

MEDICAID ADVISORY COMMITTEE (MAC)

Monday, June 16, 2014

Agenda

Time: 1:00pm-5:00pm Location: Apodaca Hall, Old PERA Building, 2nd floor, Santa Fe*

Committee Chairperson:

Larry Martinez, Presbyterian Medical Services
Desbah Farden, HSD/MAD

Committee Support Person:

Committee Members:

Michael Batte, Public Member
Roselyn Begay, Navajo Nation Division of Health
Jeff Dye, New Mexico Hospital Association
Mary Eden, Presbyterian Healthcare Services
Joie Glenn, NIM Association for Home & Hospice Care
Michael Hely, New Mexico Legislative Council Service
Ruth Hoffman, Lutheran Advocacy Ministry New Mexico
Nancy Koenigsberg, Disability Rights New Mexico
Larry Lubar, New Mexico Dental Association
Carol Luna-Anderson, The Life Link/BHPC
Steve McKernan, University of New Mexico Hospital

Carolyn Montoya, UNM College of Nursing
Gino Rinaldi, Aging & Long Term Services Department
David Roddy, New Mexico Primary Care Association
Marilyn Rohn, Behavioral Health Consumer Affairs
Daphne Rood-Hopkins, Children, Youth & Families Department
Linda Sechovec, New Mexico Health Care Association
Laurence Shandler, Pediatrician
Dale Tinker, New Mexico Pharmacists Association
Gene Varela, AARP New Mexico
Retta Ward, New Mexico Department of Health

HSD Representatives:

Julie Weinberg, HSD/MAD Director
Nancy Smith-Leslie, HSD/MAD Deputy Director

Brent Earnest, HSD Deputy Secretary
Matt Onstott, HSD/MAD Deputy Director

DISCUSSION ITEM	DISCUSSION LEADER	DESCRIPTION	TIME
I. Introductions	Larry Martinez, Chairperson	Introduction of all committee members, staff and guests.	1:00
II. Approval of Agenda	Larry Martinez, Chairperson	Approval of agenda items.	1:05
III. Approval of Minutes	Larry Martinez, Chairperson	Committee approval of minutes from the previous meeting held January 29, 2014	1:10

DISCUSSION ITEM	DISCUSSION LEADER	DESCRIPTION	TIME
IV. Director's Report	Julie Weinberg, Director, Medical Assistance Division, Human Services Department	Report from the Director on current division activities.	1:15
V. Medicaid Budget Projections	Julie Weinberg, Director, Medical Assistance Division, Human Services Department	Review and discussion of the current Medicaid Budget Projections.	1:30
VI. Post Award Forum on Centennial Care	Julie Weinberg, Director, Medical Assistance Division, Human Services Department	An opportunity for the committee to provide meaningful comments about the progress of Medicaid's Centennial Care program implementation.	2:00
VII. Post Award Forum on Centennial Care	Julie Weinberg, Director, Medical Assistance Division, Human Services Department	A public forum to provide meaningful comments about the progress of Medicaid's Centennial Care program implementation.	3:00
VIII. Public Comment	MAC Chairperson	Opportunity for comments on the discussions from any interested parties.	4:30

***Meeting Address:**

Apodaca Hall-2nd Floor-Old P.E.R.A. Building
1120 Paseo de Peralta-Santa Fe, NM 87501

The old PERA building is just east of the state capitol roundhouse.
There is handicapped accessible parking on the east side of the PERA building.

Medicaid Advisory Committee (MAC)

January 29, 2014

MINUTES

Time: Start-1:05pm End-4:05pm Location: Garrey Carruthers State Library, Santa Fe

Chair:

Larry Martinez, Presbyterian Medical Services
Desbah Farden, Committee Support Person

Recorder:

Committee Members:

Michael Batte, Public Member
Roselyn Begay, Navajo Nation Division of Health
Joie Glenn, NM Association for Home and Hospice Care
Ruth Hoffman, Lutheran Advocacy Ministry NM
Nancy Koenigsberg, Disability Rights NM
Larry Lubar, NM Dental Association
Carol Luna-Anderson, The Life Link/BHPC

Carolyn Montoya, UNM College of Nursing
Gino Rinaldi, NM Aging & Long Term Services Department
Linda Sechovec, NM Health Care Association
Laurence Shandler, Pediatrician
Dale Tinker, NM Pharmacists Association
Gene Varela, AARP NM

Absent Members:

Jeff Dye, NM Hospital Association
Mary Eden, Presbyterian Healthcare Services
Michael Hely, NM Legislative Council Service
David Roddy, NM Primary Care Association

Marilyn Rohn, Behavioral Health Consumer Affairs
Daphne Rood-Hopkins, Children, Youth, and Families Department
Retta Ward, NM Department of Health

Staff & Visitors Attending:

Julie Weinberg, HSD/MAD Director
Kari Armijo, HSD/MAD
Guy Surdi, GCD
Dorianne Mason, NMCLP
Ruth Williams, YDI Elev8 NM
Nancy Rodriguez, NMASBHC
Barbara Webber, HANM
Sharon Huerta, BCBSNM
Liz Lacouture, PHS
Lynn Gallager, DOH
Brian Fletcher, Footprints Home Care
Bruce Evans, Local Collaborative #1
Stan Pozernick, Home Care Options

Brent Earnest, HSD Deputy Secretary
Theresa Belanger, HSD/MAD
LeeAnna Vargas, UNM
Karen Wells, NMAHC
Pamela Stanley, UNM
Yvonne Gurule, Bernalillo Academy
Amy C Dixon, Desert States PT Network
Eileen Goode, NMPCA
Jody Harris, UNM Hospital
Dan Clavio, HSD/MAD
Liz Sands, For Your Care In-Home Care
Joe Tschanz, NMAALTS
Paige Duhamil-SW Women's Law Center

Mark Pitcock, HSD/MAD
Kevin Kandalaft, UHC
Margaret White, Health Insight New Mexico
Kelli Strother, Otsuka
Katy Groth, DVR
Maria Zamora Hughes, InnovAge Greater NM PACE
Janis Gonzales, DOH/PHD/FHB
Mary Kay Pera, NMASBHC
Anne Foster, HSD/MAD
Joe Martinez, Health Action NM
Jim Jackson, Disability Rights NM
Robyn Nardone, HSD/MAD
Karla Gonzales, HSD/MAD

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
I. Introductions	Meeting called to order then introductions of all persons present at the beginning of the meeting were made. Chairperson Larry Martinez reminded the committee this is the meeting held during legislative session to address issues related to the Medicaid budget.	None	MAC Chairperson	Completed
II. Approval of Agenda	The agenda was presented to the committee and the committee approved the agenda as written.	None	MAC Chairperson	Completed
III. Approval of Minutes	The October 21, 2013 minutes were approved by the committee.	None	Desbah Farden, Committee Support Person	Completed
IV. Director's Report	<p>Julie Weinberg announced Matt Onstott was hired as the third deputy director at MAD. Matt has returned after some world travel.</p> <p>Julie Weinberg provided a report on the development of the ICSS-Independent Consumer Support System. Julie described this was part of the Centennial Care waiver to help disabled individuals and elderly individuals negotiate the system to find services, develop plans of care independently and build on what the ADRC already does. Julie also reported an advisory committee is being developed to bring multiple entities together to gather hard to find resources to inform persons about the community benefit through centennial care.</p> <p>Julie also reported the Division is preparing to release RFPs for external quality and review organization, one for actuarial services, and one for third party assessor.</p> <p>Brent Earnest responded to the Chairperson's request for information on the behavioral health contract. Brent provided brief information that the behavioral health contractor was currently running non-Medicaid behavioral health services until the end of this calendar year and the department plans to issue an RFI and encouraged the committee to review the RFI and provide comments.</p>	None	Julie Weinberg, Director, Medical Assistance Division, Human Services Department	Completed

