

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

FY 14 Year Model with Centennial Care and Medicaid Expansion with Actual Data thru June 2015 (5/20/15)

No.	Description	FY 13 TUDX XIX Projection	FY 14 % Completion	This XIX Actual YTD	Actual Paid Lump Sum / Other YTD	Projected Lump Sum	Others	FY 14 This XIX Projection	% Change from FY Projection	FY 14 Actual YTD	CHDP/SCI Projection	FY 14 TOTAL Medicaid Projection	March 2015 Projection	Change from Previous	No.
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
1	Inpatient Hospital	96,734	98.8%	91,827	27,427	31,391	-	92,860	-3.9%	1,235	1,235	94,255	95,438	(1,183)	1
2	DSH	30,957	87.4%	27,427	7,187	7,187	-	31,395	-4.1%	-	-	31,395	31,393	2	
3	GAME	7,187	100.0%	7,187	7,187	7,187	-	7,187	0.0%	-	-	7,187	7,187	3	
4	IME	32,364	100.0%	34,444	34,444	34,444	-	34,444	6.4%	-	-	34,444	34,444	4	
5	SCPH-JPL	88,395	100.0%	31,026	31,026	31,026	-	31,026	-6.5%	-	-	31,026	31,026	5	
6	UCC Pool	54,301	98.6%	39,404	68,889	68,889	-	39,561	-27.1%	600	600	68,889	68,889	6	
7	Physician Services	11,092	98.9%	9,494	5,780	5,780	-	9,509	-14.2%	262	262	9,771	9,745	26	
8	Prescribed Drugs	13,217	99.9%	12,166	-	-	-	12,164	-7.8%	744	744	12,928	12,929	1	
9	Dental Services	7,650	99.7%	7,332	-	-	-	7,391	-5.2%	141	141	7,531	7,405	1,126	
10	Transportation	4,004	99.8%	2,691	-	-	-	2,723	-31.9%	15	15	2,738	2,763	25	
11	Lab and X-Ray	2,332	99.9%	1,798	-	-	-	1,798	-21.8%	82	82	1,882	1,882	1	
12	EPST	84,080	99.3%	87,169	-	-	-	84,003	4.6%	-	-	84,003	88,049	(4,046)	
13	IHS Hospital	3,471	97.7%	3,156	-	-	-	3,408	81.7%	-	-	3,408	3,389	19	
14	Nursing Facility	25,007	99.9%	25,601	-	-	-	25,615	2.4%	-	-	25,615	25,665	(50)	
15	ICF-IID	12,007	99.9%	12,522	-	-	-	12,590	12.6%	855	855	14,385	14,385	16	
16	Clinic Services	30,703	96.9%	16,155	-	-	-	16,682	-45.6%	87	87	16,769	18,491	(1,722)	
17	Federal Qualified Health Centers	36,893	99.7%	31,286	-	-	-	31,380	-14.9%	930	930	32,314	32,330	(16)	
18	Other Practitioners	38,203	99.5%	35,834	-	-	-	34,001	-10.7%	632	632	34,718	34,847	(129)	
19	Outpatient Hospital	8,765	99.2%	7,374	-	-	-	7,431	-15.4%	12	12	7,443	7,491	(48)	
20	Family Planning	11,859	100.0%	11,857	-	-	-	11,857	-0.0%	-	-	11,857	11,857	21	
21	PACE	449	100.0%	264	-	-	-	264	-58.8%	30	30	264	264	22	
22	Personal Care Options	6,251	95.3%	4,853	956	1,000	149	5,099	-18.5%	191	191	5,123	5,158	(35)	
23	Others	25,476	100.0%	9,729	-	-	-	9,731	-61.8%	236	236	9,923	9,896	27	
24	84 CFS 1H	-	-	13,651	-	-	-	13,751	-	-	-	13,988	14,187	(199)	
25	84 CFS 2H	-	-	-	-	-	-	-	-	-	-	-	-	26	
26	Premium Assistance Program	18	100.0%	7	-	-	-	7	-61.7%	-	-	7	7	27	
27	Subtotal	631,827	98.3%	595,253	188,513	193,023	149	602,678	-4.5%	6,095	6,127	608,605	611,932	(3,327)	
28	AIDS, DD and MF (DDH)	275,018	100.0%	272,632	1,702	143	1,558	272,632	-0.8%	-	-	272,632	272,512	120	
29	MH Waiver (DDH)	14,594	100.0%	26,422	1,564	61	1,503	26,422	76.2%	-	-	26,422	26,194	228	
30	MH Waiver (DSE)	22,594	100.0%	14,051	943	85	858	14,051	-37.9%	-	-	14,051	14,031	20	
31	MH Waiver B1	11,192	100.0%	5,371	364	17	348	5,371	-52.0%	-	-	5,371	5,371	31	
32	Misc. Waivers	232,798	100.0%	319,379	4,574	306	4,897	319,379	-1.9%	-	-	319,379	319,090	289	
33	Subtotal	1,106,403	100.0%	575,480	52,388	3,644	48,971	575,707	-48.0%	24,221	24,221	599,928	599,943	(15)	
34	Physical Health MCO 1H	246,479	99.1%	120,402	-	1,151	-	121,563	-51.0%	5,654	5,654	127,217	127,233	(16)	
35	Behavioral Health MCO 1H	924,135	99.0%	447,567	14,856	5,982	13,328	452,042	-51.0%	18,443	18,443	452,042	452,043	(1)	
36	CALTS 1H	143,462	100.0%	9,556	9,556	4,060	5,896	85,946	-40.0%	-	-	104,389	105,251	(862)	
37	State Coverage Insurance 1H	2,424,459	99.5%	1,229,415	77,139	14,837	68,195	1,293,258	-48.0%	26,783	26,783	1,284,470	1,284,470	(884)	
38	Subtotal	-	99.1%	716,342	-	5,983	-	723,209	-	65	65	749,997	750,356	(359)	
39	Centennial Care 2H-Physical Health	-	99.1%	465,951	-	4,219	-	470,097	-	6,166	6,166	470,163	470,309	(146)	
40	Centennial Care 2H-Substance Abuse	-	95.9%	349,060	-	788	-	350,753	-	33,034	33,034	350,787	350,787	3	
41	Centennial Care 2H-Behavioral Health	-	99.1%	1,391,353	-	10,800	-	1,344,060	-	-	-	1,377,094	1,377,525	(431)	
42	Subtotal	-	100.0%	690	-	-	-	690	-	-	-	690	690	43	
43	Medicare Part A	87,368	100.0%	91,028	-	-	-	91,028	-	-	-	91,028	91,028	44	
44	Medicare Part B	25,116	100.0%	26,159	-	-	-	26,159	-	-	-	26,159	26,159	45	
45	Medicare Part D	113,282	100.0%	117,877	-	-	-	117,877	-	-	-	117,877	117,877	46	
46	Subtotal	8,143	100.0%	6,599	-	-	-	6,599	-	-	-	6,599	6,599	47	
47	Utilization	31,388	100.0%	12,976	12,976	12,976	-	12,976	-18.9%	-	-	12,976	12,751	225	
48	HIT Incentive Payment	1,755	100.0%	18,016	-	-	-	18,016	-	-	-	18,016	18,016	49	
49	Contracts	41,286	100.0%	37,591	12,976	12,976	-	37,591	-8.9%	-	-	37,591	37,591	50	
50	Subtotal	-	100.0%	19,231	19,231	19,231	-	19,231	-	-	-	19,231	19,231	51	
51	Rate Increase for Primary Care Services	-	100.0%	30,536	30,536	30,536	-	30,536	-	-	-	30,536	30,536	52	
52	Health Insurance Providers Fee	-	na	-	-	-	-	-	-	-	-	-	-	53	
53	Woodwork (Children)	-	na	-	-	-	-	-	-	-	-	-	-	54	
54	MAGI Impact (Children)	-	na	-	-	-	-	-	-	-	-	-	-	55	
55	Woodwork (Aged)	-	na	-	-	-	-	-	-	-	-	-	-	56	
56	Health Home	-	na	-	-	-	-	-	-	-	-	-	-	57	
57	Subtotal	-	100.0%	49,767	49,767	49,767	-	49,767	-	-	-	49,767	48,701	1,066	
58	SCJ Adults Up to 138% FPL - Physical Health	-	na	-	-	2,067	-	382,752	-	-	-	382,752	382,198	554	
59	Medicaid Expansion - Physical Health	-	100.0%	30,070	-	132	-	31,016	-	-	-	31,016	30,967	49	
60	Medicaid Expansion - Behavioral Health	-	97.0%	412,652	-	2,200	-	413,768	-	-	-	413,768	413,165	603	
61	Subtotal	-	99.7%	-	-	-	-	-	-	-	-	-	-	62	
62	Current Year Charged to Future Year	-	na	-	-	-	-	(7,274)	-	-	-	(7,274)	(7,547)	293	
63	Grand Total	3,134,472	99.5%	4,093,287	333,029	254,232	65,337	4,113,104	16.3%	87,427	87,480	4,200,584	4,202,499	(1,915)	
64														65	
65														66	

