

**Schedule 13**

**Funding Request for the FY 2017-18 Budget Cycle**

**Department of Health Care Policy and Financing**

**Request Title**

**R-08 MMIS Operations**

Dept. Approval By:

Josh Block



Supplemental FY 2016-17

Change Request FY 2017-18

OSPB Approval By:



Budget Amendment FY 2017-18

Summary Information	Fund	FY 2016-17		FY 2017-18	FY 2018-19
		Initial Appropriation	Supplemental Request	Base Request	Change Request Continuation
<b>Total</b>		\$124,932,128	\$0	\$99,029,028	\$23,524,339 \$5,707,012
FTE		400.3	0.0	400.6	1.8 2.0
<b>Total of All Line Items Impacted by Change Request</b>	GF	\$30,873,352	\$0	\$29,192,219	(\$566,430) (\$1,641,310)
	CF	\$8,940,225	\$0	\$7,882,030	\$2,953,578 \$2,253,604
	RF	\$2,046,908	\$0	\$2,052,003	(\$275,978) (\$281,168)
	FF	\$83,071,643	\$0	\$59,902,776	\$21,413,169 \$5,375,886

Line Item Information	Fund	FY 2016-17		FY 2017-18	FY 2018-19
		Initial Appropriation	Supplemental Request	Base Request	Change Request Continuation
<b>Total</b>		\$29,707,221	\$0	\$29,797,905	\$97,098 \$107,886
FTE		400.3	0.0	400.6	1.8 2.0
01. Executive Director's Office, (A) General Administration - Personal Services	GF	\$10,211,448	\$0	\$10,355,331	\$24,275 \$26,972
	CF	\$2,994,337	\$0	\$2,952,905	\$0 \$0
	RF	\$1,564,801	\$0	\$1,566,597	\$0 \$0
	FF	\$14,936,635	\$0	\$14,923,072	\$72,823 \$80,914
<b>Total</b>		\$3,434,070	\$0	\$3,673,458	\$15,854 \$15,854
FTE		0.0	0.0	0.0	0.0 0.0
01. Executive Director's Office, (A) General Administration - Health, Life, and Dental	GF	\$1,230,952	\$0	\$1,316,506	\$3,964 \$3,964
	CF	\$337,577	\$0	\$349,778	\$0 \$0
	RF	\$104,755	\$0	\$104,635	\$0 \$0
	FF	\$1,760,786	\$0	\$1,902,539	\$11,890 \$11,890

	<b>Total</b>	<b>\$55,072</b>	<b>\$0</b>	<b>\$57,991</b>	<b>\$165</b>	<b>\$184</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration - Short-term Disability	GF	\$20,569	\$0	\$21,560	\$42	\$46
	CF	\$4,588	\$0	\$4,796	\$0	\$0
	RF	\$1,393	\$0	\$1,365	\$0	\$0
	FF	\$28,522	\$0	\$30,270	\$123	\$138

	<b>Total</b>	<b>\$1,434,489</b>	<b>\$0</b>	<b>\$1,613,687</b>	<b>\$4,350</b>	<b>\$4,834</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration - Amortization Equalization Disbursement	GF	\$535,695	\$0	\$600,009	\$1,088	\$1,209
	CF	\$119,586	\$0	\$133,459	\$0	\$0
	RF	\$36,269	\$0	\$37,816	\$0	\$0
	FF	\$742,939	\$0	\$842,403	\$3,262	\$3,625

	<b>Total</b>	<b>\$1,419,546</b>	<b>\$0</b>	<b>\$1,613,662</b>	<b>\$4,350</b>	<b>\$4,834</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration - Supplemental Amortization Equalization Disbursement	GF	\$530,115	\$0	\$600,009	\$1,088	\$1,209
	CF	\$118,340	\$0	\$133,459	\$0	\$0
	RF	\$35,891	\$0	\$37,791	\$0	\$0
	FF	\$735,200	\$0	\$842,403	\$3,262	\$3,625

	<b>Total</b>	<b>\$2,058,538</b>	<b>\$0</b>	<b>\$2,035,574</b>	<b>\$11,306</b>	<b>\$1,900</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration - Operating Expenses	GF	\$930,699	\$0	\$923,963	\$2,827	\$475
	CF	\$71,522	\$0	\$67,439	\$0	\$0
	RF	\$10,449	\$0	\$10,449	\$0	\$0
	FF	\$1,045,868	\$0	\$1,033,723	\$8,479	\$1,425

	<b>Total</b>	<b>\$4,703,675</b>	<b>\$0</b>	<b>\$4,482,659</b>	<b>\$325,000</b>	<b>\$0</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration - Payments to OIT	GF	\$1,974,295	\$0	\$1,881,535	\$162,500	\$0
	CF	\$377,545	\$0	\$359,797	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$2,351,835	\$0	\$2,241,327	\$162,500	\$0

	<b>Total</b>	<b>\$7,200,237</b>	<b>\$0</b>	<b>\$7,755,477</b>	<b>(\$750,000)</b>	<b>(\$750,000)</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration - General	GF	\$2,047,261	\$0	\$2,512,381	(\$187,500)	(\$187,500)
Professional Services and Special Projects	CF	\$1,527,500	\$0	\$1,227,500	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$3,625,476	\$0	\$4,015,596	(\$562,500)	(\$562,500)

	<b>Total</b>	<b>\$35,564,820</b>	<b>\$0</b>	<b>\$35,440,753</b>	<b>\$5,501,405</b>	<b>\$6,553,488</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (C) Information Technology Contracts and Projects - MMIS	GF	\$7,211,028	\$0	\$7,384,952	(\$1,526,183)	(\$1,405,046)
Maintenance and Projects	CF	\$2,226,262	\$0	\$2,191,808	\$2,078,236	\$2,253,604
	RF	\$293,350	\$0	\$293,350	(\$281,542)	(\$281,168)
	FF	\$25,834,180	\$0	\$25,570,643	\$5,230,894	\$5,986,098

	<b>Total</b>	<b>\$26,916,597</b>	<b>\$0</b>	<b>\$0</b>	<b>\$18,546,779</b>	<b>\$0</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (C) Information Technology Contracts and Projects - MMIS	GF	\$2,615,317	\$0	\$0	\$1,034,108	\$0
Reprocurement Contracts	CF	\$701,879	\$0	\$0	\$875,342	\$0
	RF	\$0	\$0	\$0	\$5,564	\$0
	FF	\$23,599,401	\$0	\$0	\$16,631,765	\$0

	<b>Total</b>	<b>\$250,000</b>	<b>\$0</b>	<b>\$250,000</b>	<b>(\$135,000)</b>	<b>(\$135,000)</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (C) Information Technology Contracts and Projects - Fraud	GF	\$62,500	\$0	\$62,500	(\$34,155)	(\$34,155)
Detection Software Contract	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$187,500	\$0	\$187,500	(\$100,845)	(\$100,845)

	<b>Total</b>	<b>\$12,187,863</b>	<b>\$0</b>	<b>\$12,307,862</b>	<b>(\$96,968)</b>	<b>(\$96,968)</b>
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (E) Utilization and Quality Review Contracts - Professional Service	GF	\$3,503,473	\$0	\$3,533,473	(\$48,484)	(\$48,484)
Contracts	CF	\$461,089	\$0	\$461,089	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$8,223,301	\$0	\$8,313,300	(\$48,484)	(\$48,484)

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CF Letternote Text Revision Required? Yes  No  **If Yes, see attached fund source detail.**

RF Letternote Text Revision Required? Yes  No

FF Letternote Text Revision Required? Yes  No

Requires Legislation? Yes  No

Type of Request? Department of Health Care Policy and Financing Prioritized Request

Interagency Approval or Related Schedule 13s: OIT



### ***Cost and FTE***

- The Department requests a reduction of \$1,495,480 total funds, including a reduction of \$32,549 General Fund and 0.0 FTE in FY 2016-17; an increase of \$23,524,339 total funds, including a reduction of \$566,430 General Fund and an increase of 1.8 FTE in FY 2017-18; an increase of \$5,707,012 total funds, including a reduction of \$1,641,310 General Fund and an increase of 2.0 FTE in FY 2018-19; and, an increase of \$5,707,012 total funds, including a reduction of \$1,656,576 General Fund and an increase 2.0 FTE in FY 2019-20 and ongoing to address operational funding issues with the Medicaid Management Information System (MMIS).

### ***Current Program***

- The MMIS is an automated health care claims processing system and includes Fiscal Agent contracted services used to process and pay approximately \$9 billion in Colorado Medicaid health care claims. The Department is implementing a new state of the art MMIS system beginning March 1, 2017.

### ***Problem or Opportunity***

- Funding is needed to address changes in funding needs for the various MMIS vendors resulting from the postponement of the new MMIS launch date, originally scheduled to begin October 31, 2016, to March 1, 2017. Funding adjustments, largely federal funds, are needed to adequately maintain current functionality until the new MMIS is able to successfully assume those functions.
- Funding adjustments between the MMIS budget lines and non-MMIS budget lines are needed to assure funding is appropriately aligned with the expenditures, including redistribution of funding out of balance with current FFP rates and caseload distributions.
- Two time-limited contract management positions are scheduled to end in FY 2016-17. Staff resources in FY 2017-18 forward are needed to manage vendor negotiations for the three main MMIS vendors, provide oversight of deliverables, and assure successful implementation of new policies, federal regulations and state laws through automated system solutions.
- The Department does not have sufficient funding to provide notifications to clients to assure that Medicaid co-pays incurred by all individuals in a Medicaid household do not exceed an aggregate limit of five percent of the family's income to be implemented with the launch of the new MMIS system.

### ***Consequences of the Problem***

- Without adequate state funding for the new MMIS maintenance and operations and Fiscal Agent services, the Department would be unable to meet claims-processing, analytical, and reporting needs and be unable to utilize available technology and analytical services that would achieve better health care and reduce costs.
- Without sufficient contract management resources, federal funds are at risk due to insufficient oversight of vendor resources, non-compliance with federal and state laws and regulation, and project delays.

### ***Proposed Solution***

- The Department requests additional funding, largely federal funds, for the new MMIS to ensure claims processing continues without interruption; transition of the new MMIS system from the development phase to the operational phase; align distribution of funding with current FFP rates; support data analytics; comply with federal requirements regarding co-pay notifications and provide for sufficient contract management resources.



**COLORADO**  
 Department of Health Care  
 Policy & Financing

FY 2017-18 Funding Request | November 1, 2016

John W. Hickenlooper  
 Governor

Susan E. Birch  
 Executive Director

**Department Priority R-8**  
**Request Detail Medicaid Management Information System Operations Adjustment**

Summary of Incremental Funding Change for FY 2016-17	Total Funds	General Fund
MMIS Operations Adjustment	(\$1,495,480)	(\$32,549)

Summary of Incremental Funding Change for FY 2017-18	Total Funds	General Fund
MMIS Operations Adjustment	\$23,524,339	(\$566,430)

**Problem or Opportunity:**

The Department does not have sufficient resources to address issues affecting the funding for the Medicaid Management Information System (MMIS). The Colorado Medicaid Management Innovation and Transformation (COMMIT) Project is the reprocurement project for the operations, maintenance, and development of systems enhancements of the new MMIS. The new MMIS consists of three systems including the Colorado interChange, supporting the core MMIS functions and Fiscal Agent Services; the Business Intelligence and Data Management (BIDM) system, which will provide data analytics services; and the Pharmacy Benefit Management System (PBMS), which will provide Pharmacy management services. The overall goal is to replace the legacy MMIS and existing Fiscal Agent services with a service delivery model that is both flexible and adaptable, which will provide easy access to data and comprehensive reporting. The funding issues related to the current and new MMIS include funding needs resulting from the postponement of the launch date of the new MMIS, redistribution of line item funding due to caseload and federal match rate adjustments, additional costs for transitioning the new MMIS from the design and development phase to the operational phase, need for additional contract management staffing and additional mailings to comply with federal requirements to notify clients when they have reached their co-pay limits.

**Postponement of the New MMIS Launch**

The new MMIS was originally scheduled to launch beginning October 31, 2016, but the launch has been postponed by four months to March 1, 2017. The Department is committed to minimizing disruptions to providers and members; in October 2016, the Department determined that a full launch on the original Go Live date could result in severe disruptions to services. A premature launch of the system could result in delayed or incorrect payments for services, risk of federal sanctions due to non-compliance with

requirements, public backlash, lawsuits over unpaid claims and sky-rocketing spending to repair the deficiencies in the system and from over-paid claims.

The Department is committed to assuring that the implementation of the new system does not negatively impact Medicaid members and providers. Before the release of this functionality, testing and rigorous evaluation for readiness is being performed and closely monitored to ensure the highest quality standard is met before delivering the system. The Department gathered information through user acceptance testing (UAT) and feedback from staff, providers and vendors. After a thorough evaluation of the system readiness for implementation, the Department determined that the provider enrollment and revalidation process had not been completed and therefore the system and Fiscal Agent services were not ready to assume the required operational responsibilities. The Department will continue testing of the new system and provider revalidation. The current MMIS will remain fully functioning until the new system is implemented.

