

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

Service Category	FY 2017-18												FY 2017-18 Total YTD	
	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017	January 2018	February 2018	March 2018	April 2018	May 2018	June 2018		
Acute Care														
Physician Service	\$72,153,553	\$63,680,479	\$60,645,075	\$84,980,987	\$59,114,996	\$61,312,504	\$73,692,525	\$60,805,333						\$536,385,452
EPSPDT Screening	\$0	\$1,295	\$0	\$0	\$0	(\$325)	\$0	\$0						\$970
Emergency Transportation	\$5,939,395	\$3,194,558	\$3,482,353	\$3,083,703	\$2,766,317	\$3,496,019	\$5,452,987	\$3,685,557						\$31,100,889
Non-Emergency Medical Transportation	\$3,183,023	\$2,661,140	\$3,264,870	\$4,570,217	\$3,465,144	\$3,334,767	\$3,787,940	\$3,819,054						\$28,086,155
Dental Service	\$31,727,505	\$26,941,033	\$25,050,135	\$33,469,841	\$26,223,106	\$24,249,901	\$26,764,286	\$25,056,266						\$219,482,073
Family Planning	\$593	\$0	\$0	\$0	\$0	\$139	\$2,447	\$69						\$3,248
Health Maintenance Organization	\$36,468,650	\$35,218,509	\$38,367,796	\$33,632,450	\$35,008,059	\$27,928,316	\$37,661,765	\$37,025,240						\$281,310,785
Inpatient Hospital	\$65,079,278	\$52,459,208	\$62,718,456	\$73,262,174	\$51,232,997	\$65,490,361	\$70,471,144	\$87,657,364						\$528,370,982
Outpatient Hospital	\$44,334,525	\$56,405,765	\$9,666,440	\$50,242,425	\$28,826,529	\$49,134,240	\$53,720,894	\$34,279,031						\$326,609,849
Laboratory and X-Ray	\$10,105,889	\$9,206,867	\$11,465,423	\$9,961,832	\$8,252,893	\$10,393,732	\$9,954,725	\$8,080,807						\$77,422,168
Durable Medical Equipment (DME)	\$17,557,346	\$13,411,768	\$14,303,539	\$17,261,720	\$12,970,687	\$16,022,448	\$15,811,549	\$13,671,600						\$121,010,657
Pharmacy	\$90,490,713	\$80,348,224	\$76,488,247	\$83,966,721	\$71,613,672	\$75,079,365	\$93,228,788	\$80,051,534						\$651,267,264
Drug Rebates - Standard	\$0	\$0	(\$132,048,333)	\$0	\$0	(\$156,732,299)	\$0	\$0						(\$288,780,632)
Rural Health Centers	\$1,970,595	\$1,574,508	\$1,607,618	\$2,051,681	\$1,616,255	\$1,544,161	\$1,656,476	\$1,763,566						\$13,784,860
Federally Qualified Health Centers	\$20,352,520	\$13,136,477	\$18,669,858	\$18,828,987	\$14,435,803	\$14,607,623	\$18,191,528	\$15,935,628						\$134,158,424
Co-Insurance (Title XVIII-Medicare)	\$7,505,059	\$2,926,486	\$5,916,299	\$6,852,966	\$7,838,925	(\$3,963,247)	\$13,028,808	\$13,021,403						\$53,126,699
Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	(\$42)	(\$161)	(\$12,953)	\$0	(\$9,234)						(\$22,390)
Prepaid Inpatient Health Plan Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0						\$0
Other Medical Services	\$0	\$0	\$2,457	\$0	\$1,033	\$2,451	\$0	\$1,076						\$7,017
Preventive Services	\$6,125,510	\$7,162,811	\$7,061,214	\$7,872,735	\$6,465,177	\$6,163,546	\$6,070,542	\$4,318,243						\$51,239,778
Acute Home Health	\$2,218,045	\$1,923,191	\$1,758,023	\$2,427,280	\$2,225,681	\$2,115,951	\$2,554,592	\$1,829,545						\$17,052,308
Acute Care Subtotal	\$415,212,199	\$370,252,319	\$208,419,470	\$432,465,677	\$332,056,788	\$200,167,025	\$432,050,996	\$390,992,082	\$0	\$0	\$0	\$0	\$0	\$2,781,616,556
Community Based Long Term Care														
HCBS - Elderly, Blind, and Disabled	\$42,633,445	\$31,058,595	\$36,586,246	\$32,284,538	\$30,473,270	\$30,479,861	\$36,424,034	\$31,581,862						\$271,521,851
HCBS - Community Mental Health Supports	\$3,804,605	\$3,291,567	\$3,539,533	\$3,309,171	\$3,216,791	\$3,130,903	\$3,555,201	\$2,958,718						\$26,806,489
HCBS - Children's HCBS	\$2,267,231	\$1,660,912	\$2,100,622	\$1,643,773	\$1,660,202	\$1,939,076	\$2,603,797	\$1,872,756						\$15,748,369
HCBS - Consumer Directed Attendant Support	\$0	\$170,830	\$220,549	\$173,057	\$85,446	\$18,572	\$320,953	(\$750,791)						\$238,616
HCBS - Brain Injury	\$1,979,283	\$1,412,200	\$1,817,516	\$1,381,276	\$1,685,707	\$1,448,886	\$1,683,816	\$2,543,167						\$13,951,851