Note: 1. (Column H) Others under the managed care projection lines (lines 34-57, 39-41) reflect the SCJH payments and new Centennial Care programs administered through the MCOs.  
2. (Lines 34-36, 39-41, 59-60, Columns E and J) Actual YTD payments are from the MCO database, instead of Share Accounting Detailed File (SADF), because SADF doesn't show payments by programs.

FY 14 Operating Budget  
Projected Surplus/(Shortfall)

4,300,632  
100,048

		Federal Medicaid Expenditure Type and Federal Financial Participation Rates										
No.	Description	FY 14 Projection	HIT, IHS, Refugees & Medicaid Expansion (100% FFP)	Health Homes, Sterilization & Family Planning Services (90% FFP)	Breast & Cervical Cancer Program (EFMAP)	Title XXI CHIP (RFMAP)	Utilization Review (75% FFP)	Title XIX Medicaid (FMAP)	Admin and Fees (50% FFP)	Non-Federal Financial Participation Expenses (0% FFP)	Federal Share	% of Composite Federal Share
A	B	C	D	E	F	G	H	I	J	K	L	M
1	Inpatient Hospital	94,255	8,183	42	399	1,295	-	84,336	-	-	67,931	72.07%
2	DSH	31,393	-	-	-	-	-	31,393	-	-	21,742	69.26%
3	GME	7,187	-	-	-	-	-	7,187	-	-	4,973	69.20%
4	IME	34,444	-	-	-	-	-	34,444	-	-	23,876	69.32%
5	SCPH - UPL	31,026	7,634	-	-	-	-	23,392	-	-	23,821	76.78%
6	UCC Pool	68,889	-	-	-	-	-	68,889	-	-	47,671	69.20%
7	Physician Services	40,184	2,250	-	1,996	603	-	35,615	-	319	28,460	70.82%
8	Prescribed Drugs	9,771	526	-	401	263	-	8,582	-	-	6,982	71.45%
9	Dental Services	12,928	325	-	47	745	-	11,812	-	-	9,116	70.51%
10	Transportation	7,391	961	-	84	141	-	6,205	-	-	5,430	73.47%
11	Lab and X-Ray	2,738	96	-	131	15	-	2,496	-	-	1,937	70.75%
12	EPST	1,881	5	-	0	82	-	1,794	-	-	1,310	69.54%
13	IHS Hospital	88,003	88,003	-	-	-	-	-	-	-	88,003	100.00%
14	Nursing Facility	6,308	1	-	3	-	-	6,305	-	-	4,367	69.23%
15	ICF-HD	25,615	-	-	-	-	-	25,615	-	-	17,720	69.18%
16	Clinic Services	14,385	12	-	1	855	-	13,455	-	62	9,993	69.47%
17	Federal Qualified Health Centers	16,769	194	-	55	87	-	16,433	-	-	11,686	69.69%
18	Other Practitioners	32,314	130	-	20	933	-	31,230	-	-	22,482	69.57%
19	Outpatient Hospital	34,718	2,467	-	2,487	637	-	29,120	-	7	25,062	72.19%
20	Family Planning	7,443	3,180	4,175	-	12	-	-	-	76	6,948	93.35%
21	PACE	11,857	-	-	-	-	-	11,857	-	-	8,201	69.17%
22	Personal Care Options	264	-	-	3	-	-	262	-	-	183	69.24%
23	Others	5,123	267	-	51	30	-	4,776	-	-	3,636	70.86%
24	BH CFFS 1H	9,923	3,146	0	22	192	-	5,391	1,172	-	7,629	76.88%
25	BH FFS	13,988	6,896	0	1	237	-	6,851	-	2	11,826	84.54%
26	Premium Assistance Program	7	-	-	-	-	-	-	-	-	7	0.00%
27	Subtotal	608,805	124,276	4,218	5,100	6,127	-	467,438	1,172	474	466,986	75.72%
28	AIDS, DD and MF (DOH)	272,632	-	-	-	-	412	270,558	1,662	-	188,310	69.07%
29	Mi Via Walvers (DOH)	26,422	-	-	-	-	678	24,770	974	-	18,133	68.63%
30	Mi Via Walver (D&E)	14,031	-	-	-	-	353	13,032	645	-	9,598	68.41%
31	Mi Via Walver BI	5,371	-	-	-	-	168	5,006	198	-	3,685	68.62%
32	Misc. Walvers	923	-	-	-	-	-	923	-	-	638	69.14%
33	Subtotal	319,378	-	-	-	-	1,611	314,288	9,480	-	226,265	69.20%
34	Physical Health MCO 1H	599,928	3,564	2,918	-	24,221	-	569,225	-	-	418,737	69.80%
35	Behavioral Health MCO 1H	127,217	1,151	-	-	5,654	-	120,412	-	-	88,888	69.78%
36	CoLTS 1H	452,042	5,982	-	300	-	-	445,760	-	-	314,402	69.55%
37	State Coverage Insurance 1H	104,389	4,060	-	-	18,662	-	81,664	-	3	74,294	71.17%
38	Subtotal	1,283,576	14,757	2,918	300	48,537	-	1,217,062	-	8	896,322	69.83%
39	Centennial Care 2H-Physical Health	749,997	5,803	-	1,637	26,788	-	715,770	-	-	523,625	69.82%
40	Centennial Care 2H-LTSS	470,163	4,219	-	373	-	-	465,571	-	-	326,391	69.42%
41	Centennial Care 2H-Behavioral Health	156,935	788	-	-	6,178	-	149,968	-	-	109,516	69.78%
42	Subtotal	1,377,095	10,810	-	2,010	32,967	-	1,331,308	-	-	959,532	69.68%
43	Medicare Part A	690	-	-	-	-	-	690	-	-	481	69.65%
44	Medicare Part B	91,028	4,128	-	-	-	-	77,214	-	9,686	57,907	63.62%
45	Medicare Part D	26,159	-	-	-	-	-	-	-	26,159	0.00%	
46	Subtotal	117,877	4,128	-	-	-	-	77,904	-	35,845	58,388	49.58%
47	Utilization	6,599	-	-	-	-	6,599	-	-	-	4,950	75.00%
