

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Medicaid Enrollment Projection for SFY 2017 - SFY 2019

Month-Year		Medicaid Base Population & CHIP						Medicaid Expansion (FFS & MCO)		All Medicaid & CHIP		
		Full Benefit		Partial Benefit			Estimated Total Base Population (D+E+F+G)	Reported <sup>1</sup>	Estimated <sup>2</sup>	Estimated (H+J)	Change from Prior Projection	Month Over Month Change
		Reported <sup>1</sup>	Estimated <sup>2</sup>	Family Planning Estimated <sup>1</sup>	QMBs Estimated <sup>1</sup>	SLIMBs & QI1s Estimated <sup>1</sup>						
A	B	C	D	E	F	G	H	I	J	K	L	M
SFY 2017	Jul-16	519,149	519,214	74,859	24,233	11,367	629,673	253,261	253,261	882,934	212	
	Aug-16	521,062	521,142	76,571	24,257	11,463	633,433	255,785	255,785	889,218	240	6,284
	Sep-16	520,235	520,327	77,954	24,314	11,493	634,088	257,568	257,568	891,656	229	2,438
	Oct-16	520,284	520,380	79,025	24,325	11,580	635,310	259,421	259,421	894,731	224	3,075
	Nov-16	520,959	521,073	80,582	24,710	11,667	638,032	261,322	261,325	899,357	227	4,626
	Dec-16	521,227	521,358	82,330	25,068	11,703	640,459	264,272	264,277	904,736	217	5,379
	Jan-17	523,192	523,358	83,441	24,937	11,843	643,579	268,188	268,195	911,774	218	7,038
	Feb-17	523,553	523,743	84,044	25,015	11,861	644,663	269,799	269,808	914,471	209	2,697
	Mar-17	524,375	524,587	84,682	25,116	11,890	646,275	270,569	270,580	916,855	201	2,384
	Apr-17	522,492	522,672	83,857	26,252	10,723	643,504	270,368	270,381	913,885	232	(2,970)
	May-17	520,660	520,856	84,519	26,981	10,013	642,369	268,758	268,773	911,142	246	(2,743)
	Jun-17	517,867	517,966	84,288	25,717	10,740	638,710	266,553	266,570	905,280	226	(5,862)
SFY 2018	Jul-17	515,175	515,291	83,677	25,567	10,334	634,869	263,563	263,581	898,450	239	(6,830)
	Aug-17	508,793	508,846	82,310	25,245	10,175	626,576	259,302	259,316	885,892	273	(12,559)
	Sep-17	498,267	498,490	76,861	25,615	10,185	611,152	252,634	252,637	863,789	361	(22,103)
	Oct-17	497,828	498,189	76,583	25,478	10,311	610,560	253,636	253,627	864,187	526	398
	Nov-17	496,458	496,974	75,972	25,125	10,229	608,300	254,707	254,685	862,985	501	(1,203)
	Dec-17	495,468	496,273	76,155	24,851	10,381	607,661	256,578	256,552	864,213	(215)	1,228
	Jan-18	496,683	497,450	76,281	24,396	10,479	608,606	258,605	258,570	867,176	(456)	2,963
	Feb-18	494,224	495,117	75,836	23,931	10,425	605,309	258,122	258,083	863,392	(1,145)	(3,783)
	Mar-18	493,068	494,127	75,620	23,710	10,546	604,003	257,907	257,877	861,880	(3,286)	(1,513)
	Apr-18	491,361	492,853	74,468	23,046	10,672	601,039	258,403	258,571	859,610	(9,099)	(2,270)
	May-18	487,453	490,096	73,660	22,686	10,734	597,175	255,764	256,241	853,416	(17,298)	(6,193)
	Jun-18	481,100	487,374	73,127	22,250	10,662	593,413	252,536	254,382	847,795	(24,881)	(5,621)
SFY 2019	Jul-18		482,805	73,172	22,288	10,619	588,884		254,845	843,729	(29,797)	(4,066)
	Aug-18		487,079	73,325	22,318	10,672	593,394		255,309	848,703	(25,945)	4,974
	Sep-18		488,975	73,417	22,331	10,725	595,448		255,773	851,221	(24,457)	2,518
	Oct-18		490,184	73,479	22,339	10,778	596,780		256,236	853,016	(23,853)	1,796
	Nov-18		491,112	73,528	22,379	10,831	597,850		256,700	854,550	(23,575)	1,534
	Dec-18		492,098	73,690	22,428	10,884	599,100		257,163	856,263	(22,938)	1,714
	Jan-19		493,050	73,730	22,444	10,937	600,161		257,627	857,788	(22,580)	1,525
	Feb-19		493,900	73,827	22,459	10,990	601,176		258,091	859,267	(22,302)	1,479
	Mar-19		494,806	73,921	22,465	11,043	602,235		258,554	860,789	(22,044)	1,523
	Apr-19		495,823	74,077	22,466	11,096	603,462		259,018	862,480	(21,656)	1,691
	May-19		496,651	74,163	22,498	11,149	604,461		259,482	863,942	(21,379)	1,463
	Jun-19		497,433	74,177	22,523	11,202	605,335		259,945	865,280	(21,124)	1,338

Updated: 7/26/2018

Notes:

1. From July 2016 to June 2018 the reported enrollments for the full benefit base, expansion populations and partial benefit populations are based on the June 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 July 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  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Medicaid Enrollment Projection for SFY 2017 - SFY 2019

