

Medicaid Enrollment Projection for SFY 2016 - SFY 2019

Month-Year		Medicaid Base Population & CHIP								FFS & MCO Medicaid Expansion		All Medicaid & CHIP	Estimated MM in Centennial Care Managed Care Organizations (CC MCO)				
		Full Benefit				Partial Benefit				Estimated Total Base Population (D+G+H+I)	Reported <sup>1,2</sup>	Estimated <sup>1,2</sup>	Estimated (J+L)	Physical Health	Long Term Services and Supports (LTSS)	Medicaid Expansion	Total CC MCO
		Reported <sup>1,2</sup>	Estimated <sup>3</sup>	Change from Dec. 2017 Projection	Month Over Month Change	Family Planning	QMBs	SLIMBs & QI1s	Estimated <sup>3</sup>								
A	B	C	D	E	F	G	H	I	J	K	L	O	P	Q	R	S	
SFY 2016	Jul-15	506,368	506,469	(3)		59,107	23,648	10,192	599,416	225,383	225,471	824,887	394,883	47,605	205,516	648,004	
	Aug-15	509,212	509,085	(208)	2,616	60,155	23,825	10,343	603,408	228,014	228,099	831,507	397,535	47,697	207,789	653,021	
	Sep-15	510,417	510,564	79	1,479	61,456	23,810	10,490	606,320	230,249	230,321	836,641	398,786	47,557	210,178	656,521	
	Oct-15	510,817	511,001	92	437	62,557	23,881	10,663	608,102	231,604	231,668	839,770	398,896	48,113	211,563	658,572	
	Nov-15	511,673	511,843	92	842	64,184	23,943	10,791	610,761	234,443	234,496	845,257	399,503	48,347	214,077	661,927	
	Dec-15	513,739	514,019	199	2,176	66,223	23,946	10,966	615,154	238,711	238,733	853,887	397,558	48,366	216,757	662,681	
	Jan-16	513,469	513,509	55	(510)	66,822	23,931	11,120	615,382	241,958	241,967	857,349	400,250	48,552	220,581	669,383	
	Feb-16	515,715	515,717	81	2,208	68,027	24,002	11,227	618,973	244,833	244,842	863,815	402,275	48,575	223,163	674,013	
	Mar-16	516,946	516,940	114	1,223	69,331	23,930	11,324	621,525	246,684	246,692	868,217	404,074	48,850	223,796	676,720	
	Apr-16	516,042	516,076	210	(864)	70,642	24,174	11,210	622,102	246,583	246,589	868,691	404,348	48,948	222,269	675,565	
	May-16	516,615	516,641	251	565	71,917	24,241	11,294	624,093	248,997	249,005	873,098	405,457	49,157	223,726	678,340	
	Jun-16	<b>517,311</b>	<b>517,352</b>	290	<b>710</b>	<b>73,664</b>	<b>24,298</b>	<b>11,450</b>	<b>626,764</b>	<b>251,219</b>	<b>251,223</b>	<b>877,987</b>	<b>406,118</b>	<b>49,406</b>	<b>225,332</b>	<b>680,856</b>	
SFY 2017	Jul-16	518,979	519,021	353	1,669	74,859	24,233	11,367	629,480	253,242	253,242	882,722	408,144	49,732	226,210	684,086	
	Aug-16	520,890	520,926	178	1,906	76,571	24,257	11,463	633,217	255,765	255,761	888,978	411,797	50,004	226,610	688,411	
	Sep-16	520,066	520,124	218	(802)	77,954	24,314	11,493	633,885	257,549	257,542	891,427	411,173	50,052	229,526	690,751	
	Oct-16	520,121	520,184	267	60	79,025	24,325	11,580	635,114	259,402	259,393	894,507	411,950	50,200	231,091	693,241	
	Nov-16	520,808	520,878	300	694	80,582	24,710	11,667	637,837	261,303	261,293	899,130	412,995	50,250	233,375	696,620	
	Dec-16	521,080	521,171	339	293	82,330	25,068	11,703	640,272	264,256	264,247	904,519	414,125	49,594	236,286	700,005	
	Jan-17	523,047	523,173	386	2,001	83,441	24,935	11,843	643,391	268,171	268,165	911,556	416,604	49,595	238,639	704,838	
	Feb-17	523,404	523,550	425	378	84,047	25,018	11,861	644,476	269,786	269,786	914,262	416,334	49,695	240,819	706,848	
	Mar-17	524,239	524,405	500	854	84,678	25,121	11,890	646,094	270,555	270,561	916,654	417,150	49,819	241,744	708,713	
	Apr-17	522,372	522,454	471	(1,951)	83,853	26,256	10,723	643,285	270,355	270,368	913,653	415,908	49,875	241,605	707,388	
	May-17	520,559	520,605	483	(1,849)	84,501	27,011	10,013	642,130	268,745	268,766	910,896	414,279	49,869	240,115	704,263	
	Jun-17	<b>517,718</b>	<b>517,753</b>	597	<b>(2,851)</b>	<b>84,233</b>	<b>25,772</b>	<b>10,740</b>	<b>638,498</b>	<b>266,529</b>	<b>266,556</b>	<b>905,054</b>	<b>412,170</b>	<b>49,834</b>	<b>238,175</b>	<b>700,179</b>	
SFY 2018	Jul-17	514,899	515,065	858	(2,688)	83,542	25,659	10,334	634,600	263,573	263,611	898,211	410,109	49,733	235,632	695,474	
	Aug-17	508,384	508,590	873	(6,475)	82,142	25,346	10,175	626,253	259,321	259,366	885,619	405,104	49,432	232,136	686,672	
	Sep-17	497,753	498,180	991	(10,410)	76,657	25,739	10,185	610,761	252,618	252,668	863,429	398,595	49,182	225,682	673,459	
	Oct-17	497,252	497,740	925	(439)	76,332	25,610	10,311	609,994	253,605	253,667	863,661	397,504	48,366	227,020	672,890	
	Nov-17	495,800	496,508	956	(1,232)	75,689	25,265	10,229	607,692	254,702	254,791	862,483	396,795	48,292	228,175	673,262	
	Dec-17	494,708	496,506	(579)	(2)	75,843	24,997	10,381	607,727	256,525	256,701	864,428	396,624	47,979	230,090	674,693	
	Jan-18	495,577	497,907	(131)	1,401	75,915	24,532	10,479	608,832	258,375	258,799	867,632	398,809	48,039	232,232	679,080	
	Feb-18	492,474	496,206	(2,771)	(1,701)	75,404	24,070	10,425	606,105	257,563	258,432	864,537	397,831	48,098	231,829	677,758	
	Mar-18	488,882	496,297	(3,663)	91	75,369	23,861	10,546	606,072	259,093	259,093	865,165	397,984	48,407	232,673	679,064	
	Apr-18		497,760	(3,269)	1,463	75,424	23,995	10,553	607,731	260,978	260,978	868,709	398,098	48,724	234,366	681,188	
	May-18		499,034	(2,970)	1,274	75,468	24,101	10,559	609,161	261,553	261,553	870,714	398,813	48,897	234,882	682,591	
	Jun-18		<b>500,318</b>	<b>(2,613)</b>	<b>1,284</b>	<b>75,582</b>	<b>24,206</b>	<b>10,566</b>	<b>610,671</b>	<b>262,006</b>	<b>262,006</b>	<b>872,676</b>	<b>399,538</b>	<b>49,071</b>	<b>235,289</b>	<b>683,897</b>	
SFY 2019	Jul-18		501,037	(2,697)	719	75,627	24,244	10,619	611,526		262,001	873,526	400,255	49,245	235,284	684,784	
	Aug-18		501,635	(2,873)	598	75,780	24,274	10,672	612,360		262,289	874,648	400,982	49,420	235,543	685,945	
	Sep-18		502,217	(2,956)	582	75,872	24,287	10,725	613,100		262,578	875,678	401,710	49,595	235,803	687,108	
	Oct-18		502,998	(2,939)	781	75,934	24,295	10,778	614,004		262,866	876,869	402,431	49,771	236,061	688,263	
	Nov-18		503,777	(2,850)	779	75,983	24,335	10,831	614,925		263,200	878,125	403,161	49,949	236,361	689,471	
	Dec-18		504,322	(3,038)	545	76,145	24,384	10,884	615,734		263,468	879,201	403,884	50,126	236,602	690,611	
	Jan-19		505,114	(3,055)	792	76,185	24,400	10,937	616,635		263,733	880,368	404,616	50,304	236,840	691,760	
	Feb-19		505,860	(3,025)	746	76,282	24,415	10,990	617,546		264,023	881,569	405,350	50,483	237,100	692,934	
	Mar-19		506,681	(3,024)	821	76,376	24,421	11,043	618,520		264,313	882,833	406,058	50,662	237,361	694,081	
	Apr-19		507,483	(2,965)	802	76,532	24,422	11,096	619,532		264,604	884,136	406,794	50,842	237,622	695,258	
	May-19		508,207	(2,942)	724	76,618	24,454	11,149	620,427		264,895	885,321	407,522	51,023	237,883	696,427	
	Jun-19		<b>508,907</b>	<b>(2,976)</b>	<b>700</b>	<b>76,632</b>	<b>24,479</b>	<b>11,202</b>	<b>621,219</b>		<b>265,186</b>	<b>886,405</b>	<b>408,260</b>	<b>51,204</b>	<b>238,145</b>	<b>697,609</b>	

