Executive Director's Office, (C) Information	FTE	0.0	0.0	0.0	0.0	0.0	
Technology Contracts	GF	\$9,703,222	\$0	\$10,490,362	\$1,441,032	\$1,441,032	
and Projects, (1) Information Technology	CF	\$6,312,421	\$0	\$6,757,984	\$0	\$0	
Contracts and Projects - MMIS Maintenance and	RF	\$12,204	\$0	\$12,204	\$0	\$0	
Projects	FF	\$57,199,295	\$0	\$58,967,890	\$5,212,458	\$5,212,458	
	Total	\$7,603,629	\$0	\$7,603,629	(\$6,653,490)	(\$6,653,490)	
01. Executive Director's Office, (C) Information	FTE	0.0	0.0	0.0	0.0	0.0	
Technology Contracts	GF	\$1,916,101	\$0	\$1,916,101	(\$1,441,032)	(\$1,441,032)	
and Projects, (1) Information Technology	CF	\$0	\$0	\$0	\$0	\$0	
Contracts and Projects - Health Information	RF	\$0	\$0	\$0	\$0	\$0	
Exchange Maintenance and Projects	FF	\$5,687,528	\$0	\$5,687,528	(\$5,212,458)	(\$5,212,458)	

	_	FY 202	20-21	FY 2	021-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
			Auxiliary Data			
Requires Legislation?	NO					
Type of Request?	Department of He Financing Prioritiz	alth Care Policy and ed Request	Interagency Related Sch	Approval or edule 13s:	No Other Agency Imp	act

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-12** Request Detail: ARRA-HITECH Funding Transition

	Summary of Funding Change for FY 2021-22										
	Tot	tals	Incremental Change								
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23							
	Appropriation	Base	Request	Request							
Total Funds	\$80,830,771	\$83,832,069	\$0	\$0							
FTE	0.0	0.0	0.0	0.0							
General Fund	\$11,619,323	\$12,406,463	\$0	\$0							
Cash Funds	\$6,312,421	\$6,757,984	\$0	\$0							
Reappropriated Funds	\$12,204	\$12,204	\$0	\$0							
Federal Funds	\$62,886,823	\$64,655,418	\$0	\$0							

#### Summary of Request:

The Department requests to refinance funding appropriated to the Health Information Exchange Maintenance and Projects line item due to the impending expiration of federal matching funds authorized under the federal Health Information Technology for Economic and Clinical Health Act, which was part of the American Recovery and Reinvestment Act of 2009 (ARRA-HITECH). The request is budget neutral and serves as a technical request to properly align funding with an alternate federal funding mechanism for existing activities. The request would move \$6,653,490 total funds from the Health Information Exchange Maintenance and Projects line item to the Medicaid Management Information System Maintenance and Projects line item. With approval of this request, the Department would continue to build on the infrastructure funded through HITECH, while advancing the flow and availability of health care data and connecting additional provider to the health information exchanges. Additionally, the request would streamline the Department's management of IT related budget items by eliminating the unnecessary appropriation and moving the funding to a more appropriate line item.

The Department believes this request aligns with Step 2 on the evidence continuum, as the Department collects data on program outputs, such as the number of providers impacted by the program and the types of technology enhancements provided.



#### Current Program:

The passage of ARRA-HITECH created a distribution method for federal funds to incentivize eligible providers for the adoption and meaningful use of Certified Electronic Health Record Technology. ARRA-HITECH provided 100% federal funding to make incentive payments to providers, while also providing states with 90% federal funding to develop and manage the infrastructure needed to make EHR information widely accessible for improved care delivery, coordination and health outcomes data collection.

Through HITECH funding, the Department has overseen the connection of over 300 clinics and 90 hospitals EHRs to Colorado's Health Information Exchange (HIE) organizations - Colorado Regional Health Information Organization (CORHIO) and Quality Health Network (QHN) on the western slope - which cover over 6,300 providers and over 6.5 million patients (including out-of-state visitors).

The Department invests in HIE infrastructure that allows Medicaid providers and hospitals to securely connect their individual electronic health record (EHR) systems with other systems through a health information exchange (HIE) network. This allows for member data stored in the provider's EHR to be quickly retrieved and shared with other health care providers within the HIE network when appropriate. It enables health plans serving Medicaid to enhance their care coordination efforts, improve member experiences, make better-informed care decisions, and identify new opportunities for preventative care.

All federal funding related to the HITECH programs received approval through the HITECH division within the Centers for Medicare and Medicaid Services (CMS). Therefore, the Department must submit and maintain a HITECH Advanced Planning Document (APD) to secure the enhanced federal match. The Department has a specific Long Bill line item to track funding related to ARRA-HITECH and all approved funds flow through that appropriation.

#### Problem or Opportunity:

The ARRA-HITECH funding was authorized temporarily and enhanced federal funding is set to expire on September 30, 2021. As a result, the Department will no longer receive ARRA-HITECH funding to support and sustain the state's Health Information Exchange (HIE) infrastructure. Without this source of federal funding, the Department needs to find an alternative financing mechanism to continue to connect new providers and support current providers and their connections to the HIEs. Per CMS guidance, state Medicaid programs nationally are required to demonstrate sustainable, re-useable HIE solutions to be eligible for Medicaid Enterprise Systems (MES) funding<sup>1</sup>. States may leverage the Medicaid Enterprise System and further develop software or services created under the HITECH Act to support other business processes in, or connected to, the Medicaid Enterprise.

<sup>&</sup>lt;sup>1</sup> https://www.medicaid.gov/federal-policy-guidance/downloads/smd18005.pdf

CMS has encouraged states to incorporate HIE related projects into the Medicaid Enterprise when appropriate. For example, CMS issued State Medicaid Director (SMD) letter 18-007<sup>2</sup> regarding provider directories. CMS references a section of the 21st Century Cures Act (section 5006) requiring states who meet certain fee-for-service criteria to publish a directory of physicians with some required and optional data elements outlined in the rule. The letter encourages states to consider how these provider directories can support broader initiatives related to reducing provider burden, improve interoperability, and support the MyHealthEData<sup>3</sup> initiative.

#### **Proposed Solution:**

The Department requests to refinance funding appropriated to the Health Information Technology Projects line item due to the impending expiration of federal matching funds authorized under the federal Health Information Technology for Economic and Clinical Health Act, which was part of the American Recovery and Reinvestment Act of 2009 (ARRA-HITECH) to the Medicaid Management Information System Maintenance and Projects line item. The Department requests to transfer the full appropriation because the fund splits in the HIT Projects line item are appropriated at 75% federal financial participation (FFP), which is the same as the federal match these projects would get in the MMIS line item. Because the funding would be used for a qualifying activity under the MMIS APD, the Department proposes to eliminate unnecessary line items.

Through HITECH funding and State appropriations, the Department has been able to connect over 300 clinics and 90 hospitals EHRs to Colorado's HIEs. The Department's investment in connecting EHRs to HIE infrastructure enables clinical data to be available to providers at critical times, leading to improved care coordination and patient care. Also, EHR connections improve public health agencies' data capacity and improve public health reporting. Specifically, these connections expand on care coordination through event notifications on patient admissions and discharges. These connections allow for timely notification of critical data such as COVID-19 laboratory results.

While the Department has been successful at connecting a significant number of hospitals and other providers through the HITECH program, the State's HIEs need additional time and funding to implement providers not yet connected, including rural hospitals and clinics. The funding would be used to continue the current scope of connecting providers to the HIEs. Additionally, the Department would continue to promote connectivity between providers and the HIEs but expand to other provider types. The Department's focus to date has been to connect hospitals and clinics serving Medicaid members. While continuing to connect these facility and provider types, the Department would also begin expanding to behavioral health and rural providers. In addition to

<sup>&</sup>lt;sup>2</sup> State Medicaid Director (SMD) letter 18-007

<sup>&</sup>lt;sup>3</sup>https://www.cms.gov/newsroom/press-releases/trump-administration-announces-myhealthedata-initiative-put-patients-center-us-healthcare-system

facilitating the connection of these providers the funding would also be used to maintain provider EHR connections to the HIEs at a lower cost to those providers.

If the request is not approved and funding for connecting providers to the State's HIEs is eliminated, the Department would be reducing the return from millions of dollars in State appropriations to connect these providers to HIEs and build and define the infrastructure to guide future connections. Further, the State would regress in the goal of making health care data widely available to inform critical health care decisions.

The programs impacted by this request would fall under Step 2: Identify Outputs of the Evidence Continuum. The impacted programs work to connect providers with the HIEs to facilitate the exchange of health care data. The Department has been working on this program for several years and is evaluating the programs quality and processes. Data on the number of providers and their connections to the HIEs are being collected and use to drive program enhancements.

#### **Anticipated Outcomes:**

With approval of this request, the Department would continue to build on the infrastructure funded through HITECH, while advancing the flow and availability of health care data and connecting additional provider to the HIEs. Additionally, the request would streamline the Department's management of IT related budget items by eliminating the unnecessary appropriation and moving the funding to a more appropriate line item.

The request ties to the Department's Wildly Important Goals of Care Access and Customer Service, and Medicaid Cost Control. With EHR information flowing to the Medicaid enterprise, health plans serving Medicaid are better able to intervene and manage members' health prior to providers billing for services rendered. Reductions in hospital readmissions due to the proliferation of EHR information results in lower Medicaid health care costs and ultimately, more affordable care for all Coloradans. The request also ties to the Department's strategic pillar of Operational Excellence. By aligning and condensing funding into the most appropriate line items, the Department would be able to better manage administrative funding for IT projects that receive federal funding through the MMIS APD.

#### Assumptions and Calculations:

The Department assumes that projects currently funded under ARRA-HITECH APD through September 30, 2021 would subsequently be approved under the MMIS APD. This would allow the work to continue, with the only change being the federal funding mechanism. The Department would submit an APD update to CMS by July 2021 requesting the funding under the MMIS APD to begin October 1, 2021. The Department assumes approval would be granted prior to the expiration of the ARRA-HITECH funding and there would be no gap in federal funding. The Department would continue to leverage the enhanced 90% FFP through the first quarter of

FY 2021-22 and beyond when appropriate, before transitioning to 75% FFP for costs that do not qualify at the 90% match.

#### R-12 ARRA-HITECH Funding Transition Appendix A: Assumptions and Calculations

#### Table 1.1 Summary by Line Item FY 2021-22

	r 1 2021-22									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
_	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; Medicaid Management Information Systems Maintenance and Projects	\$6,653,490	0.0	\$1,441,032	\$0	\$0	\$5,212,458	78.34%	Current total fund appropriation with new cost allocation methodology	
В	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; Health Information Exchange Maintenance and Projects	(\$6,653,490)	0.0	(\$1,441,032)	\$0	\$0	(\$5,212,458)	78.34%	Current HIT appropriation	
C	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	NA	Row A + Row B	

#### Table 1.2 Summary by Line Item FV 2022-23

		FY 2022-23								
R	.ow	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
	A	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; Medicaid Management Information Systems Maintenance and Projects	\$6,653,490	0.0	\$1,441,032	\$0	\$0	\$5,212,458	78.34%	Current total fund appropriation with new cost allocation methodology
	В	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; Health Information Exchange Maintenance and Projects	(\$6,653,490)	0.0	(\$1,441,032)	\$0	\$0	(\$5,212,458)	78.34%	Current HIT appropriation
	C	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	NA	Row A + Row B

#### R-12 ARRA-HITECH Funding Transition Appendix A: Assumptions and Calculations

Table 2.1						
Summary by Initiative						
FY 2021-22						

	F I 2021-22								
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Current HIT Appropriation	\$7,603,629	0.0	\$1,916,101	\$0	\$0	\$5,687,528	74.80%	FY 2020-21 Long Bill Appropriation
В	Change from FY 2021-22 R-9 "Patient Access and Interoperability Rule Compliance"	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	FY 2021-22 R-9 "Patient Access and Interoperability Rule Compliance"
C	Remaining HIT Appropriation	\$6,653,490	0.0	\$1,441,032	\$0	\$0	\$5,212,458	78.34%	Row A + Row B
D	Transfer HIT Appropriation to MMIS Appropriation	(\$6,653,490)	0.0	(\$1,441,032)	\$0	\$0	(\$5,212,458)	78.34%	Row C * -1
E	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	NA	Row C + Row D

## Table 2.2 Summary by Initiative

	FY 2022-23								
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Current HIT Appropriation	\$7,603,629	0.0	\$1,916,101	\$0	\$0	\$5,687,528	74.80%	FY 2020-21 Long Bill Appropriation
I B	Change from FY 2021-22 R-9 "Patient Access and Interoperability Rule Compliance"	(\$950,139)	0.0	(\$475,069)	\$0	\$0	(\$475,070)	50.00%	FY 2021-22 R-9 "Patient Access and Interoperability Rule Compliance"
С	Remaining HIT Appropriation	\$6,653,490	0.0	\$1,441,032	\$0	\$0	\$5,212,458	78.34%	Row A + Row B
D	Transfer HIT Appropriation to MMIS Appropriation	(\$6,653,490)	0.0	(\$1,441,032)	\$0	\$0	(\$5,212,458)	78.34%	Row C * -1
E	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	NA	Row C + Row D

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY 2021-22 Budget Cycle								
Request Title									
	R-13 Funding for Family Medicine Reside	ency Training Programs							
Dept. Approval By:	BC_		Supplemental FY 2020-21						
OSPB Approval By:	askly Clark		Budget Amendment FY 2021-22						
		<u>x</u>	Change Request FY 2021-22						

		FY 202	20-21	FY 20	FY 2021-22				
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation			
	Total	\$0	\$0	\$0	\$1,208,936	\$1,208,936			
	FTE	0.0	0.0	0.0	0.0	0.0			
Total of All Line Items	GF	\$0	\$0	\$0	\$379,468	\$379,468			
Impacted by Change Request	CF	\$0	\$0	\$0	\$0	\$0			
	RF	\$0	\$0	\$0	\$225,000	\$225,000			
	FF	\$0	\$0	\$0	\$604,468	\$604,468			

	_	FY 202	20-21	FY 20	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$0	\$0	\$0	\$1,208,936	\$1,208,936
06. Other Medical	FTE	0.0	0.0	0.0	0.0	0.0
Services, (A) Other Medical Services, (1)	GF	\$0	\$0	\$0	\$379,468	\$379,468
Other Medical Services -	CF	\$0	\$0	\$0	\$0	\$0
Teaching Hospital University of Colorado	RF	\$0	\$0	\$0	\$225,000	\$225,000
Hospital	FF	\$0	\$0	\$0	\$604,468	\$604,468

Auxiliary Data									
Requires Legislation?	NO								
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact						

FY 2021-22 Funding Request

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-13** Request Detail: Funding for Family Medicine Residency Training Programs

	Summary of I	<b>Funding Change fo</b>	or FY 2021-22			
	Tot	tals	<b>Incremental Change</b>			
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23		
	Appropriation	Base	Request	Request		
Total Funds	\$0	\$0	\$1,208,936	\$1,208,936		
FTE	0.0	0.0	0.0	0.0		
General Fund	\$0	\$0	\$379,468	\$379,468		
Cash Funds	\$0	\$0	\$0	\$0		
Reappropriated Funds	\$0	\$0	\$225,000	\$225,000		
Federal Funds	\$0	\$0	\$604,468	\$604,468		

#### Summary of Request:

The Department requests to restore funding to the University of Colorado Family Medicine Residency, which was eliminated for FY 2020-21 as part of budget balancing. With the funding restored, the resident physicians at the University of Colorado Family Medicine Residency program, in conjunction with the nine other Commission on Family Medicine residency programs, would continue to contribute to providing primary care services to over 106,000 Coloradans annually. The Department's request requires a supplemental appropriation in FY 2020-21, and ongoing appropriations for FY 2021-22 and future years.

This request represents an increase of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation.

Studies have found that family medicine residency programs have beneficial impacts on workforce development and retention. The Department believes that the evidence on this program is aligned with Step 4 on the evidence continuum.



#### Current Program:

The Colorado Commission on Family Medicine (COFM) exists to help assure access to primary care in rural and underserved communities in Colorado. Collectively, the ten family medicine residency programs in Colorado receive proportionate Medicaid Graduate Medical Education state and federal match funds based on the programs they implement to see over 106,000 individual patients annually, of whom over seventy percent are Medicaid or Medicare benefit recipients from over a dozen different communities across the state. The state statues creating the Commission on Family Medicine are sections 25.5-1-601 through 25.5-1-603, C.R.S. The average resident has a panel of about 1,200 patients and provides about 3,400 visits per year.

Most Department payments to family medicine residency programs are funded directly from the Commission on Family Medicine Residency Training Programs line item. The allocation for University of Colorado Family Medicine Residency program was paid for through the State University Teaching Hospitals, University of Colorado Hospital Authority line item through FY 2019-20. This line item was created through SB 08-230 to clarify the status of the UCHealth University of Colorado Hospital ("University Hospital") as a "Unit of Government" in its role as a provider of Graduate Medical Education.

During the FY 2020-21 budget-balancing process, the Joint Budget Committee approved a reduction of the Colorado Commission on Family Medicine (COFM) appropriation of approximately \$1.1 million total funds (approximately 13% reduction) and eliminated the entire appropriation for the State University Teaching Hospitals, University of Colorado Hospital Authority line item of \$1.6 million total funds. The payments made to University Hospital included graduate medical education payments and family medicine residency training program payments. Of the total appropriation, approximately \$1.2 million total funds were used to fund the Family Medicine Residency program.

#### Problem or Opportunity:

By both reducing the COFM appropriation and eliminating the State University Teaching Hospitals, University of Colorado Hospital Authority line item, the General Assembly took multiple reductions to family medicine residency training programs. Further, because the General Assembly eliminated the direct payments to University Hospital, the State will no longer be providing any direct support for the University of Colorado Family Medicine Residency program. Because of federal regulations around the operation of residency programs, these funds must flow through the sponsoring institution for the residency program, or the hospital system; therefore, the Department does not have any funding to pay the University of Colorado Hospital out of its COFM appropriation. It is unclear whether the Joint Budget Committee was aware that the University of Colorado Family Medicine Residency program and COFM received funding through the State University Teaching Hospitals, University of Colorado Hospital Authority line item. COFM was prepared to take the \$1 million reduction, and the additional cut to the University line item will

severely compromise COFM's ability to carry out the State's intent of placing qualified, committed family physicians in the most vulnerable communities in Colorado.

These funds help assure that the family residency program and their physicians can continue to provide access to care in underserved communities by treating the most vulnerable of patient populations, in regions that are being overly impacted by COVID-19 and its economic impact. Because of the reduction, less funding would be provided by the State to support the residency program which would reduce funding available for residency loan repayment slots, care coordination and funds allocated to COFM, and limiting Colorado's ability to attract family medicine residents to serve communities in need. This loss of funding would ultimately cost Colorado over 10% of the slots in the state, depriving Colorado of a minimum of seven family medicine physicians potentially practicing in a rural or underserved community.

The line item also included \$450,000 total funds, including reappropriated funds from University of Colorado School of Medicine clinical revenues, to obtain federal matching funds for family medicine placements associated with care provided by the faculty of the health sciences center campus that are eligible for payment. This is authorized in Footnote 26 of the Department's FY 2020-21 Long Bill. The Department does not have spending authority to obtain federal matching funds for these three placements because the appropriation was eliminated.

#### **Proposed Solution:**

The Department requests \$1,208,936 total funds including \$379,468 General Fund, \$225,000 reappropriated funds, and \$604,468 federal funds in FY 2021-22; and \$1,208,936 total funds, including \$379,468 General Fund, \$225,000 reappropriated funds and \$604,468 federal funds in FY 2022-23 and ongoing, to restore funding to the University of Colorado Family Medicine Residency program. Additionally, the Department requests supplemental funding of \$1,204,207 total funds, including \$353,723 General Fund, \$211,050 reappropriated funds, and \$639,434 federal funds in FY 2020-21 to restore the program funding. The funding would be used to maintain current levels in the program, which currently supports 36 residents. The funds would be used for loan repayment slots, care coordination and administrative support of COFM. The reappropriated funds are from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item.

If the funding is not approved, University Hospital would be at risk of not being able to fund as many residents who provide care to underserved communities and increase care coordination across the state. The funding to support COFM would also be further reduced, in addition to the cuts made in the COFM line item, which would reduce the viability of strong family medicine residency programs in Colorado. The Department would also not have federal funds spending

<sup>&</sup>lt;sup>1</sup> https://www.cofmr.org/colorado-family-medicine-residencies

authority to match the reappropriated clinic revenues to fund the residents outlined in the agreement with the University of Colorado School of Medicine.

This request falls on Step 4 of the evidence continuum. The commission has carried out evaluations and conducted review of literature which is included in the report submitted to the General Assembly with recommendations<sup>2</sup>, including expanding funding for rural training tracks, which this request supports. The commission tracks outcomes to help assess the return on the State's investment.

#### Anticipated Outcomes:

Approval of this request would allow the Department to restore funding to the University of Colorado Family Medicine Residency program as established by COFM. With the funding restored, the resident physicians at the University of Colorado Family Medicine Residency program, in conjunction with the nine other Commission on Family Medicine residency programs, would continue to contribute to providing primary care services to over 106,000 Coloradans annually.

The COFM program directly links to the Department's performance Wildly Important Goal 1 by providing access to care in Colorado's rural and underserved communities via employing person and family-centered business practices.

#### Assumptions and Calculations:

Detailed assumptions and calculations are provided in Appendix A.

The amounts requested have been calculated based on the COFM allocation model and reduced proportionally based on the COFM reduction in the COFM line item. This would restore most of the COFM funding for University of Colorado Family Medicine Program, taking a reduction proportional to the other nine family residency sites. The amount is slightly lower in FY 2020-21 based on the allocation model and how base payments and rural training track payments are funded.

The reappropriated funds requested would restore the funding levels previously approved by the General Assembly. These funds are clinic revenues as identified in Footnote 26 of the FY 2020-21 Long Bill.

The General Fund amount requested for the \$450,000 total funds included in the University of Colorado School of Medicine agreement is lower in FY 2020-21 than in future years because of the enhanced federal Medicaid funding that is expected to expire in FY 2020-21.

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<sup>&</sup>lt;sup>2</sup> https://www.cofmr.org/report-on-fmr-education-in-colorado

Table 1 shows a summary by line item for this request.

Table 2 shows a summary by initiative for this request.

### Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The request meets supplemental criteria because there was a technical error which has a substantive effect on the operation of the program. Although the Joint Budget Committee intended to eliminate the funding for State University Teaching Hospital supplemental payments to fund graduate medical education, the Department does not believe that the committee intended to cut funding for University of Colorado Family Residency Program, which funds residents and COFM. Footnote 26 of the Long Bill identifies that funding from the Department of Higher Education will be used for "...family medicine placements associated with care provided by the faculty of the health sciences center campus at the University of Colorado..." Without the appropriation, there is no spending authority to draw the matching federal funds and pay the University of Colorado School of Medicine for the Family Residency Program.

#### Table 1.1 **Summary by Line Item** FY 2020-21 Reappropriated FFP **Federal Funds** Row Line Item **Total Funds General Fund** Cash Funds Notes/Calculations FTE Funds<sup>(1)</sup> Rate (6) Other Medical Services; State University 0.0 \$0 Teaching Hospitals-University of Colorado Hospital \$1,204,207 \$353,723 \$211,050 \$639,434 53.10% Table 2.1, Row C Authority B Total Request \$1,204,207 0.0 \$353,723 \$0 \$211,050 \$639,434 53.10%

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

	Table 1.2 Summary by Line Item FY 2021-22										
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds <sup>(1)</sup>	Federal Funds	FFP Rate	Notes/Calculations		
	(6) Other Medical Services; State University Teaching Hospitals-University of Colorado Hospital Authority	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%	Table 2.2, Row C		
В	Total Request	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%			

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

	Table 1.3 Summary by Line Item FY 2022-23										
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds <sup>(1)</sup>	Federal Funds	FFP Rate	Notes/Calculations		
A	(6) Other Medical Services; State University Teaching Hospitals-University of Colorado Hospital Authority	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%	Table 2.3, Row C		
В	Total Request	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%			

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

	Table 1.4 Summary by Line Item FY 2023-24									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds <sup>(1)</sup>	Federal Funds	FFP Rate	Notes/Calculations	
	(6) Other Medical Services; State University Teaching Hospitals-University of Colorado Hospital Authority	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%	Table 2.4, Row C	
В	Total Request	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%		

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

#### Table 2.1 **Summary by Initiative** FY 2020-21 Reappropriated FFP Row **Total Funds General Fund** Cash Funds **Federal Funds** Item FTE Notes/Calculations Funds<sup>(1)</sup> Rate \$754,207 \$353,723 \$400,484 A Commission on Family Medicine (COFM) 0.0 \$0 \$0 53.10% Department's FY 2020-21 COFM Commission on Family Medicine - additional funding from Department agreement with University \$450,000 0.0 \$0 \$0 \$211,050 \$238,950 53.10% Distribution Model

\$0

\$211,050

**\$639,434 53.10%** Sum of Rows A thru B

\$353,723

0.0

\$1,204,207

of Colorado School of Medicine (CUSOM)

C Total Request

	Table 2.2 Summary by Initiative FY 2021-22										
F	Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds <sup>(1)</sup>	Federal Funds	FFP Rate	Notes/Calculations	
	A	Commission on Family Medicine (COFM)	\$758,936	0.0	\$379,468	\$0	\$0	\$379,468	50.00%		
	В	Commission on Family Medicine - additional funding from Department agreement with University of Colorado School of Medicine (CUSOM)	\$450,000	0.0	\$0	\$0	\$225,000	\$225,000		Department's FY 2020-21 COFM Distribution Model	
Ĺ	C	Total Request	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%	Sum of Rows A thru B	

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

	Table 2.3 Summary by Initiative FY 2022-23											
Row	/ Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds <sup>(1)</sup>	Federal Funds	FFP Rate	Notes/Calculations			
Α	Commission on Family Medicine (COFM)	\$758,936	0.0	\$379,468	\$0	\$0	\$379,468	50.00%				
В	Commission on Family Medicine - additional funding from Department agreement with University of Colorado School of Medicine (CUSOM)	\$450,000	0.0	\$0	\$0	\$225,000	\$225,000		Department's FY 2020-21 COFM Distribution Model			
C	Total Request	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%	Sum of Rows A thru B			

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

	Table 2.4 Summary by Initiative FY 2023-24											
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds <sup>(1)</sup>	Federal Funds	FFP Rate	Notes/Calculations			
Α	Commission on Family Medicine (COFM)	\$758,936	0.0	\$379,468	\$0	\$0	\$379,468	50.00%				
	Commission on Family Medicine - additional funding from Department agreement with University of Colorado School of Medicine (CUSOM)	\$450,000	0.0	\$0	\$0	\$225,000	\$225,000	50.00%	Department's FY 2020-21 COFM Distribution Model			
C	Total Request	\$1,208,936	0.0	\$379,468	\$0	\$225,000	\$604,468	50.00%	Sum of Rows A thru B			

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

<sup>(1)</sup> This amount is from the Department of Higher Education and its Fee-for-service Contracts with State Institutions for Specialty Education Programs line item

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The	FY 2021-22 Budget Cycle	
Request Title			
	R-14 Technical Adjustments		
Dept. Approval By:	BC		Supplemental FY 2020-21
OSPB Approval By: (	Ishly Clark		Budget Amendment FY 2021-22
		<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,110,576,857	\$0	\$9,068,342,554	(\$728,105)	(\$728,105)
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$2,276,113,000	\$0	\$2,453,554,873	(\$364,052)	(\$364,052)
Impacted by Change Request	CF	\$1,399,639,255	\$0	\$1,208,270,773	\$0	\$0
	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
	FF	\$5,393,220,642	\$0	\$5,362,891,182	(\$364,053)	(\$364,053)

		FY 2020-21		FY 2021-22		FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$728,105	\$0	\$728,105	(\$728,105)	(\$728,105)	
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0	
Office, (B) Transfers to/ from Other	GF	\$364,052	\$0	\$364,052	(\$364,052)	(\$364,052)	
Departments, (1) Transfers to/from Other	CF	\$0	\$0	\$0	\$0	\$0	
Departments - Transfer	RF	\$0	\$0	\$0	\$0	\$0	
to CDPHE Local Public Health Agencies	FF	\$364,053	\$0	\$364,053	(\$364,053)	(\$364,053)	
	Total	\$11,402,297	\$0	<b>\$11,402,297</b>	\$637,258	\$637, <b>2</b> 58	
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0	
Office, (D) Eligibility Determinations and	GF	\$969,756	\$0	\$969,756	\$159,315	\$159,315	
Client Services, (1) Eligibility Determinations and Client Services - Contracts for Special Eligibility Determinations	CF	\$4,343,468	\$0	\$4,343,468	\$0	\$0	
	RF	\$0	\$0	\$0	\$0	\$0	
	FF	\$6,089,073	\$0	\$6,089,073	\$477,943	\$477,943	

	_	FY 202	0-21	FY 2021-22		FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$4,085,445	\$0	\$4,085,445	(\$624,374)	(\$624,374)	
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0	
Office, (D) Eligibility Determinations and	GF	\$1,706,102	\$0	\$1,706,102	(\$312,187)	(\$312,187)	
Client Services, (1)	CF	\$336,621	\$0	\$336,621	\$0	\$0	
Eligibility Determinations and Client Services -	RF	\$0	\$0	\$0	\$0	\$0	
Customer Outreach	FF	\$2,042,722	\$0	\$2,042,722	(\$312,187)	(\$312,187)	
	Total	\$24,377,498	\$0	\$24,377,498	(\$2,474,758)	(\$2,474,758)	
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0	
Office, (E) Utilization and Quality Review	GF	\$6,182,153	\$0	\$6,182,153	(\$1,078,065)	(\$1,078,065)	
Contracts, (1) Utilization	CF	\$1,592,103	\$0	\$1,592,103	\$0	\$0	
and Quality Review Contracts - Professional	RF	\$0	\$0	\$0	\$0	\$0	
Service Contracts	FF	\$16,603,242	\$0	\$16,603,242	(\$1,396,693)	(\$1,396,693)	
	Total	\$9,026,391,954	\$0	\$8,984,194,399	(\$47,510,399)	(\$47,510,399)	
	FTE	0.0	0.0	0.0	0.0	0.0	
02. Medical Services Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$23,755,199)	(\$23,755,199)	
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$0	\$0	
Premiums - Medical	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0	
Services Premiums	FF	\$5,346,276,891	\$0	\$5,315,964,548	(\$23,755,200)	(\$23,755,200)	
	Total	\$3,170,663	\$0	\$3,167,978	(\$3,167,978)	(\$3,167,978)	
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0	
Living, (A) Division of Intellectual and	GF	\$2,802,904	\$0	\$2,800,219	(\$2,800,219)	(\$2,800,219)	
Developmental	CF	\$0	\$0	\$0	\$0	\$0	
Disabilities, (2) Medicaid Programs - Eligibility	RF	\$0	\$0	\$0	\$0	\$0	
Determination and Waiting List Management	FF	\$367,759	\$0	\$367,759	(\$367,759)	(\$367,759)	
	Total	\$40,420,895	\$0	\$40,386,832	(\$39,837,569)	(\$39,837,569)	
04. Office of Community Living, (A) Division of	FTE	0.0	0.0	0.0	0.0	0.0	
Intellectual and	GF	\$18,862,830	\$0	\$18,845,933	(\$19,490,575)	(\$19,490,575)	
Developmental Disabilities, (2) Medicaid	CF	\$81,163	\$0	\$81,114	(\$428,210)	(\$428,210)	
Programs - Case Management	RF	\$0	\$0	\$0	\$0	\$0 (640,040,704)	
	FF	\$21,476,902	\$0	\$21,459,785	(\$19,918,784)	(\$19,918,784)	

		FY 2020-21		FY 2021-22		FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$0	\$0	\$0	\$92,977,820	\$92,977,820	
04. Office of Community Living, (A) Division of	FTE	0.0	0.0	0.0	0.0	0.0	
Intellectual and	GF	\$0	\$0	\$0	\$47,276,930	\$47,276,930	
Developmental Disabilities, (2) Medicaid	CF	\$0	\$0	\$0	\$428,210	\$428,210	
Programs - Case	RF	\$0	\$0	\$0	\$0	\$0	
Management for People with IDD	FF	\$0	\$0	\$0	\$45,272,680	\$45,272,680	

Auxiliary Data							
Requires Legislation?	NO						
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	Impacts Other Agency				

FY 2021-22 Funding Request November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-14 Request Detail: Technical Adjustments**

Summary of Funding Change for FY 2021-22						
	Tot	tals	Incremental Change			
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23		
	Appropriation	Base	Request	Request		
Total Funds	\$9,110,576,857	\$9,068,342,554	(\$1,092,157)	(\$1,092,157)		
FTE	0.0	0.0	0.0	0.0		
General Fund	\$2,276,113,000	\$2,453,554,873	\$0	\$0		
Cash Funds	\$1,399,639,255	\$1,208,270,773	\$0	\$0		
Reappropriated Funds	\$41,603,960	\$43,625,726	(\$728,104)	(\$728,104)		
Federal Funds	\$5,393,220,642	\$5,362,891,182	(\$364,053)	(\$364,053)		

#### Summary of Request:

The Department requests to make several technical adjustments in the budget that would increase funding transparency. The Department requests to collapse the funding for Community Centered Boards (CCBs) and Single Entry Points (SEP) into one line item, move funds for Preadmission Screening and Resident Review (PASRR) that were appropriated to the Professional Services Contracts line item to the Contracts for Special Eligibility Determinations line item, move the Healthy Communities funding from the Customer Outreach line item to the Medical Services Premiums line item, and eliminate the Transfer to Department of Public Health and Environment (CDPHE) for Local Public Health Agencies line item within the Department's Long Bill and restore the appropriate State funding to CDPHE.