There are several factors that led to the need for a postponement until March 1, 2017.

- Out of approximately 50,000 providers, over 8,000 providers and billing agents had not yet completed the provider enrollment and revalidation process, which is federally required for all providers. Providers must complete this process to receive payment. Approximately 2,500 providers per month complete enrollment, therefore, a four month postponement should be sufficient time to complete the enrollment and revalidation of all providers.
- UAT had only occurred for high priority test cases. A postponed implementation will allow more time to thoroughly test all aspects of the system, and make corrections and improvements prior to the implementation.
- Many providers had not received training. The postponement will allow providers time become familiar with the many differences in business processes between the current system and the new MMIS.
- Claims processing functionality differs between the two systems. Additional testing is needed so that claims processed through the new system are correct and pay similar to the current system.
- More time was needed for external testing of compatibility with provider systems to exchange information with the new MMIS.
- The postponement provides more time for the Department to ensure that the new MMIS will be deemed fully operational from the implementation date after the CMS system certification process is complete. Federal MMIS Certification is a process by which the Centers for Medicare and Medicaid Services (CMS) validates that the system is designed to support the efficient and effective management of the Medicaid Program and that the State is in compliance with requirements set forth in applicable laws and regulations, as well as CMS guidance, manuals, and State Medicaid Director letters. This ensures the Department is able to meet conditions to obtain federal funding at an enhanced 75% FFP rate for operational activities, pursuant to 42 CFR § 433.117. Otherwise, federal reimbursement would only be available at the 50% FFP rate until the date the system can be deemed certified.

The Department is negotiating new terms for the current and new vendors to address the current costs due to the postponement. There are cost increases and changes in the balance of funding across the funding sources

based on the ability to attribute enhanced federal matching rates for certain costs. Now that the system will be entering the operational phase, the Department is needing funding adjustments ongoing to account for changes in business needs and match rates that are not manageable within framework of the existing appropriations.

#### BUS Operational Support

Continued business analyst and developer resources are needed to support the operations of the Benefits Utilization System (BUS) in FY 2017-18. The funding obtained for additional BUS support through the FY 2014-15 S-8, FY 2015-16 BA-8 Legacy Systems and Technology Support request ends in FY 2016-17. The BUS is a database application maintained by the Governor's Office of Information Technology (OIT) used to input and store client assessments that determine eligibility for Long Term Services and Supports (LTSS) programs. The BUS is also used to create and update LTSS client service plans that document client needs and are subsequently used to determine authorization of Medicaid payments. Service plans must be updated timely to ensure a client's authorized services match his or her changing needs. Finally, BUS data is used to fulfill federal reporting requirements of the Centers for Medicare and Medicaid Services (CMS) to maintain ongoing federal funding for the Department's home and community based services (HCBS) waivers. The Versatile Interoperable Technology Advancing Lives System (VITAL) system was scheduled to replace the BUS on November 1, 2016. As the Department is in the process of rolling out a new replacement MMIS, the VITAL system is a part of the MMIS anticipated to replace the operations of the BUS. However, due to a postponement in the implementation of the new MMIS, the full implementation of the VITAL system is expected to be moved until sometime late in FY 2017-18 to allow for sufficient user training and acceptance. Additionally, the Department is required to maintain information included in the BUS after the system is decommissioned for federal auditing purposes. The information must be properly secured to comply with federal security requirements, but currently does not meet the federal standard.

#### **Operational Funding True-up**

The Department is seeking to make adjustments to true-up funding of the MMIS for the operational phase of the system.

#### MMIS Maintenance and Projects True-Up

The Department's request includes an adjustments to the MMIS Maintenance and Projects line from FY 2016-17 through FY 2019-20 due to changes in FFP rates, caseload trends, and proportionate distribution among cash funds. If the share of funding among the various funding sources is not adjusted, the imbalance in funds could result in the Department not having sufficient funding to fully utilize the total funds appropriated in the line item. The "M" headnote that applies to the three MMIS line items further adds to the inflexibility in use of the funding and potential difficulties in funding expenditures.

The Children's Health Plan *Plus* (CHP+) program FFP rate has increased from 65% FFP, which is the rate on which the current funding is based, to a blended rate of 88.13% FFP in FY 2016-17, and 88% in FY 2017-18, FY 2018-19 and FY 2019-20. The Hospital Provider Fee (HPF) population is a much larger share of the caseload than proportionately represented in the appropriations supporting the MMIS procurement and new operating systems. Caseload and expenditures for the Old Age Pension Health and Medical Care Program, otherwise known as the OAP State Only (OAP-SO) Medical Care Program, have decreased significantly

primarily resulting from new provisions of SB 13-200, which expand Medicaid eligibility to clients previously eligible for OAP-SO. The MMIS budget lines have not been adjusted to correspond with this shift in OAP-SO caseload and costs. As a result the current amount of OAP Health and Medical Cash Funds in the MMIS budget lines is over represented in the appropriations.

Other Line Item Adjustments:

The new MMIS will assume functions that were previously done through other vendors for Nursing Facility Prior Authorization Requests (PARs), Electronic Surveillance Utilization Review System (ESURS), SmartPA - Automated Prior Authorizations. Funding for the statewide data analytics contractor has already been adjusted in the Department's FY 2016-17 R-1 Medical Services Premiums request. The Department's needs related to these functions is addressed through the overall operational funding true-up of the MMIS Maintenance and Projects line.

MMIS Reprocurement Line Items True-up

For the MMIS Reprocurement Contracted Staff line item, the FY 2016-17 total funds need is overstated; conversely, for the MMIS Reprocurement Contracts line item, the FY 2016-17 total funds need is understated. For the MMIS Reprocurement Contract Staff line item, the reason for the imbalance is that a significant portion of expenses for contracted staff, originally approved by CMS at a 90% FFP match rate, were changed by CMS to a 50% FFP match rate, resulting in more General Fund need and less federal fund need. The Department elected to partially forgo utilization of contract staff to stay within the General Fund appropriations, however, this has left the Department unable to expend a large amount of total funds, mostly federal funds to support the needs of the MMIS reprocurement functions through contract staff. Given the issues with the federal match and the current status of reprocurement related needs, the further funding of contract staff is no longer the optimal means of supporting the MMIS reprocurement needs.

For the MMIS Reprocurement Contracts line item, the reason for the imbalance is that expenses for Commercial Off The Shelf (COTS) software products, which receive a 75% FFP match rate, are lower than expected, while expenses for general system implementation, which receive a 90% FFP match rate, are higher than expected, resulting in overall less General Fund need and more federal funds need. As the Department is moving from the reprocurement and development phase to the operational phase of the new system, additional funding needs have become apparent that were not sufficiently included in the original funding request to support the current development needs.

After reassessment of the needs of both MMIS Reprocurement line items together, the Department has determined funding needs have shifted related to the purposes of the two lines with FY 2016-17, and some costs are shifting from FY 2016-17 to FY 2017-18 due to the postponement. Without adjustments to these two line items, the funding is not representative of the true needs associated with each line item purpose and not accurately represented within the two fiscal years.

**MMIS Contract Management FTE**

The Department currently has two time-limited contract management positions funded under the MMIS Reprocurement Contracted Staff line item. The positions were established in 2013 to support the COMMIT Project. The COMMIT Project is taking the Department from one contractor providing fiscal agent services and MMIS for claims processing to three contractors to provide fiscal agent services, claims processing,

pharmacy benefit management and business intelligence/data management. Contract monitoring is an essential part of the contracting process. Monitoring should ensure that contractors comply with the contract terms, performance expectations are achieved, and any problems are identified and resolved. The number of contracts and complexity of the contractual oversight requirements of the new MMIS system has significantly increased. The Department is not able to ensure effective and efficient management of the MMIS contracts without additional staff resources. Two permanent staff are needed to deal with the increases in contract activity, contractor management, complexity of contractual requirements, and impact of new regulatory requirements on an ongoing basis. Without two additional FTE to effectively manage contractual obligations of the three contractors responsible for the ongoing maintenance and operations of the new MMIS system, the success of system implementation on ongoing operations is at risk. The Department needs to assure that sufficient contract management resources are available for proper oversight of vendor resources to avoid contract errors, project delays, federal fiscal penalties and disallowances, and to assure accountability of the vendors for their contractual responsibilities.

### **Co-Pay Limit Notifications**

The legacy MMIS does not have the capability to notify clients and providers when the maximum aggregate co-pay limit has been reached. Section 42 CFR § 447.56 sets limitations on premiums and cost sharing. Medicaid co-pays incurred by all individuals in a Medicaid household must not exceed an aggregate limit of five percent of the family's income on either a monthly or quarterly basis, at the State's option. Colorado has selected monthly. Additionally, the Department must provide the following information to beneficiaries at the time of enrollment and at the time any change to cost sharing and premiums:

- Groups who are subject to premiums and cost sharing
- Amounts of co-pays
- Mechanisms for making payment of co-pays
- Consequence of not paying the co-pay
- List of hospitals, if any, that charge co-pays for non-emergency use of the emergency department, and,
- List of preferred drugs subject to the lower cost sharing.

States must make this information publically available as well. Providers will verify information at the point of service whether the patient has a co-payment. This can be accomplished through automated services through the new MMIS or through the Department's Fiscal Agent provider call center accessible to all Medicaid providers.

### ***Proposed Solution:***

The Department requests a reduction of \$1,495,480 total funds, including a reduction of \$32,549 General Fund and 0.0 FTE in FY 2016-17; an increase of \$23,524,339 total funds, including a reduction of \$566,430 General Fund and an increase of 1.8 FTE in FY 2017-18; \$5,707,012 total funds, including a reduction of \$1,641,310 General Fund and an increase of 2.0 FTE in FY 2018-19; and, \$5,707,012 total funds, including a reduction of \$1,656,576 General Fund and increase 2.0 FTE in FY 2019-20 and ongoing to address operational funding issues with the MMIS.

### **Postponement of the New MMIS Launch**

Government technology implementation projects have high rates of failure because the requirements tend to be complex and new to organizations, with far-reaching business implications and the ability to impact a variety of stakeholders. MMIS projects are large, complex, lengthy, expensive, and often political in nature. Numerous state Medicaid MMIS implementation projects have suffered highly visible failures and states have spent millions of dollars more to correct initial errors. The Department's postponement of the implementation of Colorado's new MMIS is essential to ensure a successful launch of the system. It is vital that the Department take the additional time to address the provider enrollment and revalidation process and continue testing the new system. This will allow the Department to avoid the risks and enormous cost increases experienced in other states.

It is critical that staff and providers are confident that an appropriate testing process has been completed and that results of the testing process are truly indicative of the system's performance in a production environment. The additional four months will allow the Department to further collaborate with its provider community to embrace and realize the benefits of the new system. The postponement provides providers more time to complete the enrollment and revalidation process, to receive comprehensive training, and prepare for the associated changes in their business processes. The request will adjust funding to achieve all the objectives of the MMIS operational needs including funding needs resulting from the postponement in implementation. The fiscal impact of this change is included in the Operation Funding True-up section below.

### **BUS Operational Support**

The Department requests \$325,000 total funds, including \$162,500 General Fund in FY 2017-18 to continue staff support of the BUS consistent with the funding currently appropriated in FY 2016-17 through the Payments to OIT line item. The Department is not anticipating the need for staff support in FY 2018-19. Department is seeking a cost effective means of providing support through time-limited staff resources. Based on OIT estimates, the funding would support one full-time ColdFusion Developer, one full-time Database Administrator, and one half-time Business Analyst to oversee the continued work of the BUS application and prepare for the transition to VITAL, plus \$4,205 for hardware and software licenses as needed. These resources would keep the BUS application operating and allow for continued development and security remediation. Since the BUS application must be extended due to the postponement of VITAL full implementation to allow for sufficient user training and acceptance, using time-limited staff is more cost effective than using contract staff to maintain the system until the VITAL system is fully operational.

### **Operational Funding True-up**

The Department requests to adjust the appropriations to provide better representation of federal matching funds based on current needs and federal approvals. Revisiting the makeup of the costs and appropriations provides an opportunity to assure appropriate and efficient use of state and federal funds and make sure that the new system is adequately funded. This request for the operational true-up of costs involves several components including funding redistribution of the three MMIS lines and several other line items with MMIS related funding to address current needs.

### MMIS Maintenance and Projects Line True-up

The request associated with true-up of funds in the MMIS Maintenance and Projects line is an increase of \$1,716,274 total funds, including an increase of \$1,267,940 General Fund in FY 2016-17; \$5,501,405 total funds, including a decrease of \$1,526,183 General Fund in FY 2017-18; \$6,556,488 total funds, including a reduction of \$1,405,046 General Fund in FY 2018-19; \$6,553,488 total funds, including a reduction of \$1,420,312 General Fund in FY 2019-20 and ongoing. The increase in total funds is largely federal funds.

