

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 (\$900s)

Line No.	Description	FY 12 Title		FY 13 Title		Actual Paid Lump Sum YTD	Projected Lump Sum	Adjustments	FY 13 Title		% Change from FY 12	CHIP/SCI YTD	FY 13 Total		Nov 2013 Projection	Change from Previous	Line No.			
		XX Projection	XX Title Paid YTD	XX Projection	XX Title Paid YTD				Actual Paid	YTD			CHIP/SCI	CHIP/SCI				Medical	Medical	
1	Inpatient Hospital	91,942	96,018	99.4%	96,018	-	-	-	96,636	948	5.1%	948	97,590	97,590	97,481	109	1			
2	DSH	29,862	25,164	81.3%	25,164	30,957	30,957	-	-	-	3.7%	-	30,957	30,957	30,957	-	2			
3	GME	7,187	7,187	100.0%	7,187	7,187	7,187	-	7,187	-	0.0%	-	7,187	7,187	7,187	-	3			
4	IME	30,851	32,364	100.0%	32,364	32,364	32,364	-	32,364	-	4.9%	-	32,364	32,364	32,364	-	4			
5	SCPH-UPL	207,413	88,395	100.0%	88,395	88,395	88,395	-	88,395	-	-57.4%	-	88,395	88,395	88,395	-	5			
6	Physician Services	50,353	53,930	99.3%	53,930	11,465	11,465	590	54,310	-	7.9%	802	55,120	54,746	54,746	373	6			
7	Prescribed Drugs	10,295	11,082	99.9%	11,082	-	-	-	11,093	-	7.7%	276	11,370	11,363	11,363	7	7			
8	Dental Services	13,588	13,215	100.0%	13,215	-	-	-	13,216	-	-2.7%	954	14,171	14,160	14,160	11	8			
9	Transportation	7,631	7,631	99.7%	7,631	-	-	-	7,657	-	0.3%	145	7,803	7,807	7,807	(4)	9			
10	Lab and X-Ray	3,630	3,988	99.5%	3,988	-	-	-	4,010	-	10.5%	24	4,034	3,951	83	10	10			
11	EP/SDT	2,239	2,330	99.9%	2,330	-	-	-	2,333	-	4.2%	113	2,446	2,448	2,448	(2)	11	11		
12	IHS Hospital	79,376	83,208	98.9%	83,208	-	-	-	84,122	-	6.0%	-	84,122	84,515	84,515	(393)	12	12		
13	Nursing Facility	2,755	3,251	98.4%	3,251	-	-	-	3,304	-	19.9%	-	3,304	3,053	251	13	13	13		
14	ICF MR	24,862	24,983	100.0%	24,983	-	-	-	24,983	-	0.5%	-	24,983	24,983	24,983	75	14	14		
15	Clinic Services	12,987	12,009	100.0%	12,009	-	-	-	12,012	-	-7.5%	835	12,847	12,858	12,858	(10)	15	15		
16	Federal Qualified Health Centers	24,234	24,680	80.3%	24,680	20,831	20,831	-	30,729	-	26.8%	112	30,843	23,811	7,032	16	16	16		
17	Other Practitioners	37,428	36,869	99.9%	36,869	-	-	-	36,898	-	-1.4%	995	37,894	37,931	37,931	(37)	17	17		
18	Outpatient Hospital	34,834	37,993	99.1%	37,993	-	-	-	38,320	-	10.0%	807	39,134	39,206	(72)	18	18	18		
19	Family Planning	8,010	8,792	100.1%	8,792	-	-	-	8,781	-	9.6%	17	8,798	8,781	8,781	17	19	19		
20	PACE	11,210	11,859	100.0%	11,859	-	-	-	11,859	-	5.8%	-	11,859	11,859	11,859	-	20	20	20	
21	Personal Care Options	567	642	99.9%	642	-	-	-	643	-	13.4%	-	643	645	645	(2)	21	21	21	
22	Others	5,684	5,963	95.7%	5,963	1,329	1,429	142	6,323	-	9.4%	63	6,295	6,243	6,243	52	22	22	22	
23	BH CFS	28,566	25,451	98.0%	25,451	-	-	-	25,961	-	-9.1%	737	26,713	27,056	(342)	23	23	23		
24	Premium Assistance Program	33	18	100.0%	18	-	-	-	18	-	-44.3%	-	18	18	18	15	24	24	24	
25	Subtotal FFS	725,547	617,002	97.6%	617,002	198,628	198,628	732	632,019	-	-12.9%	6,830	638,869	631,742	7,148	25	25	25	25	
26	AIDS, DD and MF (DOH)	274,786	275,002	100.0%	275,002	174	174	1,721	275,002	-	0.1%	-	275,002	275,002	275,002	(92)	26	26	26	
27	MI Via Waivers (DOH)	10,645	14,994	100.0%	14,994	22	22	1,045	14,994	-	40.9%	-	14,994	15,796	15,796	(803)	27	27	27	
28	MI Via Waiver (D&E)	18,943	22,594	100.0%	22,594	55	55	1,625	22,594	-	19.3%	-	22,594	23,668	23,668	(1,074)	28	28	28	
29	MI Via Waiver BI (ALTSD)	10,994	11,205	100.0%	11,205	17	17	894	11,205	-	1.9%	-	11,205	11,862	11,862	(657)	29	29	29	
30	Subtotal HCEW	315,367	323,795	100.0%	323,795	268	268	5,290	323,795	-	2.7%	-	323,795	326,421	326,421	(2,626)	30	30	30	
31	Physical Health MCO	1,014,036	1,098,527	98.2%	1,098,527	54,726	58,926	5,429	1,108,157	-	9.3%	48,765	1,156,921	1,160,310	(3,389)	31	31	31		
32	Behavioral Health MCO	241,494	248,490	100.0%	248,490	1,050	1,050	-	248,490	-	2.9%	11,510	260,000	260,000	(89)	32	32	32		
33	CoLTS	865,427	911,866	98.8%	911,866	13,790	24,813	323	923,232	-	6.7%	-	923,232	923,336	923,336	(104)	33	33	33	
34	State Coverage Insurance	153,764	139,956	98.3%	139,956	8,775	12,028	576	143,785	-	-6.5%	75,841	219,626	219,976	(350)	34	34	34		
35	Subtotal MCO	2,274,721	2,398,960	99.0%	2,398,960	78,342	96,818	6,329	2,423,664	-	6.5%	136,115	2,559,780	2,563,711	(3,931)	35	35	35		
36	Medicare Part A	750	778	100.0%	778	778	778	-	778	-	3.8%	-	778	778	778	-	36	36	36	
37	Medicare Part B	89,516	87,368	100.0%	87,368	87,368	87,368	-	87,368	-	-2.5%	-	87,368	87,368	87,368	-	37	37	37	
38	Medicare Part D	24,404	25,116	100.0%	25,116	25,116	25,116	-	25,116	-	2.9%	-	25,116	25,116	25,116	-	38	38	38	
39	Subtotal Medicare	114,769	113,262	100.0%	113,262	113,262	113,262	-	113,262	-	-1.3%	-	113,262	113,262	113,262	-	39	39	39	
40	Utilization	8,489	8,143	100.0%	8,143	8,143	8,143	-	8,143	-	-4.2%	-	8,143	8,143	8,143	-	40	40	40	
41	HIT Incentive Payments	37,131	31,388	100.0%	31,388	31,388	31,388	-	31,388	-	na	-	31,388	31,388	31,388	-	41	41	41	
42	Contracts	-	1,755	na	1,755	1,755	1,755	-	1,755	-	na	-	1,755	1,755	1,755	-	42	42	42	
43	Prior Years Charged to Current Year	12,813	-	na	-	-	-	-	-	-	na	-	-	-	-	-	-	43	43	43
44	Subtotal	58,444	41,286	98.9%	41,286	41,286	41,286	-	41,286	-	na	-	41,286	41,286	41,286	-	44	44	44	
45	Total	3,488,649	3,494,205	98.9%	3,494,205	419,894	450,262	12,351	3,534,027	-	1.3%	142,945	3,677,013	3,677,013	3,677,422	590	45	45	45	

