

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
NOVEMBER 2012 ESTIMATE COMPARED TO APPROPRIATION
FISCAL YEAR 2012-13**

NO.	POLICY CHANGE TITLE	2012-13 APPROPRIATION		NOV. 2012 EST. FOR 2012-13		DIFFERENCE	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
ELIGIBILITY							
1	FAMILY PACT PROGRAM	\$600,407,000	\$146,075,200	\$598,091,000	\$149,655,300	-\$2,316,000	\$3,580,100
2	TRANSITION OF HFP TO MEDI-CAL	\$55,152,000	\$19,303,200	\$244,519,000	\$85,581,650	\$189,367,000	\$66,278,450
3	BREAST AND CERVICAL CANCER TREATMENT	\$138,724,000	\$59,847,150	\$140,364,000	\$60,792,950	\$1,640,000	\$945,800
4	CHDP GATEWAY - PREENROLLMENT	\$10,615,000	\$4,929,950	\$13,886,000	\$4,860,100	\$3,271,000	-\$69,850
5	MEDI-CAL INPATIENT HOSP. COSTS - ADULT INMATES	\$6,628,000	\$0	\$9,149,000	\$0	\$2,521,000	\$0
6	BRIDGE TO HFP	\$4,828,000	\$1,689,800	\$7,212,000	\$2,524,200	\$2,384,000	\$834,400
7	REFUGEES	\$5,674,000	\$5,674,000	\$4,615,000	\$4,615,000	-\$1,059,000	-\$1,059,000
8	MEDI-CAL INPATIENT HOSP. COSTS - JUVENILE INMATES	\$0	\$0	\$2,451,000	\$0	\$2,451,000	\$0
9	MCHA VS. DHCS AND MRMIB	\$0	\$0	\$661,000	\$330,500	\$661,000	\$330,500
10	LANTERMAN DEVELOPMENTAL CENTER CLOSURE	\$7,372,000	\$3,686,000	\$607,000	\$303,500	-\$6,765,000	-\$3,382,500
11	250% WORKING DISABLED PROGRAM CHANGES	\$464,000	\$318,000	\$1,500,000	\$1,008,000	\$1,036,000	\$690,000
12	LOMELI V. SHEWRY	\$504,000	\$252,000	\$504,000	\$252,000	\$0	\$0
13	CHIPRA - M/C FOR CHILDREN & PREGNANT WOMEN	\$0	-\$8,858,100	\$0	-\$9,127,400	\$0	-\$269,300
14	NEW QUALIFIED ALIENS	\$0	\$99,663,000	\$0	\$64,317,000	\$0	-\$35,346,000
15	RESOURCE DISREGARD - % PROGRAM CHILDREN	\$0	-\$60,354,450	\$0	-\$44,850,150	\$0	\$15,504,300
16	PARIS-FEDERAL	\$0	\$0	-\$388,000	-\$194,000	-\$388,000	-\$194,000
17	PARIS - VETERANS MATCH	-\$742,000	-\$371,000	-\$1,233,650	-\$616,820	-\$491,650	-\$245,820
18	PARIS-INTERSTATE	-\$3,596,000	-\$1,798,000	-\$3,569,000	-\$1,784,500	\$27,000	\$13,500
	ELIGIBILITY SUBTOTAL	\$826,030,000	\$270,056,750	\$1,018,368,350	\$317,667,330	\$192,338,350	\$47,610,580
AFFORDABLE CARE ACT							
21	RECOVERY AUDIT CONTRACTOR SAVINGS	\$0	\$0	-\$43,510	-\$21,750	-\$43,510	-\$21,750
41	FEDERAL DRUG REBATE CHANGE	\$108,000,000	\$108,000,000	\$145,000,000	\$145,000,000	\$37,000,000	\$37,000,000
51	MANAGED CARE DRUG REBATES	-\$316,347,000	-\$158,173,500	-\$222,289,000	-\$111,144,500	\$94,058,000	\$47,029,000
136	PAYMENTS TO PRIMARY CARE PHYSICIANS	\$372,992,000	\$38,744,500	\$362,637,430	\$34,467,550	-\$10,354,570	-\$4,276,950

