

Exhibit A - Summary of Request

Calculation of Request Including August Budget Balancing Requests

FY 2010-11						
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2010-11 Appropriation						
FY 2010-11 Long Bill Appropriation (HB 10-1376)	\$3,158,315,617	\$814,622,298	\$161,444,485	\$250,622,514	\$3,122,188	\$1,928,504,132
HB 10-1005 "Home Health Care"	\$123,270	\$0	\$0	\$47,348	\$0	\$75,922
HB 10-1033 "Screening Brief Intervention and Referral to Treatment"	\$870,155	\$334,227	\$0	\$0	\$0	\$535,928
HB 10-1146 "State-funded Public Assistance Programs"	(\$704,421)	(\$869,842)	\$0	\$0	\$0	\$165,421
HB 10-1378 "Transfers for Health Care Services"	\$0	(\$12,800,000)	\$0	\$12,800,000	\$0	\$0
HB 10-1379 "2010 Nursing Facility Rate Reductions"	(\$6,234,689)	(\$8,211,333)	\$0	\$5,806,343	\$0	(\$3,829,699)
HB 10-1380 "Use Supplemental OAP Health Fund for Medicaid"	\$0	(\$4,850,000)	\$0	\$4,850,000	\$0	\$0
HB 10-1381 "Tobacco Revenues Offset Medical Services"	\$0	(\$25,691,418)	\$0	\$21,200,983	\$4,490,435	\$0
HB 10-1382 "Repeal Delay of Public Medical Assistance Program Payments"	(\$43,121,235)	(\$14,679,904)	\$0	(\$2,023,356)	(\$17,380)	(\$26,400,595)
SB 10-167 "Medicaid Efficiency & False Claims"	(\$2,390,570)	(\$918,218)	\$0	\$0	\$0	(\$1,472,352)
SB 10-169 "Provider Fee Enhanced Match"	\$0	(\$46,329,388)	\$0	\$46,329,388	\$0	\$0
FY 2010-11 Total Spending Authority	\$3,106,858,127	\$700,606,422	\$161,444,485	\$339,633,220	\$7,595,243	\$1,897,578,757
ES-1 "Enhanced Federal Funding Adjustment"	\$0	\$53,195,115	\$0	\$2,153,476	(\$839)	(\$55,347,752)
FY 2010-11 Total Spending Authority Including Early Supplementals	\$3,106,858,127	\$753,801,537	\$161,444,485	\$341,786,696	\$7,594,404	\$1,842,231,005
Total Projected FY 2010-11 Expenditures	\$3,286,464,361	\$727,902,126	\$161,444,485	\$454,984,828	\$7,589,928	\$1,934,542,994
FY 2010-11 Requested Change from Appropriation	\$179,606,234	(\$25,899,411)	\$0	\$113,198,132	(\$4,476)	\$92,311,989
Percent Change	5.78%	-3.70%	0.00%	33.33%	-0.06%	4.86%
FY 2010-11 November Supplemental Request (S-1)	\$189,495,298	(\$16,769,210)	\$0	\$96,242,004	\$178,087	\$109,844,417
FY 2010-11 Current Supplemental Request (S-1A)	(\$9,889,064)	(\$9,130,201)	\$0	\$16,956,128	(\$182,563)	(\$17,532,428)
Percent Change	-0.30%	-1.25%	0.00%	3.73%	-2.41%	-0.91%

The FY 2010-11 "Total Projected FY 2010-11 Expenditures" will not match Column 4 (Total Revised Request FY 2010-11) on the Schedule 13 due to the inclusion of the Department's August 23, 2010 budget balancing request ES-1 - "Decrease Amount for Extended Enhanced Federal Medical Assistance Percentage". See page EA-3 "Calculation of Request (excluding ES-1)" for calculations excluding the impact of ES-1.

