

DEPARTMENT OF EARLY CHILDHOOD

and

DEPARTMENT OF HUMAN SERVICES

(Executive Director's Office/ Information Technology Services/ Office of Operations/ County Administration/ Self Sufficiency/ Services for People with Disabilities/ Adult Assistance Programs (includes Old Age Pension Program))

FY 2022-23 JOINT BUDGET COMMITTEE HEARING AGENDA

Tuesday, December 14, 2021

10:00 am - Noon and 1:30 pm to 4:15 pm

10:00 am – 11:00 am DEPARTMENT OF EARLY CHILDHOOD

Presenter(s):

- Tova Cohen, Transition Coordinator
- Ben Henderson, Director of Operations and Cabinet Affairs
- Camille Whisler, Senior Policy and Budget Analyst: Office of State Planning and Budget
- Megan Davisson, Chief of Budget Review, Office of State Planning and Budget Governor's Office

Topics:

- Department of Early Childhood, Questions 1-14 (pages 4-13), Slide(s) 1-29

11:00 am – 12:00 pm OFFICE OF EARLY CHILDHOOD

Presenter(s):

- Mary Alice Cohen, Office Director, Office of Early Childhood

Topics:

- R-01 Promoting Safe Child Care, Question(s) 15 (page 14-15), Slide(s) 5
- R-03 Refinance Child Care Assistance Program: Question(s) 16-18 (pages 15-18), Slide(s) 6-9
- Wildly Important Goal (WIG): Increase Statewide Child Care Capacity: Question(s) 19 (pages 19), Slide(s) 10-11
- Wildly Important Goal (WIG): Increase Diverse and Qualified Child Care Workforce: Question(s) 20 (pages 20-21), Slide 12-14
- Early Intervention, Question(s) 21-26 (pages 23-30), Slide(s) 15-20

1:30 pm- 1:45 pm INTRODUCTIONS AND OPENING COMMENTS

Presenter:

- Michelle Barnes, Executive Director

Supporting Presenters

- Perry May, Deputy Executive Director of Operations
- Anne-Marie Braga, Deputy Executive Director of Community Partnerships

Topics:

- R-05 Community Provider Rate Increase, Question(s) 27 (pages 31), Slide(s) 28
- Federal Stimulus Funding, Question(s) 28 (pages 31-33), Slide(s) 30

1:45 pm – 2:30 pm ADMINISTRATIVE SOLUTIONS AND FINANCIAL SERVICES

Presenter(s):

- Jeremy Hill, Deputy Executive Director, Administrative Solutions
- Clint Woodruff, Chief Financial Officer, Financial Services

Topics:

- COVID-19 Pandemic Remote Work Policies: Question(s) 29 (pages 34), Slide(s) 34
- Turnover and Vacancy Rates: Question(s) 30 (pages 34-36), Slide(s) 36
- R-01 Food Service and Housekeeping Coordinated Compensation: Question(s) 31-32 (Pages 37-39), Slide(s) 38-39
- DHS Long Bill Reorganization: Question(s) 33 (pages 40), Slide(s) 51

2:30 pm - 2:45 pm BREAK

2:45 pm - 3:30 pm OFFICE OF ECONOMIC SECURITY

Presenter(s):

- Ki'i Powell, Office Director, Office of Economic Security

Topics:

- R-10 SNAP Fair Hearing Compliance: Question(s) 34 (pages 41), Slide(s) 62-63
- Temporary Assistance for Needy Families (TANF): Question(s) 35-36 (pages 41-43), Slide(s) 64-66
- Aid to the Needy Disabled: Question(s) 37-38 (pages 43-45), Slide(s) 67-68

3:30 pm - 4:15 pm SERVICES FOR PEOPLE WITH DISABILITIES

Presenter(s):

- Yolanda Webb, Office Director, Office of Adult, Aging and Disabilities Services

Topics:

- R-20 CAPS Fee Reduction: Question(s) 39 (pages 45), Slide(s) 76
- Community Services for the Elderly: Question(s) 40 (pages 45-46), Slide 77
- R-08 Older Coloradans Cash Fund Spending Authority: Question(s) 41 (pages 46-47), Slide 79
- Grand Junction Regional Center: Question(s) 42 (pages 47), Slide(s) 85

DEPARTMENT OF HUMAN SERVICES
FY 2022-23 JOINT BUDGET COMMITTEE HEARING AGENDA

Tuesday, December 14, 2021
10:00 am – 4:15 pm

DEPARTMENT OF EARLY CHILDHOOD

- 1 [Sen. Moreno] Please describe the state and one-time federal stimulus money that the Governor proposes devoting to early childhood information technology and data collection issues.**

The Governor's Office, in partnership with the Dept of Human Services: Office of Early Childhood (OEC), will be using discretionary ARPA child care funds to conduct an in-depth analysis of all early childhood systems. This analysis will include current operability, system enhancements, future needs and opportunities for alignment for ease of use and data collection. Once the assessment is complete, a robust plan will be developed to outline what changes will be made to early childhood systems and the data collection process including a timeline, anticipated costs associated with the changes and the intended outcomes of each.

a. What is being built?

To support the launch of Universal Preschool (UPK), the Governor's Office, in partnership with OEC, is requesting enhancements to existing early childhood systems to allow for the integration of UPK. Specific systems include:

1. Adding a UPK module to Colorado PEAK, our online application source for most public benefit programs. This will allow prospective families to apply for UPK as well as other programs such as SNAP, Colorado Works/TANF, Medicaid, CCCAP that may benefit their household.
2. Expanding the eligibility modules of the Child Care Automated Tracking System (CHATS) to create an eligibility path for UPK applications, authorizations for care, and to initiate payments to child care providers.
3. Expanding the Attendance Tracking System (ATS) and the Provider Hub to allow providers the ability to report their capacity in real time as well as view attendance information for their entire site.
4. Adding licensing options and functionality to the existing licensing and TRAILS system to ensure provider information related to UPK is attainable.

b. How will it impact the administrative burden on providers and clients?

- i. By building on existing early childhood systems, providers will not have to learn a new system. New functionality will streamline access to needed information in the right place and in the right way.

c. How will it protect privacy?

- i. All required privacy and data sharing protocols will be followed. By building on existing systems that already meet all privacy requirements, we are ensuring all information is protected. Additionally, the in depth assessment of all early childhood systems will evaluate and recommend any privacy upgrades for the various systems.

d. How will it improve decision making and the ability of clients and providers to navigate the programs and funding?

- i. By utilizing existing systems, clients and providers will have access to other early childhood programs they may benefit from. Additionally, using Colorado PEAK will allow families to identify other programs they may be eligible for to meet the needs of the family. In the Provider Hub, providers will have the ability to access information related to CCCAP, UPK as well as private pay families. This lays the foundation for future integration of programs as well as long term braiding of funds.

2 [Sen. Moreno] In what departments is rule making vested in the executive director versus an appointed or elected board or versus shared responsibility with some rules made by the executive director and some by an appointed or elected board?

Every state agency in the Executive Branch must adhere to the rulemaking process outlined in the Administrative Procedure Act or APA (Section 24-4-101, Colorado Revised Statutes) unless explicitly exempted. The rulemaking process involves four stages: 1) Notice of Proposed Rulemaking; 2) Comment Period on Proposed Rule; 3) Hearing on Proposed Rule; 4) Final Adoption of Proposed Rule.

In addition some have a rulemaking board for the department as a whole, and some do not.

The Departments with no rulemaking boards include:

- Dept of Labor and Employment
- Dept of Local Affairs
- Dept of Natural Resources
- Dept of Regulatory Agencies
- Dept of Revenue
- Dept of Corrections

- Dept of Public Safety
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The Departments with rulemaking boards include:

- Dept of Agriculture
- Dept of Healthcare Policy and Financing
- Dept of Human Services
- Dept of Personnel and Administration
- Dept of Transportation
- Dept of Public Health and Environment
- Dept of Education
- Dept of Higher Education

3 [Sen. Moreno] What problem is the Transition Working Group (TWG) trying to address by proposing that the executive director for the new department have sole rule making authority?

- a. The Transition Working Group, based on feedback from the Transition Advisory Group, has put forward a proposed rulemaking structure that we believe balances the need for agility as the new Department prepares for a very quick turnaround to establish rules for the new preschool program, with the need for a strong advisory board that will be more than half made up of parents, providers, and historically underserved populations, in addition to traditional stakeholders critical to the process, including county representatives. Currently, the State Board of Human Services does not have these representation requirements, and we think this diverse representation is critical to meaningfully advise the Executive Director.
- b. The first task of the new Department will be to provide regulations for universal preschool, which will begin in July 2023. While the program will begin in July, families will need to start enrolling their children in the fall and winter, providing a very short window for the regulatory process to take place.
- c. In addition, the new Department will be focused on finding as many opportunities for family and provider voice as possible. Often regulatory boards prioritize those with specialized knowledge and do not give ample opportunities for those that often have fewer opportunities to weigh in. The RRAC structure will help to ensure a user-friendly process for providing input on critical regulations that affect children, families, and providers.
- d. It is important to note that the absence of a rulemaking board does not mean that the Department will not be required to follow all Administrative Procedures Act requirements, including a notice of proposed rule, a public comment period, a hearing, and final adoption of the rule.

4 [Sen. Moreno] What are the pros and cons of vesting rulemaking in the executive director of a department? Under what conditions does it make sense for the executive director to make rules versus a board?

- a. The rulemaking process and governance was discussed extensively in both the working and advisory groups for the new Department. key downsides discussed were whether the Executive Director needed additional public stakeholder support and the potential to vest too much authority in a single person. The RRAC, which will publicly vote on whether or not they agree with proposed rulemaking, as well as ensuring that the new Department followed the Administrative Procedure Act, addressed this feedback by ensuring accountability and transparency to the public. In addition, esting ultimate decision making authority with the Executive Director instead of an appointed or elected board will allow the agency to be nimble and responsive to stakeholder feedback and concerns under a very tight timeline. We were also able to learn from stakeholder feedback in Georgia and New Mexico, which have a similar structure, that being nimble in the beginning years of the new Department was critical.

5 **[Rep. McCluskie]** The JBC staff identified several potentially missing positions and functions in *DEC4 Department of Early Childhood administration*. Does OSPB agree there are missing positions? If not, please describe how the request addresses these positions and functions recommended by the Transition Working Group (TWG) or identified by the JBC staff?

The Governor’s office prioritized alignment between the Transition Plan and our budget request to provide base staffing for the new Department, in addition to the OEC and CDE staff that will be moving over to DEC. The following is a list of Transition Plan recommendations with the corresponding staff person included in the Governor’s budget request for DEC Administration:

Transition Plan Recommendation	Governor’s Office Response	Notes
An expert in policy and governmental affairs to develop equitable and effective regulatory alignment and ensure legislative engagement.	Legislative Liaison	Included in the DEC Administration request as one of the 20 FTE requested
A finance expert who is oriented toward using their significant understanding of financial regulations to find innovative solutions to meet Colorado’s funding needs.	Chief Financial Officer	One of six positions requested in the DEC Administration Supplemental to be hired prior to July 1, 2022

A leader who is able to organize program delivery and budget around functions of the early childhood system and user experiences	Program Delivery Director	One of six positions requested in the DEC Administration Supplemental to be hired prior to July 1, 2022
A dedicated workforce lead to ensure recruitment, preparation, compensation, and additional support for the early childhood workforce are prioritized.	Workforce Lead	This position is currently vacant within the Office of Early Childhood and the position will have minor adjustments prior to recruitment to fill the need as outlined in the Transition Report.
A leader who is able to establish meaningful cross-agency and community partnerships	Manager of Community Partnerships	This position will be filled after a review of existing staff within the Office of Early Childhood or one of their current vacancies.
An effective leader who is able to develop robust data collection and analysis. They also have expertise in digital transformation and are adept at using technology to streamline systems.	Data Systems and Analysis Director	One of six positions requested in the DEC Administration Supplemental to be hired prior to July 1, 2022

6 [Rep. McCluskie] What are the challenges the Office of Early Childhood currently faces and that families face in terms of access to early childhood programs? How would the proposed new department structure address these issues?

The New Department will be focused on elevating the importance of early childhood programs and better aligning funding streams to serve more children and families in quality programs. For instance, here are a few current challenges that OEC and CDE face in terms of alignment:

- Child care and preschool teachers often have to submit two background checks (one for CDE and one for CDHS) in order to teach in a licensed CPP classroom.
- Many preschool classrooms are licensed for 20 children (CDHS), but can only hold 16 based on current CPP regulations (CDE).
- Many school district preschool programs do not participate in CCCAP because they believe the process is burdensome, leading to fewer resources available for offering a full-day of services for working families.

- Families are currently required to apply at multiple places for various programs which results in an inability to afford or access care.
- Child care providers are left to blend and braid various early childhood fund streams at a granular level while simultaneously recruiting staff, remaining operational, and meeting the conflicting and confusing burdens of separate fund streams.

