

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
MAY 2012 ESTIMATE COMPARED TO APPROPRIATION AND NOVEMBER 2011 ESTIMATE
FISCAL YEAR 2011-12**

NO.	POLICY CHANGE TITLE	2011-12 APPROPRIATION		NOV. 2011 EST. FOR 2011-12		MAY 2012 EST. FOR 2011-12		DIFF. MAY TO APPROPRIATION		DIFF. MAY TO NOV.	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
ELIGIBILITY											
1	FAMILY PACT PROGRAM	\$628,775,000	\$152,098,500	\$594,032,000	\$144,523,500	\$582,522,000	\$141,723,600	-\$46,253,000	-\$10,374,900	-\$11,510,000	-\$2,799,900
2	BREAST AND CERVICAL CANCER TREATMENT	\$133,166,000	\$59,335,750	\$126,340,000	\$54,557,900	\$125,539,000	\$54,469,300	-\$7,627,000	-\$4,866,450	-\$801,000	-\$88,600
3	CHDP GATEWAY - PREENROLLMENT	\$15,711,000	\$5,598,300	\$16,825,000	\$5,888,750	\$11,671,000	\$4,084,850	-\$4,040,000	-\$1,513,450	-\$5,154,000	-\$1,803,900
4	BRIDGE TO HFP	\$12,776,000	\$4,471,600	\$16,587,000	\$5,805,450	\$19,221,000	\$6,727,350	\$6,445,000	\$2,255,750	\$2,634,000	\$921,900
5	CRAIG V. BONTA DISALLOWANCE	\$0	\$0	\$12,337,000	\$12,337,000	\$12,337,000	\$12,337,000	\$12,337,000	\$12,337,000	\$0	\$0
6	LANTERMAN DEVELOPMENTAL CENTER CLOSURE	\$7,793,000	\$3,896,500	\$7,793,000	\$3,896,500	\$607,000	\$303,500	-\$7,186,000	-\$3,593,000	-\$7,186,000	-\$3,593,000
7	REFUGEES	\$6,491,000	\$6,491,000	\$5,177,000	\$5,177,000	\$3,573,000	\$3,573,000	-\$2,918,000	-\$2,918,000	-\$1,604,000	-\$1,604,000
8	MEDI-CAL INPATIENT HOSP. COSTS FOR INMATES	\$1,678,000	\$0	\$2,569,000	\$0	\$7,663,000	\$0	\$5,985,000	\$0	\$5,094,000	\$0
9	LOMELI V. SHEWRY	\$336,000	\$168,000	\$294,000	\$147,000	\$294,000	\$147,000	-\$42,000	-\$21,000	\$0	\$0
10	250% WORKING DISABLED PROGRAM CHANGES	\$188,000	\$132,500	\$151,000	\$114,500	\$186,000	\$133,000	-\$2,000	\$500	\$35,000	\$18,500
11	CHIPRA - M/C FOR CHILDREN & PREGNANT WOMEN	\$0	-\$8,833,000	\$0	-\$8,942,350	\$0	-\$8,858,100	\$0	-\$25,100	\$0	\$84,250
12	NEW QUALIFIED ALIENS	\$0	\$120,791,000	\$0	\$106,607,500	\$0	\$99,622,000	\$0	-\$21,169,000	\$0	-\$6,985,500
13	RESOURCE DISREGARD - % PROGRAM CHILDREN	\$0	-\$50,727,300	\$0	-\$53,486,100	\$0	-\$52,651,500	\$0	-\$1,924,200	\$0	\$834,600
14	PARIS - VETERANS MATCH	\$0	\$0	\$0	\$0	-\$228,000	-\$114,000	-\$228,000	-\$114,000	-\$228,000	-\$114,000
15	PARIS-INTERSTATE AND PARIS-FEDERAL	-\$6,208,000	-\$3,104,000	-\$5,010,000	-\$2,505,000	-\$1,030,000	-\$515,000	\$5,178,000	\$2,589,000	\$3,980,000	\$1,990,000
--	LOW-INCOME SUBSIDY APPS. TREATED AS M/C APPS.	\$20,700,000	\$12,777,500	\$0	\$0	\$0	\$0	-\$20,700,000	-\$12,777,500	\$0	\$0
	ELIGIBILITY SUBTOTAL	\$821,406,000	\$303,096,350	\$777,095,000	\$274,121,650	\$762,355,000	\$260,982,000	-\$59,051,000	-\$42,114,350	-\$14,740,000	-\$13,139,650
BENEFITS											
16	ADULT DAY HEALTH CARE - CDA	\$390,766,000	\$195,383,000	\$342,781,000	\$171,390,500	\$321,748,000	\$160,874,000	-\$69,018,000	-\$34,509,000	-\$21,033,000	-\$10,516,500
18	ADHC TRANSITION-BENEFITS	\$170,000,000	\$85,000,000	\$289,100,000	\$144,550,000	\$278,422,000	\$139,211,000	\$108,422,000	\$54,211,000	-\$10,678,000	-\$5,339,000
19	LOCAL EDUCATION AGENCY (LEA) PROVIDERS	\$113,786,000	\$0	\$111,886,000	\$0	\$117,810,000	\$0	\$4,024,000	\$0	\$5,924,000	\$0
20	MULTIPURPOSE SENIOR SERVICES PROGRAM-CDA	\$45,464,000	\$22,732,000	\$40,464,000	\$20,232,000	\$40,464,000	\$20,232,000	-\$5,000,000	-\$2,500,000	\$0	\$0
21	MFP FUNDING TO CDSS AND CDSS FOR CCT	\$1,173,000	\$0	\$10,900,000	\$0	\$3,587,000	\$0	\$2,414,000	\$0	-\$7,313,000	\$0
22	CALIFORNIA COMMUNITY TRANSITIONS COSTS	\$5,360,000	\$1,340,000	\$4,398,000	\$1,099,000	\$6,958,000	\$1,739,000	\$1,598,000	\$399,000	\$2,560,000	\$640,000
23	QUALITY OF LIFE SURVEYS FOR MFP	\$69,000	\$0	\$79,000	\$0	\$79,000	\$0	\$10,000	\$0	\$0	\$0
26	SCHIP FUNDING FOR PRENATAL CARE	\$0	-\$105,528,150	\$0	-\$107,866,200	\$0	-\$88,970,050	\$0	\$16,558,100	\$0	\$18,896,150
27	HEARING AID CAP	-\$458,000	-\$229,000	-\$92,000	-\$46,000	-\$92,000	-\$46,000	\$366,000	\$183,000	\$0	\$0
28	DISCONTINUE PART B PREMIUM FOR UNMET SOC BEN	-\$1,342,000	-\$1,342,000	-\$293,000	-\$293,000	-\$218,000	-\$218,000	\$1,124,000	\$1,124,000	\$75,000	\$75,000

