

Department of Health Care Policy and Financing
 FY 2019-20 Medical Premiums Expenditure and Caseload Report

FY 2020-21														
	Service Category	July 2020	August 2020	September 2020	October 2020	November 2020	December 2020	January 2021	February 2021	March 2021	April 2021	May 2021	June 2021	FY 2019-20 Total YTD
Acute Care	Physician and Clinic Services	\$65,430,567	\$87,394,234											\$152,824,801
	EPSDT Screening	\$3,368,074	\$5,496,543											\$8,864,617
	Emergency Transportation	\$4,415,048	\$6,621,308											\$11,036,356
	Non-Emergency Medical Transportation	\$3,445,708	\$5,766,513											\$9,212,221
	Dental Service	\$31,563,584	\$26,279,780											\$57,843,364
	Family Planning	\$0	\$0											\$0
	Health Maintenance Organization	\$38,886,517	\$37,658,873											\$76,545,390
	Inpatient Hospital	\$63,745,468	\$101,573,049											\$165,318,517
	Outpatient Hospital	\$43,044,675	\$56,320,166											\$99,364,841
	Laboratory and X-Ray	\$6,541,157	\$11,210,477											\$17,751,634
	Durable Medical Equipment (DME)	\$12,465,634	\$16,612,094											\$29,077,728
	Pharmacy	\$88,607,276	\$107,973,131											\$196,580,407
	Drug Rebates - Standard	\$0	(\$165,499,177)											(\$165,499,177)
	Rural Health Centers	\$1,861,860	\$2,706,456											\$4,568,316
	Federally Qualified Health Centers	\$10,782,790	\$14,580,313											\$25,363,103
	Prepaid Inpatient Health Plan Services	\$0	\$0											\$0
	Other Medical Services	\$0	\$0											\$0
	Preventive Services	\$1,373,007	\$1,911,835											\$3,284,842
Acute Home Health	\$2,174,750	\$2,886,701											\$5,061,451	
Acute Care Subtotal	\$382,769,826	\$328,485,102	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$711,254,928
Community Based Long Term Care	HCBS - Elderly, Blind, and Disabled	\$43,753,020	\$49,055,928											\$92,808,948
	HCBS - Community Mental Health Supports	\$3,832,869	\$4,652,669											\$8,485,538
	HCBS - Children's HCBS	\$4,567,863	\$5,710,156											\$10,278,019
	HCBS - Consumer Directed Attendant Support	\$0	\$0											\$0
	HCBS - Brain Injury	\$2,558,745	\$2,473,460											\$5,032,205
	HCBS - Children with Autism	\$0	\$0											\$0
	HCBS - Children with Life Limiting Illness	\$47,282	\$59,856											\$107,138
	HCBS - Spinal Cord Injury	\$710,066	\$739,677											\$1,449,743
	CCT - Services	\$273,421	\$505,853											\$779,274
	Private Duty Nursing	\$8,927,942	\$10,143,136											\$19,071,078
	Long-Term Home Health	\$33,748,737	\$41,448,070											\$75,196,807
	Hospice	\$5,176,933	\$5,794,085											\$10,971,018
	CB LTC Subtotal	\$103,596,878	\$120,582,890	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$224,179,768
Long Term Care and Insurance	Class I Nursing Facilities	\$51,961,417	\$60,500,699											\$112,462,116
	Class II Nursing Facilities	\$4,455	\$421,656											\$426,111
	Program of All-Inclusive Care for the Elderly	\$19,519,472	\$20,131,457											\$39,650,929
	Supplemental Medicare Insurance Benefit	\$18,249,678	\$17,972,776											\$36,222,454
	Health Insurance Buy-In Program	\$164,986	\$203,182											\$368,168
	LTC + Insurance Subtotal	\$89,900,008	\$99,229,770	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$189,129,778
Service Mgmt.	Single Entry Points	(\$247,087)	(\$163,894)											(\$410,981)
	Disease Management	\$0	\$0											\$0
	Prepaid Inpatient Health Plan Administration	\$19,015,010	\$16,699,163											\$35,714,173
	Service Management Subtotal	\$18,767,923	\$16,535,269	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$35,303,192
Financing	Nursing Facility Upper Payment Limit	\$0	\$0											\$0
	Outpatient Hospital Upper Payment Limit	\$0	\$0											\$0
	Home Health Service Upper Payment Limit	\$0	\$0											\$0
	Public Emergency Medical Transportation Provider Payments	\$0	\$0											\$0
	Hospital Supplemental Medicaid Payments	\$92,028,250	\$157,988,754											\$250,017,004
	Nursing Facility Supplemental Payments	\$9,813,637	\$10,292,649											\$20,106,286
	Physician Supplemental Payments	\$0	\$0											\$0
	Outstationing Payments	\$0	\$0											\$0
	University of Colorado School of Medicine Payments	\$0	\$0											\$0
	Other Supplemental Payments	\$0	\$0											\$0
	Accounting Adjustments (3)	\$9,480,470	\$7,385,292											\$16,865,762
	Other Categories Subtotal	\$111,322,357	\$175,666,695	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Number of Weeks in Month	4	5	4	4	5	4	4	4	4	5	4	5	4	52
	\$706,356,992	\$740,499,726	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,446,856,718

