

Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report

		FY 2018-19													
Service Category		July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019	FY 2018-19 Total YTD	
Acute Care	Physician Service	\$78,380,461	\$61,070,509	\$59,192,791	\$86,765,522	\$61,747,144	\$74,604,526	\$63,463,040	\$70,752,075	\$66,361,123	-	-	-	\$622,337,191	
	EPSTD Screening	\$0	\$0	\$0	\$0	\$0	\$0	\$2,111,691	\$0	\$0	-	-	-	\$2,111,691	
	Emergency Transportation	\$5,510,460	\$1,779,386	\$3,295,813	\$4,726,036	\$3,693,122	\$2,179,607	\$3,388,628	\$3,182,534	\$3,741,161	\$0	-	-	\$31,496,747	
	Non-Emergency Medical Transportation	\$4,988,553	\$4,049,695	\$4,323,998	\$5,207,817	\$4,522,294	\$5,007,937	\$3,753,066	\$4,432,155	\$4,280,984	-	-	-	\$40,566,499	
	Dental Service	\$29,655,550	\$26,484,063	\$27,091,622	\$32,286,363	\$25,941,474	\$28,051,204	\$26,179,985	\$24,423,838	\$24,244,899	-	-	-	\$244,358,998	
	Family Planning	\$451	\$1,471	(\$5,226)	\$18,704	(\$79,292)	\$0	\$0	\$0	\$0	-	-	-	(\$63,892)	
	Health Maintenance Organization	\$45,197,654	\$29,880,714	\$30,470,669	\$36,072,908	\$33,729,642	\$33,348,574	\$32,298,371	\$38,297,989	\$31,597,634	-	-	-	\$310,894,155	
	Inpatient Hospital	\$70,682,634	\$50,034,177	\$62,740,573	\$75,433,401	\$65,101,729	\$68,221,250	\$67,253,465	\$75,647,877	\$63,621,435	-	-	-	\$598,736,591	
	Outpatient Hospital	\$54,524,627	(\$3,477,665)	\$32,709,410	\$52,815,249	\$22,755,749	\$51,868,951	\$31,875,974	\$26,097,302	\$48,922,085	-	-	-	\$318,091,682	
	Laboratory and X-Ray	\$10,633,602	\$8,712,201	\$9,638,846	\$11,667,921	\$8,826,159	\$11,331,075	\$11,368,870	\$12,404,226	\$13,670,524	-	-	-	\$98,253,424	
	Durable Medical Equipment (DME)	\$16,677,716	\$10,781,197	\$3,982,627	\$14,745,083	\$11,827,857	\$15,087,991	\$11,435,482	\$12,409,687	\$11,818,274	-	-	-	\$108,765,914	
	Pharmacy	\$88,943,746	\$73,410,603	\$74,636,239	\$90,449,310	\$72,466,135	\$82,556,008	\$82,111,029	\$79,950,768	\$75,111,492	-	-	-	\$725,114,492	
	Drug Rebates - Standard	\$0	\$0	(\$121,025,138)	\$0	(\$109,283,423)	(\$75,413,416)	\$0	(\$1,935,027)	(\$200,610,622)	-	-	-	(\$508,267,671)	
	Rural Health Centers	\$1,625,052	\$2,017,784	\$1,679,403	\$6,810,587	\$1,633,337	\$1,978,169	\$2,288,308	\$2,049,349	\$1,857,459	-	-	-	\$21,939,448	
	Federally Qualified Health Centers	\$14,793,341	\$13,542,271	\$13,008,924	\$19,424,266	\$14,677,097	\$16,292,618	\$9,431,168	\$13,792,137	\$10,152,534	-	-	-	\$125,114,356	
	Co-Insurance (Title XVIII-Medicare)	\$7,414,428	\$1,196,478	\$14,261,866	\$5,098,615	\$6,386,071	\$7,092,009	\$7,040,790	\$9,094,203	\$8,223,950	-	-	-	\$65,808,410	
	Breast and Cervical Cancer Treatment Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	-	-	-	\$0	
	Prepaid Inpatient Health Plan Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	-	-	-	\$0	
	Other Medical Services	\$0	(\$1,216)	\$1,216	\$0	\$0	\$0	\$0	\$0	\$0	-	-	-	\$0	
	Preventive Services	\$6,290,287	\$5,976,866	\$5,787,090	\$7,469,215	\$5,305,217	\$6,624,074	\$9,464,396	\$6,678,449	\$10,249,998	-	-	-	\$63,845,592	
	Acute Home Health	\$2,509,897	\$2,297,540	\$2,477,424	\$3,195,767	\$2,303,809	\$2,477,424	\$2,636,290	\$2,397,726	\$2,317,508	-	-	-	\$22,677,551	
	Acute Care Subtotal	\$437,828,459	\$287,756,074	\$224,292,077	\$452,162,834	\$231,554,171	\$331,466,867	\$365,861,989	\$379,595,025	\$181,263,682	-	-	-	\$2,891,781,178	
	Community Based Long Term Care	HCBS - Elderly, Blind, and Disabled	\$41,053,155	\$33,397,860	\$35,500,268	\$41,350,523	\$35,274,770	\$42,056,543	\$36,302,437	\$37,173,098	\$37,261,807	-	-	-	\$339,370,461
		HCBS - Community Behavioral Health Supports	\$3,774,492	\$3,216,539	\$3,364,962	\$3,677,625	\$3,603,096	\$4,218,552	\$3,756,044	\$3,848,266	\$3,885,906	-	-	-	\$33,345,482
		HCBS - Children's HCBS	\$3,290,066	\$2,716,526	\$2,567,917	\$3,153,267	\$2,793,208	\$3,702,073	\$3,092,042	\$3,086,806	\$3,169,645	-	-	-	\$27,571,550
		HCBS - Consumer Directed Attendant Support	\$0	\$166,921	\$183,791	\$170,489	\$173,410	\$168,794	\$161,382	\$3,379	\$0	-	-	-	\$1,028,166
		HCBS - Brain Injury	\$2,314,077	\$2,228,402	\$1,728,666	\$1,828,428	\$2,507,955	\$2,607,407	\$2,113,260	\$1,885,592	\$1,969,856	-	-	-	\$19,183,643