Costs shown include application of payment lag factor, but not percent reflected in base calculation.

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		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
BENEFITS											
29	ELIMINATION OF OTC COUGH AND COLD PRODUCTS	-\$4,206,000	-\$2,103,000	-\$1,996,000	-\$998,000	-\$1,264,000	-\$632,000	\$2,942,000	\$1,471,000	\$732,000	\$366,000
31	CALIFORNIA COMMUNITY TRANSITIONS SAVINGS	-\$6,282,000	-\$3,141,000	-\$6,330,000	-\$3,165,000	-\$8,288,000	-\$4,144,000	-\$2,006,000	-\$1,003,000	-\$1,958,000	-\$979,000
32	ELIMINATION OF OTC ACETAMINOPHEN DRUGS	-\$8,959,000	-\$4,479,500	-\$8,959,000	-\$4,479,500	-\$8,959,000	-\$4,479,500	\$0	\$0	\$0	\$0
33	LIMIT ENTERAL NUTRITION TO TUBE FEEDING	-\$27,543,000	-\$13,771,500	-\$20,224,000	-\$10,112,000	-\$20,224,000	-\$10,112,000	\$7,319,000	\$3,659,500	\$0	\$0
40	ELIMINATE ADHC SERVICES	-\$339,202,670	-\$169,601,340	-\$301,935,350	-\$150,967,670	-\$285,087,920	-\$142,543,960	\$54,114,760	\$27,057,380	\$16,847,430	\$8,423,720
--	ADDITIONAL SERVICES FOR HCBS CLIENTS	\$331,603,000	\$0	\$495,385,000	\$0	\$0	\$0	-\$331,603,000	\$0	-\$495,385,000	\$0
--	ADHC ONSITE TAR REVIEWS	-\$1,459,000	-\$729,500	\$0	\$0	\$0	\$0	\$1,459,000	\$729,500	\$0	\$0
--	COPAYMENT FOR DENTAL SERVICES	-\$55,839,000	-\$27,919,500	\$0	\$0	\$0	\$0	\$55,839,000	\$27,919,500	\$0	\$0
--	COPAYMENT FOR EMERGENCY ER VISITS	-\$66,610,000	-\$33,305,000	\$0	\$0	\$0	\$0	\$66,610,000	\$33,305,000	\$0	\$0
--	COPAYMENT FOR NON-EMERGENCY ER VISITS	-\$126,967,000	-\$63,483,500	\$0	\$0	\$0	\$0	\$126,967,000	\$63,483,500	\$0	\$0
--	COPAYMENTS FOR HOSPITAL INPATIENT DAYS	-\$271,294,000	-\$128,653,000	\$0	\$0	\$0	\$0	\$271,294,000	\$128,653,000	\$0	\$0
--	COPAYMENTS FOR PHYSICIAN/FQHC/RHC OFFICE VIS	-\$258,704,000	-\$129,352,000	\$0	\$0	\$0	\$0	\$258,704,000	\$129,352,000	\$0	\$0
--	INCREASED FEDERAL MATCHING FUNDS FOR FPACT	\$0	-\$4,767,600	\$0	-\$4,767,600	\$0	\$0	\$0	\$4,767,600	\$0	\$4,767,600
--	PHARMACY COPAYMENTS	-\$256,786,000	-\$128,393,000	\$0	\$0	\$0	\$0	\$256,786,000	\$128,393,000	\$0	\$0
--	PHYSICIAN AND CLINIC SEVEN VISIT SOFT CAP	-\$82,082,000	-\$41,041,000	-\$2,602,320	-\$1,301,160	\$0	\$0	\$82,082,000	\$41,041,000	\$2,602,320	\$1,301,160
--	REINSTATEMENT OF OPTOMETRY SERVICES	\$1,584,000	\$792,000	\$0	\$0	\$0	\$0	-\$1,584,000	-\$792,000	\$0	\$0
--	SAVINGS FROM ATTRITION IN MSSP	-\$5,000,000	-\$2,500,000	\$0	\$0	\$0	\$0	\$5,000,000	\$2,500,000	\$0	\$0
--	SF COMMUNITY-LIVING SUPPORT BENEFIT WAIVER	\$4,993,000	\$0	\$65,000	\$0	\$0	\$0	-\$4,993,000	\$0	-\$65,000	\$0
	BENEFITS SUBTOTAL	-\$447,935,670	-\$555,092,590	\$952,626,330	\$53,275,370	\$444,935,090	\$70,910,490	\$892,870,760	\$626,003,080	-\$507,691,250	\$17,635,130
PHARMACY											
41	FEDERAL DRUG REBATE CHANGE	\$203,000,000	\$203,000,000	\$92,909,000	\$92,909,000	\$92,909,000	\$92,909,000	-\$110,091,000	-\$110,091,000	\$0	\$0
42	NON FFP DRUGS	\$0	\$2,389,000	\$0	\$1,878,500	\$0	\$2,118,000	\$0	-\$271,000	\$0	\$239,500
43	BCCTP DRUG REBATES	-\$12,000,000	-\$4,200,000	-\$12,000,000	-\$4,200,000	-\$14,000,000	-\$4,900,000	-\$2,000,000	-\$700,000	-\$2,000,000	-\$700,000
44	PHYSICIAN-ADMINISTERED DRUG REIMBURSEMENT	-\$15,732,500	-\$7,866,250	-\$13,632,500	-\$6,816,250	-\$25,901,750	-\$12,950,880	-\$10,169,250	-\$5,084,630	-\$12,269,250	-\$6,134,630
45	MEDICAL SUPPLY REBATES	-\$30,800,000	-\$15,400,000	-\$32,624,000	-\$16,312,000	-\$30,236,000	-\$15,118,000	\$564,000	\$282,000	\$2,388,000	\$1,194,000
46	AGED AND DISPUTED DRUG REBATES	-\$45,000,000	-\$22,430,000	-\$55,000,000	-\$27,430,000	-\$134,740,000	-\$67,198,000	-\$89,740,000	-\$44,768,000	-\$79,740,000	-\$39,768,000
47	FAMILY PACT DRUG REBATES	-\$52,617,000	-\$7,313,700	-\$71,840,000	-\$9,399,600	-\$70,826,000	-\$9,267,000	-\$18,209,000	-\$1,953,300	\$1,014,000	\$132,600
48	LITIGATION SETTLEMENTS	-\$50,055,000	-\$50,055,000	-\$104,971,000	-\$104,971,000	-\$115,368,000	-\$115,368,000	-\$65,313,000	-\$65,313,000	-\$10,397,000	-\$10,397,000
50	STATE SUPPLEMENTAL DRUG REBATES	-\$197,374,000	-\$98,379,800	-\$173,446,000	-\$82,746,200	-\$113,796,000	-\$52,005,800	\$83,578,000	\$46,374,000	\$59,650,000	\$30,740,400