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

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FY 2020-21 Appropriation	
HB 20-1360 FY 2020-21 Long Bill	\$9,043,278,907
HB 20-1362 Nursing Home Provider Rates	(\$7,011,151)
SB 20-212 FY 2020-21 Reimbursement for Telehealth Services	\$5,068,381
HB 20-1361 Dental Cap Reduction	(\$5,565,000)
HB 20-1386 HAS Fee Transfer for GF offset	\$0
HB 20-1385 Use of Increased Medicaid Match	(\$4,310,802)
FY 2020-21 Appropriation YTD	\$9,031,460,335
FY 2020-21 YTD Expenditures	\$1,446,856,718
FY 2020-21 Appropriation YTD	\$7,584,603,617

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FY 2020-21 Supplemental Payments by Service Category														
	Service Category	July 2020	August 2020	September 2020	October 2020	November 2020	December 2020	January 2021	February 2021	March 2021	April 2021	May 2021	June 2021	FY 2020-21 Total YTD
Medical Services Premiums Hospital Supplemental Payments	Inpatient Medicaid Supplemental Payments	\$40,306,138	\$61,890,659											\$102,196,797
	Medicaid Disproportionate Share Hospital (DSH) and Other Payments	\$0	\$0											\$0
	Medicaid Hospital Quality Incentive Payments	\$7,537,146	\$7,645,878											\$15,183,024
	Uncompensated Care Supplemental Hospital Medicaid Payment	\$8,998,362	(\$4,499,181)											\$4,499,181
	Public High Volume Hospital Payment	\$0	\$0											\$0
	Outpatient Medicaid Supplemental Payments	\$38,911,921	\$88,452,217											\$127,364,138
	Total Medical Services Premiums Payments	\$95,753,567	\$153,489,573	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
CICP	CICP Disproportionate Share Hospital (DSH) Payment	\$18,216,602	\$18,031,380											\$36,247,982
	Uncompensated Care Supplemental Hospital Medicaid Payment	\$0	(\$40,492,629)											(\$40,492,629)
	Total CICP Payments	\$18,216,602	(\$22,461,249)											(\$4,244,647)
Total Supplemental Payments		\$113,970,169	\$131,028,324	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$244,998,493
Notes:														

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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 2020	37,798	11,025	59,494	11,303	146,259	64,773	305,937	141	395,007	56,649	20,303	11,133	2,546	2,947	34,313	1,159,628
August 2020	38,040	10,905	58,283	12,906	147,325	67,670	313,774	144	400,099	58,819	20,312	11,268	2,739	3,201	34,486	1,179,971
September 2020																
October 2020																
November 2020																
December 2020																
January 2021																
February 2021																
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	37,919	10,965	58,889	12,105	146,792	66,222	309,856	143	397,553	57,734	20,308	11,201	2,643	3,074	34,400	1,169,804
Medicaid Managed Care³																
July 2020	9,888	2,388	7,487	956	19,775	9,512	51,154	0	29,871	4,273	594	1,534	362	2	0	137,796
August 2020	9,912	2,405	7,303	1,157	19,958	9,959	52,676	0	30,035	4,448	588	1,562	400	2	0	140,405
September 2020																
October 2020																
November 2020																
December 2020																
January 2021																
February 2021																
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	9,900	2,397	7,395	1,057	19,867	9,736	51,915	0	29,953	4,361	591	1,548	381	2	0	139,103
Rocky Mountain Health Plans HMO																
July 2020	2,517	801	3,539	660	8,930	5,099	18,010	0	35	13	77	678	193	1	0	40,553
August 2020	2,507	793	3,406	781	8,958	5,277	18,374	0	35	14	77	679	212	1	0	41,114
September 2020																
October 2020																
November 2020																
December 2020																
January 2021																
February 2021																
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	2,512	797	3,473	721	8,944	5,188	18,192	0	35	14	77	679	203	1	0	40,836

