

Exhibit J - Health Care Affordability Act of 2009 Estimates

Cash Funded Expansion Populations							
Source of Funding							
FY 2016-17 Summary							
Eligibility Category	Expenditure		Fund Calculations				
	Caseload	Expenditure	General Fund	Hospital Provider Fee Cash Fund	Medicaid Buy-in Cash Fund	Federal Funds	FMAP
HB 09-1293 Medicaid Expansion Clients							
MAGI Parents/Caretakers 69% to 133% FPL	98,910	\$257,950,142	\$0	\$6,507,637	\$0	\$251,442,505	97.48%
Buy-In for Individuals with Disabilities	5,844	\$39,520,283	\$0	\$17,873,797	\$3,629,124	\$18,017,362	50.20%
MAGI Adults	363,387	\$1,352,257,614	\$0	\$36,131,707	\$0	\$1,316,125,907	97.37%
Non-Newly Eligibles	2,822	\$43,852,827	\$0	\$6,279,725	\$0	\$37,573,102	85.68%
MAGI Parents/Caretakers 60% to 68% FPL	10,589	\$31,608,553	\$0	\$15,741,060	\$0	\$15,867,493	50.20%
Continuous Eligibility for Children	38,353	\$51,113,305	\$0	\$25,454,426	\$0	\$25,658,879	50.20%
Subtotal from HB 09-1293 Medicaid Expansion Clients		\$1,776,302,724	\$0	\$107,988,352	\$3,629,124	\$1,664,685,248	
HB 09-1293 Supplemental Payments							
Inpatient Hospital Rates		\$323,856,456	\$0	\$161,280,515	\$0	\$162,575,941	50.20%
Outpatient Hospital Rates		\$243,313,147	\$0	\$121,169,947	\$0	\$122,143,200	50.20%
Hospital Quality Incentive Payment		\$89,775,894	\$0	\$44,708,395	\$0	\$45,067,499	50.20%
Supplemental Hospital Payments (DSH)		\$0	\$0	\$0	\$0	\$0	
Subtotal from HB 09-1293 Supplemental Payments		\$656,945,497	\$0	\$327,158,857	\$0	\$329,786,640	
Cash Fund Financing		\$0	(\$15,700,000)	\$15,700,000	\$0	\$0	
Other Adjustments		\$0	\$688,206	\$2,698,181	\$0	(\$3,386,387)	
HB 09-1293 Total		\$2,433,248,221	(\$15,011,794)	\$453,545,390	\$3,629,124	\$1,991,085,501	
FY 2017-18 Summary							
Eligibility Category	Expenditure		Fund Calculations				
	Caseload	Expenditure	General Fund	Hospital Provider Fee Cash Fund	Medicaid Buy-in Cash Fund	Federal Funds	FMAP
HB 09-1293 Medicaid Expansion Clients							
MAGI Parents/Caretakers 69% to 133% FPL	108,821	\$282,845,838	\$0	\$15,619,522	\$0	\$267,226,316	94.48%
Buy-in for Individuals with Disabilities	6,901	\$45,598,064	\$0	\$20,511,017	\$4,576,030	\$20,511,017	50.00%
MAGI Adults	388,880	\$1,448,831,641	\$0	\$82,101,914	\$0	\$1,366,729,727	94.38%
Non-Newly Eligibles	2,991	\$46,707,489	\$0	\$7,762,785	\$0	\$38,944,704	83.38%