48	HIT Incentive Payment	12,976	12,976	-	-	-	-	-	-	-	12,976	100.00%
49	Contracts	18,016	-	-	-	-	-	-	16	18,000	8	0.04%
50	Subtotal	37,591	12,976	-	-	-	6,599	-	16	18,000	17,983	47.71%
51	Rate Increase for Primary Care Services	19,231	18,217	-	-	8	-	1,006	-	0	18,220	98.38%
52	Health Insurance Providers Fee	30,536	-	-	-	1,050	-	29,486	-	-	21,228	69.52%
53	Woodwork (Children)	-	-	-	-	-	-	-	-	-	-	-
54	MAGI Impact (Children)	-	-	-	-	-	-	-	-	-	-	-
55	Woodwork (Aged)	-	-	-	-	-	-	-	-	-	-	-
56	Health Home	-	-	-	-	-	-	-	-	-	-	-
57	Subtotal	49,767	18,237	-	-	1,058	-	30,492	-	0	40,147	80.67%
58	SCI Adults Up to 138% FPL - Physical Health	-	-	-	-	-	-	-	-	-	-	-
59	Medicaid Expansion - Physical Health	382,752	382,752	-	-	-	-	-	-	-	382,752	100.00%
60	Medicaid Expansion - Behavioral Health	31,016	31,016	-	-	-	-	-	-	-	31,016	100.00%
61	Subtotal	413,768	413,768	-	-	-	-	-	-	-	413,768	100.00%
62	Current Year Charged to Future Year	(7,274)	-	-	-	-	-	(7,274)	-	-	(5,067)	69.55%
63	Grand Total	4,200,584	598,992	7,135	7,410	88,689	8,210	3,431,218	4,667	54,922	3,062,375	72.90%

  

HSD					Billed		Collection		HSD	
Budget					Amount		YTD		Projection	
69	State Share Revenues:									
70	Department of Health (Line 28 & 29)	100,412		92,873		92,873		100,412		
71	Department of Health Additional Need (Surplus)							(7,222)		
72	Department of Health for Early Intervention	5,500		6,663		6,663		6,663		
73	Department of Health for FQHCs	500		482		482		482		
74	Department of Health for EC	1		-		-		-		
75	Children, Youth and Families	-		-		-		-		
76	County Supported Medicaid Fund	26,426		25,709		25,709		25,709		
77	Tobacco Settlement Revenue, Base	9,220		9,220		9,220		9,220		
78	Tobacco Settlement Revenue	-		-		-		-		
79	Total Operating Transfers In	142,059		134,946		134,946		135,264		
80	UNM SCI IGT	6,403		9,018		9,018		9,018		
81	School Based Health Services (Part of Line 16)	4,091		4,467		2,759		4,468		
83	Physician UPL UNM	2,811		1,780		1,780		1,780		
84	Sole Community Provider Hospital Fund	97,276		32,948		25,921		25,921		
85	UNM SCPH IGT	-		4,664		4,664		11,841		
86	Drug Rebates	1,251		41,521		41,521		40,198		
87	Fraud	872		-		4,738		4,738		
88	Tort and Insurance Carrier Refund	-		-		-		-		
89	Income Diversion Trust	486		-		481		481		
90	Buy-in Recovery	215		-		133		133		
91	Cost Settlement	3,388		-		909		909		
92	Estate Recovery	9		-		8		8		
93	Misc. Revenue	-		561		561		561		
94	HMS-RAC-TPL/Subrogation	-		996		996		996		
95	Total Other Revenues	116,802		94,398		93,489		101,051		
96	General Fund Need	-		-		-		901,893		
97	FY 14 Op Bud 3	-		-		-		917,888		
100	Union Payback Liability	-		-		-		(4,151)		
101	Prior Year Liability	-		-		-		(3,001)		
102	Transfer to Admin	-		-		-		(1,067)		
103	Reversion	-		-		-		(4,890)		
104	School Based Allowance	-		-		-		(2,878)		
105	State Revenue Surplus / (Shortfall)	-		-		-		-		
106		-		-		-		-		
107	State Revenue Surplus / (Shortfall) Assoc. with Expenditures Charged to FY15	-		-		-		(2,208)		

  

PROJECTED REVENUES		
Federal Revenues		3,062,375
Federal Disallowance		-
All State Revenues		1,138,209
Potential Receivable Allowance		-
Total State Revenue Need		1,138,209

Notes:

- HIT, IHS, QI-1, Refugees, and Medicaid Expansion 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 EFMAP. 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 are matched with regular FMAP.
- The FFY 2014 FMAP was published in the Federal Register in November 2012.
- Administration expenditures are eligible for 50% FFP.
- Pregnancy termination, special needs and state only buy-in (Medicare Part B & D) expenditures are not eligible for federal financial participation.
- DOH for Medicaid DD, AIDS, MF and Mi Via waiver services; projected revenue is without the 3% for admin.
- The potential receivable allowance in FY14 has been researched by HSD and a contractor. The outcome of the research is that the HSD has reconciled the account receivable balances and no longer needs to reflect this allowance on the projection.