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PHARMACY											
51	FEDERAL DRUG REBATE PROGRAM	-\$1,382,484,000	-\$689,090,800	-\$1,307,597,000	-\$623,817,300	-\$1,331,040,000	-\$628,032,600	\$51,444,000	\$61,058,200	-\$23,443,000	-\$4,215,300
189	EPC FOR AVERAGE WHOLESALE PRICE FROZEN RATE	\$0	\$0	\$0	\$0	\$48,379,000	\$24,189,500	\$48,379,000	\$24,189,500	\$48,379,000	\$24,189,500
191	KALYDECO FOR TREATMENT OF CYSTIC FIBROSIS	\$0	\$0	\$0	\$0	\$1,722,000	\$861,000	\$1,722,000	\$861,000	\$1,722,000	\$861,000
--	MANAGED CARE DRUG REBATES	-\$128,000,000	-\$64,000,000	-\$128,000,000	-\$64,000,000	\$0	\$0	\$128,000,000	\$64,000,000	\$128,000,000	\$64,000,000
--	MEDI-CAL PHARMACY REFORMS	-\$31,400,000	-\$15,700,000	\$0	\$0	\$0	\$0	\$31,400,000	\$15,700,000	\$0	\$0
--	UBL AND MAIC INJUNCTION	\$60,000,000	\$30,000,000	\$0	\$0	\$0	\$0	-\$60,000,000	-\$30,000,000	\$0	\$0
	PHARMACY SUBTOTAL	-\$1,682,462,500	-\$739,046,550	-\$1,806,201,500	-\$844,904,850	-\$1,692,897,750	-\$784,762,780	-\$10,435,250	-\$45,716,230	\$113,303,750	\$60,142,080
MANAGED CARE											
55	MANAGED CARE RATE RANGE IGTS	\$341,704,000	\$170,852,000	\$279,172,000	\$112,404,000	\$229,051,000	\$87,626,000	-\$112,653,000	-\$83,226,000	-\$50,121,000	-\$24,778,000
56	INCREASE IN CAPITATION RATES FOR GROSS PREMIL	\$206,829,000	\$103,414,500	\$234,159,000	\$116,479,000	\$265,213,000	\$133,527,000	\$58,384,000	\$30,112,500	\$31,054,000	\$17,048,000
60	MANAGED CARE COST BASED REIMBURSEMENT CLIN	\$0	\$0	\$23,736,000	\$11,868,000	-\$29,743,000	-\$14,871,500	-\$29,743,000	-\$14,871,500	-\$53,479,000	-\$26,739,500
61	COURT-ORDERED MANAGED CARE RATE ADJUSTMEN	\$0	\$0	\$31,674,000	\$15,837,000	\$32,400,000	\$16,200,000	\$32,400,000	\$16,200,000	\$726,000	\$363,000
64	NOTICES OF DISPUTE/ADMINISTRATIVE APPEALS	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$0	\$0	\$0	\$0
68	FUNDING ADJUSTMENT OF GROSS PREMIUM TAX TO	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
69	FFS COSTS FOR MANAGED CARE ENROLLEES	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
72	COVERAGE FOR FORMER AGNEWS RESIDENTS	\$4,609,000	\$2,304,500	-\$8,169,000	-\$4,084,500	-\$6,531,000	-\$3,265,500	-\$11,140,000	-\$5,570,000	\$1,638,000	\$819,000
98	MANDATORY SPD ENROLLMENT INTO MANAGED CARI	\$111,117,000	\$82,676,500	\$96,141,000	\$48,070,500	\$96,141,000	\$48,070,500	-\$14,976,000	-\$34,606,000	\$0	\$0
192	RATE INCREASES DUE TO SB 90 IGTS	\$0	\$0	\$0	\$0	\$82,905,000	\$34,948,000	\$82,905,000	\$34,948,000	\$82,905,000	\$34,948,000
--	DISCONTINUE UNDOCUMENTED BENEFICIARIES FROM	-\$598,000	-\$299,000	\$0	\$0	\$0	\$0	\$598,000	\$299,000	\$0	\$0
--	GENERAL FUND REIMBURSEMENTS FROM DPHS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
--	MANAGED CARE EXPANSION - MARIN	\$13,935,000	\$6,967,500	\$0	\$0	\$0	\$0	-\$13,935,000	-\$6,967,500	\$0	\$0
--	MANAGED CARE EXPANSION - MENDOCINO	\$14,687,000	\$7,343,500	\$0	\$0	\$0	\$0	-\$14,687,000	-\$7,343,500	\$0	\$0
--	MANAGED CARE EXPANSION REGIONAL TWO-PLAN M	\$2,717,000	\$1,358,500	\$0	\$0	\$0	\$0	-\$2,717,000	-\$1,358,500	\$0	\$0
--	MANAGED CARE EXPANSION - VENTURA	\$48,424,000	\$24,212,000	\$0	\$0	\$0	\$0	-\$48,424,000	-\$24,212,000	\$0	\$0
--	MANAGED CARE IGT ADMIN. & PROCESSING FEE	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
--	MANAGED CARE PUBLIC HOSPITAL IGTS	\$346,000,000	\$173,000,000	\$0	\$0	\$0	\$0	-\$346,000,000	-\$173,000,000	\$0	\$0
--	TRIGGER CUTS TO OTHER MANAGED CARE PLANS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	MANAGED CARE SUBTOTAL	\$1,091,424,000	\$573,830,000	\$658,713,000	\$302,574,000	\$671,436,000	\$304,234,500	-\$419,988,000	-\$269,595,500	\$12,723,000	\$1,660,500
PROVIDER RATES											

