

Department of Health Care Policy and Financing
FY 2020-21 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 2020-21 Total YTD	
Acute Care	Physician and Clinic Services	\$65,430,567	\$87,394,234	\$67,079,454	\$71,766,691	\$82,651,220	\$66,387,103	\$64,619,440	\$79,633,952					\$584,962,661	
	EPSTD Screening	\$3,368,074	\$5,496,543	\$4,195,474	\$4,084,460	\$4,480,342	\$3,381,622	\$3,399,713	\$3,602,025					\$32,008,253	
	Emergency Transportation	\$4,415,048	\$6,621,308	\$3,892,131	\$3,706,174	\$5,334,033	\$5,118,204	\$3,202,321	\$4,568,551					\$36,857,770	
	Non-Emergency Medical Transportation	\$3,445,708	\$5,766,513	\$3,741,704	\$3,837,386	\$7,137,267	\$4,328,485	\$5,427,047	\$4,598,026					\$38,282,136	
	Dental Service	\$31,563,584	\$26,279,780	\$25,935,027	\$31,941,550	\$27,452,779	\$28,543,815	\$23,031,010	\$29,557,693					\$224,305,238	
	Family Planning	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0					\$0	
	Health Maintenance Organization	\$38,886,517	\$37,658,873	\$40,623,181	\$40,544,492	\$40,869,635	\$47,027,518	\$40,654,705	\$42,026,651					\$328,291,572	
	Inpatient Hospital	\$63,745,468	\$101,573,409	\$62,770,623	\$72,942,567	\$93,919,313	\$69,004,224	\$64,710,827	\$67,914,388					\$596,580,459	
	Outpatient Hospital	\$43,044,675	\$56,320,166	\$45,948,253	\$49,768,478	\$59,951,957	\$10,301,876	\$44,500,352	\$45,963,007					\$355,798,764	
	Laboratory and X-Ray	\$6,541,157	\$11,210,477	\$9,002,594	\$10,031,642	\$12,303,302	\$8,860,960	\$8,934,632	\$9,184,185					\$76,068,949	
	Durable Medical Equipment (DME)	\$12,465,634	\$16,612,094	\$12,561,436	\$13,495,432	\$16,819,092	\$13,153,361	\$13,489,935	\$13,588,813					\$112,185,797	
	Pharmacy	\$88,607,276	\$107,973,131	\$85,888,134	\$78,929,147	\$109,209,100	\$88,089,912	\$91,472,940	\$95,007,494					\$745,177,134	
	Drug Rebates - Standard	\$0	(\$165,499,177)	(\$4,336,298)	(\$78,466,316)	(\$114,215,975)	(\$2,492,593)	(\$95,209,675)	(\$67,321,349)						(\$527,541,383)
	Rural Health Centers	\$1,861,860	\$2,706,456	\$2,047,075	\$2,295,145	\$3,148,828	\$2,089,874	\$2,159,204	\$2,583,812					\$18,892,254	
	Federally Qualified Health Centers	\$10,782,790	\$14,580,313	\$12,554,888	\$12,375,057	\$15,368,434	\$6,918,609	\$11,018,753	\$12,220,765					\$95,819,609	
	Prepaid Inpatient Health Plan Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0					\$0	
	Other Medical Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0					\$0	
	Preventive Services	\$1,373,007	\$1,911,835	\$1,754,688	\$2,363,407	\$2,418,795	\$1,545,083	\$1,423,514	\$1,617,982					\$14,408,311	
	Acute Home Health	\$2,174,750	\$2,886,701	\$2,269,468	\$2,330,679	\$4,217,714	\$658,013	\$1,991,938	\$2,388,274					\$18,917,537	
	Acute Care Subtotal		\$382,769,826	\$328,485,102	\$382,446,664	\$329,465,264	\$391,208,496	\$360,835,585	\$289,465,718	\$370,358,985					\$2,835,035,640
Community Based Long Term Care	HCBS - Elderly, Blind, and Disabled	\$43,753,020	\$49,055,928	\$50,222,869	\$45,257,049	\$54,675,686	\$46,760,143	\$44,441,896	\$46,521,011					\$380,687,602	
	HCBS - Community Mental Health Supports	\$3,832,869	\$4,652,669	\$4,981,603	\$4,358,080	\$5,022,483	\$4,223,654	\$4,282,891	\$4,300,137					\$35,654,386	
	HCBS - Children's HCBS	\$4,567,863	\$5,710,156	\$4,837,169	\$5,133,134	\$6,868,337	\$5,357,090	\$3,922,074	\$6,188,699					\$42,584,522	
	HCBS - Consumer Directed Attendant Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0					\$0	
	HCBS - Brain Injury	\$2,558,745	\$2,473,460	\$2,675,241	\$2,402,083	\$2,746,909	\$2,821,678	\$2,568,508	\$2,799,020					\$21,045,644	
	HCBS - Children with Autism	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$87)					(\$87)	
	HCBS - Children with Life Limiting Illness	\$47,282	\$59,856	\$85,203	\$60,789	\$88,096	\$58,829	\$42,293	\$57,830					\$500,178	