		HCBS - Children with Autism	\$20,928	\$437	\$0	(\$87)	\$0	\$241	\$0	\$0	(\$765)	-	-	-	\$20,754
		HCBS - Children with Life Limiting Illness	\$77,918	\$62,656	\$66,984	\$61,542	\$53,277	\$80,195	\$39,894	\$40,859	\$49,156	-	-	-	\$532,481
		HCBS - Spinal Cord Injury	\$537,104	\$516,101	\$515,339	\$714,233	\$504,463	\$630,880	\$521,655	\$536,026	\$550,066	-	-	-	\$5,025,867
CCT - Services		\$374,100	\$266,712	\$375,502	\$429,976	\$379,901	\$474,513	\$474,245	\$421,120	\$461,923	-	-	-	\$3,657,992	
Private Duty Nursing		\$8,834,300	\$7,283,609	\$6,498,015	\$9,684,812	\$7,642,802	\$9,400,356	\$6,659,216	\$7,505,252	\$7,650,296	-	-	-	\$71,158,658	
Long-Term Home Health		\$32,114,153	\$26,198,643	\$26,103,613	\$32,518,494	\$26,524,251	\$34,451,912	\$27,878,860	\$27,360,063	\$28,238,869	-	-	-	\$261,388,858	
Hospice		\$5,165,951	\$5,805,330	\$5,681,881	\$5,482,674	\$5,302,345	\$5,604,818	\$5,361,523	\$5,588,095	\$5,522,582	-	-	-	\$49,515,199	
CB/LTC Subtotal		\$97,556,244	\$81,859,736	\$82,586,938	\$99,071,976	\$84,759,478	\$103,396,284	\$86,360,558	\$87,448,556	\$88,759,341	-	-	-	\$811,799,111	
Class I Nursing Facilities		\$60,142,760	\$57,416,961	\$58,833,980	\$60,827,532	\$55,206,878	\$61,365,695	\$53,923,031	\$54,701,898	\$51,774,085	-	-	-	\$514,192,820	
Class II Nursing Facilities		\$461,463	\$454,502	\$419,555	\$430,253	\$398,680	\$402,316	\$413,015	\$421,626	\$431,517	-	-	-	\$3,832,927	
Program of All-Inclusive Care for the Elderly		\$10,096,789	\$20,576,435	\$17,761,539	\$26,828,537	\$14,591,530	\$18,534,901	\$15,535,130	\$14,603,450	\$12,472,519	-	-	-	\$151,000,630	
Supplemental Medicare Insurance Benefit		\$16,424,323	\$15,728,720	\$17,532,330	\$16,731,348	\$15,563,035	\$15,995,942	\$17,381,851	\$16,397,485	\$16,421,862	-	-	-	\$148,176,896	
Health Insurance Buy-In Program		\$170,973	\$170,737	\$242,405	\$215,204	\$204,406	\$216,671	\$218,669	\$216,622	\$217,547	-	-	-	\$1,873,234	
LTC + Insurance Subtotal		\$87,296,308	\$94,347,355	\$94,789,809	\$105,032,874	\$85,964,529	\$96,315,525	\$87,471,696	\$86,341,081	\$81,317,330	-	-	-	\$819,076,507	
Single Entry Points		\$0	\$3,394,068	\$3,414,245	\$3,376,754	\$3,397,637	\$3,357,327	\$3,398,275	\$1,523,972	(\$1,502,641)	-	-	-	\$20,359,637	
Disease Management		\$0	\$0	\$71,828	\$0	\$108,657	\$108,461	\$0	\$57,722	\$74,852	-	-	-	\$421,520	
Prepaid Inpatient Health Plan Administration		\$4,675,008	\$16,693,854	\$15,709,846	\$12,957,457	\$17,536,498	\$15,413,479	\$11,965,920	\$12,328,622	\$14,342,378	-	-	-	\$121,623,062	
Service Management Subtotal	\$4,675,008	\$20,087,922	\$19,195,919	\$16,334,211	\$21,042,792	\$18,879,267	\$15,364,195	\$13,910,316	\$12,914,589	-	-	-	\$142,404,219		
Financing	Nursing Facility Upper Payment Limit	\$0	\$0	\$0	\$0	\$0	\$6,145,239	\$0	\$0	\$0	-	-	-	\$6,145,239	
	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	\$25,430	-	-	-	\$25,430		
	Hospital Supplemental Medicaid Payments	\$131,895,012	\$132,152,803	\$148,554,926	\$82,080,874	\$81,739,913	\$87,121,785	\$79,340,964	\$79,340,964	\$91,141,254	-	-	-	\$913,368,495	
	Nursing Facility Supplemental Payments	\$9,149,789	\$9,388,138	\$9,202,344	\$9,501,963	\$9,201,206	\$9,365,562	\$9,177,993	\$9,177,993	\$9,460,720	-	-	-	\$83,625,708	
	Physician Supplemental Payments	\$0	(\$1,039,207)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	-	-	-	(\$1,039,207)	
	Outstationing Payments	\$0	\$0	\$604,895	\$0	\$0	\$714,102	\$0	\$0	\$724,655	-	-	-	\$2,043,652	
	University of Colorado School of Medicine Payments	\$0	\$0	\$0	\$0	\$34,154,639	\$34,140,979	\$0	\$0	\$34,140,979	-	-	-	\$102,436,979	
	Accounting Adjustments ⁽¹⁾	(\$6,315,573)	\$197,975	(\$1,291,246)	(\$250,748)	(\$1,172,051)	(\$6,452,109)	\$4,361,353	(\$9,837,248)	\$6,378,794	-	-	-	(\$14,380,853)	
	Other Categories Subtotal	\$134,729,228	\$140,699,709	\$157,070,919	\$91,332,089	\$123,923,707	\$131,035,558	\$92,880,310	\$78,681,709	\$141,871,832	-	-	-	\$1,092,225,061	
Number of Weeks in Month	5	4	4	4	4	4	4	4	4	5	4	4	52		
Total Expenditures	\$762,085,247	\$624,750,796	\$577,935,662	\$763,933,984	\$547,244,677	\$681,293,501	\$647,938,748	\$645,976,687	\$506,126,774	\$0	\$0	\$0	\$5,757,286,076		