Updated: 4/20/2018

**Notes:**

1. From July 2015 to March 2018 the reported enrollments for the full benefit base and expansion populations are based on the March 2018 Monthly Eligibility Report, adjusting for the estimated number of clients with duplicate COEs (COE 100 and other COEs) and anticipated retroactive enrollment.
2. From April 2018 to June 2019 estimated enrollments are based on recent enrollment trends and prospective changes in enrollment/recertification processes, including SSI-driven closures, modified court orders and take-up of eligible uninsured individuals.

**Data Sources:**

Medicaid Eligibility Report is published on the HSD website on monthly basis to show the actual enrollment for the recent month, and it is available to the public.  
<http://www.hsd.state.nm.us/LookingForInformation/medicaid-eligibility.aspx>

STATE OF NEW MEXICO  
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Medicaid Children Enrollment Projection for SFY 2016-2019

Month-Year		Reported	Projected	Change from December 2017 Projection	Month Over Month Change
A	B	C	D	E	F
SFY 2016	Jul-15	375,893	376,392	255	
	Aug-15	378,154	378,750	245	2,358
	Sep-15	379,600	380,072	249	1,322
	Oct-15	380,070	380,524	443	452
	Nov-15	381,035	381,402	365	878
	Dec-15	382,788	383,131	341	1,729
	Jan-16	382,740	382,978	258	(153)
	Feb-16	384,295	384,533	275	1,555
	Mar-16	385,187	385,401	255	868
	Apr-16	385,212	385,147	-	(254)
	May-16	386,106	385,885	(137)	738
	Jun-16	<b>387,288</b>	<b>387,259</b>	70	1,374
SFY 2017	Jul-16	388,678	388,678	103	1,419
	Aug-16	390,380	390,380	121	1,702
	Sep-16	390,674	390,674	129	294
	Oct-16	391,094	391,094	171	420
	Nov-16	391,917	391,917	210	823
	Dec-16	392,980	392,980	248	1,063
	Jan-17	394,599	394,584	275	1,604
	Feb-17	394,716	394,686	299	102
	Mar-17	395,163	395,118	339	433
	Apr-17	393,787	393,727	370	(1,391)
	May-17	392,416	392,342	404	(1,385)
	Jun-17	<b>390,185</b>	<b>390,116</b>	469	(2,226)
SFY 2018	Jul-17	387,319	387,279	494	(2,837)
	Aug-17	382,386	382,379	528	(4,900)
	Sep-17	375,375	375,407	635	(6,972)
	Oct-17	375,171	375,251	663	(155)
	Nov-17	374,343	374,494	746	(757)
	Dec-17	374,123	374,411	45	(83)
	Jan-18	375,018	375,579	507	1,167
	Feb-18	373,019	374,247	(1,564)	(1,332)
	Mar-18	370,382	374,040	(2,575)	(208)
	Apr-18		375,142	(2,205)	1,103
	May-18		376,102	(1,942)	960
	Jun-18		<b>377,070</b>	(1,577)	968
SFY 2019	Jul-18		377,612	(1,617)	542
	Aug-18		378,063	(1,667)	451
	Sep-18		378,501	(1,802)	439
	Oct-18		379,090	(1,732)	589
	Nov-18		379,677	(1,696)	587
	Dec-18		380,088	(1,893)	411
	Jan-19		380,685	(1,835)	597
	Feb-19		381,247	(1,889)	562
	Mar-19		381,866	(1,829)	619
	Apr-19		382,470	(1,751)	604
	May-19		383,016	(1,757)	546
	Jun-19		<b>383,543</b>	(1,822)	528

Notes:

1. Medicaid Children are defined as any client less than age 21, regardless of category of eligibility.□
2. The reported enrollments for the months from July 2015 to March 2018 were based on the Monthly Eligibility Report released in April
3. The estimated enrollments for the months from July 2015 to March 2018 were based on Monthly Eligibility Report released in April 2018 and adjusted for expected retroactive enrollments. The estimated enrollments are based on recent enrollment trends and prospective changes in enrollment/recertification processes, including SSI-driven closures, modified court orders and take-up of eligible uninsured individuals.

Updated: 4/20/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Expenditures  
FY 17 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)

No.	Description	FY 16 Title XIX & XXI Projection	FY 17 % Completion	Title XIX Actual Paid YTD	Title XXI Actual Paid YTD	Others	FY 17 TOTAL Medicaid Projection	% Change from FY 16	December 2017 Data Projection	Change from Previous	No.
A	B	C	D	E	F	G	H	I	J	K	L
1	Inpatient Hospital	89,951	94.58%	69,478	352	-	73,460	-18.33%	74,050	(590)	1
2	DSH/GME/IME	114,330	100.00%	139,001	-	-	139,001	21.58%	139,001	-	2
3	Safety Net Care Pool/HQII Pool	71,681	100.00%	76,248	-	-	76,248	6.37%	76,248	-	3
4	Physician Services	39,652	98.25%	38,082	435	-	38,761	-2.25%	38,775	(14)	4
5	IHS Hospital	116,302	99.16%	117,478	-	-	118,469	1.86%	117,968	501	5
6	ICF IID	26,988	99.13%	26,841	-	-	27,076	0.33%	27,443	(368)	6
7	Clinic Services	48,180	68.86%	36,005	1,607	33,000	52,287	8.52%	52,312	(25)	7
8	Federal Qualified Health Centers	3,969	97.42%	3,786	79	-	3,886	-2.08%	3,935	(49)	8
9	Other Practitioners	30,036	96.22%	30,318	1,047	-	31,510	4.91%	31,472	38	9
10	Outpatient Hospital	42,799	98.58%	40,219	500	-	40,800	-4.67%	40,924	(124)	10
11	BH FFS	35,213	97.41%	35,702	706	-	36,650	4.08%	36,619	31	11
12	Others	53,411	96.68%	54,655	1,551	2,219	56,529	5.84%	62,782	(6,253)	12
13	<b>Fee-For-Service Subtotal</b>	<b>672,510</b>	<b>96.13%</b>	<b>667,814</b>	<b>6,277</b>	<b>35,219</b>	<b>694,677</b>	<b>3.30%</b>	<b>701,529</b>	<b>(6,853)</b>	13
14	DD & MF Traditional, and Mi Via Waiver	350,133	100.50%	368,968	-	(2,012)	367,133	4.86%	367,109	24	14
15	<b>Wavers Subtotal</b>	<b>350,133</b>	<b>100.50%</b>	<b>368,968</b>	<b>-</b>	<b>(2,012)</b>	<b>367,133</b>	<b>4.86%</b>	<b>367,109</b>	<b>24</b>	15
16	CC - Physical Health	1,513,885	93.27%	1,408,861	82,284	(19,278)	1,510,453	-0.23%	1,508,840	1,613	16
17	CC - LTSS	1,070,222	98.90%	1,064,773	1,237	4,500	1,076,608	0.60%	1,041,579	35,030	17
18	CC - Behavioral Health	341,195	94.16%	325,132	19,005	-	345,315	1.21%	345,200	115	18
19	CC Medicaid Expansion-Physical Health	1,027,441	99.18%	1,276,073	-	(58,512)	1,286,563	25.22%	1,286,812	(249)	19
20	CC Medicaid Expansion-Behavioral Health	101,098	99.19%	111,651	-	-	112,565	11.34%	112,582	(17)	20
21	Rate Increase for Primary Care Services	12,732	100.00%	234	-	-	234	-98.16%	234	-	21
22	Health Insurance Providers Fee	93,383	--	-	-	-	-	-100.00%	-	-	22
23	<b>Centennial Care MCO Subtotal</b>	<b>4,159,956</b>	<b>96.65%</b>	<b>4,186,724</b>	<b>102,526</b>	<b>(73,289)</b>	<b>4,331,739</b>	<b>4.13%</b>	<b>4,295,247</b>	<b>36,493</b>	23
24	Medicare Part A	1,300	100.00%	1,710	-	-	1,710	31.53%	1,710	-	24
25	Medicare Part B	109,909	100.00%	131,716	-	-	131,716	19.84%	131,716	-	25
26	Medicare Part D	36,702	100.00%	43,958	-	-	43,958	19.77%	43,958	-	26
27	<b>Medicare Subtotal</b>	<b>147,911</b>	<b>100.00%</b>	<b>177,384</b>	<b>-</b>	<b>-</b>	<b>177,384</b>	<b>19.93%</b>	<b>177,384</b>	<b>-</b>	27
28	Health Information Technology	9,100	100.00%	23,733	-	-	23,733	160.80%	23,733	-	28
29	Utilization Review & Contracts	4,326	54.97%	2,512	-	2,600	4,570	5.64%	4,570	-	29
30	Prior Yr. Charged to Current	113,467	0.00%	-	-	-	43,502	-61.66%	43,502	-	30
31	Current Yr. Charged to Future	(43,502)	--	-	-	-	(1,578)	--	-	(1,578)	31
32											32
33	<b>Grand Total</b>	<b>5,413,903</b>	<b>96.21%</b>	<b>5,427,135</b>	<b>108,803</b>	<b>(37,482)</b>	<b>5,641,160</b>	<b>4.20%</b>	<b>5,613,160</b>	<b>28,000</b>	33