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		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
PROVIDER RATES											
73	FQHC/RHC/CBRC RECONCILIATION PROCESS	\$260,723,630	\$130,361,810	\$179,558,230	\$89,779,110	\$175,744,730	\$87,872,370	-\$84,978,900	-\$42,489,450	-\$3,813,490	-\$1,906,750
74	SB 90 NON-CONTRACT HOSPITAL RATE & PAYMENT C	\$160,414,000	\$80,207,000	\$160,414,000	\$80,207,000	\$94,377,000	\$47,188,500	-\$66,037,000	-\$33,018,500	-\$66,037,000	-\$33,018,500
75	NF-B RATE CHANGES	\$35,254,470	\$17,627,240	\$59,680,000	\$29,840,000	\$53,494,000	\$26,747,000	\$18,239,530	\$9,119,760	-\$6,186,000	-\$3,093,000
76	LTC RATE ADJUSTMENT	\$78,155,460	\$39,077,730	\$26,160,620	\$13,080,310	\$18,752,860	\$9,376,430	-\$59,402,600	-\$29,701,300	-\$7,407,760	-\$3,703,880
77	AB 1629 RATE ADJUSTMENTS DUE TO QA FEE INCREA	\$284,191,000	\$142,095,500	\$23,492,000	\$11,746,000	\$21,963,000	\$10,981,500	-\$262,228,000	-\$131,114,000	-\$1,529,000	-\$764,500
78	ANNUAL MEI INCREASE FOR FQHCs/RHCS	\$19,642,830	\$9,821,420	\$47,341,620	\$23,670,810	\$47,341,620	\$23,670,810	\$27,698,790	\$13,849,390	\$0	\$0
80	HOSPICE RATE INCREASES	\$2,438,030	\$1,219,010	\$2,283,560	\$1,141,780	\$4,389,710	\$2,194,850	\$1,951,680	\$975,840	\$2,106,140	\$1,053,070
82	QUALITY AND ACCOUNTABILITY PAYMENTS PROGRAM	\$44,600,000	\$22,300,000	\$0	\$0	\$0	\$0	-\$44,600,000	-\$22,300,000	\$0	\$0
83	DENTAL RETROACTIVE RATE CHANGES	-\$16,672,000	-\$8,336,000	-\$17,069,000	-\$8,534,500	-\$9,644,000	-\$4,822,000	\$7,028,000	\$3,514,000	\$7,425,000	\$3,712,500
84	SB 90 PRESERVING CONTRACT HOSPITALS	-\$81,320,000	-\$40,660,000	-\$34,974,000	-\$17,487,000	-\$34,974,000	-\$17,487,000	\$46,346,000	\$23,173,000	\$0	\$0
86	NON-AB 1629 LTC RATE FREEZE	-\$73,110,630	-\$36,555,310	-\$106,065,960	-\$53,032,980	-\$67,623,860	-\$33,811,930	\$5,486,770	\$2,743,380	\$38,442,100	\$19,221,050
87	10% PAYMENT REDUCTION FOR LTC FACILITIES	-\$402,985,000	-\$201,492,500	-\$434,961,000	-\$217,480,500	-\$171,860,000	-\$85,930,000	\$231,125,000	\$115,562,500	\$263,101,000	\$131,550,500
88	10% PROVIDER PAYMENT REDUCTION	-\$875,367,000	-\$437,683,500	-\$616,904,000	-\$308,452,000	-\$705,373,000	-\$352,686,500	\$169,994,000	\$84,997,000	-\$88,469,000	-\$44,234,500
