

Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report

FY 2017-18															
	Service Category	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017	January 2018	February 2018	March 2018	April 2018	May 2018	June 2018	FY 2017-18 Total YTD	
Acute Care	Physician Service	\$65,835,752	\$73,691,339	\$61,627,922	\$86,117,188									\$287,272,201	
	EPSTD Screening	\$0	\$1,295	\$0	\$0									\$1,295	
	Emergency Transportation	\$5,948,877	\$3,201,223	\$3,482,353	\$3,083,703										\$15,716,156
	Non-Emergency Medical Transportation	\$6,226,721	\$2,694,687	\$3,268,356	\$4,574,680										\$16,764,444
	Dental Service	\$31,732,261	\$26,940,045	\$25,046,536	\$33,465,914										\$117,184,756
	Family Planning	\$593	\$0	\$0	\$0										\$593
	Health Maintenance Organization	\$36,126,403	\$35,593,829	\$38,335,821	\$33,814,962										\$143,871,015
	Inpatient Hospital	\$65,203,045	\$52,873,510	\$63,142,290	\$73,621,901										\$254,840,746
	Outpatient Hospital	\$47,597,604	\$58,141,511	\$9,713,239	\$50,310,494										\$165,762,848
	Laboratory and X-Ray	\$10,253,679	\$9,473,076	\$11,468,329	\$9,971,598										\$41,166,682
	Durable Medical Equipment (DME)	\$18,196,969	\$13,452,628	\$14,317,491	\$17,313,250										\$63,280,338
	Pharmacy	\$90,541,666	\$78,188,980	\$77,387,422	\$84,911,186										\$331,029,254
	Drug Rebates - Standard	\$0	\$0	(\$132,048,333)	\$0										(\$132,048,333)
	Rural Health Centers	\$1,999,118	\$1,595,276	\$1,608,772	\$2,073,881										\$7,277,047
	Federally Qualified Health Centers	\$21,531,116	\$17,834,040	\$18,739,028	\$18,828,202										\$76,932,386
	Co-Insurance (Title XVIII-Medicare)	\$7,571,695	\$2,962,182	\$5,919,448	\$6,864,278										\$23,317,603
	Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	(\$42)										(\$42)
	Prepaid Inpatient Health Plan Services	\$0	\$0	\$0	\$0										\$0
	Other Medical Services	\$0	\$0	\$2,457	\$0										\$2,457
	Preventive Services	\$6,338,194	\$6,502,398	\$6,248,595	\$7,868,776										\$26,957,963
	Acute Home Health	\$1,217,045	\$1,023,076	\$1,118,914	\$529,676										\$3,888,711
Acute Care Subtotal	\$416,320,738	\$384,169,095	\$209,378,640	\$433,349,647	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,443,218,120	
Community Based Long Term Care	HCBS - Elderly, Blind, and Disabled	\$41,915,284	\$31,689,316	\$44,766,570	\$32,284,732									\$150,655,902	
	HCBS - Community Mental Health Supports	\$3,868,845	\$3,320,569	\$3,539,533	\$3,309,281									\$14,038,228	
	HCBS - Children's HCBS	\$2,286,158	\$1,910,436	\$2,100,622	\$1,643,773									\$7,940,989	
	HCBS - Persons Living with AIDS	\$0	\$0	\$0	\$0									\$0	
	HCBS - Consumer Directed Attendant Support	\$0	(\$601,409)	(\$7,960,727)	\$172,612										(\$8,389,524)
	HCBS - Brain Injury	\$2,011,303	\$1,402,481	\$1,817,516	\$1,381,276										\$6,612,576
	HCBS - Children with Autism	\$60,728	\$47,235	\$42,857	\$76,467										\$227,287
	HCBS - Children with Life Limiting Illness	\$102,645	\$57,331	\$66,966	\$59,304										\$286,246
	HCBS - Spinal Cord Injury	\$724,722	\$364,314	\$410,435	\$647,924										\$2,147,395
	CCT - Services	\$302,802	\$227,498	\$266,916	\$228,339										\$1,025,555
	Private Duty Nursing	\$9,382,226	\$7,733,261	\$6,594,684	\$8,557,350										\$32,267,521
	Long-Term Home Health	\$29,349,541	\$25,406,462	\$25,083,177	\$32,488,291										\$112,327,471
	Hospice	\$4,533,073	\$4,246,456	\$6,025,518	\$5,898,696										\$20,703,743
	CBLTG Subtotal	\$94,537,327	\$75,803,950	\$82,754,067	\$86,748,045	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$339,843,389
Long Term Care and Insurance	Class I Nursing Facilities	\$61,136,369	\$54,209,752	\$57,247,975	\$60,648,304									\$233,242,400	
	Class II Nursing Facilities	\$455,161	\$440,479	\$332,128	\$597,102									\$1,824,870	
	Program of All-Inclusive Care for the Elderly	\$13,154,384	\$10,083,851	\$10,190,159	\$20,089,884									\$53,518,278	
	Supplemental Medicare Insurance Benefit	\$15,431,206	\$16,026,077	\$16,354,577	\$16,606,495										\$64,418,355
	Health Insurance Buy-In Program	\$152,542	\$163,355	\$156,469	\$248,957										\$721,323
	LTC + Insurance Subtotal	\$90,329,662	\$80,923,514	\$84,281,308	\$98,190,742	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$353,725,226
Service Mgmt	Single Entry Points	\$0	\$2,155,878	\$4,181,273	\$3,149,178									\$9,486,329	
	Disease Management	\$0	\$0	\$0	\$0									\$0	
	Prepaid Inpatient Health Plan Administration	\$10,921,193	\$11,356,588	\$13,776,068	\$13,632,389										\$49,686,238
	Service Management Subtotal	\$10,921,193	\$13,512,466	\$17,957,341	\$16,781,567	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$59,172,567
Financing	Nursing Facility Upper Payment Limit	\$0	\$0	\$0	\$0									\$0	
	Outpatient Hospital Upper Payment Limit	\$0	\$0	\$0	\$0									\$0	
	Home Health Service Upper Payment Limit	\$0	\$0	\$0	\$0									\$0	
	Hospital Supplemental Medicaid Payments	\$57,068,785	\$136,922,655	\$136,966,695	\$65,238,516										\$396,196,651
	Nursing Facility Supplemental Payments	\$8,536,804	\$9,433,962	\$8,943,547	\$8,931,153										\$35,845,466
	Physician Supplemental Payments	\$0	\$0	\$0	\$0										\$0
	Outstationing Payments	\$0	\$0	\$0	\$0										\$0
	Accounting Adjustments	\$2,510,772	(\$17,679,921)	\$439,866	\$3,050,988										(\$11,678,295)
	Other Categories Subtotal	\$68,116,361	\$128,676,696	\$146,350,108	\$77,220,657	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$420,363,822
	Number of Weeks in Month	5	4	4	5	4	4	4	5	4	4	5	4	4	52
Total Expenditures	\$680,225,281	\$683,085,721	\$540,721,464	\$712,290,658	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,616,323,124	