FY 13 Operating Budget
Projected Surplus/(Shortfall)

3,878,564
201,551

- Notes:
1. (Line 9) Transportation consists of Non-emergency transportation, Ambulance, and Maintenance.
2. (Line 22) Others consists of Prosthetics, RHC, RTC, Waiver Services, Hospice, Home Health, Group Health Insurance Premiums, and Medical Supplies.
3. (Line 32) ACT/BI 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 Revenues by Source (\$000s) - LAG Model

Line No. A	Description B	FY 13 Projection C	Federal Medicaid Expenditure Type and Federal Financial Participation Rates										Federal Share (\$000s) M	% 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 XX 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			
1	Inpatient Hospital	97,590	9	35	724	-	954	-	95,867	-	-	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	50,621	-	389	38,374	69.62%	
7	Prescribed Drugs	11,370	37	-	786	-	-	277	10,268	-	2	7,969	70.09%	
8	Dental Services	14,171	135	-	75	-	-	955	13,006	-	-	9,935	70.11%	
9	Transportation	7,803	2	-	108	-	-	146	7,548	-	-	5,418	69.43%	
10	Lab and X-Ray	4,034	3	-	320	-	-	24	3,687	-	-	2,821	69.94%	
11	EPSTD	2,446	3	-	0	-	-	113	2,329	-	-	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	11,979	-	31	8,932	69.52%	
16	Federal Qualified Health Centers	30,843	3	-	117	-	-	114	30,609	-	-	21,435	69.50%	
17	Other Practitioners	37,894	7	-	61	-	-	996	36,829	-	0	26,292	69.38%	
18	Outpatient Hospital	39,134	70	-	3,157	-	-	814	35,090	-	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	2,827	600	472,914	74.02%	
26	AIDS, DD and MF (DOH)	275,002	-	-	-	-	-	-	272,811	1,800	-	189,859	69.04%	
27	Mi Via Waivers (DOH)	14,994	-	-	-	-	-	-	13,861	830	-	10,144	67.66%	
28	Mi Via Waiver (D&E)	22,594	-	-	-	-	-	-	20,809	1,372	-	15,377	68.06%	
29	Mi Via Waiver BI (ALTSD)	11,205	-	-	-	-	-	-	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	-	-	641,687	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	1,789,877	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	41,286	31,388	-	-	-	-	-	8,143	-	1,755	38,373	92.94%	
45	Total	3,877,013	166,081	10,971	9,032	76,270	-	67,131	8,523	3,293,394	9,024	35,586	2,579,466	70.15%

