Exhibit F - ACUTE CARE - Cash-Based Actuals and Projections

Cash Based Actuals

ACUTE CARE	Adults 65 and Older (OAP-A) (4)	Disabled Adults 60 to 64 (OAP-B) (4)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2003-04	$135,749,025	$46,119,779	$412,299,443	$0	$182,825,434	$0	$0	$0	$2,668,859	$229,743,284	$42,169,663	$63,935,230	$55,128,983	$2,089,094	$1,172,728,792
FY 2004-05	$134,189,229	$46,642,619	$385,860,624	$0	$191,063,789	$0	$0	$0	$2,490,150	$299,544,670	$42,706,006	$42,027,702	$44,696,256	$1,893,780	$1,191,114,826
FY 2005-06	$112,419,226	$45,351,381	$387,591,606	$0	$198,695,066	$0	$0	$0	$6,809,762	$312,707,761	$44,927,120	$41,011,299	$55,307,093	$2,067,371	$1,206,887,685
FY 2006-07	$83,410,163	$44,481,575	$383,750,038	$0	$196,349,132	$7,480,884	$0	$0	$5,555,696	$327,210,370	$49,460,226	$48,460,189	$54,457,447	$2,748,118	$1,203,363,838
FY 2007-08	$91,223,938	$50,717,725	$450,621,054	$0	$187,505,340	$18,427,719	$0	$0	$7,089,560	$360,156,073	$58,954,606	$54,344,094	$53,633,572	$3,330,605	$1,336,004,286
FY 2008-09	$102,239,226	$56,004,946	$492,622,774	$0	$206,446,267	$30,913,086	$0	$0	$7,043,287	$428,647,150	$61,714,145	$60,515,451	$59,182,087	$3,886,476	$1,509,214,896
FY 2009-10 (DA)	$94,978,885	$54,197,977	$489,172,778	$0	$218,768,176	$40,898,817	$3,085,476	$0	$9,006,411	$462,761,448	$60,444,300	$68,066,557	$48,429,084	$3,328,831	$1,553,138,739
FY 2010-11 (DA)	$97,388,620	$61,036,898	$529,213,760	$0	$218,112,253	$56,117,509	$61,707,804	$0	$9,817,196	$497,319,012	$62,802,717	$67,507,543	$45,331,275	$5,066,688	$1,711,421,275
FY 2011-12	$94,396,992	$67,010,397	$555,792,836	$398,462	$237,144,108	$64,030,894	$83,020,177	$2,393,150	$10,272,697	$512,975,400	$59,325,794	$63,318,002	$41,938,165	$5,407,941	$1,797,425,015
Estimated FY 2012-13	$95,313,337	$72,331,716	$573,879,563	$9,556,491	$235,805,269	$71,601,311	$97,492,999	$93,845,030	$10,362,070	$523,008,727	$58,300,286	$68,177,699	$41,724,686	$6,485,324	$1,957,884,508
Estimated FY 2013-14	$98,123,735	$79,034,492	$601,675,760	$20,899,641	$252,596,208	$77,261,379	$107,371,751	$164,890,583	$11,064,208	$547,514,208	$59,103,684	$70,602,653	$44,860,136	$7,700,260	$2,142,698,698
Estimated FY 2014-15	$98,270,128	$83,694,454	$612,883,961	$29,529,182	$251,016,186	$77,149,615	$108,773,018	$167,676,937	$11,231,779	$549,792,535	$59,689,550	$72,218,922	$47,269,954	$8,947,233	$2,178,143,454

Percent Change in Cash Based Actuals

ACUTE CARE	Adults 65 and Older (OAP-A) (4)	Disabled Adults 60 to 64 (OAP-B) (4)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2004-05	-1.15%	1.13%	-6.41%	0.00%	4.51%	0.00%	0.00%	0.00%	-6.70%	30.38%	1.27%	-34.27%	-18.92%	-9.35%	1.57%
FY 2005-06	-16.22%	-2.77%	0.45%	0.00%	3.99%	0.00%	0.00%	0.00%	173.47%	4.39%	5.20%	-2.42%	23.74%	9.17%	1.32%
FY 2006-07	-25.80%	-1.92%	-0.99%	0.00%	-1.18%	0.00%	0.00%	0.00%	-18.42%	4.64%	10.09%	18.16%	-1.54%	32.93%	-0.29%
FY 2007-08	9.37%	14.02%	17.43%	0.00%	-4.50%	146.33%	0.00%	0.00%	27.61%	10.07%	19.20%	12.14%	-1.51%	21.20%	11.02%
FY 2008-09	12.07%	10.42%	9.32%	0.00%	10.10%	67.75%	0.00%	0.00%	-0.65%	19.02%	4.68%	11.36%	10.35%	16.69%	12.96%
FY 2009-10 (DA)	-7.10%	-3.23%	-0.70%	0.00%	5.97%	32.30%	0.00%	0.00%	27.87%	7.96%	-2.06%	12.48%	-18.17%	-14.35%	2.91%
FY 2010-11 (DA)	2.54%	12.62%	8.19%	0.00%	-0.30%	37.21%	1899.94%	0.00%	9.00%	7.47%	3.90%	-0.82%	-6.40%	52.21%	10.19%
FY 2011-12	-3.07%	9.79%	5.02%	0.00%	8.73%	14.10%	34.54%	0.00%	4.64%	3.15%	-5.54%	-6.21%	-7.49%	6.74%	5.03%
Estimated FY 2012-13	0.97%	7.94%	3.25%	2298.34%	-0.56%	11.82%	17.43%	3821.40%	0.87%	1.96%	-1.73%	7.68%	-0.51%	19.92%	8.93%
Estimated FY 2013-14	2.95%	9.27%	4.84%	118.70%	7.12%	7.90%	10.13%	75.71%	6.78%	4.69%	1.38%	3.56%	7.51%	18.73%	9.44%
Estimated FY 2014-15	0.15%	5.90%	1.86%	41.29%	-0.63%	-0.14%	1.31%	1.69%	1.51%	0.42%	0.99%	2.29%	5.37%	16.19%	1.65%

Per Capita Cost

ACUTE CARE	Adults 65 and Older (OAP-A) (4)	Disabled Adults 60 to 64 (OAP-B) (4)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2003-04	$3,954.35	$8,312.87	$8,811.89	$0.00	$3,843.94	$0.00	$0.00	$0.00	$25,417.70	$1,176.49	$2,827.52	$7,613.15	$11,501.98	$212.26	$3,190.59
FY 2004-05	$3,750.40	$7,668.96	$8,050.67	$0.00	$3,343.78	$0.00	$0.00	$0.00	$28,622.42	$1,346.44	$2,703.77	$7,023.35	$8,678.88	$197.17	$2,933.61
FY 2005-06	$3,104.90	$7,506.02	$8,099.29	$0.00	$3,374.29	$0.00	$0.00	$0.00	$36,222.14	$1,460.17	$2,729.47	$8,011.58	$8,903.27	$186.38	$3,000.58
FY 2006-07	$2,324.18	$7,341.41	$7,863.89	$0.00	$3,873.76	$1,449.22	$0.00	$0.00	$24,367.09	$1,593.12	$2,957.44	$9,351.64	$10,470.57	$212.90	$3,068.02
FY 2007-08	$2,514.16	$8,252.15	$9,024.51	$0.00	$4,208.40	$2,066.35	$0.00	$0.00	$26,257.63	$1,765.28	$3,439.39	$8,642.51	$12,797.32	$234.32	$3,408.50
FY 2008-09	$2,717.76	$8,686.98	$9,592.50	$0.00	$4,200.59	$2,428.94	$0.00	$0.00	$22,218.57	$1,823.03	$3,422.29	$8,674.81	$14,843.76	$257.81	$3,455.07
FY 2009-10 (DA)	$2,467.82	$7,688.75	$9,183.93	$0.00	$3,794.04	$2,380.88	$952.90	$0.00	$21,191.56	$1,678.67	$3,288.41	$8,693.05	$13,113.75	$209.11	$3,113.77
FY 2010-11 (DA)	$2,502.21	$7,858.49	$9,402.39	$0.00	$3,577.96	$2,784.44	$2,271.43	$0.00	$18,488.13	$1,644.52	$3,414.49	$8,580.01	$14,108.71	$296.47	$3,051.97
FY 2011-12	$2,375.36	$7,993.61	$9,351.43	$7,662.73	$3,452.43	$2,609.78	$2,341.17	$2,110.36	$17,207.20	$1,532.95	$3,289.66	$8,298.56	$15,140.13	$286.57	$2,899.25
Estimated FY 2012-13	$2,326.30	$7,966.93	$9,296.91	$10,737.63	$3,407.74	$2,493.34	$2,369.84	$8,550.80	$16,659.28	$1,434.86	$3,251.91	$8,615.37	$16,147.32	$305.26	$2,889.90
Estimated FY 2013-14	$2,329.68	$8,109.43	$9,407.65	$10,840.06	$3,449.97	$2,504.83	$2,375.74	$8,706.86	$16,612.92	$1,356.41	$3,287.37	$8,435.71	$17,682.36	$330.61	$2,886.04
Estimated FY 2014-15	$2,268.94	$8,049.87	$9,253.45	$10,848.34	$3,364.78	$2,430.75	$2,315.90	$8,710.49	$16,254.38	$1,295.88	$3,222.46	$8,254.53	$18,661.65	$351.92	$2,809.05