Month-Year		Estimated MM in Centennial Care Managed Care Organizations (CC MCO)											
		Physical Health			Long Term Services and Supports			Medicaid Expansion			Total CC MCO		
		(Prior)	(Current)	Change from Prior	(Prior)	(Current)	Change from Prior	(Prior)	(Current)	Change from Prior	(Prior)	(Current)	Change from Prior
SFY 2017	Jul-16	408,144	408,206	62	49,732	49,769	37	226,210	226,273	63	684,086	684,248	162
	Aug-16	411,797	411,850	53	50,004	50,043	39	226,610	226,677	67	688,411	688,570	159
	Sep-16	411,173	411,197	24	50,052	50,118	66	229,526	229,575	49	690,751	690,890	139
	Oct-16	411,950	411,955	5	50,200	50,283	83	231,091	231,140	49	693,241	693,378	137
	Nov-16	412,995	413,000	5	50,250	50,332	82	233,375	233,423	48	696,620	696,755	135
	Dec-16	414,125	414,134	9	49,594	49,672	78	236,286	236,339	53	700,005	700,145	140
	Jan-17	416,604	416,613	9	49,595	49,674	79	238,639	238,693	54	704,838	704,980	142
	Feb-17	416,334	416,347	13	49,695	49,772	77	240,819	240,876	57	706,848	706,995	147
	Mar-17	417,150	417,158	8	49,819	49,904	85	241,744	241,811	67	708,713	708,873	160
	Apr-17	415,908	415,923	15	49,875	49,960	85	241,605	241,667	62	707,388	707,550	162
May-17	414,279	414,314	35	49,869	49,949	80	240,115	240,192	77	704,263	704,455	192	
Jun-17	412,170	412,213	43	49,834	49,933	99	238,175	238,282	107	700,179	700,428	249	
SFY 2018	Jul-17	410,109	410,210	101	49,733	49,837	104	235,632	235,783	151	695,474	695,830	356
	Aug-17	405,104	405,163	59	49,432	49,534	102	232,136	232,265	129	686,672	686,962	290
	Sep-17	398,595	398,633	38	49,182	49,282	100	225,682	225,829	147	673,459	673,744	285
	Oct-17	397,504	397,540	36	48,366	48,465	99	227,020	227,071	51	672,890	673,076	186
	Nov-17	396,795	396,790	(5)	48,292	48,368	76	228,175	228,189	14	673,262	673,347	85
	Dec-17	396,624	396,323	(301)	47,979	48,281	302	230,090	230,018	(72)	674,693	674,622	(71)
	Jan-18	398,809	398,548	(261)	48,039	48,274	235	232,232	232,124	(108)	679,080	678,946	(134)
	Feb-18	397,831	397,421	(410)	48,098	48,252	154	231,829	231,591	(238)	677,758	677,264	(494)
	Mar-18	397,984	397,111	(873)	48,407	48,149	(258)	232,673	231,838	(835)	679,064	677,098	(1,966)
	Apr-18	398,098	396,361	(1,737)	48,724	48,389	(335)	234,366	232,814	(1,552)	681,188	677,564	(3,624)
May-18	398,813	394,192	(4,621)	48,897	48,339	(558)	234,882	230,978	(3,904)	682,591	673,509	(9,082)	
Jun-18	399,538	391,787	(7,751)	49,071	48,390	(681)	235,289	229,660	(5,629)	683,897	669,837	(14,060)	
SFY 2019	Jul-18	400,255	388,440	(11,815)	49,245	48,491	(754)	235,284	228,043	(7,241)	684,784	664,974	(19,810)
	Aug-18	400,982	391,087	(9,895)	49,420	48,592	(828)	235,543	229,423	(6,120)	685,945	669,102	(16,843)
	Sep-18	401,710	392,739	(8,971)	49,595	48,693	(902)	235,803	230,305	(5,497)	687,108	671,737	(15,371)
	Oct-18	402,431	393,894	(8,537)	49,771	48,795	(977)	236,061	230,689	(5,372)	688,263	673,377	(14,885)
	Nov-18	403,161	394,550	(8,611)	49,949	48,896	(1,053)	236,361	231,074	(5,288)	689,471	674,520	(14,951)
	Dec-18	403,884	395,208	(8,676)	50,126	48,998	(1,128)	236,602	231,459	(5,143)	690,611	675,665	(14,946)
	Jan-19	404,616	395,867	(8,750)	50,304	49,100	(1,204)	236,840	231,844	(4,996)	691,760	676,811	(14,949)
	Feb-19	405,350	396,526	(8,824)	50,483	49,202	(1,281)	237,100	232,231	(4,870)	692,934	677,960	(14,975)
	Mar-19	406,058	397,187	(8,870)	50,662	49,305	(1,357)	237,361	232,618	(4,743)	694,081	679,110	(14,971)
	Apr-19	406,794	397,849	(8,945)	50,842	49,408	(1,435)	237,622	233,006	(4,616)	695,258	680,262	(14,995)
May-19	407,522	398,512	(9,009)	51,023	49,511	(1,512)	237,883	233,394	(4,489)	696,427	681,417	(15,011)	
Jun-19	408,260	399,176	(9,084)	51,204	49,614	(1,591)	238,145	233,783	(4,362)	697,609	682,573	(15,036)	

Updated: 7/26/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Medicaid Children Enrollment Projection for SFY 2017-2019

Month-Year		Reported	Projected	Change from Prior Projection	Month Over Month Change
A	B	C	D	E	F
SFY 2017	Jul-16	388,856	388,678	-	
	Aug-16	390,559	390,380	-	1,702
	Sep-16	390,850	390,674	-	294
	Oct-16	391,261	391,094	-	420
	Nov-16	392,074	391,917	-	823
	Dec-16	393,133	392,980	-	1,063
	Jan-17	394,753	394,727	143	1,747
	Feb-17	394,870	394,856	170	129
	Mar-17	395,303	395,303	185	447
	Apr-17	393,919	393,971	244	(1,332)
	May-17	392,529	392,632	290	(1,339)
	Jun-17	<b>390,308</b>	<b>390,458</b>	342	<b>(2,174)</b>
SFY 2018	Jul-17	387,468	387,661	383	(2,797)
	Aug-17	382,569	382,800	421	(4,861)
	Sep-17	375,586	375,871	464	(6,929)
	Oct-17	375,408	375,755	504	(115)
	Nov-17	374,615	375,035	541	(720)
	Dec-17	374,403	374,904	493	(131)
	Jan-18	375,469	376,053	474	1,148
	Feb-18	373,881	374,633	386	(1,419)
	Mar-18	372,950	373,921	(119)	(713)
	Apr-18	371,390	372,637	(2,505)	(1,284)
	May-18	368,196	369,945	(6,157)	(2,692)
	Jun-18	<b>363,062</b>	<b>366,874</b>	(10,196)	<b>(3,072)</b>
SFY 2019	Jul-18		363,434	(14,178)	(3,439)
	Aug-18		366,652	(11,411)	3,217
	Sep-18		368,154	(10,347)	1,503
	Oct-18		369,140	(9,950)	985
	Nov-18		370,516	(9,161)	1,376
	Dec-18		371,709	(8,378)	1,194
	Jan-19		373,028	(7,656)	1,319
	Feb-19		373,969	(7,278)	941
	Mar-19		374,930	(6,936)	961
	Apr-19		375,771	(6,700)	841
	May-19		376,544	(6,471)	774
	Jun-19		<b>377,284</b>	(6,260)	<b>739</b>

Updated: 7/26/2018

**Notes:**

1. Medicaid Children are defined as any client less than age 21, regardless of category of eligibility.
2. The reported enrollment from July 2016 to June 2018 is based on the Monthly Eligibility Report released July 2018.
3. The estimated enrollments for the months from July 2015 to June 2018 were based on Monthly Eligibility Report released in July 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.