The Children's Health Plan *Plus* (CHP+) will be adjusted to a blended rate of 88.13% FFP in FY 2016-17, and 88% rate in FY 2017-18 and ongoing. The Department adjustment for state share of costs to match CHP+ federal funds would be with Children's Basic Health Plan (CBHP) Trust funds and Hospital Provider Fee cash fund. The caseload for clients funded under Title XXI is forecasted to be 8.81% of the total caseload in FY 2017-18; 8.75% in FY 2018-19; and 8.72% in FY 2019-20 which includes the CHP+ caseload and the Medicaid caseload funded under Title XXI. Adjustments to Title XXI proportionate share of costs will be done in FY 2017-18 forward to allow time for approval of changes to cost allocation methodologies with CMS. The Department is proposing to align funding from the HPF cash fund for FY 2017-18 through FY 2019-20 with the proportionate share of costs based on the HPF caseload trends. However, because the HPF model has been finalized and approved for FY 2016-17, the Department is not proposing any changes to the current amount of HPF cash funds in the FY 2016-17 appropriation.

### Other Line Item Adjustments:

The Department requests a reduction of \$981,968 total funds, including a reduction of \$270,139 General Fund in FY 2017-18 and ongoing that is included in other non-MMIS line items for the Nursing Facility Prior Authorization Requests (PARs), the Electronic Surveillance Utilization Review System (ESURS), and the SmartPA (Automated Prior Authorizations) as those functions are included in the new MMIS, and therefore, the costs are included in the overall funding projections for the MMIS Maintenance and Projections line item in this request. As such the source of funding for these three specific operations in the existing line items is no longer needed.

These items include reductions of:

- \$96,968 (50% General Fund) for Nursing Facility Prior Authorization Requests (PARs) from the Professional Services Contracts line item.
- \$135,000 (25% General Fund) Electronic Surveillance Utilization Review System (ESURS) from the Fraud Detection Software Contract line item.
- \$750,000 (25% General Fund) SmartPA - Automated Prior Authorizations - from the General Professional Services Special Projects line item.

Funding has already been reduced for the Statewide Data Analytics Contract (SDAC) from the Medical Services Premiums line item by \$2,000,000 (50% General Fund) in FY 2016-17 and by \$3,000,000 (50% General Fund) in FY 2017-18 and ongoing through the FY 2016-17 R-1 Medical Services Premiums request.

### MMIS Reprocurement Line Item True-up

The Department requests a decrease of \$4,675,328 total funds, including a decrease of \$60,222 General Fund for FY 2016-17 to the MMIS Reprocurement Contracted Staff line item. The line item is eliminated in FY 2017-18.

The Department request an increase of \$1,463,374 total funds, including a decrease of \$1,240,267 General Fund to the MMIS Reprocurement Contracts line item for FY 2016-17; and funding in FY 2017-18 of \$18,546,779 total funds, including \$1,034,108 General Fund.

Taking the two line items together, this represents a net decrease of \$3,211,754 total funds, including a net decrease of \$1,300,489 General Fund for FY 2016-17; and an increase of \$18,546,779 total funds, including \$1,034,108 General Fund in FY 2017-18. The FY 2017-18 increase is largely federal funds at \$16,631,765 due to the 90% FFP available for the costs associated with the MMIS Reprocurement Contracts line. The requested adjustment would true-up the reprocurement line items with actual need, accounting for the change in federal match rate from 90% to 50% for contracted staff in the MMIS Reprocurement Contracted Staff line item and COTS software products at the 75% FFP rate and greater need for general system implementation at the 90% FFP rate in the MMIS Reprocurement Contracts line item. This requested adjustment would also true-up both line items to the new FY 2016-17 and FY 2017-18 CHP federal match rates.

### **MMIS Contract Management FTE**

The Department is requesting \$133,123 total funds, including \$33,284 General Fund and \$99,839 federal funds, and 1.8 FTE in FY 2017-18, and \$135,492 total funds, including \$33,875 General Fund and \$101,617 federal funds, and 2.0 FTE in FY 2018-19 and ongoing at the 75% FFP rate for the Personal Services costs and 50% FFP for associated Operating Expenses for contract management of the MMIS contracts. The Department currently has two time-limited contract management positions funded under the MMIS Reprocurement line item. Replacing these time-limited positions with permanent FTE is an important step in assuring that implementation and ongoing operations and management of the new MMIS. These staff would be required to maintain a unique level of knowledge and expertise in policy, systems, and operations that is needed to manage these contracts. The positions would serve as the point of contact for the Department on contractual matters and act as contractual liaison between Department staff and the vendors, ensuring timely handling of issues. With implementation of a new operating systems comes a certain amount of risk. These positions would have an instrumental role in mitigating deficits that might occur with implementation of the new system so that full certification of the new MMIS could occur within the earliest possible timeframe.

The current contract management staff resources are not sufficient to assume the increased responsibilities of the three main vendor contracts associated with the new MMIS. The positions would be responsible for managing the ongoing procurement processes related to the contracts, including contract modifications, development of solicitations, scopes of work, deliverables, performance measures and desired outcomes. These positions would also be responsible for monitoring the contractor progress and performance to ensure goods and services conform to the contract requirements; identifying potential problems and solutions or mitigations; reviewing invoices and authorizing payments consistent with the contract terms; arranging for contractor access to state facilities, equipment, data, staff, materials and information, as applicable; establishing reporting requirements; maintaining appropriate records; and participating in audits.

### **Co-Pay Limit Notifications**

The Department requests \$368,992 total funds, including \$179,119 General Fund (including an adjustment of \$69,241 to hold hospital provider fee cash funds at the current level), increase of \$1,103 cash funds, increase of \$111 reappropriated funds, and increase of \$188,659 federal funds in FY 2016-17; \$553,488 total funds, including an increase of \$152,292 General Fund, \$105,207 cash funds, \$166 reappropriated funds, and \$295,286 federal funds in FY 2017-18; and \$553,488 total funds, including an increase of \$150,958 General Fund, \$107,050 cash funds, \$166 reappropriated funds, and \$295,314 federal funds in FY 2018-19; \$553,488 total funds, including \$150,278 General Fund, \$107,714 cash funds, \$166 reappropriated funds, and \$295,330 federal funds in FY 2019-20 and ongoing. These amounts are included in the MMIS Maintenance and Projects Line True-up calculations. To provide client notices, the new MMIS, will utilize a systematic process to trigger both electronic and paper correspondence to Medicaid clients at enrollment when they have a co-pay, and when they have reached the five percent threshold for the month. The Department is required to comply with these requirements with the implementation of the new MMIS.

### ***Anticipated Outcomes:***

The funding to support operations of the new MMIS aligns with the Department's Performance Plan strategy to maximize use of the health information technology and data analytics, aligning these efforts with the broader health care system. The new MMIS system will advance the Department's analytic and business intelligence capabilities through a business intelligence and data management (BIDM) vendor, and include a pharmacy benefit management system (PBMS) providing claims processing, drug utilization review, and other pharmacy benefit management functionality. The Colorado interChange will improve our ability to process and pay medical claims, BIDM will enhance the Department's analytic and business intelligence capabilities, and PBMS will enable point of sale pharmacy claims processing, drug utilization review, and other functions. Capabilities of the new Colorado interChange system include a web-based member portal that can be accessed from a computer or mobile device. The portal advances the Department's strategy of increasing member engagement and health literacy by allowing members to easily keep their information up to date, find a doctor, and access important health information from their phone or computer.

### **Postponement of the New MMIS Launch**

The Department is striving to ensure that the implementation team maintains a strategic approach to keep the COMMIT project moving toward established objectives, including deploying business process improvements, achieving system certification and meeting regulatory requirements. Employing these strategies will lead to a higher probability of implementation success. While implementation of a new MMIS is a significant undertaking because of the nature of the projects and requirements, the implementation is expected to be successful with the right mitigation strategies including planning, leadership, system validation, project monitoring and metrics, business process transformation, and risk management. The funding changes will help position the state as a leader in the administration of Medicaid programs with the most advanced and effective tools available to benefit its citizens.

### **Operational Funding True-up, and Co-Pay Notifications**

The request seeks to align distribution of funding with current FFP rates, support data analytics, and to comply with federal requirements regarding co-pay notifications, which aligns with the Operational Excellence goal in the Department's Performance Plan to promote compliance with federal and state laws

and regulations. This request further aligns with the Department’s strategy to expand the use of value-based purchasing methods by utilizing data analytics tools to correlate high quality with low cost to inform selection of services and providers. The funding adjustments to align appropriations with changes in federal FFP rates, caseload trends, effective use of cash funds, and identification of true funding needs promotes financial stewardship.

### **MMIS Contract Management FTE**

This request aligns with the Department’s strategy to improve efficiency of business processes by supporting this strategy focus on efficient and effective administration of the Medicaid programs, including IT infrastructure. Systematically and efficiently managing the MMIS contracts through the entire contract life cycle is vital for maximizing operational and financial performance and minimizing risk. Having full-time staff will allow these staff to establish relationships with the contractors, become knowledgeable of the contracts and learn the contracting and contractor payment processes utilized by the Department. The Department would have close oversight and management of contractors’ performance which would result in compliance with the work requirements ensuring the Department receives all goods and/or services that the contractors are required to provide and a monitoring of expenditures. In addition, the Department would have staff that are knowledgeable of contractor management and Department processes which would increase operational effectiveness related to the various responsibilities of a contract manager.

<b><i>Assumptions and Calculations:</i></b>
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Detailed calculations of the request are provided in the attached appendix. A summary of the incremental request by fiscal year and by line item is shown in tables 1.1a through 1.1d, by the specific cash funds and reappropriated funds in tables 1.2a through 1.2d, and by the components of this request in tables 2a through 2d.

Some of the system costs are shifted between line items and between fiscal year FY 2016-17 and FY 2017-18 and are included in the calculations for each of the MMIS line items. Details of the Operational Funding True-up are shown in tables 3.1a through 3.4d. As the new MMIS enters its operational phase, the MMIS operational appropriation is needing funding adjustments to align to the new system and its ongoing operational expenses with current federal FFP rates, to make technical corrections in the funding for caseload related adjustments, and to address federal regulatory requirements that result in funding impacts. Additionally, changes in funding needs that have resulted from the postponement of the implementation of the system are included in these calculations.

Table 3.1a through 3.1d provides the true-up of funding for the MMIS Maintenance and Projects line item, including adjustments needed to extend the use of the legacy MMIS system and including the cost of the mailing related to federal co-pay requirements. The breakout in expenditures by the components of the system in total funds and by FFP method is provided in table 3.2. The specific breakout of costs of the Co-Pay Limit Notifications are provided in table 3.3. The FY 2016-17 impact is only for 4 months because the implementation of this requirement will align with the rollout of the new MMIS. The FY 2017-18 impact is for the full 12 months. The Department assumes that the requirement will not be applied retroactively. The co-pay is limited to 5% of the client’s adjusted income. When the client’s share of cost has reached the co-pay limit, a notice will be mailed to the client. Additionally, the Department assumes that the mailing cost

of the notice would be \$0.46 based on contractor quote. The average mailings for clients that are at the five percent co-pay maximum is 100,269 based on FY 2015-16 data. Tables 3.4a through 3.4d provides the various fund split percentages for all funding sources for FY 2016-17 through FY 2019-20.

The Department is also seeking to make adjustment between the MMIS Reprocurement line items because funding in both of the lines are not representative of the true needs. A large amount for federal funds remains in the MMIS Reprocurement Contract Staff line item due to CMS corrections to staffing FFP rates that did not qualify for the 90% enhanced match. The Department will implement some components that are not federally required to certify the system during the post go-live phase of the new MMIS system. Therefore, some of the costs for design and development in the MMIS reprocurement lines are shifted into FY 2017-18 in this request. Tables 4.1a through 4.1c shows the changes funding need to accommodate changes in the MMIS Reprocurement Contract Staff and MMIS Reprocurement Contracts lines to address current funding needs. The Department is seeking to include a large amount of federal funds to get the best use of enhanced match rates for the design and development of the system. Tables 4.2 and Table 5 if the FTE calculator for the two contract management FTE included in this request. The Department assumes that the contract management staff would be at the Contract Administrator III classification level, which is consistent with other contract management positions with similar responsibilities. Table 6 includes the other line item costs that are being reduced for functions that will be addressed through the new MMIS. Table 7 provides the detailed calculations for the estimated BUS cost needed for the transition to VITAL.

***Supplemental, 1331 Supplemental or Budget Amendment Criteria:***

Portions of this request require supplemental funding in FY 2016-17 and qualify as such by meeting the criteria of an unforeseen contingency.