Exhibit A - Summary of Request

Calculation of Request						
FY 2011-12						
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2010-11 Appropriation Plus Special Bills	\$3,106,858,127	\$700,606,422	\$161,444,485	\$339,633,220	\$7,595,243	\$1,897,578,757
Bill Annualizations						
HB 10-1376 Long Bill Appropriation	(\$11,767,923)	\$280,617,376	\$0	\$60,012,189	\$229,445	(\$352,626,933)
HB 09-1293 Annualization "Health Care Affordability Act of 2009"	\$0	\$0	\$0	\$0	\$0	\$0
HB 10-1005 Annualization "Home Health Care"	\$189,306	\$0	\$0	\$108,940	\$0	\$80,366
HB 10-1033 Annualization "Screening Brief Intervention and Referral to Treatment"	\$360,130	\$280,916	\$0	\$0	\$0	\$79,214
HB 10-1146 Annualization "State-funded Public Assistance Programs"	\$314,470	\$143,237	\$0	\$0	\$0	\$171,233
HB 10-1324 Annualization "Medicaid Nursing Facility Per Diem Rates"	\$0	\$4,021,832	\$0	(\$4,021,832)	\$0	\$0
HB 10-1378 Annualization "Transfers for Health Care Services"	\$0	\$12,800,000	\$0	(\$12,800,000)	\$0	\$0
HB 10-1379 Annualization "2010 Nursing Facility Rate Reductions"	\$6,234,689	\$8,211,333	\$0	(\$5,806,343)	\$0	\$3,829,699
HB 10-1380 Annualization "Use Supplemental OAP Health Fund for Medicaid"	\$0	\$1,850,000	\$0	(\$1,850,000)	\$0	\$0
HB 10-1381 Annualization "Tobacco Revenues Offset Medical Services"	\$0	\$25,691,418	\$0	(\$21,200,983)	(\$4,490,435)	\$0
SB 10-167 Annualization "Medicaid Efficiency & False Claims"	(\$909,257)	(\$731,696)	\$0	\$0	\$0	(\$177,561)
SB 10-169 Annualization "Provider Fee Enhanced Match"	\$0	\$46,329,388	\$0	(\$46,329,388)	\$0	\$0
Total Annualizations	(\$5,578,585)	\$379,213,804	\$0	(\$31,887,417)	(\$4,260,990)	(\$348,643,982)
FY 2011-12 Base Amount	\$3,101,279,542	\$1,079,820,226	\$161,444,485	\$307,745,803	\$3,334,253	\$1,548,934,775
Total Projected FY 2011-12 Expenditure	\$3,540,998,022	\$1,085,609,635	\$161,444,485	\$548,648,532	\$3,392,981	\$1,741,902,389
FY 2011-12 Request	\$439,718,480	\$5,789,409	\$0	\$240,902,729	\$58,728	\$192,967,614
Percent Change from FY 2010-11 Base	14.18%	0.54%	0.00%	78.28%	1.76%	12.46%
Percent Change from FY 2010-11 Estimate	7.74%	49.14%	0.00%	20.59%	-55.30%	-9.96%
FY 2011-12 November Decision Item (DI-1)	\$448,586,719	\$12,011,909	\$0	\$215,631,736	\$301,747	\$220,641,327
FY 2011-12 Current Budget Amendment (BA-1)	(\$8,868,239)	(\$6,222,500)	\$0	\$25,270,993	(\$243,019)	(\$27,673,713)
Percent Change	-2.02%	-107.48%	0.00%	10.49%	-413.80%	-14.34%