Notes:

- The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.
- The Department is currently investigating the Accounting Adjustments in August 2017 and will restate numbers as more information becomes available.

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

FY 2017-18 Appropriation	
FY 2017-18 Long Bill Appropriation (SB 17-254)	\$7,597,506,218
SB 17-091 "Allow Medicaid Home Health in the Community"	\$2,211,530
SB 17-256 "Hospital Reimbursement Rates"	(\$528,200,000)
SB 17-267 "Sustainability of Rural Colorado"	\$526,381,099
HB 17-1353 "Implement Medicaid Delivery and Payment Initiatives"	\$0
FY 2017-18 Appropriation YTD	\$7,597,898,847
FY 2017-18 YTD Expenditures	\$2,616,323,124
Remaining FY 2017-18 Appropriation	\$4,981,575,723

Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report

FY 2017-18 Supplemental Payments by Service Category														
	Service Category	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017	January 2018	February 2018	March 2018	April 2018	May 2018	June 2018	FY 2017-18 Total YTD
Medical Services Premiums Hospital Supplemental Payments	Inpatient Medicaid Supplemental Payments	\$31,834,785	\$58,509,199	\$58,396,993	\$33,196,506									\$181,937,483
	Medicaid Disproportionate Share Hospital (DSH) and Other Payments	\$0	\$0	\$0	\$0									\$0
	Medicaid Hospital Quality Incentive Payments	\$7,064,718	\$9,513,697	\$9,511,013	\$7,481,474									\$33,570,902
	Outpatient Medicaid Supplemental Payments	\$18,169,282	\$68,899,759	\$69,058,689	\$24,560,536									\$180,688,266
	Total Medical Services Premiums Payments	\$57,068,785	\$136,922,655	\$136,966,695	\$65,238,516	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
CICP	CICP Disproportionate Share Hospital (DSH) Payment	\$16,516,757	\$18,807,985	\$18,807,976	\$18,807,976									\$72,940,694
	Uncompensated Care Supplemental Hospital Medicaid Payment	\$9,623,347	\$9,788,845	\$9,788,853	\$9,788,853									\$38,989,898
	Total CICP Payments	\$26,140,104	\$28,596,830	\$28,596,829	\$28,596,829	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$111,930,592
Total Supplemental Payments		\$83,208,889	\$165,519,485	\$165,563,524	\$93,835,345	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$508,127,243

Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report

MEDICAID CASELOAD WITHOUT RETROACTIVITY 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%	MAGI Adults	Breast & Cervical Cancer Program	MAGI Eligible Children	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens-Emergency Services	Partial Dual Eligibles	TOTAL
July 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
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
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
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
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
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
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
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
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
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
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
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
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
July 2016	43,104	10,931	67,836	5,334	150,888	90,622	351,908	313	470,963	62,982	20,118	14,896	1,883	2,630	33,512	1,327,920
August 2016	43,374	11,011	67,906	5,452	150,673	91,044	359,971	310	471,980	63,715	20,203	14,911	1,872	2,634	33,636	1,338,692
September 2016	43,633	11,039	68,043	5,598	151,271	90,010	356,125	311	471,754	64,431	20,296	14,401	1,797	2,571	33,623	1,334,903
October 2016	43,725	11,131	67,951	5,825	153,579	88,537	353,370	312	471,116	64,454	20,260	14,168	1,790	2,455	33,461	1,332,134
November 2016	43,913	11,233	67,914	5,918	155,687	90,158	358,986	306	473,863	61,650	20,306	13,876	1,738	2,434	33,416	1,341,398
December 2016	43,481	11,181	66,509	6,114	157,155	90,730	362,193	303	472,054	62,524	20,296	13,608	1,736	2,430	33,390	1,343,704
January 2017	43,888	11,405	68,174	6,267	158,234	87,555	362,098	295	469,992	64,732	20,297	13,527	1,816	2,526	33,173	1,343,979
February 2017	43,649	11,363	67,879	6,382	158,909	86,966	361,837	285	467,770	64,616	20,235	12,860	1,765	2,406	33,167	1,340,089
March 2017	44,261	11,397	67,558	6,964	163,649	156,235	296,427	255	467,046	68,267	20,034	12,031	2,534	2,789	34,322	1,353,769
April 2017	44,637	11,381	67,367	7,018	172,849	141,688	309,199	251	468,273	67,605	20,433	12,012	2,472	2,868	34,408	1,362,461
May 2017	44,816	11,401	67,183	7,042	178,391	116,631	333,778	253	469,056	67,690	20,681	11,966	2,418	2,992	34,806	1,369,104
June 2017	44,814	11,420	67,109	7,102	180,603	82,615	368,291	262	464,999	66,581	20,557	11,474	2,374	2,941	34,798	1,365,940
FY 2016-17 Actuals	43,941	11,241	67,619	6,251	160,991	101,066	347,849	288	469,905	64,937	20,310	13,311	2,016	2,640	33,809	1,346,174
July 2017	44,896	11,410	67,009	7,274	180,282	82,329	370,674	150	459,665	65,536	20,651	10,810	2,316	2,925	34,833	1,360,760
August 2017	45,233	11,486	67,079	7,366	180,876	83,011	374,722	145	459,045	66,433	20,804	10,369	2,276	2,957	35,078	1,366,880
September 2017	45,431	11,509	66,918	7,462	180,177	82,088	376,011	132	453,733	66,858	20,941	9,659	2,267	2,831	35,157	1,361,174
October 2017	45,606	11,558	66,985	7,797	178,229	73,998	350,968	139	446,099	67,196	21,093	9,253	2,370	2,842	34,883	1,319,016
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	45,292	11,491	66,998	7,475	179,891	80,357	368,094	142	454,636	66,506	20,872	10,023	2,307	2,889	34,988	1,351,961
FY 2017-18 Year-to-Date Appropriation	44,144	11,659	69,085	7,414	192,463	80,982	389,466	253	479,307	69,199	20,456	14,131	1,803	2,551	37,354	1,420,267
Monthly Growth	175	49	67	335	(1,948)	(8,090)	(25,043)	7	(7,634)	338	152	(406)	103	11	(274)	(42,158)
Monthly Growth Rate	0.39%	0.43%	0.10%	4.49%	-1.08%	-9.86%	-6.66%	5.30%	-1.68%	0.51%	0.73%	-4.20%	4.54%	0.39%	-0.78%	-3.10%
Over-the-year Growth	1,881	427	(966)	1,972	24,650	(14,539)	(2,402)	(173)	(25,017)	2,742	833	(4,915)	580	387	1,422	(13,118)
Over-the-year Growth Rate	4.30%	3.84%	-1.42%	33.85%	16.05%	-16.42%	-0.68%	-55.45%	-5.31%	4.25%	4.11%	-34.69%	32.40%	15.76%	4.25%	-0.98%

Notes:
1) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report. The number of days captured in the monthly figure is equal to the number of days in the report month.
2) The FY 2017-18 Year-to-Date Appropriation includes SB 17-254 (FY 2017-18 Long Bill).
3) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.
4) A system issue skewed the distribution of caseload between the MAGI Adults and MAGI Parents/Caretakers 69% to 133% categories for March, April, and May 2017, artificially inflating MAGI Parents/Caretakers 69% to 133% and deflating MAGI Adults; the system issue was resolved by June 2017.
5) In the November 2017 JBC Premiums Report, the Department restated caseload for FY 2016-17 to accurately reflect caseload during that time period.

Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report

MEDICAID CASELOAD BY PROGRAM WITHOUT RETROACTIVITY ¹																
	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	MAGI Eligible Children	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens-Emergency Services	Partial Dual Eligibles	TOTAL
Medicaid Fee for Service²																
July 2017	38,343	9,664	59,971	6,687	159,565	73,128	328,717	141	423,742	60,781	20,424	9,715	2,099	2,925	34,833	1,230,735
August 2017	38,664	9,715	60,058	6,762	160,206	73,476	331,468	137	423,332	61,535	20,579	9,290	2,080	2,957	35,078	1,235,337
September 2017	38,896	9,738	59,964	6,855	159,735	72,743	332,209	125	419,360	61,511	20,717	8,622	2,052	2,831	35,157	1,230,515
October 2017	38,444	9,702	59,650	7,137	157,950	65,760	309,936	131	411,966	62,497	20,858	8,266	2,124	2,842	34,883	1,192,146
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	38,587	9,705	59,911	6,860	159,364	71,277	325,582	134	419,600	61,581	20,645	8,973	2,089	2,889	34,987	1,222,184
Medicaid Managed Care³																
July 2017	6,553	1,746	7,038	587	20,717	9,201	41,957	9	35,923	4,755	227	1,095	217	-	-	130,025
August 2017	6,569	1,771	7,021	604	20,670	9,535	43,254	8	35,713	4,898	225	1,079	196	-	-	131,543
September 2017	6,535	1,771	6,954	607	20,442	9,345	43,802	7	34,373	5,347	224	1,037	215	-	-	130,659
October 2017	7,162	1,856	7,335	660	20,279	8,238	41,032	8	34,133	4,699	235	987	246	-	-	126,870
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	6,705	1,786	7,087	615	20,527	9,080	42,512	8	35,036	4,925	228	1,050	219	-	-	129,778
Rocky Mountain Health Plans HMO																
July 2017	1,574	600	3,186	401	9,056	4,505	17,645	-	130	19	1	514	130	-	-	37,761
August 2017	1,597	614	3,177	408	8,964	4,614	17,842	-	117	15	3	506	116	-	-	37,973
September 2017	1,588	616	3,166	417	8,917	4,590	17,920	-	65	13	-	458	123	-	-	37,873
October 2017	1,640	624	3,211	440	8,901	4,120	17,074	-	130	20	-	452	129	-	-	36,741
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	1,600	614	3,185	417	8,960	4,457	17,620	-	111	17	1	483	125	-	-	37,590
Access - Kaiser HMO																
July 2017	-	-	-	-	4	-	-	-	3	-	-	-	-	-	-	7
August 2017	-	-	-	-	4	-	-	-	3	-	-	-	-	-	-	7
September 2017	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
October 2017	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	-	-	-	-	2	-	-	-	2	-	-	-	-	-	-	4

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	MAGI Parents/ Caretakers to 68% FPL	MAGI Parents/ Caretakers 69% to 133% FPL	MAGI Adults	Breast & Cervical Cancer Program	MAGI Eligible Children	SB 11-008 Eligible Children	Foster Care	MAGI Pregnant Adults	SB 11-250 Eligible Pregnant Adults	Non-Citizens-Emergency Services	Partial Dual Eligibles	TOTAL
Denver Health & Hospital Authority HMO																
July 2017	2,007	757	3,650	186	11,657	4,696	24,312	9	35,790	4,736	226	581	87	-	-	88,694
August 2017	1,980	762	3,642	196	11,702	4,921	25,412	8	35,593	4,883	222	573	80	-	-	89,974
September 2017	1,951	752	3,588	190	11,525	4,755	25,882	7	34,308	5,334	224	579	92	-	-	89,187
October 2017	2,536	837	3,926	220	11,378	4,118	23,958	8	34,003	4,679	235	535	117	-	-	86,550
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	2,119	777	3,702	198	11,566	4,623	24,891	8	34,924	4,908	227	567	94	-	-	88,604
PACE - Program of All-Inclusive Care for the Elderly⁴																
July 2017	2,972	389	202	-	-	-	-	-	-	-	-	-	-	-	-	3,563
August 2017	2,992	395	202	-	-	-	-	-	-	-	-	-	-	-	-	3,589
September 2017	2,996	403	200	-	-	-	-	-	-	-	-	-	-	-	-	3,599
October 2017	2,986	395	198	-	-	-	-	-	-	-	-	-	-	-	-	3,579
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	2,987	396	201	-	-	-	-	-	-	-	-	-	-	-	-	3,584
ACC - Accountable Care Collaborative⁵																
July 2017	25,961	8,308	53,727	4,373	141,760	58,224	294,901	79	368,400	50,445	18,825	7,359	1,428	-	-	1,033,790
August 2017	26,293	8,455	54,489	4,586	146,507	63,458	305,205	77	377,304	53,158	19,364	7,143	1,455	1	-	1,067,495
September 2017	26,353	8,395	54,163	4,624	144,668	62,565	305,795	74	361,895	59,581	19,419	6,463	1,447	2	-	1,055,444
October 2017	26,146	8,394	53,846	4,769	142,102	54,992	282,482	82	357,457	51,764	19,562	6,191	1,510	2	-	1,009,299
November 2017																
December 2017																
January 2018																
February 2018																
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	26,188	8,388	54,056	4,588	143,759	59,810	297,096	78	366,264	53,737	19,293	6,789	1,460	1	-	1,041,507