STATE OF NEW MEXICO  
HUMAN SERVICES DEPARTMENT  
Medical Assistance Division

FY 15 Lgr Model with Centennial Care and Medicaid Expansion with Actual Data Thru June 2015 (50003)

No. A	Description B	FY 14 Title XIX Projection C		FY 15 % Completion D		Title XIX Actual YTD Sum/ Others YTD E		Actual Paid Lump Sum/ Others YTD F		Projected Lump Sum G		FY 15 Title XIX Projection I		% Change from FY 14 J		CHIP Actual Paid YTD K		FY 15 TOTAL Medicaid Projection M		March 2015 Projection N		Change from Previous O		No. P
		Projection	Projection	Completion	Completion	Actual YTD	Others YTD	Actual Paid	Others YTD	Projected Lump Sum	Projected Lump Sum	Others	Projection	Projection	% Change	% Change	CHIP Actual Paid YTD	CHIP Actual Paid YTD	Medicaid Projection	Medicaid Projection	March 2015 Projection	March 2015 Projection	Change from Previous	
1	Inpatient Hospital	92,960	81.51%	66,759	-	-	-	17,302	31,649	-	-	81,905	-11.89%	374	459	82,364	88,362	31,649	31,195	88,362	88,362	5,998	1	
2	DSH	31,393	54.67%	17,302	-	-	-	5,390	7,187	-	-	31,649	0.82%	-	-	7,187	7,697	7,187	7,697	7,697	7,697	(510)	2	
3	GME	7,187	75.00%	5,390	-	-	-	29,634	59,268	-	-	7,187	0.00%	-	-	59,268	59,268	59,268	59,268	59,268	59,268	-	3	
4	IME	34,444	50.00%	29,634	-	-	-	17,222	34,445	-	-	34,445	-65.53%	-	-	34,445	34,445	34,445	34,445	34,445	34,445	-	4	
5	Safety Net Care	99,916	50.00%	17,222	-	-	-	4,536	1,412	-	-	1,412	-	-	-	1,412	1,412	1,412	1,412	1,412	1,412	-	5	
6	HQII Pool	-	0.00%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6
7	Physician Services	39,581	84.21%	33,751	-	-	-	98,818	98,818	-	-	40,105	1.32%	544	619	40,724	38,043	40,724	38,043	38,043	38,043	2,681	7	
8	IHS Hospital	88,003	90.03%	98,818	-	-	-	22,982	-	-	-	109,755	24.72%	-	-	109,755	110,745	109,755	110,745	110,745	110,745	(990)	8	
9	ICF-IID	25,615	87.29%	22,982	-	-	-	-	-	-	-	26,328	2.78%	-	-	26,328	26,166	26,328	26,166	26,166	26,166	162	9	
10	Clinic Services	13,530	90.86%	14,690	-	-	-	-	-	-	-	16,167	19.49%	1,526	1,679	17,846	16,347	17,846	16,347	16,347	16,347	1,499	10	
11	Federal Qualified Health Centers	16,682	85.35%	3,513	-	-	-	-	-	-	-	4,116	-75.33%	96	112	4,228	4,220	4,228	4,220	4,220	4,220	8	11	
12	Other Practitioners	31,380	90.62%	24,993	-	-	-	-	-	-	-	27,579	-12.11%	995	1,098	28,677	28,122	28,677	28,122	28,122	28,122	555	12	
13	Outpatient Hospital	34,081	90.41%	35,136	-	-	-	-	-	-	-	38,865	14.04%	681	753	39,617	37,907	39,617	37,907	37,907	37,907	1,710	13	
14	PACE	11,857	99.93%	11,830	-	-	-	-	-	-	-	11,838	-0.15%	-	-	11,838	11,837	11,838	11,837	11,837	11,837	1	14	
15	Others	52,561	91.36%	41,381	-	-	-	-	-	-	-	45,357	-13.70%	1,375	1,440	46,798	46,110	46,798	46,110	46,110	46,110	688	15	
16	BH FFS	23,489	90.03%	28,978	-	-	-	-	-	-	-	32,191	37.05%	509	562	32,753	32,974	32,753	32,974	32,974	32,974	(221)	16	
17	Subtotal	602,678	79.75%	452,379	74,084	140,866	-	568,169	-5.73%	6,100	6,722	574,851	574,850	41	17	574,850	574,850	574,850	574,850	574,850	574,850	(600)	17	
18	DD and MF (DOH)	272,514	93.14%	259,338	535	162	476	278,445	2.18%	19	19	278,445	278,445	19	18	278,445	279,045	278,445	279,045	279,045	279,045	(600)	18	
19	MI Via Weavers (DOH)	26,103	87.63%	39,718	29	2,165	45,323	73.63%	19	19	45,323	45,323	19	19	45,323	46,899	45,323	46,899	46,899	46,899	46,899	(1,576)	19	
20	Subtotal	298,617	92.37%	299,056	564	191	2,642	323,767	8.42%	78,716	82,213	323,767	323,767	20	323,767	325,944	323,767	325,944	325,944	325,944	325,944	(2,177)	20	
21	Centennial Care-Physical Health	1,298,916	95.48%	1,432,489	-	-	-	22,655	-	-	-	1,500,467	15.52%	78,716	82,213	1,582,681	1,589,899	1,582,681	1,589,899	1,589,899	1,589,899	(7,218)	21	
22	Centennial Care-LTSS	942,901	98.31%	918,507	-	-	-	11,807	-	-	-	933,917	-0.95%	18,618	19,266	934,283	929,872	934,283	929,872	929,872	929,872	4,411	22	
23	Centennial Care-Behavioral Health	272,316	97.26%	298,148	-	-	-	2,681	-	-	-	306,415	12.52%	18,618	19,266	325,682	327,250	325,682	327,250	327,250	327,250	(1,568)	23	
24	Subtotal	2,514,134	96.62%	2,649,144	-	-	-	37,143	-	-	-	2,740,900	9.02%	97,334	101,846	2,842,646	2,857,020	2,842,646	2,857,020	2,857,020	2,857,020	(14,374)	24	
25	Medicare Part A	690	100.00%	1,480	-	-	-	-	-	-	-	1,480	114.32%	-	-	1,480	1,428	1,480	1,428	1,428	1,428	52	25	
26	Medicare Part B	91,028	100.00%	102,528	-	-	-	-	-	-	-	102,528	12.63%	-	-	102,528	102,607	102,528	102,607	102,607	102,607	(79)	26	
27	Medicare Part D	26,159	100.00%	30,689	-	-	-	-	-	-	-	30,689	17.32%	-	-	30,689	31,005	30,689	31,005	31,005	31,005	(316)	27	
28	Subtotal	117,877	100.00%	134,697	-	-	-	-	-	-	-	134,697	144.27%	-	-	134,697	135,040	134,697	135,040	135,040	135,040	(343)	28	
29	Utilization	6,599	100.00%	2,588	-	-	-	-	-	-	-	2,588	-60.78%	-	-	2,588	5,000	2,588	5,000	5,000	5,000	(2,412)	29	
30	HIT	12,976	100.00%	6,305	-	-	-	-	-	-	-	6,305	-51.41%	-	-	6,305	6,000	6,305	6,000	6,000	6,000	305	30	
31	Contracts	18,016	0.00%	-	-	-	-	822	-	-	-	822	-95.44%	-	-	822	-	822	-	-	-	822	31	
32	Subtotal	37,591	91.54%	8,893	-	-	-	822	-	-	-	9,715	-74.16%	-	-	9,715	11,000	9,715	11,000	11,000	11,000	(1,285)	32	
33	Rate Increase for Primary Care Services	19,231	0.00%	-	-	-	-	28,007	-	-	-	28,007	45.63%	-	-	28,007	25,256	28,007	25,256	25,256	25,256	2,751	33	
34	Health Home	30,536	0.00%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	34	
35	Health Insurance Providers Fee	49,767	0.00%	-	-	-	-	71,368	-	-	-	71,368	133.72%	-	-	71,368	73,214	71,368	73,214	73,214	73,214	(181)	35	
36	Subtotal	468,699	100.40%	1,163,433	-	-	-	9,558	-	-	-	1,158,785	147.23%	-	-	1,158,785	1,156,238	1,158,785	1,156,238	1,156,238	1,156,238	2,547	36	
37	Medicaid Expansion - Physical Health	31,016	100.27%	86,710	-	-	-	896	-	-	-	86,476	178.81%	-	-	86,476	86,191	86,476	86,191	86,191	86,191	285	37	
38	Medicaid Expansion - Behavioral Health	499,714	100.39%	1,250,143	-	-	-	10,394	-	-	-	1,245,261	149.19%	-	-	1,245,261	1,242,429	1,245,261	1,242,429	1,242,429	1,242,429	2,832	38	
39	Subtotal	-	na	-	-	-	-	7,274	-	-	-	7,274	-	-	-	7,274	7,567	7,274	7,567	7,567	7,567	(293)	39	
40	Prior Years Charged to Current Year	-	na	-	-	-	-	(81,656)	-	-	-	(81,656)	-	-	-	(81,656)	(81,656)	(81,656)	(81,656)	(81,656)	(81,656)	3,887	40	
41	Current Year Charged to Future Year	-	na	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	41	
42	Grand Total	4,113,104	94.96%	4,796,312	74,648	217,424	(371)	5,047,403	22.72%	103,434	110,413	5,157,816	5,157,816	43	5,157,816	5,166,957	5,157,816	5,166,957	5,166,957	5,166,957	9,141	43		
43																								44