The Transition Plan that was approved by the Early Childhood Leadership Commission (ECLC) following a months-long stakeholder engagement process ensures that the department focuses on addressing these alignment issues. It also provides recommendations for the new Department of Early Childhood (DEC) structure to address many of the challenges facing the Office of Early Childhood relating to the organizational structure and fiscal and programmatic structure.

For the organizational structure of DEC, the Transition Plan recommends several key functions that have not historically existed in OEC's staffing. These roles include an Executive Director; an expert in policy and governmental affairs, such as a policy director; a finance expert, such as a chief financial officer; a program delivery lead; a dedicated workforce lead; a cross-agency and community partnerships lead; and a data and technology lead and a team to manage new systems. The positions recommended in the Transition Plan and those in the Governor's Budget for DEC administration would help alleviate some of the staff capacity challenges that the Office of Early Childhood has been experiencing. Additionally, the data and technology lead and team recommended in the Transition Plan may improve the family experience in gaining access to early childhood care and education.

For the fiscal and programmatic structure of DEC, the Transition Plan recommends that program delivery should be organized around functions of the early childhood system and user experience, rather than around administration of individual programs and grants, to create more cohesion for the field. This recommendation would both require the restructuring of how programs are delivered and how the funding in the DEC Long Bill is structured to maximize flexibility and the ability to blend and braid funds at the State level. The fiscal and programmatic structure recommendations in the Transition Plan would help improve family and provider user experience and the efficiency of funding.

7 [Rep. McCluskie] How does the request navigate and balance the competing objectives of a lean administration and a new department that has sufficient resources to address the concerns of stakeholders?

While not included in the November 1 budget request, there will ultimately be three FTE requests for the new Department:

- Department of Early Childhood Administration Request (20 total FTE, \$13M)
- Department of Early Childhood Administration Supplemental Request (3.0 FTE for 6 staff for 6 months, \$552k)
- Early Childhood Foundations and Universal Preschool Administration (10 FTE, \$722k)

Taken together, this request provides sufficient resources to provide for a lean startup administration that is able to be nimble and identify potential gaps and changes that can lead to a more effective agency. The Executive Director and his or her team are best positioned to identify the long-term staffing needs of the new Department, considering the staff and vacancies that will be moving over as well as the new staff. We look forward to working with the Joint Budget Committee to implement a phased and iterative approach to staffing that supports DEC's critical role in elevating and coordinating early childhood programs.

8 *[Rep. McCluskie]* What is the vision for how the Early Childhood Councils fit in the new department? What is their appropriate role? Do they have sufficient resources to perform this role?

Early Childhood Councils (ECCs) are a vital resource and local counterpart to the state system. They provide expertise and important resources within their communities. Early Childhood Councils support early childhood initiatives that includes both supports for local early childhood programs as well as state-wide programs. ECCs assist providers and parents with the distribution of funding and information. They also provide navigation to support access to state-wide initiatives. As the state continues to engage the expertise of Early Childhood Councils to support state-wide initiatives, funding should also be considered for the implementation and support of these initiatives. Current funding does not always meet meaningful minimums for the work of ECCs.

Currently, there are 34 ECCs supporting 63 counties across the state; OEC is investing significant efforts to support Archuleta County in establishing their ECC and has recently identified a child care provider willing to take on this role. Federal Child Care and Development Fund (CCDF) is the primary source of funding for Early Childhood Councils, which funds Councils at a minimum of \$15,000 per county and a maximum of \$150,000 total. Early Childhood Councils additionally receive funding to support the implementation of quality improvement activities. Current quality improvement funding is meeting the needs of existing early childhood programs that are eligible and engaging in quality improvement activities (49 percent of eligible providers are at Level 2 and higher). However, it has been reported that Early Childhood Councils rely heavily on philanthropic funding to meet the needs of their communities as well as infrastructure to support both systems building activities along with quality improvement activities.

9 *[Rep. McCluskie]* What is the vision for how the Family Resource Centers fit in the new department? What is their appropriate role? Do they have sufficient resources to perform this role?

With a savings of \$2.92 for every \$1 invested in them as reported by a recent study, Family Resource Centers (FRCs) are a vital part of the overall early childhood system. FRCs offer an array of support to families with children, both providing and connecting families with

comprehensive, integrated services in their community. Family Resource Services serve two purposes: they deliver family development services, such as case management and systems navigation, and they serve as a delivery network for other early childhood voluntary programs in a safe community environment, such as home visiting programs, play groups, parenting classes, child care, and more. As part of the current Office's Division of Community and Family Support in Colorado, it is just one program that takes a cost-effective, two-generational approach to promoting healthy child development. As such, family and community support programs such as FRCs improve parents' finances, which provides stability for their child's development. Ultimately, they are therefore crucial to both child care and to prevention services.

There are only 35 FRCs across the State. But not all FRCs currently receive state funding, and only around half of counties have access to an FRC. Family Resource Centers operate with blended funding from federal, state, and county government along with foundation and individual donors. Some also have thrift shops or other fee-for-service strategies. For example, only around two-thirds of FRCs receive funds to support family development services, such as case management, goal setting, and system navigation. Without additional funding support, the role of Colorado's FRCs will remain the same under the new department.

- 10 ***[Sen. Moreno]* With the Office of Early Childhood transitioning to a new department, why are there no proposed transfers from the central administration of the Department of Human Services to the new department? If the intent is to maintain the current central administration for the Department of Human Services in the long run, the JBC would like to see some justification and workload analysis to support that funding level.**

In the short term, the transfer of programs from the Department of Human Services to the new department will not drive a clear and quantifiable reduction to CDHS' central administrative functions. First, as noted in the Department of Early Childhood Administration decision item submitted on November 1, it is anticipated that the new department will contract back with CDHS for a number of operational support services in FY 2022-23. CDHS will need to utilize existing staff to support those services. Additionally, while OEC is a central part of the CDHS mission, it represents a relatively small portion of the total CDHS FTE, which is a significant driver of central costs. Finally, once the Department of Early Childhood is fully implemented and no longer supported by CDHS, the Department anticipates that the allocated common policy central costs will be fully adjusted by the Department of Personnel and Administration and the Office of Information Technology, which will result in reduced central administration costs for the Department, as those costs are allocated to the new Department of Early Childhood. Currently, OEC represents less than 4% of all CDHS indirect cost recoveries. The Department will continue to monitor the impact to central services over the next several years and will identify impacts as appropriate.

- 11 ***[Rep. McCluskie]* To the extent possible before the January report, please describe the plan for universal preschool. How does universal preschool fit with the other functions**

of the Department of Early Childhood? Please provide examples of the synergies between the new departments, other programs and universal preschool.

Conversations at the Transition Advisory Group and Transition Working Group have focused on building a universal preschool delivery system that:

- Creates a clear, well-defined process to take UPK funding and turn it into spots that are valuable and usable by Colorado families
- Makes it as easy for providers to offer funded UPK slots as they would private tuition spots
- Allows families to equitably access spots and make informed decisions about the provider that is right for their child; and
- Ensures children will be able to learn, grow, and thrive in programs with providers who are enabled to excel at meeting their needs.

While not finalized and subject to change, the draft Transition Working Group report suggests a local coordinator model will be most effective in achieving these goals, as well as maximizing local and other funding streams that can be blended and braided to create a full day of services for children and families who want them.

In a local coordinator model, each local community would provide a plan for how many universal preschool program slots they will need to equitably serve their community. The local coordinator could be a county, school system, early childhood council, special taxing district, Head Start grantee, or other public or non-profit entity. The local coordinator will ensure that every child is offered a spot, that local available dollars will remain part of UPK and grow over time, and that capacity and access gaps are identified and solved for over time, based on local context. In addition, the draft suggests that if a local coordinator cannot be found in a particular community, DEC will either directly run the programming or contract with a high-capacity organization to deliver services.

In addition to this structure, the Transition Report:

- Continues to recommend that special education part B remain at CDE, and that CDE and DEC work closely together to implement best practices to promote integration in preschool classrooms;
- Recommends a simple, unified application for all early childhood programs in order to decrease burden on families and providers;
- Recommends prioritizing equity in providing preschool spots, including ensuring that children who are at-risk are eligible for more hours of preschool programming where possible;
- Recommends contracting with an external evaluator to measure the quality of universal preschool programs and child outcomes to enhance children's positive outcomes for future years.
- Recommends DEC should work with a representative group of stakeholders to review existing CPP and national standards to create a unified definition of quality

preschool for eligibility for the universal preschool program and work to align standards with other early childhood programs.

- Recommends simplifying the process to enter the early childhood field and clearly defining the expected competencies the workforce should be achieving over time.

12 [Rep. McCluskie] Many local jurisdictions already offer universal preschool. How will the new department consider local funding available for this purpose?

- a. While some families may want 10 hours of preschool for their children, many families will want or need a full-day of services in order to meet their work commitments. Given funding limitations, local dollars are even more critical for helping to build a full day program. The DEC will be focused on supporting local communities to blend and braid their local dollars with the universal preschool program to provide a full day program for all families who want it. Where full-day preschool is already occurring, the DEC may help local communities reallocate their funding to serve younger children.

13 [Sen. Moreno] Why does the Governor propose prepaying \$354 million for universal preschool? Is this necessary given the pending Build Back Better bill?

- a. The Governor's budget proposes a number of pre-pays to help prevent the structural deficit from affecting critical programs like universal preschool. If Congress passes and the President signs the Build Back Better bill, and there are changes to long-term plans for early childhood programs given the current focus on child care and preschool in Build Back Better, the Governor's Office will engage with the General Assembly on any changes that would be needed to the prepay.

14 [Sen. Moreno] Briefly summarize the new federal funding that could be available for Colorado's new Department of Early Childhood based on the House version of the Build Back Better bill and any information OSPB has on the prospects for this federal funding in the Senate.

- a. The Build Back Better bill will fundamentally change the federal government's commitment to children and families through child care and preschool programs. BBB would provide at least \$1.1 billion over three years to bolster child care for working families, including by right sizing child care assistance to reflect the true cost of care. In addition, universal preschool program funding would help to bolster the state's strong commitment to preschool through prop EE by providing a full day of preschool for 3 and 4-year olds. Notably, BBB provides for a 40% state match in 7 years, which the state would more than meet given our current commitment to UPK through prop EE.

OFFICE OF EARLY CHILDHOOD

R-01 PROMOTING SAFE CHILD CARE

- 15 ***[Rep. McCluskie]*** What problem is the Office of Early Childhood trying to solve with ***DEC1 Child care safety?*** How do we know there is a problem and what is the scope of the problem? What are the expected outcomes if ***DEC1*** is approved?

With this request, the Office of Early Childhood (OEC) is working to ensure that children are safe in all types of child care settings. Recent deaths in unlicensed child care facilities that are caring for too many children and breaking the law have highlighted how important it is to address the safety of children in all types of settings, including licensed child care centers, licensed child care homes and unlicensed family, friend and neighbor care. .

Current resources only allow OEC to respond to unlicensed child care complaints made by the community. OEC does not have the ability to proactively investigate unlicensed programs that may be operating illegally or in a manner that is unsafe for children. In addition, the Office does not have the capacity to proactively provide resources on safe care or opportunities to become licensed to unlicensed exempt providers. The problem with the current approach is that when the community notifies the Office, it is often after an incident has already occurred.

It is also difficult for the Office to know the true magnitude of the problem. The Office has no independent regulatory authority over unlicensed providers. Families have no regulatory authority to turn to when unsafe or inappropriate practices occur in these situations unless the incident rises to the level of county child protective services or law enforcement involvement. For additional, related information on the number of child deaths across the state overall, **please see this one page document** prepared by the Colorado Department of Public Health and Environment in 2018.

The funding in this request will create a unit dedicated to proactively searching for unlicensed child care programs. The unit will work to identify and stop individuals who are caring for too many children and putting children's safety at risk. One way the unit will search for unlicensed child care programs that advertise services is by monitoring social media and other digital platforms such as Nextdoor, TikTok, Instagram, Facebook, Craig's List, YouTube, HOA blogs, and parent blogs. In addition, this unit will be able to provide technical assistance and resources to exempt child care providers engaging in the licensing process. Other states such as Texas, have implemented these strategies successfully.

This funding will also support an awareness campaign to help parents learn about the benefits of safe child care. The anticipated outcomes expected is to increase the safety of children placed in unlicensed child care settings. OEC will work to educate and raise awareness for families so they become even better informed about what safe, and unsafe, child care looks like and the options they have. Unlicensed providers will also become better informed, and if interested, provided with technical assistance and resources to become licensed and regulated. And finally,

OEC will actively seek to identify and stop instances of unsafe, illegal care. All of these actions should ultimately result in safer child care environments for all of Colorado's children regardless of child care setting.

