JOINT BUDGET Committee



SUPPLEMENTAL BUDGET REQUESTS FY 2016-17

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING (Office of Community Living)

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

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DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

DEPARTMENT OVERVIEW

The Department helps pay health and long-term care expenses for low-income and vulnerable populations. To assist with these costs the Department receives significant federal matching funds, but must adhere to federal rules regarding program eligibility, benefits, and other features, as a condition of accepting the federal money. The major programs administered by the Department include:

- Medicaid serves people with low income and people needing long-term care
- Children's Basic Health Plan provides a low-cost insurance option for children and pregnant women with income slightly higher than the Medicaid eligibility criteria
- Colorado Indigent Care Program defrays a portion of the costs to providers of uncompensated and under-compensated care for people with low income, if the provider agrees to program requirements for discounting charges to patients on a sliding scale based on income
- Old Age Pension Health and Medical Program serves elderly people with low income who qualify for a state pension but do not qualify for Medicaid or Medicare.

The Department also performs functions related to improving the health care delivery system, including advising the General Assembly and the Governor, distributing tobacco tax funds through the Primary Care and Preventive Care Grant Program, financing Public School Health Services, and housing the Commission on Family Medicine Residency Training Programs.

This Joint Budget Committee staff supplemental document covers the Office of Community Living which houses the Division for Individuals with Intellectual and Developmental Disabilities (Division). The Division which oversees home- and community-based services for individual with intellectual and developmental disabilities and is responsible for the programs:

- Administration of three Medicaid waivers for individuals with intellectual and developmental disabilities;
- Establishment of service reimbursement rates;
- Ensuring compliance with federal Centers for Medicare and Medicaid Services rules and regulations;
- Communication and coordination with Community-Centered Boards regarding waiver policies, rate changes, and waiting list information reporting; and
- Administration of the Family Support Services Program.

SUMMARY: FY 2016-17 APPROPRIATION AND RECOMMENDATION

DEPARTMENT OF HEALTH (CARE POLICY A	AND FINANCIN	IG: RECOMMI	ended Change	S FOR FY 2016	-17
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FTE
FY 2016-17 APPROPRIATION						
HB 16-1405 (Long Bill)	\$888,285,869	\$376,336,333	\$35,301,226	\$4,673,984	\$471,974,326	432.0
Other Legislation	1,585,047	343,067	411,248	0	830,732	3.8
CURRENT FY 2016-17 APPROPRIATION	\$889,870,916	\$376,679,400	\$35,712,474	\$4,673,984	\$472,805,058	435.8
Recommended Changes						
Current FY 2016-17 Appropriation	\$889,870,916	\$376,679,400	\$35,712,474	\$4,673,984	\$472,805,058	435.8
S5 Office of Community Living	4,701,000	0	4,701,000	0	0	0.0
S7 Oversight of state resources	200,000	50,000	50,000	0	100,000	0.0
S8 MMIS Operations	(1,495,480)	(32,549)	(537,805)	(269,394)	(655,732)	0.0
S10 Regional Center cost reporting	0	0	0	0	0	0.0
S11 Cross-system Response Pilot spending	281,165	0	817,936	(536,771)	0	0.0
S12 SB 16-19 PACE rollforward	0	0	0	0	0	0.0
S13 Connect for Health Colorado	5,144,208	1,790,457	0	0	3,353,751	0.0
SNP HUM Annual fleet adjustment	(29,500)	(14,750)	0	0	(14,750)	0.0
NP Mental health institutes	138,192	68,820	0	0	69,372	0.0
NP Property fund supplemental	840	420	0	0	420	0.0
NP OIT CBMS	(1,242,884)	(2,123,226)	(827,880)	(35,666)	1,743,888	0.0
RECOMMENDED FY 2016-17 Appropriation	\$897,568,457	\$376,418,572	\$39,915,725	\$3,832,153	\$477,402,007	435.8
Recommended Increase/(Decrease)	\$7,697,541	(\$260,828)	\$4,203,251	(\$841,831)	\$4,596,949	0.0
Percentage Change	0.9%	(0.1%)	11.8%	(18.0%)	1.0%	0.0%
FY 2016-17 EXECUTIVE REQUEST	\$872,667,274	\$367,769,259	\$33,832,954	\$3,523,924	\$467,541,137	435.8
Request Above/(Below) Recommendation	(\$24,901,183)	(\$8,649,313)	(\$6,082,771)	(\$308,229)	(\$9,860,870)	(0.0)

Note: This document covers the supplementals in the highlighted rows only. Supplementals shown in the other rows will be covered by other analysts at a later date. The figures in the non-highlighted rows reflect the Department request.

