

**COLORADO GENERAL ASSEMBLY  
JOINT BUDGET COMMITTEE**



**SUPPLEMENTAL REQUESTS FOR FY 2010-11**

**DEPARTMENT OF HUMAN SERVICES**

**(Services for People with Disabilities)**

**JBC Working Document - Subject to Change  
Staff Recommendation Does Not Represent Committee Decision**

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 (Services for People with Disabilities)  
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**Prioritized Supplementals**

**Supplemental Request, Department Priority #2  
Reallocation of Resources**

	<b>Request</b>	<b>Recommended Placeholder</b>
Total	<u>\$7,995,086</u>	<u>\$30,761,732</u>
General Fund	(4,708,322)	(4,708,322)
Medicaid	12,703,408	35,470,054
<i>General Fund</i>	4,898,250	14,283,037
<i>CF - Health Care Expansion Fund</i>	0	0
<i>Federal Funds</i>	7,805,158	21,187,016
<i>Net General Fund</i>	189,928	9,382,358

<b>Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria?</b> [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	<b>YES</b>
JBC staff and the Department agree that this request is the result of <i>new data that was not available when the original appropriation was made</i> , specifically regarding utilization of community-based services for people with developmental disabilities.	

**Department Request:** The Department requests increases in spending authority to address projected overexpenditures in residential services for adults, called Adult Comprehensive Services, and in Case Management. The projected overexpenditure of Adult Comprehensive Services is primarily attributable to reassessments of the needs of people receiving services using the Supports Intensity Scale (SIS), resulting in higher service plan authorization limits and rates. The Department believes the increase in Case Management expenditures is attributable to increases in the number of people served and the units of service per person in the Early Intervention Services program. For a more detailed discussion of the reasons for the projected overexpenditures please see the staff budget briefing.

The projected overexpenditures are partially offset by a projected underexpenditure of adult nonresidential services, called Supported Living Services. At the direction of the federal government the Department recently switched from block grant funding for services for people with disabilities

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to funding on a fee-for-service basis. The standardization of Supported Living Services rates and service limits statewide resulted in some people being able to purchase more services and some people less, and changes in the types and quantities of services people could purchase. Not all people authorized to purchase more services in the new fee-for-service system have taken advantage and maximized expenditures. Some people may be having difficulty finding providers able and willing to deliver services at the statewide standardized rates. Also, providers report that billing the maximum for some services is difficult, or even unrealistic, due to travel time, vacations, and other non-billable hours. All of these factors have contributed to underutilization of the appropriation.

To defray the cost of the projected overexpenditures, the Department eliminated or reduced state-funded services. In Adult Comprehensive Services the Department eliminated 66 state-funded placements beginning in October 2010. The Department estimates that 16 of the people previously receiving state-funded services can qualify for Medicaid and proposes 16 new Medicaid-funded placements beginning in March 2011. Until Medicaid authorization can be completed for this population, and for the other 50 people the Department did not expect to qualify for Medicaid, the Department is providing enhanced nonresidential services using General Fund appropriated for the Supported Living Services program. The Department is paying for the enhanced nonresidential services from funds that become available through turnover and nobody is being cut off from existing services, but the policy reduces the number of people on the wait list who might otherwise have received Supported Living Services during the fiscal year. For Supported Living Services the Department applied a 4.5 percent community provider rate reduction to state-funded services. For Family Support Services (grants to families, primarily those with school-age children, for one-time and short-duration costs such as medical equipment, home modifications, or respite care, to supplement school-based services) the Department reduced FY 2010-11 grants by more than 50 percent. Based on the original projection of overexpenditures, these measures nearly eliminated the need for new General Fund, resulting in a net increase of only \$189,928.

**Staff Recommendation: Staff recommends that the Committee use a placeholder of \$9.6 million General Fund for budget planning purposes to estimate the cost of this supplemental.** The staff estimate is significantly higher than the Department's request based on more recent data about the magnitude of the overexpenditures.

The Committee could introduce a bill to provide the funding with the supplemental package of bills, but staff recommends waiting to introduce the supplemental with the FY 2011-12 budget package. This is consistent with the staff recommendation for how to handle changes to the budget for the Department of Health Care Policy and Financing that are based on enrollment and utilization patterns, and it may reduce the number of times that the same line items need to be amended and explained. Staff expects between one and two more months of data between now and figure setting, depending on when figure setting is scheduled for this Department, which may somewhat change

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the total projected expenditures. Also, staff expects additional information about whether some new ideas being considered by the Department for how to reduce and recover rates will be acceptable to Medicaid administrators, and estimates of how much these ideas might save in FY 2010-11.