R-03 REFINANCE CHILD CARE ASSISTANCE PROGRAM

16 [Rep. Herod] What must a provider do to be eligible for the Colorado Child Care Assistance Program (CCCAP)? What is the Department doing to increase provider participation in CCCAP?

The purpose of CCCAP is to provide eligible households with access to high-quality, affordable child care that supports healthy child development and school readiness, while promoting household self-sufficiency and informed child care choices. The Colorado Department of Human Services, as the official Child Care and Development Fund (CCDF) Lead Agency, retains overall responsibility for the administration of CCCAP. The program is locally administered by county departments of human/social services.

CCCAP provides child care assistance to low-income families who are working, searching for employment, or are in training or secondary-education programs. Funding through CCCAP is intended to support low-income families attending work or school while providing quality, safe early learning opportunities for children 0-13 years of age in a variety of early childhood settings such as licensed child care centers, preschools, child care homes, and before and after school programs.

In order to be a Colorado Child Care Assistance Program (CCCAP) provider, a provider must be licensed or qualify as legally exempt from licensing. Licensed CCCAP providers must have a valid Colorado child care license number and CCCAP Fiscal Agreement with a local county department of human services to provide care for children residing in that county. A CCCAP provider that is legally exempt from licensing (Qualified Exempt Provider) is a family, friend, or neighbor that a CCCAP family has requested to care for their child, meets all federal CCDF health and safety requirements which include required background checks and training, and has a CCCAP Fiscal Agreement with the county in which the child resides.

Less than half of the State's licensed providers accept CCCAP, in part due to low reimbursement rates as compared to private tuition and attendance-based payment policies. The State's reimbursement rates to licensed CCCAP providers are based on a market rate survey that reflects the price of child care based on what parents can afford to pay as opposed to the full true cost of providing child care. Furthermore, CCCAP providers are paid based on the attendance of a child instead of based on enrollment. An enrollment-based payment system is where a provider still receives full payment for a child even when he or she is occasionally absent—a payment policy akin to that which applies to families not participating in CCCAP.

There are a limited number of Qualified Exempt (QE) CCCAP providers (77), resulting from the fact, as mentioned above, in order to become a QE provider, a CCCAP family must request the individual to care for their child/ren, the individual is subject to applicable federal CCDF health and safety requirements and daily reimbursement rates for QE providers are typically half of what a licensed home provider would make. The majority of our QE providers are relatives of the CCCAP child (63) and the requirements for relatives are less stringent than for non-relatives (14). Non-relative QE providers are subject to the same federal background check requirements as relative QE providers but in addition, also have to meet federal health and safety training and onsite monitoring requirements. Although we currently only have a total of seventy-seven CCCAP QE providers, we are seeing a significant increase in the number of QE provider applications with over twenty currently being processed. This increase could be in part due to the current outreach efforts to increase CCCAP providers and communications on stimulus funding opportunities for QE providers, including the ARP Child Care Stabilization Grants and the incentive payment to become a QE provider. The stimulus funding will also continue to provide targeted outreach to QE providers.

In order to increase provider participation in CCCAP, the Department has used its Coronavirus Response and Relief Supplemental Appropriations (CRRSA) stimulus funds to implement a tiered rate increase that includes a 5% base increase for all CCCAP provider rates, plus additional targeted COVID-related increases to infant, toddler, and preschool rates that are designed to cover approximately 20% of the disparity between the current CCCAP rate and the cost of quality for that rate type and county. Because this disparity between the rate and cost of quality is greatest for infant and toddler care and in rural areas, the tiered structure will increase those rates at a higher proportion. Likewise, the Department has invested its CRRSA stimulus funds to increase the number of paid absences for a CCCAP child to ensure that CCCAP providers receive full payment if a child attends at least 85% of the time. To ensure ongoing federal compliance following the expiration of the CRRSA funds, the Department will work with the Governor's Office to explore ongoing funding for the increased rates and paid absences, such as with its ongoing base Child Care and Development Fund (CCDF) award.

- 17 ***[Rep. Herod]*** **How many people are waiting for a CCCAP placement? What are the barriers to finding a CCCAP placement? What is the Office of Early Childhood doing to address these issues?**

There are only two counties in Colorado that are not accepting new Colorado Child Care Assistance (CCCAP) families, [as reported in the CCCAP Annual Report](#). Boulder has a small wait list, and Gunnison is on an enrollment freeze. There are four cases on the waitlist in Boulder and none other across the state. A waitlist may be used by a county when state-generated projections indicate that the county will expend at least 85% of their CCCAP allocation by the end of the fiscal year, or when the county is able to demonstrate a fiscal need that is not accounted for in the state-generated projections. An enrollment freeze may be used by a county when it is overspent or projected to expend at least 95% of their CCCAP allocation by the end of the fiscal year, or the county is able to demonstrate a fiscal need that is not accounted for in the state-generated projections. There are eight wait list cases in Gunnison,

which is on an enrollment freeze. When a county is using a waitlist or freeze, it is encouraged that they prioritize families who: have a household income at or below 130% of the federal poverty guidelines; are teen parents; have children with additional care needs; are experiencing homelessness; or other segments defined by the county (this is not applicable for Boulder or Gunnison counties).

The CCCAP serves 8.63 percent of the income eligible population. There are several factors that contribute to that participation rate. First, the participation rate is in part determined by the available appropriation for the CCCAP program, as every 1 percent increase in the participation rate (i.e., from 8.63% to 9.63%) results in an approximately \$14 million increase in costs. Second, even if the program was funded to support 100 percent of the income eligible families, the participation rate still may not reach full utilization. This could be due to a lack of available child care supply to support every CCCAP family, particularly in child care deserts where all families, regardless of CCCAP eligibility, may be challenged to access child care. The supply issues are further compounded for CCCAP families, given that only half of all providers in the State accept CCCAP. Third, there are additional federal eligibility requirements for CCCAP participation beyond just income eligibility, specifically citizenship requirements for children and eligible activity requirements where parents must be working, searching for employment, or in training or educational programs. For context, the most recent census data available reveals that 30 percent of women with children under age 6 are not in the workforce, and it is likely, for various reasons, only a portion of this population are actively searching for work. Fourth, families have varying child care preferences and some families that would be income eligible for CCCAP may opt to keep their child out of child care or rely on a care option that does not offer CCCAP, such as license exempt Friend, Family, and Neighbor (FFN) care or through a licensed child care center or family child care home that does not participate in the CCCAP.

The Department is addressing these CCCAP access challenges through a multifaceted approach, largely funded with its approved stimulus awards appropriated through SB21-236, specifically to stabilize the existing CCCAP providers, grow the licensed child care capacity, provide additional family supports to CCCAP families, and increase the number of providers with CCCAP Fiscal Agreements. The Department is also exploring options to serve additional families through its remaining American Rescue Plan Act CCDF discretionary supplemental award.

- Stabilization of Existing Capacity: \$221 million as Child Care Stabilization Grants for all eligible child care providers, including providers that accept CCCAP, to receive nine monthly grant payments to offset providers' operating expenses to help Colorado maintain licensed child care capacity through a mixed delivery system, ensure early childhood educators remain fully compensated, and provide financial relief to families through reduced or waived tuition or copayments.
- Grow the Licensed Child Care Capacity: \$2.4 million to grow 480 newly licensed providers through a one-time bonus incentive payment of \$5,000 for unlicensed providers to become licensed or \$500 to become a qualified exempt provider; \$14.4 million for the Emerging and Expanding Child Care Grant program to expand or create additional capacity of 4,000 new child care slots, especially in child care deserts; and \$8.8 million for the Employer-based Child Care Facility Grant program

to build 10-25 new child care centers to provide licensed child care services on- or near-site to its employees.

- Provide Additional Family Supports to CCCAP Families: \$6.3 million to lower the family co-payment for CCCAP child care to a maximum out of pocket of 10% of gross income and funds a communications strategy to ensure eligible families are aware of CCCAP and its benefits.
- Increase the Number of CCCAP Providers: \$36.8 million to increase the rates child care providers are paid for children enrolled in a CCCAP program and increase the number of paid absences to bring CCCAP payment policies closer in alignment with private-pay families and incent additional providers to accept CCCAP.

18 ***[Rep. Herod]* How many people were ineligible to participate in CCCAP because they were unable to pay or because they owe money to a provider?**

Data shows that in the twelve months prior to the initial CCCAP parental fee formula change in September of 2020 to address the affordability of parent fees:

- 27 CCCAP cases (a case is one family) were closed at the twelve-month eligibility redetermination due to unpaid parent fees to providers out of more than 26,500 total children served by Colorado Child Care Assistance Program in fiscal year 2020-21. This happens when a CCCAP provider reports non-payment of parent fees and a payment agreement between the CCCAP provider and a family was not reached OR the family was not able to follow through on the payment agreement.
- 144 CCCAP cases had delinquent parent fees during the twelve-month eligibility period but the case had not been closed because there was a payment agreement in place between the CCCAP provider and family OR because the case could not be closed until the twelve-month redetermination per CCCAP regulations.
- 481 CCCAP cases were identified as having a parent fee hardship which means a family requested and was granted hardship for financial reasons and the parent fee was reduced to \$5.00 for 1-6 months depending on county policy. Not all counties grant parent fee hardships; it is a county option.

- 19 **[Rep. McCluskie] The Department's performance plan includes a Wildly Important Goal (WIG) titled Increase Statewide Child Care Capacity. Please provide historical data for the selected measure to put the goal in perspective and show how much it is above or below the trends. How has the pandemic affected child care capacity and the Department's ability to achieve the goal? Is licensed care capacity the best measure of performance, since it does not indicate actual capacity based on staffing levels, provides no information on vacant slots, and does not account for unlicensed but legal family, friend, and neighbor care?**

In March of 2020 (pre-pandemic) the Department's total licensed child care capacity was 236,839. This capacity included the number of children child care centers, preschools, family child care homes and school-age child care centers were licensed to serve. Throughout the state fiscal year 2021-21 child care capacity remained between 232,000 and 235,500 with a total child care capacity of 235,474 in June 2021.

The current WIG titled Increase Statewide Child Care Capacity is focused on increasing capacity for children ages **birth to five years** old. The total child care capacity for children birth to five in June of 2021 was 153,075. Over the last five months, there has been only a slight increase in licensed capacity for this age group. The Department has numerous federal stimulus strategies to increase access, and once all strategies are fully implemented, the Department anticipates growth in this capacity. Some of the work the Department is presently involved in related to increasing child care capacity includes engaging ten employers in the Employer-Based Child Care Design Lab, providing enhanced business development training and consultation to 100 child care providers through Small Business Development Centers, disbursing \$8.8 million dedicated to expanding employer-based facility development and renovation, and ensuring that 98% of eligible providers receiving a Sustainability Grant in 2021-22 continue to operate.

Due to limitations with the current IT systems, the Department cannot currently report on actual child care enrollment or slots. The only presently available reliable data is licensed child care capacity. The revised Rules Regulating Child Care Centers effective December 1, 2021, will require child care centers to update their enrollment information through the Provider Status Portal in April and October. This will help the Department have a better understanding of actual child care enrollment.. The WIG does not contemplate the role of unlicensed family, friend, and neighbor care (FFN). The 2019 Colorado Shines Brighter Needs Assessment reported that FFN care is vital to at least half of Coloradan families (page 50).

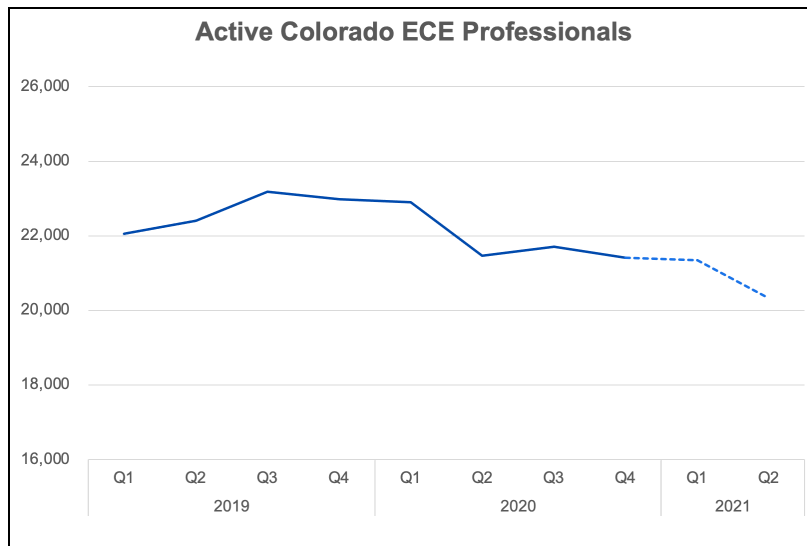
- 20 **[Rep. McCluskie] The Department's performance plan includes a Wildly Important Goal (WIG) titled Diverse and Qualified Child Care Workforce. The proposed measure merely tracks the total workforce. How is the Office of Early Childhood measuring the diversity and qualifications of the workforce? Similar to the previous question, please provide historical data for the selected measure to put the goal in perspective and show how much it is above or below the trends. How has the pandemic affected the child care workforce and the Department's ability to achieve the goal?**

Through the Preschool Development Grant, the OEC has embarked upon a workforce data modernization project to better understand our early childhood workforce in Colorado. The Colorado Evaluation and Action Lab of the University of Denver released the [2019 Snapshot Report on Colorado's Early Care and Education Professionals](#) alongside this [data dashboard](#) using 2019 point-in-time data. This process is being repeated with 2021 workforce data to better understand longer-term workforce trends and workforce turnover rates likely related to COVID.