S5 OFFICE OF COMMUNITY LIVING: The Department requests a reduction of \$18,626,814 total funds, of which \$8,707,629 is General Fund, and \$9,919,185 is federal funds for caseload adjustments to the three intellectual and developmental disability waivers based on four months of actual data. Staff recommends that the Committee deny the request and wait until the February 15th caseload adjustment is submitted. Staff recommends the Committee appropriate \$4,701,000 cash funds from the Intellectual and Developmental Disabilities Services Cash Fund for a one-time Supported Living Services provider incentive.

S10 REGIONAL CENTER COST REPORTING: The Department requests \$75,000 total funds, of which \$37,500 is General Fund, to hire a contractor to audit Colorado's regional centers and calculate their rates to ensure the regional centers are being properly compensated for the services they provide. Staff recommends the Committee appropriate funds to hire an auditor to calculate the daily rate for Regional Centers. Staff also recommends an offsetting reduction of the same amount to the appropriation for the Regional Centers

S11 CROSS-SYSTEM RESPONSE PILOT SPENDING: The Department requests a total reduction \$1,408,835, of which \$563,835 is cash funds and \$845,000 is reappropriated funds to correct a technical error in the appropriation for the Cross-System Response for Behavioral Health Crises Pilot Program. Staff recommends the Committee make the following appropriation changes:

- Change the appropriation for the personal services and operating expenses from reappropriated funds to cash funds (same as the Department request);
- Create a new line item titled Cross-System Response for Behavioral Health Crises Pilot Program Services and appropriate \$1,050,215 cash funds from the Cross-System Response Pilot Program Cash Fund (different from the Department request); and
- Provide roll forward authority on the newly created line time (providing roll forward is the same as the Department request, the recommendation is just on a new line item)

SNP HUM ANNUAL FLEET ADJUSTMENT: The Department requests a reduction of \$29,750 total funds, of which \$14,750 is General Fund for the annual midyear fleet vehicle adjustment to Medicaid reappropriated funds in the Department of Human Services. Since the request would result in a small reduction of General Fund, staff recommends the Committee approve this request to capture the General Fund savings.

PRIORITIZED SUPPLEMENTAL REQUESTS

S5 OFFICE OF COMMUNTIY LIVING CASELOAD ADJUSTMENT

	REQUEST	RECOMMENDATION
TOTAL	(\$18,626,814)	\$4,701,000
General Fund	(8,707,629)	0
Cash Funds	0	4,701,000
Federal Funds	(9,919,185)	0

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? YES

[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.]

Explanation: JBC staff and the Department agree that this request is the result of data that was not available when the original appropriation was made.

DEPARTMENT REQUEST: The Department requests a reduction of \$18,626,814 total funds of which \$8,707,629 is General Fund and \$9,919,185 is federal funds for caseload adjustments to the three intellectual and developmental disability (IDD) waivers based on four months of actual expenditure data.

STAFF RECOMMENDATION: Staff recommends that the Committee deny the supplemental and wait until the February 15th caseload adjustment to determine what FY 2016-17 appropriation adjustments should be made. The first six months of actual expenditure data indicates the expenditures for the IDD waivers will be closer to the appropriation than is projected in this request. Additionally, staff recommends the Committee appropriate \$4,701,000 cash funds from the Intellectual and Developmental Disabilities Services Cash Fund for a one-time Supported Living Services provider incentive.

STAFF ANALYSIS: The supplemental budget request is based on four months of actual expenditure data. The Department publishes a monthly expenditure update. Based on expenditure data through December 2016, expenditures for the IDD waivers will be closer to the original FY 2016-17 appropriation than was projected based on four months of data. The following table summarizes the JBC staff projection based on actual expenditure data. The Department will submit a February 15, 2017 caseload adjustment based on six months of expenditure data. Using the February 15th caseload adjustment will limit the amount of significant appropriation changes.