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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 2020	3,249	1,041	3,724	296	10,845	4,413	33,144	0	29,836	4,260	517	856	169	1	0	92,351
August 2020	3,266	1,057	3,671	376	11,000	4,682	34,302	0	30,000	4,434	511	883	188	1	0	94,371
September 2020																
October 2020																
November 2020																
December 2020																
January 2021																
February 2021																
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	3,257	1,049	3,697	336	10,923	4,548	33,723	0	29,918	4,347	514	870	179	1	0	93,362
PACE - Program of All-Inclusive Care for the Elderly																
July 2020	4,122	546	224	0	0	0	0	0	0	0	0	0	0	0	0	4,892
August 2020	4,139	555	226	0	0	0	0	0	0	0	0	0	0	0	0	4,920
September 2020																
October 2020																
November 2020																
December 2020																
January 2021																
February 2021																
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	4,130	551	225	0	0	0	0	0	0	0	0	0	0	0	0	4,906
ACC - Accountable Care Collaborative^{4,6}																
July 2020	43,458	12,831	66,507	12,212	164,998	73,861	351,030	134	422,123	60,374	20,152	12,537	2,891	12	0	1,243,120
August 2020	43,642	12,726	65,081	13,984	165,997	76,930	359,366	138	426,569	62,423	20,127	12,656	3,107	16	0	1,262,762
September 2020																
October 2020																
November 2020																
December 2020																
January 2021																
February 2021																
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	43,550	12,779	65,794	13,098	165,498	75,396	355,198	136	424,346	61,399	20,140	12,597	2,999	14	0	1,252,941

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 limited managed care capitation initiative or PACE. Enrollment here includes Managed Fee for Service ACC enrollment, but does not include all clients shown in the ACC Accountable Care Collaborative section. See Footnote 4 for more information.
- 3) Medicaid Managed Care includes clients who are enrolled in the limited managed care capitation initiatives operated by Rocky Mountain Health Plans in Region 1 and by Colorado Access in collaboration with Denver Health Medical Plan in Region 5, and PACE.
- 4) Accountable Care Collaborative (ACC) caseload includes ACC Managed Fee for Service enrollment, as well as enrollment in the limited managed care capitation initiatives operated by Rocky Mountain Health Plans in Region 1 and by Colorado Access in collaboration with Denver Health Medical Plan in Region 5, as these are ACC initiatives in Region 5.
- 5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