--	REDUCTION TO RADIOLOGY RATES	-\$76,195,610	-\$38,097,810	-\$78,858,670	-\$39,429,330	\$0	\$0	\$76,195,610	\$38,097,810	\$78,858,670	\$39,429,330
	PROVIDER RATES SUBTOTAL	-\$640,230,810	-\$320,115,410	-\$789,902,600	-\$394,951,300	-\$573,411,940	-\$286,705,970	\$66,818,870	\$33,409,440	\$216,490,660	\$108,245,330
WAIVER--MH/UCD & BTR											
89	MH/UCD & BTR—DSH PAYMENT	\$1,704,697,000	\$607,279,000	\$1,687,744,000	\$575,230,000	\$1,751,299,000	\$582,851,500	\$46,602,000	-\$24,427,500	\$63,555,000	\$7,621,500
90	BTR—DELIVERY SYSTEM REFORM INCENTIVE POOL	\$650,000,000	\$325,000,000	\$970,000,000	\$485,000,000	\$975,000,000	\$487,500,000	\$325,000,000	\$162,500,000	\$5,000,000	\$2,500,000
91	BTR—LOW INCOME HEALTH PROGRAM - MCE	\$1,212,051,000	\$280,000,000	\$906,324,000	\$305,226,000	\$225,294,000	\$21,500,000	-\$986,757,000	-\$258,500,000	-\$681,030,000	-\$283,726,000
92	BTR—SAFETY NET CARE POOL	\$461,952,000	\$0	\$565,513,000	\$0	\$565,513,000	\$0	\$103,561,000	\$0	\$0	\$0
93	MH/UCD & BTR—PRIVATE HOSPITAL DSH REPLACEME	\$355,272,000	\$177,636,000	\$373,896,000	\$186,948,000	\$384,035,000	\$192,017,500	\$28,763,000	\$14,381,500	\$10,139,000	\$5,069,500
94	MH/UCD & BTR—PRIVATE HOSPITAL SUPPLEMENTAL I	\$280,502,000	\$140,251,000	\$276,948,000	\$138,474,000	\$232,530,000	\$116,265,000	-\$47,972,000	-\$23,986,000	-\$44,418,000	-\$22,209,000
95	BTR—LOW INCOME HEALTH PROGRAM - HCCI	\$238,693,000	\$30,000,000	\$179,579,000	\$37,688,000	\$75,098,000	\$6,797,000	-\$163,595,000	-\$23,203,000	-\$104,481,000	-\$30,891,000
96	MH/UCD & BTR—CCS AND GHPP	\$106,000,000	\$0	\$157,618,000	\$0	\$157,065,000	\$0	\$51,065,000	\$0	-\$553,000	\$0
97	BTR—DESIGNATED STATE HEALTH PROGRAMS	\$74,064,000	-\$202,136,000	\$150,341,000	-\$444,602,000	\$150,341,000	-\$375,317,000	\$76,277,000	-\$173,181,000	\$0	\$69,285,000
99	MH/UCD & BTR—DPH PHYSICIAN & NON-PHYSICIAN CI	\$164,604,000	\$0	\$91,204,000	\$0	\$77,407,000	\$0	-\$87,197,000	\$0	-\$13,797,000	\$0
100	MH/UCD—DPH INTERIM & FINAL RECONS	\$67,235,000	\$0	\$70,125,000	\$0	\$2,725,000	\$0	-\$64,510,000	\$0	-\$67,400,000	\$0
101	MH/UCD—SOUTH LA PRESERVATION FUND	\$0	\$0	\$39,167,000	\$0	\$39,167,000	\$0	\$39,167,000	\$0	\$0	\$0
102	MH/UCD—STABILIZATION FUNDING	\$44,495,000	\$31,410,500	\$38,062,000	\$28,194,000	\$17,549,000	\$17,549,000	-\$26,946,000	-\$13,861,500	-\$20,513,000	-\$10,645,000