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
<p>V. Centennial Care Implementation</p>	<p>Julie Weinberg reported on the events during the early stages of Centennial Care implementation. Julie Weinberg reported on the centennial care command center that was put in place to identify issues, track issues, and resolve issues from the provider and recipient communities. Julie Weinberg also reported on daily transition meetings, and tracking statistics for daily oversight of the program.</p> <p>Julie discussed concerns from the committee regarding provider participation, network adequacy reviews, fee for service pricing, tribal concerns about auto enrollment, redesigned website difficulty, and Medicaid appeals processes. Several members from the committee recommended more provider involvement to address concerns.</p>	<p>None</p>	<p>Julie Weinberg, Director, Medical Assistance Division, Human Services Department</p>	<p>Completed</p>
<p>VI. Medicaid Expansion Update</p>	<p>Kari Armijo reported she manages health care reform for Centennial Care implementation. Kari Armijo provided information on the transition of SCL enrollees to new eligibility categories and the transitions of other s previously enrolled in high risk pool, plus other uninsured groups to affect enrollment numbers. Kari also reported the family planning program continues through 2014. Kari also explained the experience during a time of increase of activities such as receiving many applications, call center activity increase, account transfers, and eligibility processing increase.</p> <p>Kari Armijo also reported on the Alternative Benefit Plan and provided a handout that includes a comparison chart to compare the alternative benefit package to the standard Medicaid benefit plan and includes cost sharing information.</p>	<p>Alternative Benefit Plan information will be posted on the HSD website.</p>	<p>Kari Armijo, Health Care Reform Manager, Medical Assistance Division, Human Services Department</p>	<p>Completed</p>
<p>VII. Medicaid Budget Projections</p>	<p>Brent Earnest provided the report for FY13, FY14, and FY15. In the discussion Brent provided information to explain the department is working with counties and hospitals to find solutions on how to finance payments to hospitals under the safe net care pool hospitals who are the former sole community provider hospitals.</p> <p>Brent Earnest also provided a status on the FY15 projections before the legislature session begins and reported on a general fund recommendation of approximately \$901 million.</p>	<p>A subcommittee of the MAC is being considered to address and possibly change the way the budget format is presented.</p>	<p>Julie Weinberg, Director, Medical Assistance Division, Human Services Department</p>	<p>Completed</p>

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
VIII. ASPEN	<p>Mark Pitcock reported on the culmination of a major and extended project-ASPEN. Mark Pitcock complimented the efforts of staff statewide that put in countless hours of work. Mark also noted that the implementation of ASPEN was a prerequisite for Centennial Care, Affordable Care Act, and Medicaid expansion.</p> <p>Mark Pitcock provided a handout and explained new categories of eligibility and how they relate to existing categories. Mark also explained how the new MAGI (Modified Adjusted Gross Income) categories will affect eligibility and over time the legacy categories will be replaced.</p>	None	Mark Pitcock, Deputy Director, Medical Assistance Division, Human Services Department	Completed
IX. Public Comment	<p><u>Nancy Rodriguez</u>-Expressed a critical need for more PEMOSAA (pre-sumptive eligibility) training and further advance notice of these trainings.</p> <p><u>Nancy Koenigsberg</u> on behalf of <u>Jim Jackson</u>-Requested the number of individuals receiving HSD funded behavioral health services. Julie Weinberg stated information would be sent.</p> <p><u>Bruce Evans</u>-Concerned on the shortage of medical care providers and presented the question: "How do we retain and recruit fully qualified medical professionals in the state?"</p> <p><u>Carolyn Montoya</u>-Responded to Bruce Evans concern and stated that Governor Martinez supports nurse practitioner education and has set aside money for these purposes.</p> <p><u>Dorianne Mason</u>-Presented concerns that people being transitioned through categories of eligibility are experiencing confusion. Also recommended simpler language for notices from the department.</p> <p><u>Paige Duhamil-Paige</u> stated her concerns were similar to Dorianne Mason-Notices need to be in simpler language and ISD workers need training immediately on enrollment.</p> <p><u>Ruth Williams</u>-Concerned that a slow growth in Medicaid enrollment is not good.</p>	None	HSD Management	Completed

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
X. Adjournment	The meeting adjourned at 4:05pm.	None	MAC Chairperson	Completed

Respectfully submitted: Desbah Farden
 Medicaid Advisory Committee Support Person 6/13/14

Recorder _____ Date _____

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

FY 13 Projection (Lag Model) by Categories of Service with Actual Data Thru March 2014 (\$000s)

Line No.	Description	FY 12 Title XX Projection	FY 13 % Completion	Title XX Actual Paid YTD	Actual Paid Lump Sum YTD	Projected Lump Sum	Adjustments	FY13 Title XX		% Change from FY 12	CHIP/SCI YTD	FY13 CHIP/SCI Projection	FY13 Medicaid Projection	Nov 2013 Projection	Change from Previous	Line No.
								Projection	Actual Paid							
1	Inpatient Hospital	91,942	99.4%	96,018	-	-	-	96,636	948	5.1%	948	954	97,590	97,481	109	1
2	DSH	29,862	81.3%	25,164	25,164	30,957	-	30,957	-	3.7%	-	-	30,957	30,957	-	2
3	GME	7,187	100.0%	7,187	7,187	7,187	-	7,187	-	0.0%	-	-	7,187	7,187	-	3
4	IME	30,851	100.0%	32,364	32,364	32,364	-	32,364	-	4.9%	-	-	32,364	32,364	-	4
5	SCPH-UPL	207,413	100.0%	88,395	88,395	88,395	-	88,395	-	-57.4%	-	-	88,395	88,395	-	5
6	Physician Services	50,353	99.3%	53,930	11,465	11,465	590	54,310	802	7.9%	802	809	55,120	54,746	373	6
7	Prescribed Drugs	10,295	99.9%	11,082	-	-	-	11,082	277	7.7%	277	277	11,370	11,370	-	7
8	Dental Services	13,588	100.0%	13,215	-	-	-	13,215	954	-2.7%	954	955	14,171	14,160	11	8
9	Transportation	7,631	99.7%	7,631	-	-	-	7,631	145	0.3%	145	146	7,803	7,807	(4)	9
10	Lab and X-Ray	3,630	99.5%	3,988	-	-	-	3,988	24	10.5%	24	24	4,034	3,951	83	10
11	EP/SDT	2,239	99.9%	2,330	-	-	-	2,330	113	4.2%	113	113	2,446	2,448	(2)	11
12	IHS Hospital	79,376	98.9%	83,208	-	-	-	84,122	-	6.0%	-	-	84,122	84,515	(393)	12
13	Nursing Facility	2,755	98.4%	3,251	-	-	-	3,304	-	19.9%	-	-	3,304	3,053	251	13
14	ICF MR	24,862	100.0%	24,983	-	-	-	24,983	-	0.5%	-	-	24,983	24,908	75	14
15	Clinic Services	12,987	100.0%	12,009	-	-	-	12,012	835	-7.5%	835	836	12,847	12,868	(21)	15
16	Federal Qualified Health Centers	24,234	80.3%	24,660	20,831	26,831	-	30,729	112	26.8%	112	114	30,843	23,811	7,032	16
17	Other Practitioners	37,428	99.9%	36,869	-	-	-	36,898	995	-1.4%	995	996	37,894	37,931	(37)	17
18	Outpatient Hospital	34,834	99.1%	37,993	-	-	-	38,320	807	10.0%	807	814	39,134	39,206	(72)	18
19	Family Planning	8,010	100.1%	8,792	-	-	-	8,781	17	9.6%	17	17	8,798	8,781	17	19
20	PACE	11,210	100.0%	11,859	-	-	-	11,859	-	5.8%	-	-	11,859	11,859	-	20
21	Personal Care Options	567	99.9%	642	-	-	-	643	-	13.4%	-	-	643	645	(2)	21
22	Others	5,694	98.7%	5,963	1,329	1,429	-	6,232	63	9.4%	63	63	6,295	6,243	52	22
23	BH CFFS	28,566	98.0%	25,451	-	-	-	25,961	737	-9.1%	737	753	26,713	27,056	(342)	23
24	Premium Assistance Program	33	100.0%	18	-	-	-	18	-	-44.3%	-	-	18	18	-	24
25	Subtotal FFS	725,547	97.6%	617,002	186,735	199,628	732	632,019	6,830	-12.9%	6,830	6,870	638,889	631,742	7,148	25
26	AIDS, DD and MF (DOH)	274,786	100.0%	275,002	174	174	-	1,727	275,002	0.1%	-	-	275,002	275,095	(92)	26
27	Mi Via Waivers (DOH)	10,645	100.0%	14,994	22	22	1,045	14,994	-	40.9%	-	-	14,994	15,796	(803)	27
28	Mi Via Waiver (D&E)	18,943	100.0%	22,594	55	55	1,625	22,594	-	19.3%	-	-	22,594	23,668	(1,074)	28
29	Mi Via Waiver BI (AL/TS)	10,994	100.0%	11,205	17	17	894	11,205	-	1.9%	-	-	11,205	11,862	(657)	29
30	Subtotal HCBW	315,367	100.0%	323,795	268	268	5,290	323,795	-	2.7%	-	-	323,795	326,421	(2,626)	30
31	Physical Health MCO	1,014,036	99.2%	1,098,527	54,726	58,926	5,428	1,108,157	48,765	9.3%	48,765	48,765	1,156,921	1,160,310	(3,388)	31
32	Behavioral Health MCO	241,494	100.0%	248,490	1,050	1,050	-	248,490	11,510	2.9%	11,510	11,510	260,000	260,090	(89)	32
33	Co/TS	865,427	98.8%	911,886	13,790	24,813	323	923,232	-	6.7%	-	-	923,232	923,336	(104)	33
34	State Coverage Insurance	153,764	98.3%	139,956	8,775	12,028	576	143,785	75,841	-6.5%	75,841	75,841	219,628	219,976	(350)	34
35	Subtotal MCO	2,274,721	99.0%	2,398,860	78,342	96,818	6,329	2,423,664	136,115	6.5%	136,115	136,115	2,559,780	2,563,711	(3,931)	35
36	Medicare Part A	750	100.0%	778	778	778	-	778	-	3.8%	-	-	778	778	-	36
37	Medicare Part B	89,616	100.0%	87,368	87,368	87,368	-	87,368	-	-2.5%	-	-	87,368	87,368	-	37
38	Medicare Part D	24,404	100.0%	25,116	25,116	25,116	-	25,116	-	2.9%	-	-	25,116	25,116	-	38
39	Subtotal Medicare	114,769	100.0%	113,262	113,262	113,262	-	113,262	-	-1.3%	-	-	113,262	113,262	-	39
40	Utilization	8,499	100.0%	8,143	8,143	8,143	-	8,143	-	-4.2%	-	-	8,143	8,143	-	40
41	HIT Incentive Payments	37,131	100.0%	31,388	31,388	31,388	-	31,388	-	na	-	-	31,388	31,388	-	41
42	Contracts	-	-	1,755	1,755	1,755	-	1,755	-	na	-	-	1,755	1,755	-	42
43	Prior Years Charged to Current Year	12,813	na	-	-	-	-	-	-	na	-	-	-	-	-	43
44	Subtotal	58,444	-	41,286	41,286	41,286	-	41,286	-	na	-	-	41,286	41,286	-	44
45	Total	3,488,849	98.9%	3,494,205	419,894	450,262	12,351	3,534,027	142,945	1.3%	142,945	142,985	3,677,013	3,676,422	590	45