	HSD Budget	Billed Amount	Collection YTD	HSD Projection
49	State Share Revenues:			
50	Department of Health (Line 26 & 27) ¹⁰	95,871	90,587	90,587
51	Department of Health Additional Need / (Surplus)	-	-	(5,284)
52	Department of Health for Early Intervention	6,400	6,759	6,759
53	Department of Health for FQHC's	500	482	482
54	Department of Health for EC	1	0	0
55	County Supported Medicaid Fund	25,600	25,728	25,728
56	Total Operating Transfers In	128,372	123,556	123,556
57				
58	UNM SCI IGT	23,760	16,286	16,286
59	School Based Health Services (Part of Line 15)	3,821	3,649	3,649
60	Physician UPL UNM	2,759	3,539	3,539
61	Sole Community Provider Hospital Fund (Line 5)	85,650	58,291	50,551
62	SCPH - SFY12	-	-	7,740
63	SCPH - Refund to counties	-	(10,840)	(10,840)
64	Drug Rebates	1,251	22,454	22,454
65	Fraud	872	923	923
66	Tort and Insurance Carrier Refund	-	239	239
67	Income Diversion Trust/Estate Recoveries	495	562	562
68	Buy-In Recovery	215	187	187
69	Cost Settlement	3,542	-	-
70	Misc. Revenue	-	343	343
71	HMS RAC-TPU/Subrogation	-	2,072	2,072
72	Tobacco Settlement Revenue, Base	9,456	9,456	9,456
73	Tobacco Settlement Revenue ¹³	19,046	19,046	19,046
74	Total Other Revenues	150,867	70,925	126,207
75	General Fund Need ¹⁴	-	-	887,581
76	Appropriation in FY13	-	-	894,325
77	Prior Year Liability	-	-	(2,751)
78	Transfer to Admin Budget	-	-	(1,416)
79	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 Revenue	1,117,344

- Notes:**
- IHS, UPL, QI-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 XX 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.

FY 13 Line Model with Centennial Care and Medicaid Expansion with Actual Data Thru March 2014 (SP9003)