	HCBS - Spinal Cord Injury	\$710,066	\$739,677	\$863,349	\$706,197	\$862,290	\$778,758	\$756,758	\$647,126					\$6,064,221	
	CCT - Services	\$273,421	\$505,853	\$352,182	\$198,742	\$445,141	\$276,779	\$230,558	\$332,815					\$2,615,491	
	Private Duty Nursing	\$8,927,942	\$10,143,136	\$8,954,487	\$8,766,179	\$10,733,610	\$8,396,493	\$6,745,658	\$9,482,217					\$72,149,722	
	Long-Term Home Health	\$33,748,737	\$41,448,070	\$33,367,151	\$33,469,274	\$40,449,203	\$33,932,697	\$33,160,787	\$35,143,221					\$284,719,140	
	Hospice	\$5,176,933	\$5,794,085	\$5,993,662	\$5,791,159	\$4,620,979	\$4,175,851	\$5,434,360						\$42,752,173	
	CB LTC Subtotal		\$103,596,878	\$120,582,890	\$112,104,398	\$106,345,189	\$127,682,914	\$107,227,100	\$100,327,274	\$110,906,349					\$888,772,992
	Long Term Care and Insurance	Class I Nursing Facilities	\$51,961,417	\$60,500,699	\$52,450,978	\$53,130,768	\$60,128,164	\$46,818,523	\$47,428,759	\$52,124,756					\$424,544,064
		Class II Nursing Facilities	\$4,455	\$421,656	\$17,184	\$402,418	\$216,518	\$171,756	\$276,052	\$269,863					\$1,829,902
Program of All-Inclusive Care for the Elderly		\$19,519,472	\$20,131,457	\$20,460,635	\$20,120,434	\$19,507,322	\$17,742,477	\$16,999,276	\$18,986,027					\$153,467,100	
Supplemental Medicare Insurance Benefit		\$18,249,678	\$17,972,776	\$18,532,192	\$18,407,669	\$18,811,029	\$18,811,029	\$18,706,484	\$18,995,363					\$148,486,220	
Health Insurance Buy-In Program		\$164,986	\$203,182	\$199,612	\$200,059	\$162,358	\$240,787	\$205,442	\$220,169					\$1,596,595	
LTC + Insurance Subtotal			\$89,900,008	\$99,229,770	\$91,660,601	\$92,261,348	\$98,825,391	\$83,834,572	\$83,616,013	\$90,596,178					\$729,923,881
Service Mgmt.	Single Entry Points	(\$247,087)	(\$163,894)	\$261,895	(\$3,540,481)	(\$25,376)	\$99,392	\$173,301	\$248,764					(\$3,193,486)	
	Disease Management	\$0	\$0	\$42,882	\$89,591	\$0	\$43,825	\$50,378	\$135,153					\$361,829	
	Prepaid Inpatient Health Plan Administration	\$19,015,010	\$16,699,163	\$20,078,453	\$13,405,569	\$13,584,249	\$28,077,338	\$13,928,448	\$23,122,016					\$147,910,246	
	Service Management Subtotal		\$18,767,923	\$16,535,269	\$20,383,230	\$9,954,679	\$13,558,873	\$28,220,555	\$14,152,127	\$23,505,933					\$145,078,589
Financing	Nursing Facility Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	(\$266,314)	\$0	\$0					(\$266,314)	
	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	\$0	\$0	\$0					\$0	
	Public Emergency Medical Transportation Provider Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0					\$0	
	Hospital Supplemental Medicaid Payments	\$92,028,250	\$157,988,754	\$170,860,612	\$97,635,485	\$97,679,705	\$99,722,863	\$96,658,126	\$96,658,126					\$909,231,921	
	Nursing Facility Supplemental Payments	\$9,813,637	\$10,292,649	\$10,131,966	\$10,293,911	\$10,035,725	\$10,288,143	\$10,112,114	\$10,088,995					\$81,057,140	
	Physician Supplemental Payments	\$0	\$0	\$0	\$0	\$0	(\$93,924)	\$0	\$0					(\$93,924)	
	Outstationing Payments	\$0	\$0	\$603,169	\$0	\$0	\$584,977	\$0	\$0					\$1,188,146	
	University of Colorado School of Medicine Payments	\$0	\$0	\$0	\$0	\$0	\$75,976,394	\$0	\$0					\$75,976,394	
	Other Supplemental Payments ⁽²⁾	\$0	\$0	\$57,557,210	\$0	\$148,900,000	(\$385,145)	(\$148,900,000)	\$0					\$57,172,065	
	Accounting Adjustments	\$9,480,470	\$7,385,292	\$6,314,857	\$3,694,400	(\$4,878,505)	\$3,438,891	\$5,550,561	\$1,946,558					\$32,932,524	
	Other Categories Subtotal		\$111,322,357	\$175,666,695	\$245,467,814	\$111,623,796	\$251,736,925	\$189,265,885	(\$36,579,199)	\$108,693,679					\$1,157,197,952
	Number of Weeks in Month		4	5	4	4	5	4	4	4	5	4	5	4	47
			\$706,356,992	\$740,499,726	\$852,062,707	\$649,650,276	\$883,012,599	\$769,383,697	\$450,981,933	\$704,061,124					\$5,756,009,054

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.