**STATE OF NEW MEXICO  
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**Expenditures  
FY 17 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)**

**Notes:**

1. (Line 7) Clinic Services consists primarily of Medicaid School-Based Services (MSBS) with small amounts also going to clinics providing a variety of services.
2. (Line 12) Others contains: Transportation, Lab/X-Ray, Prosthetics, RHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, Maintenance, Family Planning, Ambulance, and PACE.
3. (Lines 16-21, Column E) Actual YTD payments are from the MCO database, instead of Share Accounting Detailed File (SADF), because SADF doesn't show payments by program.
4. (Lines 16-21, Column G) Others under the managed care projection lines reflect retroactive eligibility reconciliation and Medicaid Expansion risk corridor for CY16, Hepatitis-C reconciliation, and other adjustments.
5. (Line 22) Health Insurance Providers Fee is suspended for the 2016 data year, but will resume in data year 2017.
6. (Lines 18 and 20) Health Home budget has been built into the MCO rates starting from April 2016 for Behavior Health program for both Medicaid Base and Expansion population, so the expenditures on Health Home is not shown seperately.

External Meeting 4/20/2018

STATE OF NEW MEXICO  
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Revenue Sources  
FY 17 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)

No.	Description	FY 17 Projection	Federal Medicaid Expenditure Type and Federal Financial Participation (FFP) Rates										Federal Revenues	State Revenues	% of Composite Federal Share	No.
			HIT, IHS, Refugees, Medicaid Expansion (100% FFP) <sup>1</sup>	Medicaid Expansion (95% and 94% FFP) <sup>1</sup>	Health Homes, Sterilization & Family Planning Services (90% FFP) <sup>2</sup>	Breast & Cervical Cancer (EFMAP) <sup>3</sup>	Title XXI CHIP (EFMAP) <sup>4</sup>	Utilization Review (75% FFP) <sup>5</sup>	Title XIX Medicaid (FMAP) <sup>6</sup>	Admin and Fees (50% FFP) <sup>7</sup>	Non-FFP Expenses (0% FFP) <sup>8</sup>	Federal Revenues				
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	
1	Inpatient Hospital	73,460	19,031	11,789	127	55	371	-	42,147	-	-	60,669	12,791	82.59%	1	
2	DSH/GME/IME	139,001	-	-	-	-	-	-	139,001	-	-	98,871	40,129	71.13%	2	
3	Safety Net Care Pool/HQII Pool	76,248	-	-	-	-	-	-	76,248	-	-	54,235	22,013	71.13%	3	
4	Physician Services	38,761	5,931	5,049	-	19	438	-	27,257	-	84	30,526	8,235	78.76%	4	
5	IHS Hospital	118,469	118,469	-	-	-	-	-	-	-	-	118,469	-	100.00%	5	
6	ICF IID	27,076	72	153	-	-	-	-	26,851	-	-	19,276	7,800	71.19%	6	
7	Clinic Services	52,287	112	167	-	-	1,610	-	50,378	-	20	38,044	14,244	72.76%	7	
8	Federal Qualified Health Centers	3,886	394	576	(0)	0	79	-	2,839	-	-	3,034	852	78.07%	8	
9	Other Practitioners	31,510	358	523	-	0	1,052	-	29,605	-	-	22,902	8,608	72.68%	9	
10	Outpatient Hospital	40,800	7,626	5,839	-	22	501	-	26,858	-	-	32,718	8,082	80.19%	10	
11	BH FFS	36,650	15,987	1,700	0	3	710	-	18,245	-	9	31,267	5,383	85.31%	11	
12	Others	56,529	11,000	7,465	1,813	98	1,620	-	34,512	-	25	44,893	11,637	79.41%	12	
13	<b>Fee-For-Service Subtotal</b>	<b>694,677</b>	<b>178,979</b>	<b>33,261</b>	<b>1,940</b>	<b>198</b>	<b>6,380</b>	<b>-</b>	<b>473,943</b>	<b>-</b>	<b>137</b>	<b>554,904</b>	<b>139,773</b>	<b>79.88%</b>	13	
14	DD & MF Traditional, and Mi Via Waivers	367,133	-	-	-	-	-	4,822	359,607	2,703	-	260,242	106,891	70.88%	14	
15	<b>Waivers Subtotal</b>	<b>367,133</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>4,822</b>	<b>359,607</b>	<b>2,703</b>	<b>-</b>	<b>260,242</b>	<b>106,891</b>	<b>70.88%</b>	15	
16	CC - Physical Health	1,510,453	33,897	-	15,757	1,179	82,284	-	1,377,130	-	206	1,108,370	402,083	73.38%	16	
17	CC - LTSS	1,076,608	12,235	-	-	720	1,237	-	1,062,417	-	-	767,096	309,512	71.25%	17	
18	CC - Behavioral Health	345,315	3,044	-	1,220	124	19,005	-	321,923	-	-	251,568	93,747	72.85%	18	
19	CC Medicaid Expansion-Physical Health	1,286,563	629,290	657,273	-	-	-	-	313	-	-	1,253,402	33,161	97.42%	19	
20	CC Medicaid Expansion-Behavioral Health	112,565	53,709	58,856	-	-	-	-	30	-	-	109,594	2,972	97.36%	20	
21	Rate Increase for Primary Care Services	234	32	-	-	-	-	-	202	-	-	176	58	75.02%	21	
22	Health Insurance Providers Fee	-	-	-	-	-	-	-	-	-	-	-	-	-	22	
23	<b>Centennial Care MCO Subtotal</b>	<b>4,331,739</b>	<b>732,207</b>	<b>716,129</b>	<b>16,977</b>	<b>2,022</b>	<b>102,526</b>	<b>-</b>	<b>2,762,015</b>	<b>-</b>	<b>206</b>	<b>3,490,206</b>	<b>841,534</b>	<b>80.57%</b>	23	
24	Medicare Part A	1,710	-	-	-	-	-	-	1,710	-	-	1,234	476	72.16%	24	
25	Medicare Part B	131,716	5,379	-	-	-	-	-	110,982	-	15,355	84,125	47,591	63.87%	25	
26	Medicare Part D	43,958	-	-	-	-	-	-	-	-	43,958	-	43,958	0.00%	26	
27	<b>Medicare Subtotal</b>	<b>177,384</b>	<b>5,379</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>112,691</b>	<b>-</b>	<b>59,313</b>	<b>85,358</b>	<b>92,025</b>	<b>48.12%</b>	27	
28	Health Information Technology	23,733	23,733	-	-	-	-	-	-	-	-	23,733	-	100.00%	28	
29	Utilization Review & Contracts	4,570	-	-	-	-	-	2,600	376	1,595	-	3,018	1,552	66.04%	29	
30															30	
31	Prior Yr. Charged to Current	43,502	-	-	-	-	-	-	43,502	-	-	30,612	12,890	70.37%	31	
32	Current Yr. Charged to Future	(1,578)	-	-	-	-	-	-	(1,578)	-	-	(1,244)	(334)	-	32	
33															33	
34	<b>Grand Total</b>	<b>5,641,160</b>	<b>940,298</b>	<b>749,390</b>	<b>18,917</b>	<b>2,220</b>	<b>108,906</b>	<b>7,422</b>	<b>3,750,557</b>	<b>4,298</b>	<b>59,656</b>	<b>4,446,830</b>	<b>1,194,330</b>	<b>78.83%</b>	34	