JBC	JBC STAFF LINEAR PROJECTION OF IDD WAIVERS FY 2016-17 EXPENDITURES							
	6 Month Total Expenditure	Projected Total	APPROPRIATION	DIFFERENCE (PROJECTION - Appropriation)				
Comprehensive								
Waiver	\$179,822,275	\$359,644,550	\$362,346,433	(2,701,883)				
Supported Living								
Services Waiver	33,184,813	69,746,358	69,681,391	64,967				
Children's Extensive								
Support Services	12,762,163	27,153,915	26,310,826	843,089				
Targeted Case								
Management	15,853,599	31,707,198	32,255,501	(548,303)				
TOTAL	\$241,622,850	\$488,252,022	\$490,594,151	(\$2,342,129)				

ISSUES WITH SUSTAINING SLS PROVIDERS

Staff is aware of the ongoing issues with retaining providers for services available through the Supported Living Services waiver. It is not feasible within the time remaining in FY 2016-17 to provide a sustainability rate increase for some or all of the services available through the Supported Living Services waiver. Staff is working with the Department to determine the feasibility and cost of rate increases to some, or all, of the services provided through the Supported Living Services waiver. Staff anticipates providing the Committee with additional information and, if appropriate, a recommendation for FY 2017-18 changes during the March 14, 2017 figure setting presentation. Since it is not possible to provide a long-term solution through the supplemental process, but the inadequacy of rates is a current problem resulting in providers ceasing to provide services, staff recommends a one-time provider capacity payment be included in the FY 2016-17 supplemental. Staff recommends a \$1,000 per person provider capacity payment be made to each provider providing services to individuals on the Supported Living Services waiver. The \$1,000 per person figure is based on the average per person capacity increase that was provided in H.B. 14-1252 as well as the amount of available funds in the Intellectual and Developmental Disabilities Services Cash Fund.

Based on the Department's November 1 request there is approximately \$9.0 million available funds in the Intellectual and Developmental Disabilities Services Cash Fund. The Department has request to use approximately \$8.5 million of these available funds for the FY 2017-18 caseload adjustment. If the Committee approves the staff recommendation, the IDD waivers will require \$4.7 million General Fund for the FY 2017-18 caseload adjustment (the Department has requested to use approximately \$8.5 million from the Intellectual and Developmental Disabilities Services Cash Fund for the FY 2017-18 caseload adjustment). Note the caseload adjustment for FY 2017-18 will be revised by the February 15, 2017 caseload submission.

The distribution of funds appropriated for system capacity in HB 14-1252 used "FY 2012-13 claims information to proportionally distribute the funds across providers based on the number of clients served. The Department targeted providers that had a substantial claims volume and set a minimum threshold of \$2,000 in order for a provider to receive funding." Since there is a precedent for the General Assembly to provide a one-time increase to providers for the Supported Living Services waiver, staff recommends the Committee appropriate \$4,701,000 cash funds for a one-time provider sustainability payment.

S10 REGIONAL CENTER COST REPORTING AND AUDITING

	REQUEST	RECOMMENDATION
TOTAL	\$75,000	\$0
Cash Funds	37,500	0
Reappropriated Funds	37,500	0

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria?

[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.]

Explanation: The Department argues that this request meets the necessary criteria because the incorrect compensation of the Regional Centers is a technical error which has a substantive effect on the operation of the program. The Department further argues that improving the compensation process as soon as possible is required to ensure the Regional Centers continue to operate in a manner consist with the rules of the Center for Medicare and Medicaid Services. Staff does not believe this request meets any of the supplemental criteria because there was no error when the original appropriation was made, this is not the result of new data, an emergency, or an act of God, and is not an unforeseen contingency.

DEPARTMENT REQUEST: The Department requests \$75,000 total funds, of which \$37,500 is General Fund, to hire a contractor to audit Colorado's regional centers and calculate their rates to ensure the Regional Centers are being properly compensated for the services they provide.

STAFF RECOMMENDATION: Despite the fact this request does not meet supplemental criteria, staff recommends the Committee appropriatr funds to hire an auditor to calculate the daily rate for Regional Centers. Staff's recommendation includes an offsetting reduction of the same amount from the appropriation for the Regional Centers because the Department of Human Services indicated there was approximately \$700,000 extra spending authority (of which \$350,000 is General Fund) within the existing appropriations for the Regional Centers. Therefore the appropriation should be reduced in an amount equal to this request because there is available General Fund which can offset the recommended increase.