While the early childhood workforce is already diverse in nature and fairly reflective of the Colorado population, disparities still exist in the representation of professionals with diverse backgrounds in leadership positions. To improve the quality and availability of workforce data, new child care licensing regulation requires early childhood workforce in licensed child care facilities to register on the Professional Development Information System (PDIS), which is Colorado's early childhood workforce registry and training website. This will ensure that the State has more complete data collection for the early childhood workforce in the future and can understand more about diversity in types of positions.

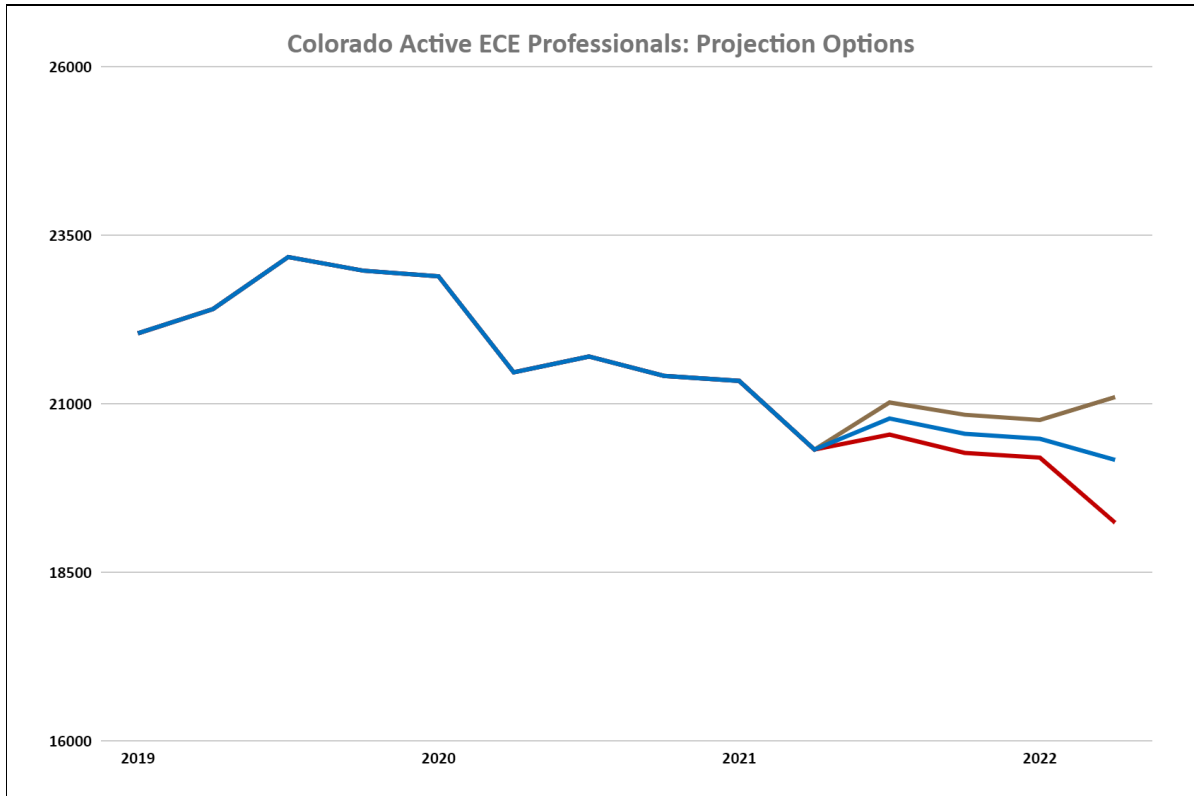
Unfortunately, preliminary data from the Colorado Evaluation and Action Lab indicates that the State may have lost 7 percent of its early childhood workforce since the start of the pandemic. Throughout the pandemic, nearly 25 percent of the workforce were laid off or furloughed, and many did not anticipate a return to the classroom. This is similar to national effects in the wake of the pandemic. [The National Women's Law Center reported in June 2021](#) that "between February 2020 and April 2020, the [child care] industry lost 373,300 jobs, over a third of its workforce, with women accounting for 94.8% of those losses. As of May 2021, the child care workforce is only 87.1% as large as it was in February 2020, meaning more than 1 in 8 (12.9%) child care jobs are still lost over a year into the pandemic." Even prior to the pandemic, the early childhood sector faced workforce shortages, with 70 percent of center directors reporting that finding qualified educators to replace lost workforce is their top challenge.

The chart below titled "Active Colorado ECE Professionals" shows the number of active early childhood education (ECE) professionals by quarter between 2019 and the end of 2020. The dotted line represents best estimates of recent numbers between the final quarter of 2020 and the end of the second quarter of 2021.



Key: The solid blue line is the number of active early childhood education (ECE) professionals by quarter between 2019 and the end of 2020. The dotted blue line is the best estimate of recent active ECE professionals between the final quarter of 2020 and the end of the second quarter of 2021.

The Colorado Evaluation and Action Lab (CEAL) of the University of Denver has worked to establish projections to estimate likely outcomes. In the chart below titled “Colorado Active ECE Professionals: Projection Options,” the red line projects CEAL’s best estimate of what would happen if no policy or funding actions were taken—if no stimulus funding to support programs was available and distributed. The state would likely drop another 1,100 from the workforce. This is the most pessimistic projection. The brown line projects if workforce trends were following pre-pandemic trends. The workforce would grow by 778 (about 4%). This is the most optimistic projection and hard to actualize given the realities of turnover in the early childhood workforce. The blue line projects the average of the two projections above. The State would experience a net loss of about 150 professionals in the workforce over the next year.



Key: The red line projects what would happen if no policy or funding actions were taken. The brown line projects if workforce trends were following pre-pandemic trends. The blue line projects the average of the two projections above.

To address the workforce challenges that existed even prior to the pandemic and rebuild our workforce capacity to even higher than pre-pandemic levels, the Department is directing \$74M in stimulus funding to both retain existing professionals and build the workforce pipeline to recruit new educators into the workforce. Specific strategies include:

- Sustainability Grants for Workforce Retention: \$49.8M for provider grants to support the retention of Colorado’s early childhood professionals, including for employee benefits, employee compensation, professional development, and hiring additional staff, through the pandemic recovery.
- Workforce Recruitment & Retention Scholarship Programs: \$20.6M to provide professionals with a menu of options for financial assistance to support their access to the education and training needed to enter the early childhood workforce, including offering the minimum coursework to become an early childhood educator, Early Childhood Education (ECE) 101 and 103, tuition-free; creating a new state-wide early childhood apprenticeship program to offer an alternative career pathway into the early childhood workforce; establishing a new teacher peer mentoring program; funding evidence-based TEACH scholarships; and supporting CDA Support Specialists to recruit early childhood workforce from under-represented communities.
- CCCAP Teacher Salary Increase: \$3M to increase compensation by about \$1,000-\$1,200 annually for 2,400 early childhood workers employed by high-quality

programs (Levels 3-5) that enroll children participating in the Colorado Child Care Assistance Program (CCCAP) and opt into the Teacher Salary Increase grant program.

- Free Online Professional Development: \$0.9M to develop a free Director Training Sequence for the State's approximately 1,600 child care center directors, available in both English and Spanish and to create new equity-focused online courses, including strategies to reduce suspensions and expulsions of young children.

EARLY INTERVENTION AND ALTERNATIVE

21 **[Rep. McCluskie] Why should the JBC sponsor legislation to create an alternative to the Early Intervention program rather than providing funding to restore the previous eligibility criteria for Early Intervention?**

After changing eligibility from a 25 percent delay in one or more areas of development to 33 percent, the OEC worked extensively with stakeholders to create the concept of an alternative program (referred to as Early Start). Subsequently, a large stakeholder group worked to develop the model for the implementation of the program. Members of this workgroup included representatives for: parents and families; EI direct service providers; philanthropic partners; early childhood mental health professionals; Head Start; Child Welfare and child maltreatment prevention; Family Resource Centers; home visiting programs; Community Centered Boards; Colorado Interagency Coordinating Council; Part B preschool special education; Early Childhood Councils; school district special education; and OEC leadership. Eligibility for the alternative program will include children with developmental delays less than 33 percent. Additionally, the program will also serve children who have identified risk factor(s). **These children were never previously served by the Early Intervention (EI) Part C program—at all—even though they can greatly benefit from targeted services.** The EI Early Start - Model Development Final Report was finalized on August 6, 2021, and was cleared for distribution in early November. A two-page summary of the report was also developed.

Creating the alternative program will contribute to the long term sustainability of the EI Part C program to ensure children with the most significant developmental concerns continue to receive their services as required under federal law, Part C of the Individuals with Disabilities Education Act (IDEA). The alternative to the EI Part C program has been designed to create a continuum of support so we can identify the *right kids, at the right time, and to provide the right service for the child and their family*. These services will be available to children as early as possible to mitigate more significant delays later on—known as a more upstream approach, one which can make the most impact for children and also save the most money for the State down the road. Additionally, the alternative program will provide the Early Intervention program the opportunity to serve vulnerable children and families who currently do not receive any services at all—the 1,800 children with one or more risk factors (listed below in Table 2).

Changing eligibility back would miss out on serving the additional children with risk factors as part of an Early Start program, which will also restart serving the full 2,200 children who would fall between the 25 and 32 percent eligibility threshold criteria. Several populations of children with one or more risk factors will be served by Early Start (see Table 2: Eligibility of Children). For example, one critical group of children and families that will be reached are children referred to EI Part C due to a founded case of abuse or neglect or with a prenatal substance exposure, as required under the federal Child Abuse Prevention and Treatment Act (CAPTA). In general, these children are not yet displaying developmental concerns at the time of referral, and therefore it is difficult to engage their families in Part C (only 25 percent of families referred agree to participate). However, some of these families might be willing to engage in a home visiting program or a play group at a family resource center if they were connected at the time of referral to Part C. These supports can ensure the family is connected to a service provider that will be able to identify any future developmental concerns if they arise.

Changing eligibility back would not capture these children and families. The alternative program could match children with services that are most appropriate for families' needs, often services that are not available via EI Part C. This alternative program would expand the reach of the Early Intervention program to serve at-risk children earlier in ways that are currently not available under Part C of IDEA. These services and supports for the families can change the trajectory of their development before more costly intervention might be needed later on in life.

22 [Sen. Moreno] Please provide a side by side comparison of the existing Early Intervention program and the proposed alternative. How would the types, availability, and quantity of services differ? How would the assessment process differ? What would be the difference in experience for the families and children participating?

Outreach, referral, and the process for eligibility determination (detailed in Table 2) would be the same for the existing EI Part C program and the proposed alternative. This ensures a process that is streamlined for families and clear for referral sources and providers. Care Navigation is a critical component of the alternative program and is considered a direct service and included in those costs for the alternative program.

Table 1 breaks down a comparison between current EI Part C requirements and the alternative Early Start program.

Table 1: Early Intervention Program Comparison		
Current EI Part C Requirements and Qualifying Children	Children with Delays Less than 33% and Children with Identified Risk Factors	Alternative Program - EI Early Start
Referral of a child is made based on a developmental concern. Care Navigator assigned and an evaluation is conducted to determine whether a developmental delay exists.		