Notes:

- 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.
- September Hospital Supplemental Medicaid Payments expenditure will not tie out to the total for the Medical Services Premiums Hospital Supplemental Payments in the FY 2018-19 Supplemental Payments by Service Category exhibit due to a prior period adjustment outside of the current model period.
- Accounting adjustments include a \$1 million payment for the Intergovernmental Transfer for Difficult to Discharge Clients in March 2019.

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

FY 2018-19 Appropriation	
FY 2018-19 Long Bill Appropriation (HB 18-1322)	\$7,642,975,557
HB 18-1321 "Urgent NEMT"	(\$248,142)
HB 18-1326 "Community Transition Services"	(\$1,384,496)
HB 18-1328 "CHRP Habilitation Residential Program Transfer"	\$67,940
HB 18-1407 "Developmental Disabilities Stable Workforce Annualization"	\$69,070
SB 18-266 "Controlling Medicaid Costs Reconciliation"	(\$10,000,000)
SB 19-113 "Supplemental Appropriation"	\$236,132,421
FY 2018-19 Appropriation YTD	\$7,867,612,350
FY 2018-19 YTD Expenditures	\$5,757,286,076
Remaining FY 2018-19 Appropriation	\$2,110,326,274

Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report

FY 2018-19 Supplemental Payments by Service Category														
	Service Category	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019	FY 2018-19 Total YTD
Medical Services Premiums Hospital Supplemental Payments	Inpatient Medicaid Supplemental Payments	\$52,631,356	\$52,657,747	\$52,630,252	\$38,136,591	\$38,136,591	\$40,451,979	\$36,978,897	\$36,978,897	\$38,136,591	-	-	-	\$386,738,901
	Medicaid Disproportionate Share Hospital (DSH) and Other Payments	\$0	\$48,355	\$0	\$146,303	(\$194,658)	\$0	\$0	\$0	\$0	-	-	-	\$0
	Medicaid Hospital Quality Incentive Payments	\$10,100,539	\$10,093,779	\$10,107,291	\$8,129,483	\$8,129,483	\$9,451,683	\$7,468,383	\$7,468,383	\$8,129,483	-	-	-	\$79,078,507
	Outpatient Medicaid Supplemental Payments	\$69,163,117	\$69,352,922	\$71,671,922	\$35,668,497	\$35,668,497	\$37,218,123	\$34,893,684	\$34,893,684	\$35,668,497	-	-	-	\$424,198,943
	Total Medical Services Premiums Payments	\$131,895,012	\$132,152,803	\$134,409,465	\$82,080,874	\$81,739,913	\$87,121,785	\$79,340,964	\$79,340,964	\$81,934,571	-	-	-	\$890,016,351
CICP	CICP Disproportionate Share Hospital (DSH) Payment	\$14,594,243	\$14,545,888	\$14,594,247	\$14,239,825	\$14,580,786	\$24,483,648	\$44,641,918	\$9,337,368	\$14,386,128	-	-	-	\$165,404,051
	Uncompensated Care Supplemental Hospital Medicaid Payment	\$7,956,680	\$7,852,070	\$7,956,684	\$9,206,683	\$9,206,683	\$11,837,215	\$7,891,417	\$7,891,417	\$9,206,683	-	-	-	\$79,005,532
	Total CICP Payments	\$22,550,923	\$22,397,958	\$22,550,931	\$23,446,508	\$23,787,469	\$36,320,863	\$52,533,335	\$17,228,785	\$23,592,811	-	-	-	\$244,409,583
Total Supplemental Payments		\$154,445,935	\$154,550,761	\$156,960,396	\$105,527,382	\$105,527,382	\$123,442,648	\$131,874,299	\$96,569,749	\$105,527,382	-	-	-	\$1,134,425,934

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FY 2018-19 Medical Premiums Expenditure and Caseload Report**

MEDICAID CASELOAD WITHOUT RETROACTIVITY¹																
	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
July 2016	43,104	10,931	67,836	5,334	150,888	90,622	351,908	313	470,963	62,982	20,118	14,896	1,883	2,630	33,512	1,327,920
August 2016	43,374	11,011	67,906	5,452	150,673	91,044	359,971	310	471,980	63,715	20,203	14,911	1,872	2,634	33,636	1,338,692
September 2016	43,633	11,039	68,043	5,598	151,271	90,010	356,125	311	471,754	64,431	20,296	14,401	1,797	2,571	33,623	1,334,903
October 2016	43,725	11,131	67,951	5,825	153,579	88,537	353,370	312	471,116	64,454	20,260	14,168	1,790	2,455	33,461	1,332,134
November 2016	43,913	11,233	67,914	5,918	155,687	90,158	358,986	306	473,863	61,650	20,306	13,876	1,738	2,434	33,416	1,341,398
December 2016	43,481	11,181	66,509	6,114	157,155	90,730	362,193	303	472,054	62,524	20,296	13,608	1,736	2,430	33,390	1,343,704
January 2017	43,888	11,405	68,174	6,267	158,234	87,555	362,098	295	469,992	64,732	20,297	13,527	1,816	2,526	33,173	1,343,979
February 2017	43,649	11,363	67,879	6,382	158,909	86,966	361,837	285	467,770	64,616	20,235	12,860	1,765	2,406	33,167	1,340,089
March 2017	44,261	11,397	67,558	6,964	164,569	156,205	296,427	285	465,588	68,165	20,034	12,813	2,392	2,789	34,322	1,353,769
April 2017	44,637	11,381	67,367	7,018	174,085	141,660	309,197	279	466,511	67,508	20,433	12,786	2,321	2,868	34,407	1,362,458
May 2017	44,816	11,401	67,183	7,042	179,878	116,609	333,778	274	467,044	67,596	20,681	12,727	2,276	2,992	34,806	1,369,103
June 2017	44,814	11,420	67,109	7,102	182,132	82,613	368,291	264	462,931	66,503	20,557	12,236	2,229	2,941	34,798	1,365,940
FY 2016-17 Actuals	43,941	11,241	67,619	6,251	161,422	101,059	347,848	295	469,297	64,906	20,310	13,567	1,968	2,640	33,809	1,346,173
July 2017	44,896	11,410	67,009	7,274	181,640	82,329	370,674	150	457,780	65,467	20,651	11,545	2,177	2,925	34,833	1,360,760
August 2017	45,233	11,486	67,079	7,366	182,123	83,011	374,722	145	457,326	66,362	20,804	11,069	2,119	2,957	35,078	1,366,880
September 2017	45,431	11,509	66,918	7,462	181,352	82,088	376,011	132	452,116	66,778	20,941	10,343	2,105	2,831	35,157	1,361,174
October 2017	45,606	11,558	66,985	7,797	179,385	73,998	350,968	139	444,507	67,110	21,093	9,948	2,197	2,842	34,883	1,319,016
November 2017	45,824	11,643	67,142	7,980	179,750	71,489	350,249	149	441,219	66,946	21,305	9,601	2,222	2,716	34,999	1,313,234
December 2017	45,985	11,718	67,066	8,204	179,877	72,942	356,175	151	439,244	66,517	21,485	9,138	2,154	2,677	35,001	1,318,334
January 2018	46,005	11,812	67,365	8,438	180,335	69,709	345,699	157	437,341	66,260	21,576	9,238	2,202	2,704	34,842	1,303,683
February 2018	46,038	11,860	67,688	8,663	180,744	70,071	345,064	165	433,460	64,494	21,701	9,067	2,219	2,707	34,868	1,298,809
March 2018	46,038	11,968	67,875	8,689	176,469	74,829	344,991	163	429,162	63,156	21,926	9,198	2,216	2,763	34,817	1,294,260
April 2018	46,302	12,054	67,963	8,698	177,031	73,217	337,958	169	423,241	59,499	21,947	9,967	2,316	2,823	34,553	1,277,738
May 2018	46,534	12,138	68,152	8,842	177,139	72,831	338,829	165	421,753	58,572	22,153	10,082	2,363	2,930	34,463	1,276,946
June 2018	46,991	12,411	69,127	8,690	182,397	68,816	339,937	169	428,112	60,990	22,094	12,298	2,463	2,831	34,444	1,291,770
FY 2017-18 Actuals	45,907	11,797	67,531	8,175	179,854	74,611	352,606	155	438,771	64,346	21,473	10,125	2,229	2,809	34,828	1,315,217
July 2018	47,275	12,499	69,243	8,791	183,930	68,773	336,317	160	429,605	60,022	22,059	12,567	2,395	2,868	34,656	1,291,160
August 2018	47,463	12,559	69,221	8,734	183,083	69,297	340,105	158	429,302	60,233	21,913	12,450	2,243	2,796	34,802	1,294,359
September 2018	47,564	12,647	69,235	8,667	182,792	68,226	342,428	154	429,176	60,450	21,826	12,375	2,190	2,654	35,434	1,295,818
October 2018	47,546	12,681	68,963	8,606	178,102	66,710	341,696	155	423,792	61,197	21,804	12,319	2,412	2,583	35,294	1,283,860
November 2018	47,544	12,696	68,776	8,641	176,139	64,480	334,945	148	420,435	61,569	21,741	12,138	2,366	2,533	35,078	1,269,229
December 2018	47,622	12,683	68,468	8,819	175,299	63,665	333,858	138	417,916	60,273	22,127	11,881	2,323	2,495	34,728	1,262,295
January 2019	48,091	12,746	69,053	9,147	175,180	61,152	327,637	142	416,568	60,891	21,696	12,073	2,347	2,604	34,657	1,253,984
February 2019	47,571	12,675	68,711	9,249	173,809	61,050	327,212	148	416,362	60,720	21,794	11,977	2,312	2,580	34,608	1,250,778
March 2019	47,704	12,773	68,259	9,213	171,958	60,326	325,645	140	415,610	59,487	21,720	12,097	2,312	2,650	34,426	1,244,320
April 2019																
May 2019																
June 2019																
FY 2018-19 Year-to-Date Average	47,598	12,662	68,881	8,874	177,810	64,853	334,427	149	422,085	60,538	21,853	12,209	2,322	2,640	34,854	1,271,755
FY 2018-19 Year-to-Date Appropriation	47,339	12,587	69,468	9,701	183,720	71,253	343,166	154	428,111	60,987	22,483	12,589	2,556	2,869	36,413	1,303,396
Monthly Growth	133	98	(452)	(36)	(1,851)	(724)	(1,567)	(8)	(752)	(1,233)	(74)	120	-	70	(182)	(6,458)
Monthly Growth Rate	0.28%	0.77%	-0.66%	-0.39%	-1.06%	-1.19%	-0.48%	-5.41%	-0.18%	-2.03%	-0.34%	1.00%	0.00%	2.71%	-0.53%	-0.52%
Over-the-year Growth	1,666	805	384	524	(4,511)	(14,503)	(19,346)	(23)	(13,552)	(3,669)	(206)	2,899	96	(113)	(391)	(49,940)
Over-the-year Growth Rate	3.62%	6.73%	0.57%	6.03%	-2.56%	-19.38%	-5.61%	-14.11%	-3.16%	-5.81%	-0.94%	31.52%	4.33%	-4.09%	-1.12%	-3.86%