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<u>AFFORDABLE CARE ACT</u>							
138	NF-B RATE CHANGES	\$101,472,000	\$50,736,000	\$89,838,450	\$44,919,220	-\$11,633,560	-\$5,816,780
173	COMMUNITY FIRST CHOICE OPTION	\$411,121,000	\$0	\$360,085,000	\$0	-\$51,036,000	\$0
	AFFORDABLE CARE ACT SUBTOTAL	\$677,238,000	\$39,307,000	\$735,228,370	\$113,220,520	\$57,990,370	\$73,913,520
<u>BENEFITS</u>							
22	ADDITIONAL SERVICES FOR HCBS CLIENTS	\$651,423,000	\$0	\$533,309,000	\$0	-\$118,114,000	\$0
23	LOCAL EDUCATION AGENCY (LEA) PROVIDERS	\$115,122,000	\$0	\$138,634,000	\$0	\$23,512,000	\$0
24	MULTIPURPOSE SENIOR SERVICES PROGRAM-CDA	\$39,614,000	\$20,232,000	\$40,464,000	\$20,232,000	\$850,000	\$0
25	CALIFORNIA COMMUNITY TRANSITIONS COSTS	\$12,704,000	\$3,176,000	\$45,898,000	\$2,191,000	\$33,194,000	-\$985,000
26	MFP FUNDING TO CDDS AND CDSS FOR CCT	\$2,100,000	\$0	\$8,523,000	\$0	\$6,423,000	\$0
27	DENSE BREAST NOTIFICATION SUPPLEMENTAL SCREI	\$0	\$0	\$730,000	\$365,000	\$730,000	\$365,000
28	SF COMMUNITY-LIVING SUPPORT BENEFIT WAIVER	\$752,000	\$0	\$298,000	\$0	-\$454,000	\$0
29	QUALITY OF LIFE SURVEYS FOR MFP	\$123,000	\$0	\$225,000	\$0	\$102,000	\$0
30	FAMILY PACT RETROACTIVE ELIGIBILITY	\$0	\$0	\$3,000	\$300	\$3,000	\$300
31	INCREASED FEDERAL MATCHING FUNDS FOR FPACT	\$0	-\$9,535,200	\$0	-\$14,302,800	\$0	-\$4,767,600
32	ADHC TRANSITION-BENEFITS	\$309,744,000	\$154,872,000	-\$21,945,000	-\$10,972,500	-\$331,689,000	-\$165,844,500
33	SCHIP FUNDING FOR PRENATAL CARE	\$0	-\$92,041,950	\$0	-\$84,620,900	\$0	\$7,421,050
34	HEARING AID CAP	-\$764,000	-\$382,000	-\$741,810	-\$370,910	\$22,190	\$11,090
35	ELIMINATION OF OTC COUGH AND COLD PRODUCTS	-\$4,421,000	-\$2,210,500	-\$4,421,000	-\$2,210,500	\$0	\$0
36	CERVICAL CANCER SCREENING	\$0	\$0	-\$4,098,470	-\$2,049,230	-\$4,098,470	-\$2,049,230
37	PHYSICIAN AND CLINIC SEVEN VISIT SOFT CAP	-\$37,519,440	-\$18,759,720	-\$8,044,550	-\$4,022,270	\$29,474,900	\$14,737,450
38	CALIFORNIA COMMUNITY TRANSITIONS SAVINGS	-\$13,251,000	-\$6,625,500	-\$14,303,000	-\$7,151,500	-\$1,052,000	-\$526,000
39	COPAYMENT FOR NON-EMERGENCY ER VISITS	-\$14,291,000	-\$7,145,500	-\$16,854,000	-\$8,427,000	-\$2,563,000	-\$1,281,500
--	ADULT DAY HEALTH CARE - CDA	\$327,635,000	\$163,817,500	\$0	\$0	-\$327,635,000	-\$163,817,500
--	DISCONTINUE PART B PREMIUM FOR UNMET SOC BEN	-\$246,000	-\$246,000	\$0	\$0	\$246,000	\$246,000