The Department's limited experience with fee-for-service billing, and resulting limited set of historical data, makes accurately forecasting expenditures challenging. Staff expects that the services provided and number of people served should not vary that much from one month to the next. However, actual billings do vary from one month to the next. Medicaid allows providers up to 120 days after services are delivered to submit bills, and this can be extended if there are errors or disputes. The Department estimates that a delay of 90 days between service delivery and billing is typical for this group of providers. If a few providers, or one large provider, become more or less timely in submitting bills, which might happen with a new automated billing system, or administrative staff turnover, it can skew the data for a month. Providers also might accelerate billings to address cash flow needs. For example, when the Governor announced that Medicaid payments would be delayed for two weeks at the end of FY 2009-10 a number of providers accelerated the submission of billings to avoid a significant cash flow problem with a one-month dip in their revenues. The staff estimated overexpenditures are based on a simple straight-line projection from the first six months of data, with a modification for the two weeks of Medicaid payments that were delayed from FY 2009-10 into FY 2010-11, and a modification for one month of catch-up payments submitted by Developmental Pathways explained below.

In addition to the reassessments of client needs in the Adult Comprehensive Services Program and increased case management for Early Intervention identified in the original supplemental request, the Department has identified four more factors contributing to the projected overexpenditures. First, the Department is filling vacant beds that become available due to turnover faster than in prior years. Unlike in prior years, the Department didn't receive set aside funding in FY 2010-11 for people who need to transition from child welfare to Adult Comprehensive Services, or for emergency placements in Adult Comprehensive Services due to a sudden change in circumstances for a person with disabilities or their care takers. The Department had to make room in the system for these people using the placements that became available through turnover. To ensure there were sufficient placements, the Department took responsibility for filling vacant positions, rather than delegating this duty to Community Centered Boards. The Department is filling vacant positions with emergency and transition placements significantly faster than vacant positions have been filled from wait lists in the past. As a result, more days of service are getting billed than assumed in the appropriation, which the Department estimates is costing an additional \$8.3 million.

Second, one large provider changed billing practices. Developmental Pathways had been submitting bills approximately 3 months after service delivery. The provider contracted with Denver Options to submit billings in a more timely fashion and caught up by approximately a month so that it now

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submits bills an average of 2 months after service delivery. The catch-up payments are approximately \$3.5 million, with \$2.5 million for Adult Comprehensive Services and \$1.0 million for Supported Living Services.

Third, the Department underestimated the amount of behavioral services that would be billed. Behavioral services are not currently capped, and the definitions of the conditions and services that qualify for behavioral services are broad. The Department estimates billings for behavioral services are trending \$1.6 million higher than the Department budgeted.

Fourth, the Department pulled out transportation costs from service plan authorization limits without adjusting rates accordingly. People were underutilizing services because they couldn't, or didn't want to, fit transportation within their service plan authorization limit. To correct the problem, the Department decided to allow transportation to be billed outside the service plan authorization limits. However, the Department didn't adjust rates downward to account for the fact that transportation would be billed outside the service plan authorization limits, generating an estimated \$1.0 million more in billings.

To contain costs, the Department is exploring several possible changes to service plans and rates. The Department has not committed to any of these changes, but is considering the following, among other things:

- Narrowing the definitions of conditions and services that qualify for behavioral services funding, and capping behavioral services;
- Lowering caps on day habilitation services;
- Capping targeted case management, and/or converting to a rate per month rather than the current rate per 15 minutes of service provided; and,
- Reducing rates for Adult Comprehensive Services.

The Department is also reevaluating SIS scores that were increased and considering trying to recover funds from Community Centered Boards if errors are found in the SIS evaluations. The Department will be refining the proposals and discussing them with Medicaid administrators over the next few weeks before it can assess the feasibility and cost savings.

Due to the delay between when services are provided and billed, even an immediate change to service plans or rates may have minimal impacts on FY 2010-11 expenditures. Recovering funds based on errors in SIS evaluations could potentially have a greater impact on FY 2010-11 expenditures, since the recoveries would be retroactive to the time when the error was made. However, the magnitude of SIS errors that would qualify for recovery is unknown. Also, appeal procedures may delay some of the fiscal impact to FY 2011-12.