Percent Change in Per Capita Cost

ACUTE CARE	Adults 65 and Older (OAP-A) (4)	Disabled Adults 60 to 64 (OAP-B) (4)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2004-05	-5.16%	-7.75%	-8.64%	0.00%	-13.01%	0.00%	0.00%	0.00%	12.61%	14.45%	-4.38%	-7.75%	-24.54%	-7.11%	-8.05%
FY 2005-06	-17.21%	-2.12%	0.60%	0.00%	**0.91%**	0.00%	0.00%	0.00%	26.55%	8.45%	0.95%	14.07%	2.59%	-5.47%	2.28%
FY 2006-07	-25.14%	-2.19%	-2.91%	0.00%	14.80%	0.00%	0.00%	0.00%	-32.73%	9.11%	8.35%	16.73%	17.60%	14.23%	2.25%
FY 2007-08	8.17%	12.41%	14.76%	0.00%	8.64%	42.58%	0.00%	0.00%	7.76%	10.81%	16.30%	-7.58%	22.22%	10.06%	11.10%
FY 2008-09	8.10%	5.27%	6.29%	0.00%	-0.19%	17.55%	0.00%	0.00%	-15.38%	3.27%	-0.50%	0.37%	15.99%	10.02%	1.37%
FY 2009-10 (DA)	-9.20%	-11.49%	-4.26%	0.00%	-9.68%	-1.98%	0.00%	0.00%	-4.62%	-7.92%	-3.91%	0.21%	-11.65%	-18.89%	-9.88%
FY 2010-11 (DA)	1.39%	2.21%	2.38%	0.00%	-5.70%	16.95%	138.37%	0.00%	-12.76%	-2.03%	3.83%	-1.30%	7.59%	41.78%	-1.98%
FY 2011-12	-5.07%	1.72%	-0.54%	0.00%	-3.51%	-6.27%	3.07%	0.00%	-6.93%	-6.78%	-3.66%	-3.28%	7.31%	-3.34%	-5.00%
Estimated FY 2012-13	-2.07%	-0.33%	-0.58%	40.13%	-1.29%	-4.46%	1.22%	305.18%	-3.18%	-6.40%	-1.15%	3.82%	6.65%	6.52%	-0.32%
Estimated FY 2013-14	0.15%	1.79%	1.19%	0.95%	1.24%	0.46%	0.25%	1.83%	-0.28%	-5.47%	1.09%	-2.09%	9.51%	8.30%	-0.13%
Estimated FY 2014-15	-2.61%	-0.73%	-1.64%	0.08%	-2.47%	-2.96%	-2.52%	0.04%	-2.16%	-4.46%	-1.97%	-2.15%	5.54%	6.45%	-2.67%

Per Capita Trends

Per Capita Trends	Adults 65 and Older (OAP-A) (4)	Disabled Adults 60 to 64 (OAP-B) (4)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
Actual FY 2011-12 Per Capita	$2,375.36	$7,993.61	$9,351.43	$7,662.73	$3,452.43	$2,609.78	$2,341.17	$2,110.36	$17,207.20	$1,532.95	$3,289.66	$8,298.56	$15,140.13	$286.57	$2,899.25
Average of FY 2005-06 through FY 2009-10[a]	-	-	-	-	2.90%	11.63%	-	-	-3.68%	4.74%	4.24%	4.76%	9.35%	1.99%	1.42%
Average of FY 2006-07 through FY 2009-10	-4.52%	1.00%	3.47%	0.00%	3.39%	14.54%	-	-	-11.24%	3.82%	5.06%	2.43%	**11.04%**	3.86%	1.21%
Average of FY 2007-08 through FY 2009-10	2.36%	2.06%	5.60%	0.00%	-0.41%	19.38%	-	0.00%	-4.08%	2.05%	3.96%	-2.33%	8.85%	0.40%	0.86%
Average of FY 2008-09 through FY 2009-10	-0.55%	-3.11%	1.02%	0.00%	-4.94%	7.79%	-	0.00%	-10.00%	-2.33%	-2.21%	0.29%	2.17%	-4.44%	-4.26%
Average of FY 2006-07 through FY 2010-11	-3.34%	1.24%	3.25%	0.00%	1.57%	15.02%	27.67%	3.00	-11.55%	2.65%	4.81%	1.69%	10.35%	11.44%	0.57%
Average of FY 2007-08 through FY 2010-11	2.12%	2.10%	4.79%	0.00%	-1.73%	18.78%	34.59%	0.00%	-6.25%	1.03%	3.93%	**-2.08%**	8.54%	10.74%	0.15%
Average of FY 2008-09 through FY 2010-11	0.10%	-1.34%	1.47%	0.00%	-5.19%	10.84%	46.12%	0.00%	-10.92%	-2.23%	-0.19%	-0.24%	3.98%	10.97%	-3.50%
Average of FY 2009-10 through FY 2010-11	-3.91%	-4.64%	-0.94%	0.00%	-7.69%	7.49%	69.19%	0.00%	-8.69%	-4.98%	-0.04%	-0.55%	-2.03%	11.45%	-5.93%
Average of FY 2007-08 through FY 2011-12	0.68%	2.02%	3.73%	0.00%	-2.09%	13.77%	28.29%	0.00%	-6.39%	-0.53%	2.41%	-2.32%	8.29%	7.93%	-0.88%
Average of FY 2008-09 through FY 2011-12	-1.20%	-0.57%	0.97%	0.00%	-4.77%	6.56%	35.36%	0.00%	-9.92%	-3.37%	-1.06%	-1.00%	4.81%	**7.39%**	-3.87%
Average of FY 2009-10 through FY 2011-12	-4.29%	-2.52%	-0.81%	0.00%	-6.30%	2.90%	47.15%	0.00%	-8.10%	-5.58%	-1.25%	-1.46%	1.08%	6.52%	-5.62%
Average of FY 2010-11 through FY 2011-12	-1.84%	1.97%	0.92%	0.00%	-4.61%	5.34%	70.72%	0.00%	-9.85%	-4.41%	0.09%	-2.29%	7.45%	19.22%	-3.49%