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Accountable Care Collaborative Caseload by Regional Accountable Entity (RAE) and County of Residence														
RAE	County of Residence	Jul 2020	Aug 2020	Sep 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	Mar 2021	Apr 2021	May 2021	Jun 2021	FY 2020-21 Average Monthly Enrollment
RAE 1	Archuleta	3,428	3,461											3,445
	Delta	9,085	9,204											9,145
	Dolores	575	579											577
	Eagle	6,234	6,359											6,297
	Garfield	12,589	12,853											12,721
	Grand	1,634	1,656											1,645
	Gunnison	2,886	2,931											2,909
	Hinsdale	151	148											150
	Jackson	259	264											262
	La Plata	11,978	12,131											12,055
	Larimer	55,474	56,373											55,924
	Mesa	42,045	42,608											42,327
	Moffat	3,490	3,547											3,519
	Montezuma	8,834	8,963											8,899
	Montrose	11,423	11,570											11,497
	Ouray	643	650											647
	Pitkin	1,539	1,573											1,556
	Rio Blanco	1,350	1,364											1,357
	Routt	3,020	3,039											3,030
	San Juan	174	169											172
San Miguel	1,005	1,022											1,014	
Summit	3,353	3,444											3,399	
Residence Outside RAE Area(1)	10,912	11,197											11,055	
Total	192,081	195,105												193,593
RAE 2	Cheyenne	401	400											401
	Kit Carson	1,883	1,908											1,896
	Lincoln	1,148	1,151											1,150
	Logan	4,609	4,653											4,631
	Morgan	7,618	7,752											7,685
	Phillips	944	960											952
	Sedgwick	649	652											651
	Washington	1,124	1,118											1,121
	Weld	54,107	55,460											54,784
	Yuma	2,533	2,584											2,559
	Residence Outside RAE Area(1)	8,514	8,555											8,535
	Total	83,530	85,193											
RAE 3	Adams	103,720	105,541											104,631
	Arapahoe	106,682	108,865											107,774
	Douglas	25,302	25,860											25,581
	Elbert	2,422	2,500											2,461
	Residence Outside RAE Area(1)	51,626	52,011											51,819
Total	289,752	294,777												292,265
RAE 4	Alamosa	6,522	6,606											6,564
	Baca	1,267	1,285											1,276
	Bent	1,647	1,665											1,656
	Chaffee	3,587	3,637											3,612
	Conejos	2,998	3,039											3,019
	Costilla	1,863	1,871											1,867
	Crowley	1,278	1,274											1,276
	Custer	792	798											795
	Fremont	12,169	12,331											12,250
	Huerfano	2,665	2,674											2,670
	Kiowa	387	381											384
	Lake	1,262	1,287											1,275
	Las Animas	5,552	5,608											5,580
	Mineral	129	136											133
	Otero	7,225	7,278											7,252
	Prowers	4,511	4,560											4,536
	Pueblo	62,301	62,940											62,621
	Rio Grande	4,007	4,081											4,044
Saguache	2,166	2,225											2,196	
Residence Outside RAE Area(1)	5,047	5,209											5,128	
Total	127,375	128,885												128,130

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RAE	County of Residence	Jul 2020	Aug 2020	Sep 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	Mar 2021	Apr 2021	May 2021	Jun 2021	FY 2020-21 Average Monthly Enrollment
RAE 5 ²	Denver	71,528	71,783											71,656
	Residence Outside RAE Area(1)	50,618	51,118											50,868
	Total	122,146	122,901											122,524
RAE 6	Boulder	44,787	45,541											45,164
	Broomfield	5,303	5,438											5,371
	Clear Creek	1,257	1,269											1,263
	Gilpin	943	964											954
	Jefferson	64,706	65,962											65,334
	Residence Outside RAE Area(1)	37,288	37,983											37,636
Total	154,284	157,157											155,721	
RAE 7	El Paso	166,197	168,683											167,440
	Park	1,228	1,246											1,237
	Teller	5,262	5,337											5,300
	Residence Outside RAE Area(1)	8,914	9,107											9,011
	Total	181,601	184,373											182,987
Denver Health Managed Care ⁽³⁾	Adams	3,722	3,777											3,750
	Arapahoe	4,407	4,490											4,449
	Denver	81,155	82,973											82,064
	Jefferson	2,976	3,029											3,003
	Residence Outside Denver Health Managed Care	89	100											95
	Total	92,349	94,369											93,359
Total ACC Caseload		1,243,118	1,262,760											1,252,939

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

(2) RAE 1 includes caseload for the limited managed care capitation initiatives operated by Rocky Mountain Health Plans in Region 1 and RAE 5 includes caseload for the limited managed care capitation initiatives operated by Colorado Access in collaboration with Denver Health Medical Plan in Region 5 until January 1, 2020, as these are ACC initiatives under ACC Phase II.

(3) Previously members in Denver Health Managed Care Plan were attributed to RAE 5, Colorado Access. Per HB 19-1285, starting January 1, 2020 members within Denver Health Managed Care are attributed to the Denver Health Managed Care Plan.