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) The FY 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill Appropriation) and SB 19-113 (Supplemental Bill).
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) A system issue skewed the distribution of caseload between the MAGI Adults and MAGI Parents/Caretakers 69% to 133% categories for March, April, and May 2017, artificially inflating MAGI Parents/Caretakers 69% to 133% and deflating MAGI Adults; the system issue was resolved by June 2017.

Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report

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 2018	38,816	10,354	61,324	7,937	162,389	60,735	292,184	152	397,573	55,982	21,631	10,994	2,105	2,868	34,656	1,159,700
August 2018	39,144	10,428	61,424	7,889	161,839	61,260	295,297	147	397,534	56,186	21,499	10,941	1,955	2,796	34,802	1,163,141
September 2018	39,810	10,628	61,931	7,883	162,414	60,492	300,734	143	398,880	56,640	21,468	10,974	1,916	2,654	35,434	1,172,001
October 2018	39,852	10,671	61,825	7,817	158,482	59,223	300,503	146	394,102	57,314	21,437	10,978	2,125	2,581	35,294	1,162,350
November 2018	39,774	10,676	61,670	7,851	156,955	57,212	294,896	141	391,360	57,619	21,331	10,746	2,100	2,532	35,078	1,149,941
December 2018	39,836	10,668	61,405	8,030	156,360	56,472	293,866	130	389,314	56,512	21,692	10,525	2,066	2,493	34,728	1,144,097
January 2019	40,207	10,717	61,947	8,317	156,323	54,304	288,269	134	388,288	57,083	21,274	10,683	2,070	2,603	34,657	1,136,876
February 2019	39,677	10,647	61,652	8,403	155,047	54,223	287,574	140	388,205	56,920	21,375	10,587	2,032	2,579	34,608	1,133,669
March 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	26,426	7,066	41,098	5,344	105,817	38,660	196,110	94	262,105	37,854	14,309	7,202	1,364	1,759	23,271	768,479
Medicaid Managed Care³																
July 2018	8,459	2,145	7,919	854	21,541	8,038	44,133	8	32,032	4,040	428	1,573	290	-	-	131,460
August 2018	8,319	2,131	7,797	845	21,244	8,037	44,808	11	31,768	4,047	414	1,509	288	-	-	131,218
September 2018	7,754	2,019	7,304	784	20,378	7,734	41,694	11	30,296	3,810	358	1,401	274	-	-	123,817
October 2018	7,694	2,010	7,138	789	19,620	7,487	41,193	9	29,690	3,883	367	1,341	287	2	-	121,510
November 2018	7,770	2,020	7,106	790	19,184	7,268	40,049	7	29,075	3,950	410	1,392	266	1	-	119,288
December 2018	7,786	2,015	7,063	789	18,939	7,193	39,992	8	28,602	3,761	435	1,356	257	2	-	118,198
January 2019	7,884	2,029	7,106	830	18,857	6,848	39,368	8	28,280	3,808	422	1,390	277	1	-	117,108
February 2019	7,894	2,028	7,059	846	18,762	6,827	39,638	8	28,157	3,800	419	1,390	280	1	-	117,109
March 2019	7,198	1,974	6,715	771	18,528	6,701	39,485	8	27,846	3,751	404	1,360	274	2	-	115,017
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	5,897	1,531	5,434	608	14,754	5,511	30,863	6	22,145	2,904	305	1,059	208	1	-	91,226
Rocky Mountain Health Plans HMO																
July 2018	1,958	693	3,399	527	9,294	4,113	16,831	-	10	6	87	739	155	-	-	37,812
August 2018	1,981	699	3,378	536	9,157	4,139	16,990	-	10	7	84	713	154	-	-	37,848
September 2018	2,066	696	3,317	541	9,233	4,248	16,783	1	16	11	90	695	155	-	-	37,852
October 2018	2,038	696	3,255	517	8,945	4,075	16,248	-	15	12	88	659	161	-	-	36,709
November 2018	2,049	701	3,256	520	8,772	3,954	15,839	-	12	13	86	679	145	-	-	36,026
December 2018	2,089	701	3,255	521	8,728	3,930	15,924	-	14	13	84	674	138	-	-	36,071
January 2019	2,131	710	3,281	541	8,717	3,803	15,779	-	16	12	85	670	151	1	-	35,897
February 2019	2,116	699	3,277	548	8,771	3,737	15,874	-	16	11	83	660	148	-	-	35,940
March 2019	2,011	703	3,234	532	8,734	3,676	15,907	-	19	12	87	649	153	1	-	35,718
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	0	0	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	1,537	525	2,471	399	6,696	2,973	12,181	-	11	8	65	512	113	-	-	27,491