MAGI Parents/Caretakers 60% to 68% FPL	10,967	\$32,179,343	\$0	\$16,089,670	\$0	\$16,089,673	50.00%
Continuous Eligibility for Children	39,706	\$52,507,448	\$0	\$26,253,723	\$0	\$26,253,725	50.00%
Subtotal from HB 09-1293 Medicaid Expansion Clients		\$1,908,669,823	\$0	\$168,338,631	\$4,576,030	\$1,735,755,162	
HB 09-1293 Supplemental Payments							
Inpatient Hospital Rates		\$250,501,666	\$0	\$125,250,833	\$0	\$125,250,833	50.00%
Outpatient Hospital Rates		\$200,163,270	\$0	\$100,081,635	\$0	\$100,081,635	50.00%
Hospital Quality Incentive Payment		\$89,775,894	\$0	\$44,887,947	\$0	\$44,887,947	50.00%
Supplemental Hospital Payments (DSH)		\$0	\$0	\$0	\$0	\$0	
Subtotal from HB 09-1293 Supplemental Payments		\$540,440,830	\$0	\$270,220,415	\$0	\$270,220,415	
Cash Fund Financing		\$0	(\$15,700,000)	\$15,700,000	\$0	\$0	
HB 09-1293 Total		\$2,449,110,653	(\$15,700,000)	\$454,259,046	\$4,576,030	\$2,005,975,577	
FY 2018-19 Summary							
Eligibility Category	Expenditure		Fund Calculations				
	Caseload	Expenditure	General Fund	Hospital Provider Fee Cash Fund	Medicaid Buy-in Cash Fund	Federal Funds	FMAP
HB 09-1293 Medicaid Expansion Clients							
MAGI Parents/Caretakers 69% to 133% FPL	116,361	\$302,049,195	\$0	\$19,699,835	\$0	\$282,349,360	93.48%
Buy-in for Individuals with Disabilities	7,913	\$51,615,728	\$0	\$23,185,863	\$5,243,998	\$23,185,867	50.00%
MAGI Adults	402,990	\$1,507,395,633	\$0	\$100,498,127	\$0	\$1,406,897,506	93.38%
Non-Newly Eligibles	3,122	\$48,980,352	\$0	\$8,507,887	\$0	\$40,472,465	82.63%
MAGI Parents/Caretakers 60% to 68% FPL	11,256	\$32,434,780	\$0	\$16,217,389	\$0	\$16,217,391	50.00%
Continuous Eligibility for Children	40,480	\$54,173,830	\$0	\$27,086,914	\$0	\$27,086,916	50.00%
Subtotal from HB 09-1293 Medicaid Expansion Clients		\$1,996,649,518	\$0	\$195,196,015	\$5,243,998	\$1,796,209,505	
HB 09-1293 Supplemental Payments							
Inpatient Hospital Rates		\$553,146,478	\$0	\$276,573,239	\$0	\$276,573,239	50.00%
Outpatient Hospital Rates		\$378,189,630	\$0	\$189,094,815	\$0	\$189,094,815	50.00%
Hospital Quality Incentive Payment		\$89,775,894	\$0	\$44,887,947	\$0	\$44,887,947	50.00%
Subtotal from HB 09-1293 Supplemental Payments		\$1,021,112,002	\$0	\$510,556,001	\$0	\$510,556,001	
Cash Fund Financing		\$0	(\$15,700,000)	\$15,700,000	\$0	\$0	
HB 09-1293 Total		\$3,017,761,520	(\$15,700,000)	\$721,452,016	\$5,243,998	\$2,306,765,506	