Notes:  
1. (Row 15) Others contains: Transportation, Lab/X-Ray, Prosthetics, RHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, Maintenance, Family Planning, PCC.  
2. (Lines 21-23, 37-38, Columns E and K) Actual YTD payments are from the MCO database, instead of Share Accounting Detailed File (SADF), because SADF doesn't show payments by programs.

No.	Description	FY 15 Projection	Federal Medicaid Expenditure Type and Federal Financial Participation Rates								Federal Share	% of Composite Federal Share	
			HIT, IHS, Refugees & Medicaid Expansion (100% FFP) <sup>1</sup>	Health Homes, Sterilization & Family Planning Services (90% FFP) <sup>2</sup>	Breast & Cervical Cancer Program (EFMAP) <sup>3</sup>	Title XXI CHIP (EFMAP) <sup>4</sup>	Utilization Review (75% FFP) <sup>5</sup>	Title XIX Medicaid (FMAP) <sup>6</sup>	Admin and Fees (50% FFP) <sup>7</sup>	Non-Federal Financial Participation Expenses (0% FFP) <sup>8</sup>			
A	B	C	D	E	F	G	H	I	J	K	L	M	
1	Inpatient Hospital	82,364	27,498	21	30	459	-	54,356	-	-	65,728	79.80%	
2	DSH	31,649	-	-	-	-	-	31,649	-	-	22,044	69.65%	
3	GME	7,187	-	-	-	-	-	7,187	-	-	5,006	69.65%	
4	IME	59,268	-	-	-	-	-	59,268	-	-	41,280	69.65%	
5	Safety Net Care	34,445	-	-	-	-	-	34,445	-	-	23,991	69.65%	
6	HQII Pool	1,412	-	-	-	-	-	1,412	-	-	984	69.65%	
7	Physician Services	40,724	8,822	-	80	619	-	31,077	-	125	30,996	76.11%	
8	IHS Hospital	109,755	109,755	-	-	-	-	-	-	-	109,755	100.00%	
9	CF-IID	26,328	-	-	-	-	-	26,328	-	-	18,314	69.56%	
10	Clinic Services	17,846	103	-	-	1,679	-	16,025	-	39	12,583	70.51%	
11	Federal Qualified Health Centers	4,228	957	-	3	112	-	3,156	-	-	3,243	76.70%	
12	Other Practitioners	28,677	500	-	1	1,098	-	27,078	-	-	20,205	70.46%	
13	Outpatient Hospital	39,617	9,676	-	212	753	-	28,976	-	-	30,592	77.22%	
14	PACE	11,838	-	-	-	-	-	11,838	-	-	8,232	69.54%	
15	Others	46,798	12,519	2,614	41	1,440	-	30,131	-	53	36,996	79.06%	
16	BH FFS	32,753	16,239	0	4	562	-	15,940	-	8	27,750	84.72%	
17	<b>Subtotal</b>	<b>574,891</b>	<b>186,070</b>	<b>2,633</b>	<b>871</b>	<b>6,722</b>	<b>-</b>	<b>378,867</b>	<b>-</b>	<b>225</b>	<b>457,701</b>	<b>79.62%</b>	
18	DD and MF (DOH)	278,445	-	-	-	-	476	277,162	806	-	193,554	69.51%	
19	Mi Via Walvers (DOH)	45,323	-	-	-	-	956	43,050	1,317	-	31,330	69.13%	
20	<b>Subtotal</b>	<b>323,767</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,432</b>	<b>320,212</b>	<b>2,123</b>	<b>-</b>	<b>224,884</b>	<b>69.46%</b>	
21	Centennial Care-Physical Health	1,582,681	22,494	-	2,808	82,213	-	1,475,165	-	-	1,115,219	70.46%	
22	Centennial Care-LTSS	934,283	11,807	-	720	-	-	921,756	-	-	653,363	69.93%	
23	Centennial Care-Behavioral Health	325,682	2,681	-	177	19,266	-	303,557	-	-	229,073	70.34%	
24	<b>Subtotal</b>	<b>2,842,646</b>	<b>36,983</b>	<b>-</b>	<b>3,705</b>	<b>101,480</b>	<b>-</b>	<b>2,700,478</b>	<b>-</b>	<b>-</b>	<b>1,997,655</b>	<b>70.27%</b>	
25	Medicare Part A	1,480	-	-	-	-	-	1,480	-	-	1,029	69.53%	
26	Medicare Part B	102,528	3,965	-	-	-	-	89,880	-	8,683	66,468	64.83%	
27	Medicare Part D	30,689	-	-	-	-	-	-	-	30,689	-	0.00%	
28	<b>Subtotal</b>	<b>134,697</b>	<b>3,965</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>91,360</b>	<b>-</b>	<b>39,372</b>	<b>67,497</b>	<b>50.11%</b>	
29	Utilization	2,588	-	-	-	-	2,588	-	-	-	1,941	75.00%	
30	HIT	6,305	6,305	-	-	-	-	-	-	-	6,305	100.00%	
31	Contracts	822	-	-	-	-	-	-	822	-	411	50.00%	