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

	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 2018	3,305	1,009	4,297	327	12,247	3,925	27,302	8	32,022	4,034	341	834	135	-	-	89,786
August 2018	3,185	983	4,201	309	12,087	3,898	27,818	11	31,758	4,040	330	796	134	-	-	89,550
September 2018	2,493	874	3,756	243	11,145	3,486	24,911	10	30,280	3,799	268	706	119	-	-	82,090
October 2018	2,498	877	3,669	272	10,675	3,412	24,945	9	29,675	3,871	279	682	126	2	-	80,992
November 2018	2,525	861	3,636	270	10,412	3,314	24,210	7	29,063	3,937	324	713	121	1	-	79,394
December 2018	2,520	850	3,594	268	10,211	3,263	24,068	8	28,588	3,748	351	682	119	2	-	78,272
January 2019	2,530	857	3,600	289	10,140	3,045	23,589	8	28,264	3,796	337	720	126	-	-	77,301
February 2019	2,500	840	3,557	298	9,991	3,090	23,764	8	28,141	3,789	336	730	132	1	-	77,177
March 2019	1,849	774	3,264	239	9,794	3,025	23,578	8	27,827	3,739	317	711	121	1	-	75,247
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	0	0	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	1,950	660	2,797	209	8,059	2,538	18,682	6	22,135	2,896	240	548	94	1	-	60,815
PACE - Program of All-Inclusive Care for the Elderly																
July 2018	3,196	443	223	-	-	-	-	-	-	-	-	-	-	-	-	3,862
August 2018	3,153	449	218	-	-	-	-	-	-	-	-	-	-	-	-	3,820
September 2018	3,195	449	231	-	-	-	-	-	-	-	-	-	-	-	-	3,875
October 2018	3,158	437	214	-	-	-	-	-	-	-	-	-	-	-	-	3,809
November 2018	3,196	458	214	-	-	-	-	-	-	-	-	-	-	-	-	3,868
December 2018	3,177	464	214	-	-	-	-	-	-	-	-	-	-	-	-	3,855
January 2019	3,223	462	225	-	-	-	-	-	-	-	-	-	-	-	-	3,910
February 2019	3,278	489	225	-	-	-	-	-	-	-	-	-	-	-	-	3,992
March 2019	3,338	497	217	-	-	-	-	-	-	-	-	-	-	-	-	4,052
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	2,409	346	165	-	-	-	-	-	-	-	-	-	-	-	-	2,920
ACC - Accountable Care Collaborative^{4,6}																
July 2018	43,765	11,989	68,550	8,661	181,641	67,436	327,430	146	423,683	58,752	21,125	12,348	2,343	5	-	1,227,874
August 2018	44,107	12,046	68,589	8,630	180,894	68,057	331,264	150	424,950	59,404	20,994	12,230	2,203	5	-	1,233,523
September 2018	44,090	12,128	68,551	8,495	181,081	67,252	333,036	146	424,051	59,554	20,890	12,092	2,131	4	-	1,233,501
October 2018	44,158	12,181	68,324	8,496	176,416	65,793	332,415	144	419,041	60,031	20,896	12,032	2,297	8	-	1,222,232
November 2018	44,195	12,192	68,156	8,556	174,602	63,777	325,875	140	416,071	60,715	20,837	11,926	2,322	2	-	1,209,366
December 2018	44,224	12,151	67,825	8,664	173,630	62,783	324,119	130	413,347	59,450	21,209	11,646	2,275	3	-	1,201,456
January 2019	44,683	12,239	68,438	9,061	173,162	60,583	318,535	133	412,502	60,220	20,804	11,886	2,321	4	-	1,194,571
February 2019	44,106	12,151	68,166	9,172	172,513	60,577	318,596	140	413,272	60,176	20,873	11,799	2,277	3	-	1,193,821
March 2019	44,033	12,217	67,618	9,098	170,537	59,683	316,789	134	411,534	58,624	20,806	11,888	2,263	8	-	1,185,232
April 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
May 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
June 2019	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FY 2018-19 Year-to-Date Average	33,113	9,107	51,185	6,569	132,040	47,995	244,005	105	313,204	44,744	15,703	8,988	1,703	4	-	908,465

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.
- 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.
- 6) On July 1, 2018, as part of the implementation of the ACC Phase II, the Department moved to mandatory enrollment of all individuals eligible for full Medicaid. This accounts for the increase in the overall enrollment into the program. In addition, the way members are enrolled to a regional accountable entity (RAE) has changed; members are attributed to a primary care medical provider first and that dictates the RAE to which they are enrolled.

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

Accountable Care Collaborative Caseload by Regional Accountable Entity (RAE) and County of Residence														
RAE	County of Residence	Jul 2018	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	FY 2018-19 Average Monthly Enrollment
RAE 1²	Archuleta	3,283	3,291	3,285	3,234	3,187	3,150	3,171	3,188	3,191	-	-	-	2,415
	Delta	9,274	9,266	9,366	9,201	9,099	9,072	9,020	8,976	8,936	-	-	-	6,850
	Dolores	595	602	601	609	613	605	592	22,299	584	-	-	-	2,258
	Eagle	5,781	5,785	5,773	5,700	5,577	5,508	5,533	5,499	5,517	-	-	-	4,222
	Garfield	11,931	11,969	11,923	11,778	11,641	11,608	11,622	6,348	6,376	-	-	-	7,933
	Grand	1,688	1,661	1,651	1,629	1,584	1,520	1,509	1,499	1,472	-	-	-	1,184
	Gunnison	2,992	2,993	3,041	2,935	2,894	2,880	2,880	1,983	1,109	-	-	-	1,976
	Hinsdale	149	152	153	149	150	144	138	140	144	-	-	-	110
	Jackson	256	259	260	256	248	246	234	845	229	-	-	-	236
	La Plata	11,217	11,234	11,264	11,227	11,187	10,990	11,131	11,105	11,055	-	-	-	8,368
	Larimer	50,938	51,031	51,912	51,163	50,317	50,555	50,702	50,753	50,645	-	-	-	38,168
	Mesa	41,820	41,858	41,986	41,294	40,738	40,700	40,586	18,981	18,957	-	-	-	27,243
	Moffat	3,438	3,451	3,404	3,387	3,420	3,452	3,416	3,427	3,417	-	-	-	2,568
	Montezuma	8,958	8,979	9,146	9,057	9,026	8,973	8,992	9,000	8,855	-	-	-	6,749
	Montrose	11,441	11,373	11,350	11,070	10,938	10,959	10,945	5,488	5,530	-	-	-	7,425
	Ouray	682	661	654	640	637	631	639	624	5,854	-	-	-	919
	Pitkin	1,483	1,483	1,469	1,438	1,390	1,404	1,381	487	486	-	-	-	918
	Rio Blanco	1,253	1,242	1,229	1,221	1,206	1,213	1,223	611	22,278	-	-	-	2,623
	Routt	3,264	3,275	3,235	3,179	3,114	3,108	3,086	3,032	2,962	-	-	-	2,355
	San Juan	179	173	175	169	170	170	168	157	159	-	-	-	127
San Miguel	1,109	1,077	1,081	1,059	1,031	1,005	1,014	996	969	-	-	-	778	
Summit	3,208	3,204	3,172	3,105	3,037	2,952	2,909	2,898	2,834	-	-	-	2,277	
Residence Outside RAE Area ⁽¹⁾	16,085	15,847	10,421	10,277	10,192	10,905	11,029	23,812	19,834	-	-	-	10,700	
Total	191,024	190,866	186,551	183,777	181,396	181,750	181,920	182,148	181,393	-	-	-	138,402	
RAE 2	Cheyenne	445	448	426	415	402	381	380	387	384	-	-	-	305
	Kit Carson	1,804	1,819	1,811	1,825	1,828	1,826	1,818	1,826	1,824	-	-	-	1,365
	Lincoln	1,102	1,095	1,097	1,067	1,061	1,080	1,081	1,083	1,092	-	-	-	813
	Logan	4,493	4,471	4,386	4,340	4,340	4,269	4,336	4,338	4,297	-	-	-	3,273
	Morgan	7,890	7,946	7,902	7,816	7,663	7,533	7,630	7,633	7,497	-	-	-	5,793
	Phillips	929	936	914	928	947	930	907	894	896	-	-	-	690
	Sedgwick	647	646	639	633	637	624	629	648	634	-	-	-	478
	Washington	1,046	1,051	1,056	1,020	1,019	1,018	1,033	1,057	1,068	-	-	-	781
	Weld	55,824	55,836	54,512	52,968	52,253	50,159	50,110	50,268	49,961	-	-	-	39,324
	Yuma	2,375	2,365	2,380	2,396	2,445	2,384	2,386	2,378	2,384	-	-	-	1,791
	Residence Outside RAE Area ⁽¹⁾	15,049	15,089	12,867	13,180	13,489	12,536	12,430	12,306	12,361	-	-	-	9,942
	Total	91,604	91,702	87,990	86,588	86,084	82,740	82,740	82,818	82,398	-	-	-	64,555
RAE 3	Adams	101,766	103,179	104,495	101,410	97,940	97,451	98,439	100,223	100,063	-	-	-	75,414
	Arapahoe	105,712	106,701	106,267	102,826	100,455	99,569	100,291	102,070	101,915	-	-	-	77,151
	Douglas	18,317	18,805	23,443	23,411	22,094	22,397	22,667	23,137	23,168	-	-	-	16,453
	Elbert	2,495	2,509	2,559	2,460	2,408	2,329	2,356	2,375	2,352	-	-	-	1,820
	Residence Outside RAE Area ⁽¹⁾	40,879	44,537	46,634	47,312	49,719	52,220	51,410	52,536	51,803	-	-	-	36,421
Total	269,169	275,731	283,398	277,419	272,616	273,966	275,163	280,341	279,301	-	-	-	207,259	