STAFF ANALYSIS: Staff finds it ironic that the Department of Human Services indicated in the October letter to the Joint Budget Committee regarding employee pay increases at the Regional Centers that "The Department [of Human Services] has worked with both the Departments of Personnel and Administration (DPA) and Health Care Policy and Financing (HCPF) in crafting this initiative. All Departments are in agreement that this action complies with State Personnel Rules and the Regional Centers' existing spending authority." The letter concludes by saying "Long Bill Spending Authority and Revenue Analysis—the Department of Human Services has sufficient spending authority within the existing Regional Center appropriations to allow for the total increased cost to the Regional Centers of this effort in Fiscal Year 2016-17. The Department has shared its spending authority analysis with HCPF. HCPF concurs that based on current information and analysis, there should be no need for additional resources at either Department to undertake this initiative."

The Department of Health Care Policy and Financing's request states, "although the Department [of Health Care Policy and Financing] has been actively making improvements to the rate assessments and reimbursement methodology for Regional Centers, Regional Centers have continued to receive inaccurate compensation for the services they provide, resulting in the need for significant

NO

reconciliations at fiscal year-end. More detailed cost reporting for the Regional Centers would help to ensure the Department reimburses the regional centers correctly and is in compliance with Centers for Medicare and Medicaid Services moving forward." It is concerning to staff that the Department of Human Services implemented significant pay increases for staff based on spending authority, while almost simultaneously the Department of Health Care Policy and Financing is working on this supplemental request to address issues with auditing and paying for the costs of Regional Centers.

Despite the fact staff does not believe this request meets supplemental criteria, staff does believe providing the Department of Health Care Policy and Financing with the resources to ensure the Regional Centers costs are appropriate is in the best interest of the General Assembly. Staff would note the request causes staff to question whether the Department of Human Services can actually afford the pay increases at the Regional Centers.

The recommendation to reduce the appropriation to the Regional Centers by a like amount is based on the information provided by the Department of Human Services which indicated that after the pay increases the appropriation for the Regional Centers was estimated to be \$700,000 total funds more than will be needed for FY 2016-17.

TABLE 4: GRAND TOTAL COST TO ACHIEVE PREVAILING MARKET WAGE FOR CURRENT DIRECT CARE STAFF AND NURSES AND VACANCIES AND ASSOCIATED COMPRESSION INCREASES FOR EXISTING

	EMPLOYEES								
	Estimated FY 2016-17 Regional Center Expenses	Estimated Prorated Cost of Filling Vacancies and Compression Pay Increases2	ESTIMATED FY 2016-17 Total Expenses After Compensation Increase	FY 2016-17 Long Bill Spending Authority (RF) Plus Estimated Allocated POTS and Spending Authority Transfers					
Wheat Ridge	\$25,731,427	\$2,259,385	\$27,990,812	\$28,149,419					
Pueblo	14,697,780	2,089,996	16,787,776	17,106,915					
Grand Junction Total	19,974,360	1,488,751	21,463,111	21,688,013					
ICF	7,842,863	506,175	8,349,038	8,480,926					
HCBS Waiver	12,131,497	982,576	13,114,073	13,207,087					
Grand Total	\$60,403,567	\$5,838,132	\$66,241,699	\$66,944,347					

S11 HB 15-1368 CROSS-SYSTEM RESPONSE PILOT SPENDING

	REQUEST	RECOMMENDATION
TOTAL	(\$1,408,835)	\$281,165
Cash Funds	(563,835)	1,126,165
Reappropriated Funds	(845,000)	(845,000)

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? YES [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.]

Explanation: JBC staff and the Department agree that this request is the result of a technical error made when calculating the original appropriation.

DEPARTMENT REQUEST: The Department requests a total reduction \$1,408,835, of which \$563,835 is cash funds and \$845,000 is reappropriated funds to correct a technical error in the appropriation for the Cross-System Response for Behavioral Health Crises Pilot Program created by H.B. 15-1368 (Cross-System Response for Behavioral Health Crises Pilot Program).

STAFF RECOMMENDATION: Staff recommends the Committee make the following appropriation changes:

- Change the appropriation for the personal services and operating expenses from reappropriated funds to cash funds (same as the Department request);
- Create a new line item titled Cross-System Response for Behavioral Health Crises Pilot Program Services and appropriate \$1,050,215 cash funds from the Cross-System Response Pilot Program Cash Fund (different from the Department request); and
- Provide roll forward authority on the newly created line time (providing roll forward is the same as the Department request, the recommendation is just on a new line item)

The recommendation as compared to the Department request is summarized in the following table.

