

No.	Description	FY 18 Title XIX Projection	FY 18 Title XIX Projected Claims	A Price E	\$ Impact F	A Recipient G	\$ Impact H	A Utilization I	\$ Impact J	Projected Lump Sum K	Others L	FY 19 Title XIX Projection	% Change from FY 18 N	FY 18 Title XXI Projection	FY 19 Title XXI Projection	FY 19 TOTAL Medicaid Projection	FY18 Projection R	Change from FY18 S	No. T
1	Inpatient Hospital	77,685	77,685	0.00%	-	0.03%	20	0.00%	-	-	-	77,706	0.03%	522	527	78,233	78,208	25	1
2	DSH	31,275	-	--	-	--	-	--	-	31,275	-	31,275	0.00%	-	-	31,275	31,275	-	2
3	GME	18,926	-	--	-	--	-	--	-	18,926	-	18,926	0.00%	-	-	18,926	18,926	(1)	3
4	IME	85,625	-	--	-	--	-	--	-	85,625	-	85,625	0.00%	-	-	85,625	85,625	-	4
5	Safety Net Care	68,889	-	--	-	--	-	--	-	68,889	-	68,889	0.00%	-	-	68,889	68,889	-	5
6	HQI Pool	8,826	-	--	-	--	-	--	-	12,012	-	12,012	36.10%	-	-	12,012	8,826	3,186	6
7	Physician Services	40,214	34,689	0.00%	-	2.34%	811	0.00%	-	5,525	-	41,025	2.02%	484	493	41,518	40,698	820	7
8	IHS Hospital	127,129	127,129	2.30%	2,924	0.93%	1,208	0.00%	-	-	-	131,261	3.25%	-	-	131,261	127,129	4,132	8
9	CF-ID	27,665	27,665	0.00%	-	3.32%	919	0.00%	-	-	-	28,584	3.32%	-	-	28,584	27,665	919	9
10	Clinic Services	50,938	50,938	0.00%	-	0.53%	268	0.00%	-	-	-	51,206	0.53%	1,819	1,852	53,058	52,757	301	10
11	Federal Qualified Health Centers	5,387	4,709	2.69%	127	-0.38%	(18)	0.00%	-	-	678	5,495	2.01%	101	103	5,599	5,488	111	11
12	Other Practitioners	30,944	30,944	0.00%	-	0.26%	79	0.00%	-	-	-	31,023	0.26%	1,071	1,090	32,113	32,015	98	12
13	Outpatient Hospital	42,273	42,273	0.00%	-	1.55%	654	0.00%	-	-	-	42,928	1.55%	544	554	43,482	42,818	664	13
14	PACE	11,930	11,930	0.00%	-	0.00%	-	0.00%	-	-	-	11,930	0.00%	-	-	11,930	11,930	-	14
15	Others	50,187	54,202	0.00%	-	1.74%	944	0.00%	-	(4,100)	100	51,146	1.91%	1,629	1,658	52,804	51,816	988	15
16	BH FFS	38,063	38,063	0.05%	18	-0.31%	(120)	0.00%	-	-	-	37,962	-0.27%	778	792	38,754	38,841	(87)	16
17	<b>Subtotal</b>	<b>715,957</b>	<b>500,228</b>	<b>0.61%</b>	<b>3,069</b>	<b>0.95%</b>	<b>4,766</b>	<b>0.00%</b>	<b>-</b>	<b>218,152</b>	<b>778</b>	<b>726,993</b>	<b>1.54%</b>	<b>6,949</b>	<b>7,070</b>	<b>734,063</b>	<b>722,906</b>	<b>11,157</b>	17
18	Traditional DD Waiver (DOH)	279,083	278,408	0.00%	-	-0.36%	(1,010)	0.00%	-	76	523	277,996	-0.39%	-	-	277,996	279,083	(1,087)	18
19	Mi Via DD Waiver (DOH)	92,586	88,537	0.00%	-	0.00%	-	0.00%	-	59	3,841	92,438	-0.16%	-	-	92,438	92,586	(148)	19
20	<b>Subtotal</b>	<b>371,669</b>	<b>366,945</b>	<b>0.00%</b>	<b>-</b>	<b>-0.28%</b>	<b>(1,010)</b>	<b>0.00%</b>	<b>-</b>	<b>135</b>	<b>4,364</b>	<b>370,434</b>	<b>-0.33%</b>	<b>-</b>	<b>-</b>	<b>370,434</b>	<b>371,669</b>	<b>(1,235)</b>	20
21	Centennial Care-Physical Health	1,452,027	1,420,692	0.00%	-	0.00%	-	0.74%	10,576	30,856	3,590	1,465,715	0.94%	83,004	83,622	1,549,337	1,535,031	14,306	21
22	Centennial Care-LTSS	1,073,261	1,082,520	0.00%	-	3.40%	36,828	0.75%	8,343	12,195	(18,408)	1,121,478	4.49%	257	257	1,121,735	1,098,018	23,717	22