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

Line No.	Description	FY 13 Title XIX		FY 14 Title XIX			FY 14 Title XIX		% Change from FY 13	CHIP/SCI		Nov 2013 Projection	Change from Previous	Line No.
		Projection	Completion	Actual YTD	Lump YTD	Actual Paid	Projected Lump Sum	Others		Projection	CHIP/SCI Projection			
1	Inpatient Hospital	96,636	65.6%	55,319				84,383	-12.6%	509	669	74,768	10,284	1
2	DSH	30,957	0.0%	-				31,393	1.41%			31,393		2
3	SGME	7,187	0.0%	5,390				7,315	1.78%			7,315	(255)	3
4	IME	32,364	0.0%	16,495				33,666	4.02%			32,081	1,586	4
5	SCPH-UPL	88,995	0.0%	31,026				34,445	-61.03%			34,445		5
6	LUCC Pool		0.0%	-				68,889	-			68,889		6
7	Physician Services	54,310	60.1%	27,654				46,116	-15.09%	422	600	45,337	34,445	7
8	Prescribed Drugs	11,093	73.8%	7,537				10,210	-7.96%	216	300	10,321	189	8
9	Dental Services	13,216	76.7%	9,325				12,175	-7.88%	592	757	12,933	(1,080)	9
10	Transportation	7,657	65.9%	4,996				7,596	-0.80%	110	148	7,568	176	10
11	Lab and X-Ray	4,010	76.2%	2,212				2,904	-27.56%	14	17	2,921	3(33)	11
12	EPSTD	2,333	81.9%	1,495				1,830	-21.55%	73	85	2,279	(364)	12
13	IHS Hospital	84,122	63.1%	53,519				84,855	0.87%	1,460		84,855		13
14	Nursing Facility	3,304	70.9%	4,321				6,093	84.39%			6,093		14
15	ICE MR	24,983	70.3%	17,521				24,933	-0.20%			25,376	(443)	15
16	Clinic Services	12,012	54.9%	7,696				14,039	-16.87%	486	878	14,917	1,027	16
17	Federal Qualified Health Centers	30,729	82.3%	11,299				13,707	-55.39%	70	111	13,818	356	17
18	Other Practitioners	36,898	73.9%	22,107				29,904	-18.96%	650	887	29,496	1,295	18
19	Outpatient Hospital	38,320	71.1%	24,164				34,001	-11.27%	495	673	31,820	2,853	19
20	Family Planning	8,781	76.7%	5,543				7,231	-17.64%	9	12	7,922	(679)	20
21	PACE	11,859	74.9%	8,677				11,858	0.00%			11,858		21
22	Personal Care Options	643	99.6%	265				266	-58.68%			266	406	22
23	Others	6,232	66.0%	3,358				5,096	-18.23%	734	29	4,391	(141)	23
24	BH CFS 1H	25,961	98.0%	8,984				9,104	-64.93%	112	178	23,350	(4,068)	24
25	BH 2H		30.9%	4,237				13,334	-					25
26	Premium Assistance Program	18	100.0%	7				7	-61.93%			7	0	26
27	Subtotal	632,019	56.1%	333,348	65,622	197,322	1,656	595,339	-5.80%	3,782	5,742	550,362	50,719	27
28	AIDS, DD and MF (DOH)	275,002	68.6%	186,486	46	69	2,324	274,931	-0.03%			297,610	(22,679)	28
29	MI Via Waivers (DOH)	14,994	65.6%	16,086	31	46	1,579	24,533	62.62%			24,533		29
30	MI Via Waiver (D&E)	22,594	93.6%	14,304	60	60	858	15,280	-32.37%			14,061	1,218	30
31	MI Via Waiver BI	11,205	92.6%	5,424	10	10	348	5,860	-47.70%			5,860		31
32	Misc. Waivers		90.0%	917				1,019	-			1,019		32
33	Subtotal	323,795	70.0%	225,216	0	147	185	321,622	-0.67%			341,879	(20,257)	33
34	Physical Health MCO 1H	1,108,157	99.0%	573,712	48,971	5,803	48,971	579,515	-47.70%	24,354	24,354	603,869	(2,022)	34
35	Behavioral Health MCO 1H	248,490	95.4%	115,364	500	500	5,317	121,181	-51.23%	5,685	5,685	126,866	(105)	35
36	Colts 1H	923,232	96.4%	497,042	60	60	858	453,404	-50.89%			453,404	(515)	36
37	State Coverage Insurance 1H	143,785	97.5%	81,868	6,432	2,522	5,896	84,389	-41.31%	18,443	18,443	102,833	(531)	37
38	Subtotal	2,423,664	97.8%	1,207,986	68,731	14,336	83,187	1,290,489	-48.50%	48,483	48,483	1,290,484	(3,179)	38
39	Centennial Care 2H - Physical Health		42.3%	297,580		5,803	62,601	706,354	-	13,148	27,616	793,971	684,965	39
40	Centennial Care 2H - LTSS		46.4%	221,504		5,511	13,843	477,719	-18.23%	3,040	6,347	474,211	3,508	40
41	Centennial Care 2H - Behavioral Health		48.3%	66,644		500		137,948	-			139,253	5,041	41
42	Subtotal		44.9%	585,728		11,814	76,445	1,322,021	-	16,187	33,963	1,288,429	57,555	42
43	Medicare Part A	778	83.3%	583				700	-10.08%			700		43
44	Medicare Part B	87,368	82.9%	76,607				92,378	5.73%			92,378		44
45	Medicare Part D	25,116	75.2%	19,280				25,628	2.04%			25,138	490	45
46	Subtotal	113,262	81.3%	96,471	0			118,705	4.81%			118,758	(52)	46
47	Utilization	8,143	78.8%	5,515				7,000	-14.04%			7,000		47
48	HIT Incentive Payment	31,388	93.9%	9,944	9,944	11,857		11,857	-62.22%			11,857	2,324	48
49	Contracts	1,755	93.5%	18,016				19,245	996.31%			19,245		49
50	Subtotal	41,286	87.9%	33,475	9,944	11,857		38,102	-7.71%			38,102	2,324	50
51	Rate Increase for Primary Care Services		7.0%	1,004		1,004		14,363	-			14,363		51
52	Health Home		na						-					52
53	Insurer's Fee		0.0%					23,814	-			23,814		53
54	Woodwork (Children)		na						-					54
55	MAGI Impact (Children)		na						-					55
56	Woodwork (Aged)		na						-					56
57	Subtotal		2.6%	1,004	1,004	0.00%		38,177	-			38,178		57
58	SCI Adults Up to 138% FPL - Physical Health		na						-					58
59	Newly Eligibles - Physical Health		0	119,380				383,154	-			232,444	150,711	59
60	Newly Eligibles/SCI - Behavioral Health		na	9,671				31,186	-			31,186		60
61	Grand Total	3,154,027	28.8%	1,193,280	145,302	235,476	30,214	4,164,340	-15.64%	68,452	88,800	4,021,185	154,410	61
62	Subtotal		64.0%	2,602,608	145,302	235,476	151,887	4,086,795	-			4,021,185		62

Notes:
1. (Column H) Others under the managed care projection lines (lines 33-36, 38-40) reflect the SCPI payments and new Centennial Care programs administered through the MCOs.
2. (Line 52) Insurer's Fee represents 1.9% impact of PPACA Health Insurance Fee as estimated in the Milliman Client Report of January 2012.

FY14 Operating Budget
Projected Surplus/(Shortfall)