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		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
BENEFITS							
--	ELIMINATE ADHC SERVICES	-\$361,802,000	-\$180,901,000	\$0	\$0	\$361,802,000	\$180,901,000
--	ELIMINATION OF OTC ACETAMINOPHEN DRUGS	-\$8,997,000	-\$4,498,500	\$0	\$0	\$8,997,000	\$4,498,500
--	LIMIT ENTERAL NUTRITION TO TUBE FEEDING	-\$29,277,000	-\$14,638,500	\$0	\$0	\$29,277,000	\$14,638,500
--	PHARMACY COPAYMENTS	-\$26,116,000	-\$13,058,000	\$0	\$0	\$26,116,000	\$13,058,000
--	VALUE BASED PURCHASING	-\$60,000,000	-\$30,000,000	\$0	\$0	\$60,000,000	\$30,000,000
	BENEFITS SUBTOTAL	\$902,532,560	-\$37,944,870	\$697,676,170	-\$111,339,310	-\$204,856,390	-\$73,394,440
PHARMACY							
42	KALYDECO FOR TREATMENT OF CYSTIC FIBROSIS	\$4,790,400	\$2,395,200	\$4,790,400	\$2,395,200	\$0	\$0
43	NON FFP DRUGS	\$0	\$1,488,000	\$0	\$1,672,000	\$0	\$184,000
44	BCCTP DRUG REBATES	-\$14,000,000	-\$4,900,000	-\$15,000,000	-\$5,250,000	-\$1,000,000	-\$350,000
45	MEDICAL SUPPLY REBATES	-\$24,900,000	-\$12,450,000	-\$22,722,000	-\$11,361,000	\$2,178,000	\$1,089,000
46	PHYSICIAN-ADMINISTERED DRUG REIMBURSEMENT	-\$56,715,000	-\$28,357,500	-\$39,543,750	-\$19,771,880	\$17,171,250	\$8,585,630
47	FAMILY PACT DRUG REBATES	-\$70,417,000	-\$9,213,300	-\$70,090,000	-\$9,170,600	\$327,000	\$42,700
48	AGED AND DISPUTED DRUG REBATES	-\$55,000,000	-\$27,430,000	-\$75,000,000	-\$37,433,600	-\$20,000,000	-\$10,003,600
49	STATE SUPPLEMENTAL DRUG REBATES	-\$95,942,000	-\$47,848,600	-\$106,853,000	-\$53,332,100	-\$10,911,000	-\$5,483,500
50	LITIGATION SETTLEMENTS	\$0	\$0	-\$220,307,000	-\$220,307,000	-\$220,307,000	-\$220,307,000
52	FEDERAL DRUG REBATE PROGRAM	-\$1,100,415,000	-\$548,803,500	-\$1,097,274,000	-\$491,667,000	\$3,141,000	\$57,136,500
--	EPC FOR AVERAGE WHOLESALE PRICE FROZEN RATE	\$22,214,000	\$11,107,000	\$0	\$0	-\$22,214,000	-\$11,107,000
	PHARMACY SUBTOTAL	-\$1,390,384,600	-\$664,012,700	-\$1,641,999,350	-\$844,225,980	-\$251,614,750	-\$180,213,280
DRUG MEDI-CAL							
58	ANNUAL RATE ADJUSTMENT	\$0	\$0	\$0	\$0	\$0	\$0
59	DRUG MEDI-CAL PROGRAM COST SETTLEMENT	\$0	\$0	-\$7,017,000	-\$2,827,000	-\$7,017,000	-\$2,827,000
	DRUG MEDI-CAL SUBTOTAL	\$0	\$0	-\$7,017,000	-\$2,827,000	-\$7,017,000	-\$2,827,000