Exhibit A - Summary of Request

Calculation of Request Without Budget Balancing Requests						
FY 2010-11						
Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2010-11 Appropriation						
FY 2010-11 Long Bill Appropriation (HB 10-1376)	\$3,158,315,617	\$814,622,298	\$161,444,485	\$250,622,514	\$3,122,188	\$1,928,504,132
HB 10-1005 "Home Health Care"	\$123,270	\$0	\$0	\$47,348	\$0	\$75,922
HB 10-1033 "Screening Brief Intervention Referral"	\$870,155	\$334,227	\$0	\$0	\$0	\$535,928
HB 10-1146 "State-funded Public Assistance Programs"	(\$704,421)	(\$869,842)	\$0	\$0	\$0	\$165,421
HB 10-1378 "Transfers for Health Care Services"	\$0	(\$12,800,000)	\$0	\$12,800,000	\$0	\$0
HB 10-1379 "2010 Nursing Facility Rate Reductions"	(\$6,234,689)	(\$8,211,333)	\$0	\$5,806,343	\$0	(\$3,829,699)
HB 10-1380 "Use Supplemental OAP Health Fund for Medicaid"	\$0	(\$4,850,000)	\$0	\$4,850,000	\$0	\$0
HB 10-1381 "Tobacco Revenues Offset Medical Services"	\$0	(\$25,691,418)	\$0	\$21,200,983	\$4,490,435	\$0
HB 10-1382 "Repeal Delay of Public Medical Assistance Program Payments"	(\$43,121,235)	(\$14,679,904)	\$0	(\$2,023,356)	(\$17,380)	(\$26,400,595)
SB 10-167 "Medicaid Efficiency & False Claims"	(\$2,390,570)	(\$918,218)	\$0	\$0	\$0	(\$1,472,352)
SB 10-169 "Provider Fee Enhanced Match"	\$0	(\$46,329,388)	\$0	\$46,329,388	\$0	\$0
FY 2010-11 Total Spending Authority	\$3,106,858,127	\$700,606,422	\$161,444,485	\$339,633,220	\$7,595,243	\$1,897,578,757
FY 2010-11 Current Supplemental Request (S-1A)	(\$9,889,064)	(\$9,130,201)	\$0	\$16,956,128	(\$182,563)	(\$17,532,428)
Total Revised Request (Column 4)	\$3,096,969,063	\$691,476,221	\$161,444,485	\$356,589,348	\$7,412,680	\$1,880,046,329
Percent Change	-0.32%	-1.30%	0.00%	4.99%	-2.40%	-0.92%
FY 2010-11 November Supplemental Request (S-1)	\$189,495,298	(\$16,769,210)	\$0	\$96,242,004	\$178,087	\$109,844,417
FY 2010-11 Current Supplemental Request (S-1A)	(\$9,889,064)	(\$9,130,201)	\$0	\$16,956,128	(\$182,563)	(\$17,532,428)
Percent Change	-0.32%	-1.32%	0.00%	4.76%	-2.46%	-0.93%
Note: The purpose of this page is only to match the fund splits in Schedule 13, Column 4. This table excludes the Department's August 23, 2010 budget balancing request ES-1 - "Decrease Amount for Extended Enhanced Federal Medical Assistance Percentage".						