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The table below summarizes the components of the staff recommended General Fund placeholder. The month-by-month projection of Medicaid expenditures can be found in the appendix at the end of this document.

	Total	General Fund	Medicaid	Net GF
Total projected Medicaid overexpenditures	\$35,024,710	\$0	\$35,024,710	\$14,090,680
Eliminate 66 General Fund Adult Comprehensive Service Placements beginning in October 2010	(1,237,844)	(1,237,844)	0	(1,237,844)
Eliminate associated General Fund Case Management	(51,833)	(51,833)	0	(51,833)
Add 16 Medicaid Adult Comprehensive Services Placements beginning in March 2011	433,755	0	433,755	187,351
Associated Medicaid Case Management	11,589	0	11,589	5,006
Reduce General Fund Supported Living Services by 4.5 percent beginning October 2010	(269,154)	(269,154)	0	(269,154)
Reduce Family Support Services	(3,149,491)	(3,149,491)	0	(3,149,491)
<b>TOTAL</b>	<b>30,761,732</b>	<b>(4,708,322)</b>	<b>35,470,054</b>	<b>9,574,715</b>

**Previously Approved Interim Supplemental Funding Request for Trinidad State Nursing Home**

	<b>Previously Approved</b>
Homelake Domiciliary and State and Veterans Nursing Homes Program Costs	<u>\$471,873</u>
General Fund	471,873

**Description of Supplemental:** The Department requested General Fund for the difference between projected revenues and expenditures of the Trinidad State Nursing Home. The request followed a delay in the disposition of the property to allow a vote on a tax plan for local government operation of the facility. Funding the difference between projected revenues and expenses with General Fund prevented the Veterans Nursing Homes from subsidizing the Trinidad State Nursing Home. The original supplemental was based on projected revenues and expenditures through April. The Department will transfer ownership of the property considerably sooner. The local initiative failed, but the Department completed a contract with the private company C & G Health Care Management, Inc. to take over operation January 31, assuming no complications with the environmental assessment and land survey. C & G Health Care Management, Inc. already operates 3 other facilities

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in Colorado and a facility in Arizona and in New Mexico. The Department indicated it has a track record of high quality service, including a recent award by a national professional association. The Department has not yet updated expenditure estimates based on the earlier sale date. The rules governing interim supplementals suggest that the JBC needs to introduce a bill with the originally approved General Fund amount, although it could amend the bill to reflect a smaller amount when a new cost estimate is available from the Department. However, staff does not believe this is necessary, since the JBC's approval of the supplemental also included a condition that the General Fund be repaid the full amount of the supplemental from the proceeds of the sale of the Trinidad State Nursing Home.

The value of the sale is \$3.25 million. From this amount the Department needs to pay the Community Colleges \$2.0 million for their interest in the property. The original gift of the land to the state included a provision that if it ceased to be used for a nursing home the ownership reverted to the Community Colleges. The Department also needs to pay closing costs, including, among other things, accumulated leave for employees who choose not to transfer to another state position, the remaining value of an energy efficiency contract. Remaining funds will be deposited in the division's Central Fund and used for projects and programs of state nursing homes.

*The rules governing interim supplementals in Section 24-75-111 (5), C.R.S., require the Committee to introduce all interim supplementals that it approves. Staff will include this supplemental in the Department's supplemental bill.*

**Other FY 2010-11 Balancing Options**

These options are presented without staff recommendation in order to maximize the Committee's choices. The Committee may wish to consider these options now or in the future.

Numbering does not indicate priority.

<b>Options with Appropriations Impacts</b>	<b>GF</b>	<b>CF</b>	<b>RF</b>	<b>FF</b>	<b>Total</b>	<b>FTE</b>
1	913,888	0	0	0	913,888	0.0
<b>Family Support Services</b>						
Eliminate remaining unencumbered grant funds in FY 2010-11. These grants go to families for one-time and short-duration costs such as medical equipment, home modifications, or respite care. The vast majority of grant recipients have school-aged children and these funds supplement the available school-based services.						