23	Centennial Care-Behavioral Health	318,092	309,707	0.00%	-	0.37%	1,152	0.70%	2,187	3,044	6,333	322,423	1.36%	17,897	18,224	340,647	335,989	4,658	23
24	<b>Subtotal</b>	<b>2,843,380</b>	<b>2,812,919</b>	<b>0.00%</b>	<b>-</b>	<b>1.35%</b>	<b>37,979</b>	<b>0.74%</b>	<b>21,106</b>	<b>46,095</b>	<b>(8,484)</b>	<b>2,909,615</b>	<b>2.33%</b>	<b>101,158</b>	<b>102,103</b>	<b>3,011,719</b>	<b>2,969,039</b>	<b>42,680</b>	24
25	Medicare Part A	1,708	1,708	0.00%	-	1.20%	20	0.00%	-	-	-	1,728	1.20%	-	-	1,728	1,708	20	25
26	Medicare Part B	138,277	138,277	-0.72%	(996)	2.80%	3,838	0.00%	-	-	-	141,120	2.06%	-	-	141,120	138,277	2,843	26
27	Medicare Part D	48,029	48,029	2.01%	965	2.53%	1,240	0.00%	(2)	-	-	50,232	4.59%	-	-	50,232	48,029	2,203	27
28	<b>Subtotal</b>	<b>188,014</b>	<b>188,014</b>	<b>-0.02%</b>	<b>(30)</b>	<b>2.71%</b>	<b>5,098</b>	<b>0.00%</b>	<b>(2)</b>	<b>-</b>	<b>-</b>	<b>193,080</b>	<b>2.69%</b>	<b>-</b>	<b>-</b>	<b>193,080</b>	<b>188,014</b>	<b>5,066</b>	28
29	Utilization	5,000	-	--	-	--	-	--	-	-	5,000	5,000	0.00%	-	-	5,000	5,000	-	29
30	HIT	20,000	-	--	-	--	-	--	-	8,000	-	8,000	-60.00%	-	-	8,000	20,000	(12,000)	30
31	Contracts	1,970	-	--	-	--	-	--	-	1,970	-	1,970	0.00%	-	-	1,970	1,970	-	31
32	<b>Subtotal</b>	<b>26,970</b>	<b>-</b>	<b>--</b>	<b>-</b>	<b>--</b>	<b>-</b>	<b>--</b>	<b>-</b>	<b>9,970</b>	<b>5,000</b>	<b>14,970</b>	<b>-44.49%</b>	<b>-</b>	<b>-</b>	<b>14,970</b>	<b>26,970</b>	<b>(12,000)</b>	32
33	Rate Increase for Primary Care Services	-	-	--	-	--	-	--	-	-	-	-	--	-	-	-	-	-	33
34	Health Home	-	-	--	-	--	-	--	-	-	-	-	--	-	-	-	-	-	34
35	Health Insurance Providers Fee	88,338	-	--	-	--	-	--	-	-	89,732	89,732	1.58%	2,849	2,875	92,607	91,187	1,420	35
36	<b>Subtotal</b>	<b>88,338</b>	<b>-</b>	<b>--</b>	<b>-</b>	<b>--</b>	<b>-</b>	<b>--</b>	<b>-</b>	<b>-</b>	<b>89,732</b>	<b>89,732</b>	<b>1.58%</b>	<b>2,849</b>	<b>2,875</b>	<b>92,607</b>	<b>91,187</b>	<b>1,420</b>	36
37	Medicaid Expansion - Physical Health	1,321,711	1,298,423	0.00%	-	1.35%	17,491	0.74%	9,796	22,318	4,903	1,352,931	2.36%	-	-	1,352,931	1,321,711	31,220	37
38	Medicaid Expansion - Behavioral Health	119,987	116,332	0.00%	-	1.35%	1,567	0.74%	878	2,005	1,650	122,432	2.04%	-	-	122,432	119,987	2,445	38
39	<b>Subtotal</b>	<b>1,441,698</b>	<b>1,414,755</b>	<b>-</b>	<b>-</b>	<b>1.35%</b>	<b>19,058</b>	<b>0.74%</b>	<b>10,673</b>	<b>24,323</b>	<b>6,553</b>	<b>1,475,363</b>	<b>2.34%</b>	<b>-</b>	<b>-</b>	<b>1,475,363</b>	<b>1,441,698</b>	<b>33,665</b>	39
40																			40
41	<b>Additional Cost Containment</b>	<b>-</b>	<b>-</b>	<b>na</b>	<b>-</b>	<b>na</b>	<b>-</b>	<b>na</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>--</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	41
42																			42
43																			43
44	<b>Grand Total</b>	<b>5,676,027</b>	<b>5,282,861</b>	<b>0.06%</b>	<b>3,038</b>	<b>1.25%</b>	<b>65,892</b>	<b>0.59%</b>	<b>31,778</b>	<b>298,676</b>	<b>97,943</b>	<b>5,780,188</b>	<b>1.84%</b>	<b>110,956</b>	<b>112,049</b>	<b>5,892,236</b>	<b>5,811,482</b>	<b>80,754</b>	44