The MMIS implementation was postponed for reasons that were not reasonably foreseeable by the Department. The Operational Funding True-up, and Co-Pay limit notifications portions of this request were unforeseen contingencies and as such each need specific funding adjustments for FY 2016-17. These adjustments would assure that the development, implementation, maintenance, and ongoing operation of the new MMIS will be successful.

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

<b>Table 1.1a: FY 2016-17 Request Summary by Line Item</b>								
<b>Row</b>	<b>Line Item</b>	<b>Total Funds</b>	<b>FTE</b>	<b>General Fund</b>	<b>Cash Funds</b>	<b>Reappropriated Funds</b>	<b>Federal Funds</b>	<b>Source</b>
A	<b>Total FY 2016-17 Request</b>	<b>(\$1,495,480)</b>	<b>0.0</b>	<b>(\$32,549)</b>	<b>(\$537,805)</b>	<b>(\$269,394)</b>	<b>(\$655,732)</b>	Sum Rows B through D
B	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$1,716,274	0.0	\$1,267,940	(\$306,876)	(\$279,984)	\$1,035,194	Table 1.2a Row B
C	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Reprocurement Contracted Staff	(\$4,675,328)	0.0	(\$60,222)	(\$37,064)	\$915	(\$4,578,957)	Table 1.2a Row C
D	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Reprocurement Contracts	\$1,463,574	0.0	(\$1,240,267)	(\$193,865)	\$9,675	\$2,888,031	Table 1.2a Row D

<b>Table 1.1b: FY 2017-18 Request Summary by Line Item</b>								
<b>Row</b>	<b>Line Item</b>	<b>Total Funds</b>	<b>FTE</b>	<b>General Fund</b>	<b>Cash Funds</b>	<b>Reappropriated Funds</b>	<b>Federal Funds</b>	<b>Source</b>
A	<b>Total FY 2017-18 Request</b>	<b>\$23,524,339</b>	<b>1.8</b>	<b>(\$566,430)</b>	<b>\$2,953,578</b>	<b>(\$275,978)</b>	<b>\$21,413,169</b>	Sum Rows B through M
B	(1) Executive Director's Office; (A) General Administration, Personal Services	\$97,098	1.8	\$24,275	\$0	\$0	\$72,823	Table 1.2b Row B
C	(1) Executive Director's Office; (A) General Administration, Health, Life, and Dental	\$15,854	0.0	\$3,964	\$0	\$0	\$11,890	Table 1.2b Row C
D	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$165	0.0	\$42	\$0	\$0	\$123	Table 1.2b Row D
E	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$4,350	0.0	\$1,088	\$0	\$0	\$3,262	Table 1.2b Row E
F	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$4,350	0.0	\$1,088	\$0	\$0	\$3,262	Table 1.2b Row F
G	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$11,306	0.0	\$2,827	\$0	\$0	\$8,479	Table 1.2b Row G
H	(1) Executive Director's Office; (A) General Administration, Payments to OIT	\$325,000	0.0	\$162,500	\$0	\$0	\$162,500	Table 1.2b Row H
I	(1) Executive Director's Office; (A) General Administration, General Professional Services	(\$750,000)	0.0	(\$187,500)	\$0	\$0	(\$562,500)	Table 1.2b Row I
J	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$5,501,405	0.0	(\$1,526,183)	\$2,078,236	(\$281,542)	\$5,230,894	Table 1.2b Row J
K	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Reprocurement Contracts	\$18,546,779	0.0	\$1,034,108	\$875,342	\$5,564	\$16,631,765	Table 1.2b Row K
L	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Fraud Detection Software Contract	(\$135,000)	0.0	(\$34,155)	\$0	\$0	(\$100,845)	Table 1.2b Row L
M	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$96,968)	0.0	(\$48,484)	\$0	\$0	(\$48,484)	Table 1.2b Row M

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

<b>Table 1.1c: FY 2018-19 Request Summary by Line Item</b>								
<b>Row</b>	<b>Line Item</b>	<b>Total Funds</b>	<b>FTE</b>	<b>General Fund</b>	<b>Cash Funds</b>	<b>Reappropriated Funds</b>	<b>Federal Funds</b>	<b>Source</b>
A	<b>Total FY 2018-19 Request</b>	<b>\$5,707,012</b>	<b>2.0</b>	<b>(\$1,641,310)</b>	<b>\$2,253,604</b>	<b>(\$281,168)</b>	<b>\$5,375,886</b>	Sum Rows B through K
B	(1) Executive Director's Office; (A) General Administration, Personal Services	\$107,886	2.0	\$26,972	\$0	\$0	\$80,914	Table 1.2c Row B
C	(1) Executive Director's Office; (A) General Administration, Health, Life, and Dental	\$15,854	0.0	\$3,964	\$0	\$0	\$11,890	Table 1.2c Row C
D	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$184	0.0	\$46	\$0	\$0	\$138	Table 1.2c Row D
E	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$3,625	Table 1.2c Row E
F	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$3,625	Table 1.2c Row F
G	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$1,900	0.0	\$475	\$0	\$0	\$1,425	Table 1.2c Row G
H	(1) Executive Director's Office; (A) General Administration, General Professional Services	(\$750,000)	0.0	(\$187,500)	\$0	\$0	(\$562,500)	Table 1.2c Row H
I	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$6,553,488	0.0	(\$1,405,046)	\$2,253,604	(\$281,168)	\$5,986,098	Table 1.2c Row I
J	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Fraud Detection Software Contract	(\$135,000)	0.0	(\$34,155)	\$0	\$0	(\$100,845)	Table 1.2c Row J
K	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$96,968)	0.0	(\$48,484)	\$0	\$0	(\$48,484)	Table 1.2c Row K

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

<b>Table 1.1d: FY 2019-20 and Ongoing Request Summary by Line Item</b>								
<b>Row</b>	<b>Line Item</b>	<b>Total Funds</b>	<b>FTE</b>	<b>General Fund</b>	<b>Cash Funds</b>	<b>Reappropriated Funds</b>	<b>Federal Funds</b>	<b>Source</b>
A	<b>Total FY 2019-20 and Ongoing Request</b>	<b>\$5,707,012</b>	<b>2.0</b>	<b>(\$1,656,576)</b>	<b>\$2,286,321</b>	<b>(\$281,146)</b>	<b>\$5,358,413</b>	Sum Rows B through K
B	(1) Executive Director's Office; (A) General Administration, Personal Services	\$107,886	2.0	\$26,972	\$0	\$0	\$80,914	Table 1.2d Row B
C	(1) Executive Director's Office; (A) General Administration, Health, Life, and Dental	\$15,854	0.0	\$3,964	\$0	\$0	\$11,890	Table 1.2d Row C
D	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$184	0.0	\$46	\$0	\$0	\$138	Table 1.2d Row D
E	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$3,625	Table 1.2d Row E
F	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$3,625	Table 1.2d Row F
G	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$1,900	0.0	\$475	\$0	\$0	\$1,425	Table 1.2d Row G
H	(1) Executive Director's Office; (A) General Administration, General Professional Services	(\$750,000)	0.0	(\$187,500)	\$0	\$0	(\$562,500)	Table 1.2d Row H
I	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$6,553,488	0.0	(\$1,420,312)	\$2,286,321	(\$281,146)	\$5,968,625	Table 1.2d Row I
J	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Fraud Detection Software Contract	(\$135,000)	0.0	(\$34,155)	\$0	\$0	(\$100,845)	Table 1.2d Row J
K	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$96,968)	0.0	(\$48,484)	\$0	\$0	(\$48,484)	Table 1.2d Row K

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

Row	Line Item	Total Funds	FTE	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
					Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	<b>Total FY 2016-17 Request</b>	<b>(\$1,495,480)</b>	<b>0.0</b>	<b>(\$32,549)</b>	<b>(\$537,790)</b>	<b>\$1,870</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$74,025)</b>	<b>(\$655,732)</b>	Sum Rows B through D
B	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$1,716,274	0.0	\$1,267,940	(\$304,991)	\$0	(\$1,885)	\$0	(\$195,369)	(\$84,615)	\$1,035,194	Table 2a Row A
C	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Reprocurement Contracted Staff	(\$4,675,328)	0.0	(\$60,222)	(\$37,064)	\$0	\$0	\$0	\$0	\$915	(\$4,578,957)	Table 2a Row B
D	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Reprocurement Contracts	\$1,463,574	0.0	(\$1,240,267)	(\$195,735)	\$1,870	\$0	\$0	\$0	\$9,675	\$2,888,031	Table 2a Row C

Row	Line Item	Total Funds	FTE	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
					Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	<b>Total FY 2017-18 Request</b>	<b>\$23,524,339</b>	<b>1.8</b>	<b>(\$566,430)</b>	<b>\$224,955</b>	<b>\$2,730,508</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$80,609)</b>	<b>\$21,413,169</b>	Sum Rows B through M
B	(1) Executive Director's Office; (A) General Administration, Personal Services	\$97,098	1.8	\$24,275	\$0	\$0	\$0	\$0	\$0	\$0	\$72,823	Table 5 Salary, PERA and Medicare
C	(1) Executive Director's Office; (A) General Administration, Health, Life, and Dental	\$15,854	0.0	\$3,964	\$0	\$0	\$0	\$0	\$0	\$0	\$11,890	Table 5 Health-Life-Dental
D	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$165	0.0	\$42	\$0	\$0	\$0	\$0	\$0	\$0	\$123	Table 5 Short Term Disability
E	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$4,350	0.0	\$1,088	\$0	\$0	\$0	\$0	\$0	\$0	\$3,262	Table 5 AED
F	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$4,350	0.0	\$1,088	\$0	\$0	\$0	\$0	\$0	\$0	\$3,262	Table 5 SAED
G	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$11,306	0.0	\$2,827	\$0	\$0	\$0	\$0	\$0	\$0	\$8,479	Table 5 Operating Expenses
H	(1) Executive Director's Office; (A) General Administration, Payments to OIT	\$325,000	0.0	\$162,500	\$0	\$0	\$0	\$0	\$0	\$0	\$162,500	Table 2b Row E
I	(1) Executive Director's Office; (A) General Administration, General Professional Services	(\$750,000)	0.0	(\$187,500)	\$0	\$0	\$0	\$0	\$0	\$0	(\$562,500)	Table 6 Row A
J	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$5,501,405	0.0	(\$1,526,183)	\$58,219	\$2,021,902	(\$1,885)	\$0	(\$195,369)	(\$86,173)	\$5,230,894	Table 2b Row A
K	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Reprocurement Contracts	\$18,546,779	0.0	\$1,034,108	\$166,736	\$708,606	\$0	\$0	\$0	\$5,564	\$16,631,765	Table 2b Row B
L	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Fraud Detection Software Contract	(\$135,000)	0.0	(\$34,155)	\$0	\$0	\$0	\$0	\$0	\$0	(\$100,845)	Table 6 Row B
M	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$96,968)	0.0	(\$48,484)	\$0	\$0	\$0	\$0	\$0	\$0	(\$48,484)	Table 6 Row C

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

Table 1.2c: FY 2018-19 Request Summary by Line Item												
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
					Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	<b>Total FY 2018-19 Request</b>	<b>\$5,707,012</b>	<b>2.0</b>	<b>(\$1,641,310)</b>	<b>\$70,650</b>	<b>\$2,184,839</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$85,799)</b>	<b>\$5,375,886</b>	Sum Rows B through K
B	(1) Executive Director's Office; (A) General Administration, Personal Services	\$107,886	2.0	\$26,972	\$0	\$0	\$0	\$0	\$0	\$0	\$80,914	Table 5 Salary, PERA and Medicare
C	(1) Executive Director's Office; (A) General Administration, Health, Life, and Dental	\$15,854	0.0	\$3,964	\$0	\$0	\$0	\$0	\$0	\$0	\$11,890	Table 5 Health-Life-Dental
D	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$184	0.0	\$46	\$0	\$0	\$0	\$0	\$0	\$0	\$138	Table 5 Short Term Disability
E	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$0	\$0	\$0	\$0	\$3,625	Table 5 AED
F	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$0	\$0	\$0	\$0	\$3,625	Table 5 SAED
G	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$1,900	0.0	\$475	\$0	\$0	\$0	\$0	\$0	\$0	\$1,425	Table 5 Operating Expenses
H	(1) Executive Director's Office; (A) General Administration, General Professional Services	(\$750,000)	0.0	(\$187,500)	\$0	\$0	\$0	\$0	\$0	\$0	(\$562,500)	Table 6 Row A
I	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$6,553,488	0.0	(\$1,405,046)	\$70,650	\$2,184,839	(\$1,885)	\$0	(\$195,369)	(\$85,799)	\$5,986,098	Table 2c Row A
J	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Fraud Detection Software Contract	(\$135,000)	0.0	(\$34,155)	\$0	\$0	\$0	\$0	\$0	\$0	(\$100,845)	Table 6 Row B
K	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$96,968)	0.0	(\$48,484)	\$0	\$0	\$0	\$0	\$0	\$0	(\$48,484)	Table 6 Row C