Costs shown include application of payment lag factor, but not percent reflected in base calculation.

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
MAY 2012 ESTIMATE COMPARED TO APPROPRIATION AND NOVEMBER 2011 ESTIMATE
FISCAL YEAR 2011-12**

NO.	POLICY CHANGE TITLE	2011-12 APPROPRIATION		NOV. 2011 EST. FOR 2011-12		MAY 2012 EST. FOR 2011-12		DIFF. MAY TO APPROPRIATION		DIFF. MAY TO NOV.	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
WAIVER--MH/UCD & BTR											
103	MH/UCD—SAFETY NET CARE POOL	\$42,735,000	\$0	\$37,867,000	\$0	\$1,949,000	\$0	-\$40,786,000	\$0	-\$35,918,000	\$0
105	MH/UCD—HEALTH CARE COVERAGE INITIATIVE	\$34,329,000	\$0	\$33,459,000	\$0	\$43,468,000	\$0	\$9,139,000	\$0	\$10,009,000	\$0
106	MH/UCD—FEDERAL FLEX. & STABILIZATION-SNCP	\$0	\$0	\$31,111,000	\$0	\$31,111,000	\$0	\$31,111,000	\$0	\$0	\$0
107	MH/UCD & BTR—NDPH SUPPLEMENTAL PAYMENT	\$3,808,000	\$1,904,000	\$6,774,000	\$3,387,000	\$6,250,000	\$3,125,000	\$2,442,000	\$1,221,000	-\$524,000	-\$262,000
108	MH/UCD—DISTRESSED HOSPITAL FUND	\$0	\$0	\$2,248,000	\$1,124,000	\$2,248,000	\$1,124,000	\$2,248,000	\$1,124,000	\$0	\$0
110	MH/UCD & BTR—MIA-LTC	\$0	-\$17,000,000	\$0	-\$25,052,000	\$0	-\$33,737,000	\$0	-\$16,737,000	\$0	-\$8,685,000
111	MH/UCD & BTR—BCCTP	\$0	-\$800,000	\$0	-\$1,772,000	\$0	-\$2,439,000	\$0	-\$1,639,000	\$0	-\$667,000
112	MH/UCD—FEDERAL FLEX. & STABILIZATION - SNCP AF	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
113	MH/UCD & BTR—DPH INTERIM RATE	\$0	-\$463,898,000	\$0	-\$474,462,500	\$0	-\$443,735,000	\$0	\$20,163,000	\$0	\$30,727,500
114	MH/UCD & BTR—DPH INTERIM RATE GROWTH	\$99,769,000	\$49,884,500	\$36,699,000	\$18,349,500	\$34,087,000	\$17,043,500	-\$65,682,000	-\$32,841,000	-\$2,612,000	-\$1,306,000
--	BTR—LIHP INPATIENT HOSP. COSTS FOR CDCR INMA*	\$59,571,000	\$0	\$36,423,000	\$0	\$0	\$0	-\$59,571,000	\$0	-\$36,423,000	\$0
	WAIVER--MH/UCD & BTR SUBTOTAL	\$5,599,777,000	\$959,531,000	\$5,691,102,000	\$833,732,000	\$4,772,136,000	\$590,544,500	-\$827,641,000	-\$368,986,500	-\$918,966,000	-\$243,187,500
SUPPLEMENTAL PMNTS.											
115	HOSPITAL QAF - HOSPITAL PAYMENTS	\$0	\$0	\$2,637,790,000	\$1,317,163,000	\$1,958,501,000	\$972,169,000	\$1,958,501,000	\$972,169,000	-\$679,289,000	-\$344,994,000
116	FREESTANDING CLINICS SUPPLEMENTAL PAYMENTS	\$321,600,000	\$0	\$315,000,000	\$0	\$120,000,000	\$0	-\$201,600,000	\$0	-\$195,000,000	\$0
117	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT	\$238,879,000	\$0	\$202,834,000	\$0	\$202,834,000	\$0	-\$36,045,000	\$0	\$0	\$0
118	CAPITAL PROJECT DEBT REIMBURSEMENT	\$98,792,000	\$46,590,500	\$175,113,000	\$46,981,000	\$172,243,000	\$46,981,000	\$73,451,000	\$390,500	-\$2,870,000	\$0
120	NDPH IGT SUPPLEMENTAL PAYMENTS	\$64,000,000	\$32,000,000	\$102,000,000	\$48,798,000	\$93,432,000	\$44,514,000	\$29,432,000	\$12,514,000	-\$8,568,000	-\$4,284,000
121	IGT FOR NON-SB 1100 HOSPITALS	\$100,000,000	\$50,000,000	\$100,000,000	\$50,000,000	\$12,760,000	\$6,380,000	-\$87,240,000	-\$43,620,000	-\$87,240,000	-\$43,620,000
122	FFP FOR LOCAL TRAUMA CENTERS	\$67,130,000	\$33,565,000	\$67,130,000	\$33,565,000	\$67,130,000	\$33,565,000	\$0	\$0	\$0	\$0
123	CERTIFICATION PAYMENTS FOR DP-NFS	\$32,000,000	\$0	\$45,000,000	\$0	\$40,678,000	\$0	\$8,678,000	\$0	-\$4,322,000	\$0
124	MEDI-CAL REIMBURSEMENTS FOR OUTPATIENT DSH	\$7,500,000	\$3,750,000	\$7,500,000	\$3,750,000	\$7,500,000	\$3,750,000	\$0	\$0	\$0	\$0
125	MEDI-CAL REIMBURSEMENTS FOR OUTPATIENT SRH	\$6,000,000	\$3,000,000	\$6,000,000	\$3,000,000	\$6,000,000	\$3,000,000	\$0	\$0	\$0	\$0
126	STATE VETERANS' HOMES SUPPLEMENTAL PAYMENT	\$0	\$0	\$3,200,000	\$0	\$3,237,000	\$0	\$3,237,000	\$0	\$37,000	\$0
--	IHSS PROVIDER TAX	\$332,500,000	\$0	\$0	\$0	\$0	\$0	-\$332,500,000	\$0	\$0	\$0
--	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSE	\$166,293,000	\$0	\$166,292,000	\$0	\$0	\$0	-\$166,293,000	\$0	-\$166,292,000	\$0
	SUPPLEMENTAL PMNTS. SUBTOTAL	\$1,434,694,000	\$168,905,500	\$3,827,859,000	\$1,503,257,000	\$2,684,315,000	\$1,110,359,000	\$1,249,621,000	\$941,453,500	-\$1,143,544,000	-\$392,898,000
OTHER											
133	ARRA HITECH - PROVIDER PAYMENTS	\$639,025,000	\$0	\$627,500,000	\$0	\$501,500,000	\$0	-\$137,525,000	\$0	-\$126,000,000	\$0