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

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

No.	Description	FY 16 Title XIX & XXI Projection	FY 17 % Completion	Title XIX & Adj. Actual Paid YTD	Title XXI Actual Paid YTD	Others	FY 17 TOTAL Medicaid Projection	% Change from FY 16	March 2018 Data Projection	Change from Previous	No.
A	B	C	D	E	F	G	H	I	J	K	L
1	Inpatient Hospital	89,951	96.03%	69,547	352	-	72,789	-19.08%	73,460	(671)	1
2	DSH/GME/IME	114,330	100.00%	139,001	-	139,001	139,001	21.58%	139,001	-	2
3	Safety Net Care Pool/HQII Pool	71,681	100.00%	76,248	-	76,248	76,248	6.37%	76,248	-	3
4	Physician Services	39,652	99.87%	38,081	436	5,559	38,566	-2.74%	38,761	(194)	4
5	IHS Hospital	116,302	99.56%	117,880	-	-	118,402	1.81%	118,469	(67)	5
6	ICF IID	26,988	99.79%	26,878	-	-	26,933	-0.20%	27,076	(143)	6
7	Clinic Services	48,180	70.61%	36,005	1,607	34,000	53,268	10.56%	52,287	981	7
8	Federal Qualified Health Centers	3,969	99.93%	3,806	79	-	3,887	-2.06%	3,886	1	8
9	Other Practitioners	30,036	99.58%	30,351	1,047	-	31,530	4.98%	31,510	20	9
10	Outpatient Hospital	42,799	99.92%	40,276	499	-	40,808	-4.65%	40,800	9	10
11	BH FFS	35,213	99.62%	35,779	706	-	36,626	4.01%	36,650	(24)	11
12	Others	53,411	99.67%	53,129	1,551	(9,896)	54,860	2.71%	56,529	(1,669)	12
13	<b>Fee-For-Service Subtotal</b>	<b>672,510</b>	<b>97.16%</b>	<b>666,981</b>	<b>6,277</b>	<b>244,912</b>	<b>692,920</b>	<b>3.03%</b>	<b>694,677</b>	<b>(1,757)</b>	13
14	DD & MF Traditional, and Mi Via Waiver	350,133	100.87%	368,982	-	3,798	365,794	4.47%	367,133	(1,339)	14
15	<b>Waivers Subtotal</b>	<b>350,133</b>	<b>100.87%</b>	<b>368,982</b>	<b>-</b>	<b>3,798</b>	<b>365,794</b>	<b>4.47%</b>	<b>367,133</b>	<b>(1,339)</b>	15
16	CC - Physical Health	1,513,885	100.00%	1,422,197	82,308	9,071	1,504,506	-0.62%	1,510,453	(5,948)	16
17	CC - LTSS	1,070,222	99.98%	1,075,997	1,237	12,440	1,077,421	0.67%	1,076,608	812	17
18	CC - Behavioral Health	341,195	100.00%	327,262	19,011	4,022	346,273	1.49%	345,315	958	18
19	CC Medicaid Expansion-Physical Health	1,027,441	100.00%	1,258,426	-	(63,697)	1,258,426	22.48%	1,286,563	(28,137)	19
20	CC Medicaid Expansion-Behavioral Heal	101,098	100.00%	112,623	-	1,849	112,623	11.40%	112,565	58	20
21	Rate Increase for Primary Care Services	12,732	100.00%	234	-	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>100.00%</b>	<b>4,196,741</b>	<b>102,556</b>	<b>(36,080)</b>	<b>4,299,483</b>	<b>3.35%</b>	<b>4,331,739</b>	<b>(32,256)</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	23,733	160.80%	23,733	-	28
29	Utilization Review & Contracts	4,326	100.00%	4,268	-	4,268	4,268	-1.35%	4,570	(302)	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>98.93%</b>	<b>5,438,089</b>	<b>108,833</b>	<b>240,631</b>	<b>5,607,083</b>	<b>3.57%</b>	<b>5,641,160</b>	<b>(34,077)</b>	33