The programs impacted by these technical adjustments to Long Bill lines are considered by the Department as aligned with Step 2 on the evidence continuum. The Department routinely collects output data on these programs.



### Current Program:

### **Case Management Consolidation**

Single Entry Point (SEP) agencies and Community Centered Boards (CCBs) provide case management and administrative functions such as intake, functional eligibility determinations, and appeals for individuals in the Department's ten Home and Community Based Services (HCBS) waiver programs. These services are designed to keep members living in and engaged with their communities and out of costly and more restrictive nursing facilities or other institutions. Currently, SEPs provide these services for most people on HCBS waiver programs, while the CCBs provide similar services to members who have intellectual or developmental disabilities (IDD). CCBs provide additional services including eligibility determinations, delivery of select State-Only programs, and are tasked with providing safeguards to prevent conflicts of interest between case management and direct services. Currently, the Department pays for the CCBs' and SEPs' administrative and case management functions from multiple appropriations.

#### **PASRR Funding**

Preadmission Screening and Resident Review (PASRR) is a federally mandated program that requires pre-screening or review of all members who apply to or reside in a Medicaid certified nursing facility regardless of the source of payment for the nursing facility services or the individual's or resident's diagnosis. The PASRR assessment is currently paid for out of two separate line items: the Contracts for Special Eligibility Determinations line item, which includes \$1,550,000 in funding for PASRR in FY 2020-21 and the Professional Service Contracts line item, which includes \$795,846 in funding for PASRR in FY 2020-21.

#### **Healthy Communities Funding**

The Healthy Communities program provides outreach and health education to children and pregnant women. Examples of services include assistance with completing applications for medical assistance, navigating health care systems, understanding coverage and benefits, referrals to community resources and providers, reenrollment, and preventing gaps in coverage. The FY 2020-21 Long Bill included a reduction to the Healthy Communities funding from \$2.6 million to \$624,374 total funds to shift the responsibilities from local contractors to the Regional Accountable Entities (RAEs), which aligns with their current work and creates efficiencies in the program.

#### **Local Public Health Agencies Financing**

In FY 2017-18, the Department's R-12 "Local Public Health Agency Partnership" budget request was approved by the General Assembly, which moved General Fund from the Department of Public Health and Environment (CDPHE) to the Department in order to draw down a federal match for allowable costs for Medicaid members. The funding, along with the federal funds, could then be transferred to CDPHE, which would disburse the money to the Local Public Health Agencies (LPHAs) to fund collaboration partnerships with the Department's Regional Accountable Entities (RAEs) that focus on improving the health of Medicaid members.

In FY 2020-21 and future years, the Department is appropriated \$728,105 total funds, including \$364,052 General Fund and \$362,053 federal funds for this purpose.

#### Problem or Opportunity:

The Department has an opportunity to streamline the funding sources for multiple items by consolidating funding, which would increase efficiency in administering the programs and transparency on how the funding is spent. This includes shifting the Healthy Communities funding from the Customer Outreach line item to the Medical Services Premiums line item starting in FY 2020-21. This also includes a budget neutral transfer of \$364,052 General Fund in FY 2021-22 and future years from the Department to CDPHE to align appropriations with the correct fund source within each department's Long Bill.

#### **Proposed Solution:**

## **Case Management Consolidation**

The Department requests to consolidate the funding for CCBs and SEPs into a single line item. This action would not change legislative reporting or the total amount of funding appropriated but would increase transparency on funding and expenditure for case management overall.

#### Transparency

Currently, the Department's funding for case management is spread between four separate appropriations, including a larger administrative line item for utilization review, Medical Services Premiums, Targeted Case Management, and the Eligibility Determination and Waiting List Management line item. This makes it difficult to determine how much was spent overall. By combining the funding into one line item, the Joint Budget Committee and other stakeholders would be able to track how much was spent on case management overall each year.

#### Conflict Free Case Management

The current funding structure does not provide the flexibility in the appropriations required to implement conflict free case management. The funding for SEPs is intermingled with funding for the waiver services provided within Medical Services Premiums. Separating case management into one line item would provide a cleaner division in the funding between case management and services, which would reflect the division between the two required by conflict free case management.

In addition, under conflict free case management, future case management agencies could elect to serve members with intellectual and developmental disabilities (IDD) as well as non-IDD members. Currently, the appropriations for case management for these two populations are separate.

The Department believes that this program is at Step 2 on the Evidence Continuum. The Department measures and evaluates the success of the CCB and SEP programs to ensure program compliance with Home and Community Based (HCBS) waiver requirements, state and federal

regulatory requirements, contract and statutory requirements. This includes but is not limited to: annual federally mandated Quality Improvement Strategies (QIS), Performance and Quality Reviews, quarterly and yearly reviews of contract deliverables, and quarterly payment reviews.

#### **PASRR Funding**

The Department requests a technical adjustment to shift the funds approved in the FY 2019-20 R-14, "Office of Community Living Governance" for PASRR to be moved from the Contracts for Special Eligibility Determinations line item to the Eligibility Determinations and Client Services line item.

The Department erroneously requested PASRR funding to the wrong line item in the FY 2019-20 R-14, "Office of Community Living Governance" budget request. The Department requested an increase of \$637,258 total funds, including an increase of \$159,315 General Fund and \$477,943 federal funds for FY 2020-21 and future years to hire a contractor to conduct PASRR assessments and ensure proper funding of the federally mandated program. The Department requested the PASRR funding in the Professional Services Contracts line item, which was approved as requested. It makes more sense to pay for those activities from the Contracts for Special Eligibility Determinations line item, since the Department's overall contract for PASRR assessments is paid out of that line item. Having a contract that uses multiple appropriations for one contractual deliverable creates unnecessary accounting transfers and internal documentation to track funds.

The Department believes that this program is at Step 2 on the Evidence Continuum. The PASRR program requires pre-screening or reviewing of all clients who apply to or reside in a Medicaid certified nursing facility regardless of the source of payment for the nursing facility services or the individual's or resident's diagnosis. As part of its program management, the Department reviews monthly analysis with the number of evaluations along with information of whether the PASRR screenings were done in a timely manner. The Department is working towards using those monthly analysis reports to create an end of year report of the PASRR's program activities, expenditure and yearly performance of the program.

#### **Healthy Communities Funding**

The Department requests a technical adjustment to shift the funds for the Healthy Communities program from the Customer Outreach line item to the Medical Services Premiums line item starting in FY 2020-21. This would align the appropriated funding with the new programmatic structure. The Department added the outreach and education responsibilities for the Healthy Communities program to the per member per month rates paid to the RAEs in Medical Services Premiums.

The Department believes that this program is at Step 2 on the Evidence Continuum. The Department evaluated the Healthy Communities program in 2015<sup>1</sup> to identify high-value activities that led to better health outcomes. The Department can incorporate this type of evaluation in its annual review of the Accountable Care Collaborative (ACC) and program measures once it is integrated in the RAEs' model.

#### **Local Public Health Agencies Funding**

The Department requests a reduction of \$728,105 total funds, including a budget neutral transfer of \$364,052 General Fund in FY 2021-22 and future years from the Department to the Department of Public Health and Environment (CDPHE) to align appropriations with the correct fund source within each departments' Long Bill. The Department has been working with the Centers for Medicare and Medicaid Services (CMS) to receive federal approval for the collaboration partnerships. CMS expressed concerns with approving the initiative, and without CMS approval, the Department does not have the authority to draw down a federal match on the funding appropriated for LPHAs. For administrative efficiency and financial transparency, the Department requests that the State funding be returned to CDPHE until the agencies can redesign the funding and contract arrangements that will be accepted by CMS. The Department would utilize the budget process to request any changes in funding at that time.

In addition to the transfer, the Department would no longer need the federal fund appropriation within the (1) Executive Director's Office; (B) Transfers to/from Other Departments, Transfer to CDPHE for Local Public Health Agencies line item and requests that the line item be eliminated from the Long Bill. Additionally, CDPHE would no longer need the reappropriated funds appropriation within the (1) Administrative and Support; (C) Office of Planning, Partnerships, and Improvements, Distributions to Local Public Health Agencies line item. The Department requests the elimination of the federal funds and reappropriated spending authority because these appropriations are no longer needed.

#### **Anticipated Outcomes:**

This request aligns with the Department's strategy of "Operational Excellence" and allows for implementation of efficient business practices. The consolidation of funding for all administrative and case management activities performed by CCBs and SEPs would allow the Department greater flexibility to pay for comparable work as new case management agencies enter the market and serve to simplify and streamline case management funding. Additionally, the technical adjustment of moving the PASRR and Healthy Community funding to the applicable line items would create transparency on how much is funded for those programs and align the funding with the appropriate source based on the services and activities provided. The proposed change of the LPHA appropriation would realign funding so that CDPHE is directly appropriated General Fund for administration of its programs, without the administrative burden of having the funds

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<sup>&</sup>lt;sup>1</sup>https://www.colorado.gov/pacific/sites/default/files/Healthy%20Communities%202015%20Evaluation%20Report.pdf

reappropriated to CDPHE. Additionally, removing the Department's LPHA line item and spending authority would be a more accurate representation of both departments' budgets.

### Assumptions and Calculations:

Please see Appendix A for detailed calculations.

# Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The Department requests to shift the funds for the Healthy Communities program from the Customer Outreach line item to the Medical Services Premiums line item in FY 2020-21. The Department added the responsibilities for the Healthy Communities program to the contracts for the Regional Accountable Entities (RAEs) effective July 1, 2020 and is paying the RAEs for the additional activities through a higher per member, per month payment. There was a technical error in HB 20-1360, the FY 2020-21 Long Bill, which included the reduction in funding from moving the program to the RAEs but did not shift the funding to the appropriate line item.

#### R-14 Technical Adjustments Appendix A: Assumptions and Calculations

	Table 1.1 Summary by Line Item FY 2020-21									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	(\$624,374)	0.0	(\$312,187)	\$0	\$0	(\$312,187)	Various	Table 5.1 Row G	
В	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$624,374	0.0	\$312,187	\$0	\$0	\$312,187	50.00%	Table 5.1 Row H	
C	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	N/A	Sum of Rows A through B	

				Table 1.2 Summary by Line I FY 2021-22	tem				
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (B) Transfers To/From Other Departments, Transfer to CDPHE for Local Public Health Agencies	(\$728,105)	0.0	(\$364,052)	\$0	\$0	(\$364,053)	50.00%	Table 6.1 Row C
В	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$2,474,758)	0.0	(\$1,078,065)	\$0	\$0	(\$1,396,693)	Various	Table 3.1 Row M + Table 4.1 Row G
С	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	(\$624,374)	0.0	(\$312,187)	\$0	\$0	(\$312,187)	50.00%	Table 5.2 Row G
D	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$637,258	0.0	\$159,315	\$0	\$0	\$477,943	75.00%	Table 4.1 Row H
E	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	(\$47,510,399)	0.0	(\$23,755,199)	\$0	\$0	(\$23,755,200)	50.00%	Table 3.1 Row N + Table 5.2 Row H
F	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Case Management	(\$39,837,569)	0.0	(\$19,490,575)	(\$428,210)	\$0	(\$19,918,784)	50.00%	Table 3.1 Row O
G	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	(\$3,167,978)	0.0	(\$2,800,219)	\$0	\$0	(\$367,759)	Various	Table 3.1 Row P
Н	NEW LINE (4) Office of Community Living; (B) Medicaid Programs for People with Intellectual and Developmental Disabilities Case Management	\$92,977,820	0.0	\$47,276,930	\$428,210	\$0	\$45,272,680	Various	Table 3.1 Row Q
I	Total HCPF Request	(\$728,105)	0.0	(\$364,052)	\$0	\$0	(\$364,053)	N/A	Sum of Rows A through H
Denar	tment of Public Health and Environment								
J	(1) Administration and Support, (C) Office of Planning, Partnerships, and Improvement, Distributions to LPHAs	(\$364,052)	0.0	\$364,052	\$0	(\$728,104)	\$0	50.00%	Table 6.1 Row F
	m . 12	(04.005.:	0.6			(0=00 :::::	(00.01	****	
K	Total Request	(\$1,092,157)	0.0	\$0	\$0	(\$728,104)	(\$364,053)	N/A	Total: Row I + Row J

				Table 1.3 Summary by Line I FY 2022-23	tem				
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (B) Transfers To/From Other Departments, Transfer to CDPHE for Local Public Health Agencies	(\$728,105)	0.0	(\$364,052)	\$0	\$0	(\$364,053)	50.00%	Table 6.1 Row C
В	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$2,474,758)	0.0	(\$1,078,065)	\$0	\$0	(\$1,396,693)	Various	Table 3.3 Row M + Table 4.2 Row G
С	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	(\$624,374)		(\$312,187)	\$0	\$0	(\$312,187)	50.00%	Table 5.3 Row G
D	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$637,258		\$159,315	\$0	\$0	\$477,943	75.00%	Table 4.2 Row H
E	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	(\$49,017,017)	0.0	(\$24,508,508)	\$0	\$0	(\$24,508,509)	50.00%	Table 3.2 Row N + Table 5.3 Row H
F	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Case Management	(\$38,123,508)	0.0	(\$18,633,544)	(\$428,210)	\$0	(\$19,061,754)	50.00%	Table 3.2 Row O
G	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	(\$3,167,978)	0.0	(\$2,800,219)	\$0	\$0	(\$367,759)	Various	Table 3.2 Row P
Н	NEW LINE (4) Office of Community Living; (B) Medicaid Programs for People with Intellectual and Developmental Disabilities Case Management	\$92,770,377	0.0	\$47,173,208	\$428,210	\$0	\$45,168,959	Various	Table 3.2 Row Q
I	Total Request	(\$728,105)	0.0	(\$364,052)	\$0	\$0	(\$364,053)	N/A	Sum of Rows A through H
Danas	tment of Public Health and Environment								
Ј	(1) Administration and Support, (C) Office of Planning, Partnerships, and Improvement, Distributions to LPHAs	(\$364,052)	0.0	\$364,052	\$0	(\$728,104)	\$0	50.00%	Table 6.1 Row F
K	Total Request	(\$1,092,157)	0.0	\$0	\$0	(\$728,104)	(\$364,053)	N/A	Total: Row I + Row J

	Table 2.1									
	Summary by Initiative									
	FY 2020-21									
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	Movement of Healthy Community Funds	\$0	0.0	\$0	\$0	\$0	\$0	50.00%	Table 5.1 Row I	
В	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	N/A	Sum of Rows A through C	

	Table 2.2 Summary by Initiative FY 2021-22											
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	Case Management Long Bill Consolidation	\$0	0.0	\$0	\$0	\$0	\$0	Various	Table 3.1 Row R			
В	Movement of PASSR Funds	\$0	0.0	\$0	\$0	\$0	\$0	Various	Table 4.1 Row I			
C	Movement of Healthy Community Funds	\$0	0.0	\$0	\$0	\$0	\$0	50.00%	Table 5.2 Row I			
D	Local Public Health Agencies Financing	(\$1,092,157)	0.0	\$0	\$0	(\$728,104)	(\$364,053)	N/A	Sum D.1 through D.4			
D.1	Transfer General Fund Out of HCPF	(\$364,052)	0.0	(\$364,052)	\$0	\$0	\$0	N/A	Table 6.1 Row A			
D.2	Transfer General Fund To CDPHE	\$364,052	0.0	\$364,052	\$0	\$0	\$0	N/A	Table 6.1 Row D			
D.3	Remove HCPF Federal Funds Spending Authority	(\$364,053)	0.0	\$0	\$0	\$0	(\$364,053)	N/A	Table 6.1 Row B			
D.4	Remove CDPHE Reappropriated Funds Spending Authority	(\$728,104)	0.0	\$0	\$0	(\$728,104)	\$0	N/A	Table 6.1 Row E			
E	Total Request	(\$1,092,157)	0.0	\$0	\$0	(\$728,104)	(\$364,053)	N/A	Sum of Rows A through D			

	Table 2.3 Summary by Initiative FY 2022-23											
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	Case Management Long Bill Consolidation	\$0	0.0	\$0	\$0	\$0	\$0	Various	Table 3.2 Row R			
В	Movement of PASSR Funds	\$0	0.0	\$0	\$0	\$0	\$0	Various	Table 4.1 Row I			
C	Movement of Healthy Community Funds	\$0	0.0	\$0	\$0	\$0	\$0	50.00%	Table 5.3 Row I			
D	Local Public Health Agencies Financing	(\$1,092,157)	0.0	\$0	\$0	(\$728,104)	(\$364,053)	N/A	Sum D.1 through D.4			
D.1	Transfer General Fund Out of HCPF	(\$364,052)	0.0	(\$364,052)	\$0	\$0	\$0	N/A	Table 6.1 Row A			
D.2	Transfer General Fund To CDPHE	\$364,052	0.0	\$364,052	\$0	\$0	\$0	N/A	Table 6.1 Row D			
D.3	Remove HCPF Federal Funds Spending Authority	(\$364,053)	0.0	\$0	\$0	\$0	(\$364,053)	N/A	Table 6.1 Row B			
D.4	Remove CDPHE Reappropriated Funds Spending Authority	(\$728,104)	0.0	\$0	\$0	(\$728,104)	\$0	N/A	Table 6.1 Row E			
E	Total Request	(\$1,092,157)	0.0	\$0	\$0	(\$728,104)	(\$364,053)	N/A	Sum of Rows A through D			

	Table 3.1 FY 2021-22 Movement of SEP and CCB Admin and Case Management Funds								
		rrent Appropriation	Management Funds						
Row	Item	Total Funds	General Fund	Cash Funds (1)	Federal Funds	FFP	Notes/Calculations		
A	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$1,837,500	\$918,750	\$0	\$918,750	50%	Assumed portion of appropriation		
В	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$48,134,773	\$24,067,386	\$0	\$24,067,387	50%	R-1 FY 2021-22 Forecast Exhibit I		
С	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Case Management	\$39,837,569	\$19,490,575	\$428,210	\$19,918,784	50%	R-5 FY 2021-22 Exhibit A		
D	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	\$3,167,978	\$2,800,219	\$0	\$367,759	Various	R-5 FY 2021-22 Exhibit A		
E	NEW LINE (4) Office of Community Living; (B) Medicaid Programs for People with Intellectual and Developmental Disabilities Case Management	\$0	\$0	\$0	\$0	50%	Creating new line		
F	Total	\$92,977,820	\$47,276,930	\$428,210	\$45,272,680	N/A	Sum of Row A through Row E		
	Req	uested Appropriation					•		
Row	Item	Total Funds	General Fund	Cash Funds (1)	Federal Funds	FFP	Notes/Calculations		
G	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$0	\$0	\$0	\$0	50%	Assume zero funding for appropriation		
Н	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$0	\$0	\$0	\$0	50%	Assume zero funding for appropriation		
I	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Case Management	\$0	\$0	\$0	\$0	50%	Assume zero funding for appropriation		
J	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	\$0	\$0	\$0	\$0	Various	Assume zero funding for appropriation		
K	NEW LINE (4) Office of Community Living; (B) Medicaid Programs for People with Intellectual and Developmental Disabilities Case Management	\$92,977,820	\$47,276,930	\$428,210	\$45,272,680	50%	Row F		
L	Total	\$92,977,820	\$47,276,930	\$428,210	\$45,272,680	N/A	Sum of Row G through Row K		
	Inc	cremental Difference							
Row	Item	Total Funds	General Fund	Cash Funds (1)	Federal Funds	FFP	Notes/Calculations		
M	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$1,837,500)	(\$918,750)	\$0	(\$918,750)		Row G - Row A		
N	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	(\$48,134,773)	(\$24,067,386)	\$0	(\$24,067,387)	50%	Row H - Row B		
О	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Case Management	(\$39,837,569)	(\$19,490,575)	(\$428,210)	(\$19,918,784)	50%	Row I - Row C		
P	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	(\$3,167,978)	(\$2,800,219)	\$0	(\$367,759)	Various	Row J - Row D		
Q	NEW LINE (4) Office of Community Living; (B) Medicaid Programs for People with Intellectual and Developmental Disabilities Case Management	\$92,977,820	\$47,276,930	\$428,210	\$45,272,680		Sum Row A through Row D		
R	Difference	\$0	\$0	\$0	\$0	N/A	Sum of Row M through Row Q		
(1) He	althcare Affordability and Sustainability Fee Cash Fund								

		ble 3.2 FY 2022-23									
	Movement of SEP and C	CB Admin and Case rent Appropriation	Management Funds								
Row	Item	Total Funds	General Fund	Cash Funds (1)	Federal Funds	FFP	Notes/Calculations				
A	(1) Executive Director's Office (E) Utilization and Quality Review Contracts, Professional Services Contract	\$1,837,500	\$918,750	\$0	\$918,750	50%	Same as previous fiscal year				
В	(2) Medical Services Premiums; Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$49,641,391	\$24,820,695	\$0	\$24,820,696	50%	R-1 FY 2021-22 Forecast Exhibit I				
С	(4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities (2) Program Costs, Case Management	\$38,123,508	\$18,633,544	\$428,210	\$19,061,754	50%	R-5 FY 2021-22 Exhibit A				
D	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	\$3,167,978	\$2,800,219	\$0	\$367,759	Various	R-5 FY 2021-22 Exhibit A				
Е	NEW LINE (4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities (2) Program Costs, Case Management Funding	\$0	\$0	\$0	\$0	50%	Creating new line				
F	Total	\$92,770,377	\$47,173,208	\$428,210	\$45,168,959	N/A	Sum of Row A through Row E				
	Requested Appropriation										
Row	Item	Total Funds	General Fund	Cash Funds (1)	Federal Funds	FFP	Notes/Calculations				
G	(1) Executive Director's Office (E) Utilization and Quality Review Contracts, Professional Services Contract	\$0	\$0	\$0	\$0	50%	Assume zero funding for appropriation				
Н	(2) Medical Services Premiums; Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$0	\$0	\$0	\$0	50%	Assume zero funding for appropriation				
Ι	(4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities (2) Program Costs, Case Management	\$0	\$0	\$0	\$0	50%	Assume zero funding for appropriation				
J	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	\$0	\$0	\$0	\$0	Various	Assume zero funding for appropriation				
K	NEW LINE (4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities (2) Program Costs, Case Management Funding	\$92,770,377	\$47,173,208	\$428,210	\$45,168,959	50%	Row F				
L	Total	\$92,770,377	\$47,173,208	\$428,210	\$45,168,959	N/A	Sum of Row G through Row K				
	Inc	remental Difference									
Row	Item	Total Funds	General Fund	Cash Funds (1)	Federal Funds	FFP	Notes/Calculations				
M	(1) Executive Director's Office (E) Utilization and Quality Review Contracts, Professional Services Contract	(\$1,837,500)	(\$918,750)	\$0	(\$918,750)		Row G - Row A				
N	(2) Medical Services Premiums; Medical and Long-Term Care Services for Medicaid Eligible Individuals	(\$49,641,391)	(\$24,820,695)	\$0	(\$24,820,696)	50%	Row H - Row B				
О	(4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities (2) Program Costs, Case Management	(\$38,123,508)	(\$18,633,544)	(\$428,210)	(\$19,061,754)	50%	Row I - Row C				
P	(4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (2) Program Costs, Eligibility Determination and Waitlist Management	(\$3,167,978)	(\$2,800,219)	\$0	(\$367,759)	Various	Row J - Row D				
Q	NEW LINE (4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities (2) Program Costs, Case Management Funding	\$92,770,377	\$47,173,208	\$428,210	\$45,168,959	50%	Sum Row A through Row D				
R	Difference	\$0	\$0	\$0	\$0	\$0 N/A Sum of Row M through Row Q					
(1) He	althcare Affordability and Sustainability Fee Cash Fund	•					•				

	Table 4.1 FY 2021-22									
		Movement of PA								
		Current Appr								
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations			
A	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$637,258	\$159,315	\$0	\$477,943	75%	FY 2019-20 R-14 Office of Community Living Governance			
В	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$0	\$0	\$0	\$0	0%	Current PASSR appropriation			
С	Total	\$637,258	\$159,315	\$0	\$477,943	N/A	Row A + Row B			
		Requested App	ropriation							
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations			
D	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$0	\$0	\$0	\$0	0%	Reduction of appropriation			
Е	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$637,258	\$159,315	\$0	\$477,943	75%	Requested appropriation			
F	Total	\$637,258	\$159,315	\$0	\$477,943	N/A	Row D + Row E			
		Incremental I	Difference							
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations			
G	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$637,258)	(\$159,315)	\$0	(\$477,943)	75%	Row D - Row A			
Н	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$637,258	\$159,315	\$0	\$477,943		Row E - Row B			
Ÿ	Total	\$0	\$0	\$0	\$0	NI/A	Row G + Row H			

		Table 4.2 FY	2022-23								
		Movement of PA	ASSR Funds								
		Current App	ropriation								
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations				
A	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$637,258	\$159,315	\$0	\$477,943	75%	FY 2019-20 R-14 Office of Community Living Governance				
В	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$0	\$0	\$0	\$0	0%	Current PASSR appropriation				
С	Total	\$637,258	\$159,315	\$0	\$477,943	N/A	Row A + Row B				
	Requested Appropriation										
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations				
D	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	\$0	\$0	\$0	\$0	0%	Reduction of appropriation				
Е	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$637,258	\$159,315	\$0	\$477,943		Requested appropriation				
F	Total	\$637,258	\$159,315	\$0	\$477,943	N/A	Row D + Row E				
		Incremental l	Difference								
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations				
G	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$637,258)	(\$159,315)	\$0	(\$477,943)	75%	Row D - Row A				
Н	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Contracts for Special Eligibility Determinations	\$637,258	\$159,315	\$0	\$477,943	75%	Row E - Row B				
I	Total	\$0	\$0	\$0	\$0	N/A	Row G + Row H				