Exhibit F - ACUTE CARE - Cash-Based Actuals and Projections

Current Year Projection															
ACUTE CARE	**Adults 65 and Older (OAP-A) [4]**	**Disabled Adults 60 to 64 (OAP-B) [4]**	**Disabled Individuals to 59 (AND/AB)**	**Disabled Buy-In**	**Categorically Eligible Low-Income Adults (AFDC-A)**	**Expansion Adults to 60%**	**Expansion Adults to 100%**	**Adults without Dependent Children (AwDC)**	**Breast & Cervical Cancer Program**	**Eligible Children (AFDC-C/BC)**	**Foster Care**	**Baby Care Program-Adults**	**Non-Citizens**	**Partial Dual Eligibles**	**TOTAL**
Percentage Selected to Modify Per Capita[1]	0.70%	2.06%	0.60%	41.19%	0.91%	-1.78%	-1.78%	313.35%	-2.97%	-3.39%	1.48%	0.29%	7.45%	7.39%	
Estimated FY 2012-13 Base Per Capita	$2,391.99	$8,158.28	$9,407.54	$10,818.67	$3,483.85	$2,563.33	$2,435.16	$8,723.12	$16,696.96	$1,480.98	$3,338.35	$8,322.63	$16,268.07	$307.75	$2,948.38
Estimated FY 2012-13 Eligibles	40,972	9,079	61,728	890	69,197	28,717	41,139	10,975	622	364,502	17,928	7,914	2,584	21,245	677,492
Estimated FY 2012-13 Base Expenditures	$98,004,614	$74,069,024	$580,708,629	$9,628,616	$241,071,968	$73,611,148	$100,180,047	$95,736,242	$10,385,509	$539,820,172	$59,849,939	$65,861,133	$42,036,693	$6,538,149	$1,997,501,883
Bottom Line Impacts															
SB 10-117 OTC MEDS	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Physicians to 100% of Medicare: 100% Federally Funded Portion	$30,987	$60,433	$456,197	$9,498	$410,540	$113,077	$142,238	$77,563	$0	$909,290	$80,937	$138,379	$46,278	$2	$2,475,419
Physicians to 100% of Medicare: GF and FF Portion Due to Rate Decreases Since 2009	$8,435	$16,452	$124,196	$2,586	$111,767	$30,784	$38,723	$21,116	$0	$247,547	$22,035	$37,673	$12,599	$1	$673,914
Managed Care Organization Reconciliation Annualization	$237,044	$316,796	$1,708,875	$7,135	$723,357	$260,784	$367,502	$0	$0	$1,680,279	$33,170	$51,940	$0	$0	$5,386,882
Accountable Care Collaborative Savings	($256,074)	($188,202)	($1,689,240)	($24,909)	($2,851,937)	($1,235,357)	($1,744,370)	($1,300,697)	$0	($13,027,470)	($615,684)	($152,637)	$0	$0	($23,086,577)
FY 2010-11 BRI-1: "Client Overutilization"	($16,993)	($12,025)	($91,188)	($1,030)	($38,828)	($11,554)	($14,045)	($9,122)	$0	($85,437)	($9,379)	($11,568)	($6,952)	($748)	($308,869)
FY 2011-12 BRI-5: "State Allowable Cost Expansion"	($2,451)	($9,610)	($65,246)	($611)	($20,941)	($8,250)	($10,310)	($6,003)	($994)	($31,406)	($9,578)	($1,266)	$0	$0	($166,666)
FY 2011-12 BRI-5: "Reduce Rates for Diabetes Supplies"	($28,760)	($9,202)	($79,013)	($285)	($5,202)	($1,907)	($2,199)	($1,715)	$0	($15,073)	($6,438)	($228)	($10)	($34)	($150,066)
FY 2011-12 BRI-5: "Reduce Payment for Uncomplicated C-Section"	$0	$0	$0	$0	($317,796)	($54,878)	($73,429)	$0	$0	$0	$0	($160,474)	($204,968)	$0	($811,545)
FY 2011-12 BRI-5: "Reduce Payments for Renal Dialysis"	($20,701)	($8,979)	($52,786)	($1,104)	($25,950)	($5,511)	($5,548)	($7,934)	$0	($35,818)	($2,549)	$0	($16,575)	$0	($183,455)
FY 2011-12 BRI-5: "Deny Payment of Hospital Readmissions 48 hrs"	($13,317)	($15,667)	($92,102)	($1,926)	($45,278)	($9,616)	($9,680)	($13,843)	$0	($62,496)	($4,447)	($22,801)	($28,921)	$0	($320,094)
FY 2011-12 BRI-5: "Prior Authorize Certain Radiology"	($39,960)	($80,093)	($624,661)	($9,621)	($1,023,035)	($304,088)	($366,220)	($160,126)	$0	($626,254)	($132,208)	($342,118)	($12,023)	($2)	($3,720,409)
FY 2011-12 BRI-5: Limit Acute Home Health Services to 60 days	($40,298)	($14,855)	($204,290)	($189)	($891)	($252)	($297)	($308)	$0	($6,759)	($17,963)	($50)	$0	($399)	($286,551)
FY 2011-12 BRI-5: "HMO Impact to Rates"	($3,606)	($4,820)	($26,003)	($109)	($11,007)	($3,968)	($5,592)	$0	$0	($25,568)	($505)	($790)	$0	$0	($81,968)
FY 2011-12 BA-9: "0.75% Provider Rate Reduction"	($145,327)	($113,064)	($857,356)	($9,681)	($365,062)	($108,629)	($132,054)	($85,766)	($14,463)	($803,284)	($88,182)	($108,762)	($65,360)	($7,029)	($2,904,019)
FY 2011-12 BA-9: "Limit Fluoride Application Benefit"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($6,101)	$0	$0	$0	$0	($6,101)
FY 2011-12 BA-9: "Limit Dental Prophylaxis Benefit"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($31,892)	$0	$0	$0	$0	($31,892)
FY 2011-12 BA-9: "Limit Oral Hygiene Instruction"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($835,251)	$0	$0	$0	$0	($835,251)
FY 2011-12 BA-9: "Limit Physical and Occupational Therapy"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
FY 2011-12 BA-9: "Home Health Billing Changes"	($89,557)	($33,013)	($453,997)	($421)	($1,980)	($560)	($659)	($685)	$0	($15,021)	($39,919)	($111)	$0	($886)	($636,809)
Estimated Impact of Increasing PACE Enrollmen	($2,017,937)	($1,029,921)	($707,303)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	($3,755,160)
Annualization of HB 10-1005 Telemedicine	$25,642	$9,453	$129,992	$120	$567	$160	$189	$196	$0	$4,301	$11,430	$32	$0	$254	$182,336
SB 11-177: "Sunset of Pregnancy Prevention Program"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($46,330)	($5,610)	$0	$0	$0	($51,940)
Annualization of SB 10-167: "Colorado False Claims Act - NCCI"	($10,494)	($8,164)	($61,910)	($699)	($26,361)	($7,844)	($9,536)	($6,193)	($1,044)	($58,005)	($6,368)	($7,854)	($4,720)	($508)	($209,700)
Annualization of SB 10-167: "Colorado False Claims Act - HIBI"	($58,938)	($45,854)	($347,706)	($3,926)	($148,053)	($44,055)	($53,555)	($34,783)	($5,865)	($325,777)	($35,763)	($44,109)	($26,507)	($2,851)	($1,177,742)
Annualization of SB 10-167: "Colorado False Claims Act - PARIS"	($10,780)	($8,386)	($63,594)	($718)	($27,078)	($8,058)	($9,795)	($6,362)	($1,073)	($59,583)	($6,541)	($8,067)	($4,848)	($521)	($215,404)
Annualization of SB 10-167: "Colorado False Claims Act - RX COB"	($6,653)	($18,566)	($126,052)	($1,181)	($40,458)	($15,938)	($19,919)	($11,598)	$0	($60,674)	($18,505)	($2,445)	$0	($1)	($321,990)
Annualization of FY 2010-11 BRI-1: "Prevention and Benefits for Enhanced Value (P-BEV) and BA#12 Evidence Guided Utilization Review (EGUR)"	($7,900)	($22,043)	($149,661)	($1,402)	($48,035)	($18,924)	($23,649)	($13,770)	$0	($72,038)	($21,971)	($2,903)	$0	($1)	($382,297)
Annualization of FY 2010-11 BRI-2: "Coordinated Payment and Payment Reform"	($118,924)	($20,461)	($85,023)	($572)	($1,189)	($2,330)	($5,906)	($66)	$0	($82)	($27)	($298)	$0	($40,122)	($275,000)
Annualization of FY 2009-10 BA-33: "Prior Authorization of Anti-Convulsants"	($1,239)	($3,460)	($23,489)	($220)	($7,539)	($2,970)	($3,712)	($2,161)	$0	($11,306)	($3,448)	($456)	$0	$0	($60,000)
Annualization of FY 2009-10 BRI-1: "Pharmacy Efficiencies - Auto PA"	($25,155)	($70,190)	($476,551)	($4,464)	($152,953)	($60,256)	($75,304)	($43,848)	$0	($229,384)	($69,959)	($9,244)	$0	($2)	($1,217,310)
ACA 4107 Smoking Cessation Counseling for Pregnant Women	$0	$0	($3,091)	$0	($29,986)	($9,773)	($14,823)	$0	$0	($24,929)	($8,953)	($4,421)	$0	$0	($95,976)
Community Choice Transitions	$3,433	$1,265	$17,400	$16	$76	$21	$25	$26	$0	$576	$1,530	$4	$0	$34	$24,406
FY 2012-13 R-6: "Preterm Labor Prevention"	$0	$0	($33,312)	$0	($323,165)	($105,325)	($159,750)	$0	$0	($268,664)	($96,488)	($47,647)	$0	$0	($1,034,351)
FY 2012-13 R-6: "Synagis Prior Authorization Review"	($4,309)	($12,023)	($81,631)	($765)	($26,200)	($10,322)	($12,899)	($7,511)	$0	($39,292)	($11,984)	($1,583)	$0	$0	($208,519)
FY 2012-13 R-6: "Expansion of Physician Administered Drug Rebate Program"	($14,045)	($39,189)	($266,071)	($2,492)	($85,398)	($33,643)	($42,044)	($24,481)	$0	($128,071)	($39,060)	($5,161)	$0	($1)	($679,656)
FY 2012-13 R-6: "Reimbursement Rate Alignment for Developmental Screenings"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($433,537)	($38,590)	$0	$0	$0	($472,127)
FY 2012-13 R-6: "Physician Administered Drug Pricing and Unit Limits"	($1,182)	($3,296)	($22,380)	($210)	($7,183)	($2,830)	($3,536)	($2,059)	$0	($10,772)	($3,285)	($434)	$0	$0	($57,167)
FY 2012-13 R-6: "Public Transportation Utilization"	$84,980	$40,088	$206,436	$1,175	$13,491	$4,760	$3,741	$5,490	$0	$38,801	$4,008	$3,054	$0	$0	$406,024
FY 2012-13 R-6: "Seroquel Restrictions"	($25,561)	($71,323)	($484,245)	($4,536)	($155,422)	($61,229)	($76,520)	($44,556)	$0	($233,087)	($71,088)	($9,393)	$0	($2)	($1,236,962)
FY 2012-13 R-6: "Dental Efficiency"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
FY 2012-13 R-6: "Augmentative Communication Devices"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
FY 2012-13 R-6: "DME Preferred Provider"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
FY 2012-13 R-6: "Pharmacy Rate Methodology Transition"	($120,546)	($336,350)	($2,283,628)	($21,391)	($732,948)	($288,747)	($360,855)	($210,118)	$0	($1,099,203)	($335,242)	($44,296)	$0	($9)	($5,833,333)
FY 2012-13 R-5: "FQHC/RHC Gainsharing"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
FY 2012-13 R-5: "BHO Gainsharing"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
SB 12-060 "Improve Medicaid Fraud Prosecution"	($1,091)	($3,039)	($20,633)	($193)	($6,622)	($2,609)	($3,260)	($1,898)	$0	($9,931)	($3,029)	($400)	$0	$0	($52,705)
Presumptive Eligibility Settlemen	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$3,075,000	$0	$0	$3,075,000
SB 11-008: "Aligning Medicaid Eligibility for Children"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($973,744)	$0	$0	$0	$0	($973,744)
Total Bottom Line Impacts	($2,691,277)	($1,737,308)	($6,829,066)	($72,125)	($5,266,699)	($2,009,837)	($2,687,048)	($1,891,212)	($23,439)	($16,811,445)	($1,549,653)	$2,316,566	($312,007)	($52,825)	($39,617,375)
Estimated FY 2012-13 Expenditures	**$95,313,337**	**$72,331,716**	**$573,879,563**	**$9,556,491**	**$235,805,269**	**$71,601,311**	**$97,492,999**	**$93,845,030**	**$10,362,070**	**$523,008,727**	**$58,300,286**	**$68,177,699**	**$41,724,686**	**$6,485,324**	**$1,957,884,508**
Estimated FY 2012-13 Per Capita	$2,326.30	$7,966.93	$9,296.91	$10,737.63	$3,407.74	$2,493.34	$2,369.84	$8,550.80	$16,659.28	$1,434.86	$3,251.91	$8,615.37	$16,147.32	$305.26	$2,889.90
% Change over FY 2011-12 Per Capita	-2.07%	-0.33%	-0.58%	40.13%	-1.29%	-4.46%	1.22%	305.18%	-3.18%	-6.40%	-1.15%	3.82%	6.65%	6.52%	-0.32%