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<b>Options with Revenue Impacts</b>	<b>GF</b>	<b>CF</b>	<b>RF</b>	<b>FF</b>	<b>Total</b>	<b>FTE</b>
1	190,492	0	0	0	190,492	0.0
<b>Family Support Loan Program</b>						
[This option requires separate legislation.]						
<p>Out of money appropriated for Family Support Services the Department created a revolving loan program authorized in Section 27-10.5-502, C.R.S. The maximum loans are \$8,000 and interest rates are typically between two and four percent, based on the investment rates earned by the State Treasurer. The population served is the same as the Family Support Services program. If the JBC introduced legislation to end the program, approximately \$190,492 is currently unencumbered and could be transferred to the General Fund in FY 2010-11. More would be available in future years as the outstanding loans are repaid.</p>						

	FY 2009-10	FY 2010-11	Fiscal Year 2010-11 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation

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**EXECUTIVE DIRECTOR: Reggie Bicha**

**Supplemental #2 - Reallocation of Resources**

*(2) Program Costs*

* Adult Comprehensive Services	<u>286,235,602</u>	<u>269,004,046</u>	<u>10,975,301</u>	<u>37,443,077</u>	<u>306,447,123</u>
General Fund	1,550,603	1,650,459	(1,237,844)	(1,237,844)	412,615
CF - client cash	30,405,852	30,798,715	0	0	30,798,715
RF - Medicaid	254,279,147	236,554,872	12,213,145	38,680,921	275,235,793
<i>GF</i>	97,668,620	90,860,726		15,596,734	106,457,460
<i>FF</i>	156,610,527	145,694,146		23,084,187	168,778,333
* Adult Supported Living Services	<u>44,974,958</u>	<u>52,317,915</u>	<u>(5,161,186)</u>	<u>(9,879,035)</u>	<u>42,438,880</u>
General Fund	7,575,159	7,974,941	(269,154)	(269,154)	7,705,787
RF - Medicaid	37,399,799	44,342,974	(4,892,032)	(9,609,881)	34,733,093
<i>GF</i>	14,365,263	17,032,136		(3,899,478)	13,132,658
<i>FF</i>	23,034,536	27,310,838		(5,710,402)	21,600,435
Early Intervention Services					
* General Fund	11,098,328	12,798,328	0	0	12,798,328
Family Support Services					
* General Fund	6,416,610	6,219,699	(3,149,491)	(3,149,491)	3,070,208
Children's Extensive Support Services					
* RF - Medicaid	7,158,025	6,576,446	(62,654)	1,297,520	7,873,966
<i>GF</i>	2,338,218	2,125,624		524,301	2,649,925

	FY 2009-10	FY 2010-11	Fiscal Year 2010-11 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
<i>CF - Health Care Expansion Fund</i>	411,179	400,389		0	400,389
<i>FF</i>	4,408,628	4,050,433		773,219	4,823,652
* Case Management and Quality Assurance	<u>21,501,608</u>	<u>22,370,389</u>	<u>5,393,116</u>	<u>5,049,660</u>	<u>27,420,049</u>
General Fund	2,979,204	3,888,010	(51,833)	(51,833)	3,836,177
RF - Medicaid	18,522,404	18,482,379	5,444,949	5,101,493	23,583,872
<i>GF</i>	7,330,617	7,444,072		2,061,481	9,505,553
<i>CF - Health Care Expansion Fund</i>	130,559	26,618		0	26,618
<i>FF</i>	11,061,228	11,011,689		3,040,013	14,051,702
* Special Purpose	<u>731,416</u>	<u>879,572</u>	<u>0</u>	<u>0</u>	<u>879,572</u>
General Fund	463,554	360,844			360,844
RF - Division of Voc. Rehab.	241,141	481,488			481,488
RF - Medicaid	26,721	37,240			37,240
<i>GF</i>	13,361	18,620			18,620
<i>FF</i>	13,361	18,620			18,620
<b>Subtotal - (2) Program Costs</b>	<u>378,116,547</u>	<u>370,166,395</u>	<u>7,995,086</u>	<u>30,761,732</u>	<u>400,928,127</u>
General Fund	30,083,458	32,892,281	(4,708,322)	(4,708,322)	28,183,959
CF - client cash	30,405,852	30,798,715	0	0	30,798,715
RF - Division of Voc. Rehab.	241,141	481,488	0	0	481,488
RF - Medicaid	317,386,096	305,993,911	12,703,408	35,470,054	341,463,965
<i>GF</i>	121,716,079	117,481,179	4,898,250	14,283,037	131,764,216
<i>CF - Health Care Expansion Fund</i>	541,738	427,007	0	0	427,007
<i>FF</i>	195,128,279	188,085,725	7,805,158	21,187,016	209,272,742
<i>Net General Fund</i>	151,799,537	150,373,460	189,928	9,574,715	159,948,175

	FY 2009-10	FY 2010-11	Fiscal Year 2010-11 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation

**Previously Approved Interim Supplemental - - Funding Request for Trinidad State Nursing Home**

(E) Homelake Domiciliary and State and Veterans Nursing Homes

Program Costs	54,428,011	54,428,011	471,873	471,873	54,899,884
FTE	<u>673.4</u>	<u>673.4</u>	<u>0.0</u>	<u>0.0</u>	<u>673.4</u>
General Fund	0	0	471,873	471,873	471,873
CF - client cash	42,453,849	42,453,849	0	0	42,453,849
Federal Funds	11,974,162	11,974,162	0	0	11,974,162

**Totals Excluding Pending Items**

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Totals for ALL Departmental line items	545,662,925	555,822,985	8,466,959	31,233,605	587,056,590
FTE	<u>1,827.2</u>	<u>1,896.2</u>	<u>0.0</u>	<u>0.0</u>	<u>1,896.2</u>
General Fund	37,063,677	39,882,497	(4,236,449)	(4,236,449)	35,646,048
Cash Funds	83,410,570	87,727,807	0	0	87,727,807
Reappropriated Funds	369,472,201	362,987,333	12,703,408	35,470,054	398,457,387
Federal Funds	55,716,477	65,225,348	0	0	65,225,348
<i>Net General Fund</i>	<i>177,856,145</i>	<i>174,979,796</i>	<i>661,801</i>	<i>10,046,588</i>	<i>185,026,384</i>

Key: N.A. = Not Applicable or Not Available

Adult Comprehensive Services	Medicaid	General Fund	HCEF	Federal Funds	Enhanced Match Rate	Eligible for Enhanced
2 weeks from 09-10	2,670,369	1,028,969		1,641,400	61.59%	98.94%
July	24,384,093	9,395,887		14,988,206	61.59%	98.94%
August	22,573,577	8,698,243		13,875,334	61.59%	98.94%
September	21,382,225	8,239,181		13,143,043	61.59%	98.94%
October	23,958,207	9,231,781		14,726,426	61.59%	98.94%
November	23,384,431	9,010,689		14,373,742	61.59%	98.94%
December	22,968,487	8,850,414		14,118,073	61.59%	98.94%
January	22,691,836	9,376,939		13,314,898	58.77%	98.94%
February	22,691,836	9,376,939		13,314,898	58.77%	98.94%
March	22,691,836	9,376,939		13,314,898	58.77%	98.94%
April	22,691,836	9,801,269		12,890,568	56.88%	98.94%
May	22,691,836	9,801,269		12,890,568	56.88%	98.94%
June	22,691,836	9,801,269		12,890,568	56.88%	98.94%
TOTAL FY 10-11	274,802,038	110,960,817	0	163,841,220		
Appropriation	236,554,872	90,860,726	0	145,694,146		
Change to match rate	0	4,690,708	0	(4,690,708)		
Revised for match rate	236,554,872	95,551,434	0	141,003,438	59.71%	98.94%
Over/(Under) Approp Percent	38,247,166 16.2%	15,409,383 16.1%	0	22,837,783 16.2%		
Supported Living Services	Medicaid	General Fund	HCEF	Federal Funds	Enhanced Match Rate	Eligible for Enhanced
2 weeks from 09-10	1,059,483	408,249		651,234	61.59%	98.94%
July	2,850,528	1,098,390		1,752,138	61.59%	98.94%
August	2,788,059	1,074,319		1,713,740	61.59%	98.94%
September	3,192,276	1,230,075		1,962,201	61.59%	98.94%
October	3,178,731	1,224,856		1,953,875	61.59%	98.94%
November	3,076,003	1,185,272		1,890,731	61.59%	98.94%
December	2,780,950	1,071,579		1,709,371	61.59%	98.94%
January	2,811,091	1,161,626		1,649,465	58.77%	98.94%
February	2,811,091	1,161,626		1,649,465	58.77%	98.94%
March	2,811,091	1,161,626		1,649,465	58.77%	98.94%
April	2,811,091	1,214,193		1,596,899	56.88%	98.94%
May	2,811,091	1,214,193		1,596,899	56.88%	98.94%
June	2,811,091	1,214,193		1,596,899	56.88%	98.94%
TOTAL FY 10-11	34,733,093	14,011,946	0	20,721,147		
Appropriation	44,342,974	17,032,136	0	27,310,838		
Change to match rate	0	879,288	0	(879,288)		
Revised for match rate	44,342,974	17,911,425	0	26,431,549	59.71%	98.94%
Over/(Under) Approp Percent	(9,609,881) -21.7%	(3,899,478) -21.8%	0	(5,710,402) -21.6%		