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FY 2020-21 Medicaid Behavioral Health Community Programs Expenditures			
	Total Expenditures	Behavioral Health Capitation Payments	Behavioral Health Fee for Service Payments
July-20	\$57,085,339	\$57,081,263	\$4,076
August-20	\$57,913,211	\$57,907,977	\$5,234
September-20			
October-20			
November-20			
December-20			
January-21			
February-21			
March-21			
April-21			
May-21			
June-21			
Total Year-to-Date Expenditures	\$114,998,550	\$114,989,240	\$9,310
Total Year-to-Date Appropriation	\$959,410,239	\$945,357,559	\$14,052,680
Remaining in Appropriation	\$844,411,689	\$830,368,319	\$14,043,370

Notes:

- 1) The Medicaid Behavioral Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.
- 2) FY 2019-20 Year-to-Date Appropriation includes HB 20-1360.
- 3) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.

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FY 2020-21 Medicaid Community Behavioral Health Program Expenditures by Regional Accountable Entity										
	Total	Rocky Mountain Health Plans (RAE 1)	Northeast Health Partners (RAE 2)	Colorado Access (RAE 3)	Health Colorado (RAE 4)	Colorado Access (RAE 5) ²	Colorado Community Health Alliance (RAE 6)	Colorado Community Health Alliance (RAE 7)	Denver Health Managed Care ²	Other ¹
July	\$52,922,494	\$8,403,697	\$3,387,110	\$11,892,599	\$6,228,604	\$7,466,418	\$8,595,493	\$6,978,896	\$0	(\$30,323)
August	\$53,648,261	\$8,527,077	\$3,457,288	\$12,087,436	\$6,292,936	\$7,481,501	\$8,755,912	\$7,067,559	\$0	(\$21,448)
September										
October										
November										
December										
January										
February										
March										
April										
May										
June										
Total Year-to-Date Expenditures	\$106,570,755	\$16,930,774	\$6,844,398	\$23,980,035	\$12,521,540	\$14,947,919	\$17,351,405	\$14,046,455	\$0	(\$51,771)
Total Year-to-Date Appropriation	\$945,357,559									
Remaining in Appropriation	\$838,786,804									

Footnotes:
1) "Other" contains dollars paid to Behavioral Health Organizations for dates prior to July 1, 2018 (the beginning of the Accountable Care Collaborative Phase II), as well as dollars where the RAE cannot be identified due to timing discrepancies between the MMIS and CORE systems, since CORE does not contain provider information for payments made in interChange.
2) Previously behavioral health expenditure for members Denver Health Managed Care Plan were attributed to RAE 5, Colorado Access. Per HB 19-1285, starting January 1, 2020 members within Denver Health Managed Care are attributed to the Denver Health Managed Care Plan. Expenditure for Colorado Access (RAE 5) does not include Denver Health Managed Care Plan Behavioral Health Expenditure starting January 1, 2020.

FY 2020-21 Medicaid Community Behavioral Health Program Caseload by Regional Accountable Entity										
	Total	Rocky Mountain Health Plans (RAE 1)	Northeast Health Partners (RAE 2)	Colorado Access (RAE 3)	Health Colorado (RAE 4)	Colorado Access (RAE 5)	Colorado Community Health Alliance (RAE 6)	Colorado Community Health Alliance (RAE 7)	Denver Health Managed Care ⁴	Other
July	1,260,162	192,079	83,530	289,748	127,374	122,143	154,283	181,601	92,351	17,053
August	1,282,687	195,101	85,192	294,773	128,884	122,899	157,154	184,373	94,371	19,940
September										
October										
November										
December										
January										
February										
March										
April										
May										
June										
Total Year-to-Date Average	1,271,425	193,590	84,361	292,261	128,129	122,521	155,719	182,987	93,361	18,497
Total Year-to-Date Appropriation	1,492,723									

Notes:
1) "Other" category includes clients enrolled in the Program of All-Inclusive Care for the Elderly and clients ineligible for Medicaid Behavioral Health Benefits.
2) Source for all caseload data provided is the REX01/COLD (MARS) R-474701 report except for the Colorado Access NE which is reported using paid capitation claims. The number of days captured in the monthly figure is equal to the number of days in the report month. The Medicaid Behavioral Health caseload is the same as the caseload for Medical Services Premiums, with the exception of Non-citizens and Partial Dual Eligibles.
3) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.
4) Previously members Denver Health Managed Care Plan were attributed to RAE 5, Colorado Access. Per HB 19-1285, starting January 1, 2020 members within Denver Health Managed Care are attributed to the Denver Health Managed Care Plan.