	Table 5.1 FY 2020-21									
		althy Community Fu	nds							
	Current Appropriation									
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations			
A	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	\$624,374	\$312,187	\$0	\$312,187	50% (	Current appropriation			
В	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$0	\$0	\$0	\$0		Current appropriation			
C	Total	\$624,374	\$312,187	\$0	\$312,187	N/A F	Row A + Row B			
	Requested Appropriation									
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations			
D	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	\$0	\$0	\$0	\$0	0% F	Requested appropriation			
E	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$624,374	\$312,187	\$0	\$312,187	50% F	Requested appropriation			
F	Total	\$624,374	\$312,187	\$0	\$312,187	N/A F	Row D + Row E			
	Increm	ental Difference								
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations			
G	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	(\$624,374)	(\$312,187)	\$0	(\$312,187)	50% F	Row D - Row A			
Н	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$624,374	\$312,187	\$0	\$312,187	50% F	Row E - Row B			
I	Total	\$0	\$0	\$0	\$0	N/A F	Row G + Row H			

	Table 5.2 FY 2021-22 Movement of Healthy Community Funds									
-	Current Appropriation									
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP Notes/Calculations				
A	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	\$624,374	\$312,187	\$0	\$312,187	50% Current appropriation				
В	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$0	\$0	\$0	\$0	0% Current appropriation				
C	Total	\$624,374	\$312,187	\$0	\$312,187	N/A Row A + Row B				
	Requested Appropriation									
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP Notes/Calculations				
D	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	\$0	\$0	\$0	\$0	0% Requested appropriation				
E	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$624,374	\$312,187	\$0	\$312,187	50% Requested appropriation				
F	Total	\$624,374	\$312,187	\$0	\$312,187	N/A Row D + Row E				
	Increm	ental Difference								
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP Notes/Calculations				
G	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	(\$624,374)	(\$312,187)	\$0	(\$312,187)	50% Row D - Row A				
Н	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$624,374	\$312,187	\$0	\$312,187	50% Row E - Row B				
I	Total	\$0	\$0	\$0	\$0	N/A Row G + Row H				

	Table 5.3 FY 2022-23								
	Movement of Healthy Community Funds  Current Appropriation								
Row	Row Item Total Funds General Fund Cash Funds Federal Funds FFP Notes/Calculations								
A	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	\$624,374	\$312,187	\$0	\$312,187	50%	Current appropriation		
В	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$0	\$0	\$0	\$0		Current appropriation		
C	Total	\$624,374	\$312,187	\$0	\$312,187	N/A	Row A + Row B		
	Requested Appropriation								
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations		
D	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	\$0	\$0	\$0	\$0	50%	Requested appropriation		
E	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$624,374	\$312,187	\$0	\$312,187	50%	Requested appropriation		
F	Total	\$624,374	\$312,187	\$0	\$312,187	N/A	Row D + Row E		
	Increm	ental Difference							
Row	Item	Total Funds	General Fund	Cash Funds	Federal Funds	FFP	Notes/Calculations		
G	(1) Executive Director's Office; (D) Eligibility Determinations and Client Services, Customer Outreach	(\$624,374)	(\$312,187)	\$0	(\$312,187)	50%	Row D - Row A		
Н	(2) Medical Services Premiums, Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$624,374	\$312,187	\$0	\$312,187	50%	Row E - Row B		
I	Total	\$0	\$0	\$0	\$0	N/A	Row G + Row H		

#### R-14 Technical Adjustments Appendix A: Assumptions and Calculations

			Tab	le 6.1 FY 2021-22	and Ongoing				
	Eliminate Transfer to Department of Public Health and Environment for Local Public Health Agencies Appropriation								
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations	
Health	Care Policy and Financing Long Bill: (1	1) Executive Dire	ctor's O	ffice; (B) Transfe	rs to/from Other	Departments, Ti	ransfer to the De	partment of Public Health and	
Enviro	nment for Local Public Health Agencies	1							
A	Transfer of General Fund to CDPHE	(\$364,052)	0.0	(\$364,052)	\$0	\$0	\$0	Technical funding adjustment	
В	Remove federal funds spending authority	(\$364,053)	0.0	\$0	\$0	\$0	(\$364,053)	Technical funding adjustment	
С	Subtotal: HCPF Request	(\$728,105)	0.0	(\$364,052)	\$0	\$0	(\$364,053)	Subtotal: Rows A + B	
Department of Public Health and Environment Long Bill: (1) Administration and Support; (C) Office of Planning, Partnerships, and Improvement, Distributions to Local Public Health Agencies									
D	Transfer of General Fund from HCPF	\$364,052	0.0	\$364,052	\$0	\$0	\$0	Technical funding adjustment	
Е	Remove Reappropriated funds spending authority	(\$/28,104)	0.0	\$0	\$0	(\$728,104)	\$0	Technical funding adjustment	
F	Subtotal: CDPHE Request	(\$364,052)	0.0	\$364,052	\$0	(\$728,104)	\$0	Subtotal: Rows D + E	
G	Request Total	(\$1,092,157)	0.0	\$0	\$0	(\$728,104)	(\$364,053)	Total: Rows C + F	

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request for The FY 2021-22 Budget Cycle									
Request Title									
	R-15 Transfer HAS Fee								
Dept. Approval By:	BL		Supplemental FY 2020-21						
OSPB Approval By:	Cishly Chart		Budget Amendment FY 2021-22						
		<u>x</u>	Change Request FY 2021-22						

	_	FY 202	20-21	FY 20	FY 2022-23		
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$9,026,391,954	\$0	\$8,984,194,399	\$0	\$0	
	FTE	0.0	0.0	0.0	0.0	0.0	
Total of All Line Items	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$80,000,000)	\$0	
Impacted by Change Request	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$80,000,000	\$0	
. toquoot	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0	
	FF	\$5,346,276,891	\$0	\$5,315,964,548	\$0	\$0	

	_	FY 202	0-21	FY 20	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	\$0	\$0
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$80,000,000)	\$0
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$80,000,000	\$0
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
OCIVICOS I TOITIIUITIS	FF	\$5,346,276,891	\$0	\$5,315,964,548	\$0	\$0

		Auxiliary Data	
Requires Legislation?	YES		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

Jared Polis Governor

Kim Bimestefer Executive Director

November 1, 2020

# Department Priority: R-15 Request Detail: Transfer HAS Fee

	Summary of Funding Change for FY 2021-22										
	Tot	tals	Increment	al Change							
	FY 2020-21 FY 2021-22		FY 2021-22	FY 2022-23							
	Appropriation	Base	Request	Request							
Total Funds	\$9,026,391,954	\$8,984,194,399	\$0	\$0							
FTE	0.0	0.0	0.0	0.0							
General Fund	\$2,245,225,203	\$2,422,686,658	(\$80,000,000)	\$0							
Cash Funds	\$1,393,285,900	\$1,201,917,467	\$80,000,000	\$0							
Reappropriated Funds	\$41,603,960	\$43,625,726	\$0	\$0							
Federal Funds	\$5,346,276,891	\$5,315,964,548	\$0	\$0							

# Summary of Request:

The Department requests a one-time reduction of \$80,000,000 General Fund and an \$80,000,000 increase in cash funds from the Healthcare Affordability and Sustainability Fee Cash Fund in FY 2021-22 to offset the increase in Medicaid hospital expenditure as a result of the COVID-19 pandemic and accompanying economic downturn. This request is total funds neutral, as it does not increase or decrease total Medicaid expenditure. The General Assembly would need to pass legislation in order to authorize this proposal.

# Current Program:

The State share for Colorado's Medicaid program is funded through a mix of fund sources; the two largest fund sources are the General Fund and the Healthcare Affordability and Sustainability (HAS) Fee Cash Fund. The HAS Fee cash fund is funded with fees assessed on hospitals pursuant to the Colorado Healthcare Affordability and Sustainability Enterprise Act of 2017, section 25.5-4-402.4, C.R.S. The Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) provides business services to hospitals when, in exchange for payment of health care affordability and sustainability fees by hospitals, it obtains federal matching money and returns both the HAS fee and the federal matching money to hospitals. This funding is used to increase reimbursement rates to hospitals for providing medical care under the state medical assistance program and the Colorado indigent care program and to increase the number of individuals covered by public medical assistance.

When authorized by the General Assembly, the HAS Fee may be used to offset General Fund expenditures for the State Medical Assistance Program. Most recently, the General Assembly approved, and the Governor signed into law, HB 20-1386, Concerning the use of a Specified Amount of the Money in the Healthcare Affordability and Sustainability Fee Cash Fund to Offset General Fund Expenditures for the State Medical Assistance Program. HB 20-1386 appropriated \$161 million to the Department from the HAS Fee Cash Fund and reduced General Fund appropriations by the same amount. The net result of this transfer is that the State achieves General Fund savings for each dollar of HAS Fee that is appropriated for this purpose.

# Problem or Opportunity:

As a result of the COVID-19 pandemic and accompanying economic downturn, the State is facing a shortage of General Fund revenue. Budget cuts and cash fund transfers are necessary to achieve a balanced budget. The Department expects that there will be available revenue in the HAS Fee Cash Fund that can be used to offset General Fund expenditure for FY 2021-22.

#### **Proposed Solution:**

The Department requests a reduction of \$80,000,000 General Fund and an increase in cash funds from the HAS Fee Cash fund of \$80,000,000 in FY 2021-22 in order to reduce the General Fund cost of the State's Medicaid program. The requested funding would be used to maintain services to eligible individuals that may otherwise need to be reduced because of the State's revenue situation. This request does not fall on the evidence continuum.

The General Assembly would need to pass legislation akin to HB 20-1386 in order to authorize this proposal. The legislation should provide direct statutory authorization to allow the Department to receive an appropriation HAS Fee Cash Fund to offset General Fund expenditures for the State Medical Assistance Program, with an appropriation clause specifying the amount of the transfer. This authorization should include language specifying that this transfer must be

funded before other items, such as supplemental and incentive payments, so that if revenue is insufficient to fund all authorized used of the HAS Fee, the General Fund is protected.

In addition to approval by the General Assembly, the Department would need the Medical Services Board to promulgate rules setting the HAS Fee at a sufficient level to support the cash fund appropriations. Further, the total amount of revenue collected must not exceed the federal limits for such fees.

Without this transfer, the State would be required to find an additional \$80,000,000 of General Fund relief or program reductions in order to balance the budget for FY 2021-22.

# **Anticipated Outcomes:**

By implementing a cash fund transfer in lieu of other reductions, the Department would be better able to achieve its Wildly Important Goals to deliver health care coverage, service and access support to Coloradans during this economic downturn. Deep reimbursement reductions may make providers unwilling to participate in the Medicaid program or other various initiatives designed to control health care costs and improve the health of Medicaid recipients. By approving this proposal, the General Assembly would prevent other reductions to State programs. Further, this proposal would allow the Medicaid program to continue to provide the statutorily required benefits to recipients without additional reductions to the amount, scope, and duration of services.

# Assumptions and Calculations:

The Department assumes that enough revenue would be available in the HAS Fee based on preliminary modelling of hospital net patient revenue for federal fiscal year 2022, including lower revenue due to COVID, upper payment limit growth, and expected expenditure for supplemental payments, expansion populations, administrative expenditure, and reinsurance. If revenue is below projections, then the CHASE Board would need to propose reductions in medical benefits or eligibility, which would need to be approved by both the Medical Services Board and Joint Budget Committee.

#### R-15 Transfer HAS Fee Appendix A: Assumptions and Calculations

Notes/Calculations

0.00% See narrative

Row A

\$0

**\$0** 

\$0

\$0

	Table 1.1									
	Summary by Line Item									
FY 2021-22										
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate		
	(2) Medical Services Premiums; Medical and Long-									

(\$80,000,000)

(\$80,000,000)

\$0

**\$0** 

0.0

0.0

	Table 1.2								
	Summary by Line Item								
	FY 2022-23 and ongoing								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(2) Medical Services Premiums; Medical and Long- Term Care Services for Medicaid Eligible Individuals	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	See narrative
В	Total Request	\$0	0.0	\$0	\$0	\$0	\$0		Row A

\$80,000,000

\$80,000,000

Term Care Services for Medicaid Eligible

Individuals

B Total Request

#### R-15 Transfer HAS Fee Appendix A: Assumptions and Calculations

	Table 2.1								
	Summary by Initiative								
	FY 2021-22								
Ro	w Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Transfer HAS Fee	\$0	0.0	(\$80,000,000)	\$80,000,000	\$0	\$0	0.00%	See narrative
B	Total Request	\$0	0.0	(\$80,000,000)	\$80,000,000	\$0	\$0		Row A

	Table 2.2								
	Summary by Initiative								
	FY 2022-23 and Ongoing								
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Transfer HAS Fee	\$0	0.0	\$0	\$0	\$0	\$0		One-time transfer in FY 2021-22
В	Total Request	\$0	0.0	\$0	\$0	\$0	\$0		Row A

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request for The FY 2021-22 Budget Cycle								
Request Title								
R-16 Provider Rate Adjustments								
Dept. Approval By:		Supplemental FY 2020-21						
OSPB Approval By: Ashly Carro		Budget Amendment FY 2021-22						
	<u>x</u>	Change Request FY 2021-22						

		FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	(\$41,349,862)	(\$64,726,693)
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$15,751,002)	(\$27,251,639)
Impacted by Change Request	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$0	\$0
	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
	FF	\$5,346,276,891	\$0	\$5,315,964,548	(\$25,598,860)	(\$37,475,054)

	_	FY 202	20-21	FY 20	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	(\$41,349,862)	(\$64,726,693)
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$15,751,002)	(\$27,251,639)
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$0	\$0
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
Services i remidins	FF	\$5,346,276,891	\$0	\$5,315,964,548	(\$25,598,860)	(\$37,475,054)

		Auxiliary Data	
Requires Legislation?	YES		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

Jared Polis Governor

Kim Bimestefer Executive Director

November 1, 2020

# <u>Department Priority: R-16</u> Request Detail: Provider Rate Adjustments

	Summary of I	<b>Funding Change fo</b>	or FY 2021-22	
	Tot	tals	Increment	al Change
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23
	Appropriation	Base	Request	Request
Total Funds	\$9,026,391,954	\$8,984,194,399	(\$41,349,862)	(\$64,726,693)
FTE	0.0	0.0	0.0	0.0
General Fund	\$2,245,225,203	\$2,422,686,658	(\$15,751,002)	(\$27,251,639)
Cash Funds	\$1,393,285,900	\$1,201,917,467	\$0	\$0
Reappropriated Funds	\$41,603,960	\$43,625,726	\$0	\$0
Federal Funds	\$5,346,276,891	\$5,315,964,548	(\$25,598,860)	(\$37,475,054)

#### Summary of Request:

The Department requests to adjust provider rates across several service categories in order to meet the projected budget shortfall. These reductions align with appropriate benchmarks for reimbursements, including those identified by the Medicaid Provider Rate Review Advisory Committee, which was created by the General Assembly. This request represents a decrease of 0.34% from the Department's FY 2020-21 Long Bill total funds appropriation.

The targeted rate adjustments include reductions to anesthesia rates to the Medicare benchmark; reductions to rates related to the preparation of antigens and administration of allergy testing; repricing pulse oximeters; reductions of certain rates to Medicare reimbursement rates; reducing the nursing facility rate growth limit to 0%; reducing Outpatient Hospital Physician Administered Drugs; and a reduction in lab testing rates to 80% of the Medicare benchmarks. Legislation is required to change section 25.5-6-202(9)(b), C.R.S in order to reduce the nursing facility rate growth.

The Department believes this request is on Step 2 of the evidence continuum, as the Department routinely examines the link between provider rates and the potential impacts on members' access to services.



### Current Program:

Colorado's Medicaid program currently provides health care access to about 1.3 million people with a budget of \$12.0 billion. Most providers are paid on a fee-for-service basis, meaning the Department pays for each incurred service based on a set rate. Pursuant to section 25.5-4-401.5, C.R.S., the Department is required to periodically perform reviews of provider rates under the Colorado Medical Assistance Act. Section 25.5-4-401.5, C.R.S. also established the Medicaid Provider Rate Review Advisory Committee (MPRRAC) to assist in the review of provider reimbursement rates.

For nursing facilities, section 25.5-6-202, C.R.S. outlines a comprehensive methodology for the Department to set nursing facility rates. This methodology requires the Department to annually adjust nursing facility rates based on changes in provider costs. As a result, the State's reimbursement for nursing facilities historically increased due to rate growth by approximately 3.00% each year. The Joint Budget Committee introduced HB 20-1362 which limited the annual increase in the Department paid per diem rates to nursing facilities for FY 2020-21 and FY 2021-22 to 2.00%.

Very few other providers in the Medicaid program receive automatic rate increases, and other than nursing facilities, no other providers in the Medicaid program receive automatic rate increases as a result of state law. Other providers that receive automatic increases, such as pharmacies receive these increases because of requirements in federal law. Revisions to rates for other providers are subject to annual appropriation by the General Assembly.

# Problem or Opportunity:

Certain existing reimbursement rates are not aligned with appropriate benchmarks, and this can result in an inefficient use of state funds. Proper alignment of provider rates enables the Department to allocate its resources across provider types in a fair manner. Additionally, the State is facing a shortage of General Fund revenue as a result of the COVID-19 pandemic and accompanying economic downturn. Reductions to provider reimbursement are necessary to achieve a balanced budget.

### **Proposed Solution:**

The Department requests a combination of across-the-board and targeted rate changes in order to save \$41,349,862 total funds including \$15,751,002 General Fund in FY 2021-22 and \$64,726,693 total funds, including \$27,251,639 General Fund in FY 2022-23 and future years. The requested reduction would help alleviate the budget shortfall and align some targeted rates with various benchmarks. The Department also requests that savings from cash funds are repurposed each year ongoing to provide ongoing General Fund relief. Repurposing cash funds requires statutory changes.

The Department believes this request is on Step 2, "Identify Outputs" of the Office of State Planning and Budgeting (OSPB) Evidence Continuum. The Department routinely monitors the relationships between changing rates for services and access to care issues. The Department believes the proposed rates do not lead to any access to care issues; however, provider behavior can change based on the proposed changes to provider reimbursement of services. The Department conducts analysis of access to care when amending the state plan for rate change proposals. Additionally, the Medicaid Provider Rate Review Committee (MPRRAC) reviews rates and access to care issues for Colorado Medicaid's rates. The MPRRAC committee supplies an annual report every May 1st highlighting areas of potential access to care issues and rate evaluations.

# **Targeted Rate Reduction**

#### Anesthesia Rate Reduction

The Department requests to reduce the Anesthesia rates to 100.00% of the rate comparison benchmark – the current Medicare conversion factor. The results of the 2017 Medicaid Provider Rate Review Analysis Report revealed that the Department's payments for anesthesia services were above 100.00% of the benchmark. This recommendation aligns with the MPRRAC's support of the Department recommendation to reduce anesthesia rates to 100% of the benchmark. The Department requested to reduce anesthesia rates to 100.00% of the benchmark as part of FY 2019-20 R-13, "Provider Rate Adjustments." The General Assembly approved a partial reduction, but the rates remain well above Medicare, at 120% of the benchmark rate. The Department is requesting an additional reduction to 100.00% of the benchmark, in line with the MPRRAC's support of the Department recommendation.

#### Allergy Testing Rate Reduction

The Department requests to reduce a component of allergy testing rates to the commercial benchmark in FY 2021-22 and ongoing. Allergy testing includes preparation of the antigens and administration of the test. Payment for the preparation of the antigens can be reduced to rates comparable to payment from other providers. Such reduction is unlikely to decrease access to allergy testing because the new rate would be consistent with the other payors' reimbursement rates. The reimbursement for administering the test would remain the same.

#### Benchmark Certain Rates to Medicare

The Department requests to rebalance the Durable Medical Equipment (DME) and the Ambulatory Surgical Centers (ASCs) rates to 100.00% of 2020 Medicare rates in FY 2021-22 and ongoing. In the 2020 MPRRAC report, the Department found that prosthetics, orthotics, and supplies range from 4.46% to 1,233.91% of the rate benchmark comparison using Medicare or eight other states' Medicaid rates. Through the 2019 rate review process, the Department found that payments for ASCs range from 29.71% to 139.02% of the benchmark rate, based on twelve other states' Medicaid rates. The Department's proposal would only decrease rates of codes that had reimbursements in excess of 100.00% of Medicare rates for the prosthetics, orthotics, and ASCs.

This would increase equity with other services that are paid below Medicare rates while providing additional relief for the State's budget.

# Repricing Pulse Oximeter Rental Rates

The Department requests to reduce the rental price of pulse oximeters to align with the purchase pricing in FY 2021-22 and ongoing. The Department's current rental pricing is significantly higher compared to the rental price of other durable medical equipment (DME). The Department spends approximately 10.00% of the price renting a piece of durable medical equipment compared to the price of buying that same piece of equipment. The Department found that with Pulse Oximeters the rental price was approximately 48.67% of the purchase price for pulse oximeters. The Department's proposal would bring the pulse oximeter rental pricing in line with other rental-purchase price ratios.

#### Lab Testing Code Rate Reduction

The Department requests to reduce the drug testing service's rates to 80.00% of the Medicare rates in FY 2021-22 and ongoing to align the Department's definitive drug testing policy with Medicare's policy.

# Reducing Outpatient Hospital Physician Administered Drug Rates

The Department requests to reduce the rates for Outpatient Hospital Physician Administered Drugs in order to reduce the amount that hospitals receive for drugs purchased using section 340B pricing.<sup>1</sup> The Department would implement this reduction by reducing the Enhanced Ambulatory Patient Grouping (EAPG) weights by 35.00% from 20.00% for claims associated with 340B drugs in FY 2021-22 and ongoing. When the EAPG methodology was first implemented in October 2016, the Department reduced rates for the EAPG pricing list by 50.00%. The Department's proposal aligns the current reduction rate closer to historical pricing, and is more in line with the current pricing ceiling list.

#### Nursing Facility Rate Growth Limit

The Department requests to remove the 2.00% maximum allowable rate increase for nursing facilities and to hold nursing facility rates constant in FY 2021-22. If this growth limit is left in place, the Department anticipates that nursing facility rates would grow by the maximum allowable 2.00% based on historic growth. Implementing this reduction would require a statutory change to amend section 25.5-6-202, C.R.S. to remove the allowable growth factor for nursing facility per diem rates in FY 2021-22 and ongoing. It is the Department's intent that any nursing facility rate increases would be subject to annual appropriation by the General Assembly.

#### **Required Statutory Changes for Cash Fund Savings**

In order to maximize General Fund savings, the Department is requesting to repurpose cash funds to offset General Fund costs in Medicaid in the amount of the expected reductions. For this request,

<sup>&</sup>lt;sup>1</sup> https://www.hrsa.gov/opa/index.html

the changes would requirement amendments to the allowable uses of the HAS Fee (section 25.5-4-402.4, C.R.S.), amendments to the allowable uses of the Unclaimed Property Trust Fund (section 38-13-116.5, C.R.S.) and amendments to the allowable uses of the Breast and Cervical Cancer Prevention and Treatment Fund (section 25.5-5-308, C.R.S.).

# **Anticipated Outcomes:**

The Department anticipates that the proposed changes would help the Department achieve its Wildly Important Goal #2 of Medicaid Cost Control by reducing the reimbursement rates for several targeted providers and for providers across the board. The Department is proposing reasonable targeted rate decreases that align with findings through the rate review process or through internal research that are anticipated to not lead to any access to care issues.

#### Assumptions and Calculations:

For the following reductions, the Department estimates that the FY 2021-22 impact would be  $11/12^{th}$  of the full year impact due to the lag between when claims are incurred and when they are paid, and the statutory requirement that the Medicaid program uses cash accounting. To implement the proposed changes, the Department would need to submit State Plan Amendments to the Centers for Medicare and Medicaid Services (CMS) and to change its rules through the Medical Services Board (MSB). The Department estimates that it would take three months to obtain the authority to make this change. The Department would proactively submit State Plan Amendments and regulatory changes so that the Department could implement reductions on July 1, 2021.

The Department's calculations for each reduction are shown in the appendix.

The Department has used the most recent data available to calculate the impact of rate reductions. Because the COVID-19 pandemic dramatically affected FY 2019-20 expenditure, FY 2019-20 data may not be indicative of future expenditure; therefore, in some cases, the Department has used older data. The Department assumes that the incremental reductions calculated will be representative of the true budget savings regardless of the data used, as both the baseline and the expenditure reduction would be increased by approximately the same amounts due to trend. The Department would use the regular budget process in the future to account for the difference between projected and actual savings.

#### Anesthesia Rate Reduction

The Department calculated the impact of reducing the anesthesia rates to the Medicare rates based on the difference between FY 2018-19 anesthesia expenditure based on FY 2018-19 utilization multiplied by the current rates and the FY 2018-19 utilization multiplied by the Medicare rates.

### Allergy Testing Rate Reduction

The current rate for allergy testing is \$7.40. The proposed rate is \$3.60. The Department calculated the full year impact of the rate reduction based on multiplying the difference by the CY 2019 utilization.

#### Benchmark Certain Rates to Medicare

The Department calculated the impact of setting certain rates to the Medicare benchmark based on the difference between FY 2017-18 expenditure for prothesis, orthotics, and supplies and the FY 2017-18 utilization multiplied by the Medicare rates.

#### Repricing Pulse Oximeter

The Department calculated the full year impact of repricing the pulse oximeter rates testing code based on the difference between FY 2018-19 expenditure of pulse oximeter rentals and the FY 2018-19 utilization multiplied by the proposed rates.

# **Lab Testing Code Rate Reduction**

The Department calculated the full year impact of reducing the lab testing code rates to 80.00% of the Medicare rates based on the difference between FY 2018-19 lab testing expenditure and FY 2018-19 utilization multiplied by the proposed rate methodology of 80.00% of Medicare

# Reducing Outpatient Hospital Physician Administered Drug Rates

The Department calculated the full year impact of reducing the Outpatient Hospital Physician Administered Drug rates as the difference between the estimated FY 2020-21 expenditure, assuming caseload growth from FY 2018-19, and the estimated FY 2020-21 expenditure using the proposed lower discount percentage for 340B drugs.

#### Nursing Facility Rate Growth Limit

The Department would absorb the work associated with changing regulations and calculating rates in FY 2020-21 to match the revised statutory language. Legislation is required to amend section 25.5-6-202, C.R.S. to remove the allowable growth factor for nursing facility per diem rates.