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MENTAL HEALTH							
61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEI	\$175,073,000	\$0	\$64,187,000	\$0	-\$110,886,000	\$0
62	HEALTHY FAMILIES - SED	\$0	\$0	\$21,215,000	\$0	\$21,215,000	\$0
63	KATIE A. V. DIANA BONTA	\$0	\$0	\$9,785,000	\$0	\$9,785,000	\$0
64	TRANSITION OF HFP - SMH SERVICES	\$0	\$0	\$8,297,000	\$0	\$8,297,000	\$0
65	SOLANO COUNTY	\$0	\$0	\$2,769,000	\$0	\$2,769,000	\$0
66	OVER ONE-YEAR CLAIMS	\$0	\$0	\$2,000,000	\$0	\$2,000,000	\$0
67	SPECIALTY MENTAL HEALTH LAWSUIT	\$0	\$0	\$370,000	\$180,000	\$370,000	\$180,000
68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYM	\$0	\$6,227,000	\$0	\$6,217,000	\$0	-\$10,000
69	IMD ANCILLARY SERVICES	\$0	\$6,000,000	\$0	\$6,000,000	\$0	\$0
71	CHART REVIEW	\$0	\$0	-\$450,000	\$0	-\$450,000	\$0
72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$0	-\$26,634,000	\$1,151,000	-\$26,634,000	\$1,151,000
204	ELIMINATION OF STATE MAXIMUM RATES	\$0	\$0	\$90,494,000	\$0	\$90,494,000	\$0
MENTAL HEALTH SUBTOTAL		\$175,073,000	\$12,227,000	\$172,033,000	\$13,548,000	-\$3,040,000	\$1,321,000
WAIVER--MH/UCD & BTR							
73	BTR - LIHP - MCE	\$2,325,678,000	\$581,864,000	\$3,089,199,000	\$503,975,000	\$763,521,000	-\$77,889,000
74	MH/UCD & BTR—DSH PAYMENT	\$1,719,634,000	\$596,991,000	\$1,740,006,000	\$600,754,000	\$20,372,000	\$3,763,000
75	BTR—DPH DELIVERY SYSTEM REFORM INCENTIVE PC	\$1,375,000,000	\$687,500,000	\$1,437,063,000	\$718,531,500	\$62,063,000	\$31,031,500
76	MH/UCD & BTR—PRIVATE HOSPITAL DSH REPLACEME	\$477,937,000	\$238,968,500	\$506,702,000	\$253,351,000	\$28,765,000	\$14,382,500
77	BTR—SAFETY NET CARE POOL	\$390,166,000	\$0	\$390,166,000	\$0	\$0	\$0
78	BTR—LOW INCOME HEALTH PROGRAM - HCCI	\$301,431,000	\$78,370,000	\$315,881,000	\$0	\$14,450,000	-\$78,370,000
79	MH/UCD & BTR—PRIVATE HOSPITAL SUPPLEMENTAL F	\$302,844,000	\$151,422,000	\$249,080,000	\$124,540,000	-\$53,764,000	-\$26,882,000
80	LIHP MCE OUT-OF-NETWORK EMERGENCY CARE SVS	\$190,000,000	\$95,000,000	\$172,800,000	\$86,400,000	-\$17,200,000	-\$8,600,000
81	BTR—INCREASE SAFETY NET CARE POOL	\$100,000,000	\$0	\$100,000,000	\$0	\$0	\$0
82	MH/UCD & BTR—DPH & NDPH PHYSICIAN & NON-PHYS	\$70,703,000	\$0	\$98,709,000	\$0	\$28,006,000	\$0