HCBS - Children with Autism	\$58,706	\$44,043	\$42,857	\$76,467	\$40,550	\$53,551	\$54,470	\$35,611						\$406,255
HCBS - Children with Life Limiting Illness	\$91,146	\$55,757	\$66,966	\$58,821	\$50,650	\$68,797	\$73,661	\$55,214						\$521,012
HCBS - Spinal Cord Injury	\$716,537	\$352,753	\$410,435	\$647,924	\$411,267	\$330,885	\$389,710	\$413,575						\$3,673,086
CCT - Services	\$299,001	\$227,392	\$266,916	\$227,785	\$299,502	\$174,249	\$230,971	\$532,694						\$2,258,510
Private Duty Nursing	\$8,430,084	\$7,074,982	\$6,594,684	\$8,549,047	\$7,016,464	\$7,075,511	\$8,026,264	\$6,675,594						\$59,442,630
Long-Term Home Health	\$28,108,393	\$24,450,286	\$24,325,141	\$30,589,888	\$24,484,236	\$25,512,282	\$32,066,436	\$25,730,369						\$215,267,031
Hospice	\$4,388,094	\$4,196,702	\$5,587,318	\$5,615,697	\$4,076,059	\$4,913,518	\$5,496,119	\$5,388,091						\$39,661,598
CB LTC Subtotal	\$92,776,525	\$73,996,019	\$81,558,783	\$84,557,444	\$73,500,144	\$75,146,091	\$90,925,432	\$77,036,860	\$0	\$0	\$0	\$0	\$0	\$649,497,298
Class I Nursing Facilities	\$60,497,789	\$54,045,974	\$57,051,316	\$60,258,694	\$57,956,522	\$40,199,596	\$63,487,576	\$53,757,170						\$447,254,637
Class II Nursing Facilities	\$455,161	\$440,479	\$332,128	\$497,102	\$322,263	\$442,823	\$442,823	\$504,767						\$3,542,497
Program of All-Inclusive Care for the Elderly	\$13,062,057	\$10,201,843	\$10,164,494	\$23,731,144	\$11,064,607	\$13,031,832	\$13,803,211	\$10,964,943						\$106,024,131
Supplemental Medicare Insurance Benefit	\$15,431,206	\$16,026,077	\$16,354,577	\$16,606,495	\$16,366,214	\$16,375,628	\$16,264,964	\$16,543,520						\$129,968,681
Health Insurance Buy-In Program	\$152,542	\$163,355	\$156,469	\$248,957	\$238,343	\$199,860	\$205,084	\$169,571						\$1,534,181
LTC + Insurance Subtotal	\$89,598,755	\$80,877,728	\$84,058,984	\$101,442,392	\$86,123,460	\$70,079,179	\$94,203,658	\$81,939,971	\$0	\$0	\$0	\$0	\$0	\$688,324,127
Service Mgmt														
Single Entry Points	\$0	\$2,155,878	\$4,181,273	\$3,149,178	\$1,915,637	\$4,423,144	\$3,223,993	\$0						\$19,049,103
Disease Management	\$0	\$0	\$0	\$0	\$0	\$0	\$303,907	\$0						\$303,907
Prepaid Inpatient Health Plan Administration	\$10,948,006	\$11,320,660	\$13,784,701	\$13,459,884	\$10,455,597	\$13,522,913	\$10,478,918	\$11,618,669						\$95,589,348
Service Management Subtotal	\$10,948,006	\$13,476,538	\$17,965,974	\$16,609,062	\$12,371,234	\$17,946,057	\$13,702,911	\$11,922,576	\$0	\$0	\$0	\$0	\$0	\$114,942,358
Financing														
Nursing Facility Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	\$4,625,258	\$0	\$0						\$4,625,258
Outpatient Hospital Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0						\$0
Home Health Service Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	(\$1,726)	\$0	\$0						(\$1,726)
Hospital Supplemental Medicaid Payments	\$57,068,785	\$136,922,655	\$136,966,695	\$65,238,516	\$65,332,872	\$72,608,250	\$61,755,027	\$61,749,399						\$657,642,199
Nursing Facility Supplemental Payments	\$8,536,804	\$9,433,962	\$8,943,547	\$8,931,153	\$8,928,844	\$8,930,706	\$9,051,182	\$8,928,844						\$71,685,042
Physician Supplemental Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0						\$0
Outstationing Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0						\$0
University of Colorado School of Medicine Payments	\$0	\$0	\$0	\$0	\$31,210,142	\$30,773,025	\$0	\$0						\$61,983,167
Accounting Adjustments	\$8,254,985	\$368,758	\$3,107,353	\$2,803,319	(\$3,739,750)	(\$12,724,695)	(\$2,396,992)	(\$12,977)						(\$4,339,999)
Other Categories Subtotal	\$73,860,574	\$146,725,375	\$149,017,595	\$76,972,988	\$101,732,108	\$104,210,818	\$68,409,217	\$70,665,266	\$0	\$0	\$0	\$0	\$0	\$791,593,941
Number of Weeks in Month	5	4	4	5	4	4	5	4	4	5	4	4	4	52
Total Expenditures	\$682,396,059	\$685,327,979	\$541,020,806	\$712,047,563	\$605,783,734	\$467,549,170	\$699,292,214	\$632,556,755	\$0	\$0	\$0	\$0	\$0	\$5,025,974,280