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

Table 1.2d: FY 2019-20 and Ongoing Request Summary by Line Item												
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
					Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	<b>Total FY 2019-20 and Ongoing Request</b>	<b>\$5,707,012</b>	<b>2.0</b>	<b>(\$1,656,576)</b>	<b>\$71,733</b>	<b>\$2,216,473</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$85,777)</b>	<b>\$5,358,413</b>	Sum Rows B through K
B	(1) Executive Director's Office; (A) General Administration, Personal Services	\$107,886	2.0	\$26,972	\$0	\$0	\$0	\$0	\$0	\$0	\$80,914	Table 5 Salary, PERA and Medicare
C	(1) Executive Director's Office; (A) General Administration, Health, Life, and Dental	\$15,854	0.0	\$3,964	\$0	\$0	\$0	\$0	\$0	\$0	\$11,890	Table 5 Health-Life-Dental
D	(1) Executive Director's Office; (A) General Administration, Short-term Disability	\$184	0.0	\$46	\$0	\$0	\$0	\$0	\$0	\$0	\$138	Table 5 Short Term Disability
E	(1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$0	\$0	\$0	\$0	\$3,625	Table 5 AED
F	(1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement	\$4,834	0.0	\$1,209	\$0	\$0	\$0	\$0	\$0	\$0	\$3,625	Table 5 SAED
G	(1) Executive Director's Office; (A) General Administration, Operating Expenses	\$1,900	0.0	\$475	\$0	\$0	\$0	\$0	\$0	\$0	\$1,425	Table 5 Operating Expenses
H	(1) Executive Director's Office; (A) General Administration, General Professional Services	(\$750,000)	0.0	(\$187,500)	\$0	\$0	\$0	\$0	\$0	\$0	(\$562,500)	Table 6 Row A
I	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Medicaid Management Information System Maintenance and Projects	\$6,553,488	0.0	(\$1,420,312)	\$71,733	\$2,216,473	(\$1,885)	\$0	(\$195,369)	(\$85,777)	\$5,968,625	Table 2d Row A
J	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Fraud Detection Software Contract	(\$135,000)	0.0	(\$34,155)	\$0	\$0	\$0	\$0	\$0	\$0	(\$100,845)	Table 6 Row B
K	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	(\$96,968)	0.0	(\$48,484)	\$0	\$0	\$0	\$0	\$0	\$0	(\$48,484)	Table 6 Row C

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

Table 2a: FY 2016-17 Request Summary by Component											
Row	Component	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	MMIS Maintenance and Projects True-Up	\$1,716,274	\$1,267,940	(\$304,991)	\$0	(\$1,885)	\$0	(\$195,369)	(\$84,615)	\$1,035,194	Table 3.1a Row N
B	MMIS Reprocurement Contracted Staff True-Up	(\$4,675,328)	(\$60,222)	(\$37,064)	\$0	\$0	\$0	\$0	\$915	(\$4,578,957)	Table 4.1a Row L
C	MMIS Reprocurement Contracts True-Up	\$1,463,574	(\$1,240,267)	(\$195,735)	\$1,870	\$0	\$0	\$0	\$9,675	\$2,888,031	Table 4.1b Row L
D	<b>Total FY 2016-17 Request</b>	<b>(\$1,495,480)</b>	<b>(\$32,549)</b>	<b>(\$537,790)</b>	<b>\$1,870</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$74,025)</b>	<b>(\$655,732)</b>	Sum Rows A through C

Table 2b: FY 2017-18 Request Summary by Component											
Row	Component	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	MMIS Maintenance and Projects True-Up	\$5,501,405	(\$1,526,183)	\$58,219	\$2,021,902	(\$1,885)	\$0	(\$195,369)	(\$86,173)	\$5,230,894	Table 3.1b Row I
B	MMIS Reprocurement Contracts True-Up	\$18,546,779	\$1,034,108	\$166,736	\$708,606	\$0	\$0	\$0	\$5,564	\$16,631,765	Table 4.1c Row G
C	Contract Administrator III FTE	\$133,123	\$33,284	\$0	\$0	\$0	\$0	\$0	\$0	\$99,839	Sum Table 1.2b Rows B through G
D	Adjustment of Other Line Items	(\$981,968)	(\$270,139)	\$0	\$0	\$0	\$0	\$0	\$0	(\$711,829)	Sum Table 1.2b Rows I, L, and M
E	Maintain BUS Support at OIT	\$325,000	\$162,500	\$0	\$0	\$0	\$0	\$0	\$0	\$162,500	Table 7 Row E
F	<b>Total FY 2017-18 Request</b>	<b>\$23,524,339</b>	<b>(\$566,430)</b>	<b>\$224,955</b>	<b>\$2,730,508</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$80,609)</b>	<b>\$21,413,169</b>	Sum Rows A through E

Table 2c: FY 2018-19 Request Summary by Component											
Row	Component	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	MMIS Maintenance and Projects True-Up	\$6,553,488	(\$1,405,046)	\$70,650	\$2,184,839	(\$1,885)	\$0	(\$195,369)	(\$85,799)	\$5,986,098	Table 3.1c Row I
B	Contract Administrator III FTE	\$135,492	\$33,875	\$0	\$0	\$0	\$0	\$0	\$0	\$101,617	Sum Table 1.2c Rows B through G
C	Adjustment of Other Line Items	(\$981,968)	(\$270,139)	\$0	\$0	\$0	\$0	\$0	\$0	(\$711,829)	Sum Table 1.2c Rows H, J, and K
D	<b>Total FY 2018-19 Request</b>	<b>\$5,707,012</b>	<b>(\$1,641,310)</b>	<b>\$70,650</b>	<b>\$2,184,839</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$85,799)</b>	<b>\$5,375,886</b>	Sum Rows A through C

Table 2d: FY 2019-20 and Ongoing Request Summary by Component											
Row	Component	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
A	MMIS Maintenance and Projects True-Up	\$6,553,488	(\$1,420,312)	\$71,733	\$2,216,473	(\$1,885)	\$0	(\$195,369)	(\$85,777)	\$5,968,625	Table 3.1d Row I
B	Contract Administrator III FTE	\$135,492	\$33,875	\$0	\$0	\$0	\$0	\$0	\$0	\$101,617	Sum Table 1.2d Rows B through G
C	Adjustment of Other Line Items	(\$981,968)	(\$270,139)	\$0	\$0	\$0	\$0	\$0	\$0	(\$711,829)	Sum Table 1.2d Rows H, J, and K
D	<b>Total FY 2019-20 and Ongoing Request</b>	<b>\$5,707,012</b>	<b>(\$1,656,576)</b>	<b>\$71,733</b>	<b>\$2,216,473</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$85,777)</b>	<b>\$5,358,413</b>	Sum Rows A through C

R-8 Medicaid Management Information System Operations Adjustment  
Appendix A: Assumptions and Calculations

Table 3.1a: FY 2016-17 MMIS Maintenance and Projects True-Up												
Row	Item	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Calculated FFP	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund			
<b>FY 2016-17 Spending Authority</b>												
A	FY 2016-17 Long Bill Plus Special Bills	\$35,564,820	\$7,211,028	\$304,991	\$1,800,106	\$1,885	\$119,280	\$195,369	\$97,981	\$25,834,180	72.64%	HB 16-1405 Long Bill Appropriation Plus Special Bills
B	FY 2015-16 Roll-Forward Funding	\$8,634,941	\$1,044,676	\$254,560	\$333,564	\$0	\$515,775	\$0	\$0	\$6,486,366	75.12%	CORE Final FY 2015-16 Unexpended Funds
C	<b>Total Spending Authority</b>	<b>\$44,199,761</b>	<b>\$8,255,704</b>	<b>\$559,551</b>	<b>\$2,133,670</b>	<b>\$1,885</b>	<b>\$635,055</b>	<b>\$195,369</b>	<b>\$97,981</b>	<b>\$32,320,546</b>	<b>73.12%</b>	Sum Rows A and B
<b>FY 2016-17 Estimated Expenditures</b>												
D	75/25 MMIS Operations	\$41,248,691	\$6,141,518	\$123,334	\$3,881,914	\$0	\$0	\$0	\$12,375	\$31,089,550	75.37%	Table 3.2 Row M, Fund Splits from Table 3.4a Row H
E	50/50 MMIS Operations	\$3,303,832	\$983,815	\$9,878	\$619,964	\$0	\$0	\$0	\$991	\$1,689,184	51.13%	Table 3.2 Row Y, Fund Splits from Table 3.4a Row L
F	Provider Enrollment Screenings	\$635,055	\$0	\$0	\$0	\$0	\$635,055	\$0	\$0	\$0	0.00%	Table 3.2 Row AA
G	ACC-Medicare/Medicaid Program Quality Metrics	\$306,082	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$306,082	100.00%	Table 3.2 Row AB
H	Special Bills Projects	\$301,027	\$12,850	\$0	\$17,253	\$0	\$0	\$0	\$0	\$270,924	90.00%	Table 3.2 Row AC
I	<b>Total Estimated Expenditures</b>	<b>\$45,794,687</b>	<b>\$7,138,183</b>	<b>\$133,212</b>	<b>\$4,519,131</b>	<b>\$0</b>	<b>\$635,055</b>	<b>\$0</b>	<b>\$13,366</b>	<b>\$33,355,740</b>	<b>72.84%</b>	Sum Rows D through H
<b>Technical Adjustments</b>												
J	Hospital Provider Fee Adjustment	\$0	\$2,385,461	\$0	(\$2,385,461)	\$0	\$0	\$0	\$0	\$0	N/A	No additional HPF Cash Fund is requested because the HPF funding model has been determined for FY 2016-17
K	Roll Forward Reversion	\$121,348	\$0	\$121,348	\$0	\$0	\$0	\$0	\$0	\$0	N/A	Row B - Row I CBHP funds only (A partial reversion of roll forward funds is requested because roll forward amounts cannot be decreased through the budget process)
L	<b>Total Technical Adjustments</b>	<b>\$121,348</b>	<b>\$2,385,461</b>	<b>\$121,348</b>	<b>(\$2,385,461)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>N/A</b>	Sum Rows J and K
M	<b>Total Estimated Final Expenditure</b>	<b>\$45,916,035</b>	<b>\$9,523,644</b>	<b>\$254,560</b>	<b>\$2,133,670</b>	<b>\$0</b>	<b>\$635,055</b>	<b>\$0</b>	<b>\$13,366</b>	<b>\$33,355,740</b>	<b>72.65%</b>	Sum Rows I and L
N	<b>TOTAL FY 2016-17 REQUEST</b>	<b>\$1,716,274</b>	<b>\$1,267,940</b>	<b>(\$304,991)</b>	<b>\$0</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$84,615)</b>	<b>\$1,035,194</b>	<b>N/A</b>	Row M - Row C
O	<b>FY 2016-17 Revised Appropriation</b>	<b>\$37,281,094</b>	<b>\$8,478,968</b>	<b>\$0</b>	<b>\$1,800,106</b>	<b>\$0</b>	<b>\$119,280</b>	<b>\$0</b>	<b>\$13,366</b>	<b>\$26,869,374</b>	<b>N/A</b>	Sum Rows A and N

Table 3.1b: FY 2017-18 MMIS Maintenance and Projects True-Up												
Row	Item	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Calculated FFP	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund			
<b>FY 2017-18 Spending Authority</b>												
A	FY 2017-18 Base Request	\$35,440,753	\$7,384,952	\$295,606	\$1,772,374	\$1,885	\$121,943	\$195,369	\$97,981	\$25,570,643	72.15%	November 1, 2016 Submission (includes Special Bills)
B	<b>Total Estimated Spending Authority</b>	<b>\$35,440,753</b>	<b>\$7,384,952</b>	<b>\$295,606</b>	<b>\$1,772,374</b>	<b>\$1,885</b>	<b>\$121,943</b>	<b>\$195,369</b>	<b>\$97,981</b>	<b>\$25,570,643</b>	<b>72.15%</b>	Row A
<b>FY 2017-18 Estimated Expenditures</b>												
C	75/25 MMIS Operations	\$38,261,767	\$5,264,054	\$343,973	\$3,514,343	\$0	\$0	\$0	\$11,479	\$29,127,918	76.13%	Table 3.2 Row M, Fund Splits from Table 3.4b Row H
D	50/50 MMIS Operations	\$1,095,855	\$301,525	\$9,852	\$199,511	\$0	\$0	\$0	\$329	\$584,638	53.35%	Table 3.2 Row Y, Fund Splits from Table 3.4b Row L
E	Provider Enrollment Screenings	\$121,943	\$0	\$0	\$0	\$0	\$121,943	\$0	\$0	\$0	0.00%	Table 3.2 Row AA
F	ACC-Medicare/Medicaid Program Quality Metrics	\$270,080	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$270,080	100.00%	Table 3.2 Row AB
G	Special Bill Projects (various FFP rates)	\$1,192,513	\$293,190	\$0	\$80,422	\$0	\$0	\$0	\$0	\$818,901	68.67%	Table 3.2 Row AC
H	<b>Total Estimated Expenditures</b>	<b>\$40,942,158</b>	<b>\$5,858,769</b>	<b>\$353,825</b>	<b>\$3,794,276</b>	<b>\$0</b>	<b>\$121,943</b>	<b>\$0</b>	<b>\$11,808</b>	<b>\$30,801,537</b>	<b>75.23%</b>	Sum Rows C through G
I	<b>TOTAL FY 2017-18 REQUEST</b>	<b>\$5,501,405</b>	<b>(\$1,526,183)</b>	<b>\$58,219</b>	<b>\$2,021,902</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$86,173)</b>	<b>\$5,230,894</b>	<b>N/A</b>	Row H - Row B
J	<b>FY 2017-18 Revised Appropriation</b>	<b>\$40,942,158</b>	<b>\$5,858,769</b>	<b>\$353,825</b>	<b>\$3,794,276</b>	<b>\$0</b>	<b>\$121,943</b>	<b>\$0</b>	<b>\$11,808</b>	<b>\$30,801,537</b>	<b>N/A</b>	Sum Rows B and I