FY 13 Operating Budget
Projected Surplus/(Shortfall)

3,878,564
201,551

- Notes:
- (Line 9) Transportation consists of Non-emergency transportation, Ambulance, and Maintenance.
 - (Line 22) Others consists of Prosthetics, RHC, RTC, Waiver Services, Hospice, Home Health, Group Health Insurance Premiums, and Medical Supplies.
 - (Line 32) ACT/BH EA is part of Managed Care BH. The BH program began in SFY 2006.

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

FY13 Revenue by Source (\$000s) - LAG Model

Line No. A	Description B	FY 13 Projection C	Federal Medicaid Expenditure Type and Federal Financial Participation Rates										% of Composite Federal Share N
			IHS, Refugees & UNM UPL (100% FFP) ¹ D	Sterilization & Family Planning Services (90% FFP) ² E	Breast & Cervical Cancer Program (EFMAP) ³ F	SCI (REMAP) ⁴ G	Title XXI CHIP & SCI (EFMAP) ⁵ H	Utilization Review (75% FFP) ⁶ I	Title XIX Medicaid (FMAP) ⁷ J	Admin and Fees (50% FFP) ⁸ K	Non-Federal Financial Participation Expenses (0% FFP) ⁹ L	Federal Share (\$000s) M	
1	Inpatient Hospital	97,590	9	35	724	-	954	-	95,667	-	-	67,620	69.29%
2	DSH	30,957	-	-	-	-	-	-	30,957	-	-	21,382	69.07%
3	GME	7,187	-	-	-	-	-	-	7,187	-	-	4,964	69.07%
4	IME	32,364	-	-	-	-	-	-	32,364	-	-	22,366	69.11%
5	SCPH-UPL	88,395	-	-	-	-	-	-	88,395	-	-	61,144	69.17%
6	Physician Services	55,120	588	-	2,709	-	-	813	-	-	389	38,374	69.62%
7	Prescribed Drugs	11,370	37	-	785	-	-	277	-	-	2	7,969	70.09%
8	Dental Services	14,171	135	-	75	-	-	955	-	-	-	9,935	70.11%
9	Transportation	7,803	2	-	108	-	-	146	-	-	-	5,418	69.43%
10	Lab and X-Ray	4,034	3	-	320	-	-	24	-	-	-	2,821	69.94%
11	EPSDT	2,446	3	-	0	-	-	113	-	-	-	1,703	69.62%
12	IHS Hospital	84,122	84,032	-	-	-	-	-	-	-	90	84,032	99.89%
13	Nursing Facility	3,304	-	-	-	-	-	-	3,304	-	-	2,284	69.11%
14	ICF MR	24,983	-	-	-	-	-	-	24,983	-	-	17,271	69.13%
15	Clinic Services	12,847	1	-	1	-	-	836	-	-	31	8,932	69.52%
16	Federal Qualified Health Centers	30,843	3	-	117	-	-	114	-	-	-	21,435	69.50%
17	Other Practitioners	37,894	7	-	61	-	-	996	-	-	0	26,292	69.38%
18	Outpatient Hospital	39,134	70	-	3,157	-	-	814	-	-	3	27,437	70.11%
19	Family Planning	8,798	3,121	5,612	-	-	-	-	-	-	66	8,171	92.88%
20	PACE	11,859	-	-	-	-	-	-	11,859	-	-	8,199	69.14%
21	Personal Care Options	643	-	-	2	-	-	-	641	-	-	445	69.15%
22	Others	6,295	51	-	154	-	-	63	5,884	142	1	4,364	69.33%
23	BH CFFS	26,713	7,420	0	89	-	-	753	15,967	2,485	-	20,357	76.21%
24	Premium Assistance Program	18	-	-	-	-	-	-	-	-	18	-	0.00%
25	Subtotal FFS	638,889	95,482	5,648	8,301	-	-	6,856	519,374	2,627	600	472,914	74.02%
26	AIDS, DD and MF (DOH)	275,002	-	-	-	-	-	391	272,811	1,800	-	189,859	69.04%
27	Mi Via Waivers (DOH)	14,994	-	-	-	-	-	302	13,861	830	-	10,144	67.66%
28	Mi Via Waiver (D&E)	22,594	-	-	-	-	-	413	20,809	1,372	-	15,377	68.06%
29	Mi Via Waiver BI (ALTSD)	11,205	-	-	-	-	-	273	10,293	639	-	7,639	68.17%
30	Subtotal HCBW	323,795	-	-	-	-	-	1,380	317,774	4,641	-	223,019	68.88%
31	Physical Health MCO	1,156,921	16,751	5,323	-	-	48,765	-	1,085,920	-	163	809,435	69.96%
32	Behavioral Health MCO	260,000	1,050	-	28	-	11,510	-	247,412	-	-	181,158	69.68%
33	CoLTS	923,232	11,330	-	703	-	-	-	911,199	-	-	641,887	69.53%
34	State Coverage Insurance	219,626	6,060	-	-	76,270	-	-	137,281	-	15	157,197	71.57%
35	Subtotal MCO	2,559,780	35,191	5,323	731	76,270	60,274	-	2,381,812	-	178	1,789,677	69.92%
36	Medicare Part A	778	-	-	-	-	-	-	778	-	-	538	69.14%
37	Medicare Part B	87,368	4,021	-	-	-	-	-	73,656	-	9,692	54,948	62.89%
38	Medicare Part D	25,116	-	-	-	-	-	-	-	-	25,116	-	0.00%
39	Subtotal Medicare	113,262	4,021	-	-	-	-	-	74,434	-	34,808	55,486	48.99%
40	Utilization	8,143	-	-	-	-	-	8,143	-	-	-	6,107	75.00%
41	HIT Incentive Payments	31,388	31,388	-	-	-	-	-	-	-	-	31,388	100.00%
42	Contracts	1,755	-	-	-	-	-	-	-	1,755	-	878	50.00%
43	Prior Years Charged to Current Year	-	-	-	-	-	-	-	-	-	-	-	na
44	Subtotal	41,288	31,388	-	-	-	-	8,143	-	1,755	-	38,373	92.84%
45	Total	3,677,013	166,081	10,971	9,032	76,270	67,131	9,523	3,293,394	9,024	35,586	2,579,468	70.15%