Notes:

- 1) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of March 15, 2018, and may be restated in future reports based on further analysis.
- 2) For the January 2018 report, the Department restated expenditure for July through November, as the result of a system improvement allowing for better identification of data. The net effect on expenditure is zero, but the expenditure by category has changed among services and appropriations.

**Department of Health Care Policy and Financing
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FY 2017-18 Appropriation	
FY 2017-18 Supplemental Bill Appropriation (HB 18-1161)	\$7,950,895,769
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	\$7,951,288,398
FY 2017-18 YTD Expenditures	\$5,025,974,280
Remaining FY 2017-18 Appropriation	\$2,925,314,118

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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	\$33,310,106	\$37,720,792	\$31,095,689	\$31,090,061					\$315,154,131
	Medicaid Disproportionate Share Hospital (DSH) and Other Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0					\$0
	Medicaid Hospital Quality Incentive Payments	\$7,064,718	\$9,513,697	\$9,511,013	\$7,481,474	\$7,472,462	\$8,229,880	\$7,088,053	\$7,088,053					\$63,449,350
	Outpatient Medicaid Supplemental Payments	\$18,169,282	\$68,899,759	\$69,058,689	\$24,560,536	\$24,550,304	\$26,657,578	\$23,571,285	\$23,571,285					\$279,038,718
	Total Medical Services Premiums Payments	\$57,068,785	\$136,922,655	\$136,966,695	\$65,238,516	\$65,332,872	\$72,608,250	\$61,755,027	\$61,749,399	\$0	\$0	\$0	\$0	\$657,642,199
CICP	CICP Disproportionate Share Hospital (DSH) Payment	\$16,516,757	\$18,807,985	\$18,807,976	\$18,807,976	\$14,316,753	\$21,588,879	\$10,680,690	\$10,680,690					\$130,207,706
	Uncompensated Care Supplemental Hospital Medicaid Payment	\$9,623,347	\$9,788,845	\$9,788,853	\$9,788,853	\$9,623,348	\$11,186,370	\$8,759,090	\$8,759,090					\$77,317,796
	Total CICP Payments	\$26,140,104	\$28,596,830	\$28,596,829	\$28,596,829	\$23,940,101	\$32,775,249	\$19,439,780	\$19,439,780	\$0	\$0	\$0	\$0	\$207,525,502
Total Supplemental Payments		\$83,208,889	\$165,519,485	\$165,563,524	\$93,835,345	\$89,272,973	\$105,383,499	\$81,194,807	\$81,189,179	\$0	\$0	\$0	\$0	\$865,167,701

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MEDICAID CASELOAD WITHOUT RETROACTIVITY¹																	
	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	164,569	156,205	296,427	285	465,588	68,165	20,034	12,813	2,392	2,789	34,322	1,353,769	
April 2017	44,637	11,381	67,367	7,018	174,085	141,660	309,197	279	466,511	67,508	20,433	12,786	2,321	2,868	34,407	1,362,458	
May 2017	44,816	11,401	67,183	7,042	179,878	116,609	333,778	274	467,044	67,596	20,681	12,727	2,276	2,992	34,806	1,369,103	
June 2017	44,814	11,420	67,109	7,102	182,132	82,613	368,291	264	462,931	66,503	20,557	12,236	2,229	2,941	34,798	1,365,940	
FY 2016-17 Actuals	43,941	11,241	67,619	6,251	161,422	101,059	347,848	295	469,297	64,906	20,310	13,567	1,968	2,640	33,809	1,346,173	
July 2017	44,896	11,410	67,009	7,274	181,640	82,329	370,674	150	457,780	65,467	20,651	11,545	2,177	2,925	34,833	1,360,760	
August 2017	45,233	11,486	67,079	7,366	182,123	83,011	374,722	145	457,326	66,362	20,804	11,069	2,119	2,957	35,078	1,366,880	
September 2017	45,431	11,509	66,918	7,462	181,352	82,088	376,011	132	452,116	66,778	20,941	10,343	2,105	2,831	35,157	1,361,174	
October 2017	45,606	11,558	66,985	7,797	179,385	73,998	350,968	139	444,507	67,110	21,093	9,948	2,197	2,842	34,883	1,319,016	
November 2017	45,824	11,643	67,142	7,980	179,750	71,489	350,249	149	441,219	66,946	21,305	9,601	2,222	2,716	34,999	1,313,234	
December 2017	45,985	11,718	67,066	8,204	179,877	72,942	356,175	151	439,244	66,517	21,485	9,138	2,154	2,677	35,001	1,318,334	
January 2018	46,005	11,812	67,365	8,438	180,335	69,709	345,699	157	437,341	66,260	21,576	9,238	2,202	2,704	34,842	1,303,683	
February 2018	46,038	11,860	67,688	8,663	180,744	70,071	345,064	165	433,460	64,494	21,701	9,067	2,219	2,707	34,868	1,298,809	
March 2018																	
April 2018																	
May 2018																	
June 2018																	
FY 2017-18 Year-to-Date Average	45,627	11,625	67,156	7,898	180,650	75,704	358,695	149	445,374	66,242	21,195	9,994	2,174	2,795	34,958	1,330,236	
FY 2017-18 Year-to-Date Appropriation	45,242	11,681	67,743	7,811	188,617	91,246	380,104	117	466,328	68,762	20,584	11,429	2,365	2,782	36,869	1,401,680	
Monthly Growth	33	48	323	225	409	362	(635)	8	(3,881)	(1,766)	125	(171)	17	3	26	(4,874)	
Monthly Growth Rate	0.07%	0.41%	0.48%	2.67%	0.23%	0.52%	-0.18%	5.10%	-0.89%	-2.67%	0.58%	-1.85%	0.77%	0.11%	0.07%	-0.37%	
Over-the-year Growth	2,389	497	(191)	2,281	21,835	(16,895)	(16,773)	(120)	(34,310)	(122)	1,466	(3,793)	454	301	1,701	(41,280)	
Over-the-year Growth Rate	5.47%	4.37%	-0.28%	35.74%	13.74%	-19.43%	-4.64%	-42.11%	-7.33%	-0.19%	7.24%	-29.49%	25.72%	12.51%	5.13%	-3.08%	

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 HB 18-1161 (Supplemental 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 March 15, 2018, 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 January 2018 report, the Department restated caseload for March through November, as the result of improved identification of eligibility categories within the data. This change resulted in fluctuations among the MAGI Parents/Caretakers to 68% FPL, MAGI Eligible Children, SB 11-008 Eligible Children, MAGI Pregnant Adults, and SB 11-250 Eligible Pregnant Adults categories.