4,300,632
125,037

Federal Medicaid Expenditure Type and Federal Financial Participation Rates

No.	Description	FY 14 Projection C	Federal Medicaid Expenditure Type and Federal Financial Participation Rates									Federal Share (\$000s) L	% of Composite Federal Share M	
			HIT, IHS, Refugees & Medicaid Expansion (100% FFP) ¹ D	Health Homes, Sterilization & Family Planning Services (90% FFP) ² E	Breast & Cervical Cancer Program (EFMAP) ³ F	Title XXI CHIP (EFMAP) ⁴ G	Utilization Review (75% FFP) ⁵ H	Title XIX Medicaid (FMAP) ⁶ I	Admin and Fees (50% FFP) ⁷ J	Non-Federal Financial Participation Expenses (0% FFP) ⁸ K				
1	Inpatient Hospital	85,052	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	-	42,673	-	399	-	32,713	70.02%	
8	Prescribed Drugs	10,510	395	-	391	300	-	9,424	-	-	-	7,452	70.90%	
9	Dental Services	13,933	290	-	45	757	-	13,840	-	-	-	9,107	70.42%	
10	Transportation	7,744	722	-	80	148	-	6,794	-	-	-	5,600	72.31%	
11	Lab and X-Ray	2,921	120	-	137	17	-	2,648	-	-	-	2,071	70.91%	
12	EPSTD	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	13,818	316	-	58	111	-	13,353	-	-	-	9,671	69.98%	
18	Other Practitioners	30,791	80	-	20	887	-	29,803	-	-	-	21,404	69.51%	
19	Outpatient Hospital	34,673	1,646	-	2,511	673	-	29,820	-	4	-	24,778	71.60%	
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 CFPS	9,281	2,731	-	22	178	-	5,159	1,210	-	-	7,056	76.03%	
25	BH	13,721	3,332	0	2	397	-	9,971	-	-	-	10,545	76.86%	
26	Premium Assistance Program	7	-	-	-	-	-	-	-	-	7	-	0.00%	
27	Subtotal	895,081	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	-	-	-	-	-	274,931	-	-	-	189,751	69.02%	
29	MI Via Waivers (DOH)	24,533	-	-	-	-	-	24,533	-	-	-	16,839	68.64%	
30	MI Via Waiver (D&E)	15,280	-	-	-	-	-	15,280	-	-	-	10,407	68.11%	
31	MI Via Waiver B1	5,860	-	-	-	-	-	5,860	-	-	-	4,019	68.59%	
32	Misc. Waivers	1,019	-	-	-	-	-	1,019	-	-	-	705	69.21%	
33	Subtotal	321,622	-	-	-	-	-	321,622	9,325	-	-	221,721	68.94%	
34	Physical Health MCO 1H	603,869	5,803	2,926	-	24,354	-	570,786	-	-	-	422,348	69.94%	
35	Behavioral Health MCO 1H	126,866	500	-	-	5,685	-	120,681	-	-	-	88,473	69.74%	
36	COLTS 1H	453,404	5,511	-	350	-	-	447,542	-	-	-	315,833	69.66%	
37	State Coverage Insurance 1H	102,833	1,886	-	-	18,662	-	82,181	-	3	-	72,611	70.61%	
38	Subtotal	1,286,972	13,800	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	69.90%	
41	Centennial Care 2H - Behavioral Health	144,295	500	-	94	6,347	-	137,354	-	-	-	100,601	69.73%	
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	92,379	4,214	-	-	-	-	78,350	-	9,834	-	58,393	63.21%	
45	Medicare Part D	25,628	-	-	-	-	-	-	-	25,628	-	-	0.00%	
46	Subtotal	118,705	4,214	-	-	-	-	78,050	-	35,481	-	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	13,272	-	-	-	-	1,091	-	-	-	14,027	97.66%	
52	Health Home	-	-	-	-	-	-	-	-	-	-	-	-	-
53	Insurer's Fee	24,425	-	-	-	-	612	-	23,814	-	-	16,959	69.45%	
54	Woodwork (Children)	-	-	-	-	-	-	-	-	-	-	-	-	-
55	MAGI Impact (Children)	-	-	-	-	-	-	-	-	-	-	-	-	-
56	Woodwork (Aged)	-	-	-	-	-	-	-	-	-	-	-	-	-
57	Subtotal	38,789	13,272	-	-	-	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	6,525	54,055	-	2,937,681	72.75%	

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 mandated 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 Share Revenues:	HSD			
	Budget	Billed Amount	Collection YTD	HSD Projection
66 Department of Health (Line 27 & 28) ⁹	100,412	57,172	56,406	100,412
68 Department of Health Additional Need / (Surplus)	-	-	-	(6,931)
69 Department of Health for Early Intervention	5,500	4,452	3,870	7,500
70 Department of Health for FQHCs	500	482	482	482
71 Department of Health for EC	1	-	-	1
72 Children, Youth and Families	-	-	-	-
73 County Supported Medicaid Fund	26,426	20,009	18,739	26,426
74 Tobacco Settlement Revenue, Base ¹¹	9,220	-	3,842	5,016
75 Tobacco Settlement Revenue	-	-	-	-
76 Total Operating Transfers In	142,059	82,115	83,339	132,905
77 UNM	-	-	-	-
78 UNM SCI KGT	6,403	-	9,018	9,018
79 School Based Health Services (Part of Line 16)	4,091	1,673	1,131	3,452
80 Physician UPL UNM	2,811	-	992	3,380
81 Sole Community Provider Hospital Fund ¹²	97,276	-	22,675	48,717
82 UNM SCPH KGT	-	-	-	16,323
83 Drug Rebates	1,251	-	28,685	40,225
84 Fraud	872	-	244	2,372
85 Tort and Insurance Carrier Refund	-	-	140	239
86 Income Diversion Trust	486	-	416	486
87 Buy-In Recovery	215	-	111	215
88 Cost Settlement	3,388	-	824	3,388
89 Estate Recovery	9	-	7	9
90 Misc. Revenue	-	-	175	343
91 HMS-RAC-TPL/Subrogation	-	-	685	2,000
92 Total Other Revenues	116,802	1,673	65,103	130,168
93				
94 General Fund Need				874,840
95				
96 FY14 Op Bud 3				917,888
97				
98 State Revenue Surplus / (Shortfall)				43,048

STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
Medical Assistance Division

DRAFT SCENARIO

FY15 Inland 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	Projected Lump Sum	Others	FY 15 Title XIX Projection	% Change from FY 14	FY 14 Title XIX Projection	FY 15 Title XIX Projection	FY 15 Title XIX Projection	Nov 2013 Projection	Change from Previous	Line No.
		C	D																
1	Inpatient Hospital	84,383	84,383	0.00%	-	-8.02%	(6,765)	0.00%	-	31,195	-	31,195	-8.02%	919	385	78,093	54,831	23,173	1
2	DOSH	31,393	-	-	-	-	-	-	-	7,697	-	31,195	-0.63%	-	-	31,195	31,195	-	2
3	HOME	7,315	(255)	-	-	-	-	-	-	32,081	-	7,442	1.74%	-	-	7,442	7,697	(255)	3
4	IME	33,666	-	-	-	-	-	-	-	34,445	-	32,081	-4.71%	-	-	32,081	32,081	-	4
5	Safety Net Care	34,445	-	-	-	-	-	-	-	34,445	-	34,445	0.00%	-	-	34,445	68,889	(34,445)	5
6	HCII Pool	34,445	-	-	-	-	-	-	-	1,412	-	1,412	-95.90%	-	-	1,412	1,412	-	6
7	Physician Services	46,116	-	-	-	-13.14%	(4,621)	0.00%	-	5,477	-	36,019	-21.90%	649	495	36,513	30,330	6,183	7
8	HIS Hospital	84,855	-	-	-	4.83%	4,003	0.00%	-	-	-	90,504	6.66%	-	-	90,504	90,530	(26)	8
9	ICF MR	14,039	-	-	-	-0.64%	(159)	0.00%	-	-	-	24,774	-0.64%	-	-	24,774	25,376	(601)	9
10	Clinic Services	3,934	-	-	-	0.45%	63	0.00%	-	-	-	14,102	0.45%	388	973	15,075	13,790	1,285	10
11	Federal Qualified Health Centers	29,904	-	-	-	-1.05%	(42)	0.00%	-	-	-	3,982	1.22%	102	108	4,089	2,682	1,408	11
12	Other Practitioners	34,001	-	-	-	-21.95%	(6,559)	0.00%	-	-	-	23,945	-21.95%	721	708	24,663	20,442	4,221	12
13	Outpatient Hospital	75,723	-	-	-	-14.79%	(5,028)	0.00%	-	-	-	28,973	-14.79%	1,472	1,049	29,474	22,621	6,853	13
14	Others	22,526	-	-	-	-19.06%	(12,564)	0.00%	-	-	-	53,346	-29.55%	0	798	54,395	51,075	3,320	14
15	BH	561,676	-	-	-	21.85%	4,523	0.00%	-	112,307	-	486,689	13.85%	4,818	5,014	481,704	19,989	8,223	15
16	DD and MF (DOH)	274,855	-	-	-	-10.79%	(29,386)	0.00%	-	69	-	302,968	10.23%	-	-	302,968	297,241	5,727	16
17	MI (Via Whivers (DOH))	22,625	-	-	-	40.09%	9,071	0.00%	-	47	-	33,134	37.62%	-	-	33,134	24,558	8,576	17
18	MI (Via Whivers (DOH))	299,076	-	-	-	13.03%	38,457	0.00%	-	116	-	336,302	11.69%	-	-	336,302	321,799	14,503	18
19	Subtotal	1,294,900	-	-	-	10.64%	125,999	3.94%	43,731	11,695	121,003	1,478,810	14.20%	51,971	67,881	1,546,990	1,448,992	97,998	19
20	Centennial Care - Physical Health	1,174,723	-	-	-	4.94%	44,790	2.18%	20,776	11,023	44,540	1,024,478	7.53%	11,807	15,604	1,026,478	1,047,108	(16,630)	20
21	Centennial Care - LTSS	86,452	-	-	-	10.15%	26,411	2.60%	6,884	1,000	975	293,596	12.41%	11,807	15,604	309,201	321,085	(11,884)	21
22	Centennial Care - Behavioral Health	261,176	-	-	-	0.97%	197,159	2.80%	71,381	23,628	167,518	2,800,804	11.46%	63,778	83,485	2,864,369	2,817,185	47,184	22
23	Subtotal	2,312,529	-	-	-	0.00%	-	0.00%	-	700	-	700	0.00%	-	-	700	729	(29)	23
24	Medicare Part A	700	-	-	-	0.00%	-	0.00%	-	-	-	99,257	7.45%	-	-	99,257	99,634	(377)	24
25	Medicare Part B	92,378	-	-	-	7.45%	6,879	0.00%	-	-	-	25,584	-0.17%	-	-	25,584	25,212	372	25
26	Medicare Part D	25,628	-	-	-	-0.48%	(122)	0.00%	-	-	-	125,541	5.76%	-	-	125,541	125,575	(34)	26
27	Subtotal	118,705	-	-	-	5.69%	6,757	0.00%	-	2,000	-	2,000	-	-	-	2,000	9,000	(7,000)	27
28	Utilization	7,000	-	-	-	-	-	-	-	9,000	-	9,000	-	-	-	9,000	9,000	-	28
29	HT	9,533	-	-	-	-	-	-	-	2,000	-	2,000	-	-	-	2,000	2,000	-	29
30	Contracts	19,245	-	-	-	-	-	-	-	11,000	-	11,000	-	-	-	11,000	11,000	-	30
31	Subtotal	35,778	-	-	-	-	-	-	-	11,000	-	11,000	-	-	-	11,000	12,000	(1,000)	31
32	Rate Increase for Primary Care Services	13,816	-	-	-	10.79%	1,491	0.00%	-	-	-	15,307	10.79%	-	-	15,307	15,307	-	32
33	Health Home	24,675	-	-	-	-	-	-	-	-	-	12,000	-	-	-	12,000	12,000	-	33
34	Insurer's Fee	84,241	-	-	-	0.00%	-	0.00%	-	12,000	-	12,000	-	-	-	12,000	12,000	-	34
35	Subtotal	469,079	-	-	-	5.21%	22,556	5.98%	59,463	61,297	1,035,570	1,035,570	120.77%	17,551	-	1,035,570	820,108	215,463	35
36	Newly Eligibles - Physical Health	31,009	-	-	-	139.10%	43,134	3.68%	2,728	-	-	76,871	147.90%	-	-	76,871	79,266	(2,395)	36
37	Newly Eligibles - Behavioral Health	500,088	-	-	-	119.79%	502,448	5.82%	62,191	-	-	1,112,442	112.45%	-	-	1,112,442	899,374	213,068	37
38	Subtotal	4,066,093	-	-	-	21.75%	798,113	2.99%	133,572	147,051	243,457	4,900,166	20.51%	86,247	88,489	4,988,654	4,673,174	315,480	38
39	Grand Total	4,066,093	-	-	-	21.75%	798,113	2.99%	133,572	147,051	243,457	4,900,166	20.51%	86,247	88,489	4,988,654	4,673,174	315,480	39