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WAIVER--MH/UCD & BTR							
83	MH/UCD—STABILIZATION FUNDING	\$105,756,000	\$58,541,000	\$98,006,000	\$62,681,000	-\$7,750,000	\$4,140,000
84	MH/UCD—DPH INTERIM & FINAL RECONS	\$159,300,000	\$0	\$81,545,000	\$0	-\$77,755,000	\$0
85	NDPH DELIVERY SYSTEM REFORM INCENTIVE POOL	\$90,000,000	\$45,000,000	\$80,000,000	\$40,000,000	-\$10,000,000	-\$5,000,000
86	BTR — LIHP INPATIENT HOSP. COSTS FOR CDCR INMA	\$75,223,000	\$0	\$72,462,000	\$0	-\$2,761,000	\$0
87	MH/UCD & BTR—CCS AND GHPP	\$71,004,000	\$0	\$71,004,000	\$0	\$0	\$0
88	BTR - LIHP - DSRIP HIV TRANSITION PROJECTS	\$225,000,000	\$112,500,000	\$55,000,000	\$27,500,000	-\$170,000,000	-\$85,000,000
89	MH/UCD & BTR—DPH INTERIM RATE GROWTH	\$87,825,000	\$43,912,500	\$48,440,000	\$24,220,000	-\$39,385,000	-\$19,692,500
90	MH/UCD—SAFETY NET CARE POOL	\$42,735,000	\$0	\$45,683,000	\$0	\$2,948,000	\$0
91	NDPH SAFETY NET CARE POOL	\$40,000,000	\$0	\$45,000,000	\$0	\$5,000,000	\$0
92	MH/UCD—HEALTH CARE COVERAGE INITIATIVE	\$5,000,000	\$0	\$20,826,000	\$0	\$15,826,000	\$0
93	BTR—DESIGNATED STATE HEALTH PROGRAMS	\$49,300,000	-\$312,823,000	\$17,150,000	-\$493,199,000	-\$32,150,000	-\$180,376,000
94	MH/UCD & BTR—NDPH SUPPLEMENTAL PAYMENT	\$5,236,000	\$2,618,000	\$5,252,000	\$2,626,000	\$16,000	\$8,000
95	MH/UCD—DISTRESSED HOSPITAL FUND	\$0	\$0	\$1,054,000	\$527,000	\$1,054,000	\$527,000
96	MH/UCD & BTR—MIA-LTC	\$0	-\$14,493,000	\$0	-\$14,493,000	\$0	\$0
97	MH/UCD & BTR—BCCTP	\$0	-\$988,000	\$0	-\$988,000	\$0	\$0
98	MH/UCD & BTR—DPH INTERIM RATE	\$0	-\$449,298,500	\$0	-\$453,592,500	\$0	-\$4,294,000
99	MH/UCD—FEDERAL FLEX. & STABILIZATION - SNCP AR	\$0	\$0	\$0	\$0	\$0	\$0
100	BTR—INCREASE DESIGNATED STATE HEALTH PROGR	\$0	-\$100,000,000	\$0	-\$100,000,000	\$0	\$0
102	ELIMINATE NDPH SUPPLEMENTAL PAYMENT	-\$3,800,000	-\$1,900,000	-\$3,800,000	-\$1,900,000	\$0	\$0
103	MH/UCD—FEDERAL FLEX. & STABILIZATION-SNCP	-\$9,187,000	\$0	-\$9,187,000	\$0	\$0	\$0
104	ELIMINATE NDPH IGT SUPPLEMENTAL PAYMENTS	-\$70,000,000	-\$35,000,000	-\$70,000,000	-\$35,000,000	\$0	\$0
105	NDPH IP FFS PAYMENT METHODOLOGY CHANGE	-\$71,660,000	-\$95,830,000	-\$77,800,000	-\$95,830,000	-\$6,140,000	\$0
106	HOSPITAL STABILIZATION	-\$85,754,000	-\$42,877,000	-\$85,754,000	-\$42,877,000	\$0	\$0
107	BTR—HEALTH CARE COVERAGE INITIATIVE ROLLOVER	-\$200,000,000	-\$27,654,500	-\$200,000,000	\$0	\$0	\$27,654,500
WAIVER--MH/UCD & BTR SUBTOTAL		\$7,769,371,000	\$1,611,823,000	\$8,294,487,000	\$1,207,226,000	\$525,116,000	-\$404,597,000