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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	160,814	73,128	328,717	141	422,019	60,713	20,424	10,400	1,956	2,925	34,833	1,230,735
August 2017	38,664	9,715	60,058	6,762	161,357	73,476	331,468	137	421,764	61,466	20,579	9,937	1,919	2,957	35,078	1,235,337
September 2017	38,896	9,738	59,964	6,855	160,827	72,743	332,209	125	417,281	62,031	20,717	9,224	1,917	2,831	35,157	1,230,515
October 2017	38,444	9,702	59,650	7,137	159,024	65,760	309,936	131	410,504	62,415	20,858	8,881	1,979	2,842	34,883	1,192,146
November 2017	38,599	9,772	59,798	7,335	159,542	63,672	310,166	141	407,881	62,281	21,090	8,603	2,033	2,716	34,999	1,188,628
December 2017	38,728	9,838	59,706	7,505	159,530	64,978	315,012	143	405,642	61,893	21,273	8,128	1,952	2,677	35,001	1,192,006
January 2018	38,783	9,921	59,969	7,721	160,073	62,231	305,671	148	404,143	61,800	21,368	8,256	2,007	2,704	34,842	1,179,637
February 2018	38,875	9,945	60,249	7,916	160,337	62,435	304,204	154	400,732	60,115	21,493	8,100	2,029	2,707	34,868	1,174,159
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	38,667	9,787	59,921	7,240	160,188	67,303	317,172	140	411,245	61,589	20,975	8,941	1,974	2,795	34,958	1,202,895
Medicaid Managed Care³																
July 2017	6,553	1,746	7,038	587	20,826	9,201	41,957	9	35,761	4,754	227	1,145	221	-	-	130,025
August 2017	6,569	1,771	7,021	604	20,766	9,535	43,254	8	35,562	4,896	225	1,132	200	-	-	131,543
September 2017	6,535	1,771	6,954	607	20,525	9,345	43,802	7	34,835	4,747	224	1,119	188	-	-	130,659
October 2017	7,162	1,856	7,335	660	20,361	8,238	41,032	8	34,003	4,695	235	1,067	218	-	-	126,870
November 2017	7,225	1,871	7,344	645	20,208	7,817	40,083	8	33,338	4,665	215	998	189	-	-	124,606
December 2017	7,257	1,880	7,360	699	20,347	7,964	41,163	8	33,602	4,624	212	1,010	202	-	-	126,328
January 2018	7,222	1,891	7,396	717	20,262	7,478	40,028	9	33,198	4,460	208	982	195	-	-	124,046
February 2018	7,163	1,915	7,439	747	20,407	7,636	40,860	11	32,728	4,379	208	967	190	-	-	124,650
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	6,961	1,838	7,235	658	20,463	8,402	41,522	9	34,128	4,653	219	1,053	200	-	-	127,341
Rocky Mountain Health Plans HMO																
July 2017	1,574	600	3,186	401	9,069	4,505	17,645	-	90	19	1	539	132	-	-	37,761
August 2017	1,597	614	3,177	408	8,975	4,614	17,842	-	77	15	3	533	118	-	-	37,973
September 2017	1,588	616	3,166	417	8,923	4,590	17,920	-	34	9	-	492	118	-	-	37,873
October 2017	1,640	624	3,211	440	8,910	4,120	17,074	-	92	19	-	489	122	-	-	36,741
November 2017	1,674	616	3,231	441	8,915	3,960	16,777	-	124	26	-	459	111	-	-	36,334
December 2017	1,701	611	3,227	453	8,888	4,025	16,813	-	35	7	-	445	116	-	-	36,321
January 2018	1,705	622	3,260	470	8,884	3,898	16,353	-	33	17	-	444	113	-	-	35,799
February 2018	1,698	634	3,287	474	8,963	3,959	16,406	-	14	2	-	438	106	-	-	35,981
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	1,647	617	3,218	438	8,941	4,209	17,104	-	62	14	1	480	117	-	-	36,848
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	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	2