Children's Extensive Support	Medicaid	General Fund	HCEF	Federal Funds	Enhanced Match Rate	Eligible for Enhanced
2 weeks from 09-10	272,454	104,984		167,470	61.59%	98.94%
July	624,200	240,522		383,678	61.59%	98.94%
August	634,094	244,335		389,759	61.59%	98.94%
September	815,298	314,158		501,141	61.59%	98.94%
October	635,169	244,749		390,420	61.59%	98.94%
November	635,451	244,857		390,594	61.59%	98.94%
December	592,771	228,412		364,359	61.59%	98.94%
January	656,164	271,146		385,018	58.77%	98.94%
February	656,164	271,146		385,018	58.77%	98.94%
March	656,164	271,146		385,018	58.77%	98.94%
April	656,164	283,416		372,747	56.88%	98.94%
May	656,164	283,416		372,747	56.88%	98.94%
June	656,164	283,416		372,747	56.88%	98.94%
Subtotal	7,873,966	3,180,720	0	4,693,246		
HCEF	0	(419,716)	419,716	0	59.71%	98.94%
TOTAL FY 10-11	7,873,966	2,761,004	419,716	4,693,246		
Appropriation	6,576,446	2,125,624	400,389	4,050,433		
Change to match rate	0	111,079	19,327	(130,406)		
Revised for match rate	6,576,446	2,236,703	419,716	3,920,027	59.71%	98.94%
Over/(Under) Approp Percent	1,297,520 19.7%	524,301 23.4%	0	773,219 19.7%		

Case Management	Medicaid	General Fund	HCEF	Federal Funds	Enhanced Match Rate	Eligible for Enhanced
2 weeks from 09-10	742,913	286,266	0	456,647	61.59%	98.94%
July	1,655,885	638,060	0	1,017,825	61.59%	98.94%
August	1,739,840	670,410	0	1,069,430	61.59%	98.94%
September	1,763,992	679,716	0	1,084,275	61.59%	98.94%
October	1,477,822	569,447	0	908,375	61.59%	98.94%
November	2,008,851	774,067	0	1,234,783	61.59%	98.94%
December	1,728,784	666,150	0	1,062,634	61.59%	98.94%
January	1,729,195	714,555	0	1,014,641	58.77%	98.94%
February	1,729,195	714,555	0	1,014,641	58.77%	98.94%
March	1,729,195	714,555	0	1,014,641	58.77%	98.94%
April	1,729,195	746,890	0	982,305	56.88%	98.94%
May	1,729,195	746,890	0	982,305	56.88%	98.94%
June	1,729,195	746,890	0	982,305	56.88%	98.94%
Subtotal	20,750,345	8,382,185	0	12,368,161		
QA/UR/SIS	2,821,938	1,139,863	0	1,682,075	59.71%	98.94%
HCEF	0	(27,903)	27,903	0	59.71%	98.94%
TOTAL FY 10-11	23,572,283	9,494,145	27,903	14,050,235		
Appropriation	18,482,379	7,444,072	26,618	11,011,689		
Change to match rate	0	(6,402)	1,285	5,116		
Revised for match rate	18,482,379	7,437,670	27,903	11,016,805	59.71%	98.94%
Over/(Under) Approp Percent	5,089,904 27.5%	2,056,475 27.6%	0	3,033,430 27.5%		

Special Purpose	Medicaid	General Fund	HCEF	Federal Funds	Enhanced Match Rate	Eligible for Enhanced
TOTAL	37,240	15,042	0	22,198	59.71%	98.94%
Appropriation	37,240	18,620		18,620		
Change to match rate	<u>0</u>	<u>(3,578)</u>	<u>0</u>	<u>3,578</u>		
Revised for match rate	37,240	15,042	0	22,198	59.71%	98.94%
Over/(Under) Approp	0	0	0	0		
Percent	0.0%	0.0%		0.0%		
<b>TOTALS</b>	<b>Medicaid</b>	<b>General Fund</b>	<b>HCEF</b>	<b>Federal Funds</b>		
2 weeks from 09-10	4,745,219	1,828,468	0	2,916,751		
Change to match rate	0	5,671,096	20,613	(5,691,708)		
Over/(Under) Approp	35,024,710	14,090,680	0	20,934,029		