Notes:

- (Line 10) 1. (Line 10) Clinic Services consists primarily of Medicaid School-Based Services (MSBS) with small amounts also going to clinics providing a variety of services.
- (Line 15) Others contains: Transportation, Lab/X-Ray, Prosthetics, RHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, Maintenance, Family Planning, PCO .
- (Lines 21-23, 36-37 - Column L) Others under the managed care projection lines reflect the additional cost of NMMIP.

FY 19 Trend Model with Centennial Care and Medicaid Expansion (\$000s)

No.	Description	Federal Medicaid Expenditure Type and Federal Financial Participation Rates														
		FY 19 Projection C	HIT, IHS, Refuges (100% FFP) <sup>1</sup> D	Medicaid Expansion (94% FFP) <sup>2</sup> E	Medicaid Expansion (93% FFP) <sup>3</sup> F	Health Homes, Sterilization & Family Planning Services (90% FFP) G	Breast & Cervical Cancer Program (EFMAP) <sup>4</sup> H	Title XXI CHIP (FMAP) I	Utilization Review (75% FFP) <sup>6</sup> J	Title XIX Medicaid (FMAP) <sup>7</sup> K	Admin and Fees (50% FFP) <sup>8</sup> L	Non-Federal Financial Participation Expenses (0% FFP) <sup>9</sup> M	Federal Share N	% of Composite Federal Share O		
1	Inpatient Hospital	78,233	411	13,793	14,943	187	48,372	-	-	-	-	62,727	80.18%			
2	DSH	31,275	-	-	-	-	-	-	-	-	-	31,275	72.16%			
3	GME	18,926	-	-	-	-	-	-	-	-	-	18,926	72.16%			
4	IME	85,625	-	-	-	-	-	-	-	-	-	85,625	72.16%			
5	Safety Net Care	68,889	-	-	-	-	-	-	-	-	-	68,889	72.16%			
6	HQI Pool	12,012	-	-	-	-	-	-	-	-	-	12,012	72.16%			
7	Physician Services	41,518	68	5,166	5,596	-	17	493	-	-	-	30,994	85	32,213	77.59%	
8	HHS Hospital	131,261	131,261	-	-	-	-	-	-	-	-	-	-	131,261	100.00%	
9	ICF-IID	28,584	-	115	125	-	-	-	-	-	-	28,344	-	20,677	72.34%	
10	Clinic Services	53,058	-	139	150	-	-	1,852	-	-	-	50,893	24	38,330	72.24%	
11	Federal Qualified Health Centers	5,599	-	591	640	-	-	103	-	-	-	4,265	-	4,302	76.85%	
12	Other Practitioners	32,113	-	402	436	-	-	1,090	-	-	-	30,185	-	23,351	72.72%	
13	Outpatient Hospital	43,482	145	6,298	6,823	-	23	554	-	-	-	29,638	-	34,216	78.69%	
14	PACE	11,930	-	-	-	-	-	-	-	-	-	11,930	-	8,609	72.16%	
15	Others	52,804	4,026	6,923	7,500	2,274	29	1,658	-	-	-	30,369	-	26	42,688	80.84%
16	BH FFS	38,754	12,357	3,296	3,571	-	2	792	-	-	-	18,726	-	9	32,862	84.80%
17	<b>Subtotal</b>	<b>734,063</b>	<b>148,268</b>	<b>36,722</b>	<b>39,783</b>	<b>2,460</b>	<b>71</b>	<b>7,070</b>	<b>499,545</b>	<b>144</b>	<b>587,627</b>	<b>80.05%</b>				
18	Traditional DD Waiver (DOH)	277,996	-	-	-	-	-	-	573	276,909	564	-	-	200,526	72.13%	