<p>Top Referral Sources:</p> <ul style="list-style-type: none"> ● Primary Care Physician - 32.7% ● Hospital/Medical Practice - 25.8% ● Self-referral (Parent or caregiver) 20.4% ● Child Welfare/CAPTA - 5.9% ● Community Centered Board - 3.6% 		
Child referred to EI Part C if developmental delay in one or more areas is 33% or more or has an established condition.	If a child does not qualify for EI Part C (delay <33%), the family is currently provided with community resources to contact on their own.	Child and family referred to the alternative program if developmental delay is <33% OR the child/family has identified risk factor(s).
Service coordinator conducts family assessment and develops Individualized Family Service Plan (IFSP).		Care Navigator conducts family interview and develops care plan with family.
Service coordinator arranges for services.		Care Navigator: <ul style="list-style-type: none"> a. Connects family with a direct service provider in area of delay if applicable; and/or b. Connects family with existing community supports such as Family Resource Center; home visiting program; etc.
<p>Child receives one or more of 15 allowable services at home, child care, or other location where they spend their day. Typical frequency is 1 service visit per week.</p> <p>IFSP is reviewed, at minimum, every 6 months. The service coordinator is required to contact the family each month and a full assessment of the child is conducted annually to</p>		<p>For a child with a developmental delay <33% the child receives services not limited to the 15 allowable services. These services could include a direct service at a frequency appropriate to the child's delay which would typically be 2 times per month. Additional options include, but are not limited to, services in a group setting, parent/child playgroups and parent coaching groups.</p> <p>For a child who does not</p>

<p>determine whether the child still needs EI services, and a new IFSP is developed.</p>		<p>exhibit a developmental delay yet is identified with a risk factor(s) the family will receive support from appropriate community resources, which will provide the family with ongoing case management while including developmental monitoring of the child.</p>
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Table 2 describes which children are eligible under the current EI Part C program and the proposed EI Early Start alternative program.

Table 2: Eligibility of Children	
EI Part C	Alternative Program (EI Early Start)
<p>Children eligible for services include:</p> <p>Developmental delay 33% or more in one or more areas of development, OR An established condition determined to have 50% likelihood for long term developmental delay (398 conditions), OR Child resides with a parent who has been identified as having a developmental delay.</p> <p>Children with a delay less than the 33% threshold are NOT provided direct services, AND Children with risk factors are NOT provided direct services.</p>	<p>Children would become eligible for services under EI Early Start with:</p> <p>a. A developmental delay less than 33% in one or more domains (2,200 children)</p> <p>b. Risk Factor(s) - (1,800 children)</p> <p>Tier 1 = Risk factor on its own makes the child eligible:</p> <ul style="list-style-type: none"> ● Fetal Alcohol Spectrum Disorder (FASD) ● Infant and Early Childhood Mental Health disorder (Incl attachment) ● Neonatal Abstinence Syndrome (NAS) ● Lead Poisoning ● Mild / Unilateral Hearing loss ● Visual Impairment ● Cleft Lip / Palate ● Prematurity under 32 weeks (Estimated Gestational Age) - regardless of birth weight ● Substantiated finding of abuse or neglect ● Homelessness ● Parent with mental health diagnosis, incl. perinatal mood and anxiety disorder <p>Tier 2 = More than one of the risk factors must be present to make a child eligible</p>

	<ul style="list-style-type: none"> ● Sensory processing/sensory integration concerns ● Low birth weight (2,000 - 2500 grams) ● Oral health concerns ● Ankyloglossia (tongue tied) ● Risk signs / screening for autism ● Sleep issues ● Feeding issues ● Underweight for age / failure to thrive / childhood obesity ● Expulsion from child care / challenging behaviors ● Vision Concerns ● Child welfare involvement / unsubstantiated abuse and neglect ● Child is in out-of-home placement (Kinship care, foster care, congregate care) ● Low Income <185% Federal Poverty Level ● Other economic challenges (incl. lack of transportation; food insecurity) ● Housing insecurity / moving frequently ● Domestic / Family Violence ● Low income <100% Federal Poverty Level ● Low support network ● Teen Parent ● Family stress (moving, illness, death)
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23 ***[Rep. McCluskie]* What evidence can the Office of Early Childhood offer to suggest that the proposed alternative program that is roughly half the cost of Early Intervention will actually be effective? Is this more like giving someone half a car when they need the whole thing, or like giving someone a bicycle, moped, or bus pass?**

The alternative program would not provide a lesser program, but would provide the appropriate level of services to children who do not have the significant needs that children who currently qualify for the EI Part C program exhibit. The intent of this program is to take an upstream approach to providing services as early as possible to mitigate the likelihood of a greater delay to be identified later in the child’s life. Providing services earlier to both children with risk factors and children with a 25 percent to 32 percent delay in one or more developmental areas is not only a more cost-effective approach than addressing issues that will arise later on; it will ensure that children are given a better chance to fully thrive.

Not all children with delays need the same intensity of services to make progress in development. For example, not every child with a communication delay needs intensive speech

therapy each week. Some may need a therapist to provide coaching to their parents so that they can support their child throughout their routines with language rich opportunities. Other children may not have the opportunity to engage with other children and would benefit from a play group to give them the opportunity to practice language skills with their same-aged peers.

This program will allow us to support children and families that typically do not qualify for any early intervention services yet would benefit from some level of service that is targeted to serve their unique needs, along with support for the family, to prevent or mitigate delays.

Data collected in the EI statewide data system show that children with less significant needs benefit from EI services provided at a level to meet their individual needs. The table below helps illustrate that children with various levels of needs—whether they need one or four services per month—progress to meet desired outcomes. Children requiring one service per month tend to have a correspondingly smaller developmental delay and therefore benefit from the types of targeted services proposed by the Early Start program. Table 3 breaks down a six-month sample of Individualized Family Service Plans (IFSPs) analyzed between 7/1/2020 and 12/30/2020 to reveal the percent of children who successfully met the outcomes on their IFSPs by frequency of service:

Table 3

Frequency of Service	Children who Met Their Outcomes
One service per month	56%
Two services per month	47%
Four services per month	49%

24 [Rep. McCluskie] Should this be done as a pilot, rather than statewide, to demonstrate the effectiveness?

The intention is to develop this program statewide and implement services for up to 4,000 children and families. If adequate funding is not secured, a pilot could be considered as a strategy to scale up to statewide implementation. The OEC engaged in intensive stakeholder engagement to develop the concept and program development recommendations for this alternative program. If the program is not implemented statewide there may be great concern by stakeholders because even if a pilot is developed a significant number of children would go without services and have the potential to experience more significant delays without interventions.

- 25 ***[Sen. Moreno]* Please explain the private funding that is anticipated to be available for the alternative program. What are the expected sources of funding, amounts, and duration? How confident is the Office of Early Childhood that the funding will materialize?**

The OEC can not share specific philanthropic partners at this time because we are just now meeting with foundations and sharing the final report (completed August 6, 2021 and cleared for distribution in early November) recommendations and discussing specific requests. The foundation staff will then need to take proposals to foundation boards for approval so there are no funds committed at this time.

The Department believes that raising private funds to lift this program is feasible based on initial excitement and interest expressed by early childhood funders and previous examples of public private partnerships in early childhood. Past experience has been that foundations are willing to help with startup costs for new programs or gap coverage for three years with the expectation that the Government will be able to take on the full costs of operations after that period.

Over the years EI and OEC leadership have been approached by a variety of private foundations requesting that children and families with certain risk factors be served within the EI Part C program. This was historically not possible because the federal EI Part C program does not have the ability to serve children considered at-risk (not meeting the program's percentile threshold eligibility criteria). The EI Early Start program will have the ability to serve these children, and key stakeholders were involved in the determination of criteria for risk factors that would be eligible for the program.

- 26 ***[Sen. Moreno]* For what policy reasons does the federal government prohibit care in group settings for the Early Intervention program? Please cite the specific federal guidance that prohibits care in group settings. Has the Department ever asked for federal permission to offer child and parent play groups, parenting support communities, or group therapy for children in a community site?**

The federal Office of Special Education Programs (OSEP) defines a community-based setting as a "setting where children without disabilities typically are found. These settings include but are not limited to child care centers (including family day care), preschools, regular nursery schools, early childhood centers, libraries, grocery stores, parks, restaurants, and community centers (e.g., YMCA, Boys and Girls Clubs)." EI Part C services may be provided in these settings to support children to be successful if that is where the child and family typically spend their time. The Department has not asked the OSEP for permission to serve children with developmental delays together as a group in a separately created group setting, because it would be contrary to the purpose and goal under Part C of integrating infants and toddlers with disabilities with their peers who are not disabled. One goal of Part C has been to make sure that infants and toddlers with disabilities are not segregated from other typically developing children who are also their

peers. Parents of children surveyed who are being served or have been served in EI Part C, however, explicitly mentioned the lack of access to group settings that could offer support. Under Early Start there will be the ability to develop a service delivery option that would provide interventions in a group setting for those children with lesser developmental delays, especially delays in communication, as well as children and families with identified risk factors.

The federal regulations read:

34 CFR 303.26 Natural environments. *Natural environments means settings that are natural or typical for a same-aged infant or toddler without a disability, may include the home or community settings, and must be consistent with the provision of 303.126.*

34 CFR 303.126 Early intervention services in natural environments. *Each system must include policies and procedures to ensure, consistent with 303.12(a)(8) (early intervention services), 303.26 (natural environments), and 303.344(d)(1)(ii) (content of an IFSP), that early intervention services for infants and toddlers with disabilities are provided-*

(a) To the maximum extent appropriate, in natural environments; and

*(b) In settings other than the natural environment that are most appropriate, as determined by the parent and the IFSP Team, **only when early intervention services cannot be achieved satisfactorily in a natural environment.***

34 CFR 303.700(d)(1) *The lead agency [CDHS] must monitor each EIS [local early intervention services program] located in the State, using quantifiable indicators in each of the following priority areas, and using such qualitative indicators as are needed to adequately measure performance in those areas:*

(1) Early intervention services in natural environments.

The EI Part C program provides 15 types of early intervention services: Assistive Technology; audiology; developmental intervention; health; medical; nursing; nutrition; occupational therapy; physical therapy; psychological; sign language and cued language; social and emotional; speech language pathology; transportation; and vision. Under federal regulation, these services may be provided in a child's natural environment, which is where the child typically spends their day such as their home, child care, kin care, and an already existing community setting where typical children spend their time. A natural environment—a new environment—cannot be created for a child and family. A group setting of children with developmental delays or disabilities is not considered a natural environment.

Additionally, the alternative program will help more children and help them earlier, which will prevent more significant developmental delays from taking root. It is designed to not only provide services to children with a developmental delay of less than 33 percent (children with 25 percent and 32 percent delay in one or more areas). There are approximately 1,800 additional children with identified risk factors who would benefit from services this program would provide that would never have qualified for EI Part C, even with the previous eligibility criteria.

The EI Part C program is required to submit data annually on the number of children who primarily receive their services at home or in a community-based setting. Colorado's target for this indicator is 97% and for FY 19-20 reported that 99.8 percent of children enrolled in EI Part C received their services at home or in community-based setting.

INTRODUCTIONS AND OPENING COMMENTS

R5 COMMUNITY PROVIDER RATE INCREASE

- 27 ***[Sen. Hansen]* Given the inflationary pressures, the State is experiencing, would the proposed 1.0 percent provider rate increase be sufficient to ensure providers can recruit and retain sufficient staff?**

The Governor's Budget includes a provider rate increase which allows providers the flexibility to determine how to use the increase. Providers have the ability to use the provider rate increase to recruit new staff and/or to retain current staff as appropriate.

FEDERAL STIMULUS FUNDING

- 28 **Please describe the most significant one-time federal funds from stimulus bills (e.g., CARES Act and ARPA) and other major new federal legislation (e.g., Federal Infrastructure Investment and Jobs Act) that the Department has received or expects to receive. For amounts in new federal legislation that have not yet been distributed, please discuss how much flexibility the State is expected to have in use of the funds.**

NOTE: Additional detail has been requested in a separate written-only response.

In total, CDHS received \$2.2 billion total stimulus funds, including state and federal funding. The table below provides a summary of the 60+ federal and state stimulus awards by program area, as of 12/7/21. A more detailed list will be provided in the written-only responses.

At a high level, the most significant portion (\$1.0 billion) of federal funds are direct benefits for the Supplemental Nutrition Assistance Program (SNAP) and the Pandemic Electronic Benefit Transfer (P-EBT) program, which is a federal program created to provide additional funds for families to buy food when schools or childcare facilities were closed or on a remote or hybrid learning model due to COVID-19. Additionally, \$688.8 million was awarded to the Office of Early Childhood, including \$371.9 million appropriated for child care access, \$135.7 million for family strengthening efforts, and \$77.3 million for workforce strategies. In total, the Office of Behavioral Health received \$236.3 million in stimulus dollars, including \$84.8 million appropriated in S.B. 21-137 (Behavioral Health Recovery Act).