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MANAGED CARE							
111	MANAGED CARE PUBLIC HOSPITAL IGTS	\$900,000,000	\$450,000,000	\$900,000,000	\$450,000,000	\$0	\$0
112	MANAGED CARE RATE RANGE IGTS	\$525,946,000	\$234,345,000	\$533,935,000	\$234,338,000	\$7,989,000	-\$7,000
114	RETRO MC RATE ADJUSTMENTS FOR FY 2011-12	\$0	\$0	\$388,718,000	\$194,359,000	\$388,718,000	\$194,359,000
116	MANAGED CARE COST BASED REIMBURSEMENT CLIN	\$90,073,000	\$45,036,500	\$110,417,000	\$55,208,500	\$20,344,000	\$10,172,000
120	INCREASE IN CAPITATION RATES FOR GROSS PREMIL	\$20,704,000	\$10,424,000	\$11,896,000	\$5,186,000	-\$8,808,000	-\$5,238,000
121	NOTICES OF DISPUTE/ADMINISTRATIVE APPEALS	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$0	\$0
125	MANAGED CARE IGT ADMIN. & PROCESSING FEE	\$0	\$0	\$0	\$0	\$0	\$0
127	FUNDING ADJUSTMENT OF GROSS PREMIUM TAX TO C	\$0	\$0	\$0	\$0	\$0	\$0
128	FFS COSTS FOR MANAGED CARE ENROLLEES	\$0	\$0	\$0	\$0	\$0	\$0
130	DISCONTINUE UNDOCUMENTED BENEFICIARIES FROM	-\$743,000	-\$371,500	-\$703,000	-\$351,500	\$40,000	\$20,000
131	MANAGED CARE DEFAULT ASSIGNMENT	-\$4,818,000	-\$2,409,000	-\$1,797,000	-\$898,500	\$3,021,000	\$1,510,500
132	MANAGED CARE EXPANSION TO RURAL COUNTIES	-\$5,360,000	-\$2,680,000	-\$7,181,000	-\$3,590,500	-\$1,821,000	-\$910,500
133	POTENTIALLY PREVENTABLE ADMISSIONS	\$0	\$0	-\$36,332,000	-\$18,166,000	-\$36,332,000	-\$18,166,000
134	ALIGN MANAGED CARE BENEFIT POLICIES	-\$96,406,000	-\$48,203,000	-\$93,535,000	-\$46,767,500	\$2,871,000	\$1,435,500
135	TRANSITION OF DUAL ELIGIBLES-LONG TERM CARE	-\$1,198,255,000	-\$599,127,500	-\$1,080,535,000	-\$540,267,500	\$117,720,000	\$58,860,000
207	EXTEND GROSS PREMIUM TAX - INCR. CAPITATION RA	\$435,505,000	\$217,752,500	\$364,348,000	\$182,174,000	-\$71,157,000	-\$35,578,500
208	EXTEND GROSS PREMIUM TAX-FUNDING ADJUSTMEN	\$0	\$0	\$0	\$0	\$0	\$0
--	COVERAGE FOR FORMER AGNEWS RESIDENTS	\$2,682,000	\$1,341,000	\$0	\$0	-\$2,682,000	-\$1,341,000
--	GENERAL FUND REIMBURSEMENTS FROM DPHS	\$0	\$0	\$0	\$0	\$0	\$0
--	MANDATORY SPD ENROLLMENT INTO MANAGED CARE	-\$303,007,000	-\$151,503,500	\$0	\$0	\$303,007,000	\$151,503,500
--	TRANSFER OF IHSS COSTS TO CDSS	\$495,430,000	\$495,430,000	\$0	\$0	-\$495,430,000	-\$495,430,000
	MANAGED CARE SUBTOTAL	\$863,751,000	\$652,034,500	\$1,091,231,000	\$513,224,000	\$227,480,000	-\$138,810,500
PROVIDER RATES							
137	FQHC/RHC/CBRC RECONCILIATION PROCESS	\$199,721,320	\$99,860,660	\$187,648,100	\$93,824,050	-\$12,073,220	-\$6,036,610

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

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
NOVEMBER 2012 ESTIMATE COMPARED TO APPROPRIATION
FISCAL YEAR 2012-13**