	Table 1.1								
	Summary by Line Item								
	FY 2021-22								
Ro	w Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
	(2) Medical Services Premiums, Medical and Long-							·	

\$0

\$0

(\$25,598,860) NA

Row A

(\$41,349,862)

0.0

(\$15,751,002)

	Table 1.2								
	Summary by Line Item								
	FY 2022-23								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(2) Medical Services Premiums, Medical and Long- Term Care Services for Medicaid Eligible	(\$64,726,693)	0.0	(\$27,251,639)	\$0	\$0	(\$37,475,054)	NA	Table 2.2 Row I
В	Total Request	(\$64,726,693)	0.0	(\$27,251,639)	\$0	\$0	(\$37,475,054)	NA	Row A

B Total Request

#### Table 2.1 Summary by Initiative FY 2021-22

	-								
Rov	/ Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Anesthesia Rate Reduction	(\$5,959,562)	0.0	(\$1,904,319)	(\$245,399)	\$0	(\$3,809,844)	NA	Table 3.1 Row E
В	Allergy Testing Rate Reduction	(\$694,456)	0.0	(\$161,298)	(\$38,594)	\$0	(\$494,564)	NA	Table 3.2 Row G
С	Benchmark Certain Rates to Medicare	(\$1,360,741)	0.0	(\$546,717)	(\$35,307)	\$0	(\$778,717)	NA	Table 3.3 Row E
D	Repricing Pulse Oximeter	(\$458,993)	0.0	(\$184,413)	(\$11,910)	\$0	(\$262,670)	NA	Table 3.4 Row E
Е	Lab Testing Code Rate Reduction	(\$12,587,595)	0.0	(\$2,923,654)	(\$699,548)	\$0	(\$8,964,393)	NA	Table 3.5 Row E
F	Outpatient Hospital Physician Administered Drugs	(\$6,546,978)	0.0	(\$1,805,502)	(\$323,572)	\$0	(\$4,417,904)	NA	Table 3.6 Row E
G	Remove Nursing Facility Rate Growth Limit	(\$13,741,537)	0.0	(\$6,870,769)	\$0	\$0	(\$6,870,768)	50.00%	Table 4.1 Row C
Н	Cash Fund Transfer to Offset the General Fund	\$0	0.0	(\$1,354,330)	\$1,354,330	\$0	\$0	N/A	
I	Total Request	(\$41,349,862)	0.0	(\$15,751,002)	\$0	\$0	(\$25,598,860)	NA	Sum of Rows A through H

#### Table 2.2 Summary by Initiative FY 2022-23

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Anesthesia Rate Reduction	(\$6,456,192)	0.0	(\$2,063,012)	(\$265,849)	\$0	(\$4,127,331)	NA	Table 3.1 Row E
В	Allergy Testing Rate Reduction	(\$752,328)	0.0	(\$174,740)	(\$41,810)	\$0	(\$535,778)	NA	Table 3.2 Row G
С	Benchmark Certain Rates to Medicare	(\$1,474,136)	0.0	(\$592,277)	(\$38,249)	\$0	(\$843,610)	NA	Table 3.3 Row E
D	Repricing Pulse Oximeter	(\$497,243)	0.0	(\$199,781)	(\$12,903)	\$0	(\$284,559)	NA	Table 3.4 Row E
Е	Lab Testing Code Rate Reduction	(\$12,587,595)	0.0	(\$2,923,654)	(\$699,548)	\$0	(\$8,964,393)	NA	Table 3.5 Row E
F	Outpatient Hospital Physician Administered Drugs	(\$7,092,560)	0.0	(\$1,955,959)	(\$350,537)	\$0	(\$4,786,064)	NA	Table 3.6 Row E
G	Remove Nursing Facility Rate Growth Limit	(\$35,866,639)	0.0	(\$17,933,320)	\$0	\$0	(\$17,933,319)	50.00%	Table 4.2 Row C
Н	Cash Fund Transfer to Offset the General Fund	\$0	0.0	(\$1,408,896)	\$1,408,896	\$0	\$0	N/A	
I	Total Request	(\$64,726,693)	0.0	(\$27,251,639)	\$0	\$0	(\$37,475,054)	NA	Sum of Rows A through H

	Table 3.1 Reduction to Anesthesia Rates								
Row	Item	FY 2021-22	FY 2022-23	Notes/Calculations					
Α	Claims Priced at 100% of the Medicare Rate	\$30,677,282	\$30,677,282	FY 2018-19 Expenditure under Medicare Rates					
В	Claims Priced at Current Medicaid Rates	\$37,133,474	\$37,133,474	FY 2018-19 Expenditure under Current Rates					
С	Incremental Difference	(\$6,456,192)	(\$6,456,192)	Row A - Row B					
D	Percentage of the Year Affected	92.31%	100.00%	First year is reduced due to cash accounting					
E	Estimated Impact of Reduction to 100% of Medicare Rates	(\$5,959,562)	(\$6,456,192)	Row C - Row D					

	Table 3.2 Allergy Testing Rate Decrease								
Row	Item	FY 2021-22	FY 2022-23	Notes/Calculations					
Α	Current Rate for Allergy Testing	\$7.40	\$7.40						
В	Proposed Rate for Allergy Testing	\$3.60	\$3.60						
С	Difference in Rates	(\$3.80)	(\$3.80)	Row B - Row A					
D	Estimated Annual Utilization	197,981	197,981	CY 2019 Utilization					
Е	Estimated Impact of Reducing Allergy	(\$752,328)	(\$752 328)	Row C * Row D					
L	Testing Rates	(\$732,326)	(\$752,520)	Row C Row D					
F	Percentage of the Year Affected	92.31%	100.00%	First year is reduced due to cash accounting					
G	Estimated Impact of Reduction to 100% of	(\$694,456)	(\$752,328)	Row E * Row F					
	Medicare Rates								

	Table 3.3 Benchmarking Certain Rates to Medicare								
Row	Item	FY 2021-22	FY 2022-23	Notes/Calculations					
A	Benchmark Prosthetics, Orthotics, and Supplies to 100% of Medicare	(\$1,416,918)	(\$1,416,918)	Based on FY 2017-18 Utilization					
В	Benchmark Ambulatory Surgery Centers to 100% of Medicare	(\$57,218)	(\$57,218)	Based on FY 2017-18 Utilization					
C	Total Decrease in Expenditure from Benchmarking Rates to Medicare	(\$1,474,136)	(\$1,474,136)	Row A + Row B					
D	Percentage of the Year Affected	92.31%	100.00%	First year is reduced due to cash accounting					
E	Estimated Impact of Reduction to 100% of Medicare Rates	(\$1,360,741)	(\$1,474,136)	Row C - Row D					

	Table 3.4 Repricing Pulse Oximeter							
Row	Item	FY 2021-22	FY 2022-23	Notes/Calculations				
Α	FY 2018-19 Expenditure under current rates	\$637,591	\$637,591					
В	FY 2018-19 Expenditure under proposed rates	\$140,348	\$140,348					
C	Incremental Difference	(\$497,243)	(\$497,243)	Row B - Row A				
D	Percentage of the Year Affected	92.31%	100.00%	First year is reduced due to cash accounting				
E	Estimated Impact of Reduction to 100% of Medicare Rates	(\$458,993)	(\$497,243)	Row C - Row D				

	Table 3.5 Repricing Lab Testing Code Rates									
Row	Item	FY 2021-22	FY 2022-23	Notes/Calculations						
Α	FY 2018-19 Expenditure under current rates	\$32,193,796	\$32,193,796							
В	FY 2018-19 Expenditure under 80% of Medicare rates	\$19,606,201	\$19,606,201							
C	Incremental Difference	(\$12,587,595)	(\$12,587,595)	Row B - Row A						
D	Percentage of the Year Affected	92.31%	100.00%	First year is reduced due to cash accounting						
E	Estimated Impact of Reduction to 100% of Medicare Rates	(\$11,619,318)	(\$12,587,595)	Row C - Row D						

	Table 3.6 Reducing Outpatient Hospital Physician Administered Drugs Rates									
Row	Item	FY 2021-22	FY 2022-23	Notes/Calculations						
Α	FY 2018-19 Expenditure under current rates	\$38,702,635	\$38,702,635							
В	FY 2018-19 Expenditure under proposed rates	\$31,610,075	\$31,610,075							
C	Incremental Difference	(\$7,092,560)	(\$7,092,560)	Row B - Row A						
D	Percentage of the Year Affected	92.31%	100.00%	First year is reduced due to cash accounting						
H).	Estimated Impact of Reduction to 100% of Medicare Rates	(\$6,546,978)	(\$7,092,560)	Row C - Row D						

	Table 4.1 FY 2021-22 Impact of Eliminating Maximum Allowable 2% Rate Growth for Nursing Facilities										
Row	Row Item Total Funds General Fund Cash Funds Reappropriated Funds Notes/Calculated Funds										
A	Estimated Expenditure with 2% Growth For FY 2021-22 Nursing Facility Rates	\$756,568,515	\$378,284,258	\$0	\$0	\$378,284,258	Table 4.3 Row I				
В	Estimated Expenditure with 0% Growth For FY 2021-22 Nursing Facility Rates	\$742,826,978	\$371,413,489	\$0	\$0	\$371,413,489	Table 4.4 Row I				
С	Estimated Savings from removal of 2% Growth trend	(\$13,741,537)	(\$6,870,769)	\$0	\$0	(\$6,870,769)	Row B - Row A				

	Table 4.2 FY 2022-23 Impact of Eliminating Maximum Allowable 2% Rate Growth for Nursing Facilities										
Row	Item	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations					
A	Estimated Expenditure with 2% Growth For FY 2022-23 Nursing Facility Rates	\$782,048,658	\$391,024,329	\$0	\$0	\$391,024,329	Table 4.3 Row I				
В	Estimated Expenditure with 0% Growth For FY 2022-23 Nursing Facility Rates	\$746,182,019	\$373,091,010	\$0	\$0	\$373,091,010	Table 4.4 Row I				
С	Estimated Savings from removal of 2% Growth trend	(\$35,866,639)	(\$17,933,320)	\$0	\$0	(\$17,933,320)	Row B - Row A				

	Table 4.3 - Nursing Facility Expenditure Projections with 2% Annual Rate Increase									
Row	Item	FY 2020-21	FY 2021-22	FY 2022-23	Description					
A	Estimated Medicaid Reimbursement (Per Day)	\$202.03	\$206.06	\$212.24	Based on Department's November 1, 2020 forecast					
В	Estimate of Patient Days	3,642,078	3,670,805	3,670,875	Based on Department's November 1, 2020 forecast					
C	Total Estimated Costs for Days of Service	\$735,809,018	\$756,406,078	\$779,106,510	Row A * Row B					
D	Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	92.89%	92.89%	92.89%	Based on Department's November 1, 2020 forecast					
Е	Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$683,492,997	\$702,625,606	\$723,712,037	Row C * Row D					
F	Estimated Expenditure for Prior Fiscal Year Dates of Service	\$50,336,616	\$52,316,021	\$53,780,472	Based on Department's November 1, 2020 forecast					
G	Total Estimated Nursing Facility Service Expenditure	\$733,829,613	\$754,941,627	\$777,492,509	Row E + Row F					
Н	Total Estimated Nursing Facility Bottom Line Impacts	\$196,889	\$1,626,888	\$4,556,149	Based on Department's November 1, 2020 forecast					
I	Total Estimated Nursing Facility Service Expenditure Adjusted for Bottom Line Impacts	\$734,026,502	\$756,568,515	\$782,048,658	Row G + Row H					

	Table 4.4 - Nursing Facility Expenditure Projections with 0% Annual Rate Increase										
Row	Item	FY 2020-21	FY 2021-22	FY 2022-23	Description						
A	Estimated Medicaid Reimbursement (Per Day)	\$202.03	\$202.03		Eliminating maximum allowable growth rate in FY 2021- 22 and FY 2022-23						
В	Estimate of Patient Days (without Hospital Back Up)	3,642,078	3,670,805	3,670,875	Based on Department's November 1, 2020 forecast						
С	Total Estimated Costs for Days of Service	\$735,809,018	\$741,612,734	\$741,626,876	Row A * Row B						
D	Estimated Percentage of Claims Paid in Current Year with Current Year Dates of Service	92.89%	92.89%	92.89%	Based on Department's November 1, 2020 forecast						
Е	Estimated Expenditure for Claims Paid in Current Year with Current Year Dates of Service	\$683,492,997	\$688,884,069	\$688,897,205	Row C * Row D						
F	Estimated Expenditure for Prior Fiscal Year Dates of Service	\$50,336,616	\$52,316,021	\$52,728,665	Based on Department's November 1, 2020 forecast						
G	Total Estimated Nursing Facility Service Expenditure	\$733,829,613	\$741,200,090	\$741,625,870	Row E + Row F						
Н	Total Estimated Nursing Facility Bottom Line Impacts	\$196,889	\$1,626,888	\$4,556,149	Based on Department's November 1, 2020 forecast						
I	Total Estimated Nursing Facility Service Expenditure Adjusted for Bottom Line Impacts	\$734,026,502	\$742,826,978	\$746,182,019	Row G + Row H						

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request	Funding Request for The FY 2021-22 Budget Cycle							
Request Title								
R-17 Medicaid Benefit Adjustments								
Dept. Approval By:  OSPB Approval By:  OSPB Approval By:		Supplemental FY 2020-21						
Oci B Apploval By.	<u> </u>	Budget Amendment FY 2021-22						
	<u>x</u>	Change Request FY 2021-22						

	_	FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,456,848	\$0	\$8,984,259,238	(\$7,164,645)	(\$7,955,920)
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$2,245,290,097	\$0	\$2,422,751,497	(\$3,614,741)	(\$4,010,379)
Impacted by Change Request	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$0	\$0
. toquoot	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
	FF	\$5,346,276,891	\$0	\$5,315,964,548	(\$3,549,904)	(\$3,945,541)

		FY 2020-21		FY 202	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	(\$7,099,806)	(\$7,891,081)
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$3,549,902)	(\$3,945,540)
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$0	\$0
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
	FF	\$5,346,276,891	\$0	\$5,315,964,548	(\$3,549,904)	(\$3,945,541)
	Total	\$64,894	\$0	\$64,839	(\$64,839)	(\$64,839)
04. Office of Community	FTE	0.0	0.0	0.0	0.0	0.0
Living, (A) Division of Intellectual and	GF	\$64,894	\$0	\$64,839	(\$64,839)	(\$64,839)
Developmental Disabilities, (3) State	CF	\$0	\$0	\$0	\$0	\$0
Only Programs -	RF	\$0	\$0	\$0	\$0	\$0
Preventative Dental Hygiene	FF	\$0	\$0	\$0	\$0	\$0

		Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

FY 2021-22 Funding Request

November 1, 2020



Jared Polis Governor

Kim Bimestefer Executive Director

# **Department Priority: R-17 Request Detail: Medicaid Benefit Adjustments**

Summary of Funding Change for FY 2021-22									
	Tot	tals	<b>Incremental Change</b>						
	FY 2020-21 Appropriation	FY 2021-22 Base	FY 2021-22 Request	FY 2022-23 Request					
Total Funds	\$9,026,456,848	\$8,984,259,238	(\$7,164,645)	(\$7,955,920)					
FTE	0.0	0.0	0.0	0.0					
General Fund	\$2,245,290,097	\$2,422,751,497	(\$3,614,741)	(\$4,010,379)					
Cash Funds	\$1,393,285,900	\$1,201,917,467	\$0	\$0					
Reappropriated Funds	\$41,603,960	\$43,625,726	\$0	\$0					
Federal Funds	\$5,346,276,891	\$5,315,964,548	(\$3,594,904)	(\$3,945,541)					

### Summary of Request:

In order to reduce Medicaid spending in response to the State's revenue shortfalls, the Department requests to implement targeted benefit reductions in the Medicaid program. These changes include setting a limit on outpatient speech therapy evaluations, implementing an enrollment cap on the Program of All-Inclusive Care for the Elderly, and eliminating funding for the state-only preventive dental hygiene program. These reductions align with the Department's Wildly Important Goal #2 of Medicaid Cost Control by providing appropriate limits on certain benefits. This request represents a decrease of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation.

The outpatient speech therapy benefit and Program for All-Inclusive Care for the Elderly are aligned with Step 4 on the Evidence Continuum based on the robust national literature evaluating their effectiveness. The preventive dental hygiene program is aligned with Step 2 on the Evidence Continuum as it has not been evaluated in depth.



# Current Program:

The Department sets limits on services to effectively administer the Medicaid and CHP+ programs, including overall caps and prior authorization processes when appropriate.

The preventive dental hygiene program line item supports outreach services to individuals with intellectual and developmental disabilities needing dental care with dentists willing to provide probono dental care. Funding also goes to train members receiving services and staff about preventive dentistry and to educate both populations about how to access dental care.

# Problem or Opportunity:

As a result of the COVID-19 pandemic and accompanying economic downturn, the State is facing a shortage of General Fund revenue. Budget cuts and cash fund transfers are necessary to achieve a balanced budget.

# **Outpatient Speech Therapy Evaluations**

The Department does not currently require a prior authorization request for speech therapy evaluations. An evaluation is completed to determine whether a member would benefit from speech therapy. Of the members who received speech therapy evaluations in FY 2018-19, 80% received one evaluation and 90% received two or fewer evaluations. The remaining 10% of members received excessive quantities of evaluations, some more than fifty per year.

# Program of All-Inclusive Care for the Elderly

Enrollment in the Program for All Inclusive Care for the Elderly (PACE) has grown significantly recently, by 75% over the last five years, and is projected to continue to grow by 8% per year going forward. The Department spends more on average for enrollees on PACE compared to enrollees enrolled in the Home and Community Based Services (HCBS) program through the Elderly, Blind, and Disabled waiver.

#### **Preventive Dental Hygiene Program**

This program uses state-only funding to provide outreach to members. The program does not provide any direct services, which are funded separately and are paid for with a federal match.

# **Proposed Solution:**

The Department requests a reduction of \$7,164,645 total funds, \$3,614,741 General Fund in FY 2021-22 and \$7,955,920 total funds, \$4,010,379 General Fund in FY 2022-23 and ongoing to implement targeted benefit reductions. These changes include setting a limit on outpatient speech therapy evaluations, implementing an enrollment cap on the Program of All-Inclusive Care for the Elderly, and eliminating funding for the preventive dental hygiene program.

# Limit Outpatient Speech Therapy Evaluations to Two Per Year

The Department requests a reduction of \$704,803 total funds, \$352,401 General Fund in FY 2021-22 and ongoing to implement a cap on speech therapy evaluations of two per year. This is a reasonable limit for this service and would ensure appropriate utilization.

Outpatient speech therapy can only be covered if it is medically necessary for the member's condition. It is a required benefit for children under Early and Periodic Screening, Diagnostic and Treatment (EPSDT). The Department does not collect data to determine whether speech therapy was effective on a case-by-case basis, however each request for outpatient speech therapy is scrutinized by the Department to ensure it meets medical necessity criteria. A report<sup>1</sup> by the Center for Evidence-based Policy, Medicaid Evidence-based Decisions Project, reviewed studies on the effectiveness of speech therapy interventions and found mixed results. Speech therapy was generally associated with improvements in certain areas, but it was found to be no more effective than social immersion for certain speech language deficits for children. This indicates that speech therapy is on Step 4 of the Evidence Continuum due to the robust volume and rigor of studies evaluating the effectiveness of speech therapy intervention.

# Implement an Enrollment Cap for the Program of All-Inclusive Care for the Elderly

The Department requests a reduction of \$6,395,003 total funds, \$3,197,501 General Fund in FY 2021-22 and \$7,186,278 total funds, \$3,593,139 General Fund in FY 2022-23 and ongoing to implement an aggregate enrollment cap for the Program for All-Inclusive Care for the Elderly. PACE organizations would gain new enrollments as other people leave the program. The cap would remain in place until the General Assembly approved funding to allow for additional enrollments. This results in savings, at least in the short term, because the PACE organizations are paid through capitated rates that are calculated based on the expected costs incurred by members throughout their lifetimes. Newly enrolled members are younger and incur less costs on average outside of PACE. The average annual cost of a PACE enrollee is about \$51,000, compared to the average cost of a member over the age of 65 on the Elderly, Blind, and Disabled waiver of about \$27,000.

Capping enrollment would not result in any reduction in member access to critical benefits, including acute care services, behavioral health care, and personal care and homemaker services through the Home and Community Based Services waivers. Members who are interested in enrolling in the PACE program would be able to access these other services if enrollments are unavailable due to the enrollment cap.

<sup>&</sup>lt;sup>1</sup> Thielke, Aasta, Allison Leof, Amy Harris, and Valerie King. "Speech Language Pathology for Children Under Six: Comprehensive Report." *Center for Evidence-based Policy; Medicaid Evidence-based Decisions Project (MED)*. Oregon Health and Science University, September 2013. www.ohsu.edu/ohsuedu/research/policycenter/med/index.cfm.

The PACE program is on Step 4 of the Evidence Continuum. There are several studies evaluating the PACE program. The Department has reviewed national studies that indicate PACE improves care quality and access to services, with strong evidence in a decrease of inpatient hospitalization. In January 2014, the federal Department of Health and Human Services commissioned a study<sup>2</sup> that showed PACE had no significant effect on Medicare costs, but is associated with higher Medicaid costs. However, the Department is aware of another study conducted by Duke University<sup>3</sup> showing savings to both Medicare and Medicaid. Given the conflicting evidence, it is unclear if PACE saves Colorado money in the long term. The Department has only recently started receiving detailed encounter data from PACE organizations necessary to better understand the services provided. Over time the encounter data can be used to develop performance measures.

# **Eliminate Preventive Dental Hygiene Program**

The Department requests a reduction of \$64,839 total funds, all of which is General Fund, to eliminate funding for the state-only preventive dental hygiene program. The Department believes this service is on Step 2, "Identify Outputs" of the Office of State Planning and Budgeting (OSPB) Evidence Continuum. The preventive dental hygiene program, which does not actually provide dental services, has not been studied in depth. However, there are many studies that show the connection between poor oral health and systemic diseases that are impacted by oral health. For example, the Kaiser Family Foundation (KFF) article "Access to Dental Care in Medicaid: Spotlight on Nonelderly Adults" references several studies showing that the detrimental effects of poor oral health and lack of access to services among low-income adults leads to higher risk for diabetes, cardiovascular disease and stroke. In addition, there is research that showing average medical cost of treating patients with multiple chronic conditions is lower when a Medicaid program includes preventative oral coverage.<sup>5</sup>

#### **Anticipated Outcomes:**

These policy changes would help the Department achieve its Wildly Important Goal #2 of Medicaid Cost Control by reducing costs through reasonable benefit reductions. The Department is proposing a reasonable limit for speech therapy evaluations that would still ensure appropriate access. The Department's proposal to cap enrollment growth into PACE would help reduce costs,

<sup>&</sup>lt;sup>2</sup>Ghosh, Arkadipta, Cara Orfield, and Robert Schmitz. "Evaluating PACE: A Review of the Literature." *Mathematica*. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, Office of Disability, Aging and Long-Term Care Policy, January 2014. www.mathematica.org/our-publications-and-findings/publications/evaluating-pace-a-review-of-the-literature.

<sup>&</sup>lt;sup>3</sup>Wieland, Darryl, Bruce Kinosian, Eric Stallard, and Rebecca Boland. "Does Medicaid Pay More to a Program of All-Inclusive Care for the Elderly (PACE) Than for Fee-for-Service Long-term Care?" Journal of Gerontology: MEDICAL SCIENCES, January 2013. 47–55. doi:10.1093/gerona/gls137.

<sup>&</sup>lt;sup>4</sup>Hinton, Elizabeth and Julia Paradise. "Access to Dental Care in Medicaid: Spotlight on Nonelderly Adults." The Kaiser Commission on Medicaid and the Uninsured, March 2016. www.kff.org/medicaid/issue-brief/access-to-dental-care-in-medicaid-spotlight-on-nonelderly-adults/view/footnotes/#footnote-178966-4.

<sup>&</sup>lt;sup>5</sup> Singhal, Ashta, Daniel J Caplan, Michael P Jones, Elizabeth T Momany, Raymond A Kuthy, Christopher T Buresh, Robert Isman, and Peter C Damiano. "California Led To Increased Dental Emergency Visits And Associated Costs." *Project HOPE— The People-to-People Health Foundation, Inc.* Health Affairs, May 2015. Vol. 34, No. 5. doi:org/10.1377/hlthaff.2014.1358.

particularly in the short term, as services for newly enrolled members into PACE would cost much less outside of that delivery system. The preventive dental hygiene program provides outreach and education but does not include direct services to members. Members enrolled in waivers for individuals with intellectual and developmental disabilities would continue to have access to Medicaid dental benefits.

# Assumptions and Calculations:

The Department would need to submit State Plan Amendments to the Centers for Medicare and Medicaid Services (CMS) and to change its rules through the Medical Services Board (MSB) to implement the speech therapy evaluation and PACE enrollment cap policy changes. The Department would proactively submit State Plan Amendments and regulatory changes so that the Department could implement reductions on July 1, 2021.

# Limit Outpatient Speech Therapy Evaluations to Two Per Year

The Department estimated savings from implementing the proposed limit by analyzing claims data to identify members who received over two evaluations in FY 2018-19. The Department multiplied the total evaluations that exceeded two per member by the average paid amount for an evaluation. These costs would be avoided by establishing the limit through a prior authorization.

# Implement an Enrollment Cap for the Program of All-Inclusive Care for the Elderly

The Department assumes that there would still be some growth in the PACE program, as the cap would be designed to allow for enough growth to ensure the viability of organizations. The Department estimates that it would cap enrollment at final FY 2020-21 enrollment level plus 25% of the projected growth in the program, for a projected maximum enrollment of 5,266 in FY 2021-22 and 5,562 in FY 2022-23 across all PACE providers. To estimate savings, the Department multiplied the reduction in projected enrollments by the difference in average costs between PACE and members enrolled in the Elderly, Blind, and Disabled waiver.

### **Eliminate Preventive Dental Hygiene Program**

The Department estimates the impact from eliminating the preventive dental hygiene program based on the full amount that was appropriated for this program in the FY 2020-21 Long Bill.

#### R-17 Medicaid Benefit Adjustments Appendix A: Assumptions and Calculations

	Table 1.1 Summary by Line Item FY 2021-22										
Row	DOW Line Item Total Funds FTE General Fund Cash Funds Reappropriated Federal Funds Notes/Calculations										
Α	(2) Medical Services Premiums	(\$7,099,806)	\$0	(\$3,549,902)	\$0	\$0	(\$3,549,904)	Table 2.1 Row A + Row B			
В	(4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities, Preventive Dental Hygiene	(\$64,839)	\$0	(\$64,839)	\$0	\$0	\$0	Table 2.1 Row C			
C	Total Request	(\$7,164,645)	\$0	(\$3,614,741)	\$0	\$0	(\$3,549,904)	Row A + Row B			

	Table 1.2 Summary by Line Item FY 2022-23											
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations				
Α	(2) Medical Services Premiums	(\$7,891,081)	\$0	(\$3,945,540)	\$0	\$0	(\$3,945,541)	Table 2.2 Row A + Row B				
В	(4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities, Preventive Dental Hygiene	(\$64,839)	\$0	(\$64,839)	\$0	\$0	\$0	Table 2.2 Row C				
C	Total Request	(\$7,955,920)	\$0	(\$4,010,379)	\$0	\$0	(\$3,945,541)	Row A + Row B				

		Table 1.3 Summary by Line Item FY 2023-24										
R	ow	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations			
	A	(2) Medical Services Premiums	(\$7,891,081)	0.0	(\$3,945,540)	\$0	\$0	(\$3,945,541)	Table 2.3 Row A + Row B			
	В	(4) Office of Community Living (A) Division of Intellectual and Developmental Disabilities, Preventive Dental Hygiene	(\$64,839)	0.0	(\$64,839)	\$0	\$0	\$0	Table 2.3 Row C			
	C	Total Request	(\$7,955,920)	0.0	(\$4,010,379)	\$0	\$0	(\$3,945,541)	Row A + Row B			

#### R-17 Medicaid Benefit Adjustments Appendix A: Assumptions and Calculations

#### Table 2.1 Summary by Initiative FY 2021-22

_	1 1 EVM1-EE									
Ro	ow Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	A Limit Outpatient Speech Therapy Evaluations to 2 Per Year	(\$704,803)	0.0	(\$352,401)	\$0	\$0	(\$352,402)	50.00%	Table 3	
I	Implement an Enrollment Cap for the Program of All Inclusive Care for the Elderly	(\$6,395,003)	0.0	(\$3,197,501)	\$0	\$0	(\$3,197,502)	50.00%	Table 4	
(	Preventive Dental Hygiene Reduction	(\$64,839)	0.0	(\$64,839)	\$0	\$0	\$0	0.00%	Current Appropriation	
I	Total Request	(\$7,164,645)	0.0	(\$3,614,741)	\$0	\$0	(\$3,549,904)		Row A + Row B + Row C	

Table 2.2
Summary by Initiative
FY 2022-23

_	11 2022 20									
Rov	v Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations	
A	Limit Outpatient Speech Therapy Evaluations to 2 Per Year	(\$704,803)	0.0	(\$352,401)	\$0	\$0	(\$352,402)	50.00%	Table 3	
В	Implement an Enrollment Cap for the Program of All Inclusive Care for the Elderly	(\$7,186,278)	0.0	(\$3,593,139)	\$0	\$0	(\$3,593,139)	50.00%	Table 4	
С	Preventive Dental Hygiene Reduction	(\$64,839)	0.0	(\$64,839)	\$0	\$0	\$0	0.00%	Current Appropriation	
D	Total Request	(\$7,955,920)	0.0	(\$4,010,379)	\$0	\$0	(\$3,945,541)		Row A + Row B + Row C	

<b>Table 2.3</b>	
Summary by Initiative	
FY 2023-24	

F 1 2025-27									
Ro	w Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Limit Outpatient Speech Therapy Evaluations to 2 Per Year	(\$704,803)	0.0	(\$352,401)	\$0	\$0	(\$352,402)	50.00%	Table 3
В	Implement an Enrollment Cap for the Program of All Inclusive Care for the Elderly	(\$7,186,278)	0.0	(\$3,593,139)	\$0	\$0	(\$3,593,139)	50.00%	Table 4
C	Preventive Dental Hygiene Reduction	(\$64,839)	0.0	(\$64,839)	\$0	\$0	\$0	0.00%	Current Appropriation
D	Total Request	(\$7,955,920)	0.0	(\$4,010,379)	\$0	\$0	(\$3,945,541)		Row A + Row B + Row C

#### R-17 Medicaid Benefit Adjustments Appendix A: Assumptions and Calculations

	Table 3								
Estimated Savings from Limiting Speech Therapy Evaluations to Two Per Year  Row Item FY 2021-22 FY 2022-23 Comment									
A	FY 2018-19 Number of Members Receiving Over Two Evaluations	1,255	1,255	MMIS claims data					
В	FY 2018-19 Average Evaluations Per Person for Members Receiving Over Two Evaluations	6.07	6.07	MMIS claims data					
С	Proposed Cap on Evaluations	2	2	Proposal					
D	FY 2018-19 Number of Additional Evaluations Over Proposed Cap	5,108	5,108	Row A * (Row B - Row C)					
Е	Caseload Trend	15.37%	26.70%	November 1, 2020 Forecast					
F	Projected Number of Additional Evaluations Over Proposed Cap	5,893	6,472	Row D * (1 + Row E)					
G	FY 2018-19 Average Paid Amount Per Evaluation	\$119.60	\$119.60	MMIS claims data					
Н	<b>Estimated Cost Savings</b>	(\$704,803)	(\$774,051)	Row F * Row G					

#### R-17 Medicaid Benefit Adjustments Appendix A: Assumptions and Calculations

	Table 4 Estimated Savings from Freezing New PACE Enrollments								
Row									
A	Current Forecasted Enrollment Growth	367	394	November 1, 2020 Forecast					
В	Estimated Impact of Negotiated Cap	75%	75%	Department would work with PACE organizations to establish reasonable caps specific to each program					
С	Estimated Reduction in Growth	275	296	Row A * Row B					
D	Average Costs of PACE Enrollees	\$50,715.00	\$52,490.03	November 1, 2020 Forecast					
Е	Average Costs of EBD Enrollees	\$27,460.44	\$28,212.06	November 1, 2020 Forecast					
F	F Cost Difference Per Person (\$23,254.56) (\$24,277.97)			Row E - Row D					
G	<b>Estimated Cost Savings</b>	(\$6,395,003)	(\$7,186,278)	Row C * Row F					

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request for The FY	2021-22 Budget C	Cycle
Request Title		
R-18 Behavioral Health Program Adjustments		
Dept. Approval By:		Supplemental FY 2020-21
OSPB Approval By: Carry Carry		Budget Amendment FY 2021-22
	X	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2021-22		
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$945,357,559	\$0	\$1,075,758,611	(\$89,357,696)	(\$46,611,915)	
	FTE	0.0	0.0	0.0	0.0	0.0	
Total of All Line Items	GF	\$246,481,122	\$0	\$272,092,533	(\$23,578,390)	(\$13,662,160)	
Impacted by Change Request	CF	\$54,045,515	\$0	\$62,673,885	\$0	\$0	
. toquoot	RF	\$0	\$0	\$0	\$0	\$0	
	FF	\$644,830,922	\$0	\$740,992,193	(\$65,779,306)	(\$32,949,755)	

	_	FY 202	0-21	FY 20	FY 2022-23		
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$945,357,559	\$0	\$1,075,758,611	(\$89,357,696)	(\$46,611,915)	
03. Behavioral Health	FTE	0.0	0.0	0.0	0.0	0.0	
Community Programs, (A) Behavioral Health	GF	\$246,481,122	\$0	\$272,092,533	(\$23,578,390)	(\$13,662,160)	
Community Programs, (1) Behavioral Health	CF	\$54,045,515	\$0	\$62,673,885	\$0	\$0	
Community Programs - Behavioral Health	RF	\$0	\$0	\$0	\$0	\$0	
Capitation Payments	FF	\$644,830,922	\$0	\$740,992,193	(\$65,779,306)	(\$32,949,755)	

		Auxiliary Data	
Requires Legislation?	YES		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

Jared Polis Governor

Kim Bimestefer Executive Director

November 1, 2020

## <u>Department Priority: R-18</u> Request Detail: Behavioral Health Program Adjustments

	Summary of I	<b>Funding Change fo</b>	or FY 2021-22		
	Tot	tals	<b>Incremental Change</b>		
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23	
	Appropriation	Base	Request	Request	
Total Funds	\$945,357,559	\$1,075,758,611	(\$89,357,696)	(\$46,611,915)	
FTE	0.0	0.0	0.0	0.0	
General Fund	\$246,481,122	\$272,092,533	(\$23,578,390)	(\$13,662,160)	
Cash Funds	\$54,045,515	\$62,673,885	\$0	\$0	
Reappropriated Funds	\$0	\$0	\$0	\$0	
Federal Funds	\$644,830,922	\$740,992,193	(\$65,779,306)	(\$32,949,755)	

#### Summary of Request:

The Department requests to adjust the funding level for the inpatient and residential substance use disorder benefit for FY 2021-22 and future years and reduce the behavioral health value-based payment program by 25%. The reduction in funding for the substance use disorder benefit aligns with current expectations for the level of provider capacity that will be available. These reductions enable to Department to respond to the State's revenue shortfalls while preserving important priorities. For example, the Department is protecting for behavioral health capitated payments for services. This request represents a decrease of approximately 0.74% from the Department's FY 2020-21 Long Bill total funds appropriation.