	HSD Budget	Billed Amount	Collection YTD	HSD Projection
48	State Share Revenues:			
49	Department of Health (Line 26 & 27) ¹⁰	95,871	90,587	95,871
50	Department of Health Additional Need I (Surplus)	-	-	(5,284)
51	Department of Health for Early Intervention	6,400	6,759	6,759
52	Department of Health for FQHC's	500	482	482
53	Department of Health for EC	1	0	0
54	County Supported Medicaid Fund	25,600	25,728	25,728
55	Total Operating Transfers In	128,372	123,556	123,556
56	UNM SCI IGT	23,760	16,286	16,286
57	School Based Health Services (Part of Line 15)	3,821	3,649	3,649
58	Physician UPL UNM	2,759	3,539	3,539
59	Sole Community Provider Hospital Fund (Line 5)	85,650	58,291	50,551
60	SCPH - SFY12	-	-	7,740
61	SCPH - Refund to counties	-	(10,840)	(10,840)
62	Drug Rebates	1,251	22,454	22,454
63	Fraud	872	923	923
64	Tort and Insurance Carrier Refund	-	239	239
65	Income Diversion Trust/Estate Recoveries	495	562	562
66	Buy-In Recovery	215	187	187
67	Cost Settlement	3,542	-	-
68	Misc. Revenue	-	343	343
69	HMS RAC-TPLUSubrogation	-	2,072	2,072
70	Tobacco Settlement Revenue, Base	9,456	9,456	9,456
71	Tobacco Settlement Revenue ¹³	19,046	19,046	19,046
72	Total Other Revenues	150,867	70,925	126,207
73	General Fund Need ¹⁴	-	-	867,581
74	Appropriation in FY13	-	-	894,325
75	Prior Year Liability	-	-	(2,751)
76	Transfer to Admin Budget	-	-	(1,416)
77	State Revenue Surplus / (Shortfall)	-	-	22,577

PROJECTED REVENUES	
Federal Revenues	2,579,468
Federal Disallowances ¹¹	-
Contingency Appropriation ¹¹	-
Federal Disallowances ¹²	(19,800)
All State Revenues	1,117,344

- Notes:
- IHS, UPL, GI-1 and Refugees are eligible for 100% FFP.
 - Only sterilization and FPW costs are eligible for 90% FFP.
 - Breast and cervical cancer (BCC) program with enhanced FMAP.
 - SCI parents are reimbursed at REMAP for 3 qtrs.
 - CHIP is Title XXI programs with enhanced FMAP.
 - Utilization review is federally matched at 75%; HCBW admin. expenses.
 - Title XIX expenditures with regular FMAP.
 - Administration expenditures are eligible for 50% FFP.
 - Pregnancy termination, special needs and state only buy-in (Part B) expenditures are not eligible for federal financial participation.
 - DOH for Medicaid DD, AIDS, MF and MiVia waiver services; projected revenue is without the 3% for admin.
 - The est. Federal disallowance is not expected to come in SFY13 and the contingency appropriation associated with that may not be needed.
 - Disallowance for DSH payments. HSD is appealing the disallowance and anticipates that this will probably not be satisfied in SFY13.
 - Tobacco revenues are distributed based on receipts & subject to revision.
 - The General Fund Need is Total Expenditures less: projected Federal Revenues; Federal Waiver Denial; Operating Transfers In; & Other Revenues.

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

FY 14 Est Model with Centralized Care and Medicaid Expansion with Actual Data Thru March 2014 (\$000)