NO.	POLICY CHANGE TITLE	2012-13 APPROPRIATION		NOV. 2012 EST. FOR 2012-13		DIFFERENCE	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
PROVIDER RATES							
139	10% PYMT REDUCTION RESTORATION FOR AB 1629 F/	\$192,568,000	\$96,284,000	\$75,803,000	\$37,901,500	-\$116,765,000	-\$58,382,500
140	LTC RATE ADJUSTMENT	\$49,325,240	\$24,662,620	\$36,196,790	\$18,098,400	-\$13,128,450	-\$6,564,220
141	AB 1629 RATE ADJUSTMENTS DUE TO QA FEE INCREA	\$74,049,000	\$37,024,500	\$35,989,220	\$17,994,610	-\$38,059,780	-\$19,029,890
142	AIR AMBULANCE MEDICAL TRANSPORTATION	\$24,044,000	\$12,022,000	\$23,523,000	\$11,761,000	-\$521,000	-\$261,000
143	ANNUAL MEI INCREASE FOR FQHCS/RHCS	\$12,421,520	\$6,210,760	\$11,043,820	\$5,521,910	-\$1,377,700	-\$688,850
144	HOSPICE RATE INCREASES	\$11,088,830	\$5,544,410	\$6,701,980	\$3,350,990	-\$4,386,840	-\$2,193,420
146	SB 90 PRESERVING CONTRACT HOSPITALS	-\$34,974,000	-\$17,487,000	-\$34,974,000	-\$17,487,000	\$0	\$0
147	DENTAL RETROACTIVE RATE CHANGES	-\$9,107,000	-\$4,553,500	-\$4,197,000	-\$2,098,500	\$4,910,000	\$2,455,000
148	LABORATORY RATE METHDOLOGY CHANGE	-\$15,384,000	-\$7,692,000	-\$6,396,840	-\$3,198,420	\$8,987,160	\$4,493,580
149	REDUCTION TO RADIOLOGY RATES	-\$48,994,000	-\$24,497,000	-\$24,181,300	-\$12,090,650	\$24,812,700	\$12,406,350
150	NON-AB 1629 LTC RATE FREEZE	-\$76,878,000	-\$38,439,000	-\$44,324,000	-\$22,162,000	\$32,554,000	\$16,277,000
151	ELIMINATE 2012-13 RATE INCREASE & SUPP. PAYMEN	-\$146,496,000	-\$73,248,000	-\$73,502,230	-\$36,751,120	\$72,993,770	\$36,496,880
152	10% PAYMENT REDUCTION FOR LTC FACILITIES	-\$145,719,000	-\$72,859,500	-\$89,399,100	-\$44,699,550	\$56,319,900	\$28,159,950
153	10% PROVIDER PAYMENT REDUCTION	-\$764,182,000	-\$382,091,000	-\$1,041,067,740	-\$520,533,870	-\$276,885,740	-\$138,442,870
--	QUALITY AND ACCOUNTABILITY PAYMENTS PROGRAM	\$46,643,000	\$23,321,500	\$0	\$0	-\$46,643,000	-\$23,321,500
--	SB 90 NON-CONTRACT HOSPITAL RATE & PAYMENT CI	\$102,948,000	\$51,474,000	\$0	\$0	-\$102,948,000	-\$51,474,000
	PROVIDER RATES SUBTOTAL	-\$528,925,090	-\$264,462,540	-\$941,136,300	-\$470,568,650	-\$412,211,210	-\$206,106,110
SUPPLEMENTAL PMNTS.							
154	HOSPITAL QAF - HOSPITAL PAYMENTS	\$7,827,754,000	\$3,961,827,000	\$7,990,981,000	\$4,044,315,000	\$163,227,000	\$82,488,000
155	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT	\$173,507,000	\$0	\$218,418,000	\$0	\$44,911,000	\$0
156	FFP FOR LOCAL TRAUMA CENTERS	\$67,130,000	\$33,565,000	\$126,800,000	\$63,400,000	\$59,670,000	\$29,835,000
157	FREESTANDING CLINICS SUPPLEMENTAL PAYMENTS	\$195,000,000	\$0	\$120,000,000	\$0	-\$75,000,000	\$0
158	CAPITAL PROJECT DEBT REIMBURSEMENT	\$111,214,000	\$45,343,500	\$111,976,000	\$45,854,000	\$762,000	\$510,500
159	NDPH IGT SUPPLEMENTAL PAYMENTS	\$70,000,000	\$35,000,000	\$70,000,000	\$35,000,000	\$0	\$0

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

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
NOVEMBER 2012 ESTIMATE COMPARED TO APPROPRIATION
FISCAL YEAR 2012-13**