COMPARISON OF S10 RECOMMENDATION AND REQUEST							
	Request			RECOMMENDATION			
	TOTAL	Cash Funds	Reapprop. Funds	Total	Cash Funds	Reapprop. Funds	
Personal Services	0	75,000	(75,000)	0	75,000	(75,000)	
Operating Expenses	(769,050)	950	(770,000)	(769,050)	950	(770,000)	
Appropriation to Pilot Program Fund	(639,785)	(639,785)	0	0	0	0	
Pilot Program Services (New Line Item)	0 0 0 1,050,215 741,986 308,					308,229	
Total	(\$1,408,835)	(\$563,835)	(\$845,000)	\$281,165	\$817,936	(\$536,771)	

STAFF ANALYSIS: The supplemental budget request is intended to address the following three items related to the current appropriation structure for the Cross-System Response for Behavioral Health Crises Pilot Program (Pilot Program):

- 1 The current letternote language does not explicitly appropriate funding to the Pilot Program.
- 2 Pilot Program services are being paid through an operating line in the Long Bill, which is inconsistent with how other service payments are made by the Department.

3 There is an opportunity to reallocate funds that reverted to the Cross-System Response for Behavioral Health Crises Pilot Program Fund (Fund) in FY 2015-16 for the purpose of providing services to clients seeking assistance through the Pilot Program in FY 2016-17 through FY 2018-19.

Item #1 – Letternote Language

Staff agrees with the Department that the current letternote language does not clearly appropriate money from the Fund. Therefore staff recommends the Committee approve the letternote change as requested by the Department to ensure the Department is able to use the money in the Fund for the Pilot Program:

^{(cb} These amounts shall be from the Cross-system Response for Behavioral Health Crises Pilot Program line item appropriation within this subsection. FUND CREATED IN SECTION 25.5-6-412 (7) C.R.S."

Item #2 – Line Item from Which Services are Paid and Roll Forward Authority

Currently the structure of the Long Bill appropriates funds for services from the Office of Community Living, Operating Expenses line item. The Department does not pay for services from an operating expenses line item for any other program, and requests a change to the current structure. Staff recommendations differs slightly from the Department request, because staff is recommending the creation of a new line item called Cross-System Response for Behavioral Health Crises Pilot Program Services from which service costs are appropriated and no change to existing line where funds are appropriated into the Fund.

Currently the Long Bill appropriates \$1.7 million to the Fund to pay for current and future costs of the Pilot Program. The money is appropriated from the Intellectual and Developmental Disabilities Cash Fund. Staff does not recommend changing this appropriation because the purpose of this appropriation is to ensure all costs of the Pilot Program are paid from the Fund and there is not a future need for General Fund. The recommended changes will appropriate existing money in the Fund and not change the transfer of money into the Fund from the Intellectual and Developmental Disabilities Services Cash Fund. Making this appropriation change will enable the Pilot Programs to pay for services and collect data about what services are needed when an individual is in crisis FY 2018-19.

Additionally the Department requests, and staff recommends roll forward authority be provided to the appropriation for services. The reason for the staff recommendation is to ensure that the Pilot Program is able to provide services to individuals in crisis regardless of who the appropriate payer is. The Pilot Program is statutorily required to serve eligible clients regardless of payer and is constantly adapting its service delivery systems to account for anticipated caseload in an effort to stay within its budget. Since the service expenditures are constantly changing as the Pilot Program progresses, staff agrees with the Department request that roll forward authority would ensure funds are available when needed in the face of uncertain caseload and expenditure in the final months of FY 2016-17.

Issue #3 - Allocation of Reverted FY 2015-16 Funds to Pilot Program

The Department was unable to utilize the entirety of the FY 2015-16 appropriation because implementation was delayed due to the amount of time necessary to complete the Request for Proposal (RFP) process and secure a contractor for the Pilot Program. As a result, \$817,936 reverted to the Fund at the end of FY 2015-16.