The inpatient and residential substance use disorder benefit is currently on Step 1 of the evidence continuum, as the benefit has not been implemented yet. The value-based payment program for behavioral health is on Step 3 of the Evidence Continuum, the Department closely monitors each RAE's progress towards achieving the performance targets before and after each payment period, and this evaluation is used to determine if the RAE has earned the payment.

### Current Program:

The Department is implementing an expanded residential and inpatient substance use disorder treatment benefit on January 1, 2021, as authorized by HB 18-1136, "Substance Use Disorder Treatment." The Department requested to reduce the appropriated funding for the first year of implementation of the new benefit in FY 2020-21 R-11, "Patient Placement and Benefit Implementation- Substance Use Disorder" because of anticipated slower ramp up in utilization of the new benefit than initially projected due to provider capacity limits. In the FY 2020-21 Long Bill, the General Assembly removed funding for July-December 2020 to account for a delay in the implementation of the program, and reduced funding for January-June 2021 to 50% of the original amount.

In FY 2018-19, the Department started paying value-based payments to the contracted behavioral health providers based on service performance and quality metrics of up to 5% of the total capitation expenditure paid from the previous fiscal year's services. These payments are passed through by the RAEs to the behavioral health providers.

### Problem or Opportunity:

Based on ongoing analysis of the State's provider network, the RAEs readiness to provide substance use disorder treatment, and the ongoing effects of the COVID-19 pandemic, the Department anticipates that the cost of the expanded benefit will be significantly less than the projected fiscal impact of HB 18-1136 in the first year of implementation (calendar year 2021). The Department is working with an actuary to develop and finalize the rates that will be paid to the RAEs to cover the expanded benefit starting January 1, 2021. Based on this analysis, the Department is projecting that the full year cost of the benefit will remain significantly lower than initially projected in HB 18-1136 through FY 2021-22 because the initial estimate did not account for capacity limitations. Rather than calculating costs based on the number of enrollees with substance use disorders, the more robust actuarial rates model calculates cost based on available beds, considering the level of care recommended by the American Society of Addiction Medicine (ASAM), and estimating the proportion of beds that will be utilized by Medicaid members. This will more accurately reflect the capacity of the system for Medicaid utilization.

Additionally, the Department is facing a challenging budget environment amid revenue shortfalls associated with the pandemic and economic downturn. The Department has examined a broad range of potential budget reduction options, including those related to behavioral health, while protecting important priorities.

### **Proposed Solution:**

The Department requests a reduction of \$89,357,696 total funds, including \$23,578,390 General Fund in FY 2021-22 and a reduction of \$46,611,915 total funds, including \$13,662,160 General Fund in FY 2022-23 and future years in order to meet the budget shortfall. The request would

adjust the funding level for the inpatient and residential substance use disorder benefit for FY 2021-22 and future years and reduce the Behavioral Health value-based payment program by 25%.

### Cost Adjustment for Substance Use Disorder Benefit

The Department is requesting to reduce the funding for the new residential and inpatient substance use disorder treatment benefit. This is consistent with the Department's previous analysis that providers would need time to expand capacity to meet the needs of all members who need residential or inpatient care.

Since the benefit has not been implemented yet, the Department has no data to determine whether these services are effective on a case-by-case basis. However, there are several studies evaluating whether residential and inpatient services are effective for substance use disorders, compared to outpatient services alone. The American Society of Addiction Medicine (ASAM) is continually collecting and conducting research to justify its inclusion of inpatient and residential care in its level of care continuum. This indicates that it is on Step 1 of the Evidence Continuum.

#### Reduction of Behavioral Health Incentive Payment

To reduce expenditure, the Department requests to reduce the Behavioral Health value-based payment program by 25%. This would reduce payments to behavioral health providers for meeting outcome metrics defined in contracts. This would be a reduction to total payments to the RAEs, but it is preferable to reducing the behavioral health capitation rates, which would likely lead to benefit reductions for members. As managed care entities, RAEs have a financial incentive beyond the value-based payment program to meet program quality metrics, such as following up after a behavioral health-related hospitalization. The Department believes the value-based payment program is on Step 3, "Assess Outcomes" of the Office of State Planning and Budgeting (OSPB) Evidence Continuum. While the Department does not have a control group that does not receive an incentive payment, it very closely monitors each RAE's progress towards achieving the performance targets before and after each incentive payment period. That progress is the basis for determining whether the RAE has earned the incentive payment.

### **Required Statutory Changes for Cash Fund Savings**

In order to maximize General Fund savings, the Department is requesting to repurpose cash funds to offset General Fund costs in Medicaid in the amount of the expected reductions. For this request, the changes would requirement amendments to the allowable uses of the HAS Fee (section 25.5-4-402.4, C.R.S.).

#### **Anticipated Outcomes:**

The Department anticipates that the proposed changes would help the Department achieve its Wildly Important Goal #2 of Medicaid Cost Control by reducing payments to the RAEs that are not service payments. RAEs would still be required to meet access and quality metrics. Access to care was identified as the number one concern among clients by the Behavioral Health Task Force, commissioned by the Governor under the Department of Human Services.

### Assumptions and Calculations:

### Cost Adjustment for Substance Use Disorder Benefit

The Department estimated the reduction to the new residential and inpatient substance use disorder treatment benefit as 50% of the currently projected costs for July – December 2021, 63% of the currently projected costs for January – June 2022 based on a linear ramp up, and 80% of currently projected costs for FY 2022-23. The Department would use the regular budget process to account for the actual costs of the program in future years as they are determined.

### Reduction of the Behavioral Health Incentive Payment

The Department estimated savings as 25% of the projected incentive payment amount from FY 2021-22 R-2, "Behavioral Health Community Programs."

		Table 1.1 Summary by Line Item FY 2021-22								
F	Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
	A	(3) Behavioral Health Community Programs, Behavioral Health Capitation Payments	(\$89,357,696)	0.0	(\$23,578,390)	\$0	\$0	(\$65,779,306)	73.61%	Table 2.1 Row E
	В	Total Request	(\$89,357,696)	0.0	(\$23,578,390)	\$0	\$0	(\$65,779,306)		Row A

	Table 1.2 Summary by Line Item FY 2022-23								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(3) Behavioral Health Community Programs, Behavioral Health Capitation Payments	(\$46,611,915)	0.0	(\$13,662,160)	\$0	\$0	(\$32,949,755)	70.69%	Table 2.2 Row E
В	Total Request	(\$46,611,915)	0.0	(\$13,662,160)	\$0	\$0	(\$32,949,755)		Row A

	Table 1.3 Summary by Line Item FY 2023-24								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
I A	(3) Behavioral Health Community Programs, Behavioral Health Capitation Payments	(\$47,900,947)	0.0	(\$14,306,676)	\$0	\$0	(\$33,594,271)	70.13%	Table 2.3 Row E
В	Total Request	(\$47,900,947)	0.0	(\$14,306,676)	\$0	\$0	(\$33,594,271)		Row A

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					Table 2.1				
					nary by Initiativ	e			
					FY 2021-22				T
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Reduction to New Substance Use Disorder Benefit Funding	(\$80,034,644)	0.0	(\$12,939,650)	(\$5,977,214)	\$0	(\$61,117,780)	76.36%	Calculated based on utilization ramp up over time
В	Cash Fund Transfer to Offset General Fund	\$0	0.0	(\$5,977,214)	\$5,977,214	\$0	\$0		General Fund Offset
С	Reduce the Behavioral Health Incentive by 25%	(\$9,323,052)	0.0	(\$2,551,977)	(\$2,109,549)	\$0	(\$4,661,526)	50.00%	Calculated from November Forecast
D	Cash Fund Transfer to Offset General Fund	\$0	0.0	(\$2,109,549)	\$2,109,549	\$0	\$0		General Fund Offset
E	Total Request	(\$89,357,696)	0.0	(\$23,578,390)	\$0	\$0	(\$65,779,306)		Sum Rows A-D
							•		
					Table 2.2				
				Sumi	nary by Initiativ	e			
					FY 2022-23				
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Δ	Reduction to New Substance Use Disorder Benefit Funding	(\$36,587,266)	0.0	(\$5,904,788)	(\$2,745,048)	\$0	(\$27,937,430)	76.36%	Calculated based on utilization ramp up over time
В	Cash Fund Transfer to Offset General Fund	\$0	0.0	(\$2,745,048)	\$2,745,048	\$0	\$0		General Fund Offset
С	Reduce the Behavioral Health Incentive by 25%	(\$10,024,649)	0.0	(\$2,733,564)	(\$2,278,760)	\$0	(\$5,012,325)	50.00%	Calculated from November Forecast
D	Cash Fund Transfer to Offset General Fund	\$0	0.0	(\$2,278,760)	\$2,278,760	\$0	\$0		General Fund Offset
E	Total Request	(\$46,611,915)	0.0	(\$13,662,160)	\$0	\$0	(\$32,949,755)		Sum Rows A-D
					Table 2.3				
				Sumi	nary by Initiativ	e			
					FY 2023-24				
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Reduction to New Substance Use Disorder Benefit Funding	(\$36,587,266)	0.0	(\$5,904,788)	(\$2,745,048)	\$0	(\$27,937,430)	76.36%	Calculated based on utilization ramp up over time
В	Cash Fund Transfer to Offset General Fund	\$0	0.0	(\$2,745,048)	\$2,745,048	\$0	\$0		General Fund Offset
С	Reduce the Behavioral Health Incentive by 25%	(\$11,313,681)	0.0	(\$3,054,597)	(\$2,602,243)	\$0	(\$5,656,840)	50.00%	Calculated from November Forecast
D	Cash Fund Transfer to Offset General Fund	\$0	0.0	(\$2,602,243)	\$2,602,243	\$0	\$0		General Fund Offset
E	Total Request	(\$47,900,947)	0.0	(\$14,306,676)	\$0	\$0	(\$33,594,271)		Sum Rows A-D

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request for The FY	/ 2021-22 Budget Cy	rcle
Request Title		
R-19 Financing and Grant Program Adjustment	ts	
Dept. Approval By:		Supplemental FY 2020-21
OSPB Approval By: Ashly Carr		Budget Amendment FY 2021-22
	X	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2021-22		
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$9,275,013,392	\$0	\$9,248,819,475	(\$10,013,985)	(\$10,013,985)	
	FTE	0.0	0.0	0.0	0.0	0.0	
Total of All Line Items	GF	\$2,253,103,505	\$0	\$2,431,171,777	(\$15,882,005)	(\$15,882,005)	
Impacted by Change Request	CF	\$1,515,295,449	\$0	\$1,338,357,247	\$0	\$0	
	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0	
	FF	\$5,465,010,478	\$0	\$5,435,664,725	\$5,868,020	\$5,868,020	

		FY 202	0-21	FY 202	21-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	\$0	\$0
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$10,500,000)	(\$10,500,000)
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$10,500,000	\$10,500,000
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0
Services i remiums	FF	\$5,346,276,891	\$0	\$5,315,964,548	\$0	\$0
	Total	\$206,719,975	\$0	\$222,763,800	\$5,042,140	\$5,042,140
05. Indigent Care	FTE	0.0	0.0	0.0	0.0	0.0
Program, (A) Indigent	GF	\$0	\$0	\$0	\$0	\$0
Care Program, (1) Indigent Care Program -	CF	\$96,951,669	\$0	\$111,381,900	\$2,521,070	\$2,521,070
Safety Net Provider	RF	\$0	\$0	\$0	\$0	\$0
Payments	FF	\$109,768,306	\$0	\$111,381,900	\$2,521,070	\$2,521,070

		FY 202	0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	¢¢ 070 572	\$0	\$6,039,386	\$17,457,910	\$17.4E7.010
	FTE	<b>\$6,079,573</b>	0.0	<b>56,039,366</b>	\$17,457,910 0.0	<b>\$17,457,910</b> 0.0
05. Indigent Care						
Program, (A) Indigent Care Program, (1)	GF	\$2,829,981	\$0	\$3,019,693	\$0	\$0
Indigent Care Program - Clinic Based Indigent	CF	\$0	\$0	\$0	\$8,728,955	\$8,728,955
Care	RF	\$0	\$0	\$0	\$0	\$0
-	FF	\$3,249,592	\$0	\$3,019,693	\$8,728,955	\$8,728,955
	Total	\$10,764,010	\$0	\$10,764,010	(\$10,764,010)	(\$10,764,010)
OF Indigent Care	FTE	0.0	0.0	0.0	0.0	0.0
05. Indigent Care Program, (A) Indigent	GF	\$5,048,321	\$0	\$5,465,426	(\$5,382,005)	(\$5,382,005)
Care Program, (1) Indigent Care Program -	CF	\$0	\$0	\$0	\$0	\$0
Pediatric Specialty	RF	\$0	\$0	\$0	\$0	\$0
Hospital	FF	\$5,715,689	\$0	\$5,298,584	(\$5,382,005)	(\$5,382,005)
	Total	\$24,557,880	\$0	\$24,557,880	(\$21,250,025)	(\$21,250,025)
05. Indigent Care	FTE	0.0	0.0	0.0	0.0	0.0
Program, (A) Indigent Care Program, (1)	GF	\$0	\$0	\$0	\$0	\$0
Indigent Care Program -	CF	\$24,557,880	\$0	\$24,557,880	(\$21,250,025)	(\$21,250,025)
Primary Care Fund Program	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0
	Tatal	<b>*</b> 500.000	**	<b>#500.000</b>	(\$500.000\)	(\$500.000)
	Total	\$500,000	\$0	\$500,000	(\$500,000)	(\$500,000)
06. Other Medical	FTE	0.0	0.0	0.0	0.0	0.0
Services, (A) Other Medical Services, (1)	GF	\$0	\$0	\$0	\$0	\$0
Other Medical Services -	CF	\$500,000	\$0	\$500,000	(\$500,000)	(\$500,000)
SBIRT Training Grant Program	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

		Auxiliary Data	
Requires Legislation?	YES		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

## **Department Priority: R-19** Request Detail: Financing and Grant Program Adjustments

	Summary of I	Funding Change fo	or FY 2021-22	
	Tot	tals	Increment	tal Change
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23
	Appropriation	Base	Request	Request
Total Funds	\$9,275,013,392	\$9,248,819,475	(\$10,013,985)	(\$10,013,985)
FTE	0.0	0.0	0.0	0.0
General Fund	\$2,253,103,505	\$2,431,171,777	(\$15,882,005)	(\$15,882,005)
Cash Funds	\$1,515,295,449	\$1,338,357,247	\$0	\$0
Reappropriated Funds	\$41,603,960	\$43,625,726	\$0	\$0
Federal Funds	\$5,465,010,478	\$5,435,664,725	\$5,868,020	\$5,868,020

#### Summary of Request:

The Department requests to eliminate the Pediatric Specialty Hospital line item, refinance the Primary Care Fund Program to access available federal funds, and eliminate the Screening, Brief Intervention, and Referral to Treatment Training Grant Program. The Department proposes to repurpose these savings toward General Fund relief to help with budget balancing. Additionally, the Department requests to refinance the remaining funding in the Primary Care Fund Program to allow claiming of federal funds. For this request, the changes would require amendments for the allowable uses of the Primary Care Fund and amendments for the allowable uses of the Marijuana Tax Cash Fund. This request represents a decrease of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation.

These payments are on Step 2 of the Evidence Continuum, "Identify Outputs." Payments made under these line items are not based on specific outcomes and there has been no formal evaluation or return on investment calculated for these payments.



### Current Program:

Three Department programs are impacted by this request.

#### **Pediatric Specialty Hospital Payments**

The creation of the Pediatric Specialty Hospital Payment was recommended during a Joint Budget Committee (JBC) meeting on March 24, 2005, to provide funding to the State's only pediatric specialty hospital, Children's Hospital Colorado in an effort to help offset the costs of providing care to large numbers of Medicaid and indigent care clients. Specifically, the supplemental payment, using federal-allowable Upper Payment Limit (UPL) financing, reimburses Children's Hospital Colorado for uncompensated and undercompensated care. This hospital supplemental payment is a stand-alone payment calculated outside of the Colorado Health Care Affordability and Sustainability Enterprise (CHASE) collection/distribution model.

### **Primary Care Fund Program**

The Primary Care Fund program makes payments to primary care providers serving indigent clients. The fund was authorized under Section 24-22-117 (2)(b), C.R.S., receives 19% of the funds generated from Amendment 35 (Tobacco Tax) and awards grants to providers based on the portion of medically indigent or uninsured patients they served relative to the total number of medically indigent or uninsured clients served by all qualified providers. This includes federally qualified health centers (FQHCs) or other health centers who serve at least 50% uninsured or medically indigent patients, or Medicaid and Child Health Plan Plus (CHP+) members. It is a grant program with no federal match.

Each provider seeking assistance from the Primary Care Fund must submit an application and meet other Department criteria. To be a qualified provider, an entity must:

- Accept all patients regardless of their ability to pay, using either a sliding fee schedule or providing benefits at no charge
- Serve a population that lacks adequate health care services
- Provide cost-effective care
- Provide comprehensive primary care for all ages
- Screen and report eligibility for the Medical Assistance Program, Children's Basic Health Plan, and the Indigent Care Program; and,
- Be a federally qualified health center per Section 330 of the federal Public Health Services Act or have a patient base that is at least 50% uninsured, medically indigent, a participant in Children's Basic Health Plan, a participant in the Medical Assistance Program, or any combination thereof.

The Primary Care Fund previously diverted funds to the General Fund through statutory changes during the Great Recession. HB 10-1321 directed approximately \$10 million to offset General

Fund payments for Medicaid services and refinanced an additional \$2 million dollars to mitigate the effect of budget cuts to certain health clinics supported by the Primary Care Fund.

### Screening, Brief Intervention, and Referral to Treatment Training Grant Program

The Screening, Brief Intervention, and Referral to Treatment (SBIRT) Training Grant Program awards funding to organizations to train health professionals on providing services related to screening, brief intervention, and referral to treatment for individuals at risk of substance abuse. The is a grant program with the Marijuana Tax Cash Fund as the entire source of funding it does not receive a federal match. For FY 2020-21, the General Assembly reduced the appropriation for this program from \$1,500,000 to \$500,000.

Specifically, the funding is used for the following:

- Training for health professional statewide that is evidence-based and that may be either in person or web based
- Consultation and technical assistance to providers, healthcare organizations, and stakeholders
- Outreach, communication, and education of providers and patients
- Coordination with primary care, mental health, integrated health care, and substance use prevention, treatment and recovery efforts, and
- Campaigning to increase public awareness of the risks related to alcohol, marijuana, tobacco, and drug use and to reduce the stigma of treatment.

# Problem or Opportunity:

As a result of the COVID-19 pandemic and accompanying economic downturn, the State is facing a shortage of General Fund revenue. Budget cuts and cash fund transfers are necessary to achieve a balanced budget.

#### **Proposed Solution:**

The Department requests a reduction of \$10,013,985 total funds, including a reduction of \$15,882,005 General Fund and \$5,868,020 federal funds in FY 2021-22; and a reduction of \$10,013,985 total funds, including a reduction of \$15,882,005 General Fund and \$5,868,020 federal funds in FY 2022-23 and ongoing to help the State achieve a balanced budget. The request includes changes to cash funds, specifically the Marijuana Tax Cash Fund and the Primary Care Fund that net to \$0.

### **Pediatric Specialty Hospital Payments**

The Department requests the elimination of this entire appropriation for the Pediatric Specialty Hospital.

The Department believes that these payments are on Step 2 of the Evidence Continuum, "Identify Outputs." Payments made under this line item are not based specific outcomes and there has been no formal evaluation or return on investment calculated for these payments.

## **Primary Care Fund Refinance**

The Department requests a reduction of funding in the Primary Care Fund equal to \$10,000,000, to appropriate this amount to Medical Services Premiums line item, and reduce Medical Services Premiums by a like amount of General Fund. The Department is requesting to refinance the remaining funds in the Primary Care Fund and claim \$11,250,025 in federal matching funds. Transferring cash funds from the Primary Care Fund Program line item to the Clinic Based Indigent Care and Safety Net Provider Payments line items allows payments to qualifying Colorado Indigent Care Program (CICP) clinics to receive payments that include federal matching funds. A portion of the cash funds would remain in the Primary Care Fund Program line item to fund non-CICP clinics with state-only payments.

The Department believes that these payments are on Step 2 of the Evidence Continuum, "Identify Outputs." Payments made under this line item are not based on specific outcomes and there has been no formal evaluation or return on investment calculated for these payments.

### Screening, Brief Intervention, and Referral to Treatment Training Grant Program

The Department requests the elimination of this entire appropriation for the SBIRT Training Grant Program.

The Department believes that these payments are on Step 2 of the Evidence Continuum, "Identify Outputs." Payments made under this line item are not based specific outcomes and there has been no formal evaluation or return on investment calculated for these payments.

### **Required Statutory Changes**

To maximize General Fund savings, the Department is requesting to repurpose cash funds to offset General Fund costs in Medicaid in the amount of the expected reductions. For this request, the changes would require amendments for the allowable uses of the Primary Care Fund (section 24-22-117(2)(b)(I), C.R.S.) and amendments for the allowable uses of the Marijuana Tax Cash Fund (section 39-28.8-501, C.R.S.). The Primary Care Fund change requires the State to declare a fiscal emergency for FY 2021-22 and that declaration can only apply to a single fiscal year as provided under Article X, Section 21 (b) (7) of the Colorado Constitution. This request presumes that a second fiscal emergency would be declared for FY 2022-23. Statutory changes are required to alter the allowable uses of the Primary Care Fund as well as requiring the declaration of a fiscal emergency.

#### **Anticipated Outcomes:**

Approval of this request would allow the Department to help the State achieve a balanced budget for FY 2021-22.

### **Pediatric Specialty Hospital Payments**

With hospitals receiving significant federal COVID-19 assistance funding, including Children's having received over \$22 million<sup>1</sup>, the Department believes there are other ways of providing reimbursements to hospitals, including supplemental payments through CHASE.

#### **Primary Care Fund Program**

Because the Primary Care Fund program is a grant program with no federal match, redirecting the cash funds to General Fund would help preserve core Medicaid and CHP+ eligibility and benefits that leverage federal funds. Most of the Primary Care Fund goes to Federally Qualified Health Centers and Rural Health Centers which received significant federal stimulus support and who also provide services through Medicaid. Refinancing the remaining cash funds allows claiming of federal matching funds.

### Screening, Brief Intervention, and Referral to Treatment (SBIRT) Training Grant Program

The program would be put on hold pending further action by the General Assembly. This a grant program for training of health professionals and is not part of the Department's core mission of providing direct services to members. Providers would continue to be responsible for training staff and it would not be funded with State funds.

### **Required Statutory Changes**

Statutory changes to the uses of the Primary Care Fund and a corresponding refinancing of the Primary Care Fund would maximize payments to CICP health clinics. The statutory changes would specifically direct the distribution of the available funding and seek to mitigate the impact of the budget reductions of the Primary Care Fund Program.

#### Assumptions and Calculations:

Calculations are provided in Appendix A.

Tables 1.1 and 1.2 shows a summary by line item for the incremental change by fiscal year.

Tables 2.1 and 2.2 shows a summary by initiative for this request.

Tables 3.1 and 3.2 show the figures that comprise the proposed refinancing of the remaining cash funds in the Primary Care Fund Program.

<sup>&</sup>lt;sup>1</sup> https://data.cdc.gov/Administrative/HHS-Provider-Relief-Fund/kh8y-3es6/data#revert

#### Table 1.1 Summary by Line Item FY 2021-22

	F 1 2021-22								
Rov	v Line Item	Total Funds	FTE	General Fund	Cash Funds <sup>(1)</sup>	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(2) Medical Services Premiums; Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$0	0.0	(\$10,500,000)	\$10,500,000	\$0	\$0	0.00%	Table 2.1, Row D
В	(5) Indigent Care Program; Safety Net Provider Payments	\$5,042,140	0.0	\$0	\$2,521,070	\$0	\$2,521,070	50.00%	Table 2.1, Row F
C	(5) Indigent Care Program; Clinic Based Indigent Care	\$17,457,910	0.0	\$0	\$8,728,955	\$0	\$8,728,955	50.00%	Table 2.1, Row G
D	(5) Indigent Care Program; Pediatric Specialty Hospital	(\$10,764,010)	0.0	(\$5,382,005)	\$0	\$0	(\$5,382,005)	50.00%	Table 2.1, Row A
Е	(5) Indigent Care Program; Primary Care Fund Program	(\$21,250,025)	0.0	\$0	(\$21,250,025)	\$0	\$0	0.00%	Table 2.1, Row B + Table 2.1, Row E
F	(6) Other Medical Services; Screening, Brief Intervention, and Referral to Treatment Training Grant Program	(\$500,000)	0.0	\$0	(\$500,000)	\$0	\$0		Table 2.1, Row C
G	Total Request	(\$10,013,985)	0.0	(\$15,882,005)	\$0	\$0	\$5,868,020	blend	Sum of Rows A thru F

<sup>(1)</sup> Cash funds are from the Marijuana Tax Cash Fund and from the Primary Care Fund

#### Table 1.2 Summary by Line Item EV 2022-23

				FY 2022-2	3				
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds <sup>(1)</sup>	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(2) Medical Services Premiums; Medical and Long-Term Care Services for Medicaid Eligible Individuals	\$0	0.0	(\$10,500,000)	\$10,500,000	\$0	\$0	0.00%	Table 2.2, Row D
В	(5) Indigent Care Program; Safety Net Provider Payments	\$5,042,140	0.0	\$0	\$2,521,070	\$0	\$2,521,070	50.00%	Table 2.2, Row F
С	(5) Indigent Care Program; Clinic Based Indigent Care	\$17,457,910	0.0	\$0	\$8,728,955	\$0	\$8,728,955	50.00%	Table 2.2, Row G
D	(5) Indigent Care Program; Pediatric Specialty Hospital	(\$10,764,010)	0.0	(\$5,382,005)	\$0	\$0	(\$5,382,005)	50.00%	Table 2.2, Row A
Е	(5) Indigent Care Program; Primary Care Fund Program	(\$21,250,025)	0.0	\$0	(\$21,250,025)	\$0	\$0	0.00%	Table 2.2, Row B + Table 2.2, Row E
F	(6) Other Medical Services; Screening, Brief Intervention, and Referral to Treatment Training Grant Program	(\$500,000)	0.0	\$0	(\$500,000)	\$0	\$0	0.00%	Table 2.2, Row C
G	Total Request	(\$10,013,985)	0.0	(\$15,882,005)	\$0	\$0	\$5,868,020	blend	Sum of Rows A thru F

<sup>(1)</sup> Cash funds are from the Marijuana Tax Cash Fund and from the Primary Care Fund

Table 2.1						
Summary by Initiative						
EV 2021 22						

	Item  Specialty Hospital Payments Reduction  Care Fund Program Reduction - Cash	<b>Total Funds</b> (\$10,764,010)	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
		(\$10,764,010)	0.0			runus		TTT Rate	Notes/Calculations
B Primary C	Care Fund Program Reduction - Cash		0.0	(\$5,382,005)	\$0	\$0	(\$5,382,005)	50.00%	100% of funding
Funds Re	_	(\$10,000,000)	0.0	\$0	(\$10,000,000)	\$0	\$0	0.00%	See narrative
_	g, Brief Intervention, and Referral to nt (SBIRT) Training Grant Program n	(\$500,000)	0.0	\$0	(\$500,000)	\$0	\$0	0.00%	100% of funding
D Cash Fun	nd Transfer to Offset General Fund	\$0	0.0	(\$10,500,000)	\$10,500,000	\$0	\$0	0.00%	Cash Funds: Row B + Row C General Fund: Cash Funds * -1
Primary Care	Fund Program- Refinancing of Remaini	ing Cash Funds							
CICP Clinic Pa	ayments								
	of Cash Funds out of Primary Care Fund line item	(\$11,250,025)	0.0	\$0	(\$11,250,025)	\$0	\$0	0.00%	Table 3.2, Row C - Table 3.2, Row A
H H	of Cash Funds into Safety Net Provider s line item	\$5,042,140	0.0	\$0	\$2,521,070	\$0	\$2,521,070	50.00%	Table 3.2, Row C
G Transfer of Care line	of Cash Funds into Client Based Indigent item	\$17,457,910	0.0	\$0	\$8,728,955	\$0	\$8,728,955	50.00%	Table 3.2, Row D
H Total Re	equest	(\$10,013,985)	0.0	(\$15,882,005)	\$0	\$0	\$5,868,020		Sum of Rows A through G