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Expenditures

FY 17 Budget Projection Lag Model with Actual Data Thru June 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 7/26/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Revenue Sources  
FY 17 Budget Projection Lag Model with Actual Data Thru June 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 and Other Admin. (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	
1	Inpatient Hospital	72,789	18,839	11,729	126	54	367	-	41,673	-	-	60,129	12,660	82.61%	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	38,566	5,903	4,939	-	19	436	-	27,186	-	83	30,357	8,210	78.71%	4	
5	IHS Hospital	118,402	118,402	-	-	-	-	-	-	-	-	118,402	-	100.00%	5	
6	ICF IID	26,933	71	151	-	-	-	-	26,710	-	-	19,173	7,760	71.19%	6	
7	Clinic Services	53,268	112	168	-	-	1,608	-	51,361	-	20	38,751	14,517	72.75%	7	
8	Federal Qualified Health Centers	3,887	394	576	(0)	0	79	-	2,839	-	-	3,035	852	78.07%	8	
9	Other Practitioners	31,530	358	531	-	0	1,051	-	29,590	-	-	22,925	8,606	72.71%	9	
10	Outpatient Hospital	40,808	7,614	5,857	-	22	500	-	26,816	-	-	32,734	8,074	80.21%	10	
11	BH FFS	36,626	15,975	1,693	0	3	708	-	18,238	-	9	31,245	5,381	85.31%	11	
12	Others	54,860	10,992	7,441	1,807	98	1,619	-	32,879	-	25	43,680	11,180	79.62%	12	
13	<b>Fee-For-Service Subtotal</b>	<b>692,920</b>	<b>178,660</b>	<b>33,084</b>	<b>1,933</b>	<b>197</b>	<b>6,367</b>	<b>-</b>	<b>472,541</b>	<b>-</b>	<b>137</b>	<b>553,536</b>	<b>139,383</b>	<b>79.88%</b>	13	
14	DD & MF Traditional, and Mi Via Waivers	365,794	-	-	-	-	-	4,822	358,268	2,703	-	259,291	106,503	70.88%	14	
15	<b>Waivers Subtotal</b>	<b>365,794</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>4,822</b>	<b>358,268</b>	<b>2,703</b>	<b>-</b>	<b>259,291</b>	<b>106,503</b>	<b>70.88%</b>	15	
16	CC - Physical Health	1,504,506	35,889	-	15,757	1,178	82,308	-	1,369,167	-	206	1,104,690	399,816	73.43%	16	
17	CC - LTSS	1,077,421	12,440	-	-	720	1,237	-	1,063,023	-	-	767,676	309,744	71.25%	17	
18	CC - Behavioral Health	346,273	4,022	-	1,220	124	19,011	-	321,896	-	-	252,532	93,741	72.93%	18	
19	CC Medicaid Expansion-Physical Health	1,258,426	600,836	657,590	-	-	-	-	-	-	-	1,225,540	32,886	97.39%	19	
20	CC Medicaid Expansion-Behavioral Health	112,623	53,737	58,886	-	-	-	-	0	-	-	109,678	2,945	97.39%	20	
21	Rate Increase for Primary Care Services	234	32	-	-	-	-	-	203	-	-	176	59	75.02%	21	
22	Health Insurance Providers Fee	-	-	-	-	-	-	-	-	-	-	-	-	-	22	
23	<b>Centennial Care MCO Subtotal</b>	<b>4,299,483</b>	<b>706,957</b>	<b>716,476</b>	<b>16,977</b>	<b>2,022</b>	<b>102,556</b>	<b>-</b>	<b>2,754,290</b>	<b>-</b>	<b>206</b>	<b>3,460,293</b>	<b>839,190</b>	<b>80.48%</b>	23	
24	Medicare Part A	1,710	-	-	-	-	-	-	1,710	-	-	1,214	496	70.98%	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>85,338</b>	<b>92,045</b>	<b>48.11%</b>	27	
28	Health Information Technology	23,733	23,733	-	-	-	-	-	-	-	-	23,733	-	100.00%	28	
29	Utilization Review & Contracts	4,268	-	-	-	-	-	2,512	-	1,756	-	2,762	1,506	64.72%	29	
30	Prior Yr. Charged to Current	43,502	-	-	-	-	-	-	43,502	-	-	30,612	12,890	70.37%	30	
31	Current Yr. Charged to Future	-	-	-	-	-	-	-	-	-	-	-	-	-	31	
32															32	
33	<b>Grand Total</b>	<b>5,607,083</b>	<b>914,728</b>	<b>749,560</b>	<b>18,910</b>	<b>2,219</b>	<b>108,924</b>	<b>7,334</b>	<b>3,741,293</b>	<b>4,459</b>	<b>59,656</b>	<b>4,415,566</b>	<b>1,191,517</b>	<b>78.75%</b>	33	

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

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

No.	State Share Revenues:	FY 17 Op. Budget	Billed Amount	Collection YTD	HSD Projection	Change from Previous
35	Department of Health (Line 14 & 15) <sup>9</sup>	103,360	105,103	105,103	105,103	0
36	Department of Health Additional Need /(Surplus)		-	-	-	(388)
37	Department of Health for Early Intervention	8,062	7,873	7,873	7,873	-
38	Department of Health for FQHCs	462	462	462	462	(1)
39	Department of Health for EC	1		-	-	(1)
40	County Supported Medicaid Fund	33,533	31,835	31,835	31,835	-
41	Tobacco Settlement Revenue, Base	27,319	27,319	27,319	27,319	-
42	Tobacco Settlement Revenue	-		-	-	-
43	UNM IGT	43,007	40,600	40,600	40,600	-
44	<b>Total Operating Transfers In</b>	<b>215,744</b>	<b>213,192</b>	<b>213,192</b>	<b>213,192</b>	<b>(390)</b>
45						
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	(0)
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>54,767</b>	<b>(0)</b>
61						
62	<b>General Fund Need</b>				<b>909,546</b>	<b>(2,697)</b>
63						
64	<b>HB 2 / SFC</b>				<b>913,637</b>	-
65	<b>DSH Settlement</b>				<b>16,806</b>	-
66	<b>BHSD Previous Year Reversion</b>				<b>500</b>	-
67	<b>Transfer to support MMISR</b>				<b>(5,000)</b>	-
68	<b>State Revenue Surplus / (Shortfall)</b>				<b>16,396</b>	<b>2,697</b>
69	<b>Reversion</b>				<b>(13,699)</b>	-
70	<b>State Revenue Surplus / (Shortfall) After Reversion</b>				<b>2,697</b>	<b>2,697</b>

PROJECTED REVENUES	
Medicaid Projection	5,607,083
Federal Revenues	4,415,566
Federal Disallowance <sup>10</sup>	-
MSBS CPE <sup>12</sup>	14,011
IHS Referral 100% FFP	-
<b>All State Revenues</b>	<b>1,177,506</b>

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 and some other admin. Expenses are federally matched at 75%.
- 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.