Total CDHS Stimulus Funds <i>(including federal and state stimulus)</i>	
Office of Adults, Aging and Disability Services	
Aging and Adult Services	\$41,517,049
Adult Protective Services	\$2,964,291
DD Councils	\$66,687
Regional Centers	\$500,000
VCLCs	\$9,800,923
Subtotal	\$54,848,950
Office of Economic Security	
SNAP Administration	\$19,419,887
Food and Energy Assistance	\$117,785,220
SNAP/PEBT	\$1,081,093,431
Employment and Benefits	\$14,702,981
Subtotal	\$1,233,001,519
Office of Early Childhood	
Early Care and Learning	\$688,839,373
Community and Family Support	\$12,401,785
Subtotal	\$701,241,158
Office of Children, Youth and Families	
Domestic Violence	\$16,477,961
Youth Services	\$11,891,605
Child Welfare	\$14,132,708
Subtotal	\$42,502,274
Office of Behavioral Health	
Mental Health	\$65,842,125
Substance Abuse	\$70,598,000
Behavioral Health Services	\$77,864,000
Mental Health Institutes	\$21,948,434
Subtotal	\$236,252,559

Executive Director's Office	
CRO Funding	\$120,000
Behavioral Health Ombudsman	\$300,000
Subtotal	\$420,000
CDHS TOTAL	\$2,268,266,460

The level of flexibility for any potential federal funds the state may receive through future federal legislation will be dependent on the legislation itself as well the U.S. Treasury guidance that will be issued subsequent to the passage of the legislation, which will establish the allowable flexibility for how the funds are used. Note that for some stimulus funding, this federal guidance is established soon after passage of the relevant legislation, but in many other cases this guidance has taken several months to be finalized. For State and Local Fiscal Recovery Funds, we continue to evaluate the FAQs and additional guidance provided by the U.S. Treasury.

ADMINISTRATIVE SOLUTIONS

COVID-19 PANDEMIC REMOTE WORK POLICIES

- 29 **Please provide an update on how remote work policies implemented in response to the COVID-19 pandemic have changed the Department's long-term planning for vehicle and leased space needs. Please describe any challenges or efficiencies the Department has realized, as well as to what extent the Department expects remote work to continue.**

Early in the pandemic, the Department identified leased space that could be phased out. Leases for the Staff Development Center (SDC), the Low Income Energy Assistance Program (LEAP) and the Colorado Refugee Services Program (CRSP) were terminated and staff relocated. Phase 1 of the CDHS Facility Master Plan (FMP) has suggested further reductions in space where possible. The Department instituted a new FlexPlace policy in 2020 to allow widespread use of work from home opportunities, but has yet to transition jobs to permanent telecommuting positions. The Department is closely monitoring the current Covid-19 case and transmission rates in Colorado, as well as recent developments regarding new variants. The Department had a “Return to Office” plan for office specific spaces that aimed to gradually increase capacity from 20% upward during the second half of 2021. Currently, we are limiting staff to 30% of capacity, and the plan to expand that has been paused due to Colorado’s COVID-19 numbers. Future decisions around space capacity and needs will depend partly on the trending path of the pandemic. The Department does anticipate a reduction of space needs as compared to pre-pandemic needs and staffing levels. However, the Department has also experienced growth in many programs over the past two years and anticipates additional changes to space needs with the new Department of Early Childhood and the Behavioral Health Administration.

The Department has seen some reduction in leased vehicle usage. However, vehicles tied to facilities management and 24/7 operations remain static. Therefore, current vehicle trends do not indicate any significant reductions in the Department’s Vehicle Leases needs.

TURNOVER AND VACANCY RATES

- 30 **[Sen. Hansen] Please discuss the high number and percent of vacant positions and high turnover rates the Department is experiencing (Multi-Department RFI #1 response, JBC Staff briefing Appendix B).**
- a. **What actions has the Department taken and is planning to take to address the high vacancy and turnover rates?**

CDHS has experienced increasing critical staffing shortages as a result of heavy workloads, the COVID-19 pandemic, unprecedented competition for quality talent, lack of ability to respond to changes in the labor market, and high turnover (24.36% FY 2020-21). From January to

November 2021, CDHS has hired 1,625 employees, however, we have separated 1,574 employees during that same time frame.

Compensation is a significant factor in the staffing shortage. According to the Colorado Department of Personnel and Administration's (DPA) FY 2022-23 Annual Compensation Report:

- The base salary for healthcare services is 3.7% below market.
- Total compensation is 2.8% below market while base salary is 6.5% below market. CDHS has anecdotal evidence that populations of employees do not utilize state benefits and would like to receive additional base salary. With the base salary being 6.5% below market, CDHS is having difficulty offering a base salary that is competitive.

CDHS Employee Engagement and exit surveys demonstrate that staff are leaving due to heavy workloads (vacancies contribute to this heavy workload), inadequate pay, lack of ability to promote, and their supervisors. Facilities located within close proximity to other health care facilities face even steeper competition.

The Department has taken the following actions that directly impact clients/residents.

- Temporary Closure of units at the Colorado Mental Health Institute at Pueblo, resulting in a loss of 98 beds.
- Reducing admissions at various facilities. Given the reduced direct care staff, facilities are unable to admit the most acute patients, resulting in individuals languishing in jails as opposed to being admitted to the mental health institute. At the Veterans Community Living Centers a hold on new admissions has been implemented because of insufficient staffing levels, resulting in less revenue available to support overall operating expenses
- Programs for residents and clients have been limited at the Regional Centers and the Mental Health Institutes.
- At the Division of Youth Services programmatic reductions include in-person family visitation, outdoor recreation, and restorative justice opportunities.
- Overnight staff has been limited at various facilities. While the operations meet regulatory requirements, the limited staffing creates a safety risk for residents and staff.
- Various facilities have implemented mandatory overtime, which contributes to increased staff burnout and turnover, and could impact quality of care.

Given over eighty percent of the Department provides direct care in the various 24/7 facilities, the Department does not have vacancy savings resulting from turnover or vacant positions. This is due to the need to cover every shift in a 24/7 direct care environment. So, instead of a direct care vacancy leading to a vacant direct care shift and thus resulting in vacancy savings, instead the Department covers that shift with staff working overtime or temporary staffing agencies (both options are more expensive than the standard wages that would have been paid for that shift).

That said, the following are steps the department is taking to mitigate the issue.

- Streamlining/expediting hiring process in CDHS internal system so hiring can occur more quickly.
- Signing/referral bonuses at Veterans Community Living Centers and Regional Centers.
- Contracting with staffing agencies to expand the labor pool and to fill positions during COVID.
- Redesigned New Employee Orientation to provide the resources our employees need to work for CDHS.
- Continued employee engagement surveys.
- Revised the Flex Place policy to reduce barriers by making it easier to apply for flex place, and broadened the policy to give appointing authorities a greater ability to determine working location for employees (theme of work/life balance concerns from employee engagement surveys).
- Beginning revision of the New Leader Onboarding program to ensure our supervisors have the information and tools they need to be a successful leader at CDHS.
- Development of increased leadership training through the Outward Mindset program.
- Provided additional professional development through LinkedIn Learning (theme of professional development/career pathing from employee engagement surveys).
- Increased focus on retention of current staff by developing a career pathing program, and establishing a Workforce Resiliency Committee to provide support to staff (theme of professional development/career pathing from employee engagement surveys).
- Creation of an EDI program/action plan and FTE (theme from employee engagement surveys that employees feel they “hide/downplay aspects of self”).
- Centralized performance management functions within HR to one FTE to drive improvements in the performance management process for CDHS (theme of accountability for performance from employee engagement surveys).
- Creation of a sub-committee to workshop solutions to communicate with our 24/7 employees. Implementation of a tool to text important notifications to CDHS employees as a means of communication.
- Launch of a “Self Care in Times of Stress” class to support employees, particularly during COVID.
- Increased focus on equity, diversity and inclusion efforts, including in our hiring efforts to expand the labor pool.
- Reorganization of the HR structure into more specialized teams to provide increased guidance, consistency and expertise to CDHS employees and leaders.
- As part of the HR reorganization, CDHS has devoted additional resources to retention efforts, including a FTE to administer the career pathing program, a FTE to administer the CDHS performance management program, a FTE to provide assistance with team dynamics and conflict resolution, and a recognition program coordinator.

31 [Rep. McCluskie] Employee compensation is a significant factor in recruitment and retention, but the work environment at the State's 24/7 facilities is also important.

a. What is the Department doing to improve the work environment at its 24/7 facilities?

Veteran's Community Living Centers (VCLC) and Regional Centers (RC)

OAADS has developed a series of marketing commercials to be shown on social media sites to advertise regarding our openings in both our RCs and VCLCs.

The VCLC Division took a servant leadership approach to appreciation. During the "Gratitude Tour" they traveled to each VCLC this summer and hosted an all day car wash, raffle and barbeque where Division leadership cooked, served and cleaned the cars of the VCLC employees.

The VCLC division did in-person interviews of direct care staff at each location to identify how they can improve communication and job satisfaction. These results were compiled and shared with all VCLC employees to ensure transparency and leadership accountability.

Based on stay interviews at one VCLC, a workgroup was formed to pilot 12 hours shifts for nursing staff. The pilot launched in October and is expanding in December 2021.

The Division of Regional Centers identified Employee Engagement as a key strategic pillar and efforts to increase the employee voice has been initiated in several ways over this past year. These efforts included creating employee lead committees focused on equity, diversity, and inclusion as well as person-centeredness; Division wide newsletter; report on staff leave challenges informed by staff focus groups and survey; listening sessions and town halls; and a current in-depth analysis of staffing structures informed by staff interviews.

The Division of Regional Centers have implemented holiday shift bonuses, a one time holiday bonus, sign on and referral bonuses, and increasing opportunities for career advancement and skills training.

Mental Health Institutes

Ft .Logan has instituted "Listening and Sharing Tours"." The Hospital Management Team has a schedule and has begun to meet with all staff, all departments in person as able to following covid protocols to listen to the needs of our staff, build relationships and share information.

We are meeting with our staff forums (Employee forum, Compassion Fatigue, Voice of the Employee) to explore opportunities for collaboration, creativity and empowerment.

Division of Youth Services (DYS)

The Division continues its focus on safe environments within our youth centers. The ability to create a safer youth center brings about increased staff morale. Specifically, the Division has

created two goals within its Strategic Plan specifically directed towards staff morale, safety, and inclusion. They include: Creating and maintaining a highly-skilled, engaged, and diverse workforce. This goal will focus on strengthening equity, diversity, and inclusion in the DYS workforce, and Creating a culture that supports the retention of quality staff. Strengthen recruitment of quality and diverse staff, which includes individuals with lived experience. The second goal focuses on creating and nurturing a safe and trauma-responsive organizational culture. This goal will focus on providing Operationalized tools that support components of a trauma-responsive environment in all DYS settings

The Division of Youth Services continues to engage staff in listening sessions, open dialogue, and ongoing staff surveys.

The Division has engaged in providing 24/7 staff recognition bonuses and has provided opportunities for COVID safe staff events to increase staff morale and retention.

The Division is in its final stages of hiring an EDI Coordinator. This position will play a significant role in further developing a positive culture that is inclusive for all staff and the youth we serve.

The Division continues its process with the trauma-responsive organizational model (Sanctuary) that ensures that dedicated systems of care are put in place for both staff and youth.

The Division is excited to report that one youth center has become fully Sanctuary certified with the plan to have two to three more certifications each year.

The Division's staff has requested a more relaxed, yet professional, work attire within the Division's youth centers, which was put in place and has had very positive staff remarks.

b. What other actions is the Department pursuing to improve recruitment and retention?

- Streamlining/expediting hiring process in CDHS internal system so hiring can occur more quickly.
- Signing/referral bonuses at Veterans Community Living Centers and Regional Centers.
- Contracting with staffing agencies to expand the labor pool and to fill positions during COVID.
- Redesigned New Employee Orientation to provide the resources our employees need to work for CDHS.
- Continued employee engagement surveys.
- Revised the Flex Place policy to reduce barriers by making it easier to apply for flex place, and broadened the policy to give appointing authorities a greater ability to determine working location for employees (theme of work/life balance concerns from employee engagement surveys).
- Beginning revision of the New Leader Onboarding program to ensure our

- supervisors have the information and tools they need to be successful leaders.
- Development of increased leadership training through the Outward Mindset program.
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 - Launch of a “Self Care in Times of Stress” class to support employees, particularly during COVID.
 - Increased focus on equity, diversity and inclusion efforts, including in our hiring efforts to expand the labor pool.
 - Reorganization of the HR structure into more specialized teams to provide increased guidance, consistency and expertise to CDHS employees and leaders.
 - As part of the HR reorganization, CDHS has devoted additional resources to retention efforts, including a FTE to administer the career pathing program, a FTE to administer the CDHS performance management program, a FTE to provide assistance with team dynamics and conflict resolution, and a recognition program coordinator.

Division of Youth Services

The Division has submitted and received approval for several residency waivers for hard-to-fill positions. They include direct care staff, medical, behavioral health, teachers, and facility directors. In addition to receiving these approved waivers, the Division has started a process of working towards an out-of-state marketing campaign to increase recruitment and have a broader base applicant pool.

The Division has also focused on recruitment and hiring of individuals with 'lived experience' and has specifically called that out in our job announcements. Individuals with lived experience typically turn away from job opportunities provided within the Division. However, the Division understands and believes that individuals with lived experience can turn their lives around and be a great asset for the youth in our care.

The Department has supported the Division in increasing recruitment efforts to many different groups to promote and increase diversity in the workplace.