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

FY 17 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)

No.	State Share Revenues:	FY 17 Op. Budget	Billed Amount	Collection YTD	HSD Projection	Change from Previous
35	Department of Health (Line 18 & 19) <sup>9</sup>	103,360	105,103	105,103	105,103	-
36	Department of Health Additional Need /(Surplus)		388	388	388	0
37	Department of Health for Early Intervention	8,062	7,873	7,873	7,873	-
38	Department of Health for FQHCs	462	462	462	463	-
39	Department of Health for EC	1		-	1	-
40	Children, Youth and Families	-		-	-	-
41	County Supported Medicaid Fund	33,533	31,835	31,447	31,835	-
42	Tobacco Settlement Revenue, Base	27,319	27,319	27,319	27,319	-
43	Tobacco Settlement Revenue	-		-	-	-
44	UNM IGT	43,007	40,600	40,600	40,600	-
45	<b>Total Operating Transfers In</b>	<b>215,744</b>	<b>213,580</b>	<b>213,193</b>	<b>213,582</b>	<b>0</b>
46						
47	School Based Health Services	-		2	2	-
48	Physician UPL UNM	1,993	1,160	1,616	1,616	-
49	Safety Net Care Pool (SNCP) <sup>11</sup>	26,618	23,259	23,259	23,259	-
50	Miner's Colfax <sup>13</sup>	771		-	-	-
51	County Contribution for Incarcerated Population <sup>14</sup>	-		-	-	-
52	Drug Rebates	20,434		28,413	28,413	-
53	Fraud	872		322	322	-
54	Income Diversion Trust	486		639	639	-
55	Buy-In Recovery	215		15	15	-
56	Cost Settlement	500		180	180	-
57	Estate Recovery	9		9	9	-
58	Misc. Revenue	-		313	313	-
59	HMS-RAC-TPL/Subrogation	500		-	-	-
60	<b>Total Other Revenues</b>	<b>52,398</b>	<b>24,419</b>	<b>54,767</b>	<b>54,768</b>	<b>-</b>
61						
62	<b>General Fund Need</b>				<b>912,243</b>	<b>8,792</b>
63						
64	<b>HB 2 / SFC</b>				<b>913,637</b>	<b>-</b>
65	<b>DSH Settlement</b>				<b>16,806</b>	<b>-</b>
66	<b>BHSD Previous Year Reversion</b>				<b>500</b>	<b>-</b>
67	<b>Transfer to support MMISR</b>				<b>(5,000)</b>	<b>-</b>
68	<b>State Revenue Surplus / (Shortfall)</b>				<b>13,699</b>	<b>(8,792)</b>
69	<b>Reversion</b>				<b>(13,699)</b>	<b>-</b>
70	<b>State Revenue Surplus / (Shortfall) After Reversion</b>				<b>-</b>	<b>(8,792)</b>

PROJECTED REVENUES	
Medicaid Projection	5,641,160
Federal Revenues	4,446,830
Federal Disallowance <sup>10</sup>	-
MSBS CPE <sup>12</sup>	13,738
IHS Referral 100% FFP	-
All State Revenues	1,180,593

Notes:

- HIT, IHS, QI-1 Medicare Part B premiums, Refugees, and Medicaid Expansion are eligible for 100% FFP. Under ACA, the Medicaid Expansion population will be federally funded 100% in CY2016 and 95% in CY2017.
- Health Homes, sterilization, and family planning service costs are eligible for 90% FFP.
- Breast and cervical cancer (BCC) program receives enhanced FMAP.
- CHIP is a Title XXI program with enhanced FMAP. FY17 will have 100% FFP with the 23% increase as authorized by the ACA.
- Utilization review is federally matched at 75% admin. expenses.
- Title XIX expenditures with regular FMAP. The FFY 2017 FMAP is from the Federal Register published on November 25, 2015.
- Administration expenditures are eligible for 50% FFP.
- Pregnancy termination, special needs, state only buy-in for Medicare Part B and all Medicare Part D buy-ins (Claw back) expenditures are not eligible for federal financial participation.
- DOH appropriation is for Medicaid DD traditional and Mi Via waiver services only; projected revenue is without the 3% for admin. Medically Fragile waiver appropriation of \$1.4 million is in the HSD budget in FY17.
- Includes potential disallowance for 100% IHS referral.
- This is the 1/12<sup>th</sup> of the gross receipts tax contributed by the counties to support the SNCP and Hospital Payments.
- Starting from FY16, school districts will contribute the state share of Medicaid School Based Services through Certified Public Expenditures.
- Miner's Colfax hospital will contribute the state share of SNCP supplemental payments. The current estimate is for payments issued in CY2016.
- Senate Bill 42 stated that counties will contribute the state share of payments for fee-for-service inpatient services for their respective incarcerated populations.

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STATE OF NEW MEXICO  
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Expenditures  
FY 18 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)