Exhibit A - Summary of Request

**Calculation of Request
Adjusted for Change to Federal Medical Assistance Percentage and FY 2009-10 Payment Delay**

FY 2010-11

Item	Total Request	General Fund	General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds
FY 2010-11 Appropriation						
FY 2010-11 Long Bill Appropriation (HB 10-1376)	\$3,158,315,617	\$814,622,298	\$161,444,485	\$250,622,514	\$3,122,188	\$1,928,504,132
HB 10-1005 "Home Health Care"	\$123,270	\$0	\$0	\$47,348	\$0	\$75,922
HB 10-1033 "Screening Brief Intervention Referral"	\$870,155	\$334,227	\$0	\$0	\$0	\$535,928
HB 10-1146 "State-funded Public Assistance Programs"	(\$704,421)	(\$869,842)	\$0	\$0	\$0	\$165,421
HB 10-1378 "Transfers for Health Care Services"	\$0	(\$12,800,000)	\$0	\$12,800,000	\$0	\$0
HB 10-1379 "2010 Nursing Facility Rate Reductions"	(\$6,234,689)	(\$8,211,333)	\$0	\$5,806,343	\$0	(\$3,829,699)
HB 10-1380 "Use Supplemental OAP Health Fund for Medicaid"	\$0	(\$4,850,000)	\$0	\$4,850,000	\$0	\$0
HB 10-1381 "Tobacco Revenues Offset Medical Services"	\$0	(\$25,691,418)	\$0	\$21,200,983	\$4,490,435	\$0
HB 10-1382 "Repeal Delay of Public Medical Assistance Program Payments"	(\$43,121,235)	(\$14,679,904)	\$0	(\$2,023,356)	(\$17,380)	(\$26,400,595)
SB 10-167 "Medicaid Efficiency & False Claims"	(\$2,390,570)	(\$918,218)	\$0	\$0	\$0	(\$1,472,352)
SB 10-169 "Provider Fee Enhanced Match"	\$0	(\$46,329,388)	\$0	\$46,329,388	\$0	\$0
FY 2010-11 Total Spending Authority	\$3,106,858,127	\$700,606,422	\$161,444,485	\$339,633,220	\$7,595,243	\$1,897,578,757
ES-1 "Decrease Amount for Extended Enhanced Federal Medical Assistance Percentage"	\$0	\$53,195,115	\$0	\$2,153,476	(\$839)	(\$55,347,752)
ES-2 "Fee-for-Service Delay in FY 2010-11" (FY 2009-10 Payback Only) ¹	\$70,232,486	\$25,197,176	\$0	\$1,839,587	\$0	\$43,195,723
S-1 "Request for Medical Services Premiums"	\$179,606,234	(\$25,899,411)	\$0	\$113,198,132	(\$4,476)	\$92,311,989
S-1A "Request for Medical Services Premiums"	(\$9,889,064)	(\$9,130,201)	\$0	\$16,956,128	(\$182,563)	(\$17,532,428)
FY 2010-11 Estimated Total Expenditures	\$3,356,696,847	\$753,099,302	\$161,444,485	\$456,824,415	\$7,589,928	\$1,977,738,717
Total FY 2010-11 Requests For Reference Only	\$249,838,720	\$52,492,880	\$0	\$117,191,195	(\$5,315)	\$80,159,960
Percent Change	7.44%	6.97%	0.00%	25.65%	-0.07%	4.05%

This table shows the Department's total request for FY 2010-11 incorporating policy changes which have been implemented before November 1, 2010, specifically the payback of the FY 2009-10 payment delay and the changes in FMAP, but not the continuation of the payment delay in FY 2010-11 or the managed care delay submitted in October. The FY 2010-11 Request shown on this page does not match Column 4 of the Schedule 13, and is not the Department's incremental request for S-1. The Department has officially requested a reduction due to the change in the FMAP rates in ES-1, "Decrease Amount for Extended Enhanced Federal Medical Assistance Percentage", and requested repayment of the payment delay in ES-2, "Fee-for-Service Delay in FY 2010-11". This table reflects the Department's total need for Medical Services Premiums in FY 2010-11 prior to any new budget balancing actions.

(1) These amounts reflect the total of the FY 2009-10 payment delay for Medical Services Premiums only. Totals will not match the totals in the Department's budget balancing requests, including ES-2 and BRI-2, as these requests impact multiple lines in addition to Medical Services Premiums