No.	Description	Federal Medicaid Expenditure Type and Federal Financial Participation Rates													
		FY 14 Projection C	Health Homes, HIT, IHS, Refugees & Medicaid Expansion (100% FFP) ¹					Breast & Cervical Cancer Program (EFMAP) ³			Utilization Review (75% FFP) ⁷	Non-Federal Financial Participation Expenses (0% FFP) ⁸		Federal Share (300%) L	% of Composite Federal Share M
			D	E	F	G	H	I	J	K					
1	Inpatient Hospital	85,252	4,627	-	41	419	-	669	-	-	79,296	-	-	60,358	70.97%
2	DSH	31,393	-	-	-	-	-	-	-	-	31,393	-	-	21,724	69.20%
3	GME	7,315	-	-	-	-	-	-	-	-	7,315	-	-	5,062	69.20%
4	IME	33,666	-	-	-	-	-	-	-	-	33,666	-	-	23,297	69.20%
5	SCPH - UPL	34,445	-	-	-	-	-	-	-	-	34,445	-	-	23,836	69.20%
6	UCC Pool	68,889	-	-	-	-	-	-	-	-	68,889	-	-	47,671	69.20%
7	Physician Services	46,716	1,590	-	-	1,454	-	600	-	-	47,673	-	399	32,713	70.07%
8	Prescribed Drugs	10,510	395	-	-	391	-	300	-	-	9,424	-	-	7,452	70.90%
9	Dental Services	12,933	290	-	-	45	-	757	-	-	11,840	-	-	9,107	70.42%
10	Transportation	7,744	721	-	-	90	-	148	-	-	6,784	-	-	5,600	72.31%
11	Lab and X-Ray	2,921	120	-	-	137	-	17	-	-	2,648	-	-	2,071	70.91%
12	EPSDT	1,915	4	-	-	0	-	85	-	-	1,825	-	-	1,333	69.63%
13	IHS Hospital	84,855	84,855	-	-	-	-	-	-	-	-	-	-	84,855	100.00%
14	Nursing Facility	6,093	2	-	-	3	-	-	-	-	6,088	-	-	4,216	69.19%
15	ICF MR	24,933	-	-	-	-	-	-	-	-	24,933	-	-	17,241	69.15%
16	Clinic Services	14,917	20	-	-	1	-	878	-	-	13,925	-	93	10,344	69.34%
17	Federal Qualified Health Centers	19,818	316	-	-	58	-	111	-	-	13,333	-	-	9,671	69.38%
18	Other Practitioners	30,793	80	-	-	20	-	887	-	-	29,803	-	-	21,404	69.51%
19	Outpatient Hospital	34,673	1,646	-	-	2,531	-	673	-	-	29,820	-	4	24,778	71.46%
20	Family Planning	7,243	2,768	4,377	-	-	-	12	-	-	-	-	86	6,718	92.75%
21	PACE	11,858	-	-	-	-	-	-	-	-	11,858	-	-	8,199	69.14%
22	Personal Care Options	266	-	-	-	3	-	-	-	-	263	-	-	184	69.22%
23	Others	5,125	110	-	-	35	-	29	-	-	4,806	145	-	3,557	69.40%
24	BH CFFS	9,281	2,731	-	-	22	-	178	-	-	5,159	1,210	-	7,056	76.03%
25	BH	19,721	3,332	0	-	2	-	397	-	-	9,971	-	-	10,545	76.86%
26	Premium Assistance Program	7	-	-	-	-	-	-	-	-	-	-	7	0.00%	
27	Subtotal	601,041	103,608	4,418	-	5,211	5,742	-	-	480,157	1,355	590	448,891	74.70%	
28	AIDS, DD and MF (DOH)	274,931	-	-	-	-	-	414	-	272,205	2,311	-	189,751	69.02%	
29	MI Via Waivers (DOH)	24,533	-	-	-	-	-	777	-	22,826	929	-	16,839	68.64%	
30	MI Via Waiver (DOE)	15,280	-	-	-	-	-	353	-	14,422	505	-	10,407	68.11%	
31	MI Via Waiver BI	5,860	-	-	-	-	-	168	-	5,512	180	-	4,019	68.59%	
32	Misc. Waivers	1,019	-	-	-	-	-	-	-	1,019	-	-	705	69.21%	
33	Subtotal	321,623	-	-	-	-	-	1,713	-	315,984	3,925	-	221,721	68.94%	
34	Physical Health MCO 3H	603,869	5,803	2,926	-	-	24,354	-	-	570,786	-	-	422,348	69.94%	
35	Behavioral Health MCO 3H	126,866	500	-	-	-	5,885	-	-	120,681	-	-	88,473	69.74%	
36	CAIIS 3H	453,404	5,311	-	-	350	-	-	-	447,542	-	-	315,833	69.86%	
37	State Coverage Insurance 3H	102,833	1,986	-	-	-	18,662	-	-	82,181	-	3	72,611	70.61%	
38	Subtotal	1,286,972	13,600	2,926	-	350	48,702	-	-	1,221,191	-	3	899,265	69.87%	
39	Centennial Care 2H - Physical Health	733,971	5,803	3,565	-	1,581	27,616	-	-	695,406	-	-	513,134	69.91%	
40	Centennial Care 2H - LTSS	477,719	5,511	-	-	350	-	-	-	471,858	-	-	332,037	69.50%	
41	Centennial Care 2H - Behavioral Health	144,295	500	-	-	94	6,347	-	-	137,354	-	-	100,601	69.72%	
42	Subtotal	1,355,984	11,814	3,565	-	2,025	33,963	-	-	1,304,617	-	-	945,772	69.75%	
43	Medicare Part A	700	-	-	-	-	-	-	-	700	-	-	484	69.17%	
44	Medicare Part B	92,378	4,214	-	-	-	-	-	-	78,330	-	9,834	58,393	63.21%	
45	Medicare Part D	25,628	-	-	-	-	-	-	-	-	-	25,628	-	0.00%	
46	Subtotal	118,705	4,214	-	-	-	-	-	-	79,030	-	33,681	58,877	49.60%	
47	Utilization	7,000	-	-	-	-	-	-	-	7,000	-	-	5,250	75.00%	
48	HIT Incentive Payment	11,857	11,857	-	-	-	-	-	-	-	-	-	11,857	100.00%	
49	Contracts	19,245	-	-	-	-	-	-	-	-	1,245	18,000	622	3.23%	
50	Subtotal	38,102	11,857	-	-	-	-	-	-	7,000	1,245	18,000	17,730	46.53%	
51	Rate Increase for Primary Care Services	14,363	19,272	-	-	-	-	-	-	1,091	-	-	14,027	97.66%	
52	Health Home	-	-	-	-	-	-	-	-	-	-	-	-	-	-
53	Insurer's Fee	24,425	-	-	-	-	-	612	-	23,814	-	-	16,959	69.43%	
54	Woodwork (Children)	-	-	-	-	-	-	-	-	-	-	-	-	-	-
55	MAGI Impact (Children)	-	-	-	-	-	-	-	-	-	-	-	-	-	-
56	Woodwork (Aged)	-	-	-	-	-	-	-	-	-	-	-	-	-	-
57	Subtotal	38,789	19,272	-	-	-	-	612	-	24,905	-	-	30,986	79.88%	
58	SCI Adults Up to 138% FPL - Physical Health	-	-	-	-	-	-	-	-	-	-	-	-	-	-
59	Newly Eligibles - Physical Health	383,154	383,154	-	-	-	-	-	-	-	-	-	383,154	100.00%	
60	Newly Eligibles/SCI - Behavioral Health	31,186	31,186	-	-	-	-	-	-	-	-	-	31,186	100.00%	
61	Subtotal	414,340	414,340	-	-	-	-	-	-	-	-	-	414,340	100.00%	
62	Grand Total	4,175,595	572,906	10,908	-	7,587	89,018	8,713	-	3,425,883	6,325	54,055	3,037,681	72.75%	

	HSD Budget	Billed Amount	Collection YTD	HSD Projection
63				
64				
65				
66				
67	100,412	57,172	56,406	100,412
68				(6,931)
69	5,500	4,452	3,870	7,500
70	500	482	482	482
71	1	-	-	1
72				
73	26,426	20,009	18,739	26,426
74	9,220	-	3,842	5,016
75				
76	142,059	82,115	83,339	132,905
77				
78	6,403	-	9,018	9,018
79	4,091	1,673	1,131	3,452
80	2,811	-	992	3,380
81	97,276	-	22,675	48,717
82				
83	1,251	-	28,685	16,323
84	872	-	244	2,372
85				
86	486	-	416	486
87	215	-	111	215
88	3,388	-	824	3,388
89	9	-	7	9
90				
91				
92	116,802	1,673	65,103	130,168
93				
94				874,840
95				
96				917,888
97				
98				43,048

PROJECTED REVENUES	
Federal Revenues	3,037,681
Federal Disallowance ¹⁰	-
All State Revenues	1,137,913

- Notes:
- HIT, IHS, UPL, QI-1 and Refugees are eligible for 100% FFP.
 - Health Homes, sterilization and FPW costs are eligible for 90% FFP.
 - Breast and cervical cancer (BCC) program with enhanced FMAP.
 - CHIP is a Title XXI program with enhanced FMAP. SCI parents are reimbursed at REMAP for one quarter of SFY14 but shown in the EFMAP column.
 - Utilization review is federally matched at 75% admin. expenses.
 - Title XIX expenditures with regular FMAP. The FFY 2014 FMAP was published in the Federal Register on Nov 30, 2012.
 - Administration expenditures are eligible for 50% FFP.
 - Pregnancy termination, special needs and state only buy-in (Part B) expenditures are not eligible for federal financial participation.
 - DOH for Medicaid DD, AIDS, MF and MiVia waiver services; projected revenue is without the 3% for admin.
 - There is a potential risk of federal disallowance associated with the PCO audit.
 - The Tobacco Settlement Revenue, Base may be revised given final state-wide decisions on cuts.
 - SCPH revenue in FY14 includes \$1.2 million collected for FY13 SCPH payments.