7/26/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

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

No. A	Description B	FY 17 Title XIX & XXI Projection C	FY 18 % Completion D	Title XIX & Title XXI		FY 18 TOTAL			% Change from FY 17 I	March 2018 Data Projection J	Change from Previous K	No. L
				Adj. Actual Paid YTD E	Actual Paid YTD F	Others G	Medicaid Projection H					
1	Inpatient Hospital	72,789	78.92%	68,802	215	-	87,453	20.15%	87,365	88	1	
2	DSH/GME/IME	139,001	72.49%	100,982	-	139,311	139,311	0.22%	139,285	26	2	
3	Safety Net Care Pool/HQII Pool	76,248	77.84%	60,493	-	77,715	77,715	1.92%	77,715	-	3	
4	Physician Services	38,566	88.73%	34,255	401	5,525	39,057	1.27%	38,757	300	4	
5	IHS Hospital	118,402	90.79%	112,112	-	-	123,487	4.29%	122,719	768	5	
6	ICF IDD	26,933	92.00%	26,209	-	-	28,489	5.78%	28,516	(27)	6	
7	Clinic Services	53,268	35.32%	17,654	1,532	34,500	54,323	1.98%	51,103	3,220	7	
8	Federal Qualified Health Centers	3,887	81.30%	3,809	102	678	4,810	23.74%	5,004	(194)	8	
9	Other Practitioners	31,530	90.63%	28,822	1,059	-	32,970	4.57%	32,646	324	9	
10	Outpatient Hospital	40,808	91.92%	39,113	460	-	43,051	5.50%	41,733	1,318	10	
11	BH FFS	36,626	90.37%	34,514	563	-	38,815	5.98%	38,714	100	11	
12	Others	54,860	96.74%	55,682	1,406	(4,015)	59,011	7.57%	59,008	3	12	
13	<b>Fee-For-Service Subtotal</b>	<b>692,919</b>	<b>80.74%</b>	<b>582,447</b>	<b>5,737</b>	<b>253,714</b>	<b>728,490</b>	<b>5.13%</b>	<b>722,564</b>	<b>5,926</b>	13	
14	DD & MF Traditional, and Mi Via Waivers	365,794	93.35%	359,569	-	6,857	385,173	5.30%	387,547	(2,374)	14	
15	<b>Waivers Subtotal</b>	<b>365,794</b>	<b>93.35%</b>	<b>359,569</b>	<b>-</b>	<b>6,857</b>	<b>385,173</b>	<b>5.30%</b>	<b>387,547</b>	<b>(2,374)</b>	15	
16	CC - Physical Health	1,504,506	95.15%	1,342,830	74,807	24,447	1,489,909	-0.97%	1,465,859	24,051	16	
17	CC - LTSS	1,077,421	97.65%	1,018,630	1,208	11,954	1,044,432	-3.06%	1,045,760	(1,327)	17	
18	CC - Behavioral Health	346,273	95.55%	299,169	15,755	7,768	329,599	-4.82%	325,482	4,117	18	
19	CC Medicaid Expansion-Physical Health	1,258,426	95.37%	1,217,687	-	24,256	1,276,811	1.46%	1,271,199	5,611	19	
20	CC Medicaid Expansion-Behavioral Health	112,623	96.73%	115,452	-	3,841	119,355	5.98%	119,513	(158)	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>4,299,483</b>	<b>93.89%</b>	<b>3,993,768</b>	<b>91,771</b>	<b>160,604</b>	<b>4,351,293</b>	<b>1.21%</b>	<b>4,318,999</b>	<b>32,294</b>	23	
24	Medicare Part A	1,710	100.00%	1,461	-	-	1,461	-14.57%	1,388	72	24	
25	Medicare Part B	131,716	100.00%	140,536	-	-	140,536	6.70%	139,919	617	25	
26	Medicare Part D	43,958	100.00%	48,819	-	-	48,819	11.06%	48,730	89	26	
27	<b>Medicare Subtotal</b>	<b>177,384</b>	<b>100.00%</b>	<b>190,815</b>	<b>-</b>	<b>-</b>	<b>190,815</b>	<b>7.57%</b>	<b>190,037</b>	<b>778</b>	27	
28	Health Information Technology	23,733	67.11%	13,422	-	20,000	20,000	-15.73%	20,000	-	28	
29	Utilization Review & Contracts	4,268	82.06%	3,485	-	4,247	4,247	-0.50%	4,470	(224)	29	
30	Prior Year Charged to Current	43,502	--	-	-	-	-	-100.00%	1,578	(1,578)	30	
31	Current Year Charged to Future	-	--	-	-	-	-	--	-	-	31	
32											32	
33	<b>Grand Total</b>	<b>5,607,083</b>	<b>92.27%</b>	<b>5,143,506</b>	<b>97,508</b>	<b>445,421</b>	<b>5,680,018</b>	<b>1.30%</b>	<b>5,645,196</b>	<b>34,823</b>	33	

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

**Expenditures  
FY 18 Budget Projection Lag Model with Actual Data Thru June 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 7/26/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

Revenue Sources  
FY 18 Budget Projection Lag Model with Actual Data Thru June 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 and Other Admin. (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	87,453	13,792	9,921	16,567	201	-	273	-	46,697	-	-	72,892	14,560	83.35%	1	
2	Safety Net Care Pool/HQII Pool	77,715	-	-	-	-	-	-	-	77,715	-	-	56,079	21,636	72.16%	2	
3	DSH/GME/IME	139,311	-	-	-	-	-	-	-	139,229	-	82	100,468	38,843	72.12%	3	
4	Physician Services	39,057	2,404	3,666	5,564	-	20	446	-	26,891	-	66	30,949	8,108	79.24%	4	
5	IHS Hospital	123,487	123,487	-	-	-	-	-	-	-	-	-	123,487	-	100.00%	5	
6	ICF IDD	28,489	-	211	411	-	-	-	-	27,866	-	-	20,638	7,851	72.44%	6	
7	Clinic Services	54,323	-	215	196	-	-	1,574	-	52,315	-	23	39,699	14,624	73.08%	7	
8	Federal Qualified Health Centers	4,810	2	452	558	-	0	107	-	3,691	-	-	3,721	1,089	77.37%	8	
9	Other Practitioners	32,970	25	394	516	-	0	1,168	-	30,868	-	-	24,274	8,696	73.62%	9	
10	Outpatient Hospital	43,051	3,286	4,729	47	-	118	500	-	34,370	-	-	33,176	9,875	77.06%	10	
11	BH FFS	38,815	15,272	1,757	7,749	1	1	621	-	13,408	-	7	34,491	4,324	88.86%	11	
12	Others	59,011	3,409	6,457	7,698	1,651	8	1,461	-	38,297	-	30	47,272	11,740	80.11%	12	
13	<b>Fee-For-Service Subtotal</b>	<b>728,490</b>	<b>161,678</b>	<b>27,801</b>	<b>39,306</b>	<b>1,853</b>	<b>147</b>	<b>6,150</b>	-	<b>491,346</b>	-	<b>208</b>	<b>587,145</b>	<b>141,345</b>	<b>80.60%</b>	13	
14	DD & MF Traditional, and Mi Via Waiver	385,173	-	-	-	-	-	-	5,435	377,155	2,584	-	276,769	108,404	71.86%	14	
15	<b>Waivers Subtotal</b>	<b>385,173</b>	-	-	-	-	-	-	<b>5,435</b>	<b>377,155</b>	<b>2,584</b>	-	<b>276,769</b>	<b>108,404</b>	<b>71.86%</b>	15	
16	CC - Physical Health	1,489,909	40,979	-	-	15,757	1,155	80,957	-	1,351,062	-	-	1,108,534	381,375	74.40%	16	
17	CC - LTSS	1,044,432	11,954	-	-	-	720	1,208	-	1,030,551	-	-	754,753	289,679	72.26%	17	
18	CC - Behavioral Health	329,599	3,418	-	-	1,220	118	16,067	-	308,776	-	-	242,731	86,868	73.64%	18	
19	CC Medicaid Expansion-Physical Health	1,276,811	27,219	613,030	636,561	-	-	-	-	-	-	-	1,207,965	68,845	94.61%	19	
20	CC Medicaid Expansion-Behavioral Health	119,355	2,191	55,836	61,328	-	-	-	-	-	-	-	112,883	6,471	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>4,351,293</b>	<b>85,760</b>	<b>704,648</b>	<b>697,890</b>	<b>16,977</b>	<b>1,993</b>	<b>101,081</b>	-	<b>2,742,944</b>	-	-	<b>3,501,058</b>	<b>850,235</b>	<b>80.46%</b>	23	
24	Medicare Part A	1,461	-	-	-	-	-	-	-	1,461	-	-	1,050	410	71.91%	24	
25	Medicare Part B	140,536	4,524	-	-	-	-	-	-	118,610	-	17,401	89,811	50,725	63.91%	25	
26	Medicare Part D	48,819	-	-	-	-	-	-	-	-	-	48,819	-	48,819	0.00%	26	
27	<b>Medicare Subtotal</b>	<b>190,815</b>	<b>4,524</b>	-	-	-	-	-	-	<b>120,071</b>	-	<b>66,220</b>	<b>90,861</b>	<b>99,954</b>	<b>47.62%</b>	27	
28	Health Information Technology	20,000	20,000	-	-	-	-	-	-	-	-	-	20,000	-	100.00%	28	
29	Utilization Review & Contracts	4,247	-	-	-	-	-	-	2,088	-	2,159	-	2,645	1,601	62.29%	29	
30	Prior Year Charged to Current	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30	
31	Current Year Charged to Future	-	-	-	-	-	-	-	-	-	-	-	-	-	-	31	
32																32	
33	<b>Grand Total</b>	<b>5,680,018</b>	<b>271,962</b>	<b>732,449</b>	<b>737,196</b>	<b>18,831</b>	<b>2,140</b>	<b>107,232</b>	<b>7,523</b>	<b>3,731,517</b>	<b>4,742</b>	<b>66,428</b>	<b>4,478,479</b>	<b>1,201,540</b>	<b>78.85%</b>	33	