Table 3.1c: FY 2018-19 MMIS Maintenance and Projects True-Up												
Row	Item	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Calculated FFP	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund			
<b>FY 2018-19 Spending Authority</b>												
A	FY 2018-19 Base Request	\$35,078,715	\$7,348,842	\$295,606	\$1,773,666	\$1,885	\$121,943	\$195,369	\$97,981	\$25,243,423	71.96%	FY 2018-19 Continuation Request, including Special Bills
B	<b>Total Estimated Spending Authority</b>	<b>\$35,078,715</b>	<b>\$7,348,842</b>	<b>\$295,606</b>	<b>\$1,773,666</b>	<b>\$1,885</b>	<b>\$121,943</b>	<b>\$195,369</b>	<b>\$97,981</b>	<b>\$25,243,423</b>	<b>71.96%</b>	Row A
<b>FY 2018-19 Estimated Expenditures</b>												
C	75/25 MMIS Operations	\$39,508,930	\$5,387,833	\$356,371	\$3,674,726	\$0	\$0	\$0	\$11,853	\$30,078,147	76.13%	Table 3.2 Row M, Fund Splits from Table 3.4c Row H
D	50/50 MMIS Operations	\$1,095,855	\$298,883	\$9,885	\$202,065	\$0	\$0	\$0	\$329	\$584,693	53.35%	Table 3.2 Row Y, Fund Splits from Table 3.4c Row L
E	Provider Enrollment Screenings	\$121,943	\$0	\$0	\$0	\$0	\$121,943	\$0	\$0	\$0	0.00%	Table 3.2 Row AA
F	ACC-Medicare/Medicaid Program Quality Metrics	\$75,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$75,000	100.00%	Table 3.2 Row AB
G	Special Bills Projects	\$830,475	\$257,080	\$0	\$81,714	\$0	\$0	\$0	\$0	\$491,681	59.20%	Table 3.2 Row AC
H	<b>Total Estimated Expenditures</b>	<b>\$41,632,203</b>	<b>\$5,943,796</b>	<b>\$366,256</b>	<b>\$3,958,505</b>	<b>\$0</b>	<b>\$121,943</b>	<b>\$0</b>	<b>\$12,182</b>	<b>\$31,229,521</b>	<b>75.01%</b>	Sum Rows C through G
I	<b>TOTAL FY 2018-19 REQUEST</b>	<b>\$6,553,488</b>	<b>(\$1,405,046)</b>	<b>\$70,650</b>	<b>\$2,184,839</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$85,799)</b>	<b>\$5,986,098</b>	<b>N/A</b>	Row H - Row B
J	<b>FY 2018-19 Revised Appropriation</b>	<b>\$41,632,203</b>	<b>\$5,943,796</b>	<b>\$366,256</b>	<b>\$3,958,505</b>	<b>\$0</b>	<b>\$121,943</b>	<b>\$0</b>	<b>\$12,182</b>	<b>\$31,229,521</b>	<b>N/A</b>	Sum Rows B and I

Table 3.1d: FY 2019-20 and Ongoing MMIS Maintenance and Projects True-Up												
Row	Item	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	Calculated FFP	Source
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund			
<b>Estimated FY 2019-20 Spending Authority</b>												
A	FY 2019-20 Base Request	\$35,078,715	\$7,348,842	\$295,606	\$1,773,666	\$1,885	\$121,943	\$195,369	\$97,981	\$25,243,423	71.96%	FY 2019-20 Continuation Request, including Special Bills
B	<b>Total Estimated Spending Authority</b>	<b>\$35,078,715</b>	<b>\$7,348,842</b>	<b>\$295,606</b>	<b>\$1,773,666</b>	<b>\$1,885</b>	<b>\$121,943</b>	<b>\$195,369</b>	<b>\$97,981</b>	<b>\$25,243,423</b>	<b>71.96%</b>	Row A
<b>FY 2019-20 Estimated Expenditures</b>												
C	75/25 MMIS Operations	\$39,583,930	\$5,373,914	\$357,443	\$3,705,056	\$0	\$0	\$0	\$11,875	\$30,135,642	76.13%	Table 3.2 Row M, Fund Splits from Table 3.4d Row H
D	50/50 MMIS Operations	\$1,095,855	\$297,536	\$9,896	\$203,369	\$0	\$0	\$0	\$329	\$584,725	53.36%	Table 3.2 Row Y, Fund Splits from Table 3.4d Row L
E	Provider Enrollment Screenings	\$121,943	\$0	\$0	\$0	\$0	\$121,943	\$0	\$0	\$0	0.00%	Table 3.2 Row AA
F	ACC-Medicare/Medicaid Program Quality Metrics	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	100.00%	Table 3.2 Row AB
G	Special Bills Projects	\$830,475	\$257,080	\$0	\$81,714	\$0	\$0	\$0	\$0	\$491,681	59.20%	Table 3.2 Row AC
H	<b>Total Estimated Expenditures</b>	<b>\$41,632,203</b>	<b>\$5,928,530</b>	<b>\$367,339</b>	<b>\$3,990,139</b>	<b>\$0</b>	<b>\$121,943</b>	<b>\$0</b>	<b>\$12,204</b>	<b>\$31,212,048</b>	<b>74.97%</b>	Sum Rows C through G
I	<b>TOTAL FY 2019-20 AND ONGOING REQUEST</b>	<b>\$6,553,488</b>	<b>(\$1,420,312)</b>	<b>\$71,733</b>	<b>\$2,216,473</b>	<b>(\$1,885)</b>	<b>\$0</b>	<b>(\$195,369)</b>	<b>(\$85,777)</b>	<b>\$5,968,625</b>	<b>N/A</b>	Row H - Row B
J	<b>FY 2019-20 Revised Appropriation</b>	<b>\$41,632,203</b>	<b>\$5,928,530</b>	<b>\$367,339</b>	<b>\$3,990,139</b>	<b>\$0</b>	<b>\$121,943</b>	<b>\$0</b>	<b>\$12,204</b>	<b>\$31,212,048</b>	<b>N/A</b>	Sum Rows B and I

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<b>Table 3.2: MMIS Maintenance and Projects</b>						
<b>FY 2016-17 through FY 2019-20 Estimated Expenditures</b>						
<b>Row</b>	<b>Item</b>	<b>FY 2016-17</b>	<b>FY 2017-18</b>	<b>FY 2018-19</b>	<b>FY 2019-20</b>	<b>Source</b>
<b>75/25 MMIS Operations</b>						
<i>Legacy System</i>						
A	Legacy MMIS - Base Operations	\$21,146,210	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
B	Legacy MMIS - Close-Out Operations	\$5,028,714	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
C	Legacy MMIS - Provider Reenrollment	\$525,128	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
D	Legacy Web Portal - Base Operations	\$184,860	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
E	Legacy Web Portal - Close-Out Operations	\$46,215	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
F	<b>Subtotal</b>	<b>\$26,931,127</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	Sum Rows A through D
<i>New System</i>						
G	interChange - Base Operations	\$9,430,407	\$18,898,508	\$24,726,180	\$24,801,180	Provider Original Contract and 4 Month Negotiated Extension Funding
I	PBMS - Base Operations	\$1,000,000	\$3,162,500	\$3,000,000	\$3,000,000	Provider Original Contract and 4 Month Negotiated Extension Funding
J	BIDM - Base Operations	\$3,887,157	\$16,200,759	\$11,782,750	\$11,782,750	Provider Original Contract and 4 Month Negotiated Extension Funding
L	<b>Subtotal</b>	<b>\$14,317,564</b>	<b>\$38,261,767</b>	<b>\$39,508,930</b>	<b>\$39,583,930</b>	Sum Rows G through J
M	<b>Total 75/25 MMIS Operations</b>	<b>\$41,248,691</b>	<b>\$38,261,767</b>	<b>\$39,508,930</b>	<b>\$39,583,930</b>	Sum Rows F and L
<b>50/50 MMIS Operations</b>						
<i>Legacy System</i>						
N	Legacy MMIS - Base Postage	\$534,211	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
O	Legacy MMIS - Close-Out Postage	\$127,039	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
P	Legacy MMIS - Base PARs	\$896,794	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
Q	Legacy MMIS - Close-Out PARs	\$213,264	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
R	<b>Subtotal</b>	<b>\$1,771,308</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	Sum Rows N through Q
<i>New System</i>						
S	interChange - Base Postage	\$231,184	\$462,367	\$462,367	\$462,367	Provider Original Contract and 4 Month Negotiated Extension Funding
T	interChange - Overlap Operations with Legacy MMIS	\$328,000	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
U	PBMS - Base Postage	\$26,668	\$80,000	\$80,000	\$80,000	Project Estimate
V	PBMS - Overlap Operations with Legacy MMIS	\$762,176	\$0	\$0	\$0	Provider Original Contract and 4 Month Negotiated Extension Funding
W	Co-Pay Notifications	\$184,496	\$553,488	\$553,488	\$553,488	Table 3.3 Row G and Row I
X	<b>Subtotal</b>	<b>\$1,532,524</b>	<b>\$1,095,855</b>	<b>\$1,095,855</b>	<b>\$1,095,855</b>	Sum Rows S through W
Y	<b>Total 50/50 MMIS Operations</b>	<b>\$3,303,832</b>	<b>\$1,095,855</b>	<b>\$1,095,855</b>	<b>\$1,095,855</b>	Sum Rows R and X
<b>Other MMIS Operations</b>						
<i>New System</i>						
AA	Provider Enrollment Screenings (Cash Funds Only)	\$635,055	\$121,943	\$121,943	\$121,943	FY 2015-16 S-9, BA-9 "Provider Enrollment Fee Collection"
AB	ACC-Medicare/Medicaid Program Quality Metrics (FF Only)	\$306,082	\$270,080	\$75,000	\$0	FY 2015-16 S-10, BA-10 "ACC-MMP Grant Funding True Up"
AC	Special Bill Projects (various FFP rates)	\$301,027	\$1,192,513	\$830,475	\$830,475	HB 16-1277, HB 16-1321, SB 16-077, SB 16-120, SB 16-192
AD	<b>Total Other MMIS Operations</b>	<b>\$1,242,164</b>	<b>\$1,584,536</b>	<b>\$1,027,418</b>	<b>\$952,418</b>	Sum Rows AA through AC
AE	<b>Total Estimated Expenditures</b>	<b>\$45,794,687</b>	<b>\$40,942,158</b>	<b>\$41,632,203</b>	<b>\$41,632,203</b>	Sum Rows M, Y, and AD

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<b>Table 3.3: Co-Pay Notifications Calculations</b>			
<b>Row</b>	<b>Item</b>	<b>Amount</b>	<b>Source</b>
<b>Estimate of Mailings Due to Clients Within 5% of Co-Pay Limit</b>			
A	Average Number of Clients at 5% Co-Pay Limit per Month	100,269	MMIS Client Data
B	Number of Mailings Required per Client Upon Reaching Co-Pay Limit	1	Notice mailed to client
C	Average Number of Mailings per Month Due to Clients Reaching Co-Pay Limit	100,269	Row A * Row B
D	Mean Postage Rate (Presorted, First-Class, 1 oz.)	\$0.46	Contractor Quote
E	Average Monthly Mailing Cost	\$46,124	Row C * Row D
F	FY 2016-17 Annual Number of Months Impacted	4	Based on March 1, 2017 system implementation.
G	<b>Estimated FY 2016-17 Mailing Cost</b>	<b>\$184,496</b>	Row E * Row F
H	Number of months of impact in FY 2017-18 and Annually Ongoing	12	Annual Months Impact
I	<b>Estimated FY 2017-18 and Ongoing Mailing Costs</b>	<b>\$553,488</b>	Row E * Row H