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	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	11,753	4,696	24,312	9	35,668	4,735	226	606	89	-	-	88,694
August 2017	1,980	762	3,642	196	11,787	4,921	25,412	8	35,482	4,881	222	599	82	-	-	89,974
September 2017	1,951	752	3,588	190	11,602	4,755	25,882	7	34,801	4,738	224	627	70	-	-	89,187
October 2017	2,536	837	3,926	220	11,451	4,118	23,958	8	33,911	4,676	235	578	96	-	-	86,550
November 2017	2,522	848	3,913	204	11,293	3,857	23,306	8	33,214	4,639	215	539	78	-	-	84,636
December 2017	2,492	851	3,934	246	11,459	3,939	24,350	8	33,567	4,617	212	565	86	-	-	86,326
January 2018	2,463	853	3,940	247	11,378	3,580	23,675	9	33,165	4,443	208	538	82	-	-	84,581
February 2018	2,436	868	3,960	273	11,444	3,677	24,454	11	32,714	4,377	208	529	84	-	-	85,035
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	2,298	816	3,819	220	11,521	4,193	24,419	9	34,065	4,638	219	573	83	-	-	86,873
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	3,029	407	200	-	-	-	-	-	-	-	-	-	-	-	-	3,636
December 2017	3,064	418	199	-	-	-	-	-	-	-	-	-	-	-	-	3,681
January 2018	3,054	416	196	-	-	-	-	-	-	-	-	-	-	-	-	3,666
February 2018	3,029	413	192	-	-	-	-	-	-	-	-	-	-	-	-	3,634
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	3,015	404	199	-	-	-	-	-	-	-	-	-	-	-	-	3,618
ACC - Accountable Care Collaborative⁵																
July 2017	25,961	8,308	53,727	4,373	142,783	58,224	294,901	79	367,067	50,403	18,825	7,804	1,335	-	-	1,033,790
August 2017	26,293	8,455	54,489	4,586	147,503	63,458	305,205	77	376,013	53,119	19,364	7,543	1,389	1	-	1,067,495
September 2017	26,353	8,395	54,163	4,624	145,592	62,565	305,795	74	367,810	52,418	19,419	6,868	1,366	2	-	1,055,444
October 2017	26,146	8,394	53,846	4,769	143,011	54,992	282,482	82	356,280	51,717	19,562	6,597	1,419	2	-	1,009,299
November 2017	26,260	8,421	53,686	4,885	141,916	51,894	277,060	88	349,908	50,725	19,679	6,212	1,410	1	-	992,145
December 2017	26,458	8,512	54,356	5,165	143,981	54,114	278,067	88	357,050	51,943	19,917	6,051	1,448	-	-	1,007,150
January 2018	26,460	8,559	54,530	5,355	144,412	50,839	267,255	94	354,956	51,613	19,981	6,139	1,469	-	-	991,662
February 2018	26,309	8,571	54,714	5,571	144,723	51,465	267,608	98	349,320	49,784	20,121	5,830	1,423	1	-	985,538
March 2018																
April 2018																
May 2018																
June 2018																
FY 2017-18 Year-to-Date Average	26,280	8,452	54,189	4,916	144,240	55,944	284,796	85	359,800	51,465	19,609	6,631	1,407	1	-	1,017,815

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 March 15, 2018, and may be restated in future reports based on further analysis.
- 6) In the January 2018 report, the Department restated caseload for July through November, as the result of improved identification of eligibility categories within the data. This change resulted in fluctuations among the MAGI Parents/Caretakers to 68% FPL, MAGI Eligible Children, SB 11-008 Eligible Children, MAGI Pregnant Adults, and SB 11-250 Eligible Pregnant Adults categories.

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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	2,865	2,841	2,812	2,765					2,951
	Delta	8,532	8,648	8,529	8,222	8,131	8,257	8,223	8,168					8,339
	Dolores	526	542	541	534	505	526	524	528					528
	Eagle	5,720	5,816	5,742	5,375	5,272	5,252	5,191	5,165					5,442
	Garfield	11,795	11,754	11,583	11,222	11,038	11,135	11,070	10,940					11,317
	Grand	1,627	1,667	1,632	1,569	1,539	1,577	1,564	1,559					1,592
	Gunnison	3,116	3,111	3,098	2,954	2,864	2,855	2,793	2,771					2,945
	Hinsdale	141	142	143	140	146	143	131	129					139
	Jackson	252	262	254	237	231	231	238	230					242
	La Plata	10,069	10,239	10,068	9,704	9,525	9,603	9,424	9,571					9,775
	Larimer	55,811	56,370	55,648	53,071	52,331	52,967	51,940	51,448					53,699
	Mesa	40,852	41,123	40,703	39,635	39,397	40,008	39,697	39,570					40,124
	Moffat	3,166	3,186	3,181	3,081	3,045	3,077	3,025	2,977					3,092
	Montezuma	8,426	8,540	8,473	8,208	8,046	8,203	8,192	8,159					8,281
	Montrose	11,042	11,111	11,024	10,780	10,708	10,823	10,815	10,760					10,883
	Ouray	620	639	632	607	590	586	568	566					601
	Pitkin	1,416	1,445	1,444	1,349	1,341	1,365	1,332	1,362					1,382
	Rio Blanco	1,072	1,068	1,057	1,037	1,036	1,090	1,094	1,100					1,069
	Routt	3,342	3,370	3,353	3,140	3,061	3,044	2,937	2,923					3,146
	San Juan	153	153	157	152	146	146	143	153					150
San Miguel	1,001	1,059	1,040	994	979	995	981	1,008					1,007	
Summit	3,091	3,125	3,091	2,912	2,842	2,872	2,832	2,857					2,953	
Unknown ⁽¹⁾	353	518	575	524	539	343	257	302					426	
Total	175,220	177,051	175,072	168,409	166,177	167,939	165,783	165,011						170,083
RCCO 2	Cheyenne	411	400	400	392	384	399	391	394					396
	Kit Carson	1,602	1,620	1,631	1,614	1,570	1,592	1,584	1,558					1,596
	Lincoln	1,184	1,202	1,207	1,164	1,150	1,157	1,135	1,111					1,164
	Logan	3,920	4,003	3,923	3,860	3,824	3,956	3,956	3,895					3,917
	Morgan	7,076	7,180	7,099	6,855	6,769	6,971	6,966	6,942					6,982
	Phillips	824	823	807	775	761	776	765	752					785
	Sedgwick	573	560	548	552	549	556	554	544					555
	Washington	1,042	1,049	1,048	1,006	977	1,016	1,035	993					1,021
	Weld	59,339	59,750	58,838	56,418	55,316	56,296	55,566	54,919					57,056
	Yuma	2,202	2,234	2,244	2,171	2,104	2,108	2,083	2,070					2,152
	Unknown ⁽¹⁾	261	404	440	450	402	219	214	205					324
Total	78,434	79,225	78,185	75,257	73,806	75,046	74,249	73,383						75,948
RCCO 3²	Adams	113,613	124,310	122,502	115,607	112,712	114,785	112,699	111,996					116,028
	Arapahoe	106,244	117,429	115,816	110,122	107,910	110,133	108,377	107,489					110,440
	Douglas	21,570	23,799	23,670	22,690	22,209	22,478	22,026	21,949					22,549
	Unknown ⁽¹⁾	1,025	1,622	1,669	1,585	1,597	1,046	889	921					1,294
Total	242,452	267,160	263,657	250,004	244,428	248,442	243,991	242,355						250,311