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Hospital Provider Fee - Fund Splits and Service Category Impacts by Expansion Population FY 2016-17							
MAGI Parents/Caretakers 69% to 133% FPL⁽¹⁾							
	Caseload	Per Capita	Total Funds ⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,494.75	\$246,755,252	\$0	\$6,213,707	\$0	\$240,541,545
Community Based Long-Term Care		\$1.66	\$163,864	\$0	\$18,155	\$0	\$145,709
Long-Term Care		\$0.15	\$14,579	\$0	\$364	\$0	\$14,215
Insurance		\$0.36	\$35,563	\$0	\$889	\$0	\$34,674
Service Management		\$111.02	\$10,980,884	\$0	\$274,522	\$0	\$10,706,362
Total	98,910	\$2,607.94	\$257,950,142	\$0	\$6,507,637	\$0	\$251,442,505
Buy-In for Individuals with Disabilities							
	Caseload	Per Capita	Total Funds ⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$5,703.58	\$33,331,703	\$0	\$15,074,895	\$3,060,830	\$15,195,978
Community Based Long-Term Care		\$967.63	\$5,654,821	\$0	\$2,557,500	\$519,279	\$2,578,042
Long-Term Care		\$28.74	\$167,943	\$0	\$75,955	\$15,422	\$76,566
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$62.60	\$365,816	\$0	\$165,447	\$33,593	\$166,776
Total	5,844	\$6,762.54	\$39,520,283	\$0	\$17,873,797	\$3,629,124	\$18,017,362
MAGI Adults⁽¹⁾							
	Caseload	Per Capita	Total Funds ⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds⁽¹⁾
Acute Care		\$3,578.73	\$1,300,462,803	\$0	\$34,176,072	\$0	\$1,266,286,731
Community Based Long-Term Care		\$19.13	\$6,952,557	\$0	\$834,579	\$0	\$6,117,978
Long-Term Care		\$2.51	\$912,323	\$0	\$22,808	\$0	\$889,515
Insurance		\$0.09	\$32,006	\$0	\$800	\$0	\$31,206
Service Management		\$120.80	\$43,897,925	\$0	\$1,097,448	\$0	\$42,800,477
Total	363,387	\$3,721.26	\$1,352,257,614	\$0	\$36,131,707	\$0	\$1,316,125,907
Non-Newly Eligibles							
	Caseload	Per Capita	Total Funds ⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$14,530.70	\$41,005,922	\$0	\$5,872,048	\$0	\$35,133,874
Community Based Long-Term Care		\$376.58	\$1,062,716	\$0	\$152,181	\$0	\$910,535
Long-Term Care		\$550.76	\$1,554,243	\$0	\$222,568	\$0	\$1,331,675
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$81.48	\$229,946	\$0	\$32,928	\$0	\$197,018
Total	2,822	\$15,539.52	\$43,852,827	\$0	\$6,279,725	\$0	\$37,573,102
MAGI Parents/Caretakers 60% to 68% FPL							
	Caseload	Per Capita	Total Funds ⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,868.88	\$30,377,570	\$0	\$15,128,030	\$0	\$15,249,540
Community Based Long-Term Care		\$12.62	\$133,668	\$0	\$66,567	\$0	\$67,101
Long-Term Care		\$2.57	\$27,220	\$0	\$13,556	\$0	\$13,664
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$101.06	\$1,070,095	\$0	\$532,907	\$0	\$537,188
Total	10,589	\$2,985.13	\$31,608,553	\$0	\$15,741,060	\$0	\$15,867,493
Continuous Eligibility for Children							
	Caseload	Per Capita	Total Funds ⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$1,140.84	\$43,754,769	\$0	\$21,789,875	\$0	\$21,964,894
Community Based Long-Term Care		\$2.82	\$108,312	\$0	\$53,939	\$0	\$54,373
Long-Term Care		\$0.00	\$0	\$0	\$0	\$0	\$0
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$189.04	\$7,250,224	\$0	\$3,610,612	\$0	\$3,639,612
Total	38,353	\$1,332.70	\$51,113,305	\$0	\$25,454,426	\$0	\$25,658,879
FY 2016-17 Summary							
	Caseload	Per Capita	Total Funds ⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Total	519,905	\$3,416.59	\$1,776,302,724	\$0	\$107,988,352	\$3,629,124	\$1,664,685,248