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

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

No.	State Share Revenues:	FY 18 Op. Budget	Billed Amount	Collection YTD	HSD Projection	Change from Previous
35	Department of Health (Line 14 & 15) <sup>9</sup>	104,216	92,981	92,336	107,004	2,788
36	Department of Health Additional Need /(Surplus) <sup>16</sup>				0	(3,484)
37	Department of Health for Early Intervention	8,292	7,400	7,400	8,292	-
38	Department of Health for FQHCs	560	462	462	560	-
39	Department of Health for EC	1			-	(1)
40	County Supported Medicaid Fund	28,515	25,217	25,246	28,515	-
41	Tobacco Settlement Revenue, Base	29,319		26,818	26,818	(998)
42	Tobacco Settlement Revenue	-			-	-
43	UNM IGT	44,482	40,600	40,600	40,600	(1,747)
44	<b>Total Operating Transfers In</b>	<b>215,386</b>	<b>166,660</b>	<b>192,861</b>	<b>211,789</b>	<b>(3,442)</b>
45						
46						
47	Physician UPL UNM	1,681	1,259	1,259	1,605	-
48	Safety Net Care Pool (SNCP) <sup>11</sup>	22,790	23,670	17,985	23,670	1,085
49	SNCP (Additional Hospital Payments) <sup>12</sup>	-		-	-	-
50	Miner's Colfax <sup>14</sup>	500		-	-	-
51	County Contribution for Incarcerated Population <sup>15</sup>			-	-	-
52	Drug Rebates	28,867		39,799	39,799	7,473
53	Fraud	872		936	937	65
54	Income Diversion Trust	486		474	486	-
55	Buy-In Recovery	215		15	215	-
56	Cost Settlement	500		689	705	43
57	Estate Recovery	9		237	237	200
58	Miscellaneous Revenue	-		207	207	(144)
59	HMS-RAC-TPL/Subrogation	500		-	-	-
60	<b>Total Other Revenues</b>	<b>56,420</b>	<b>24,929</b>	<b>61,601</b>	<b>67,860</b>	<b>8,722</b>
61						
62	<b>General Fund Need</b>				<b>907,835</b>	<b>3,864</b>
63						
64	<b>FY 2018 Appropriation</b>	<b>915,637</b>			<b>915,637</b>	<b>-</b>
65						
65	<b>State Revenue Surplus / (Shortfall)</b>				<b>7,802</b>	<b>(3,864)</b>
66						
67						

PROJECTED REVENUES	
Medicaid Projection	5,680,018
Federal Revenues	4,478,479
Federal Disallowance <sup>10</sup>	-
MSBS CPE <sup>13</sup>	14,056
IHS Referral 100% FFP	-
All State Revenues	1,187,484

**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 and some other admin. Expenses are federally matched at 75%.
- 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 FY18.
- 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 Services (MSBS) through Certified Public Expenditures (CPE).
- Miner's Colfax hospital will contribute the state share of SNCP supplemental payments.
- 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 \$3.3 million in expenditures (\$0.95 million GF) from FY2017. DOH received a supplemental of \$2 million. DOH also transferred \$2.4 million from fund balance to cover their shortfall. SFY2016 GF surplus of \$387,670 is transferred into SFY2018 instead of SFY2017. \$1M from DDSD FY2018 fund balance will be barred in FY2019.