Table 2.2						
Summary by Initiative						
FY 2022-23						

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Pediatric Specialty Hospital Payments Reduction	(\$10,764,010)	0.0	(\$5,382,005)	\$0	\$0	(\$5,382,005)	50.00%	100% of funding
В	Primary Care Fund Program Reduction - Cash Funds Reduction	(\$10,000,000)	0.0	\$0	(\$10,000,000)	\$0	\$0	0.00%	See narrative
С	Screening, Brief Intervention, and Referral to Treatment (SBIRT) Training Grant Program Reduction	(\$500,000)	0.0	\$0	(\$500,000)	\$0	\$0	0.00%	100% of funding
D	Cash Fund Transfer to Offset General Fund	\$0	0.0	(\$10,500,000)	\$10,500,000	\$0	\$0	0.00%	Cash Funds: Row B + Row C General Fund: Cash Funds * -1
Prim	ary Care Fund Program- Refinancing of Remain	ing Cash Funds							
CICF	P Clinic Payments - Transfer to Clinic Based Indigent	Care line item							
Е	Transfer of Cash Funds out Primary Care Fund Program line item	(\$11,250,025)	0.0	\$0	(\$11,250,025)	\$0	\$0	0.00%	Table 3.2, Row C - Table 3.2, Row A
F	Transfer of Cash Funds into Safety Net Provider Payments line item	\$5,042,140	0.0	\$0	\$2,521,070	\$0	\$2,521,070	50.00%	Table 3.2, Row C
G	Transfer of Cash Funds into Client Based Indigent Care line item	\$17,457,910	0.0	\$0	\$8,728,955	\$0	\$8,728,955	50.00%	Table 3.2, Row D
Н	Total Request	(\$10,013,985)	0.0	(\$15,882,005)	\$0	\$0	\$5,868,020		Sum of Rows A through G

	Table 3.1 Primary Care Fund - Summary of Funding FY 2021-22							
Row	ow Item Total Funds Notes/Calculations							
Α	Base Request of Program Funding	\$24,557,880	FY 2020-21 Long Bill (HB 20-1360)					
В	Reduction of Funding	(\$10,000,000)	To offset General Fund in Medical Services Premiums					
С	Subtotal	\$14,557,880	Row A + Row B					
D	Department Costs of Administering Primary Care Fund Program	(\$307,854)	FY 2020-21 Long Bill (HB 20-1360); Includes Personal Services, Indirect Costs and Audit					
E	Remaining Amount of Program Funding for Clinic Payments	\$14,250,026	Row C + Row D					

			Table 3.2									
		Primary Care		incing of Cash Fu	nds							
	FY 2021-22											
Row	Item	Total Funds	General	Primary Care	Federal	FFP	Notes/Calculations					
<u> </u>			Fund	Fund Cash	Funds Rate							
Α	Funds Available for Clinic Payments	\$14,250,026	\$0	\$14,250,026	\$0	0.00%	Table 3.1, Row E					
_												
Prop	osed Refinancing to Maximize Payments to Clinics											
В	Non-CICP Clinics:	\$3,000,000	\$0	\$3,000,000	\$0	0.00%						
Ь	Cash Funds Remain in Primary Care Fund	\$3,000,000	\$0	\$3,000,000	\$0	0.0076						
	CICP Clinics:											
C	Cash Funds Transferred to Clinic Based Indigent Care line	\$17,457,910	\$0	\$8,728,955	\$8,728,955	50.00%	Department Estimates Corresponding to the					
	item						Expected Payment Amounts for FY 2021-22					
	Denver Health FQHCs:											
D	Cash Funds are Transferred to Safety Net Provider	\$5,042,140	\$0	\$2,521,070	\$2,521,070	50.00%						
	Payments line item	. ,			- ,							
Е	Total Payments to Clinics Through Refinancing of Cash	\$25,500,050	\$0	\$14,250,025	\$11,250,025	NA	Row B + Row C + Row D					
L	Funds	\$25,500,050	\$0	\$14,250,025	\$11,250,025	INA	ROW D T ROW C T ROW D					

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for 1	The FY 2021-22 Budget Cycle	
Request Title			
	R-20 MMIS Annualization Delay		
Dept. Approval By:	BC		Supplemental FY 2020-21
OSPB Approval By:	Cishey Caro		Budget Amendment FY 2021-22
		<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2021-22			
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation		
	Total	\$9,339,402,915	\$0	\$9,300,215,739	(\$7,376,207)	\$0		
	FTE	0.0	0.0	0.0	0.0	0.0		
Total of All Line Items	GF	\$2,278,239,548	\$0	\$2,456,484,095	(\$2,035,713)	\$0		
Impacted by Change Request	CF	\$1,448,977,563	\$0	\$1,258,062,620	\$0	\$0		
	RF	\$41,616,164	\$0	\$43,637,930	\$0	\$0		
	FF	\$5,570,569,640	\$0	\$5,542,031,094	(\$5,340,494)	\$0		

	_	FY 202	.0-21	FY 20	21-22	FY 2022-23	
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$73,227,142	\$0	\$76,228,440	(\$6,598,548)	\$0	
01. Executive Director's Office, (C) Information	FTE	0.0	0.0	0.0	0.0	0.0	
Technology Contracts	GF	\$9,703,222	\$0	\$10,490,362	(\$1,258,054)	\$0	
and Projects, (1) Information Technology	CF	\$6,312,421	\$0	\$6,757,984	\$0	\$0	
Contracts and Projects - MMIS Maintenance and	RF	\$12,204	\$0	\$12,204	\$0	\$0	
Projects	FF	\$57,199,295	\$0	\$58,967,890	(\$5,340,494)	\$0	
	Total	\$9,026,391,954	\$0	\$8,984,194,399	(\$655,141)	\$0	
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0	
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$655,141)	\$0	
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$0	\$0	
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	\$0	\$0	
Services Premiums	FF	\$5,346,276,891	\$0	\$5,315,964,548	\$0	\$0	

		FY 202	20-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$239,783,819	\$0	\$239,792,900	(\$122,518)	\$0
05. Indigent Care	FTE	0.0	0.0	0.0	0.0	0.0
Program, (A) Indigent Care Program, (1)	GF	\$23,311,123	\$0	\$23,307,075	(\$122,518)	\$0
Indigent Care Program - Children's Basic Health	CF	\$49,379,242	\$0	\$49,387,169	\$0	\$0
Plan Medical and Dental	RF	\$0	\$0	\$0	\$0	\$0
Costs	FF	\$167,093,454	\$0	\$167,098,656	\$0	\$0

	,	Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

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Jared Polis Governor

Kim Bimestefer Executive Director

November 1, 2020

## <u>Department Priority: R-20</u> Request Detail: <u>MMIS Annualization Delay</u>

	Summary of Funding Change for FY 2021-22											
	Tot	tals	<b>Incremental Change</b>									
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23								
	Appropriation	Base	Request	Request								
Total Funds	\$9,339,402,915	\$9,300,215,739	(\$7,376,207)	\$0								
FTE	0.0	0.0	0.0	0.0								
General Fund	\$2,278,239,548	\$2,456,484,095	(\$2,035,713)	\$0								
Cash Funds	\$1,448,977,563	\$1,258,062,620	\$0	\$0								
Reappropriated Funds	\$41,616,164	\$43,637,930	\$0	\$0								
Federal Funds	\$5,570,569,640	\$5,542,031,094	(\$5,340,494)	\$0								

#### Summary of Request:

To reduce Medicaid spending in response to the State's revenue shortfalls, the Department requests a one-time reduction to reduce the budget related to the Department's Services Integrator vendor. The Department has delayed the implementation timeline for a full-scale Services Integrator vendor and would not require the full amount originally funded through the FY 2019-20 R-12 "Medicaid Enterprise Operations" in FY 2021-22. The Department would need the full appropriation from the FY 2019-20 R-12 to be restored in FY 2022-23 and ongoing. This request represents a decrease of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation.

The programs impacted, specifically the Systems Integrator for the MMIS, would fall under Step 1 of the Evidence Continuum. The Department is in the initial procurement stages of hiring an Systems Integrator vendor and designing model for how the Systems Integrator would work with the Department when modular MMIS procurements begin.



### Current Program:

The Department received approval through the FY 2019-20 R-12: "Medicaid Enterprise Operations" request for a Systems Integrator vendor starting in FY 2019-20. As the Department began the process of implementing the current Medicaid Enterprise, the federal Centers for Medicare and Medicaid Services (CMS) were updating their conditions and standards to include requirements for states to move to a Medicaid Enterprise focusing on modularity and interoperability, and mandated that states perform or contract for planning and oversight functions related to their services. The term "modularity" means reusable system components, so that a single component can be upgraded or replaced, rather than a single upgrade of an entire system. "Interoperability" is the ability to exchange and use information (usually in a large heterogeneous network made up of several local area networks). Interoperable systems reflect the ability of software and hardware on multiple machines from multiple contractors to communicate.

Colorado was the last state that CMS approved for a launch of four new services at the same time through the Colorado Medicaid Management Innovation and Transformation (COMMIT) project. CMS will no longer approve such an implementation approach, and all future implementations must be based on a smaller, modular model. CMS considers a Systems Integrator to be the centerpiece of a modular, service-oriented approach, and the use of an experienced Systems Integrator is highly encouraged.

The Department is in the initial stages of implementation and working with a vendor to develop strategies and plans to achieve the Department's modularity vision.

### Problem or Opportunity:

The Department received funding through the FY 2019-20 R-12: "Medicaid Enterprise Operations" request to fund and Systems Integrator vendor beginning in FY 2019-20. The Department assumed that initial implementation would begin January 1, 2020, with full scale operations in FY 2020-21. To meet the budget balancing needs in FY 2020-21, the Department delayed implementation and the General Assembly reduced the associated annualized funding increase for the Systems Integrator vendor; the Department was able to continue work by using a slower ramp up and absorbing costs within existing base funding. The State is facing similar budget constraints in FY 2021-22 and the Department is tasked with assessing administrative spending to identify areas that could be delayed.

### Proposed Solution:

The Department requests a one-time reduction of \$7,376,207 total funds, including a reduction of \$2,035,713 General Fund and \$5,340,494 federal funds in FY 2021-22 to delay implementation related to the Department's Systems Integrator vendor to assist with offsetting the State's revenue shortfall. The request would delay the annualization in FY 2021-22 only for the Systems Integrator component with full funding resuming in FY 2022-23. The Department would use existing base funding and federal funds flexibility gained with the removal of the (M) headnote from the

Medicaid Management Information Systems Maintenance and Projects line item to slowly ramp up vendor work for services integration in FY 2021-22. The Department also requests that savings from cash funds are repurposed to provide ongoing General Fund relief; this would require a statutory change. To maximize General Fund savings, the Department is requesting to repurpose cash funds to offset General Fund costs in the Medicaid and Children's Health Insurance Program programs in the amount of the expected reductions. For this request, the changes would requirement amendments to the allowable uses of the HAS Fee (section 25.5-4-402.4, C.R.S.)

The programs impacted, specifically the Systems Integrator for the MMIS, would fall under Step 1: Program Design of the Evidence Continuum. The Department is in the initial procurement stages of hiring an Systems Integrator vendor and designing model for how the Systems Integrator would work with the Department when modular MMIS procurements begin.

### **Anticipated Outcomes:**

Delaying full scale implementation of the Systems Integrator vendor would achieve one-time savings for the State without having to reduce programs any further to create savings to address the State's anticipated budget shortfall in FY 2021-22. The request ties to the Department's Wildly Important Goal (WIG) of Medicaid Cost Control. By strategically evaluating what administrative projects could be delayed, the Department would be an effective steward of Coloradan's valuable financial resources.

If this request is not approved, the State would be required to cut other programs to pass a balanced budget.

#### Assumptions and Calculations:

The Department assumes that the reduction to the Systems Integrator budget in FY 2020-21 would be a one-time reduction and the full appropriation approved in the FY 2019-20 R-12: "Medicaid Enterprise Operations" for FY 2021-22 and ongoing would remain in the base budget. The Department assumes that full scale implementation would be delayed further to FY 2022-23 and the Department would use existing funding and flexibility gained with the removal of the (M) headnote to slowly ramp up vendor work for services integration in FY 2021-22 as the Department prepares for the modular procurement of MMIS related systems. The Department assumes that cash fund savings from the HAS fee would be used to offset program costs in Medical Services Premiums and cash fund savings from the CBHP Trust fund would be used to offset program costs in the Children's Basic Health Plan.

For detailed assumptions and calculations, please see Appendix A: Assumptions and Calculations.

#### R-20 MMIS Annualization Delay Appendix A: Assumptions and Calculations

#### Table 1.1 Summary by Line Item FY 2021-22

	T 1 2021-22											
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; Medicaid Management Information System	(\$6,598,548)	0.0	(\$1,258,054)	\$0	\$0	(\$5,340,494)	80.93%	Table 2.1, Row A			
В	(2) Medical Services Premiums; Medical and Long- Term Care Services for Medicaid Eligible	(\$655,141)	0.0	(\$655,141)	\$0	\$0	\$0	0.00%	Table 2.1, Row B			
С	(5) Indigent Care Program; Children's Basic Health Plan Medical and Dental Costs	(\$122,518)	0.0	(\$122,518)	\$0	\$0	\$0	0.00%	Table 2.1, Row B			
D	Total Request	(\$7,376,207)	0.0	(\$2,035,713)	\$0	\$0	(\$5,340,494)	72.40%	Row A + Row B			

#### Table 1.2 Summary by Line Item FY 2022-23 & Ongoing

	FY 2022-23 & Ongoing												
Rov	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations				
_	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; Medicaid	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Table 2.2, Row A				
Α	Management Information System	Ψ.0	0.0	ΨΟ	Ψ0	\$0	ΨΟ	0.0070	Table 2.2, Row A				
В	(2) Medical Services Premiums; Medical and Long- Term Care Services for Medicaid Eligible	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Table 2.2, Row B				
С	(5) Indigent Care Program; Children's Basic Health Plan Medical and Dental Costs	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Table 2.2, Row B				
D	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Row A + Row B				

#### R-20 MMIS Annualization Delay Appendix A: Assumptions and Calculations

(\$777,659)

\$777,659

\$0

\$0

(\$5,340,494)

\$0

72.40%

Table 3.1, Row C

0.00% See narrative

Notes/Calculations

					Table 2.1								
	Summary by Initiative												
					FY 2021-22								
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate					

(\$1,258,054)

(\$777,659)

0.0

0.0

(\$7,376,207)

\$0

C	Total Request - Tier 1	(\$7,376,207)	0.0	(\$2,035,713)	\$0	\$0	(\$5,340,494)	72.40%	Row A + Row B				
_													
	Table 2.2												
	Summary by Initiative												
	FY 2022-23 & Ongoing												
Row	/ Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations				
Α	Services Integrator Cost True Up	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Table 3.2, Row C				
В	Cash Fund Transfer to Offset General Fund	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	See narrative				
C	Total Request - Tier 1	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Row A + Row B				

A Services Integrator Cost True Up

Cash Fund Transfer to Offset General Fund

#### R-20 MMIS Annualization Delay Appendix A: Assumptions and Calculations

	Table 3.1 Services Integrator Costs FY 2021-22													
Row	Row Item Total Funds FTE General Fund Cash Funds Federal Funds Federal Funds						Federal Funds	FFP Rate	Notes/Calculations					
Α	Current Appropriation	\$10,938,207	0.0	\$1,485,737	\$928,873	\$0	\$8,523,597	77.92%	Approved FY 2019-20 R-12: "Medicaid Enterprise Operations"					
В	Requested Appropriation	\$3,562,000	0.0	\$227,683	\$151,214	\$0	\$3,183,103	89.36%	Updated Cost Estimate for Fiscal Year					
C	Change in Funding	(\$7,376,207)	0.0	(\$1,258,054)	(\$777,659)	\$0	(\$5,340,494)	72.40%	Row B - Row C					

	Table 3.2 Services Integrator Costs FY 2022-23										
Row	Row Item Total Funds FTE General Funds Funds Funds Reappropriated Funds Funds Federal Funds FFP Rate Notes/Calculations						Notes/Calculations				
Α	Current Appropriation	\$10,938,207	0.0	\$1,485,737	\$928,873	\$0	\$8,523,597	77.92%	Approved FY 2019-20 R-12: "Medicaid Enterprise Operations"		
В	Requested Appropriation	\$10,938,207	0.0	\$1,485,737	\$928,873	\$0	\$8,523,597	77.92%	Updated Cost Estimate for Fiscal Year		
C	Change in Funding	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Row B - Row C		

# Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for 7	The FY 2021-22 Budget Cycle	
Request Title			
	R-21 Increased Medicaid Match for Finan	cing Payments	
Dept. Approval By:	BC		Supplemental FY 2020-21
OSPB Approval By:	ashey Caro		Budget Amendment FY 2021-22
		<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	FY 2022-23		
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$9,155,185,103	\$0	\$9,150,436,961	(\$9,314,184)	\$0	
	FTE	0.0	0.0	0.0	0.0	0.0	
Total of All Line Items	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$4,358,071)	(\$3,464,463)	
Impacted by Change Request	CF	\$1,457,682,475	\$0	\$1,285,038,748	\$3,822,119	\$3,464,463	
. toquoot	RF	\$41,603,960	\$0	\$43,625,726	(\$3,916,431)	\$0	
	FF	\$5,410,673,465	\$0	\$5,399,085,829	(\$4,861,801)	\$0	

		FY 202	.0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,026,391,954	\$0	\$8,984,194,399	(\$9,850,136)	\$0
02. Medical Services	FTE	0.0	0.0	0.0	0.0	0.0
Premiums, (A) Medical	GF	\$2,245,225,203	\$0	\$2,422,686,658	(\$4,358,071)	(\$3,464,463)
Services Premiums, (1) Medical Services	CF	\$1,393,285,900	\$0	\$1,201,917,467	\$3,822,119	\$3,464,463
Premiums - Medical Services Premiums	RF	\$41,603,960	\$0	\$43,625,726	(\$3,916,431)	\$0
	FF	\$5,346,276,891	\$0	\$5,315,964,548	(\$5,397,753)	\$0
	Total	\$128,793,149	\$0	\$166,242,562	\$535,952	\$0
06. Other Medical	FTE	0.0	0.0	0.0	0.0	0.0
Services, (A) Other	GF	\$0	\$0	\$0	\$0	\$0
Medical Services, (1) Other Medical Services -	CF	\$64,396,575	\$0	\$83,121,281	\$0	\$0
Public School Health Services	RF	\$0	\$0	\$0	\$0	\$0
OCI VICES	FF	\$64,396,574	\$0	\$83,121,281	\$535,952	\$0

Auxiliary Data

Requires Legislation? YES

Type of Request? Department of Health Care Policy and Financing Prioritized Request Interagency Approval or Related Schedule 13s: Impacts Other Agency

FY 2021-22 Funding Request

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

# **Department Priority: R-21 Request Detail: Increased Medicaid Match for Financing Payments**

	Summary of I	Funding Change for	or FY 2021-22			
	Tot	tals	Incremental Change			
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23		
	Appropriation	Base	Request	Request		
Total Funds	\$9,155,185,103	\$9,150,436,961	(\$13,766,567)	\$0		
FTE	0.0	0.0	0.0	0.0		
General Fund	\$2,245,225,203	\$2,422,686,658	(\$8,810,454)	(\$3,464,463)		
Cash Funds	\$1,457,682,475	\$1,285,038,748	\$3,822,119	\$3,464,463		
Reappropriated Funds	\$41,603,960	\$43,625,726	(\$3,916,431)	\$0		
Federal Funds	\$5,410,673,465	\$5,399,085,829	(\$4,861,801)	\$0		

### Summary of Request:

The Department requests a one-time reduction of \$8,810,454 General Fund in FY 2021-22 and \$3,464,463 General Fund in FY 2022-23 to allow the State to use a temporary increase in federal financial participation available through the Families First Coronavirus Response Act for certain financing payments to reduce General Fund. This would require a statutory change similar to HB 20-1385, "Use of Increased Medicaid Match." The request represents a decrease of less than 0.5% from the Department's FY 2020-21 Long Bill total funds appropriation. This request is not considered on the evidence-based policy continuum.

### Current Program:

### **Certified Public Expenditure Payments**

The Department makes several payments to public providers by drawing down federal financial participation (FFP) for certified public expenditures (CPEs). A CPE is financing arrangement in which a governmental entity, such as a school district or hospital, incurs an expenditure eligible for FFP under the Medicaid state plan. The governmental entity then certifies that the funds expended are public funds and used to support the full cost of providing the Medicaid-covered service or the administrative activity. Based on this certification, the state can claim the federal share of these costs and no other state funds are required.

CPE-based financing must recognize actual costs incurred. CMS requires providers to use a federally approved cost reporting methodology to document the actual cost of providing the services, typically determined through a statistically valid time study, periodic cost reporting, and reconciliation of any interim payments to actual incurred cost. This creates a lag in the timeline for CPE payments. In general, the payments are made about a year after the services were incurred.

### **University of Colorado School of Medicine Payment**

The Department also administers a supplemental payment to the University of Colorado School of Medicine. Federal regulations allow for aggregate Medicaid payments to a group of facilities up to the amount of the upper payment limit (UPL). The UPL is a reasonable estimate of the amount that would be paid for the services furnished by the group of facilities under Medicare payment principles. There is room under the UPL for this payment because Medicaid pays lower than Medicare on average for physician services, including physician services delivered by providers at the University. The Department makes this payment through an interagency agreement between the University and the Department. Each year, the Department of Higher Education (CDHE) sends General Fund designated for the University's Specialty Education Program (SEP) to the Department to draw down federal funding under the Medicaid program, which the Department then pays to the University.

Similar to CPE, payments to the University of Colorado School of Medicine are lagged due to the time it takes for the fiscal year end to close and claims to run out before having the data necessary to calculate the payment. The payments are made in the year following when the services were incurred.

### Problem or Opportunity:

The Department can draw down an enhanced match of 56.2% on certain financing payments for costs incurred during the public health emergency and through the end of the quarter in which the public health emergency ends, which is assumed to last through March 2021, through the Families First Coronavirus Response Act. HB 20-1385, "Use of Increased Medicaid Match" requires the Department to use the enhanced federal funds for these payments as General Fund relief for FY 2019-20 and FY 2020-21. The Department will continue to make payments with the higher federal

match rate in FY 2021-22 and FY 2022-23 due to the lag in the timeline for CPE and University of Colorado School of Medicine payments. The enhanced federal funds can be used as General Fund relief for payments made during that year.

### **Proposed Solution:**

The Department requests a reduction of \$13,766,567 total funds, including \$8,810,454 General Fund in FY 2021-22 and \$0 total funds, including \$3,464,463 General Fund in FY 2022-23 in order to use the enhanced federal match from the Families First Coronavirus Response Act as General Fund relief. This would include a reduction of \$9,314,184 total funds, including \$4,358,071 General Fund, to the Department of Health Care Policy and Financing and a reduction of \$4,452,383 total funds, all of which is General Fund, to the Department of Higher Education. This request does not fall on the evidence continuum.

The General Assembly would need to pass legislation akin to HB 20-1385 in order to authorize this proposal. The legislation should provide direct statutory authorization to allow the Department to transfer the additional federal revenue from the enhanced federal match for the CPE payments to the General Fund. In addition, the legislation should reduce General Fund appropriations for the Department of Higher Education, along with the corresponding reappropriated funds to the Department, from the enhanced match for the University of Colorado School of Medicine supplemental payment. These financing changes would not reduce the net benefit to any of the providers from current appropriations.

### **Anticipated Outcomes:**

By implementing these transfers in lieu of other reductions, the Department would be better able to achieve its Wildly Important Goals to deliver health care coverage, service and access support to Coloradans during this economic downturn. Deep reimbursement reductions may make providers unwilling to participate in the Medicaid program or other various initiatives designed to control health care costs and improve the health of Medicaid recipients. By approving this proposal, the General Assembly would prevent other reductions to State programs. Further, this proposal would allow the Medicaid program to continue to provide the statutorily required benefits to recipients without additional reductions to the amount, scope, and duration of services.

### Assumptions and Calculations:

The Department calculated the General Fund relief based on projected payments incurred during the emergency period that will be paid in FY 2021-22 and FY 2022-23. The Department calculated the additional 6.2% federal match for those payments, which would be transferred to the General Fund under this proposal.

	Table 1.1 Summary by Line Item - Department of Health Care Policy and Financing FY 2021-22								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations	
Α	Medical Services Premiums	(\$9,850,136)	0.0	(\$4,358,071)	\$3,822,119	(\$3,916,431)	(\$5,397,753)	Table 2.1, Rows A through G	
В	Public School Health Services	\$535,952	0.0	\$0	\$0	\$0	\$535,952	Table 2.1, Row H	
C	Total Request	(\$9,314,184)	0.0	(\$4,358,071)	\$3,822,119	(\$3,916,431)	(\$4,861,801)	Row A + Row B	

	Table 1.2 Summary by Line Item - Department of Higher Education FY 2021-22								
R	ow Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations	
1	Fee-for-Service Contracts with State Institutions for Specialty Education Programs	(\$4,452,383)	0.0	(\$4,452,383)	\$0	\$0	\$0	Table 2.1, Row K	
	Total Request	(\$4,452,383)	0.0	(\$4,452,383)	\$0	\$0	\$0	Row A	

	Table 1.3 Summary by Line Item - Department of Health Care Policy and Financing FY 2022-23								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations	
Α	Medical Services Premiums	\$0	0.0	(\$3,464,463)	\$3,464,463	\$0	\$0	Table 2.2, Rows A through G	
В	Public School Health Services	\$0	0.0	\$0	\$0	\$0	\$0	Table 2.2, Row H	
C	Total Request	\$0	0.0	(\$3,464,463)	\$3,464,463	\$0	\$0	Row A + Row B	

Table 2.1					
<b>Summary by Initiative</b>					
FY 2021-22					

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations
Depo	artment of Health Care Policy and Financing (HCPF	")						
A	University of Colorado School of Medicine Supplemental Payment	(\$9,850,136)	0.0	\$0	\$0	(\$4,452,383)	(\$5,397,753)	
В	Public Emergency Medical Transportation Provider Payments	\$0	0.0	(\$2,075,826)	\$2,075,826	\$0	\$0	
С	Nursing Home and Home Health Upper Payment Limit	\$0	0.0	(\$593,119)	\$593,119	\$0	\$0	
D	Hospital High Volume Inpatient Payment	\$0	0.0	(\$652,436)	\$652,436	\$0	\$0	
E	Physician Supplemental Payment	\$0	0.0	(\$500,738)	\$500,738	\$0	\$0	
F	School Health Services							
G	Medical Services Premiums	\$0		(\$535,952)	\$0	\$535,952	\$0	
Н	Public School Health Services	\$535,952	0.0	\$0	\$0	\$0	\$535,952	
I	Total: HCPF	(\$9,314,184)	0.0	(\$4,358,071)	\$3,822,119	(\$3,916,431)	(\$4,861,801)	
Depa	artment of Higher Education (DHE)	\$0	0.0	\$0	\$0	\$0	\$0	
J	CU Health Sciences Center	(\$4,452,383)	0.0	(\$4,452,383)	\$0	\$0	\$0	
K	Total: DHE	(\$4,452,383)	0.0	(\$4,452,383)	\$0	\$0	\$0	
L	Total Request	(\$13,766,567)	\$0	(\$8,810,454)	\$3,822,119	(\$3,916,431)	(\$4,861,801)	Sum of Rows A through K

Table 2.2						
<b>Summary by Initiative</b>						
FY 2022-23						

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Notes/Calculations
Depo	artment of Health Care Policy and Financing (HCPF	7)						
A	University of Colorado School of Medicine Supplemental Payment	\$0	0.0	\$0	\$0	\$0	\$0	
В	Public Emergency Medical Transportation Provider Payments	\$0	0.0	(\$3,015,370)	\$3,015,370	\$0	\$0	
С	Nursing Home and Home Health Upper Payment Limit	\$0	0.0	\$0	\$0	\$0	\$0	
D	Hospital High Volume Inpatient Payment	\$0	0.0	(\$449,093)	\$449,093	\$0	\$0	
E	Physician Supplemental Payment	\$0	0.0	\$0	\$0	\$0	\$0	
F	School Health Services							
G	Medical Services Premiums	\$0		\$0	\$0	\$0	\$0	
Н	Public School Health Services	\$0	0.0	\$0	\$0	\$0	\$0	
I	Total: HCPF	\$0	0.0	(\$3,464,463)	\$3,464,463	\$0	\$0	
Depo	artment of Higher Education (DHE)	\$0	0.0	\$0	\$0	\$0	\$0	
J	CU Health Sciences Center	\$0	0.0	\$0	\$0	\$0	\$0	
K	Total: DHE	\$0	0.0	\$0	\$0	\$0	\$0	
L	Total Request	\$0	\$0	(\$3,464,463)	\$3,464,463	\$0	\$0	Sum of Rows A through K

# Schedule 13

# **Department of Health Care Policy and Financing**

Funding Request for The FY 2021-22 Budget Cycle				
Request Title				
R-22 Executive Director's Office Reduction				
Dept. Approval By:		Supplemental FY 2020-21		
OSPB Approval By: Oshby Clark		Budget Amendment FY 2021-22		
	<u>x</u>	Change Request FY 2021-22		

Summary Information	_	FY 2020-21		FY 2021-22		FY 2022-23
	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$5,264,801	\$0	\$6,826,728	(\$445,628)	(\$445,628)
Total of All Line Items Impacted by Change Request	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$1,342,322	\$0	\$2,480,588	(\$445,628)	(\$445,628)
	CF	\$548,313	\$0	\$573,987	\$0	\$0
	RF	\$138,532	\$0	\$173,157	\$0	\$0
	FF	\$3,235,634	\$0	\$3,598,996	\$0	\$0

		FY 2020-21		FY 2021-22		FY 2022-23	
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$5,264,801	\$0	\$6,826,728	(\$445,628)	(\$445,628)	
	FTE	0.0	0.0	0.0	0.0	0.0	
01. Executive Director's Office, (A) General	GF	\$1,342,322	\$0	\$2,480,588	(\$445,628)	(\$445,628)	
Administration, (1) General Administration - Health, Life, and Dental	CF	\$548,313	\$0	\$573,987	\$0	\$0	
	RF	\$138,532	\$0	\$173,157	\$0	\$0	
	FF	\$3,235,634	\$0	\$3,598,996	\$0	\$0	

Auxiliary Data				
Requires Legislation?	NO			
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact	

Jared Polis Governor

Kim Bimestefer Executive Director

November 1, 2020

## <u>Department Priority: R-22</u> Request Detail: Executive Director's Office Reduction

Summary of Funding Change for FY 2021-22						
	Tot	tals	Incremental Change			
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23		
	Appropriation	Base	Request	Request		
Total Funds	\$5,264,801	\$6,826,728	(\$445,628)	(\$445,628)		
FTE	0.0	0.0	0.0	0.0		
General Fund	\$1,342,322	\$2,480,588	(\$445,628)	(\$445,628)		
Cash Funds	\$548,313	\$573,987	\$0	\$0		
Reappropriated Funds	\$138,532	\$173,157	\$0	\$0		
Federal Funds	\$3,235,634	\$3,598,996	\$0	\$0		

### Summary of Request:

To help the State achieve a balanced budget, the Department requests a reduction of \$445,628 total funds and General Fund in FY 2021-22 and ongoing to its (1) Executive Director's Office (A) General Administration; Health, Life, and Dental line item. This reduction is half of the reduction that was imposed in FY 2020-21 for budget balancing purposes. The Department would manage the reduction by maintaining the tighter controls it imposed over personal services and operating expenses in response to the FY 2020-21 reduction.