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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	5,996	6,142	6,092	6,093					6,136
	Baca	1,115	1,153	1,146	1,126	1,139	1,143	1,141	1,126					1,136
	Bent	1,530	1,553	1,543	1,501	1,478	1,510	1,506	1,524					1,518
	Chaffee	3,268	3,294	3,301	3,140	3,081	3,092	3,060	3,055					3,161
	Conejos	2,971	2,963	2,922	2,871	2,832	2,849	2,838	2,768					2,877
	Costilla	1,700	1,727	1,720	1,698	1,694	1,705	1,696	1,693					1,704
	Crowley	1,264	1,288	1,278	1,265	1,265	1,284	1,301	1,303					1,281
	Custer	791	785	766	772	761	776	779	753					773
	Fremont	11,352	11,508	11,407	11,067	10,999	11,293	11,234	11,160					11,252
	Huerfano	2,506	2,544	2,527	2,454	2,448	2,491	2,469	2,486					2,491
	Kiowa	344	346	333	324	317	328	333	320					331
	Lake	1,322	1,364	1,336	1,247	1,250	1,245	1,243	1,249					1,282
	Las Animas	5,059	5,105	5,089	4,956	4,900	4,990	4,961	4,953					5,002
	Mineral	156	158	149	143	141	145	146	143					148
	Otero	6,847	6,914	6,893	6,720	6,654	6,750	6,702	6,606					6,761
	Prowers	4,472	4,475	4,400	4,270	4,156	4,250	4,244	4,210					4,310
	Pueblo	60,588	61,268	60,935	59,131	58,307	59,170	58,584	58,350					59,541
	Rio Grande	3,935	3,978	3,914	3,815	3,739	3,766	3,733	3,741					3,828
	Saguache	1,923	1,916	1,916	1,882	1,848	1,866	1,877	1,890					1,890
Unknown ⁽¹⁾	328	506	510	471	480	297	210	209					376	
Total	117,716	119,140	118,278	114,888	113,485	115,092	114,149	113,632						115,798
RCCO 5	Denver	111,483	111,518	109,585	103,825	102,032	104,856	102,260	101,253					105,851
	Unknown ⁽¹⁾	644	809	753	707	767	922	665	620					736
	Total	112,127	112,327	110,338	104,532	102,799	105,778	102,925	101,873					106,587
RCCO 6	Boulder	45,423	45,830	45,359	43,220	42,487	42,869	42,027	41,972					43,648
	Broomfield	5,522	5,578	5,565	5,382	5,335	5,560	5,501	5,501					5,493
	Clear Creek	1,374	1,379	1,368	1,314	1,277	1,283	1,286	1,248					1,316
	Gilpin	821	853	845	815	798	796	805	794					816
	Jefferson	79,941	80,970	79,962	75,693	73,893	74,746	73,161	72,458					76,353
	Unknown ⁽¹⁾	675	1,020	1,002	905	962	717	512	543					792
Total	133,756	135,630	134,101	127,329	124,752	125,971	123,292	122,516						128,418
RCCO 7	El Paso	163,279	165,898	164,838	158,315	156,285	158,472	156,995	156,558					160,080
	Elbert	2,669	2,736	2,694	2,594	2,500	2,565	2,549	2,497					2,601
	Park	2,768	2,818	2,780	2,661	2,617	2,686	2,692	2,704					2,716
	Teller	4,971	5,009	4,951	4,770	4,789	4,801	4,722	4,711					4,840
	Unknown ⁽¹⁾	398	501	550	540	507	358	315	298					433
Total	174,085	176,962	175,813	168,880	166,698	168,882	167,273	166,768						170,670
Total ACC Caseload	1,033,790	1,067,495	1,055,444	1,009,299	992,145	1,007,150	991,662	985,538						1,017,815

(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	\$49,555,280	\$49,547,889	\$7,391
August	\$49,819,612	\$49,818,022	\$1,590
September	\$49,547,747	\$49,544,198	\$3,549
October	\$48,206,098	\$48,201,694	\$4,404
November	\$54,795,655	\$54,793,026	\$2,629
December	(\$6,330,894)	(\$6,395,673)	\$64,779
January	\$47,531,556	\$47,474,092	\$57,464
February	\$47,282,006	\$47,242,933	\$39,073
March			
April			
May			
June			
Total Year-to-Date Expenditures	\$340,407,060	\$340,226,180	\$180,879
Total Year-to-Date Appropriation	\$558,865,335	\$549,903,817	\$8,961,518
Remaining in Appropriation	\$218,458,275	\$209,677,637	\$8,780,639

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 HB 18-1161 (Supplemental 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 March 15, 2018, and may be restated in future reports based on further analysis.
- 4) For the January 2018 report, the Department restated expenditure for July through November, as the result of a system improvement allowing for better identification of data. The net effect on expenditure is zero, but the expenditure by category has changed among services and appropriations.
- 5) Mental Health Capitation Payments expenditure for December 2017 is negative due to the collection of anticipated recoupments from Behavioral Health Organizations.