(1) The matching federal funds for this population will decrease from 100% to 95% effective January 1, 2017 in accordance with the Affordable Care Act.

(2) Figures may not sum due to rounding.

Exhibit J - Health Care Affordability Act of 2009 Estimates

Hospital Provider Fee - Fund Splits and Service Category Impacts by Expansion Population FY 2017-18							
MAGI Parents/Caretakers 69% to 133% FPL⁽¹⁾							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,483.23	\$270,227,894	\$0	\$14,908,737	\$0	\$255,319,157
Community Based Long-Term Care		\$1.64	\$178,332	\$0	\$26,606	\$0	\$151,726
Long-Term Care		\$0.14	\$15,105	\$0	\$831	\$0	\$14,274
Insurance		\$0.41	\$45,005	\$0	\$2,475	\$0	\$42,530
Service Management		\$113.76	\$12,379,502	\$0	\$680,873	\$0	\$11,698,629
Total	108,821	\$2,599.18	\$282,845,838	\$0	\$15,619,522	\$0	\$267,226,316
Buy-In for Individuals with Disabilities							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$5,624.36	\$38,813,714	\$0	\$17,459,266	\$3,895,182	\$17,459,266
Community Based Long-Term Care		\$897.42	\$6,193,097	\$0	\$2,785,792	\$621,513	\$2,785,792
Long-Term Care		\$25.21	\$174,004	\$0	\$78,271	\$17,462	\$78,271
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$60.46	\$417,249	\$0	\$187,688	\$41,873	\$187,688
Total	6,901	\$6,607.46	\$45,598,064	\$0	\$20,511,017	\$4,576,030	\$20,511,017
MAGI Adults⁽¹⁾							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds⁽¹⁾
Acute Care		\$3,584.45	\$1,393,921,466	\$0	\$78,334,367	\$0	\$1,315,587,099
Community Based Long-Term Care		\$19.01	\$7,393,551	\$0	\$1,154,133	\$0	\$6,239,418
Long-Term Care		\$2.21	\$858,620	\$0	\$47,224	\$0	\$811,396
Insurance		\$0.10	\$40,504	\$0	\$2,228	\$0	\$38,276
Service Management		\$119.88	\$46,617,500	\$0	\$2,563,962	\$0	\$44,053,538
Total	388,880	\$3,725.65	\$1,448,831,641	\$0	\$82,101,914	\$0	\$1,366,729,727
Non-Newly Eligibles							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$14,574.77	\$43,593,138	\$0	\$7,245,180	\$0	\$36,347,958
Community Based Long-Term Care		\$390.97	\$1,169,383	\$0	\$194,351	\$0	\$975,032
Long-Term Care		\$567.36	\$1,696,971	\$0	\$282,037	\$0	\$1,414,934
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$82.91	\$247,997	\$0	\$41,217	\$0	\$206,780
Total	2,991	\$15,616.01	\$46,707,489	\$0	\$7,762,785	\$0	\$38,944,704
MAGI Parents/Caretakers 60% to 68% FPL							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,811.50	\$30,832,803	\$0	\$15,416,401	\$0	\$15,416,402
Community Based Long-Term Care		\$13.11	\$143,779	\$0	\$71,889	\$0	\$71,890
Long-Term Care		\$2.64	\$28,987	\$0	\$14,493	\$0	\$14,494
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$107.03	\$1,173,774	\$0	\$586,887	\$0	\$586,887
Total	10,967	\$2,934.28	\$32,179,343	\$0	\$16,089,670	\$0	\$16,089,673
Continuous Eligibility for Children							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$1,145.85	\$45,497,101	\$0	\$22,748,550	\$0	\$22,748,551
Community Based Long-Term Care		\$2.93	\$116,522	\$0	\$58,261	\$0	\$58,261
Long-Term Care		\$0.00	\$0	\$0	\$0	\$0	\$0
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$173.62	\$6,893,825	\$0	\$3,446,912	\$0	\$3,446,913
Total	39,706	\$1,322.40	\$52,507,448	\$0	\$26,253,723	\$0	\$26,253,725
FY 2017-18 Summary							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Total	558,266	\$3,418.93	\$1,908,669,823	\$0	\$168,338,631	\$4,576,030	\$1,735,755,162

(1) The matching federal funds for this population will decrease from 95% to 94% effective January 1, 2018 in accordance with the Affordable Care Act.

(2) Figures may not sum due to rounding.