2) In November of 2020, The Department made a one time payment of \$148,900,000 under executive order D 2020 230 to the Colorado Department of Labor and Unemployment. For more information on the order please see: "https://cdle.colorado.gov/sites/cdle/files/D-2020-230-CDLE-EO.pdf"

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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	\$5,756,009,054
FY 2020-21 Appropriation YTD	\$3,275,451,281

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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	\$61,852,771	\$43,526,350	\$43,570,570	\$43,687,682	\$43,512,014	\$43,512,014					\$381,858,198
	Medicaid Disproportionate Share Hospital (DSH) and Other Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0					\$0
	Medicaid Hospital Quality Incentive Payments	\$7,537,146	\$7,645,878	\$7,645,865	\$7,555,270	\$7,555,270	\$8,881,488	\$6,892,161	\$6,892,161					\$60,605,239
	Uncompensated Care Supplemental Hospital Medicaid Payment	\$8,998,362	(\$4,499,181)	(\$4,499,181)	\$0	\$0	\$0	\$0	\$0					\$0
	Public High Volume Hospital Payment	\$0	\$0	\$12,909,768	\$0	\$0	\$0	\$0	\$0					\$12,909,768
	Outpatient Medicaid Supplemental Payments	\$38,911,921	\$88,452,217	\$88,452,208	\$46,553,865	\$46,553,865	\$47,153,693	\$46,253,951	\$46,253,951					\$448,585,671
	Total Medical Services Premiums Payments	\$95,753,567	\$153,489,573	\$166,361,431	\$97,635,485	\$97,679,705	\$99,722,863	\$96,658,126	\$96,658,126					
CICP	CICP Disproportionate Share Hospital (DSH) Payment	\$18,216,602	\$18,031,380	\$18,031,377	\$18,028,214	\$18,028,214	\$33,625,080	\$10,229,781	\$10,229,781					\$144,420,429
	Uncompensated Care Supplemental Hospital Medicaid Payment	\$0	(\$40,492,629)	(\$40,492,629)	\$0	\$0	\$0	\$0	\$0					(\$80,985,258)
	Total CICP Payments	\$18,216,602	(\$22,461,249)	(\$22,461,252)	\$18,028,214	\$18,028,214	\$33,625,080	\$10,229,781	\$10,229,781					\$63,435,171
Total Supplemental Payments		\$113,970,169	\$131,028,324	\$143,900,179	\$115,663,699	\$115,707,919	\$133,347,943	\$106,887,907	\$106,887,907					\$967,394,047

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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	38,220	10,962	58,325	13,213	149,571	69,021	319,455	141	405,152	60,377	20,302	11,301	2,874	3,857	34,759	1,197,530
October 2020	38,484	11,024	58,448	13,306	150,206	72,989	326,682	141	409,879	62,542	20,376	11,516	3,096	5,440	34,951	1,219,080
November 2020	38,614	11,080	58,647	13,207	151,270	75,092	334,789	140	414,457	62,901	20,393	11,698	3,203	6,028	35,190	1,236,709
December 2020	38,594	11,170	58,758	13,358	151,898	77,576	343,165	143	419,175	63,019	20,374	11,800	3,265	6,608	35,518	1,254,421
January 2021	38,319	11,167	59,099	13,333	153,942	78,834	351,200	140	423,404	64,056	20,332	12,074	3,429	7,270	35,647	1,272,246
February 2021	38,017	11,191	59,056	13,258	156,061	79,344	356,688	138	428,887	62,179	20,373	12,296	3,251	8,421	35,620	1,284,780
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	38,261	11,066	58,764	12,986	150,817	73,162	331,461	141	412,008	61,318	20,346	11,636	3,050	5,472	35,061	1,225,549
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	9,931	2,414	7,296	1,185	20,302	10,138	54,385	0	30,477	4,577	585	1,551	428	4	0	143,273
October 2020	10,012	2,409	7,282	1,178	20,387	10,771	55,989	0	30,835	4,681	571	1,607	450	2	0	146,174
November 2020	10,007	2,401	7,250	1,148	20,381	11,002	56,867	0	31,087	4,731	567	1,592	476	1	0	147,510
December 2020	10,020	2,414	7,254	1,177	20,442	11,483	58,382	0	31,166	4,774	556	1,645	484	2	0	149,799
January 2021	9,958	2,420	7,224	1,175	20,677	11,726	60,026	0	31,246	4,858	544	1,666	483	2	0	152,005
February 2021	10,027	2,428	7,250	1,231	20,975	11,814	61,364	0	31,541	4,808	534	1,654	462	138	0	154,226
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	9,969	2,410	7,293	1,151	20,362	10,801	56,355	0	30,782	4,644	567	1,601	443	19	0	146,397
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	2,498	785	3,389	797	9,029	5,381	18,662	0	39	14	75	672	235	2	0	41,578
October 2020	2,488	788	3,372	794	9,004	5,684	19,044	0	38	14	73	666	251	1	0	42,217
November 2020	2,454	789	3,358	780	8,996	5,767	19,016	0	37	15	72	634	264	1	0	42,183
December 2020	2,454	797	3,340	798	9,048	6,091	19,879	0	36	15	72	684	267	1	0	43,482
January 2021	2,428	802	3,319	795	9,128	6,154	20,290	0	38	16	70	683	266	2	0	43,991
February 2021	2,408	800	3,326	802	9,199	6,224	20,526	0	38	15	70	679	255	24	0	44,366
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	2,470	795	3,381	776	9,037	5,710	19,225	0	37	15	73	672	243	4	0	42,438