These funds, pursuant to Section 25.5-6-412 (7), C.R.S., are to be used for the "direct and indirect costs associated with implementing the pilot program." The Department does not currently have spending authority for these cash funds and without the appropriation adjustments would remain unspent in the fund. The current appropriation for FY 2016-17 did not anticipate there would be funds available from FY 2015-16 for appropriation in FY 2016-17. Staff agrees with the Department request to appropriate the unused funds from FY 2015-16 for FY 2016-17 services.

NON-PRIORITIZED SUPPLEMENTAL REQUESTS

SNP3 HUMAN SERVICES ANNUAL FLEET ADJSUTMENT

	REQUEST	RECOMMENDATION	
TOTAL	(\$29,750)	(\$29,500)	
General Fund	(14,750)	(14,750)	
Federal Funds	(14,750)	(14,750)	

DEPARTMENT REQUEST: The Department requests a reduction of \$29,750 total funds, of which \$14,750 is General Fund for the annual midyear fleet vehicle adjustment. This appropriation supports the Department of Human Services fleet vehicle lease payments paid for with Medicaid funds.

STAFF RECOMMENDATION: The Committee approved the January 12, 2017 recommendation by Alfredo Kemm to deny the statewide request while allowing individual staff to make a different recommendation. Since the request would result in a small reduction of General Fund, staff recommends the Committee approve this request to capture the General Fund savings.

JBC Staff Supplemental Recommendations - FY 2016-17 Staff Working Document - Does Not Represent Committee Decision

Appendix A: Number Pages							
	FY 2015-16 Actual	FY 2016-17 Appropriation	FY 2016-17 Requested Change	FY 2016-17 Rec'd Change	FY 2016-17 Total w/Rec'd Change		
DEPARTMENT OF HEALTH CARE PO Sue Birch, Executive Director	LICY AND FINANCIN	G					
S5 Office of Community Living							
(4) OFFICE OF COMMUNITY LIVING(A) Division for Individuals with Intellectua(ii) Program Costs	al and Developmental Di	sabilities					
Adult Comprehensive Services	375,465,768	362,346,433	(12,664,521)	<u>0</u>	362,346,433		
General Fund	169,373,036	180,448,523	(6,306,932)	0	180,448,523		
Cash Funds	31,281,613	1	0	0	1		
Federal Funds	174,811,119	181,897,909	(6,357,589)	0	181,897,909		
Adult Supported Living Services	62,872,177	<u>69,681,391</u>	<u>(4,109,215)</u>	<u>4,701,000</u>	74,382,391		
General Fund	34,961,826	38,677,034	(2,046,389)	0	38,677,034		
Cash Funds	0	0	0	4,701,000	4,701,000		
Federal Funds	27,910,351	31,004,357	(2,062,826)	0	31,004,357		
Children's Extensive Support Services	22,544,937	26,310,826	<u>(594,807)</u>	<u>0</u>	26,310,826		
General Fund	11,094,363	13,102,791	(296,214)	0	13,102,791		
Federal Funds	11,450,574	13,208,035	(298,593)	0	13,208,035		
Case Management	30,139,104	<u>32,255,501</u>	<u>(1,258,271)</u>	<u>0</u>	32,255,501		
General Fund	15,404,955	16,605,002	(58,094)	0	16,605,002		
Federal Funds	14,734,149	15,650,499	(1,200,177)	0	15,650,499		

JBC Staff Supplemental Recommendations - FY 2016-17 Staff Working Document - Does Not Represent Committee Decision

	FY 2015-16 Actual	FY 2016-17 Appropriation	FY 2016-17 Requested Change	FY 2016-17 Rec'd Change	FY 2016-17 Total w/Rec'd Change
Total for S5 Office of Community Living	491,021,986	490,594,151	(18,626,814)	4,701,000	495,295,151
FTE	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	230,834,180	248,833,350	(8,707,629)	0	248,833,350
Cash Funds	31,281,613	1	0	4,701,000	4,701,001
Federal Funds	228,906,193	241,760,800	(9,919,185)	0	241,760,800