19	MI Via DD Waiver (DOH)	92,438	-	-	-	-	-	-	1,840	88,511	2,087	-	-	66,292	71.71%	
20	<b>Subtotal</b>	<b>370,434</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>2,362</b>	<b>365,421</b>	<b>2,651</b>	<b>-</b>	<b>-</b>	<b>266,818</b>	<b>72.03%</b>	
21	Centennial Care-Physical Health	1,549,337	30,613	-	-	13,696	1,212	83,622	-	1,419,951	-	244	1,128,868	72.86%		
22	Centennial Care-LTSS	1,121,735	12,195	-	-	-	-	257	-	1,109,283	-	-	812,839	72.46%		
23	Centennial Care-Behavioral Health	340,647	3,044	-	-	1,756	87	18,224	-	317,335	-	-	245,974	72.50%		
24	<b>Subtotal</b>	<b>3,011,719</b>	<b>45,851</b>	<b>-</b>	<b>-</b>	<b>15,452</b>	<b>1,299</b>	<b>102,103</b>	<b>-</b>	<b>2,846,769</b>	<b>-</b>	<b>244</b>	<b>2,188,680</b>	<b>72.67%</b>		
25	Medicare Part A	1,728	-	-	-	-	-	-	-	1,728	-	-	-	1,247	72.16%	
26	Medicare Part B	141,120	5,780	-	-	-	-	-	-	119,511	-	15,829	92,019	65.21%		
27	Medicare Part D	50,232	-	-	-	-	-	-	-	-	-	50,232	-	0.00%		
28	<b>Subtotal</b>	<b>193,080</b>	<b>5,780</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>121,239</b>	<b>-</b>	<b>66,061</b>	<b>93,266</b>	<b>48.20%</b>		
29	Utilization	5,000	-	-	-	-	-	-	5,000	-	-	-	-	3,750	75.00%	
30	HIT	8,000	8,000	-	-	-	-	-	-	-	-	-	-	8,000	100.00%	
31	Contracts	1,970	-	-	-	-	-	-	-	376	1,595	-	-	1,068	54.23%	
32	<b>Subtotal</b>	<b>14,970</b>	<b>8,000</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>5,000</b>	<b>376</b>	<b>1,595</b>	<b>-</b>	<b>-</b>	<b>12,818</b>	<b>85.63%</b>	
33	Rate Increase for Primary Care Services	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
34	Health Insurance Providers Fee	92,607	-	36,534	-	-	-	2,875	-	53,197	-	-	-	74,804	80.78%	
35	<b>Subtotal</b>	<b>92,607</b>	<b>-</b>	<b>36,534</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>2,875</b>	<b>-</b>	<b>53,197</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>74,804</b>	<b>80.78%</b>	
36	Medicaid Expansion - Physical Health	1,352,931	22,318	572,507	758,106	-	-	-	-	-	-	-	-	1,265,514	93.54%	
37	Medicaid Expansion - Behavioral Health	122,432	2,005	51,899	68,528	-	-	-	-	-	-	-	-	114,521	93.54%	
38	<b>Subtotal</b>	<b>1,475,363</b>	<b>24,323</b>	<b>624,406</b>	<b>826,634</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,380,034</b>	<b>93.54%</b>	
39																
40																
41	Additional Cost Containment	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00%	
42																
43																
44	<b>Grand Total</b>	<b>5,892,236</b>	<b>232,222</b>	<b>697,663</b>	<b>866,417</b>	<b>17,912</b>	<b>1,370</b>	<b>112,049</b>	<b>7,362</b>	<b>3,686,547</b>	<b>4,245</b>	<b>66,449</b>	<b>4,604,048</b>	<b>78.14%</b>		