Exhibit F - ACUTE CARE - Cash-Based Actuals and Projections

	Request Year Projection														
ACUTE CARE	**Adults 65 and Older (OAP-A) (4)**	**Disabled Adults 60 to 64 (OAP-B) (4)**	**Disabled Individuals to 59 (AND/AB)**	**Disabled Buy-In**	**Categorically Eligible Low-Income Adults (AFDC-A)**	**Expansion Adults to 60%**	**Expansion Adults to 100%**	**Adults without Dependent Children (AwDC)**	**Breast & Cervical Cancer Program**	**Eligible Children (AFDC-C/BC)**	**Foster Care**	**Baby Care Program-Adults**	**Non-Citizens**	**Partial Dual Eligibles**	**TOTAL**
Percentage Selected to Modify Per Capita(2)	0.70%	2.06%	0.60%	0.60%	0.91%	0.91%	0.91%	1.38%	-1.48%	-3.39%	1.48%	0.29%	7.45%	7.39%	
Estimated FY 2013-14 Base Per Capita	$2,342.59	$8,131.04	$9,352.69	$10,802.06	$3,438.75	$2,516.03	$2,390.23	$8,669.02	$16,412.28	$1,386.22	$3,300.04	$8,640.35	$17,350.30	$327.82	$2,898.92
Estimated FY 2013-14 Eligibles	42,119	9,746	63,956	1,928	73,217	30,845	45,195	18,938	666	403,649	17,979	8,370	2,537	23,291	742,436
Estimated FY 2013-14 Base Expenditure	$98,667,548	$79,245,116	$598,160,642	$20,826,372	$251,774,959	$77,606,998	$108,026,451	$164,173,901	$10,930,578	$559,546,317	$59,331,419	$72,315,409	$44,017,711	$7,635,256	$2,152,258,677
Bottom Line Impacts															
SB 10-117: "OTC Medications"	($3,096)	($8,635)	($58,626)	($549)	($18,816)	($7,413)	($9,264)	($5,394)	$0	($28,219)	($8,606)	($1,137)	$0	$0	($149,755)
Physicians to 100% of Medicare: 100% Federally Funded Portion	$130,151	$253,838	$1,916,174	$39,896	$1,724,401	$474,961	$597,444	$325,787	$0	$3,819,308	$339,963	$581,237	$194,383	$9	$10,397,552
Physicians to 100% of Medicare: GF and FF Portion Due to Rate Decreases Since 2009	$32,055	$62,519	$471,946	$9,826	$424,713	$116,981	$147,148	$80,240	$0	$940,679	$83,732	$143,156	$47,876	$2	$2,560,873
Accountable Care Collaborative Savings	($257,848)	($194,303)	($1,762,612)	($22,551)	($2,986,841)	($1,306,676)	($1,824,538)	$23,027	$0	($14,457,388)	($802,713)	($160,902)	$0	$0	($23,753,345)
Estimated Impact of Increasing PACE Enrollmen	($1,464,808)	($715,001)	($500,334)												($2,680,144)
Annualization of SB 10-167: "Colorado False Claims Act - RX COB"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Annualization of SB 10-167: "Colorado False Claims Act - HIBI"	($220,647)	($171,663)	($1,301,705)	($14,698)	($554,265)	($164,929)	($200,494)	($130,217)	($21,958)	($1,219,608)	($133,885)	($165,131)	($99,235)	($10,671)	($4,409,106)
Annualization of SB 10-167: Colorado False Claims Act NCCI	($31,482)	($24,493)	($185,730)	($2,097)	($79,084)	($23,532)	($28,607)	($18,580)	($3,133)	($174,016)	($19,103)	($23,561)	($14,159)	($1,523)	($629,100)
Community Choice Transitions	$18,019	$6,643	$91,347	$85	$398	$113	$133	$138	$0	$3,022	$8,032	$22	$0	$178	$128,130
FY 2010-11 BRI-1: "Client Overutilization"	($39,501)	($30,732)	($233,035)	($2,631)	($99,226)	($29,526)	($35,893)	($23,312)	($3,931)	($218,338)	($23,969)	($29,562)	($17,765)	($1,910)	($789,331)
FY 2011-12 BA-9: "Limit Physical and Occupational Therapy"	($7,154)	($14,449)	($118,571)	($2,597)	($106,449)	($35,481)	($43,848)	($30,681)	$0	($167,503)	($12,439)	($12,185)	($3,710)	$0	($555,067)
FY 2012-13 R-6: "Dental Efficiency"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($1,449,199)	$0	$0	$0	$0	($1,449,199)
FY 2012-13 R-6: "Augmentative Communication Devices"	($94,293)	($30,168)	($259,048)	($934)	($17,056)	($6,253)	($7,210)	($5,623)	$0	($49,417)	($21,109)	($746)	($31)	($112)	($492,000)
FY 2012-13 R-6: "DME Preferred Provider"	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
FY 2012-13 R-6: "Pharmacy Rate Methodology Transition"	($168,761)	($470,890)	($3,197,080)	($29,948)	($1,026,128)	($404,246)	($505,198)	($294,165)	$0	($1,538,884)	($469,339)	($62,015)	$0	($13)	($8,166,667)
FY 2012-13 R-5: "FQHC/RHC Gainsharing"	($28,279)	($26,108)	($183,541)	($1,854)	($287,257)	($79,363)	($102,102)	($94,915)	$0	($1,184,080)	($41,678)	($114,470)	$0	$0	($2,143,647)
FY 2012-13 R-5: "BHO Gainsharing"	($42,555)	($118,743)	($806,198)	($7,552)	($258,756)	($101,938)	($127,394)	($74,179)	$0	($388,056)	($118,352)	($15,638)	$0	($3)	($2,059,364)
Presumptive Eligibility Settlemen	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	($3,075,000)	$0	$0	($3,075,000)
53 Pay Periods in FY 2013-14	$1,634,386	$1,271,561	$9,642,131	$108,873	$4,105,615	$1,221,683	$1,485,123	$964,556	$162,652	$9,034,016	$991,731	$1,223,176	$735,066	$79,047	$32,659,616
SB 11-008: "Aligning Medicaid Eligibility for Children"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($4,954,426)	$0	$0	$0	$0	($4,954,426)
Total Bottom Line Impacts	($543,813)	($210,624)	$3,515,118	$73,269	$821,249	($345,619)	($654,700)	$716,682	$133,630	($12,032,109)	($227,735)	($1,712,756)	$842,425	$65,004	($9,559,979)
Estimated FY 2013-14 Expenditure	**$98,123,735**	**$79,034,492**	**$601,675,760**	**$20,899,641**	**$252,596,208**	**$77,261,379**	**$107,371,751**	**$164,890,583**	**$11,064,208**	**$547,514,208**	**$59,103,684**	**$70,602,653**	**$44,860,136**	**$7,700,260**	**$2,142,698,698**
Estimated FY 2013-14 Per Capita	$2,329.68	$8,109.43	$9,407.65	$10,840.06	$3,449.97	$2,504.83	$2,375.74	$8,706.86	$16,612.92	$1,356.41	$3,287.37	$8,435.71	$17,682.36	$330.61	$2,886.04
% Change over FY 2012-13 Per Capita	0.15%	1.79%	1.19%	0.95%	1.24%	0.46%	0.25%	1.83%	-0.28%	-5.47%	1.09%	-2.09%	9.51%	8.30%	-0.13%

Exhibit F - ACUTE CARE - Cash-Based Actuals and Projections

	Out Year Projection														
ACUTE CARE	**Adults 65 and Older (OAP-A) (4)**	**Disabled Adults 60 to 64 (OAP-B) (4)**	**Disabled Individuals to 59 (AND/AB)**	**Disabled Buy-In**	**Categorically Eligible Low-Income Adults (AFDC-A)**	**Expansion Adults to 60%**	**Expansion Adults to 100%**	**Adults without Dependent Children (AwDC)**	**Breast & Cervical Cancer Program**	**Eligible Children (AFDC-C/BC)**	**Foster Care**	**Baby Care Program-Adults**	**Non-Citizens**	**Partial Dual Eligibles**	**TOTAL**
Percentage Selected to Modify Per Capita(3)	0.70%	2.06%	0.60%	0.60%	0.91%	0.91%	0.91%	0.73%	-0.74%	0.00%	1.48%	0.29%	7.45%	7.39%	
Estimated FY 2014-15 Base Per Capita	$2,345.99	$8,276.48	$9,464.10	$10,905.10	$3,481.36	$2,527.62	$2,401.24	$8,770.45	$16,489.77	$1,356.41	$3,336.02	$8,460.17	$18,999.70	$355.04	$2,895.99
Estimated FY 2014-15 Eligibles	43,311	10,397	66,233	2,722	74,601	31,739	46,968	19,250	691	424,262	18,523	8,749	2,533	25,424	775,403
Estimated FY 2014-15 Base Expenditure	$101,607,173	$86,050,563	$626,835,735	$29,683,682	$259,712,937	$80,224,131	$112,781,393	$168,831,163	$11,394,431	$575,472,541	$61,793,098	$74,018,027	$48,126,240	$9,026,537	$2,245,557,651
Bottom Line Impacts															
Increased PACE Enrollment	($1,057,057)	($614,697)	($370,503)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	($2,042,258)
Physicians to 100% of Medicare: 100% Federally Funded Portion	($65,074)	($126,919)	($958,087)	($19,948)	($862,201)	($237,481)	($298,722)	($162,894)	$0	($1,909,654)	($169,982)	($290,618)	($97,192)	($4)	($5,198,776)
Physicians to 100% of Medicare: GF and FF Portion Due to Rate Decreases Since 2009	($16,027)	($31,260)	($235,973)	($4,913)	($212,356)	($58,491)	($73,574)	($40,120)	$0	($470,340)	($41,866)	($71,578)	($23,938)	($1)	($1,280,437)
Accountable Care Collaborative Savings	($299,059)	($227,096)	($2,032,453)	($18,099)	($3,467,430)	($1,538,829)	($2,130,166)	$29,543	$0	($12,278,570)	($842,133)	($211,584)	$0	$0	($23,015,877)
FY 2012-13 R-6: "DME Preferred Provider"	($272,590)	($87,211)	($748,876)	($2,701)	($49,307)	($18,077)	($20,843)	($16,254)	$0	($142,859)	($61,023)	($2,158)	($90)	($323)	($1,422,312)
Community Choice Transitions	$7,149	$2,636	$36,249	$34	$158	$45	$53	$55	$0	$1,199	$3,187	$9	$0	$71	$50,845
53 Pay Periods in FY 2013-14	($1,634,386)	($1,271,561)	($9,642,131)	($108,873)	($4,105,615)	($1,221,683)	($1,485,123)	($964,556)	($162,652)	($9,034,016)	($991,731)	($1,223,176)	($735,066)	($79,047)	($32,659,616)
SB 11-008: "Aligning Medicaid Eligibility for Children"	$0	$0	$0	$0	$0	$0	$0	$0	$0	($1,845,766)	$0	$0	$0	$0	($1,845,766)
Total Bottom Line Impacts	($3,337,045)	($2,356,109)	($13,951,774)	($154,500)	($8,696,751)	($3,074,516)	($4,008,375)	($1,154,226)	($162,652)	($25,680,006)	($2,103,548)	($1,799,105)	($856,286)	($79,304)	($67,414,197)
Estimated FY 2014-15 Expenditure	**$98,270,128**	**$83,694,454**	**$612,883,961**	**$29,529,182**	**$251,016,186**	**$77,149,615**	**$108,773,018**	**$167,676,937**	**$11,231,779**	**$549,792,535**	**$59,689,550**	**$72,218,922**	**$47,269,954**	**$8,947,233**	**$2,178,143,454**
Estimated FY 2014-15 Per Capita	$2,268.94	$8,049.87	$9,253.45	$10,848.34	$3,364.78	$2,430.75	$2,315.90	$8,710.49	$16,254.38	$1,295.88	$3,222.46	$8,254.53	$18,661.65	$351.92	$2,809.05
% Change over FY 2013-14 Per Capita	-2.61%	-0.73%	-1.64%	0.08%	-2.47%	-2.96%	-2.52%	0.04%	-2.16%	-4.46%	-1.97%	-2.15%	5.54%	6.45%	-2.67%