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

Accountable Care Collaborative Caseload by Regional Accountable Entity (RAE) and County of Residence														
RAE	County of Residence	Jul 2018	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	FY 2018-19 Average Monthly Enrollment
RAE 4	Alamosa	6,701	6,675	6,578	6,555	6,528	6,509	6,507	6,487	6,389	-	-	-	4,911
	Baca	1,306	1,304	1,300	1,297	1,287	1,286	1,280	1,255	1,232	-	-	-	962
	Bent	1,652	1,649	1,643	1,610	1,608	1,613	1,617	1,634	1,629	-	-	-	1,221
	Chaffee	3,528	3,528	3,516	3,488	3,412	3,306	3,339	3,349	3,332	-	-	-	2,567
	Conejos	3,146	3,172	3,167	3,085	3,035	3,076	3,063	3,072	3,067	-	-	-	2,324
	Costilla	1,851	1,855	1,831	1,840	1,869	1,864	1,873	1,835	1,800	-	-	-	1,385
	Crowley	1,387	1,397	1,400	1,388	1,384	1,374	1,368	1,360	1,335	-	-	-	1,033
	Custer	840	836	815	797	793	792	784	783	773	-	-	-	601
	Fremont	11,914	11,994	12,443	12,492	12,380	12,310	12,274	12,151	12,057	-	-	-	9,168
	Huerfano	2,644	2,674	2,671	2,656	2,640	2,630	2,596	2,590	2,612	-	-	-	1,976
	Kiowa	349	357	359	350	342	347	355	354	352	-	-	-	264
	Lake	1,176	1,200	1,159	1,161	1,168	1,141	1,139	1,131	1,091	-	-	-	864
	Las Animas	5,484	5,489	5,501	5,479	5,492	5,470	5,512	5,453	5,457	-	-	-	4,111
	Mineral	139	146	143	149	142	140	143	145	139	-	-	-	107
	Otero	7,389	7,398	7,352	7,348	7,271	7,250	7,229	7,199	7,180	-	-	-	5,468
	Prowers	4,686	4,638	4,579	4,547	4,513	4,527	4,500	4,499	4,445	-	-	-	3,411
	Pueblo	64,740	64,851	64,506	63,883	63,279	62,841	62,512	62,589	62,400	-	-	-	47,633
	Rio Grande	4,081	4,073	4,067	4,031	4,017	3,982	4,012	4,025	3,978	-	-	-	3,022
Saguache	2,257	2,275	2,227	2,178	2,211	2,179	2,174	2,162	2,120	-	-	-	1,649	
Residence Outside RAE Area ⁽¹⁾	7,475	7,482	4,744	6,175	8,632	11,304	11,114	10,859	10,355	-	-	-	6,512	
Total	132,745	132,993	130,001	130,509	132,003	133,941	133,391	132,932	131,743	-	-	-	99,188	
RAE 5²	Denver	160,258	159,412	156,762	152,888	145,367	144,840	143,205	75,158	142,928	-	-	-	106,735
	Residence Outside RAE Area ⁽¹⁾	56,858	56,373	54,907	57,392	52,955	56,750	55,548	123,017	55,701	-	-	-	47,458
	Total	217,116	215,785	211,669	210,280	198,322	201,590	198,753	198,175	198,629	-	-	-	154,193
RAE 6	Boulder	40,406	40,463	42,646	41,983	41,278	41,047	40,760	41,008	40,704	-	-	-	30,858
	Broomfield	5,315	5,351	5,401	5,175	5,047	4,746	4,751	4,778	4,809	-	-	-	3,782
	Clear Creek	1,123	1,122	1,169	1,172	1,137	1,101	1,085	1,072	1,049	-	-	-	836
	Gilpin	794	786	831	825	806	798	814	820	827	-	-	-	608
	Jefferson	68,378	67,458	66,541	65,426	61,988	60,300	61,429	61,580	61,670	-	-	-	47,898
	Residence Outside RAE Area ⁽¹⁾	35,898	35,653	33,512	33,975	33,285	32,685	33,086	33,282	33,637	-	-	-	25,418
	Total	151,914	150,833	150,100	148,556	143,541	140,677	141,925	142,540	142,696	-	-	-	109,399
RAE 7	El Paso	161,727	162,857	171,032	168,695	165,124	161,915	160,237	158,149	152,618	-	-	-	121,863
	Park	1,663	1,658	1,672	1,549	1,517	1,356	1,308	1,236	1,212	-	-	-	1,098
	Teller	4,667	4,738	5,270	5,241	5,106	5,064	5,044	4,998	4,898	-	-	-	3,752
	Residence Outside RAE Area ⁽¹⁾	6,245	6,360	5,818	9,618	23,657	18,457	14,090	10,484	10,344	-	-	-	8,756
	Total	174,302	175,613	183,792	185,103	195,404	186,792	180,679	174,867	169,072	-	-	-	135,469
Total ACC Caseload		1,227,874	1,233,523	1,233,501	1,222,232	1,209,366	1,201,456	1,194,571	1,193,821	1,185,232	-	-	-	908,465

(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, as these are ACC initiatives under ACC Phase II.