- Notes:
- (Row 14) Others contains: Transportation, Lab/X-Ray, Prosthetics, RHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, PACE, JCO.
 - (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.
 - (Line 20 - Column O) The Title XIX projection for FY14 includes the portion from the SCJ program which ended on Dec. 31, 2013.
 - (Line 34) Insurer's Fee represents 1.9% 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. A	Description B	Federal Medicaid Expenditure Type and Federal Financial Participation Rates											
		FY 15 Projection C	HIT, IHS, Refugees & Medicaid Expansion (100% FFP) ¹ D	Health Homes, Sterilization & Family Planning Services (90% FFP) ² E	Breast & Cervical Cancer Program (EFMAP) ³ F	Title XXI CHIP (EFMAP) ⁴ G	Utilization Review (75% FFP) ⁵ H	Title XIX Medicaid (FMAP) ⁶ I	Admin and Fees (50% FFP) ⁷ J	Non-Federal Financial Participation Expenses (0% FFP) ⁸ K	Federal Share (\$000) L	% of Composite Federal Share 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	-	-	23,308	69.54%	
5	Safety Net Care	34,445	-	-	-	-	-	34,445	-	-	23,953	69.54%	
6	HQI Pool	1,412	-	-	-	-	-	1,412	-	-	982	69.54%	
7	Physician Services	36,513	3,046	-	213	495	-	35,547	-	312	26,454	72.43%	
8	IHS Hospital	90,504	90,504	-	-	-	-	-	-	-	90,504	100.00%	
9	CF MR	24,774	-	-	-	-	-	24,774	-	-	17,233	69.56%	
10	Clinic Services	15,075	57	-	-	973	-	13,945	-	100	10,533	69.87%	
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	-	-	23,898	77.49%	
16		Subtotal	493,704	125,390	1,842	720	5,008	-	338,301	-	453	380,678	77.42%
17	DD and MF (DOH)	302,968	-	-	-	-	-	-	-	-	-	-	
18	Mi Via Waivers (DOH)	33,334	-	-	-	-	-	782	31,614	938	23,052	69.16%	
19		Subtotal	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		Subtotal	2,884,369	23,628	-	3,289	83,485	-	2,778,767	-	200	2,020,142	70.04%
24	Medicare Part A	700	-	-	-	-	-	700	-	-	484	69.17%	
25	Medicare Part B	99,257	4,595	-	-	-	-	84,351	-	10,311	63,143	63.63%	
26	Medicare Part D	25,584	-	-	-	-	-	-	-	25,584	-	0.00%	
27		Subtotal	125,541	4,595	-	-	-	85,051	-	35,895	63,627	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		Subtotal	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		Subtotal	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		Subtotal	1,112,442	1,112,442	-	-	-	-	-	-	1,112,442	100.00%	
39	Grand Total	4,984,664	1,274,625	13,842	3,998	88,493	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 ¹²	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-TPJ Subrogation	-	2,000
67 Total Other Revenues	90,690	89,984
68		
69 General Fund Need	-	907,950
70		
71 SB 313/HB 2	-	891,000
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 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 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		Number of Eligibles in SLMBs & CHS *		Number of Eligibles in State Coverage Insurance and Adult Expansion (SCL)/Adults (SCL)/Adults (SCL)		Number of Enrollees in PAK and PAH		Totals		All Eligible Children ³			
	(1) Medicaid Eligibility	(2) Eligibles	(1) Actuals	(2) Estimates	(1) Actuals	(2) Estimates	(1) Actuals	(2) Estimates	(1) Actuals	(2) Estimates	(1) Medicaid Eligibility	(2) Eligibles		
	Report ⁴	Estimates ¹	% Change		Expansion ²	Expansion ²	Other	Other	Actuals	Estimates	Report ⁴	Estimates	% Change	
Jul-12	521,433	520,472	-0.18%	11,229	38,865	38,865	125		571,652	570,681	337,703	336,985	-0.21%	
Aug-12	524,035	524,487	0.77%	11,277	38,964	38,964	118		574,394	574,656	339,102	338,820	0.54%	
Sep-12	524,277	525,050	0.11%	11,294	38,780	38,780	114		574,465	575,238	338,582	339,028	0.08%	