Footnotes

(1) Percentage selected to modify Per Capita amounts for Estimated FY 2012-13: Where applicable, percentage selections have been bolded for clarification.	**OAP-A**	The per capita growth from FY 2003-04 to FY 2004-05	**Exp. Adults to 60%**	One half higher than the actual per-capita expenditure growth rate annualized from the first half of FY 2012-13.	**Foster Care**	One quarter the average per capita growth rate from FY 2007-08 through FY 2010-11
	OAP-B	The average per capita growth from FY 2007-08 through FY 2009-10	**Exp. Adults to 100%**	The Expansion Adults to 60% trend	**BC Adults**	The average per-capita growth from FY 2007-08 through FY 2009-10
	AND/AB	One quarter of the per capita growth from FY 2009-10 to FY 2010-11	**AWDC**	Weighted per capita equal to 90% of the AND/AB per capita and 10% of the AFDC-A per capita	**Non-Citizens**	The average per capita growth from FY 2005-06 through FY 2008-09
	Disabled Buy-in	Weighted average disabled populations per capita	**BCCP**	See EF-8	**Partial Dual Eligibles**	Average of FY 2007-08 through FY 2010-11
	AFDC-A	The per capita growth rate from FY 2005-06	**Elig. Children**	One half the per capita growth rate from FY 2009-10 to FY 2010-11		
(2) Percentage selected to modify Per Capita amounts for Estimated FY 2013-14: Where applicable, percentage selections have been italicized for clarification.	**OAP-A**	The per capita growth from FY 2003-04 to FY 2004-05	**Exp. Adults to 60%**	The AFDC-A per-capita trend estimate for FY 2013-14	**Foster Care**	One quarter the average per capita growth rate from FY 2007-08 through FY 2010-11
	OAP-B	The average per capita growth from FY 2007-08 through FY 2009-10	**Exp. Adults to 100%**	The Expansion Adults to 60% trend	**BC Adults**	The average per-capita growth from FY 2007-08 through FY 2009-10
	AND/AB	One quarter of the per capita growth from FY 2009-10 to FY 2010-11	**AWDC**	Weighted per capita equal to 90% of the AND/AB per capita and 10% of the AFDC-A per capita	**Non-Citizens**	The average per capita growth from FY 2005-06 through FY 2008-09
	Disabled Buy-in	Same per capita growth as AND/AB	**BCCP**	See EF-8	**Partial Dual**	Average of FY 2007-08 through FY 2010-11
	AFDC-A	The per capita growth rate from FY 2005-06	**Elig. Children**	One half the per capita growth rate from FY 2009-10 to FY 2010-11		
(3) Percentage selected to modify Per Capita amounts for Estimated FY 2014-15: Where applicable, percentage selections have been italicized for clarification.	**OAP-A**	The per capita growth from FY 2003-04 to FY 2004-05	**Exp. Adults to 60%**	The AFDC-A per-capita trend estimate for FY 2013-14	**Foster Care**	One quarter the average per capita growth rate from FY 2007-08 through FY 2010-11
	OAP-B	The average per capita growth from FY 2007-08 through FY 2009-10	**Exp. Adults to 100%**	The Expansion Adults to 60% trend	**BC Adults**	The average per-capita growth from FY 2007-08 through FY 2009-10
	AND/AB	One quarter of the per capita growth from FY 2009-10 to FY 2010-11	**AWDC**	Weighted per capita equal to 90% of the AND/AB per capita and 10% of the AFDC-A per capita	**Non-Citizens**	The average per capita growth from FY 2005-06 through FY 2008-09
	Disabled Buy-in	Same per capita growth as AND/AB	**BCCP**	See EF-8	**Partial Dual**	Average of FY 2007-08 through FY 2010-11
	AFDC-A	The per capita growth rate from FY 2005-06	**Elig. Children**	No per capita growth anticipated		

(4) Due to changes in Part D Medicare prescription coverage, historical per capita trends do not incorporate data prior to FY 2005-06 for the OAP-A and OAP-B eligibility types.

Exhibit F - ACUTE CARE - Breast and Cervical Cancer Program - Per Capita Detail and Fund Splits

Breast and Cervical Cancer Program Costs					
Month	**Total[1]**	**Caseload**	**Monthly Per Capita**	**Rolling 3-Month Per Capita**	**Percent Change**
October 2010	$731,130	505	$1,447.78	-	-
November 2010	$838,350	511	$1,640.61	-	-
December 2010	$641,895	526	$1,220.33	$4,308.72	-
January 2011	$858,219	532	$1,613.19	$4,474.13	3.84%
February 2011	$860,735	535	$1,608.85	$4,442.37	-0.71%
March 2011	$758,865	556	$1,364.87	$4,586.91	3.25%
April 2011	$842,553	569	$1,480.76	$4,454.48	-2.89%
May 2011	$977,078	587	$1,664.53	$4,510.16	1.25%
June 2011	$796,240	589	$1,351.85	$4,497.14	-0.29%
July 2011	$905,622	587	$1,542.80	$4,559.18	1.38%
August 2011	$1,098,058	586	$1,873.82	$4,768.47	4.59%
September 2011	$806,654	590	$1,367.21	$4,783.83	0.32%
October 2011	$840,959	592	$1,420.54	$4,661.57	-2.56%
November 2011	$777,937	602	$1,292.25	$4,080.00	-12.48%
December 2011	$948,163	606	$1,564.63	$4,277.42	4.84%
January 2012	$759,376	603	$1,259.33	$4,116.21	-3.77%
February 2012	$807,113	604	$1,336.28	$4,160.24	1.07%
March 2012	$896,406	604	$1,484.12	$4,079.73	-1.94%
April 2012	$931,643	596	$1,563.16	$4,383.56	7.45%
May 2012	$713,371	597	$1,194.93	$4,242.21	-3.22%
June 2012	$787,309	601	$1,310.00	$4,068.09	-4.10%
Selected Trend Factor[2]					
FY 2011-12 Totals[3]	$10,362,070	622	$16,659.28		**-2.97%**
FY 2012-13 Totals[3]	$11,064,208	666	$16,612.92		**-1.48%**
FY 2013-14 Totals[3]	$11,231,779	691	$16,254.38		**-0.74%**

Footnotes

(1) Totals taken from the Department's monthly report to the Joint Budget Committee on the Health Care Policy and Financing Medical Services Premiums Expenditures and Medicaid Caseload.

(2) The selected trend factors were calculated using a regression model of the rolling 3-month per capita expenditures from April 2007 to June 2012. The model controls for caseload, time, and seasonality. The trend factor is the average of the rolling average percent changes of the predicted values from the regression model for each fiscal year, annualized to adjust for a full-year effect. The rate of decline is reduced in future years.

(3) The FY 2012-13, FY 2013-14, and FY 2014-15 totals are calculated on pages EF-2 through EF-4 and include bottom line impacts. Caseload totals are taken from Exhibit B.

Exhibit F - ACUTE CARE - Breast and Cervical Cancer Program - Per Capita Detail and Fund Splits

Breast and Cervical Cancer Program Fund Splits

FY 2012-13 Fund Splits	Per Capita	Allocation	Caseload	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds
Medicaid Breast and Cervical Cancer Program Clients[5]		66.49%	414	$6,889,670	$1,205,692	$1,205,692	$0	$4,478,286
Health Care Expansion Breast and Cervical Cancer Program Clients[4]		33.51%	208	$3,472,400	$0	$0	$1,215,340	$2,257,060
Total	**$16,659.28**	**100.00%**	**622**	**$10,362,070**	**$1,205,692**	**$1,205,692**	**$1,215,340**	**$6,735,346**

FY 2013-14 Fund Splits	Per Capita	Allocation	Caseload	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds
Medicaid Breast and Cervical Cancer Program Clients[5]		68.62%	457	$7,591,808	$1,328,567	$1,328,566	$0	$4,934,675
Health Care Expansion Breast and Cervical Cancer Program Clients[4]		31.38%	209	$3,472,400	$0	$0	$1,215,340	$2,257,060
Total	**$16,612.92**	**100.00%**	**666**	**$11,064,208**	**$1,328,567**	**$1,328,566**	**$1,215,340**	**$7,191,735**

FY 2014-15 Fund Splits	Per Capita	Allocation	Caseload	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds
Medicaid Breast and Cervical Cancer Program Clients[6]		69.08%	477	$7,759,379	$2,715,783	$0	$0	$5,043,596
Health Care Expansion Breast and Cervical Cancer Program Clients[4]		30.92%	214	$3,472,400	$0	$0	$1,215,340	$2,257,060
Total	**$16,254.38**	**100.00%**	**691**	**$11,231,779**	**$2,715,783**	**$0**	**$1,215,340**	**$7,300,656**

(4) 24-22-117 (2) (d) (II), C.R.S. (2011). 35% RF from the Prevention, Early Detection, and Treatment fund, 65% FFP.

(5) 25.5-5-308 (9) (f), C.R.S. (2011). 17.5% GF, 17.5% Cash Funds from the Breast and Cervical Cancer Prevention and Treatment Funds, 65% FFP.

(6) The cash fund associated with this program sunsets July 1, 2014.

Exhibit F - ACUTE CARE - Antipsychotic Drug Expenditure (Reference)

Cash Based Actuals

ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2002-03	$4,664,387	$916,979	$17,700,825	$0	$519,527	$0	$0	$0	$2,839	$783,549	$3,789,992	$11,356	$0	$0	$28,389,454
FY 2003-04	$6,372,432	$1,298,597	$25,500,975	$0	$1,057,440	$0	$0	$0	$3,389	$1,296,760	$5,340,219	$29,882	$0	$0	$40,899,694
FY 2004-05	$6,629,621	$1,760,042	$28,042,949	$0	$1,378,076	$0	$0	$0	$3,654	$1,795,300	$6,321,954	$22,953	$0	$0	$45,954,548
FY 2005-06	$4,033,428	$1,685,933	$24,178,645	$0	$1,633,973	$0	$0	$0	$326	$1,935,729	$7,189,609	$22,633	$0	$0	$40,680,277
FY 2006-07	$479,529	$1,222,769	$19,965,507	$0	$2,000,023	$110,237	$0	$0	$183	$2,688,319	$7,814,333	$13,828	$0	$0	$34,294,729
FY 2007-08	$476,587	$1,416,439	$22,587,953	$0	$2,257,237	$326,303	$0	$0	$7,201	$3,116,761	$8,901,950	$23,191	$0	$0	$39,113,622
FY 2008-09	$574,003	$1,594,319	$22,596,632	$0	$3,156,992	$432,485	$0	$0	$13,539	$3,477,458	$8,956,851	$50,359	$0	$0	$40,852,638
FY 2009-10[1]	$624,336	$1,845,804	$23,477,770	$0	$3,457,524	$786,684	$66,514	$0	$31,055	$3,652,240	$8,663,502	$61,246	$0	$0	$42,666,675
FY 2010-11[1]	$528,892	$2,236,572	$27,074,670	$0	$3,220,104	$1,549,338	$469,727	$0	$41,477	$3,795,327	$8,465,862	$77,588	$0	$0	$47,459,557
FY 2011-12	$332,196	$2,736,142	$29,681,347	$3,181	$4,000,973	$1,331,911	$1,369,338	$51,852	$45,428	$4,356,981	$8,441,242	$76,112	$0	$0	$52,426,702