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FY 2020-21 Children's Basic Health Plan Expenditures				
	Total Expenditures	Children Medical Expenditures	Children Dental Expenditures	Prenatal Medical Expenditures
July-20	\$14,742,517	\$12,599,630	\$1,375,726	\$767,161
August-20	\$14,336,670	\$12,263,888	\$1,358,044	\$714,738
September-20				
October-20				
November-20				
December-20				
January-21				
February-21				
March-21				
April-21				
May-21				
June-21				
Total Year-to-Date Expenditures	\$29,079,187	\$24,863,518	\$2,733,770	\$1,481,899
Total Year-to-Date Appropriation	\$239,783,819	\$205,074,723	\$22,207,432	\$12,501,664
Remaining in Appropriation	\$210,704,632			

Notes:

1) FY 2020-21 Year-to-Date Appropriation includes HB 20-1360.

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

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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 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	56,287	27,694	83,981	311	554	865
April 2018	60,590	29,115	89,705	325	534	859
May 2018	61,037	29,160	90,197	310	533	843
June 2018	54,475	27,300	81,775	306	507	813
FY 2017-18 Actuals	53,253	26,206	79,458	294	537	831
July 2018	56,021	26,301	82,322	349	509	858
August 2018	55,401	25,854	81,255	369	552	921
September 2018	54,388	25,249	79,637	351	560	911
October 2018	53,528	26,116	79,644	263	534	797
November 2018	54,613	27,269	81,882	277	574	851
December 2018	52,204	27,094	79,298	295	580	875
January 2019	51,644	27,763	79,407	341	606	947
February 2019	51,991	28,465	80,456	344	620	964
March 2019	52,857	28,118	80,975	398	623	1,021
April 2019	55,395	27,227	82,622	455	582	1,037
May 2019	54,542	27,214	81,756	475	578	1,053
June 2019	52,436	26,823	79,259	462	531	993
FY 2018-19 Actuals	53,752	26,958	80,709	365	571	936
July 2020	46,898	27,442	74,340	347	482	829
August 2020	45,162	27,377	72,539	331	474	805
September 2020						
October 2020						
November 2020						
December 2020						
January 2021						
February 2021						
March 2021						
April 2021						
May 2021						
June 2021						
FY 2020-21 Year-to-Date Average	46,030	27,410	12,240	339	478	136
FY 2020-21 Year-to-Date Appropriation	50,628	26,857	77,485	339	556	895
Monthly Growth	(1,736)	(65)	(1,801)	(16)	(8)	(24)
Monthly Growth Rate	-3.70%	-0.24%	-2.42%	-4.61%	-1.66%	-2.90%
Over-the-year Growth	(10,239)	1,523	(8,716)	(38)	(78)	(116)
Over-the-year Growth Rate	-20.22%	6.18%	-11.58%	-13.62%	-15.32%	-14.72%

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 the 15th day of the reported month, and may be restated in future reports based on further analysis.

