

STATE OF COLORADO FY 2010-11 BUDGET REQUEST CYCLE: DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

Schedule 13											
Change Request for FY 2010-11 Budget Request Cycle											
Decision Item FY 2010-11		Base Reduction Item FY 2010-11			Supplemental FY 2009-10			Budget Amendment FY 2010-11			
Request Title:	Medicaid Mental Health Community Programs										
Department:	Health Care Policy and Financing			Dept. Approval by:	John Bartholomew <i>JB</i>			Date:	November 2, 2009 <i>10/15/09</i>		
Priority Number:	DI-2			OSPB Approval:	<i>John</i>			Date:	<i>10-26-09</i>		
		1	2	3	4	5	6	7	8	9	10
		Prior-Year Actual FY 2008-09	Appropriation FY 2009-10	Supplemental Request FY 2009-10	Total Revised Request FY 2009-10	Base Request FY 2010-11	Decision/ Base Reduction FY 2010-11	November 1 Request FY 2010-11	Budget Amendment FY 2010-11	Total Revised Request FY 2010-11	Change from Base (Column 5) FY 2011-12
	Fund										
Total of All Line Items	Total	217,637,190	207,166,540	4,051,231	211,217,771	236,143,348	21,381,804	256,525,152	0	256,525,152	21,381,804
	FTE	0.0	0	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	87,500,300	72,657,334	2,297,944	74,955,278	104,592,221	10,807,345	115,399,566	0	115,399,566	10,807,345
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	5,219,083	6,483,686	(733,568)	5,750,119	13,018,666	(75,390)	12,943,276	0	12,943,276	(75,390)
	CFE/RF	7,330	9,016	1,377	10,393	8,950	4,338	13,288	0	13,288	4,338
	FF	124,910,477	128,016,504	2,485,478	130,501,982	117,523,511	10,645,511	128,169,022	0	128,169,022	10,645,511
(3) Medicaid Mental Health Community Programs; (A) Mental Health Capitation Payments	Total	215,860,937	205,435,011	3,783,856	209,218,867	233,411,819	20,807,570	254,219,389	0	254,219,389	20,807,570
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	86,769,471	94,262,892	2,843,388	97,106,280	103,726,456	10,520,228	114,246,684	0	114,246,684	10,520,228
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	5,219,083	8,434,054	(956,303)	7,477,752	13,018,666	(75,390)	12,943,276	0	12,943,276	(75,390)
	CFE/RF	7,330	9,016	1,377	10,393	8,950	4,338	13,288	0	13,288	4,338
	FF	123,865,053	102,729,049	1,895,394	104,624,443	116,657,747	10,358,394	127,016,141	0	127,016,141	10,358,394
(3) Medicaid Mental Health Community Programs; (B) Other Medicaid Mental Health Payments, Medicaid Mental Health Fee for Services Payments	Total	1,776,253	1,731,529	267,375	1,998,904	1,731,529	574,234	2,305,763	0	2,305,763	574,234
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	730,829	865,765	133,687	999,452	865,765	287,117	1,152,882	0	1,152,882	287,117
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE/RF	0	0	0	0	0	0	0	0	0	0
	FF	1,045,424	865,764	133,688	999,452	865,764	287,117	1,152,881	0	1,152,881	287,117

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Decision Item FY 2010-11	<input checked="" type="checkbox"/>	Base Reduction Item FY 2010-11	<input type="checkbox"/>	Supplemental FY 2009-10	<input type="checkbox"/>	Budget Amendment FY 2010-11	<input type="checkbox"/>			
Request Title:	Medicaid Mental Health Community Programs									
Department:	Health Care Policy and Financing			Dept. Approval by:	John Bartholomew			Date:	November 2, 2009	
Priority Number:	DI-2			OSPB Approval:				Date:		
	1	2	3	4	5	6	7	8	9	10
	Prior-Year Actual	Supplemental Request	Total Revised Request	Base Request	Decision/ Base Reduction	November 1 Request	Budget Amendment	Total Revised Request	Change from Base	
Fund	FY 2008-09	FY 2009-10	FY 2009-10	FY 2009-10	FY 2010-11	FY 2010-11	FY 2010-11	FY 2010-11	FY 2010-11	FY 2011-12
(3) Medicaid Mental Health Community Programs; Long Bill Group Total	Total	0	0	0	0	0	0	0	0	0
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	0	(22,471,323)	(679,131)	(23,150,454)	0	0	0	0	0
	GFE	0	0	0	0	0	0	0	0	0
	CF	0	(1,950,368)	222,735	(1,727,633)	0	0	0	0	0
	CFE/RF	0	0	0	0	0	0	0	0	0
	FF	0	24,421,691	456,396	24,878,087	0	0	0	0	0
Non-Line Item Request:	None.									
Letternote Revised Text:	<p>^a Of this amount, \$8,998,386 shall be from the Health Care Expansion Fund created in Section 24-22-117 (2) (a) (I) C.R.S.; and \$31,469 shall be from the Breast and Cervical Cancer Prevention and Treatment Fund as directed by Section 25.5-5-308 (9) (d) C.R.S; and \$3,913,421 shall be from the Hospital Provider Fee Cash Fund created in Section 25.5-4-402.3 (4) C.R.S.</p> <p>^b The Reappropriated Funds shall be transferred from the Department of Public Health and Environment pursuant to Section 24-22-117 (2) (d) (II) (D), C.R.S.</p>									
Cash or Federal Fund Name and COFRS Fund Number:	CF: Health Care Expansion Fund (Fund 18K); Breast and Cervical Cancer Prevention and Treatment Fund (Fund 15D); Hospital Provider Fee Cash Fund. FF: Title XIX.									
Reappropriated Funds Source, by Department and Line Item Name:	Transfer from the Department of Public Health and Environment, Prevention, Early Detection, and Treatment Fund.									
Approval by OIT?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	N/A: <input checked="" type="checkbox"/>							
Schedule 13s from Affected Departments:	None.									