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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	3,262	1,069	3,677	388	11,273	4,757	35,723	0	30,438	4,563	510	879	193	2	0	96,734
October 2020	3,292	1,062	3,676	384	11,383	5,087	36,945	0	30,797	4,667	498	941	199	1	0	98,932
November 2020	3,280	1,051	3,659	368	11,385	5,235	37,851	0	31,050	4,716	495	958	212	0	0	100,260
December 2020	3,278	1,053	3,672	379	11,394	5,392	38,503	0	31,130	4,759	484	961	217	1	0	101,223
January 2021	3,286	1,057	3,669	380	11,549	5,572	39,736	0	31,208	4,842	474	983	217	0	0	102,973
February 2021	3,405	1,066	3,695	429	11,776	5,590	40,838	0	31,503	4,793	464	975	207	114	0	104,855
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	3,289	1,057	3,680	375	11,326	5,091	37,130	0	30,745	4,629	494	930	200	20	0	98,966
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	4,171	560	230	0	0	0	0	0	0	0	0	0	0	0	0	4,961
October 2020	4,232	559	234	0	0	0	0	0	0	0	0	0	0	0	0	5,025
November 2020	4,273	561	233	0	0	0	0	0	0	0	0	0	0	0	0	5,067
December 2020	4,288	564	242	0	0	0	0	0	0	0	0	0	0	0	0	5,094
January 2021	4,244	561	236	0	0	0	0	0	0	0	0	0	0	0	0	5,041
February 2021	4,214	562	229	0	0	0	0	0	0	0	0	0	0	0	0	5,005
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	4,210	559	232	0	0	0	0	0	0	0	0	0	0	0	0	5,001
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	43,824	12,788	65,115	14,312	168,566	78,383	367,046	137	432,199	64,054	20,130	12,691	3,255	11	0	1,282,511
October 2020	44,139	12,844	65,243	14,417	169,458	83,203	376,002	137	437,044	66,322	20,176	12,958	3,517	14	0	1,305,474
November 2020	44,185	12,885	65,391	14,285	170,371	85,340	383,418	137	442,119	66,992	20,176	13,080	3,622	8	0	1,322,009
December 2020	44,229	12,994	65,538	14,493	171,313	88,568	394,744	141	447,559	67,148	20,164	13,312	3,730	8	0	1,343,941
January 2021	43,896	12,993	65,833	14,449	173,438	89,907	403,813	139	451,315	68,294	20,103	13,562	3,872	15	0	1,361,629
February 2021	43,683	13,024	65,826	14,437	175,853	90,515	410,936	136	457,228	66,482	20,137	13,772	3,685	625	0	1,376,339
March 2021																
April 2021																
May 2021																
June 2021																
FY 2020-21 Year-to-Date AVERAGE	43,882	12,886	65,567	14,074	169,999	83,338	380,794	137	439,520	65,261	20,146	13,071	3,460	89	0	1,312,223

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 ACC Phase II.
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.