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**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
MAY 2012 ESTIMATE COMPARED TO APPROPRIATION AND NOVEMBER 2011 ESTIMATE
FISCAL YEAR 2011-12**

NO.	POLICY CHANGE TITLE	2011-12 APPROPRIATION		NOV. 2011 EST. FOR 2011-12		MAY 2012 EST. FOR 2011-12		DIFF. MAY TO APPROPRIATION		DIFF. MAY TO NOV.	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
OTHER											
136	ICF-DD TRANSPORTATION AND DAY CARE COSTS- CD	\$153,210,000	\$0	\$255,295,000	\$0	\$87,157,000	\$0	-\$66,053,000	\$0	-\$168,138,000	\$0
142	HEALTHY FAMILIES - CDMH	\$27,543,000	\$0	\$27,543,000	\$0	\$18,513,000	\$0	-\$9,030,000	\$0	-\$9,030,000	\$0
145	ICF-DD ADMIN. AND QA FEE REIMBURSEMENT - CDDS	\$8,368,000	\$4,184,000	\$8,368,000	\$4,184,000	\$40,368,000	\$16,935,000	\$32,000,000	\$12,751,000	\$32,000,000	\$12,751,000
146	MINOR CONSENT SETTLEMENT	\$7,620,000	\$7,620,000	\$7,620,000	\$7,620,000	\$7,620,000	\$7,620,000	\$0	\$0	\$0	\$0
147	NONCONTRACT HOSP INPATIENT COST SETTLEMENT	\$1,973,000	\$986,500	\$6,282,000	\$3,141,000	\$7,248,000	\$3,624,000	\$5,275,000	\$2,637,500	\$966,000	\$483,000
148	CDDS DENTAL SERVICES	\$0	\$0	\$5,715,000	\$5,715,000	\$4,300,000	\$4,300,000	\$4,300,000	\$4,300,000	-\$1,415,000	-\$1,415,000
151	INDIAN HEALTH SERVICES	\$0	-\$8,700,000	\$510,000	-\$9,839,000	\$510,000	-\$9,839,000	\$510,000	-\$1,139,000	\$0	\$0
152	CIGARETTE AND TOBACCO SURTAX FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
153	IMD ANCILLARY SERVICES	\$0	\$6,000,000	\$0	\$6,000,000	\$0	\$6,000,000	\$0	\$0	\$0	\$0
154	REDUCTION IN IMD ANCILLARY SERVICES COSTS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
155	CLPP FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
156	HOSPITAL QAF - CHILDREN'S HEALTH CARE	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
159	ANTI-FRAUD ACTIVITIES FOR PHARMACY AND PHYSIC	-\$1,635,760	-\$817,880	-\$1,153,450	-\$576,720	-\$1,153,450	-\$576,720	\$482,310	\$241,150	\$0	\$0
160	FQHC/RHC AUDIT STAFFING	-\$5,223,920	-\$2,611,960	-\$2,241,510	-\$1,120,760	-\$3,058,000	-\$1,529,000	\$2,165,920	\$1,082,960	-\$816,490	-\$408,240
161	ANTI-FRAUD INITIATIVE	-\$4,955,600	-\$2,477,800	-\$5,607,550	-\$2,803,770	-\$5,607,550	-\$2,803,770	-\$651,950	-\$325,980	\$0	\$0
162	MEDICARE BUY-IN QUALITY REVIEW PROJECT	-\$10,000,000	-\$9,500,000	-\$6,667,000	-\$6,333,500	-\$6,667,000	-\$6,333,500	\$3,333,000	\$3,166,500	\$0	\$0