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Table 3.4a: FY 2016-17 MMIS Fund Splits											
Row	Program	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	FFP
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
<b>90/10 MMIS Development</b>											
A	Title XIX (Medicaid) Program Share	96.971%	5.956%	0.000%	3.742%	0.000%	0.000%	0.000%	0.000%	87.273%	90.000%
B	Title XXI (CHIP) Program Share	2.999%	0.000%	0.299%	0.057%	0.000%	0.000%	0.000%	0.000%	2.643%	88.130%
C	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
D	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>5.956%</b>	<b>0.299%</b>	<b>3.799%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>89.916%</b>	
<b>75/25 MMIS Operations or Development</b>											
E	Title XIX (Medicaid) Program Share	96.971%	14.889%	0.000%	9.354%	0.000%	0.000%	0.000%	0.000%	72.728%	75.000%
F	Title XXI (CHIP) Program Share	2.999%	0.000%	0.299%	0.057%	0.000%	0.000%	0.000%	0.000%	2.643%	88.130%
G	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
H	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>14.889%</b>	<b>0.299%</b>	<b>9.411%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>75.371%</b>	
<b>50/50 MMIS Operations or Development</b>											
I	Title XIX (Medicaid) Program Share	96.971%	29.778%	0.000%	18.708%	0.000%	0.000%	0.000%	0.000%	48.485%	50.000%
J	Title XXI (CHIP) Program Share	2.999%	0.000%	0.299%	0.057%	0.000%	0.000%	0.000%	0.000%	2.643%	88.130%
K	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
L	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>29.778%</b>	<b>0.299%</b>	<b>18.765%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>51.128%</b>	

Table 3.4b: FY 2017-18 MMIS Fund Splits											
Row	Program	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	FFP
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
<b>90/10 MMIS Development</b>											
A	Title XIX (Medicaid) Program Share	91.113%	5.503%	0.000%	3.609%	0.000%	0.000%	0.000%	0.000%	82.001%	90.000%
B	Title XXI (CHIP) Program Share	8.857%	0.000%	0.899%	0.164%	0.000%	0.000%	0.000%	0.000%	7.794%	88.000%
C	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
D	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>5.503%</b>	<b>0.899%</b>	<b>3.773%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>89.795%</b>	
<b>75/25 MMIS Operations or Development</b>											
E	Title XIX (Medicaid) Program Share	91.113%	13.758%	0.000%	9.021%	0.000%	0.000%	0.000%	0.000%	68.334%	75.000%
F	Title XXI (CHIP) Program Share	8.857%	0.000%	0.899%	0.164%	0.000%	0.000%	0.000%	0.000%	7.794%	88.000%
G	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
H	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>13.758%</b>	<b>0.899%</b>	<b>9.185%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>76.128%</b>	
<b>50/50 MMIS Operations or Development</b>											
I	Title XIX (Medicaid) Program Share	91.113%	27.515%	0.000%	18.042%	0.000%	0.000%	0.000%	0.000%	45.556%	50.000%
J	Title XXI (CHIP) Program Share	8.857%	0.000%	0.899%	0.164%	0.000%	0.000%	0.000%	0.000%	7.794%	88.000%
K	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
L	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>27.515%</b>	<b>0.899%</b>	<b>18.206%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>53.350%</b>	

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Table 3.4c: FY 2018-19 MMIS Fund Splits											
Row	Program	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	FFP
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
<b>90/10 MMIS Development</b>											
A	Title XIX (Medicaid) Program Share	91.099%	5.455%	0.000%	3.655%	0.000%	0.000%	0.000%	0.000%	81.989%	90.000%
B	Title XXI (CHIP) Program Share	8.871%	0.000%	0.902%	0.163%	0.000%	0.000%	0.000%	0.000%	7.806%	88.000%
C	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
D	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>5.455%</b>	<b>0.902%</b>	<b>3.818%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>89.795%</b>	
<b>75/25 MMIS Operations or Development</b>											
E	Title XIX (Medicaid) Program Share	91.099%	13.637%	0.000%	9.138%	0.000%	0.000%	0.000%	0.000%	68.324%	75.000%
F	Title XXI (CHIP) Program Share	8.871%	0.000%	0.902%	0.163%	0.000%	0.000%	0.000%	0.000%	7.806%	88.000%
G	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
H	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>13.637%</b>	<b>0.902%</b>	<b>9.301%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>76.130%</b>	
<b>50/50 MMIS Operations or Development</b>											
I	Title XIX (Medicaid) Program Share	91.099%	27.274%	0.000%	18.276%	0.000%	0.000%	0.000%	0.000%	45.549%	50.000%
J	Title XXI (CHIP) Program Share	8.871%	0.000%	0.902%	0.163%	0.000%	0.000%	0.000%	0.000%	7.806%	88.000%
K	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
L	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>27.274%</b>	<b>0.902%</b>	<b>18.439%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>53.355%</b>	

Table 3.4d: FY 2019-20 MMIS Fund Splits											
Row	Program	Total Funds	General Fund	Cash Funds				Reappropriated Funds		Federal Funds	FFP
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Colorado Autism Treatment Fund	Department of Health Care Policy and Financing Cash Fund	Public School Health Services	Old Age Pension Health and Medical Care Fund		
<b>90/10 MMIS Development</b>											
A	Title XIX (Medicaid) Program Share	91.092%	5.431%	0.000%	3.679%	0.000%	0.000%	0.000%	0.000%	81.982%	90.000%
B	Title XXI (CHIP) Program Share	8.878%	0.000%	0.903%	0.163%	0.000%	0.000%	0.000%	0.000%	7.812%	88.000%
C	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
D	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>5.431%</b>	<b>0.903%</b>	<b>3.842%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>89.794%</b>	
<b>75/25 MMIS Operations or Development</b>											
E	Title XIX (Medicaid) Program Share	91.092%	13.576%	0.000%	9.197%	0.000%	0.000%	0.000%	0.000%	68.319%	75.000%
F	Title XXI (CHIP) Program Share	8.878%	0.000%	0.903%	0.163%	0.000%	0.000%	0.000%	0.000%	7.812%	88.000%
G	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
H	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>13.576%</b>	<b>0.903%</b>	<b>9.360%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>76.131%</b>	
<b>50/50 MMIS Operations or Development</b>											
I	Title XIX (Medicaid) Program Share	91.092%	27.151%	0.000%	18.395%	0.000%	0.000%	0.000%	0.000%	45.546%	50.000%
J	Title XXI (CHIP) Program Share	8.878%	0.000%	0.903%	0.163%	0.000%	0.000%	0.000%	0.000%	7.812%	88.000%
K	OAP State-Only Program Share	0.030%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.030%	0.000%	0.000%
L	<b>Total Percentage to each Fund Source</b>	<b>100.000%</b>	<b>27.151%</b>	<b>0.903%</b>	<b>18.558%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.000%</b>	<b>0.030%</b>	<b>53.358%</b>	

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Table 4.1a: FY 2016-17 MMIS Reprourement Contracted Staff True-Up										
Row	Item	Total Funds	General Fund	Cash Funds		Reappropriated Fund	Federal Funds	Calculated FFP	Source	
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Old Age Pension Health and Medical Care Fund				
<b>FY 2016-17 Spending Authority</b>										
A	FY 2016-17 Long Bill Appropriation	\$5,145,018	\$431,304	\$37,064	\$97,693	\$0	\$4,578,957	89.00%	HB 16-1405 Long Bill	
B	FY 2015-16 Roll Forward	\$4,109,035	\$111,124	\$34,561	\$0	\$0	\$3,963,350	96.45%	CORE Final FY 2015-16 Unexpended Funds	
C	<b>Total Spending Authority</b>	<b>\$9,254,053</b>	<b>\$542,428</b>	<b>\$71,625</b>	<b>\$97,693</b>	<b>\$0</b>	<b>\$8,542,307</b>	<b>92.31%</b>	Sum Rows A and B	
<b>FY 2016-17 Estimated Expenditures</b>										
D	90/10 MMIS Development	\$2,304,964	\$137,284	\$6,892	\$87,566	\$691	\$2,072,531	89.92%	Table 4.2a Row E, Fund Splits from Table 3.5a Row D	
E	75/25 MMIS Development	\$29,160	\$4,342	\$87	\$2,744	\$9	\$21,978	75.37%	Table 4.2a Row G, Fund Splits from Table 3.5a Row H	
F	50/50 MMIS Development	\$716,814	\$213,453	\$2,143	\$134,510	\$215	\$366,493	51.13%	Table 4.2a Row K, Fund Splits from Table 3.5a Row L	
G	<b>Total Estimated Expenditures</b>	<b>\$3,050,938</b>	<b>\$355,079</b>	<b>\$9,122</b>	<b>\$224,820</b>	<b>\$915</b>	<b>\$2,461,002</b>	<b>80.66%</b>	Sum Rows D through F	
<b>Technical Adjustments</b>										
H	Hospital Provider Fee Adjustment	\$0	\$127,127	\$0	(\$127,127)	\$0	\$0	N/A	No additional HPF Cash Fund is requested because the HPF funding model has been determined for FY 2016-17	
I	Roll Forward Reversion	\$1,527,787	\$0	\$25,439	\$0	\$0	\$1,502,348	N/A	A partial reversion of roll forward funds is requested because roll forward amounts cannot be decreased through the budget process	
J	<b>Total Technical Adjustments</b>	<b>\$1,527,787</b>	<b>\$127,127</b>	<b>\$25,439</b>	<b>(\$127,127)</b>	<b>\$0</b>	<b>\$1,502,348</b>	<b>N/A</b>	Sum Rows H and I	
K	<b>Total Estimated Final Expenditure</b>	<b>\$4,578,725</b>	<b>\$482,206</b>	<b>\$34,561</b>	<b>\$97,693</b>	<b>\$915</b>	<b>\$3,963,350</b>	<b>86.56%</b>	Sum Rows G and J	
L	<b>TOTAL FY 2016-17 REQUEST</b>	<b>(\$4,675,328)</b>	<b>(\$60,222)</b>	<b>(\$37,064)</b>	<b>\$0</b>	<b>\$915</b>	<b>(\$4,578,957)</b>	<b>N/A</b>	Row K - Row C	
M	<b>FY 2016-17 Revised Appropriation</b>	<b>\$469,690</b>	<b>\$371,082</b>	<b>\$0</b>	<b>\$97,693</b>	<b>\$915</b>	<b>\$0</b>	<b>0.00%</b>	Sum Rows A and L	

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Table 4.1b: FY 2016-17 MMIS Reprocurement Contracts True-Up										
Row	Item	Total Funds	General Fund	Cash Funds		Reappropriated Fund	Federal Funds	Calculated FFP	Source	
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Old Age Pension Health and Medical Care Fund				
<b>FY 2016-17 Spending Authority</b>										
A	FY 2016-17 Long Bill Appropriation	\$26,916,597	\$2,615,317	\$195,765	\$506,114	\$0	\$23,599,401	87.68%	HB 16-1405 Long Bill	
B	Roll Forward from FY 2015-16	\$3,987,574	\$1,256,111	\$214,026	\$199,533	\$0	\$2,317,904	58.13%	CORE Final FY 2015-16 Unexpended Funds	
C	<b>Total Spending Authority</b>	<b>\$30,904,171</b>	<b>\$3,871,428</b>	<b>\$409,791</b>	<b>\$705,647</b>	<b>\$0</b>	<b>\$25,917,305</b>	<b>83.86%</b>	Sum Rows A and B	
<b>Estimated FY 2016-17 Expenditures</b>										
D	90/10 MMIS Development	\$30,942,015	\$1,842,906	\$92,517	\$1,175,487	\$9,283	\$27,821,822	89.92%	Table 4.2b Row G, Fund Splits from Table 3.5a Row D	
E	75/25 MMIS Development	\$1,298,136	\$193,279	\$3,881	\$122,168	\$389	\$978,419	75.37%	Table 4.2b Row M, Fund Splits from Table 3.5a Row H	
F	50/50 MMIS Development	\$9,966	\$2,968	\$30	\$1,870	\$3	\$5,095	51.12%	Table 4.2b Row O, Fund Splits from Table 3.5a Row L	
G	<b>Total Estimated Expenditures</b>	<b>\$32,250,117</b>	<b>\$2,039,153</b>	<b>\$96,428</b>	<b>\$1,299,525</b>	<b>\$9,675</b>	<b>\$28,805,336</b>	<b>89.32%</b>	Sum Rows D through F	
<b>Technical Adjustments</b>										
H	Hospital Provider Fee Adjustment	\$0	\$592,008	\$0	(\$592,008)	\$0	\$0	N/A	No additional HPF Cash Fund is requested because the HPF funding model has been determined for FY 2016-17	
I	Roll Forward Reversion	\$117,628	\$0	\$117,628	\$0	\$0	\$0	N/A	A partial reversion of roll forward funds is requested because roll forward amounts cannot be decreased through the budget process	
J	<b>Total Technical Adjustments</b>	<b>\$117,628</b>	<b>\$592,008</b>	<b>\$117,628</b>	<b>(\$592,008)</b>	<b>\$0</b>	<b>\$0</b>	<b>N/A</b>	Sum Rows H and I	
K	<b>Total Estimated Final Expenditure</b>	<b>\$32,367,745</b>	<b>\$2,631,161</b>	<b>\$214,056</b>	<b>\$707,517</b>	<b>\$9,675</b>	<b>\$28,805,336</b>	<b>88.99%</b>	Sum Rows G and J	
L	<b>TOTAL FY 2016-17 REQUEST</b>	<b>\$1,463,574</b>	<b>(\$1,240,267)</b>	<b>(\$195,735)</b>	<b>\$1,870</b>	<b>\$9,675</b>	<b>\$2,888,031</b>	<b>N/A</b>	Row K - Row C	
M	<b>FY 2016-17 Revised Appropriation</b>	<b>\$28,380,171</b>	<b>\$1,375,050</b>	<b>\$30</b>	<b>\$507,984</b>	<b>\$9,675</b>	<b>\$26,487,432</b>	<b>93.33%</b>	Sum Rows A and L	