Exhibit A - Summary of Request

Calculation of Fund Splits FY 2010-11							
Item	Total Request	General Fund and General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds	FMAP	Notes
Acute Care Services							
Base Acute	\$1,545,469,179	\$622,669,532	\$0	\$0	\$922,799,647	59.71%	
Breast and Cervical Cancer Program	\$10,477,993	\$0	\$2,567,804	\$1,099,493	\$6,810,696	65.00%	State fund sources vary; see page Exhibit F
Prenatal Costs for Optional Legal Immigrants	\$7,480,070	\$3,740,035	\$0	\$0	\$3,740,035	50.00%	Now fully Medicaid eligible; see Exhibit F
Family Planning	\$13,048,703	\$1,304,870	\$0	\$0	\$11,743,833	90.00%	RF: Transfer from DPHE
Home Health Telemedicine Services	\$123,270	\$0	\$49,665	\$0	\$73,605	59.71%	CF: Home Health Telemedicine Cash Fund
Indian Health Service	\$1,820,835	\$0	\$0	\$0	\$1,820,835	100.00%	
Affordable Care Act Drug Rebate Offset	(\$14,968,684)	\$0	\$0	\$0	(\$14,968,684)	0.00%	
Health Care Expansion Fund Split Adjustment	\$62,167,220	\$0	\$25,047,172	\$0	\$37,120,048	59.71%	CF: Health Care Expansion Fund
Hospital Provider Fee Fund Split Adjustment	\$59,202,543	\$0	\$29,601,272	\$0	\$29,601,271	50.00%	CF: Hospital Provider Fee Cash Fund
Acute Care Services Sub-Total	\$1,684,821,129	\$627,714,437	\$57,265,913	\$1,099,493	\$998,741,286		
Community Based Long Term Care Services							
Base Community Based Long Term Care	\$314,455,570	\$126,694,149	\$0	\$0	\$187,761,421	59.71%	
Children with Autism Waiver Services	\$1,757,250	\$0	\$707,996	\$0	\$1,049,254	59.71%	CF: Colorado Autism Treatment Fund
Health Care Expansion Fund Split Adjustment	\$38,035	\$0	\$15,324	\$0	\$22,711	59.71%	CF: Health Care Expansion Fund
Hospital Provider Fee Fund Split Adjustment	\$52,214	\$0	\$26,107	\$0	\$26,107	50.00%	CF: Hospital Provider Fee Cash Fund
Community Based Long Term Care Sub-Total	\$316,303,069	\$126,694,149	\$749,427	\$0	\$188,859,493		
Long Term Care and Insurance							
Base Long Term Care	\$575,053,652	\$231,689,116	\$0	\$0	\$343,364,536	59.71%	
Nursing Facility General Fund Cap	\$48,220,038	\$0	\$19,427,853	\$0	\$28,792,185	59.71%	CF: Medicaid Nursing Facility Cash Fund
Nursing Facility Supplemental Payments	\$25,822,635	\$0	\$10,403,940	\$0	\$15,418,695	59.71%	CF: Medicaid Nursing Facility Cash Fund
Class II Nursing Facilities Adjustment	\$1,369,142	\$1,369,142	\$0	\$0	\$0	0.00%	See Narrative for Details
PACE Reconciliations	\$6,014,310	\$2,734,707	\$0	\$0	\$3,279,603	54.53%	See Narrative for Details
Supplemental Medicare Insurance Benefit (SMIB)	\$118,056,526	\$61,663,285	\$0	\$0	\$56,393,241	59.71%*	Approximately 20% of total is state-only
Long Term Care and Insurance Sub-Total	\$774,536,303	\$297,456,250	\$29,831,793	\$0	\$447,248,260		
Service Management							
Base Service Management	\$32,544,045	\$16,272,022	\$0	\$0	\$16,272,023	50.00%	
Tobacco Tax Funded Disease Management	\$0	\$0	\$0	\$0	\$0	50.00%	RF: Transfer from DPHE
Coordinated Care for People with Disabilities Program	\$205,200	\$0	\$82,675	\$0	\$122,525	59.71%	CF: Coordinated Care for People with Disabilities Fund
Health Care Expansion Fund Split Adjustment	\$162,633	\$0	\$81,316	\$0	\$81,317	50.00%	CF: Health Care Expansion Fund
Hospital Provider Fee Fund Split Adjustment	\$223,260	\$0	\$111,630	\$0	\$111,630	50.00%	CF: Hospital Provider Fee Cash Fund
Service Management Sub-Total	\$33,135,138	\$16,272,022	\$275,621	\$0	\$16,587,495		
Health Care Expansion Fund Allocations Split Adjustment	\$0	(\$51,786,005)	\$51,786,005	\$0	\$0		See Exhibit J
FY 2010-11 Estimate of Total Expenditures for Medical Services to Clients	\$2,808,795,639	\$1,016,350,853	\$139,908,759	\$1,099,493	\$1,651,436,534		
Financing							
Upper Payment Limit Financing	\$13,432,681	(\$19,459,658)	\$13,432,681	\$0	\$19,459,658	Variable	CF: Certification of Public Expenditure
Department Recoveries Adjustment	\$0	(\$8,979,476)	\$22,287,109	\$0	(\$13,307,633)	59.71%	CF: Department Recoveries
Denver Health Outstationing	\$3,520,253	\$0	\$1,760,126	\$0	\$1,760,127	50.00%	CF: Certification of Public Expenditure
Hospital Provider Fee Supplemental Payments	\$455,348,204	\$0	\$183,459,791	\$0	\$271,888,413	59.71%	CF: Hospital Provider Fee Cash Fund
Physician Supplemental Payments	\$5,367,584	\$0	\$2,061,689	\$0	\$3,305,895	61.59%	CF: Certification of Public Expenditure
Cash Funds Financing ⁽¹⁾	\$0	(\$98,565,108)	\$92,074,673	\$6,490,435	\$0	59.71%	CF: Various, see narrative
Total Projected FY 2010-11 Expenditures⁽²⁾⁽³⁾	\$3,286,464,361	\$889,346,611	\$454,984,828	\$7,589,928	\$1,934,542,994		
<i>Definitions:</i> FMAP: Federal Medical Assistance Percentage DPHE: Department of Public Health and Environment							
(1) This line adjusts for transfers from cash funds to the General Fund as provided by for the special bills listed on page EA-1.							
(2) Of the General Fund total, \$161,444,485 is General Fund Exempt.							
(3) For FY 2010-11 the total projected expenditure is not the Total Revised Request on the Schedule 13, due to the presence of budget balancing requests submitted in August 2010. The total revised request is calculated on page EA-2							