**Department of Health Care Policy and Financing
FY 2020-21 Medical Premiums Expenditure and Caseload Report**

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	3,503	3,584	3,670	3,752	3,782	3,832					3,627
	Delta	9,085	9,204	9,382	9,578	9,658	9,807	9,940	10,065					9,590
	Dolores	575	579	581	593	612	616	632	637					603
	Eagle	6,234	6,359	6,479	6,675	6,855	7,011	7,144	7,238					6,749
	Garfield	12,589	12,853	13,073	13,367	13,489	13,906	14,169	14,364					13,476
	Grand	1,634	1,656	1,703	1,772	1,830	1,890	1,946	1,981					1,802
	Gunnison	2,886	2,931	2,972	3,022	3,047	3,158	3,211	3,229					3,057
	Hinsdale	151	148	151	153	156	160	163	163					156
	Jackson	259	264	279	283	288	286	286	287					279
	La Plata	11,978	12,131	12,276	12,534	12,708	12,994	13,164	13,314					12,637
	Larimer	55,474	56,373	57,133	58,100	59,008	60,076	61,195	61,894					58,657
	Mesa	42,045	42,608	43,226	43,824	44,077	45,014	45,548	45,895					44,030
	Moffat	3,490	3,547	3,586	3,650	3,681	3,690	3,731	3,814					3,649
	Montezuma	8,834	8,963	9,049	9,197	9,303	9,422	9,584	9,684					9,255
	Montrose	11,423	11,570	11,765	12,005	12,129	12,360	12,550	12,666					12,059
	Ouray	643	650	658	672	687	701	716	729					682
	Pitkin	1,539	1,573	1,587	1,607	1,609	1,692	1,705	1,712					1,628
	Rio Blanco	1,350	1,364	1,386	1,395	1,401	1,418	1,457	1,472					1,405
	Routt	3,020	3,039	3,086	3,147	3,202	3,296	3,355	3,381					3,191
	San Juan	174	169	172	180	189	191	195	198					184
San Miguel	1,005	1,022	1,039	1,070	1,098	1,137	1,165	1,186					1,090	
Summit	3,353	3,444	3,502	3,613	3,681	3,820	3,882	3,939					3,654	
Residence Outside RAE Area(1)	10,912	11,197	11,387	11,647	11,829	12,024	12,997	13,213					11,901	
Total	192,081	195,105	197,975	201,668	204,207	208,421	212,517	214,893					203,358	
RAE 2	Cheyenne	401	400	403	403	407	405	414	413					406
	Kit Carson	1,883	1,908	1,915	1,953	1,976	2,010	2,025	2,062					1,967
	Lincoln	1,148	1,151	1,160	1,185	1,211	1,219	1,226	1,253					1,194
	Logan	4,609	4,653	4,721	4,806	4,889	4,954	5,011	5,065					4,839
	Morgan	7,618	7,752	7,844	7,986	8,137	8,286	8,322	8,382					8,041
	Phillips	944	960	994	1,005	1,027	1,053	1,059	1,089					1,016
	Sedgwick	649	652	654	655	679	692	705	703					674
	Washington	1,124	1,118	1,138	1,168	1,165	1,185	1,215	1,216					1,166
	Weld	54,107	55,460	56,687	57,956	58,929	60,006	60,039	61,143					58,041
	Yuma	2,533	2,584	2,596	2,625	2,658	2,705	2,771	2,802					2,659
	Residence Outside RAE Area(1)	8,514	8,555	8,625	8,766	8,815	8,887	8,623	8,692					8,685
	Total	83,530	85,193	86,737	88,508	89,893	91,402	91,410	92,820					88,687
RAE 3	Adams	103,720	105,541	107,716	109,955	111,667	113,640	113,292	114,761					110,037
	Arapahoe	106,682	108,865	111,278	113,502	115,250	117,302	117,281	118,921					113,635
	Douglas	25,302	25,860	26,490	27,136	27,632	28,234	28,676	29,090					27,303
	Elbert	2,422	2,500	2,554	2,592	2,653	2,715	2,707	2,756					2,612
	Residence Outside RAE Area(1)	51,626	52,011	52,803	53,240	54,265	54,887	55,970	57,076					53,985
Total	289,752	294,777	300,841	306,425	311,467	316,778	317,926	322,604					307,571	
RAE 4	Alamosa	6,522	6,606	6,681	6,790	6,902	6,976	7,051	7,104					6,829
	Baca	1,267	1,285	1,294	1,327	1,332	1,345	1,358	1,368					1,322
	Bent	1,647	1,665	1,679	1,698	1,688	1,710	1,741	1,738					1,696
	Chaffee	3,587	3,637	3,705	3,789	3,820	3,878	3,939	3,984					3,792
	Conejos	2,998	3,039	3,080	3,115	3,124	3,162	3,214	3,246					3,122
	Costilla	1,863	1,871	1,906	1,950	1,956	1,975	2,020	2,040					1,948
	Crowley	1,278	1,274	1,285	1,303	1,309	1,307	1,314	1,324					1,299
	Custer	792	798	810	826	851	887	902	917					848
	Fremont	12,169	12,331	12,469	12,644	12,748	12,895	13,009	13,088					12,669
	Huerfano	2,665	2,674	2,713	2,728	2,773	2,805	2,828	2,813					2,750
	Kiowa	387	381	383	389	407	410	416	423					400
	Lake	1,262	1,287	1,314	1,339	1,376	1,405	1,401	1,434					1,352
	Las Animas	5,552	5,608	5,666	5,692	5,732	5,756	5,801	5,854					5,708
	Mineral	129	136	141	146	148	156	156	160					147
	Otero	7,225	7,278	7,384	7,466	7,517	7,619	7,671	7,743					7,488
	Prowers	4,511	4,560	4,608	4,724	4,790	4,864	4,924	4,941					4,740
	Pueblo	62,301	62,940	63,668	64,432	64,989	65,615	65,952	66,376					64,534
	Rio Grande	4,007	4,081	4,147	4,204	4,251	4,325	4,357	4,404					4,222
	Saguache	2,166	2,225	2,274	2,318	2,380	2,437	2,477	2,512					2,349
	Residence Outside RAE Area(1)	5,047	5,209	5,339	5,429	5,528	5,692	5,766	5,848					5,482
Total	127,375	128,885	130,546	132,309	133,621	135,219	136,297	137,317					132,696	