No. A	Description B	FY 17 Title XIX & XXI Projection	FY 18 % Completion	Title XIX Actual Paid YTD	Title XXI Actual Paid YTD	Others G	FY 18 TOTAL Medicaid Projection	% Change from FY 17	December 2017 Data Projection	Change from Previous	No. L
		C	D	E	F		H	I	J	K	
1	Inpatient Hospital	73,460	58.91%	51,466	184	-	87,365	18.93%	87,618	(253)	1
2	DSH/GME/IME	139,001	49.43%	68,843	-	-	139,285	0.20%	139,285	-	2
3	Safety Net Care Pool/HQII Pool	76,248	44.32%	34,445	-	-	77,715	1.92%	77,715	-	3
4	Physician Services	38,761	64.17%	24,871	295	-	38,757	-0.01%	39,518	(761)	4
5	IHS Hospital	118,469	67.86%	83,280	-	-	122,719	3.59%	125,683	(2,964)	5
6	ICF IDD	27,076	67.69%	19,302	-	-	28,516	5.32%	28,705	(189)	6
7	Clinic Services	52,287	23.98%	12,252	1,054	33,000	51,103	-2.27%	51,109	(6)	7
8	Federal Qualified Health Centers	3,886	54.18%	2,711	76	678	5,004	28.77%	5,372	(368)	8
9	Other Practitioners	31,510	63.66%	20,782	764	-	32,646	3.60%	33,271	(626)	9
10	Outpatient Hospital	40,800	67.74%	28,269	334	-	41,733	2.29%	42,149	(416)	10
11	BH FFS	36,650	64.88%	25,119	389	-	38,714	5.63%	39,455	(741)	11
12	Others	56,529	72.04%	42,507	1,053	100	59,008	4.39%	58,857	152	12
13	<b>Fee-For-Service Subtotal</b>	<b>694,677</b>	<b>57.27%</b>	<b>413,846</b>	<b>4,150</b>	<b>33,778</b>	<b>722,564</b>	<b>4.01%</b>	<b>728,737</b>	<b>(6,172)</b>	13
14	DD & MF Traditional, and Mi Via Waivers	367,133	67.97%	263,434	-	2,012	387,547	5.56%	385,430	2,117	14
15	<b>Waivers Subtotal</b>	<b>367,133</b>	<b>67.97%</b>	<b>263,434</b>	<b>-</b>	<b>2,012</b>	<b>387,547</b>	<b>5.56%</b>	<b>385,430</b>	<b>2,117</b>	15
16	CC - Physical Health	1,510,453	69.49%	1,018,620	56,769	(16,775)	1,465,859	-2.95%	1,473,594	(7,735)	16
17	CC - LTSS	1,076,608	73.11%	764,525	937	3,200	1,045,760	-2.87%	1,034,573	11,186	17
18	CC - Behavioral Health	345,315	68.77%	223,819	11,843	4,350	325,482	-5.74%	324,996	486	18
19	CC Medicaid Expansion-Physical Health	1,286,563	72.66%	923,611	-	(2,963)	1,271,199	-1.19%	1,268,801	2,398	19
20	CC Medicaid Expansion-Behavioral Health	112,565	71.16%	85,043	-	1,650	119,513	6.17%	119,448	65	20
21	Rate Increase for Primary Care Services	234	--	-	-	-	-	-100.00%	-	-	21
22	Health Insurance Providers Fee	-	0.00%	-	-	88,338	91,187	--	91,187	-	22
23	<b>Centennial Care MCO Subtotal</b>	<b>4,331,739</b>	<b>69.82%</b>	<b>3,015,619</b>	<b>69,549</b>	<b>77,800</b>	<b>4,318,999</b>	<b>-0.29%</b>	<b>4,312,598</b>	<b>6,401</b>	23
24	Medicare Part A	1,710	76.06%	1,056	-	-	1,388	-18.79%	1,399	(10)	24
25	Medicare Part B	131,716	74.92%	104,825	-	-	139,919	6.23%	139,748	170	25
26	Medicare Part D	43,958	66.73%	32,518	-	-	48,730	10.86%	47,587	1,143	26
27	<b>Medicare Subtotal</b>	<b>177,384</b>	<b>72.83%</b>	<b>138,399</b>	<b>-</b>	<b>-</b>	<b>190,037</b>	<b>7.13%</b>	<b>188,734</b>	<b>1,303</b>	27
28	Health Information Technology	23,733	49.73%	9,946	-	-	20,000	-15.73%	20,000	-	28
29	Utilization Review & Contracts	4,570	0.00%	-	-	2,500	4,470	-2.19%	4,470	-	29
30	Prior Year Charged to Current	43,502	0.00%	-	-	-	1,578	-96.37%	-	1,578	30
31	Current Year Charged to Future	(1,578)	--	-	-	-	-	--	-	-	31
32											32
33	<b>Grand Total</b>	<b>5,641,160</b>	<b>68.04%</b>	<b>3,841,244</b>	<b>73,699</b>	<b>116,090</b>	<b>5,645,196</b>	<b>0.07%</b>	<b>5,639,969</b>	<b>5,227</b>	33



**STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division**

**Expenditures  
FY 18 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)**

**Notes:**

1. (Line 7) Clinic Services consists primarily of Medicaid School-Based Services (MSBS) with small amounts also going to clinics providing a variety of services.
2. (Line 12) Others contains: Transportation, Lab/X-Ray, Prosthetics, RHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, Maintenance, Family Planning, Ambulance, and PACE.
3. (Line 14) DD, Mi Via, and MF Waivers includes expenditures from FY17 that exceed the budget.
4. (Lines 16-22, Column E) Actual YTD payments are from the MCO database, instead of Share Accounting Detailed File (SADF), because SADF doesn't show payments by programs.
5. (Lines 16-22, Column G) Others under the managed care projection lines reflect retroactive eligibility reconciliation and Medicaid Expansion risk corridor for CY16, Hepatitis-C reconciliation and other adjustments.
6. (Lines 18 and 20) Health Home budget has been built into the MCO rates starting from April 2016 for the Behavior Health program for both Medicaid Traditional and Expansion population, so the expenditures on Health Home is not separately stated.
7. (Line 22) Health Insurance Providers Fee was suspended for the 2016 data year, but was resumed for data year 2017.

External Meeting 4/20/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Revenue Sources  
FY 18 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)

No.	Description	FY 18 Projection	Federal Medicaid Expenditure Type and Federal Financial Participation (FFP) Rates											Federal Revenues	State Revenues	% of Composite Federal Share	No.
			HIT, IHS, Refugees, Medicaid Expansion (100% FFP) <sup>1</sup>	Medicaid Expansion (95% FFP) <sup>1</sup>	Medicaid Expansion (94% FFP) <sup>2</sup>	Health Homes, Sterilization & Family Planning Services (90% FFP) <sup>2</sup>	Breast & Cervical Cancer (EFMAP) <sup>3</sup>	Title XXI CHIP (EFMAP) <sup>4</sup>	Utilization Review (75% FFP) <sup>5</sup>	Title XIX Medicaid (FMAP) <sup>6</sup>	Admin and Fees (50% FFP) <sup>7</sup>	Non-FFP Expenses (0% FFP) <sup>8</sup>					
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	
1	Inpatient Hospital	87,365	18,450	13,244	10,803	150	-	312	-	44,406	-	-	73,627	13,737	84.28%	1	
2	Safety Net Care Pool/HQII Pool	77,715	-	-	-	-	-	-	-	77,715	-	-	56,079	21,636	72.16%	2	
3	DSH/GME/IME	139,285	-	-	-	-	-	-	-	139,285	-	-	100,508	38,777	72.16%	3	
4	Physician Services	38,757	3,193	4,927	3,804	-	22	440	-	26,304	-	66	30,854	7,902	79.61%	4	
5	IHS Hospital	122,719	122,719	-	-	-	-	-	-	-	-	-	122,719	-	100.00%	5	
6	ICF IDD	28,516	-	287	208	-	-	-	-	28,022	-	-	20,630	7,886	72.35%	6	
7	Clinic Services	51,103	-	301	156	-	-	1,417	-	49,203	-	26	37,340	13,763	73.07%	7	
8	Federal Qualified Health Centers	5,004	2	663	371	-	0	118	-	3,849	-	-	3,872	1,132	77.38%	8	
9	Other Practitioners	32,646	35	540	332	-	-	1,157	-	30,581	-	-	24,033	8,613	73.62%	9	
10	Outpatient Hospital	41,733	4,361	6,343	4,714	-	96	488	-	25,732	-	-	33,907	7,826	81.25%	10	
11	BH FFS	38,714	15,221	2,492	1,555	0	1	589	-	18,849	-	8	33,210	5,504	85.78%	11	
12	Others	59,008	3,656	8,745	5,135	1,637	7	1,483	-	38,320	-	25	47,309	11,699	80.17%	12	
13	<b>Fee-For-Service Subtotal</b>	<b>722,564</b>	<b>167,638</b>	<b>37,542</b>	<b>27,078</b>	<b>1,787</b>	<b>126</b>	<b>6,004</b>	<b>-</b>	<b>482,266</b>	<b>-</b>	<b>124</b>	<b>584,088</b>	<b>138,476</b>	<b>80.84%</b>	13	
14	DD & MF Traditional, and Mi Via Waiver	387,547	-	-	-	-	-	-	5,066	379,942	2,539	-	278,447	109,100	71.85%	14	
15	<b>Waivers Subtotal</b>	<b>387,547</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>5,066</b>	<b>379,942</b>	<b>2,539</b>	<b>-</b>	<b>278,447</b>	<b>109,100</b>	<b>71.85%</b>	15	
16	CC - Physical Health	1,465,859	40,979	-	-	15,757	1,135	79,573	-	1,328,414	-	-	1,090,806	375,052	74.41%	16	
17	CC - LTSS	1,045,760	11,954	-	-	-	720	937	-	1,032,150	-	-	755,628	290,132	72.26%	17	
18	CC - Behavioral Health	325,482	3,418	-	-	1,220	117	15,835	-	304,892	-	-	239,697	85,785	73.64%	18	
19	CC Medicaid Expansion-Physical Health	1,271,199	27,219	613,030	630,950	-	-	-	-	-	-	-	1,202,691	68,509	94.61%	19	
20	CC Medicaid Expansion-Behavioral Health	119,513	2,191	55,836	61,487	-	-	-	-	-	-	-	113,032	6,481	94.58%	20	
21	Rate Increase for Primary Care Services	-	-	-	-	-	-	-	-	-	-	-	-	-	-	21	
22	Health Insurance Providers Fee	91,187	-	35,782	-	-	-	2,849	-	52,556	-	-	74,191	16,996	81.36%	22	
23	<b>Centennial Care MCO Subtotal</b>	<b>4,318,999</b>	<b>85,760</b>	<b>704,648</b>	<b>692,437</b>	<b>16,977</b>	<b>1,972</b>	<b>99,194</b>	<b>-</b>	<b>2,718,012</b>	<b>-</b>	<b>-</b>	<b>3,476,044</b>	<b>842,955</b>	<b>80.48%</b>	23	
24	Medicare Part A	1,388	-	-	-	-	-	-	-	1,388	-	-	1,002	387	72.16%	24	
25	Medicare Part B	139,919	4,545	-	-	-	-	-	-	118,205	-	17,169	89,539	50,380	63.99%	25	
26	Medicare Part D	48,730	-	-	-	-	-	-	-	-	-	48,730	-	48,730	0.00%	26	
27	<b>Medicare Subtotal</b>	<b>190,037</b>	<b>4,545</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>119,593</b>	<b>-</b>	<b>65,899</b>	<b>90,541</b>	<b>99,946</b>	<b>47.64%</b>	27	
28	Health Information Technology	20,000	20,000	-	-	-	-	-	-	-	-	-	20,000	-	100.00%	28	
29	Utilization Review & Contracts	4,470	-	-	-	-	-	-	2,500	1,970	-	-	3,297	1,174	73.75%	29	
30	Prior Year Charged to Current	1,578	-	-	-	-	-	-	-	1,578	-	-	1,244	334	78.83%	30	
31	Current Year Charged to Future	-	-	-	-	-	-	-	-	-	-	-	-	-	-	31	
32																32	
33	<b>Grand Total</b>	<b>5,645,196</b>	<b>277,943</b>	<b>742,190</b>	<b>719,515</b>	<b>18,764</b>	<b>2,097</b>	<b>105,198</b>	<b>7,566</b>	<b>3,703,360</b>	<b>2,539</b>	<b>66,023</b>	<b>4,453,661</b>	<b>1,191,535</b>	<b>78.89%</b>	33	