32	<b>Subtotal</b>	<b>9,715</b>	<b>6,305</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>2,588</b>	<b>-</b>	<b>822</b>	<b>-</b>	<b>8,657</b>	<b>88.11%</b>	
33	Rate Increase for Primary Care Services	28,007	17,580	-	-	56	-	10,371	-	-	24,836	88.68%	
34	Health Home	-	-	-	-	-	-	-	-	-	-	-	-
35	Health Insurance Providers Fee	73,214	22,377	-	-	1,846	-	48,992	-	-	57,898	79.08%	
36	<b>Subtotal</b>	<b>101,221</b>	<b>39,957</b>	<b>-</b>	<b>-</b>	<b>1,902</b>	<b>-</b>	<b>59,363</b>	<b>-</b>	<b>-</b>	<b>82,734</b>	<b>81.74%</b>	
37	Medicaid Expansion - Physical Health	1,158,785	1,158,785	-	-	-	-	-	-	-	1,158,785	100.00%	
38	Medicaid Expansion - Behavioral Health	86,476	86,476	-	-	-	-	-	-	-	86,476	100.00%	
39	<b>Subtotal</b>	<b>1,245,261</b>	<b>1,245,261</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,245,261</b>	<b>100.00%</b>	
40													
41	Prior Years Charged to Current Year	7,274	-	-	-	-	-	7,274	-	-	5,067	69.65%	
42	Current Year Charged to Future Year	(81,656)	-	-	-	-	-	(81,656)	-	-	(57,461)	70.37%	
43													
44	<b>Grand Total</b>	<b>5,157,816</b>	<b>1,518,540</b>	<b>2,633</b>	<b>4,076</b>	<b>110,104</b>	<b>4,021</b>	<b>3,475,899</b>	<b>2,945</b>	<b>39,597</b>	<b>4,031,992</b>	<b>78.17%</b>	

	HSD Budget	Billed Amount	Collection YTD	HSD Projection
48 State Share Revenues:				
49 Department of Health (Line 17 & 18) <sup>9</sup>	99,041	93,034	93,034	103,293
50 Department of Health Additional Need (Surplus)	-	-	-	(4,033)
51 Department of Health for Early Intervention	8,392	7,011	7,011	7,011
52 Department of Health for FQHCs	482	480	480	480
53 Department of Health for EC	1	-	-	1
54 Children, Youth and Families	-	-	-	-
55 County Supported Medicaid Fund	26,891	27,737	27,737	27,737
56 Tobacco Settlement Revenue, Base	9,220	-	9,220	9,220
57 Tobacco Settlement Revenue	-	-	-	-
58 Total Operating Transfers In	144,027	128,262	137,482	149,709
59				
60 School Based Health Services (Part of Line 10)	3,325	4,708	2,267	5,031
61 Physician UPL UNM	1,675	1,978	1,978	2,096
62 Safety Net Care <sup>11</sup>	38,728	-	-	0
63 County Supported Hospital Payments <sup>11</sup>	-	24,591	24,591	24,591
64 UNM IGT	16,323	5,760	5,760	18,660
65 Drug Rebates	19,466	-	36,120	36,120
66 Fraud	872	-	250	250
67 Tort and Insurance Carrier Refund	-	-	-	-
68 Income Diversion Trust	486	-	585	585
69 Buy-In Recovery	215	-	130	130
70 Cost Settlement	500	-	472	472
71 Estate Recovery	9	-	1	1
72 Misc. Revenue <sup>13</sup>	-	-	448	448
73 HMS-RAC-TPL/Subrogation	-	-	729	729
74 Total Other Revenues	81,599	-	73,830	89,112
75				
76 General Fund Need	-	-	-	899,003
77				
78 SB 313/HB2	-	-	-	891,003
79 HB2 - Section 5, 2015 Supplemental	-	-	-	2,000
80				
81 State Revenue Surplus / (Shortfall)	-	-	-	-
82				
83 State Revenue Surplus / (Shortfall) Assoc. with Expenditures Charged to FY16	-	-	-	(24,195)

PROJECTED REVENUES	
Federal Revenues	4,031,992
Federal Disallowance <sup>10</sup>	-
All State Revenues	1,125,824

- Notes:**
- HIT, IHS, QI-1, Medicaid Expansion, 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 FFY 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 Mi Via waiver services; projected revenue is without the 3% for admin.
  - There is a placeholder for potential federal disallowances.
  - The projected revenue from the counties to the Safety Net Care and Hospital payments is reduced by \$9 million, contingent upon the counties providing financial support for them.
  - Miscellaneous revenue includes TPL and CSES Recoveries.