7/26/2018

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

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

No. A	Description B	FY 18 Title	FY 18 Title XIX		Δ		Δ		Projected		FY 19 Title		FY 19 Title	FY 19 TOTAL	% Change	March 2018	Change	No. S
		XIX & XXI Projection C	Projected Claims D	Δ Price E	\$ Impact F	Recipient G	\$ Impact H	Utilization I	\$ Impact J	Lump Sum K	Others L	XIX Projection M	XXI Projection N	Medicaid Projection O	from FY18 P	Data Projection Q	from Previous R	
1	Inpatient Hospital	87,453	87,180	0.00%	-	0.84%	737	0.00%	-	-	-	87,917	275	88,192	0.85%	88,104	88	1
2	DSH/GME/IME	139,311	-	--	-	--	-	--	-	139,311	-	139,311	-	139,311	0.00%	139,285	26	2
3	Safety Net Care Pool/HQII Pool	77,715	-	--	-	--	-	--	-	80,901	-	80,901	-	80,901	4.10%	80,901	-	3
4	Physician Services	39,057	33,086	0.00%	-	0.85%	283	0.00%	-	5,525	-	38,893	454	39,347	0.74%	39,044	302	4
5	IHS Hospital	123,487	123,487	2.30%	2,840	0.00%	-	0.00%	-	-	-	126,328	-	126,328	2.30%	125,542	786	5
6	ICF-IID	28,489	28,489	4.91%	1,400	0.00%	0	0.00%	0	-	-	29,889	-	29,889	4.92%	28,588	1,301	6
7	Clinic Services	54,323	18,248	0.00%	-	0.00%	-	0.00%	-	-	35,000	53,248	1,603	54,851	0.97%	51,128	3,723	7
8	Federal Qualified Health Centers	4,810	4,024	2.69%	108	0.00%	(0)	0.00%	-	-	678	4,811	110	4,921	2.31%	5,120	(200)	8
9	Other Practitioners	32,970	31,802	0.00%	-	0.00%	-	0.00%	-	-	-	31,802	1,189	32,991	0.06%	32,667	325	9
10	Outpatient Hospital	43,051	42,551	0.00%	-	0.00%	0	1.50%	638	-	-	43,189	509	43,698	1.50%	41,742	1,956	10
11	BH FFS	38,815	38,193	0.07%	26	0.00%	0	0.00%	-	-	-	38,219	632	38,852	0.10%	38,750	102	11
12	Others	59,011	61,565	0.56%	344	0.50%	310	0.00%	-	(4,100)	100	58,219	1,487	59,706	1.18%	59,365	341	12
13	<b>Fee-For-Service Subtotal</b>	<b>728,490</b>	<b>468,626</b>	<b>1.01%</b>	<b>4,718</b>	<b>0.28%</b>	<b>1,330</b>	<b>0.13%</b>	<b>639</b>	<b>221,637</b>	<b>35,778</b>	<b>732,727</b>	<b>6,260</b>	<b>738,987</b>	<b>1.44%</b>	<b>730,236</b>	<b>8,751</b>	13
14	DD & MF Traditional, and Mi Via Waiver	385,173	378,317	0.74%	2,812	0.45%	1,696	0.43%	1,654	7,840	4,265	396,583	-	396,583	2.96%	385,192	11,391	14
15	<b>Waivers Subtotal</b>	<b>385,173</b>	<b>378,317</b>	<b>0.74%</b>	<b>2,812</b>	<b>0.45%</b>	<b>1,696</b>	<b>0.43%</b>	<b>1,654</b>	<b>7,840</b>	<b>4,265</b>	<b>396,583</b>	<b>-</b>	<b>396,583</b>	<b>2.96%</b>	<b>385,192</b>	<b>11,391</b>	15
16	CC - Physical Health	1,489,909	1,384,505	0.00%	-	-0.82%	(11,308)	1.46%	20,013	41,455	(17,744)	1,416,921	81,398	1,498,319	0.56%	1,504,338	(6,018)	16
17	CC - LTSS	1,044,432	1,031,271	0.00%	-	0.86%	8,913	2.97%	30,851	12,076	(12,000)	1,071,110	257	1,071,367	2.58%	1,072,551	(1,184)	17
18	CC - Behavioral Health	329,599	305,883	0.00%	-	-0.63%	(1,939)	4.32%	13,120	2,963	4,350	324,377	18,301	342,679	3.97%	334,767	7,911	18
19	CC Medicaid Expansion-Physical Health	1,276,811	1,252,554	0.00%	0	0.35%	4,393	1.76%	22,124	24,685	(2,963)	1,300,793	-	1,300,793	1.88%	1,307,170	(6,377)	19
20	CC Medicaid Expansion-Behavioral Health	119,355	115,514	0.00%	(0)	0.35%	405	9.18%	10,638	1,689	1,650	129,897	-	129,897	8.83%	128,934	963	20
21	Health Insurance Providers Fee	91,187	-	--	-	--	-	--	-	-	-	-	-	-	-100.00%	-	-	21
22	<b>Centennial Care MCO Subtotal</b>	<b>4,351,293</b>	<b>4,089,727</b>	<b>0.00%</b>	<b>0</b>	<b>0.01%</b>	<b>464</b>	<b>2.37%</b>	<b>96,747</b>	<b>82,868</b>	<b>(26,707)</b>	<b>4,243,099</b>	<b>99,957</b>	<b>4,343,056</b>	<b>-0.19%</b>	<b>4,347,760</b>	<b>(4,705)</b>	22
23	Medicare Part A	1,461	1,461	2.75%	40	4.67%	70	0.00%	-	-	-	1,571	-	1,571	7.55%	1,400	171	23
24	Medicare Part B	140,536	140,536	0.58%	811	2.15%	3,033	0.00%	-	-	-	144,380	-	144,380	2.74%	141,905	2,475	24
25	Medicare Part D	48,819	48,819	0.39%	189	5.19%	2,541	0.00%	-	-	-	51,549	-	51,549	5.59%	51,293	256	25
26	<b>Medicare Subtotal</b>	<b>190,815</b>	<b>190,815</b>	<b>0.55%</b>	<b>1,041</b>	<b>2.94%</b>	<b>5,644</b>	<b>0.00%</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>197,500</b>	<b>-</b>	<b>197,500</b>	<b>3.50%</b>	<b>194,598</b>	<b>2,902</b>	26
27	Health Information Technology	20,000	-	--	-	--	-	--	-	8,000	-	8,000	-	8,000	-60.00%	8,000	-	27
28	Utilization Review & Contracts	4,247	-	--	-	--	-	--	-	1,970	2,800	4,770	-	4,770	12.33%	4,770	-	28
29	Centennial Care 2.0 Initiatives	-	-	--	-	--	-	--	-	-	-	20,875	-	20,875	--	9,007	11,869	29
30	Provider Fee Increases	-	-	--	-	--	-	--	-	-	-	-	-	-	--	22,460	(22,460)	30
31	Prior Year Charged to Current	-	-	--	-	--	-	--	-	-	-	-	-	-	--	-	-	31
32																		32
33	<b>Grand Total</b>	<b>5,680,018</b>	<b>5,127,485</b>	<b>0.17%</b>	<b>8,571</b>	<b>0.18%</b>	<b>9,134</b>	<b>1.92%</b>	<b>99,039</b>	<b>322,315</b>	<b>16,136</b>	<b>5,603,555</b>	<b>106,216</b>	<b>5,709,771</b>	<b>0.52%</b>	<b>5,702,024</b>	<b>7,747</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.