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Revenue Sources  
FY 18 Budget Projection Lag Model with Actual Data Thru March 2018 (\$000s)

No.	State Share Revenues:	FY 18 Op. Budget	Billed Amount	Collection YTD	HSD Projection	Change from Previous
35	Department of Health (Line 18 & 19) <sup>9</sup>	104,216	80,663	3,192	104,216	2,000
36	Department of Health Additional Need /(Surplus) <sup>15</sup>				3,484	(1,163)
37	Department of Health for Early Intervention	8,292	6,026	2,102	8,292	-
38	Department of Health for FQHCs	560	462	462	560	-
39	Department of Health for EC	1			1	-
40	Children, Youth and Families	-			-	-
41	County Supported Medicaid Fund	28,515	21,028	16,542	28,515	0
42	Tobacco Settlement Revenue, Base	29,319		24,433	27,816	(1,504)
43	Tobacco Settlement Revenue	-			-	-
44	UNM IGT	44,482			42,347	-
45	<b>Total Operating Transfers In</b>	<b>215,386</b>	<b>108,180</b>	<b>46,732</b>	<b>215,232</b>	<b>(666)</b>
46						
47	Physician UPL UNM	1,681	1,259	823	1,605	-
48	Safety Net Care Pool (SNCP) <sup>11</sup>	22,790	23,670	17,797	22,585	-
49	SNCP (Additional Hospital Payments) <sup>12</sup>	-			-	-
50	County Contribution for Incarcerated Population <sup>14</sup>				-	-
51	Drug Rebates	28,867		27,141	32,326	-
52	Fraud	872		867	872	-
53	Income Diversion Trust	486		367	486	-
54	Buy-In Recovery	215		13	215	-
55	Cost Settlement	500		663	663	163
56	Estate Recovery	9		37	37	28
57	Miscellaneous Revenue			350	350	286
58	HMS-RAC-TPL/Subrogation	500			-	-
59	<b>Total Other Revenues</b>	<b>55,920</b>	<b>24,929</b>	<b>48,058</b>	<b>59,138</b>	<b>477</b>
60						
61	<b>General Fund Need</b>				<b>903,970</b>	<b>(5,776)</b>
62						
63	<b>FY 2018 Appropriation</b>	<b>915,637</b>			<b>915,637</b>	<b>-</b>
64						
65	<b>State Revenue Surplus / (Shortfall)</b>				<b>11,667</b>	<b>5,776</b>
66						

PROJECTED REVENUES	
Medicaid Projection	5,645,196
Federal Revenues	4,453,661
Federal Disallowance <sup>10</sup>	(3,572)
MSBS CPE <sup>13</sup>	13,195
IHS Referral 100% FFP	3,572
All State Revenues	1,178,340

**Notes:**

- HIT, IHS, QI-1 Medicare Part B premiums, Refugees, and Medicaid Expansion are eligible for 100% FFP. Under ACA, the Medicaid Expansion population will be federally funded 100% in CY2016, 95% in CY2017, and 94% in CY2018.
- Health Homes, sterilization and family planning service costs are eligible for 90% FFP.
- Breast and cervical cancer (BCC) program receives enhanced FMAP.
- CHIP is a Title XXI program with enhanced FMAP. FY17 will have 100% FFP with the 23% increase as authorized by the ACA.
- Utilization review is federally matched at 75%; admin. expenses.
- Title XIX expenditures with regular FMAP. The FFY 2018 FMAP is from the Federal Register published on November 15, 2016.
- Administration expenditures are eligible for 50% FFP.
- Pregnancy termination, special needs, state only buy-in for Medicare Part B and all Medicare Part D buy-ins (Claw back) expenditures are not eligible for FFP.
- DOH appropriation is for Medicaid DD traditional and Mi Via waiver services only; projected revenue is without the 3% for admin. Medically Fragile waiver appropriation of \$1.4 million is in the HSD budget in FY17.
- Includes potential disallowance for 100% IHS referral.
- This is 1/12<sup>th</sup> of the gross receipts tax contributed by the counties to support the Safety Net Care Pool and Hospital Payments.
- This line represents the additional county support to fully fund the Safety Net Care Pool.
- Starting from FY16, school districts will contribute the state share of Medicaid School Based
- Senate Bill 42 stated that counties will contribute the state share of payments for fee-for-service inpatient services for their respective incarcerated populations.
- The DOH shortfall includes \$2 million in expenditures (\$0.58 GF) from FY2017. DOH received a supplemental of \$2 million. This leaves an additional \$2.9 million shortfall.

4/20/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Expenditures  
FY 19 Budget Projection Trend Model (\$000s)