NO.	POLICY CHANGE TITLE	2012-13 APPROPRIATION		NOV. 2012 EST. FOR 2012-13		DIFFERENCE	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
SUPPLEMENTAL PMNTS.							
160	CERTIFICATION PAYMENTS FOR DP-NFS	\$32,000,000	\$0	\$58,782,000	\$0	\$26,782,000	\$0
161	IGT FOR NON-SB 1100 HOSPITALS	\$100,000,000	\$50,000,000	\$30,000,000	\$15,000,000	-\$70,000,000	-\$35,000,000
162	MEDI-CAL REIMBURSEMENTS FOR OUTPATIENT DSH	\$10,000,000	\$5,000,000	\$10,000,000	\$5,000,000	\$0	\$0
163	MEDI-CAL REIMBURSEMENTS FOR OUTPATIENT SRH	\$8,000,000	\$4,000,000	\$8,000,000	\$4,000,000	\$0	\$0
164	STATE VETERANS' HOMES SUPPLEMENTAL PAYMENT:	\$4,000,000	\$0	\$3,000,000	\$0	-\$1,000,000	\$0
203	HOSPITAL QAF PROGRAM CHANGES	-\$300,000,000	-\$150,000,000	-\$300,000,000	-\$150,000,000	\$0	\$0
--	GROUND EMT PAYMENT	\$218,645,000	\$0	\$0	\$0	-\$218,645,000	\$0
	SUPPLEMENTAL PMNTS. SUBTOTAL	\$8,517,250,000	\$3,984,735,500	\$8,447,957,000	\$4,062,569,000	-\$69,293,000	\$77,833,500
OTHER							
170	ARRA HITECH - PROVIDER PAYMENTS	\$468,775,000	\$0	\$605,750,000	\$0	\$136,975,000	\$0
171	AB 97 INJUNCTIONS	\$174,555,000	\$87,277,500	\$826,346,000	\$413,173,000	\$651,791,000	\$325,895,500
174	ICF-DD TRANSPORTATION AND DAY CARE COSTS- CD	\$212,509,000	\$0	\$163,067,000	\$0	-\$49,442,000	\$0
180	AUDIT SETTLEMENTS	\$0	\$0	\$14,471,000	\$14,471,000	\$14,471,000	\$14,471,000
181	CDDS DENTAL SERVICES	\$11,430,000	\$11,430,000	\$11,430,000	\$11,430,000	\$0	\$0
182	ICF-DD ADMIN. AND QA FEE REIMBURSEMENT - CDDS	\$11,418,000	\$5,709,000	\$11,418,000	\$5,709,000	\$0	\$0
183	NONCONTRACT HOSP INPATIENT COST SETTLEMENT:	\$5,203,000	\$2,601,500	\$4,037,000	\$2,018,500	-\$1,166,000	-\$583,000
186	INDIAN HEALTH SERVICES	\$1,463,000	-\$9,838,500	\$2,082,000	-\$9,273,500	\$619,000	\$565,000
188	CIGARETTE AND TOBACCO SURTAX FUNDS	\$0	\$0	\$0	\$0	\$0	\$0
189	CLPP FUNDS	\$0	\$0	\$0	\$0	\$0	\$0
190	HOSPITAL QAF - CHILDREN'S HEALTH CARE	\$0	\$0	\$0	\$0	\$0	\$0
191	FIRST 5 CALIFORNIA FUNDING	\$0	\$0	\$0	\$0	\$0	\$0
193	OPERATIONAL FLEXIBILITIES	-\$20,000,000	-\$10,000,000	-\$784,550	-\$392,280	\$19,215,450	\$9,607,730
194	FI COST CONTAINMENT PROJECTS	-\$1,032,800	-\$516,400	-\$1,520,000	-\$760,000	-\$487,200	-\$243,600
195	OVERPAYMENTS - INTEREST RATE CHANGE	-\$1,556,000	-\$1,556,000	-\$1,556,000	-\$1,556,000	\$0	\$0

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

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
NOVEMBER 2012 ESTIMATE COMPARED TO APPROPRIATION
FISCAL YEAR 2012-13**

NO.	POLICY CHANGE TITLE	2012-13 APPROPRIATION		NOV. 2012 EST. FOR 2012-13		DIFFERENCE	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
	OTHER						
196	MEDICARE BUY-IN QUALITY REVIEW PROJECT	-\$20,000,000	-\$19,000,000	-\$4,000,000	-\$3,800,000	\$16,000,000	\$15,200,000
197	ANTI-FRAUD ACTIVITIES FOR PHARMACY AND PHYSIC	-\$10,895,510	-\$5,447,760	-\$7,170,540	-\$3,585,270	\$3,724,970	\$1,862,490
199	FQHC/RHC AUDIT STAFFING	-\$6,044,000	-\$3,022,000	-\$12,723,000	-\$6,361,500	-\$6,679,000	-\$3,339,500
201	3.6% IHSS REDUCTION	\$0	\$0	-\$50,212,000	\$0	-\$50,212,000	\$0
--	ANTI-FRAUD INITIATIVE	-\$6,500,000	-\$3,250,000	\$0	\$0	\$6,500,000	\$3,250,000
--	HEALTHY FAMILIES - CDMH	\$21,099,000	\$0	\$0	\$0	-\$21,099,000	\$0
--	RECONCILIATION WITH THE BUDGET ACT	-\$104,666,000	-\$31,872,350	\$0	\$0	\$104,666,000	\$31,872,350
--	TRANSFER OF IHSS COSTS TO DHCS	\$0	\$0	\$0	\$0	\$0	\$0
--	TRANSITION OF DUAL ELIGIBLES - MEDICARE SAVING	-\$12,332,000	-\$12,332,000	\$0	\$0	\$12,332,000	\$12,332,000
--	TRIGGER CUTS TO CDSS FOR IHSS	-\$325,420,000	\$0	\$0	\$0	\$325,420,000	\$0
	OTHER SUBTOTAL	\$398,005,680	\$10,182,990	\$1,560,634,910	\$421,072,960	\$1,162,629,230	\$410,889,960
	GRAND TOTAL	\$18,209,941,550	\$5,613,946,630	\$19,427,463,150	\$5,219,566,860	\$1,217,521,600	-\$394,379,760

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