163	MEDICARE PAYMENTS - PART D PHASED-DOWN ARRA	-\$31,502,000	-\$31,502,000	-\$31,606,000	-\$31,606,000	-\$32,511,000	-\$32,511,000	-\$1,009,000	-\$1,009,000	-\$905,000	-\$905,000
181	AB 97 INJUNCTIONS	\$0	\$0	\$202,498,000	\$101,249,000	\$693,505,000	\$346,752,500	\$693,505,000	\$346,752,500	\$491,007,000	\$245,503,500
184	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYM	\$0	\$0	\$0	\$0	\$0	\$1,868,000	\$0	\$1,868,000	\$0	\$1,868,000
186	REFUNDS ON ACTS OF FRAUD	\$0	\$0	\$0	\$0	\$0	-\$97,030,000	\$0	-\$97,030,000	\$0	-\$97,030,000
195	AUDIT SETTLEMENTS	\$0	\$0	\$0	\$0	\$137,000	\$137,000	\$137,000	\$137,000	\$137,000	\$137,000
--	ACCELERATED PAYMENTS	-\$1,071,028,000	-\$507,599,000	\$0	\$0	\$0	\$0	\$1,071,028,000	\$507,599,000	\$0	\$0
--	ARRA-ADDITIONAL FFP FOR LOCAL MATCH	\$3,900,000	\$0	\$21,301,000	\$0	\$0	\$0	-\$3,900,000	\$0	-\$21,301,000	\$0
--	FI COST CONTAINMENT PROJECTS	-\$326,380	-\$163,190	-\$201,000	-\$100,500	\$0	\$0	\$326,380	\$163,190	\$201,000	\$100,500
--	MEDI-CAL COST CONTAINMENT STRATEGIES	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
--	RECONCILIATION WITH THE BUDGET ACT OF 2011	\$515,213,000	\$161,680,000	\$0	\$0	\$0	\$0	-\$515,213,000	-\$161,680,000	\$0	\$0
--	RECONCILIATION WITH THE BUDGET ACT - SPECIAL F	-\$5,010,000	\$0	\$0	\$0	\$0	\$0	\$5,010,000	\$0	\$0	\$0
--	UNSPECIFIED BUDGET REDUCTION	-\$690,000,000	-\$345,000,000	\$0	\$0	\$0	\$0	\$690,000,000	\$345,000,000	\$0	\$0
	OTHER SUBTOTAL	-\$462,829,660	-\$727,901,330	\$1,115,155,490	\$75,528,740	\$1,311,861,000	\$236,613,500	\$1,774,690,660	\$964,514,830	\$196,705,510	\$161,084,760

Costs shown include application of payment lag factor, but not percent reflected in base calculation.

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
MAY 2012 ESTIMATE COMPARED TO APPROPRIATION AND NOVEMBER 2011 ESTIMATE
FISCAL YEAR 2011-12**

NO.	POLICY CHANGE TITLE	2011-12 APPROPRIATION		NOV. 2011 EST. FOR 2011-12		MAY 2012 EST. FOR 2011-12		DIFF. MAY TO APPROPRIATION		DIFF. MAY TO NOV.	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
	GRAND TOTAL	\$5,713,842,360	-\$336,793,020	\$10,426,446,720	\$1,802,632,610	\$8,380,728,400	\$1,502,175,250	\$2,666,886,040	\$1,838,968,270	-\$2,045,718,320	-\$300,457,360

Costs shown include application of payment lag factor, but not percent reflected in base calculation.