## Current Program:

To balance the budget for FY 2020-21, the General Assembly imposed a 5% reduction to each department's General Fund appropriations for Health, Life, and Dental. In total, the Department received a reduction of \$891,254 General Fund. To ensure that expenditures remain within the total appropriation, the Department has absorbed the reduction through changes to its hiring and contracting processes. These controls include:

- mandatory executive director review of all requests to hire positions;
- recommending a 60 day waiting period before filling positions to maximize vacancy savings;
- limiting discretionary pay differentials;
- putting restrictions in place for the Department's standard hiring and promotional compensation policies, for example, by hiring people closer to the minimum of a salary range and offering lower promotional salaries;
- eliminating unneeded or antiquated positions;
- limiting operating expenses; and,
- reducing contract costs in the Department's General Professional Services and Special Projects line item.

By using these mechanisms, the Department has been able to manage its General Administration spending such that its expected costs for FY 2020-21 do not exceed its available appropriations.

### Problem or Opportunity:

Due to the ongoing revenue shortfalls created by the COVID-19 pandemic, additional permanent budget reductions are needed for the State to achieve a balanced budget in FY 2021-22 and future years.

## **Proposed Solution:**

The Department requests a reduction of \$445,628 total funds, including \$445,628 General Fund in FY 2021-22 and future years to help balance the State budget. The requested reduction would be taken from the Department's Health, Life, and Dental line item, consistent with how the reduction was imposed for FY 2020-21. The Department would manage its General Administration budget within its appropriation through a combination of vacancy savings, lower salary offers, operating reductions, and reductions to contracts.

If this request is not approved, other reductions would be needed to balance the State budget.

## **Anticipated Outcomes:**

Approval of this request may continue to impair Department operations by limiting the number of new hires the Department makes and reducing the salaries that the Department can offer its prospective employees or current employees receiving promotions. This may reduce the

Department's ability to manage its programs, implement new policies, or respond to inquiries from members, the media, and legislators. However, given the urgent need to balance the State's budget during this fiscal crisis, the Department believes that this is an acceptable proposal and preferable to further reductions to Medicaid and other health care services.

This request is supported by the Department's strategic pillar in its performance plan of Operational Excellence. Reductions to the Department's administration budget require the Department to critically examine its processes and practices to ensure that every expenditure is necessary and proper for administration of the program. The Department must do its part to be stewards of the State's resources.

## Assumptions and Calculations:

The Department calculated this reduction as 50% of the reduction that was imposed by the General Assembly in FY 2020-21. The Department assumes that the remainder of the FY 2020-21 reduction would be restored for FY 2021-22 through the State's Common Policy budget requests.

					Table 1.1							
	Summary by Line Item											
	FY 2021-22											
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	(1) Executive Director's Office (A) General Administration; Health, Life, and Dental	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0	N/A	See narrative			
В	Total Request	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0		Row A			

	Table 1.2 Summary by Line Item FY 2022-23										
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
Α	(1) Executive Director's Office (A) General Administration; Health, Life, and Dental	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0	N/A	See narrative		
В	Total Request	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0		Row A		

					Table 2.1							
	Summary by Initiative											
	FY 2021-22											
Row	Row Item Total Funds FTE General Fund Cash Funds Reappropriated Funds Federal Funds FFP Rate Notes/Calculations											
A	Reduction to Health, Life, and Dental Appropriation	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0	N/A	See narrative			
В	Total Request	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0		Row A			

	Table 2.2 Summary by Initiative FY 2022-23										
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations		
A	Reduction to Health, Life, and Dental Appropriation	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0	N/A	See narrative		
В	Total Request	(\$445,628)	0.0	(\$445,628)	\$0	\$0	\$0		Row A		

## Schedule 13

## **Department of Health Care Policy and Financing**

	Funding Request for	The FY 2021-22 Budget Cycle	
Request Title			
	R-23 Behavioral Health Claims and Elig	ibility Processing	
Dept. Approval By:	BC		Supplemental FY 2020-21
OSPB Approval By:	ashey Cano		Budget Amendment FY 2021-22
		<u>x</u>	Change Request FY 2021-22

	_	FY 202	20-21	FY 20	21-22	FY 2022-23
Summary Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$174,907,625	\$0	\$179,234,713	\$7,466,780	\$2,052,479
	FTE	520.4	0.0	521.2	0.0	0.0
Total of All Line Items	GF	\$38,329,420	\$0	\$40,420,323	\$7,488,276	\$2,073,975
Impacted by Change Request	CF	\$17,207,991	\$0	\$17,694,424	\$0	\$0
rtoquoot	RF	\$2,570,836	\$0	\$2,198,408	\$0	\$0
	FF	\$116,799,378	\$0	\$118,921,558	(\$21,496)	(\$21,496)

		FY 202	20-21	FY 202	21-22	FY 2022-23	
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation	
	Total	\$41,276,479	\$0	\$41,080,782	\$1,585,701	\$1,650,278	
	FTE	520.4	0.0	521.2	0.0	0.0	
01. Executive Director's Office, (A) General	GF	\$14,487,249	\$0	\$14,650,129	\$1,607,197	\$1,671,774	
Administration, (1)	CF	\$3,911,124	\$0	\$3,939,903	\$0	\$0	
General Administration - Personal Services	RF	\$2,305,357	\$0	\$1,892,777	\$0	\$0	
	FF	\$20,572,749	\$0	\$20,597,973	(\$21,496)	(\$21,496)	
	Total	\$5,264,801	\$0	\$6,826,728	\$230,966	\$230,966	
	FTE	0.0	0.0	0.0	0.0	0.0	
01. Executive Director's Office, (A) General	GF	\$1,342,322	\$0	\$2,480,588	\$230,966	\$230,966	
Administration, (1)	CF	\$548,313	\$0	\$573,987	\$0	\$0	
General Administration - Health, Life, and Dental	RF	\$138,532	\$0	\$173,157	\$0	\$0	
	FF	\$3,235,634	\$0	\$3,598,996	\$0	\$0	

		FY 202	0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$72,366	\$0	\$71.148	\$2,399	\$2,497
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's	GF	\$26,778	\$0	\$26,526	\$2,399	\$2,497
Office, (A) General Administration, (1)	CF	\$5,695	\$0	\$5,510	\$0	\$0
General Administration - Short-term Disability	RF	\$1,607	\$0	\$1,644	\$0	\$0
	FF	\$38,286	\$0	\$37,468	\$0	\$0
	Total	\$2,188,905	\$0	\$2,223,320	\$70,570	\$73,444
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (A) General	GF	\$810,157	\$0	\$828,912	\$70,570	\$73,444
Administration, (1) General Administration -	CF	\$172,037	\$0	\$172,189	\$0	\$0
Amortization Equalization	RF	\$48,635	\$0	\$51,380	\$0	\$0
Disbursement	FF	\$1,158,076	\$0	\$1,170,839	\$0	\$0
	Total	\$2,188,905	\$0	\$2,223,320	\$70,570	\$73,444
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (A) General Administration, (1)	GF	\$810,157	\$0	\$828,912	\$70,570	\$73,444
General Administration - Supplemental	CF	\$172,037	\$0	\$172,189	\$0	\$0
Amortization	RF	\$48,635	\$0	\$51,380	\$0	\$0
Equalization Disbursement	FF	\$1,158,076	\$0	\$1,170,839	\$0	\$0
	Total	\$2,356,365	\$0	\$2,248,313	\$130,019	\$21,850
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's	GF	\$954,547	\$0	\$919,906	\$130,019	\$21,850
Office, (A) General Administration, (1)	CF	\$214,413	\$0	\$200,711	\$0	\$0
General Administration - Operating Expenses	RF	\$13,297	\$0	\$13,297	\$0	\$0
	FF	\$1,174,108	\$0	\$1,114,399	\$0	\$0
	Total	\$73,227,142	\$0	\$76,228,440	\$3,153,555	\$0
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (C) Information Technology Contracts	GF	\$9,703,222	\$0	\$10,490,362	\$3,153,555	\$0
and Projects, (1)	CF	\$6,312,421	\$0	\$6,757,984	\$0	\$0
Information Technology Contracts and Projects -	RF	\$12,204	\$0	\$12,204	\$0	\$0
MMIS Maintenance and	FF	\$57,199,295	\$0	\$58,967,890	\$0	\$0

		FY 202	0-21	FY 20	21-22	FY 2022-23
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$48,332,662	\$0	\$48,332,662	\$2,223,000	\$0
01. Executive Director's Office, (C) Information	FTE	0.0	0.0	0.0	0.0	0.0
Technology Contracts	GF	\$10,194,988	\$0	\$10,194,988	\$2,223,000	\$0
and Projects, (1) Information Technology	CF	\$5,871,951	\$0	\$5,871,951	\$0	\$0
Contracts and Projects - Colorado Benefits	RF	\$2,569	\$0	\$2,569	\$0	\$0
Management Systems, Operating & Contracts	FF	\$32,263,154	\$0	\$32,263,154	\$0	\$0

Auxiliary Data									
Requires Legislation?	NO								
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	Requires OIT Approval						

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November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

## **Department Priority: R-23** Request Detail: Behavioral Health Claims and Eligibility Processing

	Summary of I	<b>Funding Change fo</b>	or FY 2021-22	
	Tot	tals	Increment	al Change
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23
	Appropriation	Base	Request	Request
Total Funds	\$174,907,625	\$179,234,713	\$7,466,780	\$2,052,479
FTE	520.4	521.2	0.0	0.0
General Fund	\$38,329,420	\$40,420,323	\$7,488,276	\$2,073,975
Cash Funds	\$17,207,991	\$17,694,424	\$0	\$0
Reappropriated Funds	\$2,570,836	\$2,198,408	\$0	\$0
Federal Funds	\$116,799,378	\$118,921,558	(\$21,496)	(\$21,496)

### Summary of Request:

The Department requests funding in order to establish an eligibility system, a claims processing and submission system, and a data reporting system to serve all of the State's behavioral health programs. This request includes funding for contractor work and temporary staff to manage design, development, and implementation. The Department would leverage the State's existing Medicaid infrastructure to create these systems; rather than building new systems from the ground up, the Department would integrate the State's behavioral health programs into the existing infrastructure, which would reduce administrative cost and provide significant efficiencies over both the current model and any alternative which would build new systems that did not integrate with Medicaid. In addition, the Department requests rollforward authority for the appropriations in order to prevent delays in implementation.

The Department believes that the work of the Task Force is on Step 3 of the Evidence Continuum, "Assess Outcomes." The Task Force has provided detailed evidence demonstrating the shortcomings and lack of effectiveness of the current system, including the poor behavioral health outcomes on the current population. With a more comprehensive framework, the outcomes could be measured and compared, which would then assist in attaining evidence and demonstrating causal evidence for these programs.

## Current Program:

On April 8, 2019, Gov. Jared Polis directed the Colorado Department of Human Services to spearhead Colorado's Behavioral Health Task Force ("Task Force"). The mission of the task force is to evaluate and set the roadmap to improve the current behavioral health system in the state. This includes developing Colorado's "Behavioral Health Blueprint" by the fall of 2020, with anticipated implementation of recommendations starting in late 2020. The executive committee is composed of the Lt. Governor, three members of Governor Polis' cabinet, the Commissioner of the Division of Insurance, and the Deputy County Manager for Douglas County. The BHTF itself is composed of 25 members, including legislators, providers, representatives of Colorado's tribes, and other stakeholders. There are three subcommittees with 25 members each.

In September 2020, the Task Force published its blueprint<sup>2</sup>: "Behavioral Health in Colorado: Putting People First. A Blueprint for Reform" ("the Blueprint"). The Blueprint identifies a path to providing a comprehensive, equitable, effective continuum of behavioral health services that meets the needs of all Coloradans in the right place at the right time to achieve whole person health and wellbeing. The Blueprint identifies six pillars of a strong behavioral health system: access; affordability; workforce and support; accountability; consumer and local guidance; and, whole person care.

To instigate reform, the Task Force is focusing on these key pillars that represent the fundamentals for a strong behavioral health system. The Task Force prioritized 19 actional recommendations across the six pillars. They are:

#### Access

- 1. Develop a single point of entry (with "no wrong door") to help individuals navigate the full continuum of behavioral health services.
- 2. Expand and enhance the crisis services system including co-responder and explore alternatives to reduce reliance on police for non-threatening behavioral health emergencies.
- 3. Address the bifurcation between mental health and substance use disorder.
- 4. Have an adequate, equitable, and complete continuum of behavioral health services, and address current disparities.

## **Affordability**

- 5. Ensure adequate rates of payments and reimbursement, by all payers and payment sources, for the full continuum of services.
- 6. Streamline and consolidate funding streams that include maximizing federal dollars.
- 7. Prioritize the community investment funding available from not-for-profit hospitals to support implementation of the BHTF recommendations.

<sup>&</sup>lt;sup>1</sup> https://www.colorado.gov/pacific/cdhs/colorado-behavioral-health-task-force

<sup>&</sup>lt;sup>2</sup> https://drive.google.com/file/d/11WVIG3IHPM8OUgVFgLuqWFn8waqgUseZ/view

## Workforce and Support

- 8. Expand the capacity for a culturally competent licensed and unlicensed workforce.
- 9. Support and fund the use of non-traditional workforce, especially peers.
- 10. Reduce the administrative burden for providers.

## Accountability

- 11. Research, develop, and publish population-specific standards of care and reasonable outcomes to measure quality.
- 12. Address high suicide incidences and disparities in care access, delivery, and outcomes for specific and marginalized populations.
- 13. Designate a single fiscal management system to be used to account for all publicly funded services to improve allocations.

## Consumer and Local Guidance

- 14. Collaboratively identify local, regional and systemic service gaps and solutions.
- 15. Form and engage advisory groups to continuously provide input and guidance on system improvements.
- 16. Identify and provide sustainable, flexible funding streams for local communities to prioritize primary prevention and invest in solutions to mental wellness disparities.

## Whole Person Care

17. Offer and expand care coordination services to address social determinants of health.

- 18. Expand high-intensity case management with treatment for individuals being discharged from a psychiatric hospital.
- 19. Create planned and facilitated education opportunities on behavioral health and cognitive disabilities for law enforcement, first responders, judges and court officials, and other partners.

## Problem or Opportunity:

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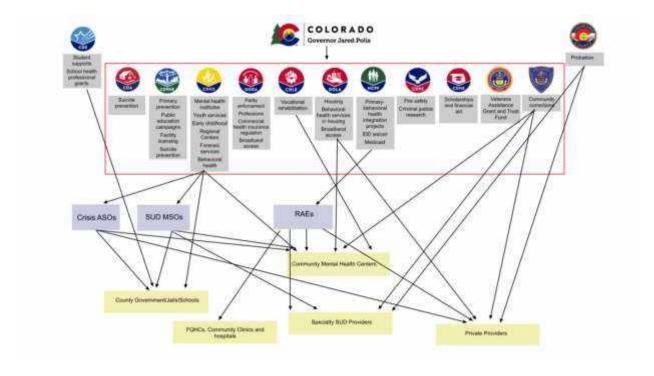
Colorado is well regarded as a healthy state with comparatively low obesity rates and a reputation for active residents. While these perceptions hold true, Colorado is not without its challenges, some less visible than others. When it comes to behavioral health and our State's ability to serve the needs of its residents, there is room for improvement. Colorado has historically struggled to consistently and equitably meet the overarching community needs for mental health and substance use services. Colorado's behavioral health system adequately serves some, but far from all of its constituents. The State ranks in the bottom half of states (29th) for prevalence of mental illness and access to care for adults and children.<sup>3</sup> In 2018, Colorado had the 7th highest suicide rate in

<sup>&</sup>lt;sup>3</sup> Overall Ranking. Mental Health America. (n.d.) Accessed August 28, 2020. https://www.mhanational.org/issues/ranking-states

the nation<sup>4</sup> and suicide is the second leading cause of death among Colorado youth. With approximately one million residents in need of behavioral health services,<sup>5</sup> a comprehensive system that puts people first is critical.

Currently, the State's Behavioral Health System is fragmented. It is confusing for consumers, administratively burdensome for behavioral health providers, and exasperating to Coloradans who are trying to support their loved ones. The Behavioral Health Task Force heard from hundreds of Coloradans who have shared their personal experiences, or those of a loved one, about the challenges they faced in our current behavioral health system. Common themes emerged, and highlighted the need to boldly change behavioral health delivery in Colorado to put people first.

In early 2020, a financial analysis was done that found that Colorado has \$1.4 billion in behavioral health funding, spread across at least 10 different agencies and over 75 programs. Over \$825 million of those dollars are non-Medicaid community behavioral health funds. Over half of the programs are less than \$10 million, meaning that the State dedicates significant administrative overhead to administer relatively small programs. Coloradans will benefit when public monies are used more efficiently, eventually leading to more funding for direct service delivery. The current system looks like this:



<sup>&</sup>lt;sup>4</sup> National Center for Health Statistics. Stats of the State - Suicide Mortality. Centers for Disease Control and Prevention. Updated April 29, 2020. Accessed May 22, 2020. https://www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm

<sup>5</sup> Reinert M, Nguyen T, Fritze D. The State of Mental Health in America 2020. Mental Health America. 2019. Accessed August 28, 2020: 28. https://mhanational.org/sites/default/files/State%20of%20Mental%20Health%20 in%20America%20-%202020.pdf

To combat this fragmentation, this request addresses the following recommendations:

- Develop a single point of entry (with "no wrong door") to help individuals navigate the full continuum of behavioral health services.
- Reduce the administrative burden for providers.
- Designate a single fiscal management system to be used to account for all publicly funded services to improve allocations.

As identified in the Behavioral Health Task Force Subcommittee Report,<sup>6</sup> a new governance structure is needed. The new structure should streamline an individual's access to services regardless of payer (i.e., reduces the 60+ "wrong doors"), ensures timely access, offers centralized system navigation services and establishes a core set of essential services that are readily available across the State. Numerous subcommittee recommendations addressed the difficulty for providers and individuals to determine program eligibility, coordinate between programs, and see and review data that would provide information about the effectiveness of the program.

Currently, there is no single eligibility or claims framework for the State's behavioral health programs. Over 75 programs, scattered across various state agencies, use different methodologies and procedures for determining eligibility and paying for services. As a result, the system is fragmented. This creates a myriad of complex problems which not only prevent individuals from receiving comprehensive care, but also drive excess administrative costs. As examples: individuals must be determined eligible for each program individually; there is no reporting to providers or care coordinators about the services that have been delivered; and, there is no management between systems to ensure that services have not been duplicated. This fragmentation leads to preventable problems that drive State cost. For example, the lack of data reporting, particularly for marginalized populations, hides behavioral health disparities and level of need.

Coloradans are not receiving quality care across all services because there is not a standardized process to publicly share data for the purpose of transparency. Providers are spending an inordinate amount of time on data submissions, reports, and other paperwork because the different funding sources do not share a standardized platform for data collection. Colorado must address the disparities in care access, delivery, and outcomes for marginalized populations.

A systemic approach to collecting, reporting, and analyzing data and demographics can help identify inequities that need to be addressed. A single fiscal-management system can be used to account for all publicly funded services. Without additional investment in this area, the State would be unable to consolidate the various disparate eligibility and claims processes, which would

<sup>&</sup>lt;sup>6</sup> https://drive.google.com/file/d/16SGHGkjtC7ZfsCG\_aOQXFJPrdLNnOdNm/view

inhibit the State from achieving the vision of the Task Force and meetings the behavioral health needs of its citizens.

## Proposed Solution:

The Department requests \$7,466,780 total funds, including \$7,488,276 General Fund and a reduction of \$21,496 federal funds in FY 2021-22 and \$2,052,479 total funds, including \$2,073,975 General Fund and a reduction of \$21,496 federal funds in FY 2022-23, in order to establish an eligibility system, a claims processing and submission system, and a data reporting system to serve all of the State's behavioral health programs. This request includes funding for contractor work and temporary staff to manage design, development, and implementation. The Department would leverage the State's existing Medicaid infrastructure to create these systems; rather than building new systems from the ground up, the Department would integrate the State's behavioral health programs into the existing infrastructure, which would reduce administrative cost and provide significant efficiencies over both the current model and any alternative which would build new systems that did not integrate with Medicaid.

Further, the Department requests that appropriations made for this request be given rollforward authority in the Long Bill through FY 2022-23, to allow for the funding to remain available through the completion of the project. This is preferable to individual appropriations in each year because system development and implementation timelines will not perfectly be known in advance. Segmenting appropriations across fiscal years may cause unnecessary delayed in project implementation.

## Proposed Changes to Eligibility, Claims, and Data Systems

This proposed solution is composed of three connected efforts: eligibility processing; claims and encounter processing; and, data reporting.

## **Eligibility Processing**

The Department requests funding to integrate eligibility processing for the State's behavioral health programs into the Colorado Benefits Management System (CBMS) and the Colorado Program and Eligibility Application Kit (PEAK). With the requested funding, the Department would modify its systems to allow for Coloradans to have eligibility determined for all programs simultaneously. This would replace the current framework where program eligibility is determined on a case-by-case basis for each individual program. In lieu of sending individuals to their county offices, providers would be given the ability to enter application information to help streamline and expedite the process.

### Claims and Encounter Processing

The Department requests funding to integrate claims processing for the State's behavioral health programs with the current Medicaid Management Information System (MMIS, also known as "interChange"). With the requested funding, the Department would develop a framework for

providers to submit claims and encounter information through a standard format, consistent with existing industry standards, that would enable claim adjudication, payment, and data reporting. This request would not change how providers are paid; in many cases, providers are not currently reimbursed a per visit or per encounter rate, and this system would not mandate programs moving to a fee-for-service environment. Rather, the data submitted would be used by program managers to validate that services were provided to eligible individuals and show the distribution of services across various providers; this would inform how existing funding is distributed under current methodologies. This would also help maintain expenditures within existing appropriations, as most of the State's behavioral health programs have a fixed annual appropriation that cannot be exceeded.

## **Data Reporting**

The Department requests funding to integrate the eligibility and claims information into its' current data reporting system, known as the Business Intelligence and Data Management (BIDM) system. The BIDM is a data warehouse that collects, consolidates, and organized data from multiple sources, and fully integrates with eligibility and claims data for reporting, analytics, and decision support. BIDM is able to provide reports to program administrators and providers about the amount, frequency, and scope of services being provided to members. With the requested funding, the Department would update the BIDM to accept the new data from the State's behavioral health programs, develop reports that can be distributed to providers, the public, and the General Assembly, and ultimately inform outcome evaluation and decision making about the future of the programs.

### **Expected Expenditures**

The Department would use the requested funding primarily to increase existing contracts for CBMS, PEAK, MMIS, and BIDM to allow for system design, development, and implementation. Because the vendors for these systems are already in place, the Department would be able to begin work quickly, as opposed to issuing new procurements for new systems. Further, the Department would require 23 temporary staff to serve as project managers and design experts to lead the system change development and implementation. The Department cannot reassign existing staff to this project without incurring a significant cost. Costs for existing system development staff at the Department are paid largely by the federal government through grants for the Medicaid program, frequently at a 75% or 90% federal matching rate. As this project creates systems for a non-Medicaid program, federal funding is not available for support. Therefore, any time that a state employee works on this development, the State must backfill those costs with General Fund (or another cash fund source). In addition, reallocating staff to this project would delay other needed improvements to the Department's systems.

## **Evidence Continuum**

The Department believes that the work of the Task Force is on Step 3 of the Evidence Continuum, "Assess Outcomes." The Task Force, through its large membership and multiple subcommittees,

has provided detailed evidence demonstrating the shortcomings and lack of effectiveness of the current system, including the poor behavioral health outcomes on the current population. The proposal to create a shared eligibility, claims, and data reporting framework is theory-informed in that there is a multitude of evidence demonstrating the inefficiencies of the current system. With a more comprehensive framework, the Department and the Task Force would able to build comprehensive data on which outcomes could be measured and compared, which would then assist in attaining evidence and demonstrating causal evidence for these programs.

## **Anticipated Outcomes:**

This request aligns to Governor's Health Cabinet Wildly Important Goal to "Implement Behavioral Health Task Force Recommendations." By creating a shared eligibility, claims processing, and data reporting framework, the Department will enable additional work to be completed by the Task Force to improve the state's behavioral health system. Building these shared systems is a necessary precursor to many of the Task Force's recommendations, particularly those recommendations where data is needed to find and address health disparities and inequities. Even in isolation, these systems would enable significant improvements and efficiencies in the behavioral health system. Providers would reduce the amount of time they spend in eligibility determination and billing, which reduces their overhead costs. Program managers, including State staff, may be able to be repurposed to more beneficial activities and program management, instead of manual processing of eligibility, invoices, and claims. In addition, the state would be able to report data and outcomes out across the entirety of the behavioral health system, informing policy makers and stakeholders about where gaps and disparities exist, which will enable better and more targeted policy interventions designed to improve the lives of Coloradans.

The Department anticipates that financial efficiencies gained by implementing these shared systems will offset the cost of maintenance and ongoing operations in the future, to at least some degree. At this time, these future costs and savings are unclear; the Department would use the regular budget process in a future budget cycle to request necessary funding adjustments when more information is available.

## Assumptions and Calculations:

The Department estimates that system development and implementation would take between 18 and 24 months, depending on how quickly contract amendments can be executed and staff can be hired. The implementation timeline depends on the development of detailed system requirements, coding, user acceptance testing, provider outreach and testing, and error checking to ensure that the system changes do not adversely impact other programs. Because of the uncertainty in the timeline, the Department is requesting rollforward authority on all appropriations through FY 2022-23.

<sup>&</sup>lt;sup>7</sup> https://www.colorado.gov/pacific/sites/default/files/HCPF%202020-2021%20Performance%20Plan.pdf

The Department assumes that it would begin hiring processes immediately after funding was approved by the Joint Budget Committee in order to have staff available on July 1, 2021 to begin implementation. The temporary staff hired for this project would be required to sign to contracts that limits their term to a maximum two years; these staff would not receive retention rights under the State Personnel System. The Department estimates that it would require the equivalent of 23 full time staff to implement this project, although most positions would not be employed for the full two-year period. Instead, the Department would bring on staff as needed at the right time in the project; for example, the Department may employ a project manager for the duration, while business analysts developing system requirements may only be needed at the beginning, and user acceptance testers may only be needed at the end. The Department's request allows for flexibility to bring on appropriate expertise to support the project on an as-needed basis. As the personnel in the project would change over time, the Department estimated all the personnel costs using the Administrator IV classification, with benefits; the Department would manage expenditures within the requested amounts to ensure the cost does not exceed available appropriations. Department also assumes that current staff would have to provide some level of support to the temporary staff throughout the project. The Department estimates that seven management level staff with an average salary of about \$122,000 would spend about 5% of their time providing support. Because staff would be working on non-Medicaid programs, that time would not be eligible for federal financial participation (FFP).

The Department's detailed estimates for system costs and staff are contained in Appendix A.