FY 16 Trend Model with Centennial Care and Medicaid Expansion (\$000s)

No.	Description	FY 16 Projection	Federal Medicaid Expenditure Type and Federal Financial Participation Rates										
			HIT, IHS, Refugees, Medicaid Expansion & CHIP (ACA) (100% FFP) <sup>1</sup>	Health Homes, Sterilization & Family Planning Services (90% FFP) <sup>2</sup>	Breast & Cervical Cancer Program (EFMAP) <sup>3</sup>	Title XXI CHIP (EFMAP) <sup>4</sup>	Utilization Review (75% FFP) <sup>5</sup>	Title XIX Medicaid (FMAP) <sup>6</sup>	Admin and Fees (50% FFP) <sup>7</sup>	Non-Federal Financial Participation Expenses (0% FFP) <sup>8</sup>	Federal Share	% of Composite Federal Share	
A	B	C	D	E	F	G	H	I	J	K	L	M	
1	Inpatient Hospital	86,293	30,022	40	36	63	-	56,133	-	-	69,580	80.63%	
2	DSH	32,160	-	-	-	-	-	32,160	-	-	22,631	70.37%	
3	GME	7,913	-	-	-	-	-	7,913	-	-	5,568	70.37%	
4	IME	60,928	-	-	-	-	-	60,928	-	-	42,875	70.37%	
5	Safety Net Care	68,889	-	-	-	-	-	68,889	-	-	48,477	70.37%	
6	HQII Pool	4,295	-	-	-	-	-	4,295	-	-	3,022	70.37%	
7	Physician Services	41,873	10,295	-	67	112	-	31,264	-	136	32,401	77.98%	
8	IHS Hospital	115,226	115,226	-	-	-	-	(0)	-	-	115,226	100.00%	
9	CF-ID	26,409	-	-	-	-	-	26,409	-	-	18,545	70.22%	
10	Clinic Services	35,562	34,562	-	-	-	-	966	-	34	35,242	99.10%	
11	Federal Qualified Health Centers	4,393	1,151	-	3	25	-	3,212	-	-	3,430	78.09%	
12	Other Practitioners	29,239	1,433	-	1	240	-	27,565	-	-	20,987	71.78%	
13	Outpatient Hospital	41,220	11,325	-	241	171	-	29,483	-	-	32,353	78.49%	
14	PACE	12,278	-	-	-	-	-	12,278	-	-	8,518	70.19%	
15	Others	48,704	15,179	2,265	41	365	-	30,821	-	32	39,127	80.45%	
16	BH FFS	33,763	17,720	0	2	140	-	15,893	-	8	28,987	85.86%	
17		<b>649,143</b>	<b>236,912</b>	<b>2,305</b>	<b>390</b>	<b>1,117</b>	<b>-</b>	<b>408,209</b>	<b>-</b>	<b>210</b>	<b>527,126</b>	<b>81.20%</b>	
18	DD and MF (DOH)	288,120	-	-	-	-	-	486	286,215	1,419	202,104	70.15%	
19	Mi Via Waivers (DOH)	54,356	-	-	-	-	-	1,000	53,983	1,373	37,968	69.85%	
20		<b>342,476</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,486</b>	<b>336,198</b>	<b>2,791</b>	<b>240,072</b>	<b>70.10%</b>	
21	Centennial Care-Physical Health	1,566,040	86,703	7,821	2,914	21,270	-	1,447,331	-	-	1,128,685	72.07%	
22	Centennial Care-LTSS	1,070,808	11,807	-	-	257	-	1,058,743	-	-	754,939	70.50%	
23	Centennial Care-Behavioral Health	340,481	17,408	-	150	4,861	-	318,062	-	-	244,603	71.84%	
24		<b>2,977,329</b>	<b>115,919</b>	<b>7,821</b>	<b>3,065</b>	<b>26,388</b>	<b>-</b>	<b>2,824,136</b>	<b>-</b>	<b>-</b>	<b>2,128,227</b>	<b>71.48%</b>	
25	Medicare Part A	964	-	-	-	-	-	964	-	-	676	70.19%	
26	Medicare Part B	104,489	4,078	-	-	-	-	91,212	-	9,200	68,099	65.17%	
27	Medicare Part D	34,900	-	-	-	-	-	-	-	34,900	-	0.00%	
28		<b>140,353</b>	<b>4,078</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>92,175</b>	<b>-</b>	<b>44,100</b>	<b>66,776</b>	<b>49.00%</b>	
29	Utilization	4,800	-	-	-	-	-	4,800	-	-	3,600	75.00%	
30	HIT	2,000	2,000	-	-	-	-	-	-	-	2,000	100.00%	
31	Contracts	-	-	-	-	-	-	-	-	-	-	-	
32		<b>6,800</b>	<b>2,000</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>4,800</b>	<b>-</b>	<b>-</b>	<b>5,600</b>	<b>82.35%</b>	
33	Rate Increase for Primary Care Services	25,755	6,448	-	-	26	-	19,281	-	-	19,982	77.58%	
34	Health Home	6,000	-	6,000	-	-	-	-	-	-	5,400	90.00%	
35	Health Insurance Providers Fee	80,977	27,204	-	-	1,901	-	51,872	-	-	65,110	80.41%	
36		<b>112,733</b>	<b>33,653</b>	<b>6,000</b>	<b>-</b>	<b>1,926</b>	<b>-</b>	<b>71,153</b>	<b>-</b>	<b>-</b>	<b>80,492</b>	<b>80.27%</b>	
37	Medicaid Expansion - Physical Health	1,323,062	1,323,062	-	-	-	-	-	-	-	1,323,062	100.00%	
38	Medicaid Expansion - Behavioral Health	100,566	100,566	-	-	-	-	-	-	-	100,566	100.00%	
39		<b>1,423,628</b>	<b>1,423,628</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,423,628</b>	<b>100.00%</b>	
40													
41	Prior Years Charged to Current Year	81,656	-	-	-	-	-	-	-	-	81,656	70.37%	
42	Current Year Charged to Future Year	-	-	-	-	-	-	-	-	-	-	-	
43													
44	<b>Grand Total</b>	<b>5,734,118</b>	<b>1,816,190</b>	<b>16,127</b>	<b>3,455</b>	<b>29,431</b>	<b>6,286</b>	<b>9,815,529</b>	<b>2,791</b>	<b>44,310</b>	<b>4,541,383</b>	<b>79.20%</b>	