Department of Health Care Policy and Financing
FY 2020-21 Medical Premiums Expenditure and Caseload Report

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 5	Denver	71,528	71,783	71,334	71,880	72,142	73,773	74,373	73,904					72,590
	Residence Outside RAE Area(1)	50,618	51,118	50,869	51,525	51,996	52,689	56,443	56,271					52,691
	Total	122,146	122,901	122,203	123,405	124,138	126,462	130,816	130,175					125,281
RAE 6	Boulder	44,787	45,541	46,189	47,102	47,804	48,796	49,340	49,887					47,431
	Broomfield	5,303	5,438	5,580	5,701	5,780	5,949	6,022	6,090					5,733
	Clear Creek	1,257	1,269	1,288	1,320	1,330	1,347	1,345	1,360					1,315
	Gilpin	943	964	998	1,021	1,039	1,059	1,069	1,090					1,023
	Jefferson	64,706	65,962	67,371	68,850	69,817	71,187	71,488	72,615					69,000
	Residence Outside RAE Area(1)	37,288	37,983	38,525	39,609	40,162	40,534	42,818	43,120					40,005
	Total	154,284	157,157	159,951	163,603	165,932	168,872	172,082	174,162					164,505
RAE 7	El Paso	166,197	168,683	171,558	174,269	176,053	178,661	180,498	182,166					174,761
	Park	1,228	1,246	1,295	1,336	1,400	1,478	1,417	1,473					1,359
	Teller	5,262	5,337	5,406	5,560	5,603	5,708	5,770	5,825					5,559
	Residence Outside RAE Area(1)	8,914	9,107	9,266	9,460	9,435	9,717	9,921	10,047					9,483
	Total	181,601	184,373	187,525	190,625	192,491	195,564	197,606	199,511					191,162
Denver Health Managed Care ⁽³⁾	Adams	3,722	3,777	3,867	3,964	4,059	4,144	4,217	4,267					4,002
	Arapahoe	4,407	4,490	4,577	4,708	4,839	4,950	5,077	5,163					4,776
	Denver	81,155	82,973	85,075	86,941	87,996	88,718	90,207	91,864					86,866
	Jefferson	2,976	3,029	3,104	3,187	3,240	3,299	3,346	3,410					3,199
	Residence Outside Denver Health Managed Care	89	100	108	129	124	110	127	153					118
	Total	92,349	94,369	96,731	98,929	100,258	101,221	102,974	104,857					98,961
Total ACC Caseload		1,243,118	1,262,760	1,282,509	1,305,472	1,322,007	1,343,939	1,361,628	1,376,339					1,312,222

(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.

**Department of Health Care Policy and Financing
FY 2020-21 Medical Premiums Expenditure and Caseload Report**

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	\$60,607,851	\$60,600,401	\$7,450
October-20	\$60,002,686	\$59,999,037	\$3,649
November-20	\$61,592,890	\$61,590,113	\$2,777
December-20	\$64,288,305	\$60,603,872	\$3,684,433
January-21	\$76,059,821	\$76,057,578	\$2,243
February-21	\$71,808,501	\$71,793,707	\$14,794
March-21			
April-21			
May-21			
June-21			
Total Year-to-Date Expenditures	\$509,358,604	\$505,633,948	\$3,724,656
Total Year-to-Date Appropriation	\$959,410,239	\$945,357,559	\$14,052,680
Remaining in Appropriation	\$450,051,635	\$439,723,611	\$10,328,024

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 2020-21 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.

**Department of Health Care Policy and Financing
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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	\$57,081,263	\$8,403,697	\$3,387,110	\$11,892,599	\$6,228,604	\$7,466,418	\$8,595,493	\$6,978,896	\$4,158,769	(\$30,323)
August	\$57,907,977	\$8,527,077	\$3,457,288	\$12,087,436	\$6,292,936	\$7,481,501	\$8,755,912	\$7,067,559	\$4,259,716	(\$21,448)
September	\$60,600,401	\$8,602,298	\$4,167,543	\$12,105,883	\$6,550,273	\$7,882,618	\$9,222,566	\$8,072,791	\$4,641,299	(\$644,870)
October	\$59,999,037	\$8,704,653	\$4,094,733	\$12,174,203	\$6,531,555	\$7,853,173	\$9,279,432	\$7,976,825	\$4,632,801	(\$1,248,338)
November	\$61,590,115	\$8,823,786	\$4,014,983	\$12,477,048	\$6,594,461	\$7,780,214	\$9,400,720	\$7,883,024	\$4,640,925	(\$25,046)
December	\$60,603,872	\$8,832,882	\$4,102,500	\$12,487,545	\$6,592,656	\$7,736,632	\$9,519,734	\$7,997,070	\$4,732,879	(\$1,398,026)
January	\$76,057,578	\$10,588,978	\$4,448,672	\$14,521,338	\$7,484,822	\$8,695,628	\$10,625,351	\$9,314,657	\$5,298,576	\$5,079,556
February	\$71,833,333	\$7,590,497	\$3,052,496	\$10,859,357	\$5,796,578	\$6,790,026	\$7,702,706	\$6,475,756	\$3,829,874	\$19,736,043
March										
April										
May										
June										
Total Year-to-Date Expenditures	\$505,673,576	\$70,073,868	\$30,725,325	\$98,605,409	\$52,071,885	\$61,686,210	\$73,101,914	\$61,766,578	\$36,194,839	\$21,447,548
Total Year-to-Date Appropriation	\$945,357,559									
Remaining in Appropriation	\$439,683,983									