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

DRAFT SCENARIO

FY14 Total Model with Centennial Care and Medicaid Expansion

Line No.	Description	FY 14 Title XIX Projection		A Price	S Impact	A Recipient	S Impact	A Utilization	S Impact	Lump Sum	Others	FY 15 Title XIX Projection	% Change from FY 14	FY 14 Title XIX Projection	FY 15 Title XIX Projection	Nov 2013 Projection	Change from Previous	Line No.	
		C	D																E
1	Inpatient Hospital	84,383	84,383	0.00%	-	-8.02%	(6,765)	0.00%	-	31,195	-	31,195	-0.03%	919	385	78,083	54,831	23,173	1
2	DOSH	31,393	(255)	-	-	-	-	-	-	7,442	-	7,442	1.74%	-	-	31,195	1,195	29,999	2
3	GAME	7,315	(255)	-	-	-	-	-	-	7,442	-	7,442	1.74%	-	-	7,442	7,442	-	3
4	4HME	33,666	(255)	-	-	-	-	-	-	32,081	-	32,081	-0.71%	-	-	32,081	32,081	-	4
5	Safeway Net Care	34,445	-	-	-	-	-	-	-	34,445	-	34,445	0.00%	-	-	34,445	34,445	-	5
6	6HCHI Pool	34,445	-	-	-	-	-	-	-	34,445	-	34,445	0.00%	-	-	34,445	34,445	-	6
7	Physician Services	46,116	35,163	0.00%	-	-13.14%	(4,621)	0.00%	-	5,477	-	36,019	-6.90%	649	495	36,513	14,112	6,188	7
8	HHS Hospital	84,855	84,855	0.00%	1,646	4.03%	(6,559)	0.00%	-	-	-	90,504	6.66%	-	-	90,504	30,370	6,188	8
9	9ICF MR	24,933	24,933	0.00%	-	-0.64%	(59)	0.00%	-	-	-	24,774	-0.64%	-	-	24,774	25,376	(60)	9
10	Clinic Services	14,039	14,039	0.00%	-	0.45%	63	0.00%	-	-	-	14,102	0.45%	388	973	13,790	13,790	1,408	10
11	Federal Qualified Health Centers	3,934	3,934	2.30%	90	-1.05%	(42)	0.00%	-	-	-	3,982	1.23%	102	108	4,089	2,862	1,227	11
12	Other Practitioners	29,904	29,904	0.00%	-	-21.93%	(6,559)	0.00%	-	-	-	23,345	-21.93%	637	708	20,442	20,442	3,611	12
13	Durantien Hospital	34,001	34,001	0.00%	-	-14.79%	(5,028)	0.00%	-	-	-	28,973	-14.79%	721	502	29,474	22,621	6,853	13
14	Others	75,723	65,062	1.30%	847	-19.06%	(12,564)	0.00%	-	-	-	55,546	-29.55%	1,472	1,049	54,395	51,075	3,320	14
15	BH	22,526	22,526	0.00%	3	21.85%	4,923	0.00%	-	-	-	27,452	21.85%	0	795	26,247	19,993	6,253	15
16	Subtotal	561,676	888,544	0.65%	2,588	16.77%	(26,749)	0.00%	-	112,307	-	465,969	-13.95%	4,918	5,014	497,704	472,935	24,769	16
17	DD and MF (DOH)	274,855	274,855	0.00%	-	-0.79%	23,366	0.00%	-	69	-	1,051	302,968	102.9%	-	-	297,241	5,727	17
18	Vir Wavers (DOH)	24,221	24,221	0.00%	-	-	40,094	0.00%	-	47	-	1,951	33,334	37.62%	-	-	24,558	8,776	18
19	Subtotal	299,076	299,076	0.00%	-	-	38,457	0.00%	-	116	-	2,642	336,302	12.45%	-	-	321,799	14,503	19
20	Centennial Care - Physical Health	1,294,500	1,171,723	1.09%	12,790	10.64%	125,959	3.34%	43,721	11,605	122,003	1,478,810	14.20%	51,971	67,881	1,546,690	1,448,992	97,698	20
21	Centennial Care - ICS	956,452	897,528	1.09%	9,822	4.94%	44,750	2.18%	20,776	11,023	44,540	1,028,478	7.53%	11,807	15,604	1,008,478	1,047,108	(18,630)	21
22	Centennial Care - Behavioral Health	261,176	260,176	0.00%	-	-	101,596	2.40%	6,884	1,000	975	293,556	12.41%	11,807	15,604	309,201	321,085	(11,884)	22
23	Subtotal	2,512,529	2,229,427	0.97%	22,612	8.38%	197,199	2.80%	71,381	23,628	167,518	2,800,864	11.48%	63,778	83,485	2,864,369	2,817,185	67,184	23
24	Medicare Part A	700	700	0.00%	-	0.00%	-	0.00%	-	-	-	700	0.00%	-	-	700	719	(19)	24
25	Medicare Part B	92,378	92,378	0.00%	-	7.45%	6,879	0.00%	-	-	-	99,257	7.45%	-	-	99,257	96,634	2,623	25
26	Medicare Part D	25,628	25,628	0.30%	78	-0.48%	(122)	0.00%	-	-	-	25,584	-0.17%	-	-	25,584	25,212	372	26
27	Subtotal	118,705	118,705	0.07%	78	5.69%	6,757	0.00%	-	9,000	-	125,541	5.76%	-	-	125,541	125,575	(34)	27
28	Utilization	7,000	-	-	-	-	-	-	-	9,000	-	28,574	28.57%	-	-	9,000	9,000	-	28
29	HT	9,533	-	-	-	-	-	-	-	2,000	-	79,024	-79.02%	-	-	2,000	2,000	-	29
30	Contracts	19,245	-	-	-	-	-	-	-	2,000	-	100,000	-100.00%	-	-	2,000	2,000	-	30
31	Subtotal	35,778	-	-	-	-	-	-	-	11,000	-	11,000	-0.25%	-	-	11,000	9,000	2,000	31
32	Rate Increase for Primary Care Services	13,816	-	10.79%	1,451	0.00%	-	0.00%	-	-	-	15,307	10.79%	-	-	15,307	15,307	-	32
33	Health Home	-	-	-	-	-	-	-	-	-	12,000	-	-	-	-	12,000	12,000	-	33
34	Insurer's Fee	24,425	-	-	-	-	-	-	-	-	-	27,307	-100.00%	-	-	27,307	27,307	-	34
35	Newly Eligibles - Physical Health	469,079	432,921	5.21%	22,556	118.41%	539,315	5.98%	59,463	61,297	-	1,035,570	120.77%	17,551	-	820,108	215,463	35	
36	Newly Eligibles - Behavioral Health	31,009	31,009	0.00%	-	139.10%	43,134	3.68%	2,728	-	-	76,871	147.90%	17,551	-	76,871	79,266	(2,395)	36
37	Subtotal	500,088	463,930	0	22,556	118.73%	582,448	5.82%	62,191	61,297	-	1,112,442	122.45%	17,551	-	896,974	214,868	37	
38	Grand Total	4,066,093	3,619,509	1.36%	49,325	21.75%	798,113	2.95%	133,572	147,051	243,457	4,900,164	20.51%	86,247	88,499	4,938,664	4,678,174	260,490	38

Notes:
 1. (Row 14) Others contains: Transportation, Lab/Rx, Prosthetics, BHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, PACE, POC.
 2. (Lines 20-22, Column L) Others under the managed care projection lines reflect the Hospital Base Rate payments administered through the MCCOs and additional Centennial Care program changes.
 3. (Line 29 - Column O) The Title XIX projection for FY14 includes the portion from the SCI program which ended on Dec. 31, 2013.
 4. (Line 34) Insurer's fee represents 1.5% impact of PPACA Health Insurance fee as estimated in the Milliman Client Report of January 2012 and is reflected in the Centennial Care lines for the Medicaid base population and in the Newly Eligibles lines for the Newly Eligible population.

