

Schedule 13

Funding Request for the FY 2016-17 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S01- Medical Services Premiums

Dept. Approval By: Josh Block  1/4/16 **Supplemental FY 2015-16**
 Change Request FY 2016-17
 Base Reduction FY 2016-17
 OSPB Approval By:  1/4/16 **Budget Amendment FY 2016-17**

Summary Information	Fund	FY 2015-16		FY 2016-17	FY 2017-18	
		Initial Appropriation	Supplemental Request Amount	Base Request	Budget Amendment	Continuation Amount
	Total	\$6,594,830,484	\$207,160,125	\$6,543,446,738	\$0	\$0
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items Impacted by Change Request	GF	\$1,816,359,768	\$37,869,753	\$1,798,277,508	\$0	\$0
	CF	\$703,597,288	\$115,663,744	\$700,504,787	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$4,074,873,428	\$53,626,628	\$4,044,664,443	\$0	\$0

Line Item Information	Fund	FY 2015-16		FY 2016-17	FY 2017-18	
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02. Medical Services Premiums - Medical and LT Care Services for Medicaid Eligible Indvls	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$1,816,359,768	\$37,869,753	\$1,798,277,508	\$0	\$0
	CF	\$703,597,288	\$115,663,744	\$700,504,787	\$0	\$0
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Letternote Text Revision Required?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	If Yes, describe the Letternote Text Revision: See Exhibit D of R-1 Request
Cash or Federal Fund Name and CORE Fund Number: See Exhibit D of R-1 Request					
Reappropriated Funds Source, by Department and Line Item Name: N/A					
Approval by OIT?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Required: <input checked="" type="checkbox"/>
Schedule 13s from Affected Departments:	N/A				
Other Information: N/A					