No.	Description	FY 18 Title	FY 18 Title XIX	Δ				Δ				FY 19 Title	FY 19 Title	FY 19 TOTAL	% Change	December	Change	No.
		XIX & XXI Projection	Projected Claims	Δ Price	\$ Impact	Recipient	\$ Impact	Utilization	\$ Impact	Lump Sum	Others	XIX Projection	XXI Projection	Medicaid Projection	from FY18	2017 Projection	from Previous	
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
1	Inpatient Hospital	87,365	87,053	0.00%	-	0.85%	736	0.00%	-	-	-	87,789	315	88,104	0.85%	88,357	(254)	1
2	DSH/GME/IME	139,285	-	--	-	--	-	--	-	139,285	-	139,285	-	139,285	0.00%	139,285	-	2
3	Safety Net Care Pool/HQII Pool	77,715	-	--	-	--	-	--	-	80,901	-	80,901	-	80,901	4.10%	80,901	-	3
4	Physician Services	38,757	32,791	0.00%	-	0.85%	280	0.00%	-	5,525	-	38,596	448	39,044	0.74%	39,812	(767)	4
5	IHS Hospital	122,719	122,719	2.30%	2,823	0.00%	-	0.00%	-	-	-	125,542	-	125,542	2.30%	128,574	(3,032)	5
6	ICF-IID	28,516	28,516	0.00%	-	0.25%	72	0.00%	-	-	-	28,588	-	28,588	0.25%	28,777	(189)	6
7	Clinic Services	51,103	16,686	0.00%	-	0.00%	-	0.00%	-	-	33,000	49,686	1,442	51,128	0.05%	51,134	(5)	7
8	Federal Qualified Health Centers	5,004	4,207	2.69%	113	0.00%	0	0.00%	-	-	678	4,999	122	5,120	2.33%	5,498	(378)	8
9	Other Practitioners	32,646	31,488	0.00%	-	0.00%	-	0.00%	-	-	-	31,488	1,178	32,667	0.06%	33,292	(626)	9
10	Outpatient Hospital	41,733	41,245	0.00%	-	0.00%	-	0.00%	-	-	-	41,245	497	41,742	0.02%	42,157	(415)	10
11	Others	59,008	61,541	0.00%	-	0.51%	316	0.00%	-	(4,100)	100	57,856	1,509	59,365	0.61%	59,214	151	11
12	BH FFS	38,714	38,126	0.07%	25	0.00%	0	0.00%	-	-	-	38,151	599	38,750	0.09%	39,490	(740)	12
13	<b>Fee-For-Service Subtotal</b>	<b>722,564</b>	<b>464,373</b>	<b>0.64%</b>	<b>2,961</b>	<b>0.30%</b>	<b>1,404</b>	<b>0.00%</b>	<b>-</b>	<b>221,611</b>	<b>33,778</b>	<b>724,126</b>	<b>6,110</b>	<b>730,236</b>	<b>1.06%</b>	<b>736,491</b>	<b>(6,255)</b>	13
14	DD & MF Traditional, and Mi Via Waiver	387,547	378,108	-0.86%	(3,268)	0.02%	81	0.76%	2,844	7,427	-	385,192	-	385,192	-0.61%	382,223	2,969	14
15	<b>Waivers Subtotal</b>	<b>387,547</b>	<b>378,108</b>	<b>-0.86%</b>	<b>(3,268)</b>	<b>0.02%</b>	<b>81</b>	<b>0.76%</b>	<b>2,844</b>	<b>7,427</b>	<b>-</b>	<b>385,192</b>	<b>-</b>	<b>385,192</b>	<b>-0.61%</b>	<b>382,223</b>	<b>2,969</b>	15
16	CC - Physical Health	1,465,859	1,360,846	0.00%	-	1.15%	15,669	1.56%	21,444	42,447	(17,744)	1,422,662	81,676	1,504,338	2.63%	1,499,082	5,256	16
17	CC - LTSS	1,045,760	1,028,837	0.00%	-	3.15%	32,412	0.96%	10,137	12,908	(12,000)	1,072,294	257	1,072,551	2.56%	1,071,178	1,373	17
18	CC - Behavioral Health	325,482	301,762	0.00%	-	1.37%	4,130	1.13%	3,470	3,199	4,350	316,911	17,857	334,767	2.85%	327,048	7,720	18
19	CC Medicaid Expansion-Physical Health	1,271,199	1,246,082	0.00%	0	2.18%	27,162	0.89%	11,342	25,546	(2,963)	1,307,170	-	1,307,170	2.83%	1,302,027	5,144	19
20	CC Medicaid Expansion-Behavioral Health	119,513	115,593	0.00%	0	2.18%	2,520	6.27%	7,402	1,769	1,650	128,934	-	128,934	7.88%	126,580	2,354	20
21	Health Insurance Providers Fee	91,187	-	--	-	--	-	--	-	-	-	-	-	-	-100.00%	-	-	21
22	<b>Centennial Care MCO Subtotal</b>	<b>4,318,999</b>	<b>4,053,120</b>	<b>0.00%</b>	<b>0</b>	<b>2.02%</b>	<b>81,892</b>	<b>1.30%</b>	<b>53,796</b>	<b>85,868</b>	<b>(26,707)</b>	<b>4,247,971</b>	<b>99,790</b>	<b>4,347,760</b>	<b>0.67%</b>	<b>4,325,913</b>	<b>21,847</b>	22
23	Medicare Part A	1,388	1,388	2.70%	37	-1.80%	(26)	0.00%	-	-	-	1,400	-	1,400	0.85%	1,411	(10)	23
24	Medicare Part B	139,919	139,919	-0.92%	(1,292)	2.37%	3,279	0.00%	-	-	-	141,905	-	141,905	1.42%	141,648	257	24
25	Medicare Part D	48,730	48,730	-0.31%	(149)	5.58%	2,713	0.00%	-	-	-	51,293	-	51,293	5.26%	51,070	223	25
26	<b>Medicare Subtotal</b>	<b>190,037</b>	<b>190,037</b>	<b>-0.74%</b>	<b>(1,404)</b>	<b>3.16%</b>	<b>5,966</b>	<b>0.00%</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>194,598</b>	<b>-</b>	<b>194,598</b>	<b>2.40%</b>	<b>194,129</b>	<b>470</b>	26
27	Health Information Technology	20,000	-	--	-	--	-	--	-	8,000	-	8,000	-	8,000	-60.00%	8,000	-	27
28	Utilization Review & Contracts	4,470	-	--	-	--	-	--	-	1,970	2,800	4,770	-	4,770	6.71%	4,770	-	28
29	Centennial Care 2.0 Initiatives	-	-	--	-	--	-	--	-	-	-	9,007	-	9,007	--	9,007	-	29
30	Provider Fee Increases	-	-	--	-	--	-	--	-	-	-	22,460	-	22,460	--	-	22,460	30
31	Prior Year Charged to Current	1,578	1,578	0.00%	-	0.00%	-	0.00%	-	-	-	-	-	-	-100.00%	-	-	31
32																		32
33	<b>Grand Total</b>	<b>5,645,196</b>	<b>5,087,216</b>	<b>-0.03%</b>	<b>(1,711)</b>	<b>1.76%</b>	<b>89,343</b>	<b>1.09%</b>	<b>56,640</b>	<b>324,876</b>	<b>9,871</b>	<b>5,596,124</b>	<b>105,900</b>	<b>5,702,024</b>	<b>1.01%</b>	<b>5,660,534</b>	<b>41,491</b>	33

**Notes:**  
1. (Line 7) Clinic Services consists primarily of Medicaid School-Based Services (MSBS) with small amounts also going to clinics providing a variety of services.  
2. (Line 11) Others contains: Transportation, Lab/X-Ray, Prosthetics, RHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, Maintenance, Family Planning, Ambulance, PACE, and Case Management.

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Revenue Sources  
FY 19 Budget Projection Trend Model (\$000s)