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	1,302,183	197,973	86,736	300,839	130,546	122,202	159,950	187,523	96,732	19,682
October	1,324,861	201,665	88,508	306,421	132,308	123,402	163,601	190,625	98,931	19,400
November	1,343,000	204,206	89,893	311,464	133,621	124,136	165,932	192,489	100,261	20,998
December	1,362,092	208,420	91,402	316,777	135,219	126,460	168,871	195,562	101,223	18,158
January	1,381,332	212,514	91,410	317,922	136,294	130,815	172,079	197,605	102,976	19,717
February	1,394,827	214,828	92,794	322,418	137,305	130,036	174,106	199,484	104,744	19,112
March										
April										
May										
June										
Total Year-to-Date Average	1,331,393	203,348	88,683	307,545	132,694	125,262	164,497	191,158	98,949	19,258
Total Year-to-Date Appropriation	1,319,736									

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.

**Department of Health Care Policy and Financing
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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	\$19,361,077	\$16,439,674	\$1,948,128	\$973,275
October-20	\$18,006,384	\$14,826,428	\$1,407,174	\$1,772,782
November-20	\$14,163,714	\$12,163,909	\$1,071,306	\$928,499
December-20	\$13,135,303	\$11,500,178	\$969,008	\$666,117
January-21	\$13,845,042	\$11,886,609	\$1,245,846	\$712,588
February-21	\$12,733,753	\$11,101,654	\$1,209,686	\$422,413
March-21				
April-21				
May-21				
June-21				
Total Year-to-Date Expenditures	\$120,324,459	\$102,781,969	\$10,584,918	\$6,957,573
Total Year-to-Date Appropriation	\$187,202,766	\$156,390,727	\$16,159,357	\$14,652,682
Remaining in Appropriation	\$66,878,307			

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 2019	51,765	27,516	79,281	429	537	966	
August 2019	51,007	27,411	78,418	394	561	955	
September 2019	50,774	26,478	77,252	354	537	891	
October 2019	50,192	26,373	76,565	339	536	875	
November 2019	49,242	26,170	75,412	319	543	862	
December 2019	48,657	25,793	74,450	294	533	827	
January 2020	49,553	26,447	76,000	301	554	855	
February 2020	48,577	26,731	75,308	282	562	844	
March 2020	48,077	27,431	75,508	331	566	897	
April 2020	51,230	27,800	79,030	453	545	998	
May 2020	49,125	27,110	76,235	456	542	998	
June 2020	48,337	26,958	75,295	387	495	882	
FY 2019-20 Actuals	49,711	26,852	76,563	362	543	904	
July 2020	46,898	27,442	74,340	347	482	829	
August 2020	45,162	27,377	72,539	331	474	805	
September 2020	43,435	26,952	70,387	320	467	787	
October 2020	42,155	26,737	68,892	431	662	1,093	
November 2020	40,312	26,878	67,190	370	629	999	
December 2020	38,469	26,670	65,139	249	472	721	
January 2021	36,614	27,185	63,799	247	459	706	
February 2021	35,502	27,278	62,780	232	456	688	
March 2021							
April 2021							
May 2021							
June 2021							
FY 2020-21 Year-to-Date Average	41,068	27,065	68,133	316	513	829	
FY 2020-21 Year-to-Date Appropriation	48,816	27,608	76,424	395	503	898	
Monthly Growth	(35,502)	(27,278)	(62,780)	(232)	(456)	(688)	
Monthly Growth Rate	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	
Over-the-year Growth	(52,857)	(28,118)	(80,975)	(398)	(623)	(1,021)	
Over-the-year Growth Rate	-93.91%	-101.53%	-96.42%	-127.97%	-112.45%	-118.03%	

Notes:
1) All children's caseload reporting includes the CHIP+ 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.