  

	FY 16 Budget Request	HSD Projection
48 State Share Revenues:		
49 Department of Health (Line 18 & 19) <sup>9</sup>	103,293	103,443
50 Department of Health for Early Intervention	8,142	8,292
51 Department of Health for FQHCs	482	560
52 Department of Health for EC	1	1
53 Children, Youth and Families	-	-
54 County Supported Medicaid Fund	27,590	27,590
55 Tobacco Settlement Revenue, Base	9,220	30,020
56 Tobacco Settlement Revenue	-	-
57 Total Operating Transfers In	<b>148,728</b>	<b>169,906</b>
58		
59 School Based Health Services (Part of Line 10)	-	-
60 Physician UPL UNM	1,219	1,966
61 Safety Net Care <sup>11</sup>	397	397
62 County Supported Hospital Payments <sup>11</sup>	25,099	25,099
63 Additional County Supported Hospital Payments <sup>12</sup>	9,781	-
64 UNM IGT	14,726	23,007
65 Drug Rebates <sup>13</sup>	32,963	32,861
66 Fraud	872	872
67 Tort and Insurance Carrier Refund	-	-
68 Income Diversion Trust	486	486
69 Buy-In Recovery	215	215
70 Cost Settlement	500	500
71 Estate Recovery	9	9
72 HMS-RAC-TPL/Subrogation	500	500
73 Total Other Revenues	<b>86,767</b>	<b>85,912</b>
74		
75 General Fund Need	-	936,917
76		
77 HB 2 / SFC	-	891,722
78		
79 State Revenue Surplus/(Shortfall)		<b>(45,195)</b>

  

PROJECTED REVENUES	
Federal Revenues	4,541,383
Federal Disallowance <sup>10</sup>	-
All State Revenues	1,192,736

  

**Notes:**

- HIT, IHS, QI-1, Refugees, Medicaid Expansion are eligible for 100% FFP. Under the ACA beginning Oct.2015, Medicaid will receive 100% match for CHIP kids through FFY2019.
- Health Homes, sterilization and family planning service cost are eligible for 90% FFP.
- Breast and cervical cancer (BOC) program with enhanced FMAP.
- CHIP is a Title XXI program with enhanced FMAP. FY16 will have one quarter at regular EFMAP.
- Utilization review federally matched at 75%; admin. expenses.
- Title XIX expenditures with regular FMAP. The final FFY 2016 FMAP is from FFIS, released October 2014.
- 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 Mi Via waiver services; projected revenue is without the 3% for admin.
- There is a placeholder for potential federal disallowances.
- The sum of lines 61 and 62 is the 1/12th of the gross receipts tax contributed by the counties to support the Safety Net Care Pool and Hospital Payments.
- Line 63 represents the additional county support to fully fund the Safety Net Care Pool.
- HSD will collect five quarters of MCO drug rebates in FY16.



**Notes:**

1. The reported enrollments for the full benefit base population and Medicaid expansion population for the months from Jul-12 to Jun-15 were based on the Monthly Eligibility Report released in June 2015. For Medicaid Expansion, the reported enrollments from the Monthly Eligibility Report for the months from Jan-14 to Mar-14 were adjusted based on the estimated number of clients with duplicate COEs (COE 108 and other COEs).
2. The reported enrollments for the full benefit base population and Medicaid expansion population for the month Jun-15 were based on the Medicaid Eligibility Report released in June 2015.
3. The estimated enrollments for the months from Jul-12 to Jun-15 were based on Monthly Eligibility Report released in June 2015 and adjusted for expected retroactive enrollments.
4. The estimated enrollments for the months Jul-15 to Jun-16 were based on the regressive analysis of recent enrollment pattern, with consideration of impacts of new policies, court orders and the take-up from the eligible uninsured populations in New Mexico. For Specified Low-Income Medicare Beneficiaries (SLIMBs) and Qualified Individuals (QI)s population, the estimated enrollments for the months from Jul-12 to Jun-15 were based on the reports created from the data warehouse of Medical Assistance Division on 7/15/2015 and adjusted for expected retroactive enrollments. For the months from Jul-15 to Jun-16, the estimated enrollments were based on regressive analysis of the recent enrollment pattern.

**Data Sources:**

Monthly Eligibility Report (MER) is posted on the internal MAD website on a monthly basis. The MER includes all clients eligible for Medical Assistance, including retroactive and late reported eligibility. 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 for SFY13-15

SFY	Mon-Yr	All Children	All Clients
2013	Jul-12	337,644	521,686
	Aug-12	339,041	524,321
	Sep-12	338,511	524,593
	Oct-12	339,030	526,470
	Nov-12	338,838	526,843
	Dec-12	337,790	526,248
	Jan-13	338,875	528,978
	Feb-13	337,720	527,845
	Mar-13	337,039	527,841
	Apr-13	336,884	528,586
	May-13	336,027	528,189
	Jun-13	335,128	527,830
2014	Jul-13	335,383	529,346
	Aug-13	335,659	530,976
	Sep-13	333,698	529,697
	Oct-13	335,749	541,293
	Nov-13	332,999	543,195
	Dec-13	336,417	563,869
	Jan-14	338,548	619,548
	Feb-14	342,711	645,082
	Mar-14	346,203	671,539
	Apr-14	348,071	687,612
	May-14	348,759	696,361
	Jun-14	348,821	702,783
2015	Jul-14	353,945	718,285
	Aug-14	357,298	729,233
	Sep-14	360,021	739,057
	Oct-14	361,646	747,393
	Nov-14	362,797	754,470
	Dec-14	365,038	765,305
	Jan-15	366,495	773,666
	Feb-15	368,153	783,181
	Mar-15	369,472	788,540
	Apr-15	369,772	791,201
	May-15	370,708	795,218
	Jun-15	370,752	796,803

8/21/2015

Notes:

1. The data represents Year To Date enrollment reported from Monthly Eligibility Reports.
2. For All Clients, the SCI(State Coverage Insurance) and SLIMBs (Specified Low Income Medicare Beneficiaries) are not included.
3. Children are defined as any client less than age 21.