Oct-12	528,097	527,203	0.41%	11,302	38,709	38,709	109		576,217	577,323	339,092	339,408	0.11%	
Nov-12	526,414	527,255	0.01%	11,317	38,657	38,657	108		576,496	577,337	338,895	339,121	-0.08%	
Dec-12	525,751	528,216	0.16%	11,317	38,482	38,482	106		578,121	578,121	337,835	339,295	0.05%	
Jan-13	528,448	528,485	0.05%	11,320	38,211	38,211	102		578,081	578,118	338,932	338,696	-0.18%	
Feb-13	527,270	529,214	0.14%	11,359	37,941	37,941	102		578,672	578,616	337,773	338,081	-0.18%	
Mar-13	527,219	529,366	0.03%	11,405	37,736	37,736	100		578,480	578,607	337,087	338,192	0.03%	
Apr-13	527,929	529,162	-0.04%	11,413	37,509	37,509	99		578,950	578,183	338,922	337,107	-0.32%	
May-13	527,481	530,108	0.18%	11,416	37,308	37,308	96		578,301	578,928	336,071	337,020	-0.03%	
Jun-13	527,073	528,886	-0.23%	11,385	37,059	37,059	90		577,607	577,420	335,170	335,513	-0.45%	
Jul-13	528,517	530,044	0.22%	11,883	36,839	36,839	89		577,328	578,855	335,411	335,544	0.01%	
Aug-13	528,651	531,985	0.37%	11,065	36,540	36,540	88		577,524	579,678	335,629	335,926	0.11%	
Sep-13	528,023	532,123	0.03%	11,098	36,309	36,309	84		575,514	579,614	333,533	335,494	-0.13%	
Oct-13	535,956	537,423	1.00%	11,012	36,031	36,031	81		583,080	584,547	334,750	333,312	-0.65%	
Nov-13	544,288	544,288	1.26%					80					0.60%	
Dec-13	550,619	550,619	1.16%					77					-1.06%	
Jan-14	526,696	526,696	-4.34%	11,098					597,122	597,122	331,763	331,763	1.64%	
Feb-14	523,054	523,054	-0.69%	11,146					635,739	635,739	337,202	337,202	0.13%	
Mar-14	527,591	527,591	0.87%	11,194					638,243	638,243	337,651	337,651	0.48%	
Apr-14	527,435	527,435	-0.03%	11,242					650,926	650,926	339,262	339,262	0.44%	
May-14	528,899	528,899	0.26%	11,290					657,916	657,916	340,771	340,771	0.34%	
Jun-14	530,869	530,869	0.39%	11,338					666,526	666,526	341,920	341,920	0.37%	
Jul-14	534,578	534,578	0.66%	11,386					675,742	675,742	343,186	343,186	0.75%	
Aug-14	538,110	538,110	0.66%	11,434					681,894	681,894	345,769	345,769	0.72%	
Sep-14	541,281	541,281	0.59%	11,482					687,970	687,970	348,254	348,254	0.65%	
Oct-14	540,827	540,827	-0.08%	11,530					693,685	693,685	350,567	350,567	0.64%	
Nov-14	538,841	538,841	-0.35%	11,578					695,775	695,775	352,820	352,820	0.94%	
Dec-14	539,637	539,637	0.13%	11,626					698,433	698,433	354,169	354,169	0.78%	
Jan-15	514,272	514,272	-4.70%	11,674					699,673	699,673	357,487	357,487	0.41%	
Feb-15	515,605	515,605	0.26%	11,722					676,852	676,852	360,276	360,276	0.75%	
Mar-15	518,710	518,710	0.60%	11,770					680,729	680,729	361,744	361,744	0.63%	
Apr-15	521,238	521,238	0.49%	11,818					686,378	686,378	366,743	366,743	0.54%	
May-15	523,364	523,364	0.41%	11,866					696,120	696,120	368,706	368,706	0.74%	
Jun-15	526,483	526,483	0.59%	11,914					701,762	701,762	371,418	371,418		
				11,962										
					183,337	183,337								
					158,346	158,346								
					155,850	155,850								
					150,858	150,858								
					148,362	148,362								
					145,866	145,866								
					143,370	143,370								
					140,874	140,874								
					138,378	138,378								
					135,882	135,882								
					97,887	97,887								
					104,985	104,985								
					112,083	112,083								
					119,181	119,181								
					126,289	126,289								
					133,387	133,387								

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://insurenemexico.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 QI1s.
6. Specified Low-Income Medicare Beneficiaries (SLIMBs) and Qualified Individuals (QI1s).
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

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