**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	\$49,547,889	\$10,953,484	\$10,117,623	\$5,523,234	\$16,184,039	\$6,769,509	\$0
August	\$49,818,022	\$10,970,710	\$10,193,428	\$5,553,527	\$16,280,012	\$6,820,345	\$0
September	\$49,544,198	\$10,907,161	\$10,145,948	\$5,512,022	\$16,209,672	\$6,769,395	\$0
October	\$48,201,694	\$10,579,768	\$9,818,331	\$5,376,098	\$15,864,277	\$6,563,220	\$0
November	\$54,793,026	\$11,849,282	\$11,240,794	\$6,094,051	\$18,317,581	\$7,291,318	\$0
December	(\$6,395,673)	(\$3,408,695)	(\$1,286,734)	\$723,813	(\$423,587)	(\$2,000,470)	\$0
January	\$47,474,092	\$10,479,766	\$9,276,274	\$5,314,202	\$15,898,676	\$6,505,173	\$0
February	\$47,242,933	\$10,439,397	\$9,270,589	\$5,277,824	\$15,812,579	\$6,442,542	\$0
March							
April							
May							
June							
Total Year-to-Date Expenditures	\$340,226,181	\$72,770,874	\$68,776,253	\$39,374,772	\$114,143,250	\$45,161,032	\$0
Total Year-to-Date Appropriation	\$549,903,817						
Remaining in Appropriation	\$209,677,636						

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	1,275,519	302,049	199,039	156,004	454,430	153,398	-	10,599
December	1,280,656	302,778	199,868	156,138	456,528	154,121	-	11,223
January	1,266,137	298,546	196,478	154,110	452,563	151,421	-	13,019
February	1,261,234	297,678	196,215	153,275	451,203	150,473	-	12,390
March								
April								
May								
June								
Total Year-to-Date Average	1,292,484	307,410	201,557	157,891	459,349	155,748		10,529
Total Year-to-Date Appropriation	1,362,029							

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 March 15, 2018, and may be restated in future reports based on further analysis.
- 4) For the January 2018 report, the Department restated expenditure for July through November, as the result of a system improvement allowing for better identification of data. The net effect on expenditure is zero, but the expenditure by category has changed among services and appropriations.
- 5) Mental Health Program Expenditures for December 2017 are primarily negative due to the collection of anticipated recoupments from Behavioral Health Organizations.

**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	\$12,493,688	\$11,187,367	\$1,306,321	\$0
December	\$24,766,671	\$17,381,522	\$1,385,149	\$6,000,000
January	\$24,266,502	\$19,578,087	\$1,230,791	\$3,457,625
February	\$46,989,451	\$41,212,909	\$1,243,371	\$4,533,170
March				
April				
May				
June				
Total Year-to-Date Expenditures	\$162,426,271	\$136,248,571	\$10,786,904	\$15,390,795
Total Year-to-Date Appropriation	\$179,773,700			
Remaining in Appropriation	\$17,347,429			
Notes:				
1) FY 2017-18 Year-to-Date Appropriation includes HB 18-1161 (Supplemental 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 March 15, 2018, and may be restated in future reports based on further analysis.				
3) For the January 2018 report, the Department restated expenditure for July through November, as the result of a system improvement allowing for better identification of data. The net effect on expenditure is zero, but the expenditure by category has changed among services and appropriations.				
4) Children's Basic Health Plan Expenditures for December 2017 and January 2018 are inflated due to the payment of interim payments for the State Managed Care Network.				
5) Children's Basic Health Plan Expenditures for February 2018 was artificially high due to multiple system issues, causing the year-to-date expenditure to appear inflated. The Department is working on fixing these issues and expects expenditure to normalize before the end of the year.				

**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	50,032	25,301	75,333	277	565	842
December 2017	50,276	24,999	75,275	294	568	862
January 2018	50,891	25,260	76,151	294	575	869
February 2018	54,854	27,049	81,903	302	564	866
March 2018						
April 2018						
May 2018						
June 2018						
FY 2017-18 Year-to-Date Average	50,830	25,150	75,980	284	540	824
FY 2017-18 Year-to-Date Appropriation	46,934	22,077	69,011	243	549	792
Monthly Growth	3,963	1,789	5,752	8	(11)	(3)
Monthly Growth Rate	7.79%	7.08%	7.55%	2.72%	-1.91%	-0.35%
Over-the-year Growth	11,780	5,858	17,638	94	66	160
Over-the-year Growth Rate	27.35%	27.64%	27.45%	45.19%	13.25%	22.66%
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 March 15, 2018, and may be restated in future reports based on further analysis.						