Exhibit A - Summary of Request

Calculation of Fund Splits FY 2011-12							
Item	Total Request	General Fund and General Fund Exempt	Cash Funds	Reappropriated Funds	Federal Funds	FMAP	Notes
Acute Care Services							
Base Acute	\$1,618,751,658	\$809,375,829	\$0	\$0	\$809,375,829	50.00%	
Breast and Cervical Cancer Program	\$11,479,220	\$0	\$2,815,096	\$1,202,631	\$7,461,493	65.00%	State fund sources vary; see page Exhibit F
Prenatal Costs for Optional Legal Immigrants	\$8,061,271	\$4,030,635	\$0	\$0	\$4,030,636	50.00%	Now fully Medicaid eligible; see Exhibit F
Family Planning	\$15,395,595	\$1,349,209	\$0	\$190,350	\$13,856,036	90.00%	RF: Transfer from DPHE
Home Health Telemedicine Services	\$312,576	\$0	\$156,288	\$0	\$156,288	50.00%	CF: Home Health Telemedicine Cash Fund
Indian Health Service	\$1,905,049	\$0	\$0	\$0	\$1,905,049	100.00%	
Affordable Care Act Drug Rebate Offset	(\$18,344,032)	\$0	\$0	\$0	(\$18,344,032)	0.00%	
Health Care Expansion Fund Split Adjustment	\$68,229,243	\$0	\$34,114,622	\$0	\$34,114,621	50.00%	CF: Health Care Expansion Fund
Hospital Provider Fee Fund Split Adjustment	\$135,407,516	\$0	\$69,858,792	\$0	\$65,548,724	50.00%	CF: Hospital Provider Fee Cash Fund and Medicaid Buy-In Fund
Acute Care Services Sub-Total	\$1,841,198,096	\$814,755,673	\$106,944,798	\$1,392,981	\$918,104,644		
Community Based Long Term Care Services							
Base Community Based Long Term Care	\$334,933,231	\$167,466,615	\$0	\$0	\$167,466,616	50.00%	
Children with Autism Waiver Services	\$1,757,250	\$0	\$878,625	\$0	\$878,625	50.00%	CF: Colorado Autism Treatment Fund
Health Care Expansion Fund Split Adjustment	\$52,073	\$0	\$26,037	\$0	\$26,036	50.00%	CF: Health Care Expansion Fund
Hospital Provider Fee Fund Split Adjustment	\$8,186,837	\$0	\$4,700,660	\$0	\$3,486,177	50.00%	CF: Hospital Provider Fee Cash Fund and Medicaid Buy-In Fund
Community Based Long Term Care Sub-Total	\$344,929,391	\$167,466,615	\$5,605,322	\$0	\$171,857,454		
Long Term Care and Insurance							
Base Long Term Care	\$602,276,964	\$301,138,482	\$0	\$0	\$301,138,482	50.00%	
Nursing Facility General Fund Cap	\$32,923,098	\$0	\$16,461,549	\$0	\$16,461,549	50.00%	CF: Medicaid Nursing Facility Cash Fund
Nursing Facility Supplemental Payments	\$21,956,160	\$0	\$10,978,080	\$0	\$10,978,080	50.00%	CF: Medicaid Nursing Facility Cash Fund
Supplemental Medicare Insurance Benefit (SMIB)	\$128,727,508	\$77,236,505	\$0	\$0	\$51,491,003	50.00%*	Approximately 20% of total is state-only