Percent Change in Cash Based Actuals

ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2004-05	4.04%	35.53%	9.97%	0.00%	30.32%	0.00%	0.00%	0.00%	7.85%	38.44%	18.38%	-23.19%	0.00%	0.00%	12.36%
FY 2005-06	-39.16%	-4.21%	-13.78%	0.00%	18.57%	0.00%	0.00%	0.00%	-91.07%	7.82%	13.72%	-1.39%	0.00%	0.00%	-11.48%
FY 2006-07	-88.11%	-27.47%	-17.43%	0.00%	22.40%	0.00%	0.00%	0.00%	-44.00%	38.88%	8.69%	-38.90%	0.00%	0.00%	-15.70%
FY 2007-08	-0.61%	15.84%	13.13%	0.00%	12.86%	196.00%	0.00%	0.00%	3839.28%	15.94%	13.92%	67.71%	0.00%	0.00%	14.05%
FY 2008-09	20.44%	12.56%	0.04%	0.00%	39.86%	32.54%	0.00%	0.00%	88.02%	11.57%	0.62%	117.15%	0.00%	0.00%	4.45%
FY 2009-10	8.77%	15.77%	3.90%	0.00%	9.52%	81.90%	0.00%	0.00%	129.37%	5.03%	-3.28%	21.62%	0.00%	0.00%	4.44%
FY 2010-11	-15.29%	21.17%	15.32%	0.00%	-6.87%	96.95%	606.21%	0.00%	33.56%	3.92%	-2.28%	26.68%	0.00%	0.00%	11.23%
FY 2011-12	-37.19%	22.34%	9.63%	0.00%	24.25%	-14.03%	191.52%	0.00%	9.53%	14.80%	-0.29%	-1.90%	0.00%	0.00%	10.47%

Per Capita Cost

ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2003-04	$185.63	$234.07	$545.02	$0.00	$22.23	$0.00	$0.00	$0.00	$32.27	$6.64	$358.07	$3.56	$0.00	$0.00	$111.27
FY 2004-05	$185.29	$289.39	$585.09	$0.00	$24.12	$0.00	$0.00	$0.00	$42.01	$8.07	$400.25	$3.84	$0.00	$0.00	$113.18
FY 2005-06	$111.40	$279.04	$505.25	$0.00	$27.75	$0.00	$0.00	$0.00	$1.74	$9.04	$436.79	$4.42	$0.00	$0.00	$101.14
FY 2006-07	$13.36	$201.81	$409.14	$0.00	$39.46	$21.36	$0.00	$0.00	$0.80	$13.09	$467.25	$2.67	$0.00	$0.00	$87.44
FY 2007-08	$13.13	$230.47	$452.37	$0.00	$50.66	$36.59	$0.00	$0.00	$26.67	$15.28	$519.34	$3.69	$0.00	$0.00	$99.79
FY 2008-09	$15.26	$247.30	$440.01	$0.00	$64.24	$33.98	$0.00	$0.00	$42.71	$14.79	$496.69	$7.22	$0.00	$0.00	$93.52
FY 2009-10	$16.22	$261.85	$440.78	$0.00	$59.96	$45.80	$20.54	$0.00	$73.07	$13.25	$471.33	$7.82	$0.00	$0.00	$85.54
FY 2010-11	$13.59	$287.96	$481.03	$0.00	$52.82	$76.87	$17.29	$0.00	$78.11	$12.55	$460.28	$9.86	$0.00	$0.00	$84.63
FY 2011-12	$8.36	$326.39	$499.40	$61.17	$58.25	$54.29	$38.62	$45.72	$76.09	$13.02	$468.07	$9.98	$0.00	$0.00	$84.56

Percent Change in Per Capita Cost

ACUTE CARE Gross Antipsychotic Drugs Expenditure (For Information Only)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2004-05	-0.18%	23.63%	7.35%	0.00%	8.50%	0.00%	0.00%	0.00%	30.18%	21.54%	11.78%	7.87%	0.00%	0.00%	1.72%
FY 2005-06	-39.88%	-3.58%	-13.65%	0.00%	15.05%	0.00%	0.00%	0.00%	-95.86%	12.02%	9.13%	15.10%	0.00%	0.00%	-10.64%
FY 2006-07	-88.01%	-27.68%	-19.02%	0.00%	42.20%	0.00%	0.00%	0.00%	-54.02%	44.80%	6.97%	-39.59%	0.00%	0.00%	-13.55%
FY 2007-08	-1.72%	14.20%	10.57%	0.00%	28.38%	71.30%	0.00%	0.00%	3233.75%	16.73%	11.15%	38.20%	0.00%	0.00%	14.12%
FY 2008-09	16.22%	7.30%	-2.73%	0.00%	26.81%	-7.13%	0.00%	0.00%	60.14%	-3.21%	-4.36%	95.66%	0.00%	0.00%	-6.28%
FY 2009-10	6.29%	5.88%	0.17%	0.00%	-6.66%	34.79%	0.00%	0.00%	71.08%	-10.41%	-5.11%	8.31%	0.00%	0.00%	-8.53%
FY 2010-11	-16.21%	9.97%	9.13%	0.00%	-11.91%	67.84%	-15.82%	0.00%	6.90%	-5.28%	-2.34%	26.09%	0.00%	0.00%	-1.06%
FY 2011-12	-38.48%	13.35%	3.82%	0.00%	10.28%	-29.37%	123.37%	0.00%	-2.59%	3.75%	1.69%	1.22%	0.00%	0.00%	-0.08%

Exhibit F - ACUTE CARE - Antipsychotic Drug Expenditure (Reference)

Cash Based Actuals

ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2003-04	$5,090,144	$1,037,288	$20,369,563	$0	$844,658	$0	$0	$0	$2,707	$1,035,821	$4,265,638	$23,869	$0	$0	$32,669,688
FY 2004-05	$4,938,612	$1,311,110	$20,890,071	$0	$1,026,572	$0	$0	$0	$2,722	$1,337,375	$4,709,421	$17,098	$0	$0	$34,232,981
FY 2005-06	$2,687,488	$1,123,343	$16,110,320	$0	$1,088,722	$0	$0	$0	$217	$1,289,783	$4,790,463	$15,081	$0	$0	$27,105,417
FY 2006-07	$331,389	$845,022	$13,797,610	$0	$1,382,161	$76,182	$0	$0	$126	$1,857,823	$5,400,269	$9,556	$0	$0	$23,700,138
FY 2007-08	$354,695	$1,054,171	$16,810,867	$0	$1,679,927	$242,848	$0	$0	$5,359	$2,319,619	$6,625,191	$17,260	$0	$0	$29,109,937
FY 2008-09	$358,015	$994,403	$14,093,890	$0	$1,969,068	$269,748	$0	$0	$8,444	$2,168,948	$5,586,535	$31,410	$0	$0	$25,480,461
FY 2009-10	$359,915	$1,064,063	$13,534,393	$0	$1,993,183	$453,505	$38,344	$0	$17,902	$2,105,432	$4,994,309	$35,307	$0	$0	$24,596,353
FY 2010-11	$288,997	$1,222,105	$14,794,110	$0	$1,759,526	$846,587	$256,668	$0	$22,664	$2,073,838	$4,625,906	$42,396	$0	$0	$25,932,797
FY 2011-12	$181,304	$1,493,315	$16,199,299	$1,736	$2,183,626	$726,922	$747,348	$28,299	$24,793	$2,377,926	$4,607,008	$41,540	$0	$0	$28,613,116

Percent Change in Cash Based Actuals

ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2004-05	-2.98%	26.40%	2.56%	0.00%	21.54%	0.00%	0.00%	0.00%	0.55%	29.11%	10.40%	-28.37%	0.00%	0.00%	4.79%
FY 2005-06	-45.58%	-14.32%	-22.88%	0.00%	6.05%	0.00%	0.00%	0.00%	-92.03%	-3.56%	1.72%	-11.80%	0.00%	0.00%	-20.82%
FY 2006-07	-87.67%	-24.78%	-14.36%	0.00%	26.95%	0.00%	0.00%	0.00%	-41.94%	44.04%	12.73%	-36.64%	0.00%	0.00%	-12.56%
FY 2007-08	7.03%	24.75%	21.84%	0.00%	21.54%	218.77%	0.00%	0.00%	4153.17%	24.86%	22.68%	80.62%	0.00%	0.00%	22.83%
FY 2008-09	0.94%	-5.67%	-16.16%	0.00%	17.21%	11.08%	0.00%	0.00%	57.57%	-6.50%	-15.68%	81.98%	0.00%	0.00%	-12.47%
FY 2009-10	0.53%	7.01%	-3.97%	0.00%	1.22%	68.12%	0.00%	0.00%	112.01%	-2.93%	-10.60%	12.41%	0.00%	0.00%	-3.47%
FY 2010-11	-19.70%	14.85%	9.31%	0.00%	-11.72%	86.68%	569.38%	0.00%	26.60%	-1.50%	-7.38%	20.08%	0.00%	0.00%	5.43%
FY 2011-12	-37.26%	22.19%	9.50%	0.00%	24.10%	-14.13%	191.17%	0.00%	9.39%	14.66%	-0.41%	-2.02%	0.00%	0.00%	10.34%