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

FY 15 Trend Model with Centennial Care and Medicaid Expansion

No.	Description	Federal Medicaid Expenditure Type and Federal Financial Participation Rates											
		FY 15 Projection	Health Homes, HIT, IHS, Refugees & Medicaid Expansion (100% FFP) ¹	Health Homes, Sterilization & Family Planning Services (90% FFP) ²	Breast & Cervical Cancer Program (RFMAP) ³	Title XXI CHIP (RFMAP) ⁴	Utilization Review (75% FFP) ⁵	Title XIX Medicaid (FMAP) ⁶	Admin and Fees (50% FFP) ⁷	Non-Federal Financial Participation Expenses (0% FFP) ⁸	Federal Share (\$000s)	% of Composite Federal Share	
A	B	C	D	E	F	G	H	I	J	K	L	M	
1	Inpatient Hospital	78,003	12,022	36	122	385	-	-	65,439	-	57,960	74.30%	
2	DSH	31,195	-	-	-	-	-	-	31,195	-	21,728	69.65%	
3	GME	7,442	-	-	-	-	-	-	7,442	-	5,353	71.92%	
4	IME	32,081	-	-	-	-	-	-	32,081	-	22,308	69.54%	
5	Safety Net Care	34,445	-	-	-	-	-	-	34,445	-	23,953	69.54%	
6	HCI Pool	1,412	-	-	-	-	-	-	1,412	-	982	69.54%	
7	Physician Services	34,513	3,946	-	213	495	-	-	31,547	312	26,454	72.45%	
8	IHS Hospital	90,504	90,504	-	-	-	-	-	-	-	90,504	100.00%	
9	IC MR	24,774	-	-	-	-	-	-	24,774	-	17,233	69.56%	
10	Clinic Services	15,075	57	-	-	973	-	-	13,945	100	10,533	69.73%	
11	Federal Qualified Health Centers	4,089	816	-	-	108	-	-	3,166	-	3,103	75.87%	
12	Other Practitioners	24,053	198	-	0	708	-	-	23,146	-	16,861	70.10%	
13	Outpatient Hospital	29,474	4,183	-	311	502	-	-	24,479	-	21,850	74.13%	
14	Others	54,395	6,531	1,807	59	1,043	-	-	44,913	41	39,969	73.48%	
15	BH	28,247	7,132	-	4	795	-	-	20,317	-	21,888	77.49%	
16		491,704	123,390	1,842	710	5,008	-	-	358,301	-	380,478	77.42%	
17	DD and MF (DOH)	302,958	-	-	-	-	414	-	301,516	1,038	210,564	69.50%	
18	Mi Via Waivers (DOH)	33,334	-	-	-	-	782	-	31,614	938	23,052	69.16%	
19		336,302	-	-	-	-	1,196	-	333,129	1,976	233,616	69.47%	
20	Centennial Care - Physical Health	1,546,690	11,605	-	3,289	67,881	-	-	1,463,716	200	1,085,329	70.17%	
21	Centennial Care - LTSS	1,028,478	11,023	-	-	-	-	-	1,017,455	-	718,062	69.82%	
22	Centennial Care - Behavioral Health	309,201	1,000	-	-	15,604	-	-	292,596	-	216,751	70.10%	
23		2,884,369	23,628	-	3,289	83,485	-	-	2,779,767	200	2,020,142	70.04%	
24	Medicare Part A	700	-	-	-	-	-	-	700	-	484	69.17%	
25	Medicare Part B	59,257	4,595	-	-	-	-	-	84,351	10,311	63,143	63.62%	
26	Medicare Part D	25,584	-	-	-	-	-	-	-	25,584	0.00%		
27		125,541	4,595	-	-	-	-	-	85,051	35,895	69,627	50.68%	
28	Utilization	9,000	-	-	-	-	9,000	-	-	-	6,750	75.00%	
29	HIT	2,000	2,000	-	-	-	-	-	-	-	2,000	100.00%	
30	Contracts	-	-	-	-	-	-	-	-	-	-	-	
31		11,000	2,000	-	-	-	9,000	-	-	-	8,750	79.55%	
32	Rate Increase for Primary Care Services	15,307	6,571	-	-	-	-	-	8,735	-	12,645	82.61%	
33	Health Home	12,000	-	12,000	-	-	-	-	-	-	10,800	90.00%	
34	Insurer's Fee	-	-	-	-	-	-	-	-	-	-	-	
35		27,307	6,571	12,000	-	-	-	-	8,735	-	23,445	85.86%	
36	Newly Eligibles - Physical Health	1,035,570	1,035,570	-	-	-	-	-	-	-	1,035,570	100.00%	
37	Newly Eligibles - Behavioral Health	76,871	76,871	-	-	-	-	-	-	-	76,871	100.00%	
38		1,112,442	1,112,442	-	-	-	-	-	-	-	1,112,442	100.00%	
39	Grand Total	4,988,664	1,274,625	13,842	3,998	88,489	10,196	-	3,558,984	1,976	36,548	3,842,701	77.03%

	FY 15 Budget Request	HSD Projection
43 State Share Revenues:		
44 Department of Health (Line 17 & 18) ⁹	99,041	103,293
45 Department of Health for Early Intervention	8,392	8,142
46 Department of Health for FQHCs	482	482
47 Department of Health for EC	1	1
48 Children, Youth and Families	-	-
49 County Supported/Medicaid Fund	26,891	26,891
50 Tobacco Settlement Revenue, Base	9,220	9,220
51 Tobacco Settlement Revenue	-	-
52 Total Operating Transfers In	144,027	148,029
53		
54 School Based Health Services (Part of Line 10)	3,325	3,325
55 Physician UPL UNM	1,675	1,675
56 Safety Net Care ¹¹	47,819	397
57 County Supported Hospital Payments ¹¹	-	23,801
58 UNM IGT	16,323	14,058
59 Drug Rebates ¹¹	19,466	42,646
60 Fraud	872	872
61 Tort and Insurance Carrier Refund	-	-
62 Income Diversion Trust	486	486
63 Buy-In Recovery	215	215
64 Cost Settlement	500	500
65 Estate Recovery	9	9
66 HHS-RAC-TPL/Subrogation	-	2,000
67 Total Other Revenues	90,690	89,984
68		
69 General Fund Need	-	907,950
70		
71 SB 313/HB 2	-	891,003
72		
73 State Revenue Surplus / (Shortfall)		(16,948)

PROJECTED REVENUES	
Federal Revenues	3,842,701
Federal Disallowance ¹⁰	-
All State Revenues	1,145,963

- Notes:**
- HIT, IHS, UPL, QI-1 and Refugees are eligible for 100% FFP.
 - Health Homes, sterilization and FPW costs are eligible for 90% FFP.
 - Breast and cervical cancer (BCC) program with enhanced FMAP.
 - CHIP is a Title XXI program with enhanced FMAP.
 - Utilization review is federally matched at 75% admin. expenses.
 - Title XIX expenditures with regular FMAP. The FY 2015 FMAP was published in the Federal Register in November, 2013.
 - Administration expenditures are eligible for 50% FFP.
 - Pregnancy termination, special needs and state only buy-in (Part B) expenditures are not eligible for federal financial participation.
 - DOH for Medicaid DD, MF and MiVia waiver services, projected revenue is without the 3% for admin.
 - There is a placeholder for potential federal disallowances.
 - The sum of lines 56 and 57 is the 1/12th of the gross receipts tax contributed by the counties to support the Safety Net Care Pool. Line 56 shows the amount from the counties that is used to support the \$68.889 million in Uncompensated Care Payments. Line 57 shows the remaining amount coming from the counties that is used in combination with the state general fund for the Medicaid program to support the DRG base rate increases to qualified hospitals.
 - We have received collections from drug rebates at a faster rate than projected previously and we may update this projection to reflect this new information.