	FY 2015-16 Actual	FY 2016-17 Appropriation	FY 2016-17 Requested Change	FY 2016-17 Rec'd Change	FY 2016-17 Total w/Rec'd Change
S10 Regionl Center cost reporting					
(1) EXECUTIVE DIRECTOR'S OFFICE (F) Provider Audits and Services					
Professional Audit Contracts	2,454,646	3,401,907	75,000	75,000	3,476,907
General Fund	1,042,243	1,266,408	37,500	37,500	1,303,908
Cash Funds	191,893	415,408	0	0	415,408
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,220,510	1,720,091	37,500	37,500	1,757,591
(G) Services for People with Disabilities - Medi (1) DHS Regional Centers for People with Deve	0	es (c) Pueblo Regi	onal Center		
Pueblo Regional Center Waiver Services	<u>0</u>	10,307,792	<u>0</u>	(75,000)	10,232,792
General Fund	0	5,133,280	$\overline{0}$	(37,500)	5,095,780
Federal Funds	0	5,174,512	0	(37,500)	5,137,012
Total for S10 Regionl Center cost reporting	2,454,646	13,709,699	75,000	0	13,709,699
FTE	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	1,042,243	6,399,688	37,500	0	6,399,688
Cash Funds	191,893	415,408	0	0	415,408
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,220,510	6,894,603	37,500	0	6,894,603

	FY 2015-16 Actual	FY 2016-17 Appropriation	FY 2016-17 Requested Change	FY 2016-17 Rec'd Change	FY 2016-17 Total w/Rec'd Change
S11 Cross-System Response Pilot spending					
(4) OFFICE OF COMMUNITY LIVING(A) Division for Individuals with Intellectual and(i) Administrative Costs	d Developmental Di	sabilities			
Personal Services	3,090,607	3,063,982	<u>0</u>	<u>0</u>	3,063,982
FTE	34.2	35.5	0.0	0.0	35.5
General Fund	1,405,951	1,431,598	0	0	1,431,598
Cash Funds	259,564	182,080	75,000	75,000	257,080
Reappropriated Funds	0	75,000	(75,000)	(75,000)	0
Federal Funds	1,425,092	1,375,304	0	0	1,375,304
Operating Expenses	<u>2,027,063</u>	<u>1,070,539</u>	<u>(769,050)</u>	<u>(769,050)</u>	<u>301,489</u>
General Fund	144,899	144,899	0	0	144,899
Cash Funds	567,513	4,251	950	950	5,201
Reappropriated Funds	0	770,000	(770,000)	(770,000)	0
Federal Funds	1,314,651	151,389	0	0	151,389
Cross-system Response for behavioral Health Crises					
Pilot Program	<u>3,390,000</u>	<u>1,690,000</u>	<u>(639,785)</u>	<u>0</u>	<u>1,690,000</u>
FTE	0.0	0.0	0.0	0.0	0.0
Cash Funds	1,695,000	1,690,000	(639,785)	0	1,690,000
Reappropriated Funds	1,695,000	0	0	0	0
Cross-System Response Pilot Program Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,050,215</u>	<u>1,050,215</u>
Cash Funds	0	0	0	741,986	741,986
Reappropriated Funds	0	0	0	308,229	308,229

	FY 2015-16 Actual	FY 2016-17 Appropriation	FY 2016-17 Requested Change	FY 2016-17 Rec'd Change	FY 2016-17 Total w/Rec'd Change
Total for S11 Cross-System Response Pilot					
spending	8,507,670	5,824,521	(1,408,835)	281,165	6,105,686
FTE	<u>34.2</u>	<u>35.5</u>	<u>0.0</u>	<u>0.0</u>	<u>35.5</u>
General Fund	1,550,850	1,576,497	0	0	1,576,497
Cash Funds	2,522,077	1,876,331	(563,835)	817,936	2,694,267
Reappropriated Funds	1,695,000	845,000	(845,000)	(536,771)	308,229
Federal Funds	2,739,743	1,526,693	0	0	1,526,693
Totals Excluding Pending Items HEALTH CARE POLICY AND FINANCING					
TOTALS for ALL Departmental line items	9,040,413,446	9,116,880,878	(19,960,649)	4,982,165	9,121,863,043
FTE	422.2	435.8	<u>0.0</u>	<u>0.0</u>	<u>435.8</u>
General Fund	1,695,354,249	1,780,126,624	(8,670,129)	0	1,780,126,624
General Fund Exempt	809,452,060	874,267,590	0	0	874,267,590
Cash Funds	1,143,004,065	1,012,485,521	(563,835)	5,518,936	1,018,004,457
Reappropriated Funds	13,493,510	12,406,599	(845,000)	(536,771)	11,869,828
Federal Funds	5,379,109,562	5,437,594,544	(9,881,685)	0	5,437,594,544