External Meeting 7/26/2018

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 and Other Admin. (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	88,192	8,359	15,480	16,770	201	-	275	-	47,106	-	-	72,997	15,195	82.77%	1	
2	DSH/GME/IME	139,311	-	-	-	-	-	-	-	139,311	-	-	100,666	38,645	72.26%	2	
3	Safety Net Care Pool/HQII Pool	80,901	-	-	-	-	-	-	-	80,901	-	-	58,459	22,442	72.26%	3	
4	Physician Services	39,347	1,507	4,912	5,321	-	20	454	-	27,067	-	66	31,096	8,251	79.03%	4	
5	IHS Hospital	126,328	126,328	-	-	-	-	-	-	0	-	-	126,328	-	100.00%	5	
6	ICF-IID	29,889	-	311	336	-	-	-	-	29,242	-	-	21,730	8,160	72.70%	6	
7	Clinic Services	54,851	-	200	216	-	-	1,603	-	52,810	-	23	40,147	14,704	73.19%	7	
8	Federal Qualified Health Centers	4,921	2	498	539	-	0	110	-	3,772	-	-	3,806	1,115	77.35%	8	
9	Other Practitioners	32,991	25	440	476	-	0	1,189	-	30,861	-	-	24,364	8,627	73.85%	9	
10	Outpatient Hospital	43,698	2,013	6,377	6,909	-	118	509	-	27,771	-	-	34,509	9,189	78.97%	10	
11	BH FFS	38,852	11,660	3,700	4,008	1	1	632	-	18,842	-	7	33,111	5,740	85.23%	11	
12	Others	59,706	4,149	6,805	7,372	1,651	8	1,487	-	38,204	-	30	46,196	13,510	77.37%	12	
13	<b>Fee-For-Service Subtotal</b>	<b>738,987</b>	<b>154,043</b>	<b>38,722</b>	<b>41,948</b>	<b>1,853</b>	<b>147</b>	<b>6,260</b>	-	<b>495,887</b>	-	<b>126</b>	<b>593,409</b>	<b>145,578</b>	<b>80.30%</b>	13	
14	DD & MF Traditional, and Mi Via Waive	396,583	-	-	-	-	-	-	5,435	388,565	2,584	-	286,095	110,488	72.14%	14	
15	<b>Waivers Subtotal</b>	<b>396,583</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>5,435</b>	<b>388,565</b>	<b>2,584</b>	<b>-</b>	<b>286,095</b>	<b>110,488</b>	<b>72.14%</b>	15	
16	CC - Physical Health	1,498,319	41,211	-	-	15,757	1,180	81,398	-	1,358,529	-	244	1,119,143	379,177	74.69%	16	
17	CC - LTSS	1,071,367	12,076	-	-	-	-	257	-	1,059,035	-	-	777,379	293,988	72.56%	17	
18	CC - Behavioral Health	342,679	2,963	-	-	1,220	88	18,301	-	320,107	-	-	253,678	89,001	74.03%	18	
19	CC Medicaid Expansion-Physical Health	1,300,793	24,685	548,519	727,589	-	-	-	-	-	-	-	1,216,951	83,842	93.55%	19	
20	CC Medicaid Expansion-Behavioral Health	129,897	1,689	55,245	72,963	-	-	-	-	-	-	-	121,475	8,422	93.52%	20	
21	Health Insurance Providers Fee	-	-	-	-	-	-	-	-	-	-	-	-	-	-	21	
22	<b>Centennial Care MCO Subtotal</b>	<b>4,343,056</b>	<b>82,625</b>	<b>603,764</b>	<b>800,552</b>	<b>16,977</b>	<b>1,267</b>	<b>99,957</b>	-	<b>2,737,670</b>	-	<b>244</b>	<b>3,488,626</b>	<b>854,430</b>	<b>80.33%</b>	22	
23	Medicare Part A	1,571	-	-	-	-	-	-	-	1,571	-	-	1,135	436	72.23%	23	
24	Medicare Part B	144,380	4,696	-	-	-	-	-	-	120,523	-	19,161	91,762	52,618	63.56%	24	
25	Medicare Part D	51,549	-	-	-	-	-	-	-	-	-	51,549	-	51,549	0.00%	25	
26	<b>Medicare Subtotal</b>	<b>197,500</b>	<b>4,696</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>122,093</b>	<b>-</b>	<b>70,711</b>	<b>92,896</b>	<b>104,604</b>	<b>47.04%</b>	26	
27	Health Insurance Providers Fee	8,000	8,000	-	-	-	-	-	-	-	-	-	8,000	-	100.00%	27	
28	Utilization Review & Contracts	4,770	-	-	-	-	-	-	2,800	-	1,970	-	3,085	1,685	64.67%	28	
29	Centennial Care 2.0 Initiatives	20,875	-	-	-	-	-	-	-	20,875	-	-	16,625	4,251	79.64%	29	
30	Provider Fee Increases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30	
31																31	
32	<b>Grand Total</b>	<b>5,709,771</b>	<b>249,364</b>	<b>642,485</b>	<b>842,500</b>	<b>18,831</b>	<b>1,415</b>	<b>106,216</b>	<b>8,235</b>	<b>3,765,091</b>	<b>4,554</b>	<b>71,081</b>	<b>4,488,736</b>	<b>1,221,035</b>	<b>78.61%</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	110,632	1,000
34	Department of Health Allocation Need /(Surplus) <sup>17</sup>	-	(1,235)	480
35	Department of Health Additional Need /(Surplus)		1,091	1,681
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	County Supported Medicaid Fund	26,176	26,176	-
40	Tobacco Settlement Revenue, Base	8,319	8,319	-
41	Tobacco Settlement Revenue	-	-	-
42	UNM IGT	42,347	42,347	-
43	UNM IGT Additional Revenue	-	-	-
44	<b>Total Operating Transfers In</b>	<b>194,698</b>	<b>195,553</b>	<b>3,160</b>
45				
46				
47	Physician UPL UNM	1,605	1,605	-
48	Safety Net Care Pool (SNCP) <sup>12</sup>	22,585	26,770	4,185
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>64,758</b>	<b>4,185</b>
60				
61	<b>General Fund Need</b>		<b>944,588</b>	<b>866</b>
62	<b>FY2019 Appropriation</b>		<b>933,625</b>	<b>-</b>
63				
64				
65	<b>State Revenue Surplus / (Shortfall)</b>		<b>(10,963)</b>	<b>(866)</b>

PROJECTED REVENUES	
Medicaid Projection	5,709,771
Federal Revenues	4,488,736
Federal Disallowance <sup>11</sup>	-
MSBS CPE <sup>14</sup>	14,136
IHS Referrals at 100% FFP	2,000
All State Revenues	1,204,899

**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 and some other admin. Expenses are federally matched at 75%.
- 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. \$1M from DDSF FY2018 fund balance will be barred in FY2019.
- 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 FY2016, 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.