Notes:
1) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report. The number of days captured in the monthly figure is equal to the number of days in the report month.
2) Medicaid Fee for Service includes all Medicaid clients who are not enrolled in a Managed Care program. Enrollment here includes Managed Fee for Service ACC enrollment, but does not include all clients shown in the ACC Accountable Care Collaborative section. See Footnote 4 for more information.
3) Medicaid Managed Care includes clients who are enrolled in Rocky Mountain Health Plans HMO, Access-Kaiser HMO, Denver Health & Hospital Authority HMO, and PACE.
4) Accountable Care Collaborative (ACC) caseload includes ACC Managed Fee for Service enrollment, as well as the Rocky Mountain Health Plans HMO enrollment and Access-Kaiser HMO, as these pilots are ACC initiatives.
5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

Accountable Care Collaborative Caseload by RCCO and County														
RCCO	County	Jul 2017	Aug 2017	Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018	Jun 2018	FY 2017-18 Average Monthly Enrollment
RCCO 1²	Archuleta	3,097	3,163	3,104	2,962									3,081
	Delta	8,532	8,648	8,529	8,222									8,482
	Dolores	526	542	541	534									536
	Eagle	5,720	5,816	5,742	5,375									5,663
	Garfield	11,795	11,754	11,583	11,222									11,588
	Grand	1,627	1,667	1,632	1,569									1,624
	Gunnison	3,116	3,111	3,098	2,954									3,070
	Hinsdale	141	142	143	140									142
	Jackson	252	262	254	237									251
	La Plata	10,069	10,239	10,068	9,704									10,020
	Larimer	55,811	56,370	55,648	53,071									55,225
	Mesa	40,852	41,123	40,703	39,635									40,578
	Moffat	3,166	3,186	3,181	3,081									3,154
	Montezuma	8,426	8,540	8,473	8,208									8,411
	Montrose	11,042	11,111	11,024	10,780									10,989
	Ouray	620	639	632	607									625
	Pitkin	1,416	1,445	1,444	1,349									1,414
	Rio Blanco	1,072	1,068	1,057	1,037									1,059
	Routt	3,342	3,370	3,353	3,140									3,301
	San Juan	153	153	157	152									154
San Miguel	1,001	1,059	1,040	994									1,024	
Summit	3,091	3,125	3,091	2,912									3,054	
Unknown ⁽¹⁾	353	518	575	524									493	
Total	175,220	177,051	175,072	168,409										173,938
RCCO 2	Cheyenne	411	400	400	392									401
	Kit Carson	1,602	1,620	1,631	1,614									1,617
	Lincoln	1,184	1,202	1,207	1,164									1,189
	Logan	3,920	4,003	3,923	3,860									3,927
	Morgan	7,076	7,180	7,099	6,855									7,052
	Phillips	824	823	807	775									807
	Sedgwick	573	560	548	552									558
	Washington	1,042	1,049	1,048	1,006									1,036
	Weld	59,339	59,750	58,838	56,418									58,586
	Yuma	2,202	2,234	2,244	2,171									2,213
	Unknown ⁽¹⁾	261	404	440	450									389
Total	78,434	79,225	78,185	75,257										77,775
RCCO 3²	Adams	113,613	124,310	122,502	115,607									119,008
	Arapahoe	106,244	117,429	115,816	110,122									112,403
	Douglas	21,570	23,799	23,670	22,690									22,932
	Unknown ⁽¹⁾	1,025	1,622	1,669	1,585									1,475
Total	242,452	267,160	263,657	250,004										255,818

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

Accountable Care Collaborative Caseload by RCCO and County														
RCCO	County	Jul 2017	Aug 2017	Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018	Jun 2018	FY 2017-18 Average Monthly Enrollment
RCCO 4	Alamosa	6,245	6,295	6,193	6,035									6,192
	Baca	1,115	1,153	1,146	1,126									1,135
	Bent	1,530	1,553	1,543	1,501									1,532
	Chaffee	3,268	3,294	3,301	3,140									3,251
	Conejos	2,971	2,963	2,922	2,871									2,932
	Costilla	1,700	1,727	1,720	1,698									1,711
	Crowley	1,264	1,288	1,278	1,265									1,274
	Custer	791	785	766	772									779
	Fremont	11,352	11,508	11,407	11,067									11,333
	Huerfano	2,506	2,544	2,527	2,454									2,508
	Kiowa	344	346	333	324									337
	Lake	1,322	1,364	1,336	1,247									1,317
	Las Animas	5,059	5,105	5,089	4,956									5,052
	Mineral	156	158	149	143									152
	Otero	6,847	6,914	6,893	6,720									6,843
	Prowers	4,472	4,475	4,400	4,270									4,404
	Pueblo	60,588	61,268	60,935	59,131									60,480
	Rio Grande	3,935	3,978	3,914	3,815									3,911
Saguache	1,923	1,916	1,916	1,882									1,909	
Unknown ⁽¹⁾	328	506	510	471									454	
Total	117,716	119,140	118,278	114,888										117,506
RCCO 5	Denver	111,483	111,518	109,585	103,825									109,103
	Unknown ⁽¹⁾	644	809	753	707									728
	Total	112,127	112,327	110,338	104,532									
RCCO 6	Boulder	45,423	45,830	45,359	43,220									44,958
	Broomfield	5,522	5,578	5,565	5,382									5,511
	Clear Creek	1,374	1,379	1,368	1,314									1,359
	Gilpin	821	853	845	815									834
	Jefferson	79,941	80,970	79,962	75,693									79,141
	Unknown ⁽¹⁾	675	1,020	1,002	905									901
Total	133,756	135,630	134,101	127,329										132,704
RCCO 7	El Paso	163,279	165,898	164,838	158,315									163,083
	Elbert	2,669	2,736	2,694	2,594									2,673
	Park	2,768	2,818	2,780	2,661									2,757
	Teller	4,971	5,009	4,951	4,770									4,925
	Unknown ⁽¹⁾	398	501	550	540									497
Total	174,085	176,962	175,813	168,880										173,935
Total ACC Caseload	1,033,790	1,067,495	1,055,444	1,009,299										1,041,507