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

Estimates of Monthly Medical Assistance Eligibles

Month-Year	Number of Eligibles in Medicaid & SCHIP (1) Medicaid Eligibility		Number of Eligibles in SLIMBs & QITs (SQI)		Number of Enrollees in State Coverage Insurance and Adult Expansion (SCI)/Adults		Number of Enrollees in PAK and PAM		Totals (1) Actuals = MER + SQI + SCI + Other		All Eligible Children (1) Medicaid Eligibility			
	Report #	Estimates % Change	(1) Actuals	(2) Estimates	(1) Actuals	(2) Estimates	(1) Actuals	(2) Estimates	(1) Actuals	(2) Estimates	Report #	Estimates % Change		
FY 2013	Jul-12	521,433	-0.18%	11,229	11,229	38,865	38,865	125	125	570,691	570,691	337,703	336,985	-0.21%
	Aug-12	524,035	0.77%	11,277	11,277	38,964	38,964	118	118	574,394	574,394	339,102	338,820	0.54%
	Sep-12	524,277	0.11%	11,294	11,294	38,780	38,780	114	114	575,238	575,238	338,582	339,028	0.06%
	Oct-12	526,097	0.41%	11,302	11,302	38,709	38,709	109	109	576,217	577,323	339,082	339,409	0.11%
	Nov-12	526,414	0.01%	11,317	11,317	38,657	38,657	108	108	576,496	577,337	338,895	339,121	-0.06%
	Dec-12	525,751	0.18%	11,317	11,317	38,482	38,482	106	106	575,656	578,121	337,835	339,295	0.05%
	Jan-13	528,448	0.05%	11,320	11,320	38,211	38,211	102	102	578,081	578,118	338,932	338,686	-0.18%
	Feb-13	527,270	0.14%	11,359	11,359	37,941	37,941	102	102	576,672	578,081	337,773	338,081	-0.18%
	Mar-13	529,366	0.03%	11,405	11,405	37,736	37,736	100	100	576,460	578,607	337,087	338,192	0.03%
	Apr-13	529,929	-0.04%	11,413	11,413	37,509	37,509	99	99	576,950	578,183	336,922	337,107	-0.32%
	May-13	530,108	0.18%	11,416	11,416	37,308	37,308	96	96	576,301	578,928	336,071	337,020	-0.03%
	Jun-13	527,073	-0.23%	11,385	11,385	37,059	37,059	90	90	575,607	577,420	335,170	335,513	-0.45%
FY 2014	Jul-13	530,044	0.22%	11,883	11,883	36,839	36,839	89	89	577,328	578,655	335,411	335,544	0.01%
	Aug-13	531,985	0.37%	11,065	11,065	36,540	36,540	88	88	579,524	579,678	335,629	335,926	0.11%
	Sep-13	532,123	0.03%	11,098	11,098	36,309	36,309	84	84	575,514	579,614	333,533	335,494	-0.13%
	Oct-13	535,956	0.71%	11,012	11,012	36,031	36,031	81	81	583,080	584,547	334,750	333,312	-0.65%
	Nov-13	544,288	1.28%	11,025	11,025	35,726	35,726	80	80	591,119	591,119	335,304	335,304	0.00%
	Dec-13	550,619	1.16%	11,098	11,098	35,328	35,328	77	77	597,122	597,122	331,783	331,783	-1.06%
	Jan-14	526,696	-4.34%	11,146	11,146	35,228	35,228	77	77	593,739	597,122	337,202	337,202	1.64%
	Feb-14	523,054	-0.89%	11,194	11,194	35,146	35,146	77	77	593,739	597,122	337,202	337,202	1.64%
	Mar-14	527,591	0.87%	11,242	11,242	35,064	35,064	77	77	593,739	597,122	337,202	337,202	1.64%
	Apr-14	527,435	-0.03%	11,290	11,290	34,982	34,982	77	77	593,739	597,122	337,202	337,202	1.64%
	May-14	528,699	0.28%	11,338	11,338	34,900	34,900	77	77	593,739	597,122	337,202	337,202	1.64%
	Jun-14	530,969	0.39%	11,386	11,386	34,818	34,818	77	77	593,739	597,122	337,202	337,202	1.64%
FY 2016	Jul-14	534,578	0.68%	11,434	11,434	34,736	34,736	77	77	593,739	597,122	337,202	337,202	1.64%
	Aug-14	538,110	0.66%	11,482	11,482	34,654	34,654	77	77	593,739	597,122	337,202	337,202	1.64%
	Sep-14	541,281	0.59%	11,530	11,530	34,572	34,572	77	77	593,739	597,122	337,202	337,202	1.64%
	Oct-14	540,827	-0.08%	11,578	11,578	34,490	34,490	77	77	593,739	597,122	337,202	337,202	1.64%
	Nov-14	538,941	-0.35%	11,626	11,626	34,408	34,408	77	77	593,739	597,122	337,202	337,202	1.64%
	Dec-14	539,037	0.13%	11,674	11,674	34,326	34,326	77	77	593,739	597,122	337,202	337,202	1.64%
	Jan-15	514,272	-4.70%	11,722	11,722	34,244	34,244	77	77	593,739	597,122	337,202	337,202	1.64%
	Feb-15	515,605	0.26%	11,770	11,770	34,162	34,162	77	77	593,739	597,122	337,202	337,202	1.64%
	Mar-15	518,710	0.60%	11,818	11,818	34,080	34,080	77	77	593,739	597,122	337,202	337,202	1.64%
	Apr-15	521,238	0.49%	11,866	11,866	34,000	34,000	77	77	593,739	597,122	337,202	337,202	1.64%
	May-15	523,364	0.41%	11,914	11,914	33,920	33,920	77	77	593,739	597,122	337,202	337,202	1.64%
	Jun-15	526,463	0.59%	11,962	11,962	33,840	33,840	77	77	593,739	597,122	337,202	337,202	1.64%

Column A B C D E F G H I J K L M N O P

Notes:

1. Data for Title XIX Medicaid and Title XXI SCHIP from July 2012 to October 2013 are based on the Monthly Eligibility Report (MER) (1) adjusted for retroactive eligibility, and (2) the estimates for monthly eligibility are based on regressive equations controlling for policy effects.
2. The data for State Coverage Insurance (SCI) from July 2012 to October 2013 are the numbers of MCO enrollment by month. For FY 13 and FY 14, the enrollment reflects program change in late FY 12. Of the total SCI population, about 67 percent are Childless Adults and 33 percent are Parents.
3. The children figures are a subset of the total, and include woodwork additions. Children are defined as any clients less than age 21 with no regards to eligibility criteria.
4. Premium Assistance for Kids (PAK) and Premium Assistance for Maternity (PAM). For more information on these programs, visit <http://insurenwmxco.state.nm.us/>. Outside entities are assisting MAD with enrollment into these programs.
5. These are the numbers in the Monthly Eligibility Report as posted on the MAD website available as of April 22, 2013. The MER includes all clients enrolled in Medical Assistance, including retroactive and late reported eligibility. The data in the MER column from July 2011 to August 2013 are subject to revision. The usual practice is to adjust the numbers up to 30 months from its original release. All figures are updated historically to include retroactive eligibility, retroactive closures, and other late reporting eligibility changes. When the data is no longer subject to revision, the projected number on the estimates column is replaced by the actual number. Individuals are eligible for Medical Assistance if they meet the specific criteria for any of the eligibility categories. The MER does not count the number of clients qualified as SLIMBs or Q1s.
6. Specified Low-income Medicare Beneficiaries (SLIMBs) and Qualified Individuals (Q1s).
7. Medicaid expansion began January 1, 2014. Medicaid expansion enrollment period began October 1, 2013. The woodwork populations are included with Medicaid Eligibles.

Sources: Monthly Eligibility Report, January 2013; *Insure New Mexico*, Monthly Statistical Report for COE 045, June 2013

Report Release Date:
Report Revised Date:

Thursday, May 08, 2014
Thursday, May 08, 2014

**Medicaid Enrollment - By County
Reporting Template**

	Children	Parents/ Caretakers	Pregnant Women	Other Adult Group	SSI-Related	Institutional Care	HCBW	WDI	Family Planning	QMB	Other
Bernalillo											
Catron											
Chaves											
Cibola											
Colfax											
Curry											
DeBaca											
Dona Ana											
Eddy											
Grant											
Guadalupe											
Harding											
Lea											
Lincoln											
Los Alamos											
Luna											
McKinley											
Mora											
Otero											
Quay											
Rio Arriba											
Roosevelt											
San Juan											
San Miguel											
Sandoval											
Santa Fe											
Sierra											
Socorro											
Taos											
Torrance											
Union											
Valencia											
TOTALS											

**Medicaid Enrollment - by MCO
Reporting Template**

	FULL BENEFIT							TOTALS
	Blue Cross Blue Shield	Parents/ Caretakers	Presbyterian	United	FFS	FFS-Partial Benefit		
Other Adult Group/Newly Eligibles								
Parents and Caretakers								
Pregnant Women, incl. pregnancy-related only								
All Children, including CHIP and Foster Care								
SSI-related Categories								
Breast and Cervical Cancer								
Working disabled								
Institutional Care								
Waiver Categories								
Other Categories (Refugees, Transitional)								
Family Planning								
Qualified Medicare Beneficiaries (QMB)								
TOTALS								