Per Capita Cost

ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2003-04	$148.28	$186.97	$435.35	$0.00	$17.76	$0.00	$0.00	$0.00	$25.78	$5.30	$286.02	$2.84	$0.00	$0.00	$88.88
FY 2004-05	$138.03	$215.57	$435.85	$0.00	$17.97	$0.00	$0.00	$0.00	$31.29	$6.01	$298.16	$2.86	$0.00	$0.00	$84.31
FY 2005-06	$74.23	$185.92	$336.65	$0.00	$18.49	$0.00	$0.00	$0.00	$1.15	$6.02	$291.04	$2.95	$0.00	$0.00	$67.39
FY 2006-07	$9.23	$139.47	$282.74	$0.00	$27.27	$14.76	$0.00	$0.00	$0.55	$9.05	$322.91	$1.84	$0.00	$0.00	$60.42
FY 2007-08	$9.78	$171.52	$336.67	$0.00	$37.70	$27.23	$0.00	$0.00	$19.85	$11.37	$386.51	$2.74	$0.00	$0.00	$74.27
FY 2008-09	$9.52	$154.24	$274.44	$0.00	$40.06	$21.19	$0.00	$0.00	$26.64	$9.22	$309.80	$4.50	$0.00	$0.00	$58.33
FY 2009-10	$9.35	$150.95	$254.10	$0.00	$34.57	$26.40	$11.84	$0.00	$42.12	$7.64	$271.71	$4.51	$0.00	$0.00	$49.31
FY 2010-11	$7.43	$157.35	$262.84	$0.00	$28.86	$42.01	$9.45	$0.00	$42.68	$6.86	$251.50	$5.39	$0.00	$0.00	$46.25
FY 2011-12	$4.56	$178.14	$272.56	$33.38	$31.79	$29.63	$21.08	$24.96	$41.53	$7.11	$255.46	$5.44	$0.00	$0.00	$46.15

Percent Change in Per Capita Cost

ACUTE CARE Net Antipsychotic Drugs Expenditure (With Estimated Drug Rebate)	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
FY 2004-05	-6.91%	15.30%	0.11%	0.00%	1.18%	0.00%	0.00%	0.00%	21.37%	13.40%	4.24%	0.70%	0.00%	0.00%	-5.14%
FY 2005-06	-46.22%	-13.75%	-22.76%	0.00%	2.89%	0.00%	0.00%	0.00%	-96.32%	0.17%	-2.39%	3.15%	0.00%	0.00%	-20.07%
FY 2006-07	-87.57%	-24.98%	-16.01%	0.00%	47.49%	0.00%	0.00%	0.00%	-52.17%	50.33%	10.95%	-37.63%	0.00%	0.00%	-10.34%
FY 2007-08	5.96%	22.98%	19.07%	0.00%	38.25%	84.49%	0.00%	0.00%	3509.09%	25.64%	19.70%	48.91%	0.00%	0.00%	22.92%
FY 2008-09	-2.66%	-10.07%	-18.48%	0.00%	6.26%	-22.18%	0.00%	0.00%	34.21%	-18.91%	-19.85%	64.23%	0.00%	0.00%	-21.46%
FY 2009-10	-1.79%	-2.13%	-7.41%	0.00%	-13.70%	24.59%	0.00%	0.00%	58.11%	-17.14%	-12.30%	0.22%	0.00%	0.00%	-15.46%
FY 2010-11	-20.53%	4.24%	3.44%	0.00%	-16.52%	59.13%	-20.19%	0.00%	1.33%	-10.21%	-7.44%	19.51%	0.00%	0.00%	-6.21%
FY 2011-12	-38.63%	13.21%	3.70%	0.00%	10.15%	-29.47%	123.07%	0.00%	-2.69%	3.64%	1.57%	0.93%	0.00%	0.00%	-0.22%

(1) Totals for FY 2009-10 and FY 2010-11 are adjusted to account for the June 2010 payment delays.

Exhibit F - ACUTE CARE - Pharmacy Rebates

Estimated Increase in Rebates Attributable to the Affordable Care Act

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Percentage Change[2]
FY 2010-11[1]	$2,623,793	$2,663,517	$2,986,818	$2,724,952	$10,999,080	-
FY 2011-12[1]	$3,079,979	$3,164,919	$3,074,020	$3,278,629	$12,597,547	14.53%
FY 2012-13[2]	$3,890,062	$2,844,435	$3,846,909	$3,846,909	$14,428,315	14.53%
FY 2013-14[2]	$4,040,239	$4,151,661	$4,032,422	$4,300,822	$16,525,144	14.53%
FY 2014-15[2]	$4,627,396	$4,755,011	$4,618,443	$4,925,849	$18,926,699	14.53%

(1) Historical actuals have been restated as the Department has transitioned from an accrual-based reconciliation to cash-based reconciliation process in FY 2011-12 to prevent overstatement of federal funds only rebate revenue actually received by the state.

(2) The estimated FY 2012-13 growth rate is held constant for the request and out years and is equal the percentage change from FY 2010-11 to FY 2011-12.

Exhibit F - ACUTE CARE - Calculation of Enhanced Federal Match for Family Planning

Total Expenditure

Fiscal Year	Total Reported Expenditures	General Fund	Cash Funds [1]	Federal Funds (90% FMAP)	Change	% Change
FY 2000-01	$2,438,198	$243,820	$0	$2,194,378	($1,518,369)	-38.38%
FY 2001-02	$5,111,123	$511,112	$0	$4,600,011	$2,672,925	109.63%
FY 2002-03	$6,538,073	$653,807	$0	$5,884,266	$1,426,950	27.92%
FY 2003-04	$6,061,856	$606,186	$0	$5,455,670	($476,217)	-7.28%
FY 2004-05	$8,019,717	$801,972	$0	$7,217,745	$1,957,861	32.30%
FY 2005-06	$8,260,397	$826,040	$0	$7,434,357	$240,680	3.00%
FY 2006-07	$8,343,188	$834,319	$0	$7,508,869	$82,791	1.00%
FY 2007-08	$9,902,250	$990,225	$0	$8,912,025	$1,559,062	18.69%
FY 2008-09	$13,893,561	$1,389,356	$0	$12,504,205	$3,991,311	40.31%
FY 2009-10	$12,619,883	$1,261,988	$0	$11,357,895	($1,273,678)	-9.17%
FY 2010-11	$13,895,800	$1,389,580	$0	$12,506,220	$1,275,917	10.11%
FY 2011-12	$11,795,916	$1,160,689	$18,903	$10,616,324	($2,099,884)	-15.11%
FY 2012-13 Estimate[2]	$13,051,290	$1,276,609	$28,520	$11,746,161	$1,255,374	10.64%
FY 2013-14 Estimate[2]	$13,312,316	$1,301,743	$29,489	$11,981,084	$261,026	2.00%
FY 2014-15 Estimate[2]	$13,578,562	$1,327,364	$30,492	$12,220,706	$266,246	2.00%

[1] SB 11-177 extended and expanded the Teen Pregnancy and Dropout Prevention program. The Department receives local funds to provide services for the program. The cash fund expenditures in FY 2011-12, FY 2012-13, FY 2013-14, and FY 2014-15 represent the contributions -- actual and anticipated -- of this program.

[2] The FY 2012-13 estimate for total reported expenditures is the average of annual total reported expenditures for FY 2008-09 -- FY 2011-12. Estimates for FY 2013-14 and FY 2014-15 are the result of the application of the average growth rates for FY 2005-06 and FY 2006-07 to the previous year's estimated total reported expenditure.

Breakdown of Total Expenditure

Fiscal Year	Fee-for-Service Family Planning	Change in Fee-for-Service Expenditure	Percent Change in Fee-for-Service Expenditure	Managed Care Family Planning	Change in Managed Care Expenditure	Percent Change in Managed Care Expenditure
FY 2000-01	$2,438,198	($1,518,369)	-38.38%	$0	$0	0.00%
FY 2001-02	$2,763,372	$325,174	13.34%	$2,347,751	$2,347,751	0.00%
FY 2002-03	$3,094,894	$331,522	12.00%	$3,443,179	$1,095,428	100.00%
FY 2003-04	$4,058,413	$963,519	31.13%	$2,003,442	($1,439,737)	-41.81%
FY 2004-05	$6,902,883	$2,844,470	70.09%	$1,116,833	($886,609)	-44.25%
FY 2005-06	$7,013,966	$111,083	1.61%	$1,246,431	$129,598	11.60%
FY 2006-07	$7,431,084	$417,118	5.95%	$912,103	($334,328)	-26.82%
FY 2007-08	$9,139,367	$1,708,283	22.99%	$762,883	($149,220)	-16.36%
FY 2008-09	$13,472,771	$4,333,404	47.41%	$420,790	($342,093)	-44.84%
FY 2009-10	$12,533,203	($939,568)	-6.97%	$86,680	($334,110)	-79.40%
FY 2010-11	$12,375,827	($157,376)	-1.26%	$1,519,973	$1,433,293	1653.55%
FY 2011-12	$10,329,972	($2,045,855)	-16.53%	$1,465,943	($54,030)	-3.55%

Totals for fee-for-service and managed care are taken from the Department's quarterly report to the Centers for Medicare and Medicaid Services for total expenditure, known as the CMS-64. The sum of the fee-for-service and managed care totals by year equals the Total Reported Expenditures at the top of this page.

Total Expenditure for Indian Health Service			
Fiscal Year	**Total Reported Expenditures: 100% FF**	**Change**	**% Change**
FY 2001-02	$100,299	$100,299	-
FY 2002-03	$511,451	$411,152	409.93%
FY 2003-04	$813,791	$302,340	59.11%
FY 2004-05	$922,761	$108,970	13.39%
FY 2005-06	$840,371	($82,390)	-8.93%
FY 2006-07	$899,521	$59,150	7.04%
FY 2007-08	$1,061,989	$162,468	18.06%
FY 2008-09	$1,534,327	$472,338	44.48%
FY 2009-10	$1,536,532	$2,205	0.14%
FY 2010-11	$1,672,353	$135,821	8.84%
FY 2011-12	$1,434,711	($237,642)	-14.21%
FY 2012-13 Estimated Total[(1)]	$1,531,525	$96,814	6.75%
FY 2013-14 Estimated Total[(1)]	$1,600,315	$68,790	4.49%
FY 2014-15 Estimated Total[(1)]	$1,672,194	$71,879	4.49%

[(1)] The trend for FY 2012-13, FY 2013-14, and FY 2014-15 is the average of the growth rates for FY 2009-10 and FY 2010-11.