Exhibit J - Health Care Affordability Act of 2009 Estimates

Hospital Provider Fee - Fund Splits and Service Category Impacts by Expansion Population FY 2018-19							
MAGI Parents/Caretakers 69% to 133% FPL⁽¹⁾							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,476.62	\$288,181,670	\$0	\$18,780,103	\$0	\$269,401,567
Community Based Long-Term Care		\$1.64	\$191,076	\$0	\$30,763	\$0	\$160,313
Long-Term Care		\$0.13	\$15,601	\$0	\$1,014	\$0	\$14,587
Insurance		\$0.49	\$56,998	\$0	\$3,705	\$0	\$53,293
Service Management		\$116.91	\$13,603,850	\$0	\$884,250	\$0	\$12,719,600
Total	116,361	\$2,595.79	\$302,049,195	\$0	\$19,699,835	\$0	\$282,349,360
Buy-In for Individuals with Disabilities							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$5,592.58	\$44,254,122	\$0	\$19,879,020	\$4,496,081	\$19,879,021
Community Based Long-Term Care		\$846.18	\$6,695,802	\$0	\$3,007,764	\$680,273	\$3,007,765
Long-Term Care		\$22.71	\$179,718	\$0	\$80,729	\$18,259	\$80,730
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$61.43	\$486,086	\$0	\$218,350	\$49,385	\$218,351
Total	7,913	\$6,522.90	\$51,615,728	\$0	\$23,185,863	\$5,243,998	\$23,185,867
MAGI Adults⁽¹⁾							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds⁽¹⁾
Acute Care		\$3,597.79	\$1,449,873,671	\$0	\$95,932,189	\$0	\$1,353,941,482
Community Based Long-Term Care		\$19.23	\$7,750,803	\$0	\$1,330,813	\$0	\$6,419,990
Long-Term Care		\$2.02	\$815,201	\$0	\$52,988	\$0	\$762,213
Insurance		\$0.13	\$51,298	\$0	\$3,334	\$0	\$47,964
Service Management		\$121.35	\$48,904,660	\$0	\$3,178,803	\$0	\$45,725,857
Total	402,990	\$3,740.53	\$1,507,395,633	\$0	\$100,498,127	\$0	\$1,406,897,506
Non-Newly Eligibles							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$14,615.72	\$45,630,274	\$0	\$7,925,979	\$0	\$37,704,295
Community Based Long-Term Care		\$404.37	\$1,262,437	\$0	\$219,285	\$0	\$1,043,152
Long-Term Care		\$584.34	\$1,824,311	\$0	\$316,883	\$0	\$1,507,428
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$84.35	\$263,330	\$0	\$45,740	\$0	\$217,590
Total	3,122	\$15,688.77	\$48,980,352	\$0	\$8,507,887	\$0	\$40,472,465
MAGI Parents/Caretakers 60% to 68% FPL							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$2,755.27	\$31,013,836	\$0	\$15,506,918	\$0	\$15,506,918
Community Based Long-Term Care		\$13.57	\$152,728	\$0	\$76,364	\$0	\$76,364
Long-Term Care		\$2.72	\$30,591	\$0	\$15,295	\$0	\$15,296
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$109.95	\$1,237,625	\$0	\$618,812	\$0	\$618,813
Total	11,256	\$2,881.51	\$32,434,780	\$0	\$16,217,389	\$0	\$16,217,391
Continuous Eligibility for Children							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Acute Care		\$1,150.84	\$46,586,013	\$0	\$23,293,006	\$0	\$23,293,007
Community Based Long-Term Care		\$3.04	\$122,977	\$0	\$61,488	\$0	\$61,489
Long-Term Care		\$0.00	\$0	\$0	\$0	\$0	\$0
Insurance		\$0.00	\$0	\$0	\$0	\$0	\$0
Service Management		\$184.41	\$7,464,840	\$0	\$3,732,420	\$0	\$3,732,420
Total	40,480	\$1,338.29	\$54,173,830	\$0	\$27,086,914	\$0	\$27,086,916
FY 2018-19 Summary							
	Caseload	Per Capita	Total Funds⁽²⁾	General Fund	Hospital Provider Fee Fund	Medicaid Buy-in Fund	Federal Funds
Total	582,122	\$3,429.95	\$1,996,649,518	\$0	\$195,196,015	\$5,243,998	\$1,796,209,505

(1) The matching federal funds for this population will decrease from 94% to 93% effective January 1, 2019 in accordance with the Affordable Care Act.

(2) Figures may not sum due to rounding.