Hospital Provider Fee Fund Split Adjustment	\$6,516,890	\$0	\$3,756,505	\$0	\$2,760,385	50.00%	CF: Hospital Provider Fee Cash Fund and Medicaid Buy-In Fund
Long Term Care and Insurance Sub-Total	\$792,400,620	\$378,374,987	\$31,196,134	\$0	\$382,829,499		
Service Management							
Base Service Management	\$43,751,672	\$21,875,836	\$0	\$0	\$21,875,836	50.00%	
Tobacco Tax Funded Disease Management	\$500,000	\$0	\$0	\$250,000	\$250,000	50.00%	RF: Transfer from DPHE
Coordinated Care for People with Disabilities Program	\$293,400	\$0	\$146,700	\$0	\$146,700	50.00%	CF: Coordinated Care for People with Disabilities Fund
Health Care Expansion Fund Split Adjustment	\$716,920	\$0	\$358,460	\$0	\$358,460	50.00%	CF: Health Care Expansion Fund
Hospital Provider Fee Fund Split Adjustment	\$2,075,908	\$0	\$1,096,732	\$0	\$979,176	50.00%	CF: Hospital Provider Fee Cash Fund and Medicaid Buy-In Fund
Service Management Sub-Total	\$47,337,900	\$21,875,836	\$1,601,892	\$250,000	\$23,610,172		
Health Care Expansion Fund Allocations Split Adjustment	\$0	(\$67,845,302)	\$67,845,302	\$0	\$0		See Exhibit J
FY 2011-12 Estimate of Total Expenditures for Medical Services to Clients	\$3,025,866,007	\$1,314,627,809	\$213,193,448	\$1,642,981	\$1,496,401,769		
Financing							
Upper Payment Limit Financing	\$3,395,239	(\$3,395,239)	\$3,395,239	\$0	\$3,395,239	Variable	CF: Certification of Public Expenditure
Department Recoveries Adjustment	\$0	(\$9,428,450)	\$23,401,465	\$0	(\$13,973,015)	59.71%	CF: Department Recoveries
Denver Health Outstationing	\$3,520,253	\$0	\$1,760,126	\$0	\$1,760,127	50.00%	CF: Certification of Public Expenditure
Hospital Provider Fee Supplemental Payments	\$502,848,939	\$0	\$251,424,469	\$0	\$251,424,470	50.00%	CF: Hospital Provider Fee Cash Fund
Hospital Provider Fee Financing	\$0	(\$50,000,000)	\$50,000,000	\$0	\$0	0.00%	CF: Hospital Provider Fee Cash Fund
Physician Supplemental Payments	\$5,367,584	\$0	\$2,473,785	\$0	\$2,893,799	53.91%	CF: Certification of Public Expenditure
Cash Funds Financing	\$0	(\$4,750,000)	\$3,000,000	\$1,750,000	\$0		CF: Various, see narrative
Total Projected FY 2011-12 Expenditures	\$3,540,998,022	\$1,247,054,120	\$548,648,532	\$3,392,981	\$1,741,902,389		
<i>Definitions: FMAP: Federal Medical Assistance Percentage DPHE: Department of Public Health and Environment</i>							
(1) This line adjusts for transfers from cash funds to the General Fund as provided by for the special bills listed on page EA-1.							
(2) Of the General Fund total, \$161,444,485 is General Fund Exempt.							