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

FY 2018-19 Medicaid Behavioral Health Community Programs Expenditures			
	Total Expenditures	Behavioral Health Capitation Payments	Behavioral Health Fee for Service Payments
July 2018	\$47,932,195	\$47,852,128	\$80,067
August 2018	\$73,320,597	\$73,231,190	\$89,407
September 2018	\$48,156,641	\$48,021,470	\$135,171
October 2018	\$47,866,901	\$47,727,892	\$139,009
November 2018	\$47,200,634	\$47,112,482	\$88,152
December 2018	\$29,761,078	\$29,685,932	\$75,146
January 2019	\$51,063,148	\$51,020,053	\$43,095
February 2019	\$51,091,214	\$50,978,858	\$112,356
March 2019	\$55,239,055	\$55,102,640	\$136,415
April 2019	-	-	-
May 2019	-	-	-
June 2019	-	-	-
Total Year-to-Date Expenditures	\$451,631,463	\$450,732,645	\$898,818
Total Year-to-Date Appropriation	\$640,025,342	\$630,735,950	\$9,289,392
Remaining in Appropriation	\$188,393,879	\$180,003,305	\$8,390,574

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 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill), HB 18-1407 (Developmental Disabilities Stable Workforce), and SB 19-113 (Supplemental Bill).
- 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) Behavioral Health Capitation Payments expenditure for August 2018 is higher than usual due to Behavioral Health Incentive Payments made for payments associated with FY 2017-18.

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

FY 2018-19 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)	Colorado Community Health Alliance (RAE 6)	Colorado Community Health Alliance (RAE 7)	Other ¹
July	\$47,852,128	\$7,123,336	\$3,094,991	\$9,554,072	\$5,854,028	\$9,408,974	\$7,127,404	\$5,475,423	\$213,900
August	\$73,231,190	\$7,149,048	\$3,093,405	\$9,765,724	\$5,903,148	\$9,489,068	\$7,113,937	\$5,535,017	\$25,181,843
September	\$48,021,470	\$6,968,031	\$2,990,575	\$10,223,702	\$5,781,463	\$9,150,961	\$7,077,381	\$5,831,997	(\$2,640)
October	\$47,727,892	\$6,879,417	\$2,927,676	\$9,896,296	\$5,745,956	\$9,461,418	\$6,985,744	\$5,831,385	\$0
November	\$47,112,482	\$6,780,899	\$2,930,177	\$9,814,484	\$5,840,578	\$8,789,251	\$6,733,267	\$6,223,826	\$0
December	\$29,685,932	\$6,782,651	\$2,878,059	\$9,648,941	\$5,955,010	\$9,255,871	\$6,687,365	\$5,893,998	(\$17,415,963)
January	\$51,020,053	\$7,196,492	\$3,016,273	\$10,899,629	\$6,553,148	\$9,598,953	\$6,994,610	\$6,241,739	\$519,209
February	\$50,978,858	\$7,261,920	\$3,156,462	\$10,794,832	\$6,543,345	\$9,981,051	\$7,276,945	\$6,110,737	(\$146,434)
March	\$55,102,640	\$7,201,248	\$3,141,734	\$10,699,801	\$6,488,497	\$10,021,076	\$7,294,956	\$5,894,913	\$4,360,415
April		-	-	-	-	-	-	-	-
May		-	-	-	-	-	-	-	-
June		-	-	-	-	-	-	-	-
Total Year-to-Date Expenditures	\$450,732,645	\$63,343,042	\$27,229,352	\$91,297,481	\$54,665,173	\$85,156,623	\$63,291,609	\$53,039,035	\$12,710,330
Total Year-to-Date Appropriation	\$630,735,950								
Remaining in Appropriation	\$180,003,305								

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.

FY 2018-19 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)	Other
July	1,253,636	191,021	91,604	269,243	132,745	216,889	152,044	174,302	25,788
August	1,256,761	190,864	91,702	275,738	132,994	215,731	150,853	175,613	23,266
September	1,257,730	186,540	87,989	283,397	130,001	211,667	150,100	183,792	24,244
October	1,245,983	183,776	86,587	277,415	130,509	210,278	148,555	185,103	23,760
November	1,231,618	181,395	86,084	272,617	132,003	198,315	143,546	195,404	22,254
December	1,225,072	181,750	82,740	273,966	133,940	201,588	140,677	186,792	23,619
January	1,216,723	181,918	82,740	275,162	133,391	198,750	141,925	180,679	22,158
February	1,213,590	182,147	82,817	280,340	132,932	198,163	142,540	174,867	19,784
March	1,207,244	181,392	82,396	279,298	131,743	198,628	142,695	169,072	22,020
April									
May									
June									
Total Year-to-Date Average	1,234,262	184,534	86,073	276,353	132,251	205,557	145,882	180,625	22,988
Total Year-to-Date Appropriation	1,264,114								

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.

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

FY 2018-19 Children's Basic Health Plan Expenditures				
	Total Expenditures	Children Medical Expenditures	Children Dental Expenditures	Prenatal Medical Expenditures
July 2018	\$14,541,777	\$12,421,347	\$1,389,318	\$731,112
August 2018	\$15,296,502	\$12,990,696	\$1,452,711	\$853,095
September 2018	\$14,938,875	\$12,703,043	\$1,410,259	\$825,573
October 2018	\$15,101,072	\$12,862,842	\$1,423,773	\$814,457
November 2018	\$17,588,486	\$13,493,151	\$1,462,866	\$2,632,469
December 2018	\$19,566,127	\$15,214,350	\$1,452,712	\$2,899,065
January 2019	\$15,360,628	\$13,016,500	\$1,420,169	\$923,960
February 2019	\$15,949,734	\$13,523,563	\$1,493,145	\$933,027
March 2019	\$17,233,555	\$14,886,615	\$1,402,835	\$944,105
April 2019	-	-	-	-
May 2019	-	-	-	-
June 2019	-	-	-	-
Total Year-to-Date Expenditures	\$145,576,756	\$121,112,107	\$12,907,787	\$11,556,863
Total Year-to-Date Appropriation	\$202,287,729	\$175,131,378	\$18,933,726	\$8,222,625
Remaining in Appropriation	\$56,710,973			

Notes:

- 1) FY 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill) and SB 19-113 (Supplemental Bill).
- 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.