#### Summary by Line Item FY 2021-22 Reappropriated Federal Funds **Total Funds** Cash Funds FFP Rate Row Line Item FTE General Fund Notes/Calculations Funds (1) Executive Director's Office; (A) General Administration; Table 3; Sum of Salary, PERA, and \$1,585,701 0.0 \$1,607,197 \$0 \$0 (\$21,496) 0.00% Personal Services Medicare (1) Executive Director's Office; (A) General Administration; \$230,966 0.0 \$230,966 \$0 \$0 \$0 0.00% Table 3, Health-Life-Dental Health, Life, and Dental (1) Executive Director's Office; (A) General Administration; C 0.0 \$0 \$0 \$0 \$2,399 \$2,399 0.00% Table 3, STD Short-term Disability (1) Executive Director's Office; (A) General Administration; 0.0 \$70,570 \$0 \$0 \$0 \$70,570 0.00% Table 3, AED S.B. 04-257 Amortization Equalization Disbursement (1) Executive Director's Office; (A) General Administration; \$70,570 0.0 \$70,570 \$0 \$0 \$0 0.00% Table 3, SAED S.B. 06-235 Supplemental Amortization Equalization (1) Executive Director's Office; (A) General Administration; 0.0 \$0 \$0 \$0 \$130,019 \$130,019 0.00% Sum of Table 3, Operating Expenses Operating Expenses (1) Executive Director's Office; (C) Information Technology \$3,153,555 0.0 \$0 \$0 \$0 \$3,153,555 0.00% Table 2.1, Row G Contracts and Projects; MMIS Maintenance and Projects (1) Executive Director's Office; (C) Information Technology H | Contracts and Projects; Colorado Benefits Management Systems, \$2,223,000 0.0 \$2,223,000 \$0 \$0 \$0 0.00% Table 2.1, Row H Operating and Contract Expenses

\$0

\$0

(\$21,496)

NA Sum of Rows A through H

\$7,488,276

Note: The Department is requesting rollforward authority for all appropriations in FY 2021-22.

\$7,466,780

	Table 1.2 Summary by Line Item											
				FY 20	)22-23							
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations			
A	(1) Executive Director's Office; (A) General Administration; Personal Services	\$1,650,278	0.0	\$1,671,774	\$0	\$0	(\$21,496)	0.00%	Table 3; Sum of Salary, PERA, and Medicare			
В	(1) Executive Director's Office; (A) General Administration; Health, Life, and Dental	\$230,966	0.0	\$230,966	\$0	\$0	\$0	0.00%	Table 3, Health-Life-Dental			
С	(1) Executive Director's Office; (A) General Administration; Short-term Disability	\$2,497	0.0	\$2,497	\$0	\$0	\$0	0.00%	Table 3, STD			
D	(1) Executive Director's Office; (A) General Administration; S.B. 04-257 Amortization Equalization Disbursement	\$73,444	0.0	\$73,444	\$0	\$0	\$0	0.00%	Table 3, AED			
Е	(1) Executive Director's Office; (A) General Administration; S.B. 06-235 Supplemental Amortization Equalization	\$73,444	0.0	\$73,444	\$0	\$0	\$0	0.00%	Table 3, SAED			
H H	(1) Executive Director's Office; (A) General Administration; Operating Expenses	\$21,850	0.0	\$21,850	\$0	\$0	\$0	0.00%	Sum of Table 3, Operating Expenses			
	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; MMIS Maintenance and Projects	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Table 2.2, Row G			
Н	(1) Executive Director's Office; (C) Information Technology Contracts and Projects; Colorado Benefits Management Systems, Operating and Contract Expenses	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Table 2.2, Row H			
I	Total Request	\$2,052,479	0.0	\$2,073,975	\$0	\$0	(\$21,496)	NA	Sum of Rows A through H			

I Total Request

#### Summary by Initiative FY 2021-22 Reappropriated Cash Funds Federal Funds FFP Rate Row Item **Total Funds** FTE **General Fund** Notes/Calculations Funds \$2,090,225 0.00% Sum of Rows B through D A Temporary Staff Costs \$2,090,225 0.0 \$0 **\$0 \$0** Salary, PERA, Medicare \$1,585,701 0.0 \$1,585,701 \$0 \$0 \$0 0.00% Table 3 AED, SAED, STD and HLD \$374,505 0.0 \$374,505 \$0 \$0 \$0 0.00% Table 3 D \$130,019 0.0 \$130,019 \$0 \$0 \$0 0.00% Table 3 Operating Expenses \$21,496 N/A Table 6, Row C E Funding Adjustment for Existing Staff \$0 0.0 \$0 \$0 (\$21,496) \$5,376,555 \$5,376,555 \$0 F System Change Costs 0.0 \$0 \$0 0.00% Sum of Rows G through H \$3,153,555 \$3,153,555 MMIS \$0 \$0 \$0 0.00% Table 4, Row M Н CBMS / PEAK \$2,223,000 0.0 \$2,223,000 \$0 \$0 \$0 0.00% Table 5, Row G \$7,466,780 0.0 \$7,488,276 \$0 \$0 (\$21,496) Row A + Row E + Row F I Total Costs

Note: The Department is requesting rollforward authority for all appropriations in FY 2021-22.

				Summa	Table 2.2 ary by Initiative Y 2022-23				
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Temporary Staff Costs	\$2,052,479	0.0	\$2,052,479	\$0	\$0	\$0	0.00%	Sum of Rows B through D
В	Salary, PERA, Medicare	\$1,650,278	0.0	\$1,650,278	\$0	\$0	\$0	0.00%	Table 3 + Table 6, Row C
С	AED, SAED, STD and HLD	\$380,351	0.0	\$380,351	\$0	\$0	\$0	0.00%	Table 3
D	Operating Expenses	\$21,850	0.0	\$21,850	\$0	\$0	\$0	0.00%	Table 3
Е	Funding Adjustment for Existing Staff	\$0	0.0	\$21,496	\$0	\$0	(\$21,496)	N/A	Table 6, Row C
F	System Change Costs	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	Sum of Rows G through H
G	MMIS	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	No System Change Costs in FY 2022-23
H	CBMS / PEAK	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	No System Change Costs in FY 2022-23
Н	Total Costs	\$2,052,479	0.0	\$2,073,975	\$0	\$0	(\$21,496)	-	Row A + Row E + Row F

#### Table 3 - FTE Calculation Assumptions:

<u>Operating Expenses</u> -- Base operating expenses are included per FTE for \$500 per year. In addition, for regular FTE, annual telephone costs assume base charges of \$450 per year.

**Standard Capital Purchases** -- Each additional employee necessitates the purchase of a Personal Computer (\$900), Office Suite Software (\$330), and office furniture (\$3,473).

General Fund FTE — Beginning July 1, 2019, new employees will be paid on a bi-weekly pay schedule; therefore new full-time General Fund positions are reflected in Year 1 as 0.9615 FTE to account for the pay-date shift (25/26 weeks of pay). This applies to personal services costs only; operating costs are not subject to the pay-date shift.

Expenditure Detail	xpenditure Detail			FY 2022-23	
Personal Services:					
Classification Title	Biweekly Salary	FTE		FTE	
ADMINISTRATOR IV	\$2,456	22.1	\$1,411,394	23.0	\$1,468,872
PERA			\$153,842		\$160,107
AED			\$70,570		\$73,444
SAED			\$70,570		\$73,444
Medicare			\$20,465		\$21,299
STD			\$2,399		\$2,497
Health-Life-Dental			\$230,966		\$230,966
Subtotal		22.1	\$1,960,206	23.0	\$2,030,629
Subtotal Personal Services		22.1	\$1,960,206	23.0	\$2,030,629
Operating Expenses:					
		FTE		FTE	
Regular FTE Operating	\$500	23.0	\$11,500	23.0	\$11,500
Telephone Expenses	\$450	23.0	\$10,350	23.0	\$10,350
PC, One-Time	\$1,230	23.0	\$28,290	-	
Office Furniture, One-Time	\$3,473	23.0	\$79,879	-	
Subtotal Operating Expenses			\$130,019		\$21,850
TOTAL REQUEST		22.1	\$2,090,225	23.0	\$2,052,479

	1 1							
	•	Tab						
	FY 2021-22 MMIS Changes							
Row	Item	Amount	Notes/Calculations					
Syste	em Design and Development - MM	IS						
A	Estimated hours of work	15,600	10 FTE for 9 months of work					
В	Hourly rate	\$116	Vendor rate for FY 2021-22					
C	Total Cost	\$1,809,600	Row A * Row B					
Syste	System Integration Testing - MMIS							
D	Estimated hours of work	5,200	10 FTE for 3 months of work					
Е	Hourly rate	\$119	Vendor rate for FY 2022-23					
F	Total Cost	\$616,356	Row D * Row E					
Call	Center Support - MMIS							
G	Estimated hours of work	4,160	Estimate from vendor					
Н	Hourly rate	\$31	Vendor rate for FY 2022-23					
I	Total Cost	\$127,587	Row G * Row H					
BIDN	M Enhancements							
J	Estimated hours of work	3,600	Estimate from vendor					
K	Hourly rate	\$167	Vendor rate for FY 2021-22					
L	Total Cost	\$600,012	Row J * Row K					
M	Grand Total	\$3,153,555	Sum of Rows C and F and I and L					

	Table 5 FY 2021-22 CBMS / PEAK Changes							
Row	Row Item Amount Notes/Calculations							
Syste	System Design and Development							
Α	Estimated hours of work	13,000	Estimate from current vendor					
В	Hourly rate	\$138	Vendor rate for FY 2021-22					
С	Total Cost	\$1,794,000	Row A * Row B					
Syste	em Integration Testing							
D	Estimated hours of work	3,000	Estimate from current vendor					
Е	Hourly rate	\$143	Vendor rate for FY 2022-23					
F	Total Cost	\$429,000	Row D * Row E					
G	Grand Total	\$2,223,000	Row C + Row F					

					1	able 6:			
	HCPF FTE Cost Allocation								
Rov	y Item	<b>Total Funds</b>	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
Α	Current Salaries - Full FFP	\$42,993	0.0	\$21,497	\$0	\$0	\$21,496	50.00%	Assumes full Medicaid match
В	Current Salaries - GF-Only	\$42,993	0.0	\$42,993	\$0	\$0	\$0	0.00%	Assumes 5% of time will be GF-only
C	Total Costs	\$0	0.0	\$21,496	\$0	\$0	(\$21,496)	N/A	Row B - Row A

## Schedule 13

# **Department of Health Care Policy and Financing**

	Funding Request for The FY 2021-22 Budget Cycle					
Request Title						
	R-24 Addressing Health Care Disparities					
Dept. Approval By:	BC		Supplemental FY 2020-21			
OSPB Approval By:	ashey Cano		Budget Amendment FY 2021-22			
		<u>x</u>	Change Request FY 2021-22			

	_	FY 202	20-21	FY 20	FY 2022-23	
Summary Information	Fund _	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$94,065,689	\$0	\$95,760,259	\$5,900,000	\$0
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items	GF	\$16,126,845	\$0	\$16,503,157	\$1,000,000	\$0
Impacted by Change Request	CF	\$9,542,885	\$0	\$10,173,063	\$0	\$0
	RF	\$162,204	\$0	\$162,204	\$0	\$0
	FF	\$68,233,755	\$0	\$68,921,835	\$4,900,000	\$0

	_	FY 202	20-21	FY 20	FY 2022-23	
Line Item Information	Fund	Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$20,838,547	\$0	\$19,531,819	\$100,000	\$0
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (A) General Administration, (1)	GF	\$6,423,623	\$0	\$6,012,795	\$100,000	\$0
General Administration -	CF	\$3,230,464	\$0	\$3,415,079	\$0	\$0
General Professional Services and Special	RF	\$150,000	\$0	\$150,000	\$0	\$0
Projects	FF	\$11,034,460	\$0	\$9,953,945	\$0	\$0
	Total	\$73,227,142	\$0	\$76,228,440	\$5,800,000	\$0
01. Executive Director's	FTE	0.0	0.0	0.0	0.0	0.0
Office, (C) Information Technology Contracts	GF	\$9,703,222	\$0	\$10,490,362	\$900,000	\$0
and Projects, (1) Information Technology	CF	\$6,312,421	\$0	\$6,757,984	\$0	\$0
Contracts and Projects -	RF	\$12,204	\$0	\$12,204	\$0	\$0
MMIS Maintenance and Projects	FF	\$57,199,295	\$0	\$58,967,890	\$4,900,000	\$0

		Auxiliary Data	
Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact

November 1, 2020



**Jared Polis** Governor

Kim Bimestefer **Executive Director** 

## **Department Priority: R-24** Request Detail: Addressing Health Care Disparities

Summary of Funding Change for FY 2021-22						
	Totals Incremental Change					
	FY 2020-21	FY 2021-22	FY 2021-22	FY 2022-23		
	Appropriation	Base	Request	Request		
Total Funds	\$94,065,689	\$95,760,259	\$5,900,000	\$0		
FTE	0.0	0.0	0.0	0.0		
General Fund	\$16,126,845	\$16,503,157	\$1,000,000	\$0		
Cash Funds	\$9,542,885	\$10,173,063	\$0	\$0		
Reappropriated Funds	\$162,204	\$162,204	\$0	\$0		
Federal Funds	\$68,233,755	\$68,921,835	\$4,900,000	\$0		

## Summary of Request:

The Department requests funding to address health disparities in the Medicaid program and Colorado by: collecting previously uncaptured data to identify health disparities by race and ethnicity; using that data to inform outcome-based value-based payments to Medicaid providers; and, support providers in their efforts to collect this data and use it to address health disparities. The Department would use the requested funding to support data transfer from community partners and provide data analytics to better target the efforts of community-based organizations, including outreach, training, and technical assistance. The work funded through this request would enable the Department to condition value-based payments to providers on evidence that they are improving health outcomes where disparities currently exist and enable new quality measurement that better allows the Department and providers to improve health disparities.

The Department believes that this type of data collection and outreach is on Step 2 of the Evidence Continuum, "Identify Outputs." Robust data collection on race and ethnicity would enable direct outreach to populations with significant health disparities. Providers would be able to make direct interventions using the reported results. Once the data is collected and interventions can begin, the Department would be able measure the results and determine whether it has been successful in reducing health disparities.

## Current Program:

Health disparities are differences and/or gaps in the quality of health and health care across racial, ethnic, and socio-economic groups. It can also be understood as population-specific differences in the presence of disease, health outcomes, or access to health care. In this sense, health inequities are systematic differences in health that could be avoided by reasonable means. The complexity of these factors, coupled with the fact that disparities in care are not always apparent to members or providers in clinical encounters, increases the need for data to better understand the extent of disparities and the circumstances under which disparities are likely to occur. In the 2002 landmark study Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care<sup>1</sup>, the Institute of Medicine documented evidence that race and ethnicity are significant predictors of the quality of care, observing that minorities who had the same insurance, status, and income as non-minorities received a lower quality of care. At the heart of efforts to develop effective outreach and strategies to address health care disparities and inequalities is the need for accurate and complete data. However, data describing racial, ethnic, language, cultural, and socioeconomic characteristics are frequently inaccurate, incomplete, and lacking in detail within the Department current data systems.

Standardized data collection with safeguards for privacy and confidentiality is critically important in the effort to understand and eliminate racial and ethnic disparities in health care. Having data on member and provider race and ethnicity would allow the Department and researchers to better disentangle factors that are associated with health care disparities. Further, collecting and analyzing patterns of health care by patient race, ethnicity, and other demographic data can help the Department to monitor the quality of care provided by its provider network. Such monitoring can help to ensure accountability to enrolled members, improve member choice, and allow for evaluation of intervention programs. Such evaluations are likely to improve service delivery for racial and ethnic minority populations, and therefore may result in cost savings that would offset the costs of data collection.

## Problem or Opportunity:

Currently, the Department's data collection through eligibility data collected through the Colorado Benefits Management System (CBMS) and the claims data provided through the Medicaid Management Information System (MMIS) are inconsistent and inadequate to monitor the quality of care provided to racial and ethnic minorities. For example, race and ethnicity data, because of federal regulations, can only be collected through voluntary methods through CBMS so the data is often left blank. The Department's effort to collect this data must be improved to: ensure accountability of outreach and health care provided to members; to track disparities and assess the

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<sup>&</sup>lt;sup>1</sup> Institute of Medicine. Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care. Edited by Brian D. Smedley, Adrienne Y. Stith, and Alan R. Nelson. Washington, DC: National Academy Press, 2002

impact of quality improvement efforts; and to identify best practices that may be replicated by other health systems and analysts within Colorado.

With a lack of valid data, the Department is missing an opportunity to condition payments on improvements in health disparities. The Department has adopted innovative alternative payment and delivery models that support transition from traditional fee-for-service (FFS) payments to value-based payments, known as "bundled payments.<sup>2</sup>" Bundled payments involve providing a single, comprehensive payment that covers all the services within an episode of care. Under a bundled payment model, participating providers are only responsible for outcomes of the episode. At present, bundled payments are designed to align incentives for providers and encourage collaboration to improve the quality and coordination of care across care settings. However, without better data on race, ethnicity, and other demographics, the Department is unable to expand the bundled payments program to condition payments on broader outcomes, such as addressing health disparities in the community.

The COVID-19 pandemic is exacerbating health disparities. The downturn has caused the loss of employer-sponsored health insurance and an increase in unemployment insurance claimants. This loss of access to health insurance is exacerbating health disparities. Data provided by the Centers for Disease Control<sup>3</sup> demonstrate how racial and ethnic minorities are being disproportionately affected by the pandemic:

COVID-19 Hospitalization and Death by Race/Ethnicity							
Rate ratios compared to White, Non- Hispanic Persons	American Indian or Alaska Native, Non- Hispanic persons	Asian, Non- Hispanic persons	Black or African American, Non- Hispanic persons	Hispanic or Latino persons			
Cases	2.8x higher	1.1x higher	2.6x higher	2.8x higher			
Hospitalization	5.3x higher	1.3x higher	4.7x higher	4.6x higher			
Death	1.4x higher	No increase	2.1x higher	1.1x higher			

### **Proposed Solution:**

The Department requests \$5,900,000 total funds, including \$1,000,000 General Fund, in FY 2021-22 in order to collect and utilize data on health care outreach, access and utilization by members' race, ethnicity, socioeconomic status, and where possible, primary language. The Department would work with the state's two Health Information Exchanges (HIE) - Quality Health Network (QHN) and Colorado Regional Health Information Organization (CORHIO) – to integrate clinical

<sup>&</sup>lt;sup>2</sup>https://www.colorado.gov/pacific/hcpf/bundled-payments

<sup>&</sup>lt;sup>3</sup>https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html

data from electronic health records (EHR) with the Department's eligibility and claims data. The data contained within the EHR includes demographic and medical results on Medicaid members. In addition, the Department will integrate demographic data from the Colorado All Payer Claims Database (APCD) and other resources, like the State's vital records and immunization databases to supplement the Department's datasets.

The Department would establish regular data feeds with these external databases to integrate EHR data into its data warehouse. This would allow integration of this information into the Department's existing quality measurement reporting tools which would enable the Department to measure how well current and newly enrolled Medicaid members are connected to a medical home and receiving appropriate preventive and chronic care services. Further, this work aligns the Department's Medicaid enterprise systems with the Health IT Roadmap established by the Governor's Office of eHealth Innovation (OeHI). The Department is a partner in OeHI's governance structure to support statewide health information sharing and use of the state's Master Patient Index (MPI) and Master Provider Directory (MPD) services under development and funded through OeHI.<sup>4</sup>

The Department would reserve a portion of the funding to better identify, develop culturally appropriate messaging and outreach to enroll difficult-to-enroll populations. As an example, the Department may identify difficult-to-enroll populations via partnership with the Colorado Community Managed Care Network (CCMCN) to conduct analyses on uninsured federally qualified health center (FQHC) members. CCMCN has the single largest repository of uninsured EHR data in the State. Analyses would be directed toward identifying population segments who are likely eligible but not enrolled (EBNE) in Medicaid with focus on closing racial/ethnic/neighborhood disparities in EBNE status. These analyses would facilitate the development of population-targeted messaging for HCPF's "We are Here for You" campaign<sup>5</sup> and would be shared with FQHCs and other community advocates for trusted partner messaging. To reach individuals more efficiently as they are losing employer sponsored coverage, a portion of the funds would support connections with unemployment insurance claimants.

The Department believes that this type of data collection and outreach is on Step 2 of the Evidence Continuum, "Identify Outputs." Robust data collection on race and ethnicity would enable direct outreach to populations with significant health disparities. Providers would be able to make direct interventions using the reported results. Once the data is collected and interventions can begin, the Department would be able measure the results and determine whether it has been successful in reducing health disparities.

<sup>4</sup>https://oehi.colorado.gov/sites/oehi/files/documents/Colorado%20Health%20IT%20Roadmap-19 Web%20%281%29.pdf

<sup>5</sup>https://www.colorado.gov/pacific/hcpf/HereForYou

## **Anticipated Outcomes:**

If this request is approved, the Department would use the clinical data collected to better understand and intervene to address health care disparities. The Department anticipates that the data, if robust, would allow for the development of value-based payment methodologies where payments are conditioned on improving health disparities in the community, as opposed to only rewarding improvements in individual outcomes. When available, the Department would integrate the new data into its bundled payment program<sup>6</sup>, starting with the Maternity Bundled Payment Program, in order to make providers financially accountable for improving community outcomes and reducing health disparities.

The following examples demonstrate other ways that the Department would use the new data:

- 1. To improve existing and new fiscal analyses based upon the Department's existing claims-based data. The Department has identified differences between racial groups in terms of the utilization and spending on high value primary care services. Members who self-identified as White were very significantly more likely to have received a recent primary care visit. However, significant data on race and ethnicity is simply missing. The volume of missing data reduces confidence in the results of the analysis and means that some share of the population at risk will not be able to be identified for intervention.
- 2. To look at the quality of care and health outcomes for subdivisions of the population to inform problem identification and solutioning. Currently, with the poor quality of the racial demographic data available in claims, results from analysis are suspect. The Department uses claims data not only for fiscal analysis, but also for quality measurement purposes. The Department measures quality in many ways and relies heavily upon measures following the nationally recognized definitions, most commonly established by the National Committee for Quality Assurance's (NCQA) Health care Effectiveness Data and Information Set (more commonly called HEDIS). The Department has determined that augmenting the racial and ethnic data available in current administrative data sets with the more robust data on ethnicity that is available in medical records would provide a better perspective on disparities in care and would allow targeted interventions. In particular, the Department relies heavily on CareAnalyzer (certified in HEDIS reporting by NCQA) and believes that augmenting that tool with the higher quality race and ethnicity data found in clinical data from electronic health records (EHR) would provide much clearly understanding and insight into disparities in care.
- 3. To identify disparities in care for racial and ethnic minorities for that existing clinical PCMP data. The Department currently uses clinical data for quality measurement of primary care medical providers (PCMPs) in the ACC program; valid results by race and ethnicity require augmenting the current process of quality measurement.

<sup>&</sup>lt;sup>6</sup>https://www.colorado.gov/pacific/hcpf/bundled-payments

- 4. To expand clinical quality measurement beyond primary care, with a drill down on race and ethnicity. The Department believes that there are uses for clinical data for quality measurement beyond the primary care setting. For example, the Department is examining maternal care (pre through postnatal). The Department received a great deal of stakeholder feedback, including formal testimony before the Medical Services Board, that its current measurement infrastructure for the quality of maternity services was too focused on claims, rather than clinical data, and that the lack of drill down on performance by race and ethnicity was a fundamental barrier to understanding the patterns of care delivery including obstacles to the provision of effective and appropriate care. Expanding clinical quality measurement beyond primary care, with a drill down on race and ethnicity, is important in addressing and closing health disparities that are made evident by the racial difference in health outcomes evident in COVID morbidity and mortality data.
- 5. To use clinical data, in combination with other data sources, to identify high risk individuals and populations that could be Medicaid eligible, and to target them with interventions designed to get them coverage and then to target their specific health needs. Because of the disparities in the economic impacts of COVID by race and gender, it is likely that that those that are 'eligible but not enrolled' for Medicaid are disproportionately from historically disadvantaged demographic groups.

If approved, these investments would help the Department provide critical data to Regional Accountable Entities (RAEs) in the Accountable Care Collaborative which would allow for more targeted interventions for difficult-to-reach populations. If data quality allows, the Department would use the data to craft targeted performance metrics for RAEs that are specific to improving outcomes for these populations. The Department's investment in receiving data on people without insurance would enable specific targeting of outreach efforts, which would increase the probability that these efforts are successful.

The Department's request, if outreach is successful, may increase enrollment in both public and private insurance programs. The Department's request does not specifically account for increases in, e.g., Medicaid caseload as a result of these efforts. If successful, the caseload for the Department's programs may increase; however, it is uncertain if this increase in caseload will increase costs in either the short or long term. Individuals without coverage who experience adverse health events are likely to enroll in coverage at the time of the event; when this occurs, the cost of treatment can outweigh the cost of preventive care. It is also unclear how quickly people will enroll in coverage in the absence of this effort; recent data indicates that even though many people lost their jobs due to the pandemic, most did not immediately apply for health coverage. The Department's current forecasts for Medicaid and the Child Health Plan *Plus* assume that caseload will continue to increase throughout the pandemic. To the extent that this effort causes changes in caseload and expenditure beyond what is currently projected, the Department would use the normal budget process to account for any experienced deviation from the existing forecasts.

This request aligns to the Governor's Health Cabinet's FY 2020-21 Wildly Important Goal to "Leverage New Normal Opportunities.<sup>7</sup>" By investing in data aggregation to determine where health disparities exist, and by performing outreach to ensure people who are eligible for health insurance get enrolled, the Department would proactively move to close gaps in health equity and disparities across race and geography and help add more accountability across the health care system.

## Assumptions and Calculations:

The Department would pursue federal funding opportunities for data integration efforts. The Department assumes that it would receive 90% federal financial participation for the design, development, and implementation of the data integration efforts, and 50% federal financial participation for provider outreach and training activities. The Department assumes that the requested funding for member outreach would not receive any federal match. Marketing activities are generally not eligible for federal funding under federal regulations (2 CFR § 200.467).

The Department's estimate for data integration efforts is based on existing costs to build a hospital Admit, Discharge, and Transfer daily data transmission from CORHIO (approximately \$600,000). The Department anticipates that creating a patient demographic interface and an interface to transfer additional EHR clinical data elements (labs, immunizations, screenings, etc.) from each HIEs would cost approximately the same amount. There are multiple HIEs (CORHIO and QHN), and the Department anticipates two feeds per entity (demographic information and patient health records), the Department estimates the total needed is for the component is \$2.4 million total funds. The Department anticipates additional upfront costs associated with gathering data from the APCD, CCMCN, and up to one other entity at \$600,000 each, totaling \$1.8 million. Until the statewide Master Patient Index (MPI) is in place, a significant cost driver in these projects would be matching Colorado state identifiers to external system identifiers in the Department's data warehouse. The Department estimates that data warehouse integration costs would cost \$800,000 for database changes, testing and project management. In total, the Department is reserving \$500,000 General Fund of the total request for technology requirements, with the expectation that the Centers for Medicare and Medicaid Services would grant a 90% federal match, making the available project budget \$5,000,000 total funds. By appropriating the funding to the Department's Medicaid Management Information System Maintenance and Projects line item, the Department would be able to take advantage of existing statutory rollforward authority to allow the funds to remain available if the projects cannot be completed by the end of FY 2021-22.

The Department assumes that it would use standard procurement processes to solicit and award grants for provider training, support, and outreach efforts. The Department anticipates that it would being efforts to draft procurement documentation as soon as possible after the funding is approved with the goal of having solicitations available by July 1, 2021. The Department would

<sup>&</sup>lt;sup>7</sup>https://www.colorado.gov/pacific/sites/default/files/HCPF%202020-2021%20Performance%20Plan.pdf

simultaneously pursue efforts with CCMCN to receive data that can be used to target the outreach efforts. The Department would make the results of those efforts available to its selected contractors as soon as data is available. The Department estimates that completing procurement and contracting activities would take approximately three months, and that contractors would need at least an additional two months to integrate the uninsured data with their outreach strategies. The Department estimates that outreach efforts would begin no later than January 1, 2022 and occur for the remaining six months in the fiscal year.

## R-24 Addressing Health Care Disparities Appendix A: Assumptions and Calculations

Table 1.1
Summary by Line Item
FV 2021-22

	F 1 2021-22								
Rov	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (A) General Administration, General Professional Services	\$100,000	0.0	\$100,000	\$0	\$0	\$0	0.00%	Table 2.1, Row D
В	(1) Executive Director's Office;(C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$5,800,000	0.0	\$900,000	\$0	\$0	\$4,900,000	90.00%	Table 2.1, Row C
C	Total Request	\$5,900,000	0.0	\$1,000,000	\$0	\$0	\$4,900,000		Row A + Row B

Table 1.2							
Summary by Line Item							
FV 2022-23 and ongoing							

	FY 2022-23 and ongoing								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (A) General Administration, General Professional Services	\$0	0.0	\$0	\$0	\$0	\$0		One-time funding
В	(1) Executive Director's Office;(C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$0	0.0	\$0	\$0	\$0	\$0		One time funding
C	Total Request	\$0	0.0	\$0	\$0	\$0	\$0		Row A + Row B

## R-24 Addressing Health Care Disparities Appendix A: Assumptions and Calculations

#### Table 2.1 Summary by Initiative FY 2021-22

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Health Disparities: Data Aggregation and Reporting	\$5,000,000	0.0	\$500,000	\$0	\$0	\$4,500,000	90.00%	See narrative
В	Health Disparities: Provider Outreach and Training	\$800,000	0.0	\$400,000	\$0	\$0	\$400,000	50.00%	See narrative
C	Subtotal Health Disparities Funding	\$5,800,000	0.0	\$900,000	\$0	\$0	\$4,900,000		Row A + Row B
D	Marketing and Outreach Efforts	\$100,000	0.0	\$100,000	\$0	\$0	\$0	0.00%	See narrative
E	Total Request	\$5,900,000	0.0	\$1,000,000	\$0	\$0	\$4,900,000		Row C + Row D

#### Table 2.2 Summary by Initiative FY 2022-23

Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Health Disparities: Data Aggregation and Reporting	\$0	0.0	\$0	\$0	\$0	\$0	90.00%	One-time funding
В	Health Disparities: Provider Outreach and Training	\$0	0.0	\$0	\$0	\$0	\$0	50.00%	One-time funding
C	Subtotal Health Disparities Funding	\$0	0.0	\$0	\$0	\$0	\$0		Row A + Row B
D	Marketing and Outreach Efforts	\$0	0.0	\$0	\$0	\$0	\$0	0.00%	One time funding
Е	Total Request	\$0	0.0	\$0	\$0	\$0	\$0		Row C + Row D