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FY 2020-21 Division for Intellectual and Developmental Disabilities (DIDD) Waiver and State Only Program Caseload Per Month																
	Program	July 2020	August 2020	September 2020	October 2020	November 2020	December 2020	January 2021	February 2021	March 2021	April 2021	May 2021	June 2021	FY 2020-21 Average YTD	FY 2020-21 Authorized Maximum Enrollment	
DIDD	HCBS - Developmental Disabilities	6,631	6,676											6,654	7,289	
	HCBS - Developmental Disabilities - Regional Centers	94	95											95	-	
	HCBS - Supported Living Services	4,694	4,737											4,716	-	
	HCBS - Children's Extensive Support	2,145	2,156											2,151	-	
	HCBS - Children's Habilitation Residential Program	96	101											99	-	
	HCBS - Targeted Case Management	13,660	13,765											13,713	-	
	DIDD Subtotal	13,660	13,765											2,285	-	
HCBS - DD Authorizations*	Waiting List Authorizations	<30	<30												-	
	Reserved Capacity Authorizations	54	47												-	
FY 2020-21 Division for Intellectual and Developmental Disabilities (DIDD) Waiver and State Only Program Expenditure Per Month																
	Program	July 2020	August 2020	September 2020	October 2020	November 2020	December 2020	January 2021	February 2021	March 2021	April 2021	May 2021	June 2021	FY 2020-21 YTD	FY 2020-21 Appropriation	Percent of FY 2020-21 Appropriation Spent
DIDD	HCBS - Developmental Disabilities	\$42,051,136	\$43,605,499											\$85,656,635	\$525,769,703	16.29%
	HCBS - Developmental Disabilities - Regional Centers	\$2,044,440	\$2,091,914											\$4,136,353	N/A	N/A
	HCBS - Supported Living Services	\$5,141,518	\$4,949,268											\$10,090,786	\$71,889,381	14.04%
	HCBS - Children's Extensive Support	\$2,377,374	\$3,101,256											\$5,478,630	\$29,961,574	18.29%
	HCBS - Children's Habilitation Residential Program	\$134,036	\$280,606											\$414,642	\$4,779,680	8.68%
	HCBS - Targeted Case Management	\$2,236,257	\$1,774,544											\$4,010,801	\$0	#DIV/0!
	Quality Assurance, Utilization Review and Supports Intensity Scale	\$0	\$0											\$0	\$0	#DIV/0!
	DIDD Subtotal	\$53,984,762	\$55,803,086	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$109,787,848	\$632,400,338	17.36%
	Number of Weeks in Month	4	5	4	4	5	4	4	4	5	4	5	4	4	52	0
	Expenditure Per Week	\$13,496,191	\$11,160,617	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,287,247	\$0	\$0
State Only Programs	State Only Supported Living Services	\$0	\$0											\$0	\$0	0.00%
	Family Support Services Program	\$0	\$0											\$0	\$0	0.00%
	State Only Case Management	\$0	\$0											\$0	\$0	0.00%
	State Only Programs Subtotal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.00%
	Expenditure Per Week	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Notes:
 1) Historically, DIDD State Only Programs and QAURISIS 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 2020-21 Appropriations for DIDD Supported Living Services and Targeted Case Management were adjusted to reflect only the portion appropriated for those services. State-only program appropriations were removed.
 4) State Only Programs are part of the Targeted Case Management appropriation and do not have a stand alone appropriation. The appropriation listed here matches the contract amount for each program.
 5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.
 6) Starting July 2018, the Department began reporting the number of persons moved off the developmental disabilities waiting list, specifying the authorizations initiated under order of selection (waiting list) and the authorizations initiated under reserve capacity criteria per HB 18-1407 requirements. These numbers represent the total number of authorizations that occurred in a month and will not match enrollment as there is a time lag between notice of authorization and enrollment. The number of authorizations is cumulative and represents the number of unique authorizations, which includes declines. <30 values cannot be displayed due to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The Department will report year-to-date authorizations at six month increments.

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FY 2020-21 Medicare Modernization Act State Contribution Payment Expenditures and Caseload		
	Total Expenditures	Medicare Modernization Act State Contribution Payment Caseload
July	\$14,234,834	
August	\$4,239,734	
September		
October		
November		
December		
January		
February		
March		
April		
May		
June		
Total Year-to-Date	\$18,474,568	0
Total Year-to-Date Appropriation	\$168,297,340	
Remaining in Appropriation	\$149,822,772	

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 35 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 2020-21 Year-to-Date Appropriation includes HB 20-1360.

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FY 2020-21 Old Age Pension State Medical Program Expenditures and Caseload		
	Total Expenditures	Old Age Pension State Medical Program Caseload
July	\$7,589	32
August	\$7,914	<30
September		
October		
November		
December		
January		
February		
March		
April		
May		
June		
Total Year-to-Date	\$15,503	32
Total Year-to-Date Appropriation	\$10,000,000	
Remaining in Appropriation	\$9,984,497	
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 2020-21 Year-to-Date Appropriation includes HB 20-1360.		
5) The Department is continuing to validate data as it is reported in the new Medicaid Management Information System (MMIS) reporting layer. This includes known issues with expenditure reported for certain service categories and caseload in certain programs and eligibility categories. The data presented in this report is preliminary based on information available as of the 15th day of the reported month, and may be restated in future reports based on further analysis.		