The Division is once again reviewing the option of providing recruiting and retention bonuses.

- 32 ***[Sen. Moreno]*** Please discuss the practice of and statutory requirements to hire at the range minimum for classified employees. How does this requirement affect the Department's ability to recruit and retain employees?

The Department is unaware of a statutory requirement to hire at the minimum salary range. Generally the Department requests decision items at the minimum salary range unless market conditions require the request to be at a higher level, such as the midpoint of the salary range. Given the current labor market in Colorado, it is becoming increasingly challenging to fill positions at the lower end of the ranges.

FINANCIAL SERVICES

DHS LONG BILL REORGANIZATION

- 33 ***[Sen. Rankin]*** Please provide an update on the Department's plans for implement H.B. 21-1304 (Early Childhood System) and H.B. 21-1097 (Establish Behavioral Health Administration).
- a. **What are the IT systems requirements and changes needed to implement H.B. 21-1304 and H.B. 21-1097?**
 - b. **How will the implementation of these bills affect the Department's Long Bill structure?**
 - c. **Should the Committee consider the reorganization proposed by JBC Staff as a parallel effort with these other changes, or should one set of actions come before the other?**

Question A will be answered by the Department of Early Childhood and the Office of Behavioral Health.

In response to questions B and C, the Department responded to an FY 2021-22 Joint Budget Committee Request for Information on November 1, 2020 with a proposed Long Bill reorganization. The proposal was crafted prior to the passage of H.B. 21-1304 and H.B. 21-1097, which create the Department of Early Childhood (DEC) and the Behavioral Health Administration (BHA). While the RFI does not account for the creation of the Behavioral Health Administration or the Department of Early Childhood, these two areas of the existing Department Long Bill structure are already reflected in Long Bill Groups (6) Office of Early Childhood and (8) Office of Behavioral Health, and will require changes as the new entities are transitioned, regardless of a larger reorganization. As a result, the Department views the creation of these two new entities as parallel efforts to restructuring the remaining Department of Human Services Long Bill.

For example, information technology programs Trails, Adult Protective Services, Electronic Health Record and Pharmacy System and so forth are currently appropriated to the Office of

Information Technology Services as opposed to being shown with their respective programs. Aligning the appropriations for program information technology systems with their program operations and other administrative costs will create consistency within the Long Bill regardless of the implementation of H.B. 21-1304 and H.B. 21-1097.

OFFICE OF ECONOMIC SECURITY

R10 SNAP FAIR HEARING COMPLIANCE

- 34 ***[Rep. McCluskie]* What are the consequences for the State of not complying with the 60-day requirement for final decisions in the Supplemental Nutrition Assistance Program (SNAP) fair hearing process?**

Colorado has been on a corrective action plan with the U.S. Department of Agriculture, Food and Nutrition Services (FNS) since 2013. The Department is required to provide an update to FNS every six months, including both the State's performance on the metric and an explanation of additional efforts employed to comply with it.

Over the years, our regional FNS office had noted the various efforts employed in Colorado to comply. Since 2019, little progress has been made because all the remaining options carry some cost. FNS has indicated they will refer Colorado's corrective action plan to the national office given the lack of progress. If the national office deems that Colorado is out of compliance and not making concerted efforts, they can levy a sanction on the State, requiring General Fund to pay the penalty. Based on historical fines for SNAP issues, the Department estimates a fine would likely be in the \$800,000-\$1 million range.

TEMPORARY ASSISTANCE OF NEEDY FAMILIES (TANF)

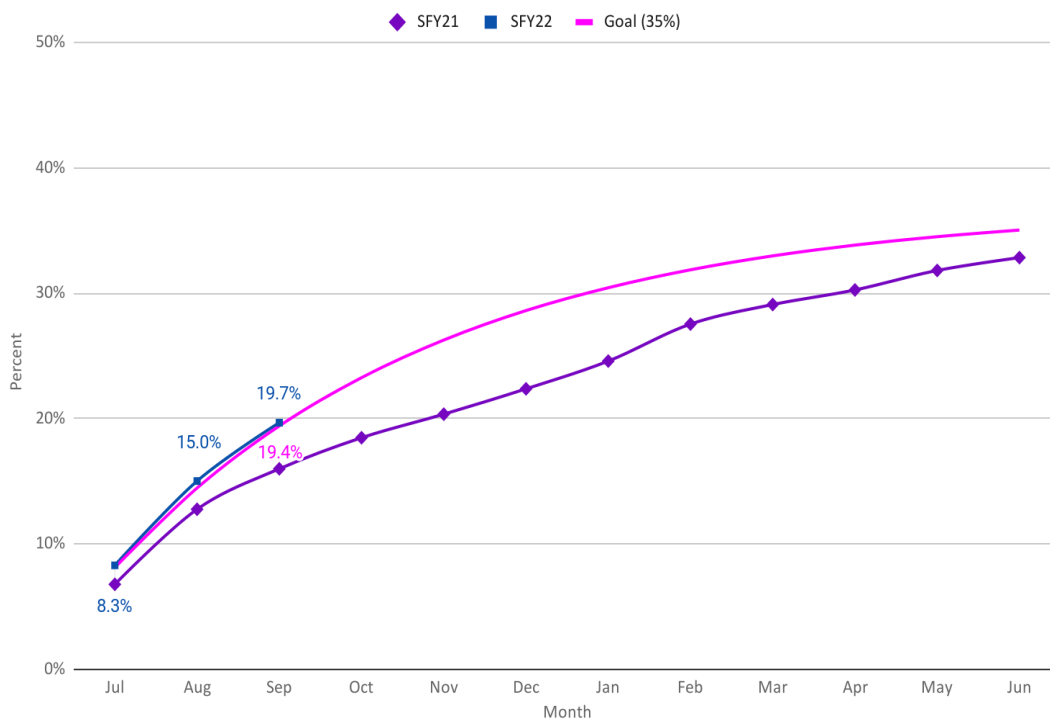
- 35 ***[Rep. McCluskie]* Please describe and discuss the metrics used to evaluate the services funded with TANF dollars and how the Department measures participant success.**

The Work Participation Rate (WPR) is the only federal measure for the Temporary Assistance for Needy Families (TANF) Program. The WPR is an output measure that calculates the percentage of the work-eligible caseload who are participating in a countable work activity each month. Federal compliance requires states to meet a rate of 50%.

Additionally, the Department has created its own set of metrics to examine the effectiveness of services, including entered employment among TANF participants, timeliness of processing applications, and error rates. The entered employment metric is a cumulative percentage of TANF participants who enter into employment throughout the year. This is a more robust measure of employment success than the WPR, which includes a wide array of activities. The current target is 35%; as shown in Figure 1, Colorado is on target to meet the goal based on

performance through September. This represents an improvement in performance compared to FY 2020-21.

Figure 1: TANF Entered Employment



Additionally, the Department collects qualitative data through regular surveys of TANF participants who leave the program. While this survey primarily focuses on employment outcomes (a major focus of the TANF program), it does capture some information about general program satisfaction. Participant satisfaction has remained relatively consistent, increasing from 77.2% in FY 2016-17 to 81.7% in FY 21-22. One survey question is designed to gauge the program’s impact on children, asking if the Colorado Works/TANF program helped support their child’s needs. The most common responses to this question was how Colorado Works benefits helped provide food, clothing, housing, diapers, and transportation for children in the family.

- 36 **[Sen. Rankin]** Please provide an update on the implementation of S.B. 16-190 (Improve County Administration Public Assistance Programs), specifically the quality improvement project funded through this bill.
- a. **Has the bill been effective in reducing SNAP benefit determination errors?**
 - b. **How has this bill affected the number of SNAP benefit determination appeals and fair hearing cases?**

To some extent, the intent of SB 16-190 was for counties to take financial accountability for their own errors and timeliness rates and that sanctions and bonuses would be passed on to them. As such, the State and counties agreed to a plan to address sanctions and award FNS bonus or incentive funds to Counties for their progress. However, the 2018 Farm Bill

discontinued bonus and incentive funding. As a result, sanctions remain the only federal tool to leverage performance among counties. However, FNS decided not to subject states to performance sanctions in federal fiscal years 2020 and 2021, given the array of waivers and policy modifications allowed during the Pandemic.

Additionally, as required by SB 16-190, the Department provided a report to the General Assembly in February 2017 outlining the Continuous Quality Improvement efforts at both the State and county levels. At that time, the State and the counties created a workgroup that counties could opt into to share best practices across the State. In addition, the Department supported CQI efforts through its C-Stat process specific to county metrics, called the Performance and Partnerships Exchange. State staff would select small, medium, and large counties performing well in a metric and conduct on-site reviews to understand the practices and policies behind good performance. This information was compiled into a toolkit for other counties. Neither of these efforts demonstrated a significant impact on the SNAP error rate. Furthermore, these efforts did not impact the SNAP benefit determination appeals or fair hearing cases.

Since the outset of the Pandemic, resources across counties and the State have been incredibly strained. Both the CQI workgroup led by the counties and the Performance and Partnerships Exchange have been placed on hold.

AID TO THE NEEDY DISABLED

37 [Sen. Moreno] Please provide an update on the implementation of H.B. 19-1223 (Social Security Disability Application Assistance), which created the Disability Benefits Application Assistance Program.

a. What have been the effects of this program on the Aid to the Needy Disabled caseload?

The Disability Navigator Program was initially implemented in FY 2019-20. The first few months were spent building the program infrastructure, as required in HB 19-1223. Service delivery was in its infancy before the Pandemic halted most activity. The General Assembly paused the program in FY 2020-21 as a budget balancing action, and reinstated it in FY 2021-22 with a \$2 M appropriation.

This year, 17 counties have opted to operate the Disability Navigator Program to serve AND clients. These 17 counties received a total of \$1,850,000 to deliver services, beginning in September. However, counties are still in the process of standing up their programs, so it will take some time to discern the effects. As of December 2021, the Disability Navigator program has made 114 referrals and provided services to 60 clients.

As required by statute, the Department developed an evaluation plan that includes a comparison study to assess the program's efficacy in improving client outcomes (including attachment to SSI) as well as a client survey and a survey of caseworkers/navigators assisting clients. The evaluation will be implemented during FY

2021-22. As required in statute, the Department will submit the evaluation report to the General Assembly one year after the program is implemented. Information from this evaluation should provide insight into program outcomes and any related caseload changes.

The Navigator program is intended to increase the likelihood that a person on AND would attach to SSI successfully as applying for SSI is a condition of AND eligibility. The Navigator program is not designed to increase the AND caseload.

38 ***[Rep. Ransom]*** From FY 2019-20 to FY 2020-21, the number of older Coloradans served by the State’s Area Agencies on Aging declined from 59,758 to 54,167 individuals, respectively. Likewise, there has been a steady decline in the number of individuals receiving benefits from the Old Age Pension program.

a. **What are the reasons for the overall decline in caseload for programs serving older Coloradans?**

Old Age Pension:

The Old Age Pension (OAP) caseload has been on a downward trajectory for several years; however, that trend has accelerated from FY 2019-20 to FY 2020-21. Baseline program eligibility is set in the State Constitution, and additional eligibility criteria are statutorily required to mirror Supplemental Security Income (SSI) eligibility, which is generally stable from year to year. Given the consistency in the program’s eligibility requirements, the Department has explored other factors that could be driving the declining caseload. First, the Department collaborated with the Colorado State Demographer’s Office to understand the population dynamics.

The overall population of Coloradans age 60+ grew 45.3% from 2010 to 2019. A rough estimation, based on income level and citizenship, indicates that the sub-set of this population potentially eligible for OAP grew by 11.4%. However, this analysis neglects information about a person’s assets. Certain assets (e.g. bank accounts, stocks, bonds, and life insurance policies) are included in eligibility determination calculations. As these investment and savings tools have become more ubiquitous, it is possible that asset values are playing a role in the declining OAP caseload. The Department is continuing to investigate the impact of assets and other potential drivers of the OAP caseload decline.

Community Services for the Elderly, Area Agencies on Aging Services (AAAs):

The number of older adults served by the AAAs has actually increased in recent years, from 40,200 in FY 2014-15 to 54,167 in FY 2020-21, an increase of almost 35%. The slight dip in the number of older adults served from 59,758 in 2019-20 to 54,167 in 2020-21 was a direct result of the impact of the COVID-19 pandemic. Unfortunately, the majority of services provided by AAAs were forced to cease for a period of time during that fiscal year due to the health and safety risk posted by COVID-19. Once more was understood about COVID-19 and its impact, some services were able to resume safely.

b. **What, if any, has been the effect of declining caseload on the services provided to older Coloradans?**

Old Age Pension:

The Old Age Pension Program is a cash benefit designed to provide financial assistance to low-income, older Coloradans. Additional services are not provided through the program. The benefit amount is adjusted annually based on the Social Security Administration's Cost of Living Adjustment (COLA). Program enrollment does not have any effect on the benefit amount, so the declining caseload has not been a factor in the benefits calculation.