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

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						
May 2019						
June 2019						
FY 2018-19 Year-to-Date Average	53,627	26,914	80,542	332	573	905
FY 2018-19 Year-to-Date Appropriation	55,802	27,556	83,358	206	587	793
Monthly Growth	866	(347)	519	54	3	57
Monthly Growth Rate	1.67%	-1.22%	0.65%	15.70%	0.48%	5.91%
Over-the-year Growth	(3,430)	424	(3,006)	87	69	156
Over-the-year Growth Rate	-6.09%	1.53%	-3.58%	27.97%	12.45%	18.03%
Notes:						
1) All children's caseload reporting includes the CHP+ 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 2018-19 Medical Premiums Expenditure and Caseload Report

FY 2018-19 Division for Intellectual and Developmental Disabilities (DIDD) Waiver and State Only Program Caseload Per Month															
	Program	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019	FY 2018-19 Average YTD	FY 2018-19 Authorized Maximum Enrollment
DIDD	HCBS - Developmental Disabilities	5,356	5,438	5,524	5,606	5,672	5,725	5,789	5,856	5,927				5,655	6,338
	HCBS - Developmental Disabilities - Regional Centers	107	104	104	104	102	101	99	100	100				102	-
	HCBS - Supported Living Services	4,957	4,937	4,879	4,843	4,788	4,764	4,761	4,733	4,703				4,818	-
	HCBS - Children's Extensive Support	1,784	1,814	1,835	1,855	1,856	1,859	1,838	1,857	1,867				1,841	-
	HCBS - Children's Habilitation Residential Program	31	26	28	32	34	34	32	33	31				31	-
	HCBS - Targeted Case Management	12,235	12,319	12,370	12,440	12,452	12,483	12,519	12,579	12,629				12,447	-
	DIDD Subtotal	24,470	24,638	24,740	24,880	24,904	24,966	25,038	25,158	25,258				24,895	-
HCBS - DD Authorizations ⁽⁶⁾	Waiting List Authorizations	357	<30	39	38	38	<30	<30	<30	46					-
	Reserved Capacity Authorizations	<30	34	32	<30	<30	36	31	37	<30					-

FY 2018-19 Division for Intellectual and Developmental Disabilities (DIDD) Waiver and State Only Program Expenditure Per Month																
	Program	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019	FY 2018-19 YTD	FY 2018-19 Appropriation	Percent of FY 2018-19 Appropriation Spent
DIDD	HCBS - Developmental Disabilities	\$34,456,789	\$32,151,435	\$32,106,295	\$36,526,318	\$32,195,216	\$35,613,741	\$34,114,961	\$34,527,090	\$33,756,099	-	-	-	\$305,447,944	\$435,824,364	70.09%
	HCBS - Developmental Disabilities - Regional Centers	\$2,285,547	\$2,389,845	\$2,110,210	\$2,035,793	\$2,072,412	\$1,935,488	\$1,936,154	\$1,918,152	\$1,881,507				\$18,565,109	\$52,774,028	35.18%
	HCBS - Supported Living Services	\$6,026,330	\$4,918,405	\$5,010,811	\$6,082,072	\$4,648,891	\$5,626,937	\$4,594,942	\$4,720,001	\$5,259,678	-	-	-	\$46,888,067	\$78,617,567	59.64%
	HCBS - Children's Extensive Support	\$2,584,992	\$1,969,593	\$1,615,295	\$2,186,737	\$1,532,860	\$2,175,829	\$1,811,107	\$1,854,135	\$1,743,393	-	-	-	\$17,473,942	\$25,868,756	67.55%
	HCBS - Children's Habilitation Residential Program	\$82,358	\$55,767	\$139,754	\$149,168	\$122,151	\$136,159	\$165,590	\$174,077	\$168,667				\$1,193,690	\$2,515,319	47.46%
	HCBS - Targeted Case Management	\$2,623,830	\$2,664,452	\$2,578,723	\$3,676,659	\$2,830,693	\$2,807,528	\$2,111,417	\$2,631,038	\$2,419,528	-	-	-	\$24,343,868	\$32,733,043	74.37%
	Quality Assurance, Utilization Review and Supports Intensity Scale	\$0	\$427,730	\$447,630	\$201,496	\$663,870	\$0	\$863,637	\$443,005	\$445,147	-	-	-	\$3,492,515	\$5,500,281	63.50%
DIDD Subtotal	\$48,059,846	\$44,577,227	\$44,008,718	\$50,858,243	\$44,066,093	\$48,295,683	\$45,597,808	\$46,267,497	\$45,674,021	-	-	-	\$417,405,136	\$633,833,358	65.85%	
	Number of Weeks in Month	5	4	4	5	4	5	4	4	4	5	4	4	52		
	Expenditure Per Week	\$9,611,969	\$11,144,307	\$11,002,180	\$10,171,649	\$11,016,523	\$9,659,137	\$11,399,452	\$11,566,874	\$11,418,505	-	-	-	\$8,027,022		
State Only Programs	State Only Supported Living Services	\$0	\$611,708	\$611,708	\$611,708	\$611,708	\$0	\$1,223,416	\$611,708	\$569,714	-	-	-	\$4,851,671	\$8,030,743	60.41%
	Family Support Services Program	\$0	\$587,642	\$587,642	\$587,642	\$587,642	\$0	\$1,174,618	\$587,531	\$587,531	-	-	-	\$4,700,248	\$7,058,033	66.59%
	State Only Case Management	\$0	\$167,613	\$167,613	\$167,613	\$167,613	\$0	\$335,226	\$167,613	\$167,613	-	-	-	\$1,340,905	\$2,116,047	63.37%
	State Only Programs Subtotal	\$0	\$1,366,963	\$1,366,963	\$1,366,963	\$1,366,963	\$0	\$2,733,260	\$1,366,852	\$1,324,858	-	-	-	\$10,892,824	\$17,204,823	63.31%
	Expenditure Per Week	\$0	\$341,741	\$341,741	\$273,393	\$341,741	\$0	\$683,315	\$341,713	\$341,214	-	-	-	\$375,615		

Notes:
1) Historically, DIDD State Only Programs and QA/UR/SIS do not have expenditures in accounting period 1. They do, however, have historical expenditures in periods 02 through 13.
2) Family Support Services Program does not have a caseload appropriation. Services are rendered on a case-by-case and as needed basis.
3) FY 2018-19 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.
4) 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.
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.
6) 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.
7) Targeted Case Management enrollment was restated January 2019 to reflect the addition of CHRP clients beginning to receive services July 1, 2018.

**Department of Health Care Policy and Financing
FY 2018-19 Medical Premiums Expenditure and Caseload Report**

FY 2018-19 Old Age Pension State Medical Program Expenditures and Caseload		
	Total Expenditures	Old Age Pension State Medical Program Caseload
July	\$12,085	59
August	\$18,621	53
September	\$275	52
October	\$18,580	49
November	\$14,833	44
December	\$43,415	31
January	\$16,004	<30
February	\$7,990	<30
March	\$9,185	<30
April	-	
May	-	
June	-	
Total Year-to-Date	\$140,988	<100
Total Year-to-Date Appropriation	\$10,000,000	
Remaining in Appropriation	\$9,859,012	

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 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill) and SB 19-113 (Supplemental Bill).
- 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 2018-19 Medical Premiums Expenditure and Caseload Report**

FY 2018-19 Medicare Modernization Act State Contribution Payment Expenditures and Caseload		
	Total Expenditures	Medicare Modernization Act State Contribution Payment Caseload
July	\$12,149,609	76,142
August	\$12,089,087	76,742
September	\$12,259,758	75,201
October	\$12,190,863	76,209
November	\$12,104,551	75,398
December	\$12,268,552	78,663
January	\$12,135,907	78,723
February	\$12,595,673	77,981
March	\$12,818,159	
April	-	
May	-	
June	-	
Total Year-to-Date	\$110,612,158	76,882
Total Year-to-Date Appropriation	\$147,381,938	76,224
Remaining in Appropriation	\$36,769,780	

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 23 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 three 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 2018-19 Year-to-Date Appropriation includes HB 18-1322 (Long Bill) and SB 19-113 (Supplemental Bill).