Schedule 13

Department of Health Care Policy and Financing

Funding Request for The FY 2020-21 Budget Cycle

Request Title

NP-03 Adjust Medicaid Funding for Eligibility

Dept. Approval By: _____ ____ **Supplemental FY 2019-20**

OSPB Approval By: _____ ____ **Budget Amendment FY 2020-21**

X **Change Request FY 2020-21**

Summary Information	Fund	FY 2019-20 Initial Appropriation	FY 2019-20 Supplemental Request	FY 2020-21 Base Request	FY 2020-21 Change Request	FY 2021-22 Continuation
	Total	**$12,981,594**	**$0**	**$12,981,594**	**($1,900,000)**	**($1,900,000)**
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items Impacted by Change Request	GF	$6,490,796	$0	$6,490,796	($950,000)	($950,000)
	CF	$0	$0	$0	$0	$0
	RF	$0	$0	$0	$0	$0
	FF	$6,490,798	$0	$6,490,798	($950,000)	($950,000)

Line Item Information	Fund	FY 2019-20 Initial Appropriation	FY 2019-20 Supplemental Request	FY 2020-21 Base Request	FY 2020-21 Change Request	FY 2021-22 Continuation
	Total	**$12,981,594**	**$0**	**$12,981,594**	**($1,900,000)**	**($1,900,000)**
07. Department of Human Services Medicaid-Funded Programs, (C) Division of Child Welfare - Medicaid Funding, (1) Division of Child Welfare - Medicaid Funding - Child Welfare Services	FTE	0.0	0.0	0.0	0.0	0.0
	GF	$6,490,796	$0	$6,490,796	($950,000)	($950,000)
	CF	$0	$0	$0	$0	$0
	RF	$0	$0	$0	$0	$0
	FF	$6,490,798	$0	$6,490,798	($950,000)	($950,000)

Auxiliary Data

Requires Legislation?	NO		
Type of Request?	Department of Health Care Policy and Financing Non-Prioritized Request	**Interagency Approval or Related Schedule 13s:**	Impacts Other Agency