No.	Description	FY 19 Projection	Federal Medicaid Expenditure Type and Federal Financial Participation (FFP) Rates											Federal Share	State Revenues	% of Composite Federal Share	No.
			HIT, IHS, Refugees (100% FFP) <sup>1</sup>	Medicaid Expansion (94% FFP) <sup>2</sup>	Medicaid Expansion (93% FFP) <sup>2</sup>	Health Homes, Sterilization & Family Planning Services (90% FFP) <sup>3</sup>	Breast & Cervical Cancer Program (EFMAP) <sup>4</sup>	Title XXI CHIP (FMAP) <sup>5</sup>	Utilization Review (75% FFP) <sup>6</sup>	Title XIX Medicaid (FMAP) <sup>7</sup>	Admin and Fees (50% FFP) <sup>8</sup>	Non-FFP Expenses (0% FFP) <sup>9</sup>					
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	
1	Inpatient Hospital	88,104	11,111	15,234	16,503	170	-	315	-	44,771	-	-	73,593	14,510	83.53%	1	
2	DSH/GME/IME	139,285	-	-	-	-	-	-	-	139,285	-	-	100,647	38,638	72.26%	2	
3	Safety Net Care Pool/HQII Pool	80,901	-	-	-	-	-	-	-	80,901	-	-	58,459	22,442	72.26%	3	
4	Physician Services	39,044	1,996	4,819	5,221	-	45	448	-	26,458	-	57	30,979	8,066	79.34%	4	
5	IHS Hospital	125,542	125,542	-	-	-	-	-	-	(0)	-	-	125,542	(0)	100.00%	5	
6	ICF-IID	28,588	-	241	261	-	-	-	-	28,086	-	-	20,759	7,829	72.61%	6	
7	Clinic Services	51,128	-	222	240	-	-	1,442	-	49,198	-	26	37,419	13,709	73.19%	7	
8	Federal Qualified Health Centers	5,120	2	510	552	-	-	122	-	3,934	-	-	3,959	1,161	77.32%	8	
9	Other Practitioners	32,667	35	422	457	-	-	1,178	-	30,574	-	-	24,122	8,545	73.84%	9	
10	Outpatient Hospital	41,742	2,642	6,190	6,706	-	10	497	-	25,698	-	-	33,274	8,468	79.71%	10	
11	Others	59,365	4,223	6,650	7,204	2,180	2	1,509	-	37,579	-	18	46,501	12,865	78.33%	11	
12	BH FFS	38,750	11,739	3,694	4,002	-	1	599	-	18,715	-	-	33,053	5,697	85.30%	12	
13	<b>Fee-For-Service Subtotal</b>	<b>730,236</b>	<b>157,289</b>	<b>37,982</b>	<b>41,147</b>	<b>2,350</b>	<b>58</b>	<b>6,110</b>	<b>-</b>	<b>485,198</b>	<b>-</b>	<b>101</b>	<b>588,307</b>	<b>141,930</b>	<b>80.56%</b>	13	
14	DD & MF Traditional, and Mi Via Waive	385,192	-	-	-	-	-	-	5,066	377,587	2,539	-	277,865	107,327	72.14%	14	
15	<b>Waivers Subtotal</b>	<b>385,192</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>5,066</b>	<b>377,587</b>	<b>2,539</b>	<b>-</b>	<b>277,865</b>	<b>107,327</b>	<b>72.14%</b>	15	
16	CC - Physical Health	1,504,338	41,211	-	-	15,757	1,184	81,676	-	1,364,266	-	244	1,123,568	380,770	74.69%	16	
17	CC - LTSS	1,072,551	12,076	-	-	-	-	257	-	1,060,219	-	-	778,235	294,317	72.56%	17	
18	CC - Behavioral Health	334,767	2,963	-	-	1,220	86	17,857	-	312,642	-	-	247,839	86,928	74.03%	18	
19	CC Medicaid Expansion-Physical Health	1,307,170	25,546	551,321	730,303	-	-	-	-	-	-	-	1,222,970	84,200	93.56%	19	
20	CC Medicaid Expansion-Behavioral Health	128,934	1,769	54,836	72,329	-	-	-	-	-	-	-	120,581	8,353	93.52%	20	
21	Health Insurance Providers Fee	-	-	-	-	-	-	-	-	-	-	-	-	-	-	21	
22	<b>Centennial Care MCO Subtotal</b>	<b>4,347,760</b>	<b>83,565</b>	<b>606,158</b>	<b>802,631</b>	<b>16,977</b>	<b>1,269</b>	<b>99,790</b>	<b>-</b>	<b>2,737,127</b>	<b>-</b>	<b>244</b>	<b>3,493,192</b>	<b>854,568</b>	<b>80.34%</b>	22	
23	Medicare Part A	1,400	-	-	-	-	-	-	-	1,400	-	-	1,011	389	72.23%	23	
24	Medicare Part B	141,905	4,192	-	-	-	-	-	-	120,266	-	17,447	91,072	50,833	64.18%	24	
25	Medicare Part D	51,293	-	-	-	-	-	-	-	-	-	51,293	-	51,293	0.00%	25	
26	<b>Medicare Subtotal</b>	<b>194,598</b>	<b>4,192</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>121,667</b>	<b>-</b>	<b>68,740</b>	<b>92,083</b>	<b>102,515</b>	<b>47.32%</b>	26	
27	Health Information Technology	8,000	8,000	-	-	-	-	-	-	-	-	-	8,000	-	100.00%	27	
28	Utilization Review & Contracts	4,770	-	-	-	-	-	-	2,800	376	1,595	-	3,168	1,602	66.42%	28	
29	Centennial Care 2.0 Initiatives	9,007	-	-	-	9,007	-	-	-	-	-	-	8,072	935	89.62%	29	
30	Provider Fee Increases	22,460	-	-	-	-	-	-	-	22,460	-	-	17,311	5,149	77.07%	30	
31																31	
32	<b>Grand Total</b>	<b>5,702,024</b>	<b>253,046</b>	<b>644,140</b>	<b>843,779</b>	<b>28,334</b>	<b>1,327</b>	<b>105,900</b>	<b>7,866</b>	<b>3,744,414</b>	<b>4,134</b>	<b>69,085</b>	<b>4,487,999</b>	<b>1,214,026</b>	<b>78.71%</b>	32	

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Revenue Sources  
FY 19 Budget Projection Trend Model (\$000s)

No.	State Share Revenues:	FY19 Budget Appropriation	HSD Projection	Change From Previous
33	Department of Health (Line 15) <sup>10</sup>	109,632	109,632	6,016
34	Department of Health Allocation Need /(Surplus) <sup>17</sup>	-	(1,716)	-
35	Department of Health Additional Need /(Surplus)	-	(590)	(5,200)
36	Department of Health for Early Intervention	7,662	7,662	-
37	Department of Health for FQHCs	560	560	-
38	Department of Health for EC	1	1	-
39	Children, Youth and Families	-	-	-
40	County Supported Medicaid Fund	26,176	26,176	-
41	Tobacco Settlement Revenue, Base	8,319	8,319	-
42	Tobacco Settlement Revenue	-	-	-
43	UNM IGT	42,347	42,347	-
44	UNM IGT Additional Revenue	-	-	-
45	<b>Total Operating Transfers In</b>	<b>194,698</b>	<b>192,393</b>	<b>816</b>
46				
47	Physician UPL UNM	1,605	1,605	-
48	Safety Net Care Pool (SNCP) <sup>12</sup>	22,585	22,585	-
49	SNCP (Additional Hospital Payments) <sup>13</sup>	-	-	-
50	Miner's Colfax <sup>15</sup>	1,036	1,036	-
51	SB 42 Inpatient Services-Counties <sup>16</sup>	-	-	-
52	Drug Rebates	33,265	33,265	-
53	Fraud	872	872	-
54	Income Diversion Trust	486	486	-
55	Buy-In Recovery	215	215	-
56	Cost Settlement	500	500	-
57	Estate Recovery	9	9	-
58	HMS-RAC-TPL/Subrogation	-	-	-
59	<b>Total Other Revenues</b>	<b>60,573</b>	<b>60,573</b>	<b>-</b>
60				
61	<b>General Fund Need</b>		<b>943,722</b>	<b>14,397</b>
62	<b>FY2019 Appropriation</b>		<b>933,625</b>	<b>(19,612)</b>
63				
64				
65	<b>State Revenue Surplus / (Shortfall)</b>		<b>(10,097)</b>	<b>(34,009)</b>

PROJECTED REVENUES	
Medicaid Projection	5,702,024
Federal Revenues	4,487,999
Federal Disallowance <sup>11</sup>	-
MSBS CPE <sup>14</sup>	13,141
IHS Referrals at 100% FFP	4,197
All State Revenues	1,196,688

**Notes:**

- HIT, IHS, QI-1 Medicare Part B premiums, Refugees are eligible for 100% FFP.
- Under ACA, the Medicaid Expansion population will be federally funded 94% in CY2018 and 93% in CY2019.
- Health Homes, sterilization and family planning service costs are eligible for 90% FFP.
- Breast and cervical cancer (BCC) program receives enhanced FMAP.
- CHIP is a Title XXI program with enhanced FMAP. CHIP was reauthorized on 1/22/2018. Medicaid is expected to receive 100% match for CHIP kids through FFY2019 and 92.37% in FFY2020.
- Utilization review is federally matched at 75%; administration expenses.
- Title XIX expenditures with regular FMAP. The Final FFY2019 FMAP was based on the revised estimates of per capita income, by the Bureau of Economic Analysis (BEA) on 9/26/2017. The Preliminary FFY2020 FMAP was based on the preliminary estimates of per capita income, by the BEA on 3/22/2018.
- Administration expenditures are eligible for 50% FFP.
- Pregnancy termination, special needs and state only buy-in for Medicare Part B and all Medicare Part D buy-ins (Claw back) expenditures are not eligible for FFP.
- DOH for Medicaid DD, MF and Mi Via waiver services; projected revenue is without the 3% for admin.
- Includes potential disallowance for 100% IHS referral.
- This line is the 1/12th% of the gross receipts tax contributed by the counties to support the Safety Net Care Pool and Hospital Payments.
- This line represents the additional county support to fully fund the Safety Net Care Pool.
- Starting in FY16, school districts contribute the state share of Medicaid School-Based Services through Certified Public Expenditures.
- Miner's Colfax hospital will contribute the state share of Safety Net Care Pool supplemental payments. The current estimate is for services provided in CY2018.
- SB 42 stated that counties will contribute the state share of payments for fee-for-service inpatient services for their respective incarcerated populations.
- DOH surplus from \$2 million appropriation for new allocations.

4/20/2018