Department of Health Care Policy and Financing
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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	5,188	5,226	5,267	5,277					5,187	5,587		
	HCBS - Developmental Disabilities - Regional Centers	48	41	35	< 30	< 30	< 30	< 30	< 30					N/A	-		
	HCBS - Supported Living Services	4,639	4,667	4,674	4,750	4,739	4,764	4,803	4,817					4,732	-		
	HCBS - Children's Extensive Support	1,616	1,621	1,633	1,652	1,687	1,682	1,694	1,722					1,663	-		
	HCBS - Targeted Case Management	11,413	11,465	11,458	11,607	11,634	11,672	11,764	11,816					11,604	-		
	DIDD Subtotal	11,413	11,465	11,458	11,607	11,634	11,672	11,764	11,816					11,604	-		
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	\$32,479,062	\$27,738,543	\$1,281,647	\$32,734,351	\$30,874,405	\$28,593,931	\$32,591,624	\$29,419,489					\$245,713,052	\$381,006,241	64.49%	
	HCBS - Developmental Disabilities - Regional Centers	\$0	\$308,963	\$545,445	\$153,039	\$7,146,676	\$954,356	\$2,116,010	\$3,631,483					\$14,855,972	\$0		
	HCBS - Supported Living Services	\$6,362,536	\$4,358,777	\$5,042,098	\$6,118,031	\$5,246,954	\$4,845,135	\$5,021,107	\$5,012,153					\$42,006,790	\$66,499,773	63.17%	
	HCBS - Children's Extensive Support	\$2,473,363	\$2,139,403	\$2,058,248	\$2,515,944	\$2,097,569	\$2,376,484	\$1,900,584	\$1,815,327					\$17,376,922	\$26,862,221	64.69%	
	HCBS - Targeted Case Management	\$2,836,349	\$1,409,463	\$2,263,316	\$3,301,842	\$2,050,885	\$2,107,083	\$2,192,412	\$2,729,742					\$18,891,093	\$29,967,846	63.04%	
	Quality Assurance, Utilization Review and Supports Intensity Scale	\$0	\$390,555	\$404,761	\$401,285	\$418,034	\$408,109	\$404,689	\$354,716					\$2,782,148	\$5,227,918	53.22%	
	DIDD Subtotal	\$44,151,310	\$36,345,703	\$41,595,516	\$45,224,492	\$47,834,523	\$39,285,099	\$44,226,425	\$42,962,910					\$326,770,006	\$509,563,999	64.13%	
Number of Weeks in Month	5	4	4	5	4	4	5	4	5	4	5	4	5	4	5		
Expenditure Per Week	\$8,830,262	\$9,086,426	\$10,398,879	\$9,044,898	\$11,958,631	\$9,821,275	\$8,845,285	\$10,740,727						\$9,336,286			
State Only Programs	State Only Supported Living Services	\$0	\$600,890	\$600,890	\$668,438	\$550,648	\$600,890	\$600,890	\$600,890					\$4,223,535	\$8,030,743	52.59%	
	Family Support Services Program	\$0	\$582,267	\$582,267	\$647,369	\$517,165	\$582,267	\$582,267	\$582,267					\$4,075,871	\$7,058,033	57.75%	
	State Only Case Management	\$0	\$163,628	\$163,628	\$181,986	\$146,408	\$163,628	\$163,628	\$163,628					\$1,146,536	\$2,116,047	54.18%	
	State Only Programs Subtotal	\$0	\$1,346,785	\$1,346,785	\$1,497,793	\$1,214,222	\$1,346,785	\$1,346,785	\$1,346,785	\$1,346,785					\$9,445,942	\$17,204,823	54.90%
	Expenditure Per Week	\$0	\$336,696	\$336,696	\$299,559	\$303,555	\$336,696	\$269,357	\$336,696					\$200,977			

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 processed significantly more claims for Regional Center HCBS-DD clients in November. The Department believes that these claims were submitted to reconcile unpaid claims that were rejected due to systems issue with the Departments new interchange claim processing system that went live in March 2017.
7) There is a known systems issue preventing PAR registration for Regional Center HCBS-DD clients. PAR caseload data for this population is likely to be artificially low, and the Department will update caseload figures as soon as reliable date is available.
8) 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 March 15, 2018, and may be restated in future reports based on further analysis.
9) Caseload numbers shown as "< 30" cannot be displayed due to the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
10) For the January 2018 report, the Department restated expenditure for July through November, as the result of a system improvement allowing for better identification of data. The net effect on expenditure is zero, but the expenditure by category has changed among services and appropriations.

**Department of Health Care Policy and Financing
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FY 2017-18 Old Age Pension State Medical Program Expenditures and Caseload		
	Total Expenditures	Old Age Pension State Medical Program Caseload
July	\$33,622	100
August	\$53,690	103
September	\$43,627	114
October	\$50,008	102
November	\$22,827	101
December	\$23,825	106
January	\$37,614	122
February	\$47,031	126
March		
April		
May		
June		
Total Year-to-Date	\$312,244	109
Total Year-to-Date Appropriation	\$10,000,000	
Remaining in Appropriation	\$9,687,756	

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) Year-to-Date Totals are calculated as the sum of monthly expenditures and the average of monthly caseload.
- 3) Excess funds in the Old Age Pension Health and Medical Care Fund are used to offset the need for General Fund in the Medical Services Premiums line item.
- 4) FY 2017-18 Year-to-Date Appropriation includes HB 18-1161 (Supplemental Bill).
- 5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of March 15, 2018, and may be restated in future reports based on further analysis.
- 6) For the January 2018 report, the Department restated expenditure for July through November, as the result of a system improvement allowing for better identification of data. The net effect on expenditure is zero, but the expenditure by category has changed among services and appropriations.

**Department of Health Care Policy and Financing
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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	76,762
November	\$12,038,797	75,872
December	\$12,195,972	67,463
January	\$12,065,439	71,444
February	\$10,857,580	
March		
April		
May		
June		
Total Year-to-Date	\$95,397,234	74,151
Total Year-to-Date Appropriation	\$146,635,899	76,570
Remaining in Appropriation	\$51,238,665	

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 HB 18-1161 (Supplemental Bill).