Table 4.1c: FY 2017-18 MMIS Reprocurement Contracts True-Up										
Row	Item	Total Funds	General Fund	Cash Funds		Reappropriated Fund	Federal Funds	Calculated FFP	Source	
				Children's Basic Health Plan Trust	Hospital Provider Fee Cash Fund	Old Age Pension Health and Medical Care Fund				
<b>FY 2017-18 Spending Authority</b>										
A	FY 2017-18 Base Request	\$0	\$0	\$0	\$0	\$0	\$0	N/A	November 1, 2016 Submission	
B	<b>Total Spending Authority</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>N/A</b>	Row A	
<b>Estimated FY 2017-18 Expenditures</b>										
C	90/10 MMIS Development	\$18,383,499	\$1,011,644	\$165,268	\$693,609	\$5,515	\$16,507,463	89.80%	Table 4.2b Row G, Fund Splits from Table 3.5b Row D	
D	75/25 MMIS Development	\$163,280	\$22,464	\$1,468	\$14,997	\$49	\$124,302	76.13%	Table 4.2b Row M, Fund Splits from Table 3.5b Row H	
E	50/50 MMIS Development	\$0	\$0	\$0	\$0	\$0	\$0	N/A	Table 4.2b Row O, Fund Splits from Table 3.5b Row L	
F	<b>Total Estimated Expenditures</b>	<b>\$18,546,779</b>	<b>\$1,034,108</b>	<b>\$166,736</b>	<b>\$708,606</b>	<b>\$5,564</b>	<b>\$16,631,765</b>	<b>89.67%</b>	Sum Rows C through E	
G	<b>TOTAL FY 2017-18 REQUEST</b>	<b>\$18,546,779</b>	<b>\$1,034,108</b>	<b>\$166,736</b>	<b>\$708,606</b>	<b>\$5,564</b>	<b>\$16,631,765</b>	<b>N/A</b>	Row F - Row B	
H	<b>FY 2017-18 Revised Appropriation</b>	<b>\$18,546,779</b>	<b>\$1,034,108</b>	<b>\$166,736</b>	<b>\$708,606</b>	<b>\$5,564</b>	<b>\$16,631,765</b>	<b>89.67%</b>	Sum Rows A and G	

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<b>Table 4.2a: MMIS Reprourement Contracted Staff FY 2016-17 and FY 2017-18 Estimated Expenditures</b>				
<b>Row</b>	<b>Item</b>	<b>FY 2016-17</b>	<b>FY 2017-18</b>	<b>Source</b>
<b>90/10 MMIS Development</b>				
A	Compri Technical Staff	\$1,787,642	\$0	Provider Contract
B	Term-limited Technical Staff	\$382,824	\$0	Estimated Remaining Costs Based on FY 2016-17 Budget
C	Leased Space	\$114,498	\$0	Estimated Remaining Costs Based on FY 2016-17 Budget
D	Conferences	\$20,000	\$0	Estimated Remaining Costs Based on FY 2016-17 Budget
E	<b>Total 90/10 MMIS Development</b>	<b>\$2,304,964</b>	<b>\$0</b>	Sum Rows A through D
<b>75/25 MMIS Development</b>				
F	Clarity Licenses	\$29,160	\$0	Estimated Remaining Costs Based on FY 2016-17 Budget
G	<b>Total 75/25 MMIS Operations</b>	<b>\$29,160</b>	<b>\$0</b>	Row F
<b>50/50 MMIS Development</b>				
H	Compri Program Staff	\$514,518	\$0	Provider Contract
I	Term-limited Program Staff	\$179,796	\$0	Estimated Remaining Costs Based on FY 2016-17 Budget
J	Training	\$22,500	\$0	Estimated Remaining Costs Based on FY 2016-17 Budget
K	<b>Total 50/50 MMIS Operations</b>	<b>\$716,814</b>	<b>\$0</b>	Sum Rows H through J
L	<b>Total Estimated Expenditures</b>	<b>\$3,050,938</b>	<b>\$0</b>	Sum Rows E, G, and K

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<b>Table 4.2b: MMIS Reprocurement Contracts</b>				
<b>FY 2016-17 and FY 2017-18 Estimated Expenditures</b>				
<b>Row</b>	<b>Item</b>	<b>FY 2016-17</b>	<b>FY 2017-18</b>	<b>Source</b>
<b>90/10 MMIS Development</b>				
A	interChange Development	\$23,405,662	\$14,101,180	FY 2016-17 and FY 2017-18 Provider Contract
B	BIDM Development	\$3,251,891	\$4,282,319	FY 2016-17 and FY 2017-18 Provider Contract
C	PBMS Development	\$3,197,044	\$0	Provider Contract
D	Independent Verification and Validation	\$990,000	\$0	Provider Contract
E	First Databank Implementation	\$52,418	\$0	Provider Contract
F	OIT Data Transfer CBMS to BIDM	\$45,000	\$0	Project Estimate
G	<b>Total 90/10 MMIS Development</b>	<b>\$30,942,015</b>	<b>\$18,383,499</b>	Sum Rows A through F
<b>75/25 MMIS Development</b>				
H	interChange COTS Software	\$1,053,024	\$0	Provider Contract
I	BIDM COTS Software	\$23,333	\$0	FY 2016-17 and FY 2017-18 Provider Contract
J	PBMS COTS Software	\$22,731	\$0	Provider Contract
K	Certification Reports	\$39,750	\$0	Provider Estimate
L	First Databank Licenses	\$159,298	\$163,280	FY 2016-17 and FY 2017-18 Provider Contract
M	<b>Total 75/25 MMIS Development</b>	<b>\$1,298,136</b>	<b>\$163,280</b>	Sum Rows H through L
<b>50/50 MMIS Development</b>				
N	interChange Development	\$9,966	\$0	Provider Contract
O	<b>Total 50/50 MMIS Development</b>	<b>\$9,966</b>	<b>\$0</b>	Row N
P	<b>Total Estimated Expenditures</b>	<b>\$32,250,117</b>	<b>\$18,546,779</b>	Sum Rows G, M, and O

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<b>Table 5 - Contract Administrator FTE Calculation</b>					
<b>FTE Calculation Assumptions:</b>					
<b>Operating Expenses</b> -- Base operating expenses are included per FTE for \$500 per year. In addition, for regular FTE, annual telephone costs assume base charges of \$450 per year.					
<b>Standard Capital Purchases</b> -- Each additional employee necessitates the purchase of a Personal Computer (\$900), Office Suite Software (\$330), and office furniture (\$3,473).					
<b>General Fund FTE</b> -- New full-time General Fund positions are reflected in Year 1 as 0.9166 FTE to account for the pay-date shift. This applies to personal services costs only; operating costs are not subject to the pay-date shift.					
Expenditure Detail	Year 1 FY 2017-18		Year 2 FY 2018-19		
<b>Personal Services:</b>					
Classification Title	Monthly	FTE		FTE	
Contract Administrator III	\$4,028	1.8	\$87,005	2.0	\$96,672
PERA			\$8,831		\$9,812
AED			\$4,350		\$4,834
SAED			\$4,350		\$4,834
Medicare			\$1,262		\$1,402
STD			\$165		\$184
Health-Life-Dental			\$15,854		\$15,854
<b>Subtotal Position 1, #.# FTE</b>		<b>1.8</b>	<b>\$121,817</b>	<b>2.0</b>	<b>\$133,592</b>
Classification Title	Monthly	FTE		FTE	
		-	\$0	-	\$0
PERA			\$0		\$0
AED			\$0		\$0
SAED			\$0		\$0
Medicare			\$0		\$0
STD			\$0		\$0
Health-Life-Dental			\$0		\$0
<b>Subtotal Position 2, #.# FTE</b>		<b>-</b>	<b>\$0</b>	<b>-</b>	<b>\$0</b>
<b>Subtotal Personal Services</b>		<b>1.8</b>	<b>\$121,817</b>	<b>2.0</b>	<b>\$133,592</b>
<b>Operating Expenses:</b>					
		FTE		FTE	
Regular FTE Operating	\$500	2.0	\$1,000	2.0	\$1,000
Telephone Expenses	\$450	2.0	\$900	2.0	\$900
PC, One-Time	\$1,230	2.0	\$2,460		
Office Furniture, One-Time	\$3,473	2.0	\$6,946		
Other					
<b>Subtotal Operating Expenses</b>			<b>\$11,306</b>		<b>\$1,900</b>
<b>TOTAL REQUEST</b>		<b>1.8</b>	<b>\$133,123</b>	<b>2.0</b>	<b>\$135,492</b>
<i>General Fund:</i>			\$33,284		\$33,875
<i>Cash funds:</i>			\$0		\$0
<i>Reappropriated Funds:</i>			\$0		\$0
<i>Federal Funds:</i>			\$99,839		\$101,617

	FY 2017-18	FY 2018-19
PERA	10.15%	10.15%
AED	5.00%	5.00%
SAED	5.00%	5.00%
Medicare	1.45%	1.45%
STD	0.19%	0.19%
Health-Life-Dental	\$7,927.19	\$7,927.19

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<b>Table 6: FY 2017-18 and Ongoing Request to Adjust Other Line Items</b>							
<b>Row</b>	<b>Line Item</b>	<b>Purpose</b>	<b>Total Funds</b>	<b>General Fund</b>	<b>Federal Funds</b>	<b>Calculated FFP</b>	<b>Source</b>
A	(1) Executive Director's Office; (A) General Administration, General Professional Services and Special Projects	Smart (Automated) Prior Authorizations	(\$750,000)	(\$187,500)	(\$562,500)	75.00%	HB 16-1405 FY 2016-17 Spending Authority
B	(1) Executive Director's Office; (C) Information Technology Contracts and Projects, Fraud Detection Software Contract	Electronic Surveillance Utilization Review	(\$135,000)	(\$34,155)	(\$100,845)	74.70%	HB 16-1405 FY 2016-17 Spending Authority
C	(1) Executive Director's Office; (E) Utilization and Quality Review Contracts, Professional Services Contracts	Nursing Facility Prior Authorization Reviews	(\$96,968)	(\$48,484)	(\$48,484)	50.00%	HB 16-1405 FY 2016-17 Spending Authority
D	<b>Total FY 2017-18 and Ongoing Request</b>		<b>(\$981,968)</b>	<b>(\$270,139)</b>	<b>(\$711,829)</b>	<b>72.49%</b>	Sum Rows A through C

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<b>Table 7: FY 2017-18 Request to Maintain BUS Support at OIT</b>							
<b>Row</b>	<b>Item</b>	<b>Total Funds</b>	<b>FTE</b>	<b>General Fund</b>	<b>Federal Funds</b>	<b>FFP</b>	<b>Source</b>
A	Business Analyst Contractor (0.5 FTE)	\$62,941	0.0	\$31,471	\$31,470		Continuation of FY 2014-15 S-8, FY 2015-16 BA-8 Legacy Systems and Technology Support Funding Using Time-Limited Staff Support
B	Database Administrator (1.0 FTE)	\$113,253	0.0	\$56,626	\$56,627		
C	Cold Fusion Developer Contractor (1.0 FTE)	\$144,601	0.0	\$72,301	\$72,300		
D	Hardware/Software Licenses	\$4,205	0.0	\$2,102	\$2,103		
E	<b>Total FY 2017-18 Request</b>	<b>\$325,000</b>	<b>0.0</b>	<b>\$162,500</b>	<b>\$162,500</b>	<b>50.00%</b>	Row A + Row B