(1) Client movement between counties and presumptive eligibility are captured in the "Unknown" county category.

(2) RCCO 1 includes caseload for Rocky Mountain Health Plans HMO and RCCO 3 includes caseload for the Access-Kaiser HMO, as these pilots are ACC initiatives.

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

FY 2017-18 Medicaid Mental Health Community Programs Expenditures			
	Total Expenditures	Mental Health Capitation Payments	Mental Health Fee for Service Payments
July	\$49,923,593	\$49,916,202	\$7,391
August	\$49,720,671	\$49,719,081	\$1,590
September	\$49,281,497	\$49,277,948	\$3,549
October	\$47,961,195	\$47,956,791	\$4,404
November			
December			
January			
February			
March			
April			
May			
June			
Total Year-to-Date Expenditures	\$196,886,956	\$196,870,022	\$16,934
Total Year-to-Date Appropriation	\$625,797,571	\$616,836,053	\$8,961,518
Remaining in Appropriation	\$428,910,615	\$419,966,031	\$8,944,584

Notes:

- 1) The Medicaid Mental Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.
- 2) FY 2017-18 Year-to-Date Appropriation includes SB 17-254 (FY 2017-18 Long Bill) and SB 17-267 (FY 2017-18 Sustainability of Rural Colorado Special Bill).
- 3) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

FY 2017-18 Medicaid Community Mental Health Program Expenditures by Behavioral Health Organization							
	Total	Behavioral Healthcare Inc.	Colorado Access Denver	Colorado Access Northeast	Colorado Health Partnerships	Foothills Behavioral Health	Other Payment and Adjustments
July	\$49,916,202	\$11,039,353	\$10,183,691	\$5,569,358	\$16,304,887	\$6,818,913	\$0
August	\$49,719,081	\$10,945,499	\$10,178,268	\$5,541,261	\$16,243,347	\$6,810,706	\$0
September	\$49,277,948	\$10,847,725	\$10,095,621	\$5,478,965	\$16,125,669	\$6,729,968	\$0
October	\$47,956,791	\$10,526,214	\$9,777,850	\$5,342,645	\$15,783,738	\$6,526,344	\$0
November							
December							
January							
February							
March							
April							
May							
June							
Total Year-to-Date Expenditures	\$196,870,022	\$43,358,791	\$40,235,430	\$21,932,229	\$64,457,641	\$26,885,931	\$0
Total Year-to-Date Appropriation	\$625,797,571						
Remaining in Appropriation	\$428,927,549						

FY 2017-18 Medicaid Community Mental Health Program Caseload by Behavioral Health Organization								
	Total	Behavioral Healthcare Inc.	Colorado Access Denver	Colorado Access Northeast	Colorado Health Partnerships	Foothills Behavioral Health	Northeast Behavioral Health	Other
July	1,323,002	317,682	206,370	162,358	467,196	160,677	-	8,719
August	1,328,845	318,584	207,725	162,563	469,196	161,200	-	9,577
September	1,323,186	316,916	207,051	161,687	467,999	160,316	-	9,217
October	1,281,291	305,047	199,708	156,993	455,679	154,376	-	9,488
November								
December								
January								
February								
March								
April								
May								
June								
Total Year-to-Date Average	1,314,081	314,557	205,214	160,900	465,018	159,142		9,250
Total Year-to-Date Appropriation	1,380,362							

Notes:

- 1) "Other" category includes clients enrolled in the Program of All-Inclusive Care for the Elderly and clients ineligible for Medicaid Mental Health Benefits.
- 2) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report except for the Colorado Access NE which is reported using paid capitation claims. The number of days captured in the monthly figure is equal to the number of days in the report month. The Medicaid Mental Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.
- 3) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