	FY 19 Budget Request	HSD Projection
48	<b>State Share Revenues:</b>	
49	Department of Health (Line 18 & 19) <sup>10,17</sup>	103,616
50	Department of Health for Early Intervention	7,662
51	Department of Health for FQHCs	560
52	Department of Health for EC	1
53	Children, Youth and Families	-
54	County Supported Medicaid Fund	26,176
55	Tobacco Settlement Revenue, Base	26,319
56	Tobacco Settlement Revenue	-
57	UNM IGT	42,347
58	UNM IGT Additional Revenue	-
59	<b>Total Operating Transfers In</b>	<b>206,682</b>
60		
61	Physician UPL UNM	1,605
62	Safety Net Care <sup>12</sup>	872
63	County Supported Hospital Payments <sup>12</sup>	22,585
64	Additional County Supported Hospital Payments <sup>13</sup>	-
65	Miner's Colfax <sup>13</sup>	1,036
66	SB 42 Inpatient Services-Counties <sup>16</sup>	-
67	Drug Rebates	33,265
68	Fraud	872
69	Income Diversion Trust	486
70	Buy-In-Recovery	215
71	Cost Settlement	500
72	Estate Recovery	9
73	HMS-RAC-TPL/Subrogation	-
74	<b>Total Other Revenues</b>	<b>60,573</b>
75		
76	<b>General Fund Need</b>	<b>997,184</b>
77		
78	<b>FY 2018 Appropriation</b>	<b>915,637</b>
79		
80	<b>State Revenue Surplus/(Shortfall)</b>	<b>(81,547)</b>

8/22/2017

PROJECTED REVENUES	
Federal Revenues	4,604,048
Federal Disallowance <sup>11</sup>	-
IHS Referrals at 100% FFP	8,394
MSBS CPE <sup>14</sup>	15,355
All State Revenues	1,264,439

**Notes:**

- HIT, IHS, QI-1 Medicare Part B premiums, Refugees are eligible for 100% FFP.
- Under ACA, the Medicaid Expansion population will be federally funded 94% in CY2018 and 93% in CY2019.
- Health Homes, sterilization and family planning service costs are eligible for 90% FFP.
- Breast and cervical cancer (BCC) program with enhanced FMAP.
- CHIP is a Title XXI program with enhanced FMAP. However is assumed FY19 will have regular FMAP. Medicaid was originally expected to receive 100% match for CHIP kids through FFY2019.
- Utilization review is federally matched at 75%; admin. expenses.
- Title XIX expenditures with regular FMAP. The FY 2018 FMAP is from FFIS, released March 2016, based on preliminary income data.
- Administration expenditures are eligible for 50% FFP.
- Pregnancy termination, special needs and state only buy-in for Medicare Part B and all Medicare Part D buy-ins (Claw back) expenditures are not eligible for 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.
- Starting from FY16, school districts will contribute the state share of Medicaid School-Based Services through Certified Public Expenditures.
- Miner's Colfax hospital will contribute the state share of Safety Net Care Pool supplemental payments. The current estimate is for services provided in CY2018.
- SB 42 stated that counties will contribute the state share of payments for fee-for-service inpatient services for their respective incarcerated populations.
- DOH Budget request is for Developmental Disabled waiver only, budget request (\$1.4 million) for Medically Fragile waiver is through HSD.