Department of Health Care Policy and Financing
 FY 2020-21 Medical Premiums Expenditure and Caseload Report

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	6,705	6,732	6,769	6,784	6,819	6,835					6,744	7,289
	HCBS - Developmental Disabilities - Regional Centers	94	95	89	90	90	89	87	84					90	-
	HCBS - Supported Living Services	4,694	4,737	4,767	4,797	4,828	4,862	4,867	4,899					4,806	-
	HCBS - Children's Extensive Support	2,145	2,156	2,180	2,203	2,212	2,227	2,243	2,249					2,202	-
	HCBS - Children's Habilitation Residential Program	96	101	103	105	113	121	121	126					111	-
	DIDD Subtotal	13,660	13,765	13,844	13,927	14,012	14,083	14,137	14,193					10,147	-
HCBS - DD Authorizations ⁶⁾	Waiting List Authorizations	<30	<30	<30	35	<30	<30	<30	-						-
	Reserved Capacity Authorizations	54	47	59	31	51	<30	43	-						-

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	\$36,642,348	\$37,907,963	\$44,192,636	\$36,050,095	\$35,574,365	\$40,392,769					\$316,416,810	\$525,769,703	60.18%
	HCBS - Developmental Disabilities - Regional Centers	\$2,044,440	\$2,091,914	\$1,943,788	\$1,955,380	\$2,199,264	\$1,960,031	\$1,926,997	\$1,930,263					\$16,052,077	N/A	N/A
	HCBS - Supported Living Services	\$5,141,518	\$4,949,268	\$4,327,879	\$4,690,481	\$5,073,774	\$4,223,868	\$3,924,744	\$4,242,094					\$36,573,626	\$71,889,381	50.87%
	HCBS - Children's Extensive Support	\$2,377,374	\$3,101,256	\$2,519,049	\$2,496,845	\$3,039,470	\$2,562,706	\$2,521,904	\$2,515,241					\$21,133,845	\$29,961,574	70.54%
	HCBS - Children's Habilitation Residential Program	\$134,036	\$280,606	\$110,107	\$282,630	\$291,272	\$310,820	\$344,437	\$369,473					\$2,123,381	\$4,779,680	44.43%
	HCBS - Case Management	\$2,236,257	\$1,774,544	\$1,304,038	\$1,266,758	\$1,080,013	\$2,462,781	\$914,717	\$1,083,084					\$12,122,191	\$33,164,246	36.55%
	Quality, Intake, Reassessment and Administrative Payments	\$0	\$0	\$645,663	\$262,581	\$415,235	\$589,302	\$306,442	\$389,943					\$2,609,166	\$7,256,649	35.96%
DIDD Subtotal	\$53,984,762	\$55,803,086	\$47,492,872	\$48,862,638	\$56,291,664	\$48,159,602	\$45,513,606	\$50,922,866					\$407,031,096	\$672,821,233	60.50%	
	Number of Weeks in Month	4	5	4	4	5	4	4								
	Expenditure Per Week	\$13,496,191	\$11,160,617	\$11,873,218	\$12,215,660	\$11,258,333	\$12,039,900	\$11,378,401	\$12,730,717					\$9,465,839		
State Only Programs	State Only Supported Living Services	\$0	\$0	\$391,922	\$329,658	\$421,897	\$348,546	\$269,860	\$288,508					\$2,050,392	\$9,893,584	20.72%
	Family Support Services Program	\$0	\$0	\$366,528	\$594,551	\$603,944	\$619,697	\$475,477	\$547,888					\$3,208,085	\$7,515,264	42.69%
	State Only Case Management	\$0	\$0	\$616,385	\$277,413	\$342,517	\$308,014	\$323,075	\$343,379					\$2,210,784	\$2,416,320	91.49%
	State Only Programs Subtotal	\$0	\$0	\$1,374,836	\$1,201,622	\$1,368,358	\$1,276,258	\$1,068,412	\$1,179,776					\$7,469,261	\$19,825,168	37.68%
	Expenditure Per Week	\$0	\$0	\$343,709	\$300,405	\$273,672	\$319,064	\$267,103	\$294,944							

Notes:

- Historically, DIDD State Only Programs and QAUR/SIS do not have expenditures in accounting period 1. They do, however, have historical expenditures in periods 02 through 13.
- Family Support Services Program does not have a caseload appropriation. Services are rendered on a case-by-case and as needed basis.
- 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.
- 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.
- 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.
- 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.

**Department of Health Care Policy and Financing
FY 2020-21 Medical Premiums Expenditure and Caseload Report**

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	83,123
August	\$4,239,734	83,533
September	\$12,573,730	86,077
October	\$12,632,688	86,181
November	\$13,017,406	87,151
December	\$13,030,524	92,014
January	\$13,177,530	94,536
February	\$13,924,974	
March		
April		
May		
June		
Total Year-to-Date	\$96,831,421	87,516
Total Year-to-Date Appropriation	\$168,297,340	
Remaining in Appropriation	\$71,465,919	
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 two 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.		

**Department of Health Care Policy and Financing
FY 2020-21 Medical Premiums Expenditure and Caseload Report**

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	\$4,344	<30
October	\$5,618	<30
November	\$2,559	<30
December	(\$2,376)	<30
January	\$275	<30
February	(\$3,310)	<30
March		
April		
May		
June		
Total Year-to-Date	\$22,613	32
Total Year-to-Date Appropriation	\$10,000,000	
Remaining in Appropriation	\$9,977,387	
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.		