FY 2017-18 Children's Basic Health Plan Expenditures				
	Total Expenditures	Children Medical Expenditures	Children Dental Expenditures	Prenatal Medical Expenditures
July	\$12,482,189	\$11,177,497	\$1,304,692	\$0
August	\$15,838,916	\$12,902,463	\$1,536,453	\$1,400,000
September	\$12,477,314	\$11,177,407	\$1,299,907	\$0
October	\$13,111,540	\$11,631,320	\$1,480,220	\$0
November				
December				
January				
February				
March				
April				
May				
June				
Total Year-to-Date Expenditures	\$53,909,959	\$46,888,687	\$5,621,272	\$1,400,000
Total Year-to-Date Appropriation	\$179,773,700			
Remaining in Appropriation	\$125,863,741			

Notes:

- 1) FY 2017-18 Year-to-Date Appropriation includes SB 17-254 (FY 2017-18 Long Bill) and SB 17-267 (FY 2017-18 Sustainability of Rural Colorado Special Bill).
- 2) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

CHILDREN'S BASIC HEALTH PLAN CASELOAD WITHOUT RETROACTIVITY						
	Children to 205% FPL	Expansion Children to 259% FPL	Total Children	Prenatal to 205% FPL	Expansion Prenatal to 259% FPL	Total Prenatal
July 2015	35,269	15,382	50,651	206	415	621
August 2015	33,608	14,765	48,373	189	398	587
September 2015	33,333	14,936	48,269	183	394	577
October 2015	32,011	14,444	46,455	167	405	572
November 2015	31,821	14,212	46,033	192	449	641
December 2015	32,921	14,908	47,829	187	472	659
January 2016	34,658	16,036	50,694	205	506	711
February 2016	35,557	16,728	52,285	202	515	717
March 2016	36,075	17,257	53,332	196	529	725
April 2016	37,075	17,763	54,838	212	519	731
May 2016	38,019	18,204	56,223	225	515	740
June 2016	38,938	18,568	57,506	220	514	734
FY 2015-16 Actuals	34,940	16,100	51,041	199	469	668
July 2016	39,962	18,968	58,930	227	509	736
August 2016	41,345	19,419	60,764	200	497	697
September 2016	41,419	19,945	61,364	199	477	676
October 2016	40,987	19,751	60,738	205	443	648
November 2016	40,451	19,205	59,656	202	464	666
December 2016	41,974	19,860	61,834	199	494	693
January 2017	42,653	20,732	63,385	204	510	714
February 2017	43,074	21,191	64,265	208	498	706
March 2017	47,726	23,839	71,565	248	523	771
April 2017	49,020	24,052	73,072	261	515	776
May 2017	49,447	24,214	73,661	276	502	778
June 2017	49,587	24,293	73,880	275	486	761
FY 2016-17 Actuals	43,970	21,289	65,260	225	493	719
July 2017	50,236	24,236	74,472	279	503	782
August 2017	50,635	24,652	75,287	279	509	788
September 2017	49,863	24,686	74,549	273	512	785
October 2017	49,855	25,018	74,873	275	523	798
November 2017						
December 2017						
January 2018						
February 2018						
March 2018						
April 2018						
May 2018						
June 2018						
FY 2017-18 Year-to-Date Average	50,147	24,648	74,795	277	512	788
FY 2017-18 Year-to-Date Appropriation	46,934	22,077	69,011	243	549	792
Monthly Growth	(8)	332	324	2	11	13
Monthly Growth Rate	-0.02%	1.34%	0.43%	0.73%	2.15%	1.66%
Over-the-year Growth	8,868	5,267	14,135	70	80	150
Over-the-year Growth Rate	21.64%	26.67%	23.27%	34.15%	18.06%	23.15%
Notes:						
1) All children's caseload reporting includes the CHP+ at Work program.						
2) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.						

Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report

FY 2017-18 Division for Intellectual and Developmental Disabilities (DIDD) Waiver and State Only Program Caseload Per Month																
	Program	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017	January 2018	February 2018	March 2018	April 2018	May 2018	June 2018	FY 2017-18 Average YTD	FY 2017-18 Authorized Maximum Enrollment	
DIDD	HCBS - Developmental Disabilities	5,110	5,136	5,116	5,178									5,135	5,587	
	HCBS - Developmental Disabilities - Regional Centers	48	41	35	27									38	-	
	HCBS - Supported Living Services	4,639	4,667	4,674	4,750									4,683	-	
	HCBS - Children's Extensive Support	1,616	1,621	1,633	1,652									1,631	-	
	HCBS - Targeted Case Management	11,413	11,465	11,458	11,607									11,486	-	
	DIDD Subtotal		11,413	11,465	11,458	11,607								11,486	-	
FY 2017-18 Division for Intellectual and Developmental Disabilities (DIDD) Waiver and State Only Program Expenditure Per Month																
	Program	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017	January 2018	February 2018	March 2018	April 2018	May 2018	June 2018	FY 2017-18 YTD	FY 2017-18 Appropriation	Percent of FY 2017-18 Appropriation Spent
DIDD	HCBS - Developmental Disabilities	\$33,425,399	\$29,405,116	\$32,456,549	\$32,736,235									\$128,023,299	\$376,385,762	34.01%
	HCBS - Developmental Disabilities - Regional Centers	\$1,904,539	\$1,346,062	\$1,297,094	\$1,166,938									\$5,714,632	\$0	
	HCBS - Supported Living Services	\$6,607,197	\$4,519,449	\$5,042,098	\$6,118,031									\$22,286,775	\$71,071,703	31.36%
	HCBS - Children's Extensive Support	\$2,917,128	\$2,245,861	\$2,058,248	\$2,515,944									\$9,737,181	\$28,030,392	34.74%
	HCBS - Targeted Case Management	\$2,871,708	\$1,703,579	\$2,828,161	\$3,301,842									\$10,705,289	\$28,293,291	37.84%
	Quality Assurance, Utilization Review and Supports Intensity Scale	\$384,451	\$390,555	\$404,761	\$401,285									\$1,581,051	\$5,227,918	30.24%
DIDD Subtotal		\$48,110,421	\$39,610,621	\$44,086,911	\$46,240,276								\$172,333,596	\$509,009,066	33.86%	
	Number of Weeks in Month	5	4	4	5	4	4	5	4	4	5	4	4	52		
	Expenditure Per Week	\$9,622,084	\$9,902,655	\$11,021,728	\$9,248,055									\$9,574,089		
State Only Programs	State Only Supported Living Services	\$0	\$600,890	\$600,890	\$668,438									\$1,870,217	\$8,030,743	23.29%
	Family Support Services Program	\$0	\$582,267	\$582,267	\$647,369									\$1,811,904	\$7,058,033	25.67%
	State Only Case Management	\$0	\$163,628	\$163,628	\$181,986									\$509,243	\$2,116,047	24.07%
	State Only Programs Subtotal	\$0	\$1,346,785	\$1,346,785	\$1,497,793									\$4,191,364	\$17,204,823	24.36%
	Expenditure Per Week	\$0	\$336,696	\$336,696	\$299,559									\$89,178		

Notes:

- 1) Historically, DIDD State Only Programs and QA/UR/SIS do not have expenditures in accounting period 1. They do, however, have historical expenditures in periods 02 through 13.
- 2) Family Support Services Program does not have a caseload appropriation. Services are rendered on a case-by-case and as needed basis.
- 3) FY 2017-18 Appropriations for DIDD Supported Living Services and Targeted Case Management were adjusted to reflect only the portion appropriated for those services. State-only program appropriations were removed.
- 4) HCBS-DD Waiver Service costs for clients living in Regional Centers reporting will be sporadic as the costs must be manually transferred from the HCBS-DD line item.
- 5) State Only Programs are part of the Targeted Case Management appropriation and do not have a stand alone appropriation. The appropriation listed here matches the contract amount for each program.
- 6) The Department now has the ability to report expenditure and caseload data for clients receiving HCBS-DD services in a regional center. July and August have been updated to include this data.
- 7) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

FY 2017-18 Old Age Pension State Medical Program Expenditures and Caseload		
	Total Expenditures	Old Age Pension State Medical Program Caseload
July	\$50,161	100
August	\$59,092	103
September	\$34,258	114
October	\$49,787	102
November		
December		
January		
February		
March		
April		
May		
June		
Total Year-to-Date	\$193,298	105
Total Year-to-Date Appropriation	\$10,000,000	
Remaining in Appropriation	\$9,806,702	
Notes:		
<p>1) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report. The number of days captured in the monthly figure is equal to the number of days in the report month.</p> <p>2) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.</p> <p>3) Excess funds in the Old Age Pension Health and Medical Care Fund are used to offset the need for General Fund in the Medical Services Premiums line item.</p> <p>4) FY 2017-18 Year-to-Date Appropriation includes SB 17-254 (FY 2017-18 Long Bill)</p> <p>5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of November 15, 2017, and may be restated in future reports based on further analysis.</p>		

**Department of Health Care Policy and Financing
FY 2017-18 Medical Premiums Expenditure and Caseload Report**

FY 2017-18 Medicare Modernization Act State Contribution Payment Expenditures and Caseload		
	Total Expenditures	Medicare Modernization Act State Contribution Payment Caseload
July	\$12,189,505	75,744
August	\$11,943,231	76,011
September	\$12,030,027	75,758
October	\$12,076,682	
November		
December		
January		
February		
March		
April		
May		
June		
Total Year-to-Date	\$48,239,445	75,838
Total Year-to-Date Appropriation	\$148,950,319	76,716
Remaining in Appropriation	\$100,710,874	

Notes:

- 1) Caseload for Medicare Modernization Act State Contribution Payment is from the Centers for Medicare and Medicaid Services Summary Accounting Statement for the State Contribution for Prescription Drug Benefit. This caseload includes 23 months of retroactivity, and is not comparable to the official Medicaid caseload included in this report.
- 2) Medicare Modernization Act State Contribution Payments lag by two months. As a result, current month expenditures are related to the caseload from the month three months prior from the current month.
- 3) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.
- 4) FY 2017-18 Year-to-Date Appropriation includes SB 17-254 (FY 2017-18 Long Bill).