Exhibit F - ACUTE CARE - Expenditure by Half-Year

FY 2012-13 July-December COFRS Total Actuals

ACUTE CARE	Adults 65 and Older (OAP-A)	Disabled Adults 60 to 64 (OAP-B)	Disabled Individuals to 59 (AND/AB)	Disabled Buy-In	Categorically Eligible Low-Income Adults (AFDC-A)	Expansion Adults to 60%	Expansion Adults to 100%	Adults without Dependent Children (AwDC)	Breast & Cervical Cancer Program	Eligible Children (AFDC-C/BC)	Foster Care	Baby Care Program-Adults	Non-Citizens	Partial Dual Eligibles	TOTAL
Physician Services & EPSDT	$1,912,035	$3,729,167	$28,150,723	$586,120	$25,333,369	$6,977,712	$8,777,120	$4,786,178	$0	$56,109,874	$4,994,438	$8,539,016	$2,855,704	$131	$152,751,587
Emergency Transportation	$68,169	$172,387	$1,144,795	$11,691	$595,815	$155,047	$191,714	$346,830	$0	$802,327	$91,254	$98,285	$49,768	$0	$3,728,081
Non-emergency Medical Transportation	$1,001,666	$472,570	$2,433,559	$13,847	$159,033	$56,115	$44,096	$64,715	$0	$457,403	$47,246	$36,006	$0	$129	$4,786,386
Dental Services	$678,318	$174,077	$2,666,489	$17,759	$2,124,080	$726,169	$817,287	$339,668	$0	$44,644,584	$2,394,207	$157,352	$3,455	$145	$54,743,589
Family Planning	$0	$105	$10,327	$314	$90,631	$37,665	$42,170	$6,445	$0	$94,749	$36,701	$11,871	$0	$0	$330,976
Health Maintenance Organizations	$2,846,239	$3,803,835	$20,518,820	$85,676	$8,685,500	$3,131,285	$4,412,671	$0	$0	$20,175,462	$398,277	$623,650	$0	$0	$64,681,417
Inpatient Hospitals	$8,200,542	$9,653,280	$56,748,757	$1,186,684	$27,897,989	$5,924,770	$5,964,240	$8,529,320	$0	$38,506,836	$2,740,243	$14,048,953	$17,819,643	$5,348	$197,226,604
Outpatient Hospitals	$1,781,502	$3,598,760	$29,531,710	$646,801	$26,512,495	$8,837,099	$10,921,013	$7,641,408	$0	$41,718,856	$3,098,024	$3,034,909	$924,065	$0	$138,246,643
Lab & X-Ray	$248,479	$498,036	$3,884,265	$59,825	$6,361,435	$1,890,880	$2,277,229	$995,697	$0	$3,894,175	$822,093	$2,127,358	$74,764	$13	$23,134,248
Durable Medical Equipment	$9,711,947	$3,107,194	$26,681,229	$96,238	$1,756,725	$644,041	$742,597	$579,110	$0	$5,089,825	$2,174,136	$76,887	$3,211	$11,498	$50,674,638
Prescription Drugs	$3,465,705	$9,670,259	$65,655,607	$615,016	$21,072,684	$8,301,643	$10,374,796	$6,041,009	$0	$31,602,708	$9,638,391	$1,273,540	$0	$270	$167,711,628
Drug Rebate	($1,714,933)	($4,785,128)	($32,488,323)	($304,328)	($10,427,383)	($4,107,897)	($5,133,754)	($2,989,269)	$0	($15,637,948)	($4,769,359)	($630,185)	$0	($134)	($82,988,640)
Rural Health Centers	$29,681	$167,434	$659,196	$11,387	$894,766	$365,743	$439,600	$95,735	$0	$3,148,437	$139,636	$154,496	$4,076	$131	$6,110,318
Federally Qualified Health Centers	$475,531	$614,259	$4,318,231	$43,618	$6,758,379	$1,867,198	$2,402,184	$2,233,095	$0	$27,858,190	$980,577	$2,693,179	$189,742	$0	$50,434,184
Co-Insurance (Title XVIII-Medicare)	$6,569,174	$1,130,238	$4,696,527	$31,573	$65,705	$128,709	$326,233	$3,621	$0	$4,541	$1,499	$16,481	$0	$2,216,277	$15,190,576
Breast and Cervical Cancer Treatment Program	$0	$0	$0	$0	$0	$0	$0	$0	$4,851,347	$0	$0	$0	$0	$0	$4,851,347
Administrative Service Organizations - Services	$949,095	$1,302,669	$9,485,948	$86,226	$4,297,819	$1,424,055	$1,604,595	$0	$0	$8,882,109	$1,209,661	$1,130,797	$0	$0	$30,372,974
Other Medical Services	$276	$227	$1,702	$19	$710	$216	$264	$176	$27	$1,524	$183	$183	$121	$16	$5,645
Home Health	$12,524,810	$4,617,027	$63,492,859	$58,853	$276,977	$78,264	$92,195	$95,740	$0	$2,100,734	$5,582,788	$15,460	$0	$123,875	$89,059,581
Presumptive Eligibility	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$3,075,000	$0	$0	$3,075,000
Total	$48,748,237	$37,926,396	$287,592,420	$3,247,318	$122,456,728	$36,438,714	$44,296,249	$28,769,480	$4,851,374	$269,454,385	$29,579,994	$36,483,237	$21,924,550	$2,357,700	$974,126,782
Caseload	40,652	8,893	61,096	595	67,684	28,190	40,195	9,824	613	354,538	17,960	7,687	2,629	20,689	661,245
Half -Year Per Capita	$1,199.16	$4,264.59	$4,707.22	$5,454.62	$1,809.23	$1,292.61	$1,102.03	$2,928.39	$7,920.61	$760.02	$1,646.99	$4,746.10	$8,340.03	$113.96	$1,473.17
Estimated Contribution of Bottom Line Impacts to First Half Expenditure	($1,397,394)	($902,064)	($3,545,861)	($37,450)	($2,734,632)	($1,043,569)	($1,395,198)	($981,975)	($12,170)	($8,729,020)	($804,628)	$1,202,832	($162,004)	($27,428)	($20,570,560)
Estimated Total Without Bottom Line Impacts	$50,145,631	$38,828,459	$291,138,281	$3,284,767	$125,191,360	$37,482,283	$45,691,447	$29,751,456	$4,863,544	$278,183,404	$30,384,622	$35,280,405	$22,086,553	$2,385,128	$994,697,342
Half -Year Per Capita without Bottom Line Impacts	$1,233.54	$4,366.02	$4,765.26	$5,517.53	$1,849.64	$1,329.63	$1,136.74	$3,028.34	$7,940.48	$784.64	$1,691.79	$4,589.62	$8,401.66	$115.28	$1,504.28
FY 2012-13 Rough Estimated Per Capita	$2,375.71	$8,408.63	$9,177.54	$10,626.35	$3,562.26	$2,560.77	$2,189.29	$5,832.37	$15,292.78	$1,511.15	$3,258.27	$8,839.27	$16,180.97	$222.03	$2,897.13
Acute Care	**Adults 65 and Older (OAP-A)**	**Disabled Adults 60 to 64 (OAP-B)**	**Disabled Individuals to 59 (AND/AB)**	**Disabled Buy-In**	**Categorically Eligible Low-Income Adults (AFDC-A)**	**Expansion Adults to 60%**	**Expansion Adults to 100%**	**Adults without Dependent Children (AwDC)**	**Breast & Cervical Cancer Program**	**Eligible Children (AFDC-C/BC)**	**Foster Care**	**Baby Care Program-Adults**	**Non-Citizens**	**Partial Dual Eligibles**	**COFRS TOTAL**
FY 2011-12(A)	$46,547,073	$33,505,706	$283,835,020	$0	$120,211,552	$30,509,567	$39,805,824	$0	$5,377,394	$254,376,914	$30,799,233	$32,808,342	$21,867,365	$1,892,196	$901,536,186
FY 2011-12 Full Year	$94,396,993	$67,010,395	$555,792,834	$398,462	$237,144,107	$64,030,894	$83,020,178	$2,393,150	$10,272,697	$512,975,399	$59,325,792	$63,318,002	$41,938,166	$5,407,941	$1,797,425,010
FY 2012-13(A) Base	$50,145,631	$38,828,459	$291,138,281	$3,284,767	$125,191,360	$37,482,283	$45,691,447	$29,751,456	$4,863,544	$278,183,404	$30,384,622	$35,280,405	$22,086,553	$2,385,128	$994,697,342
FY 2012-13(A) Total	$48,748,237	$37,926,396	$287,592,420	$3,247,318	$122,456,728	$36,438,714	$44,296,249	$28,769,480	$4,851,374	$269,454,385	$29,579,994	$36,483,237	$21,924,550	$2,357,700	$974,126,782
FY 2012-13(A) Base Annualized	$96,576,771	$74,780,736	$560,710,764	$6,326,219	$241,109,286	$72,188,101	$87,998,343	$57,299,100	$9,366,826	$535,760,631	$58,518,531	$67,947,446	$42,537,066	$4,593,580	$1,915,713,400
FY 2012-13(A) Total Annualized	$93,885,494	$73,043,428	$553,881,698	$6,254,094	$235,842,587	$70,178,264	$85,311,295	$55,407,888	$9,343,387	$518,949,186	$56,968,878	$70,264,012	$42,225,059	$4,540,755	$1,876,096,025
Selected Percent Changes (November Request)	0.70%	2.06%	2.38%	22.60%	0.91%	2.18%	8.21%	324.81%	-3.39%	1.97%	-1.64%	7.45%			
FY 2011-12(A) to FY 2012-13(A) Base	7.73%	15.89%	2.57%		4.14%	22.85%	14.79%		-9.56%	9.36%	-1.35%	7.53%	1.00%	26.05%	10.33%
FY 2011-12(A) to FY 2012-13(A) Total	4.73%	13.19%	1.32%		1.87%	19.43%	11.28%		-9.78%	5.93%	-3.96%	11.20%	0.26%	24.60%	8.05%
FY 2011-12 Total to FY 2012-13 Per Capita Growth Based on Rough Estimate	**-0.54%**	**9.00%**	**-0.34%**	**1469.56%**	**-0.55%**	**9.60%**	**2.76%**	**2215.27%**	**-9.05%**	**1.16%**	**-3.97%**	**10.97%**	**0.68%**	**-16.04%**	**4.38%**

This is a rough projection utilizing year-to-date expenditure patterns as a guide to future expenditures. The Half-Year Expenditure Pattern is one forecasting tool used to estimate final expenditures on a monthly basis. It is not meant to replace the extensive forecasting used in the official Budget Request and is not always a predictor

In titles, the suffix (A) denotes the period July through December, and the suffix (B) denotes the period January through June. For example, "FY 2012-13(A)" implies the period July 2012 through December 2012.

In titles, "base" implies estimated expenditure before bottom line impacts, while "total" implies total expenditure including bottom line impacts.