Community Services for the Elderly, Area Agencies on Aging Services (AAAs):

Because there has not actually been a decline in services provided by the Area Agencies on Aging over the past several years, with the exception of the dip in services in FY 2020-21 due to the impact of the COVID-19 pandemic, there has not been an effect of declining caseload on the services provided to older Coloradans.

SERVICES FOR PEOPLE WITH DISABILITIES

R20 CAPS FEE REDUCTION

- 39 ***[Sen. Rankin]*** Please discuss the Department's policies and practices regarding how Information Technology (IT) systems are administered.
- a. **How does the Department determine whether to manage IT systems through the Office of Information Technology Service or through individual divisions/programs?**

There are various data systems that the Department maintains independently, without OIT, and the CAPS database is one of them. The Department works collaboratively with OIT to determine the IT needs of each program area and OIT's involvement. The CAPS system was developed in 2014 within the Adult Protective Services unit and is maintained in-house. The FTE in this request will help with both the administration and updating of the CAPS system which is consistent with how some Department data systems are maintained at the program level where the subject matter expertise is.

COMMUNITY SERVICES FOR THE ELDERLY

- 40 ***[Rep. McCluskie]*** It appears that expenditures by Area Agencies on Aging for transportation services has declined over the last several fiscal years (see chart at the top of page 10 of JBC Staff briefing). What are the causes of this decline?

The chart on the top of page 10 of the JBC Staff Briefing Document from the December 1, 2021 Department of Human Services Briefing shows the *proportion of the total expenditures* over the past seven years for each of the following services types provided by the Area Agencies on Aging (AAAs): home delivered meals, congregate meals, transportation and "other services". It does not show *the actual changes in expenditures for these services* during the past seven years.

The table below shows that while the expenditures for transportation services have decreased as a proportion of total expenditures on AAA services in recent years, transportation expenditures have actually increased year over year. Specifically, expenditures for transportation increased from \$4,430,210 in FY 2014-15 to \$5,392,085 in FY 2020-21, whereas transportation expenditures as a percentage of overall expenditures decreased from 13.8% in FY 2014-15 to 10.8% in FY 2020-21. The decrease in expenditures for transportation services as a percentage of total expenditures in that year can be attributed to the recent influx of federal stimulus funding resulting from the COVID-19 pandemic and its greater use for services other than transportation. For example, in FY 2020-21, home delivered meals were the most critical service to provide to older adults who were unable to leave their homes due to the COVID-19 pandemic, whereas transportation services were less in need that year.

Transportation Expenditures Relative to Total Expenditures for all Services FY 2014-15 through FY 2020-21							
Older Americans Act and State Funding for Senior Services Funding							
Expenditure Type	Fiscal Year						
	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21
Transportation Services Expenditures	\$4,430,210	\$4,433,256	\$4,941,884	\$4,675,096	\$5,530,860	\$5,572,081	\$5,392,085
Total Expenditures	\$32,128,302	\$36,163,695	\$39,594,942	\$38,186,001	\$43,753,877	\$47,551,208	\$50,042,576
Transportation Expenditures as a % of Total Expenditures	13.8%	12.3%	12.5%	12.2%	12.6%	11.7%	10.8%

R8 OLDER COLORADANS CASH FUND SPENDING AUTHORITY

- 41 **[Rep. Ransom]** Please discuss the effects of federal American Recover Plan Act (ARPA) funding, provide through the Older Americans Act, on services provided by the State’s Area Agencies on Aging.
- a. How do the Department and Area Agencies on Aging plan to spend this ARPA funding?
 - b. Given the substantial infusion of federal funding, what planning is in place to prevent a future decline in services once the ARPA funding expires?

Caseloads are increasing for the Older Americans Act Programs. These are different from the entitlement programs in Adult Financial. The only eligibility criterion is to be age 60 or older. As this population increases, so do the services provided and the need for these services. The

federal stimulus dollars from ARPA require a 5% State match. Using the accumulated interest in the Older Coloradans Cash Fund as this match allows us to leverage over \$18M in federal stimulus dollars.

- a. The Area Agencies on Aging have been encouraged to use these funds for one-time costs such as infrastructure improvements. These funds will allow the AAAs to replace or upgrade aging infrastructure such as expensive kitchen equipment and transportation vehicles, upgrades that are not usually possible in the context of normal funding where most of the dollars are used for services.
- b. As the entire nation is experiencing a workforce shortage, which creates a capacity issue, there is flexibility in the funds and AAAs may also use them to build capacity in their areas. The AAAs will need a plan to sustain the capacity, and have until September 2024 to expend the ARPA dollars. It is anticipated that there will not be a cliff effect as a result of using these dollars for such infrastructure improvements.

GRAND JUNCTION REGIONAL CENTER

42 [Sen. Rankin] Please provide an update on the Grand Junction Regional Center transition process.

Senate Bill 16-178 required that Grand Junction Regional Center (GJRC) move off the campus and sell and/or transfer the land to a new owner. In order to do this, the Department is working toward the relocation of the remaining ten individuals who currently live on the GJRC campus by building two new group homes in the community. This took longer than expected, however the Department is making great progress and plans to break ground for the new homes in 2022.

The following is an update of recent events related to this, as of December 1, 2021.

- The Department has successfully worked with the Colorado Department of Personnel and Administration to purchase additional property to build two new group homes for the Grand Junction Regional Center.
- After an architectural firm was selected, Chamberlain Architects, the GJRC Group Home Advisory Committee, which includes a parent of an individual that will be living in one of the new homes, met and continues to meet regularly to work on the site design.
- In 2021, the Department requested an additional \$1.6 million in funding from the Legislature to build the appropriate design needed to support individuals. This request was approved.
- The Department held a pre-application meeting with the Grand Junction Planning and Zoning Department. In addition, two community meetings were held with neighbors in the area where the houses will be built to allow for public comment. Residents provided feedback to the Department and the City of Grand Junction.
- In July 2021, members of the Capital Development Committee visited the Grand Junction Regional Center campus, met with key Department leaders and discussed

the group home designs and plans.

- The City of Grand Junction decided not to connect the local roads near the homes, resulting in the need for a redesign project. To accomplish this, the architectural firm has met and continues to meet with the Grand Junction Planning and Zoning Department and the Grand Junction City Council to finalize the redesign.
- The construction documents are expected to be completed by the end of December 2021.
- We are anticipating breaking ground on the two new homes in early 2022.



GOVERNOR
JARED POLIS

Department of Early Childhood JBC Hearing Presentation

December 2021

Agenda

- Vision of the Department of Early Childhood
- Where We Are in the Process
- DEC Administration
 - Overview
 - UPK Budget Amendment (forthcoming)
 - DEC Supplemental (forthcoming)
- Governance
- Universal Preschool Preview
- IT Systems
- Future Opportunities with Build Back Better

Vision for the Department of Early Childhood

90%

Brain development and growth before
age 5



Welcoming our newly hired Transition Director!

M. Michael Cooke

- Leading the transition to the new Department
- State Director for the Council for a Strong America
- Douglas County Board of County Commissioners
- Cabinet Member for fmr. Gov Bill Owens
 - Executive Director of DORA and later DOR
- Executive Vice President of a Charter School serving at-risk students



Note: a search for the Department's Executive Director will kick off in 2022

Vision for the Department of Early Childhood

Vision

All Colorado children, families, and early childhood professionals are valued, healthy and thriving.

Mission

The Colorado Department of Early Childhood ensures the delivery of a comprehensive, community-informed, data-driven, high-quality and equitable early childhood system that supports the care, education and well-being of all Colorado's young children, their families and early childhood professionals in all settings.

Values:

- We value equity across the early childhood system and are committed to utilizing an equity-focused lens to drive priorities and decision making.
- We believe formal and informal care environments can provide high-quality, developmentally appropriate care and learning.
- We respect and appreciate the diversity and strengths of all of our communities in Colorado.
- We believe accessibility to early childhood services considers affordability, cultural responsiveness, and parent choice.
- We value an innovative and expansive approach to our early childhood system.
- We value a whole-family approach.

Challenges for Families in the Current System (Q6)

Cost

The cost of care is too expensive for most families

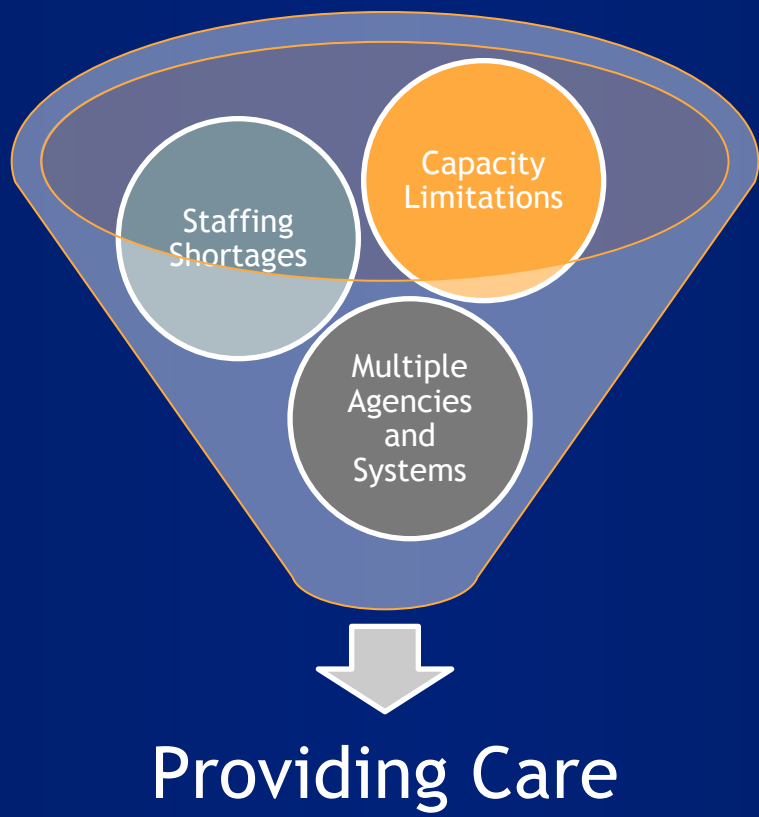
Access

Limited high quality care options for families

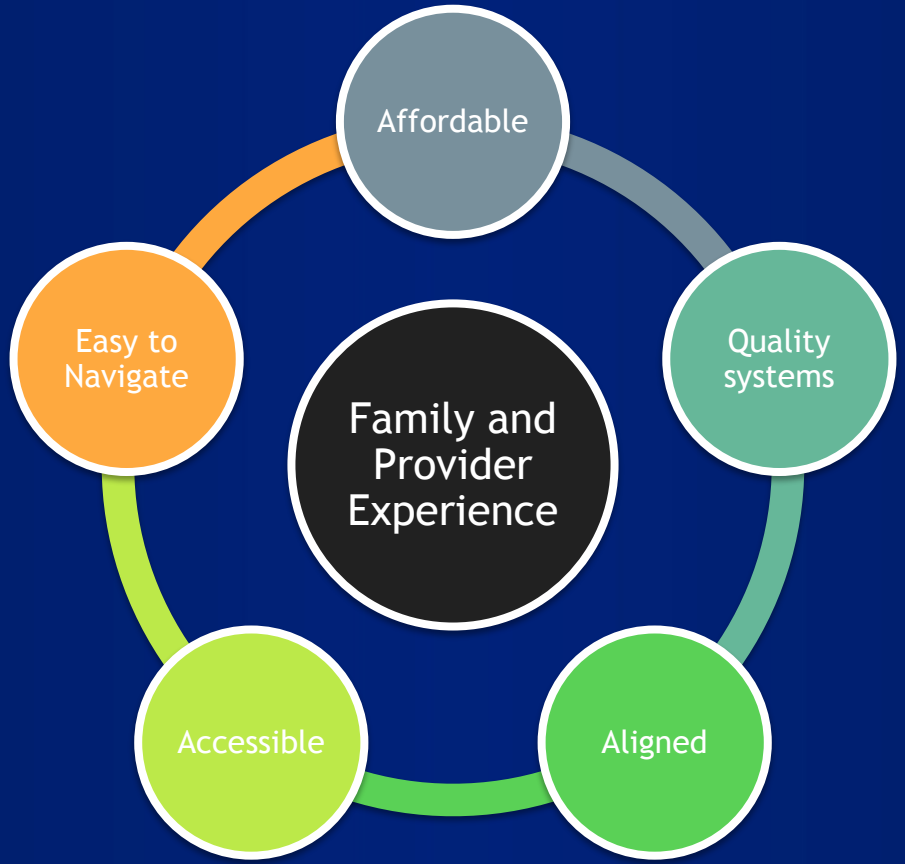
Navigation

Multiple entry points, applications, program requirements and rules

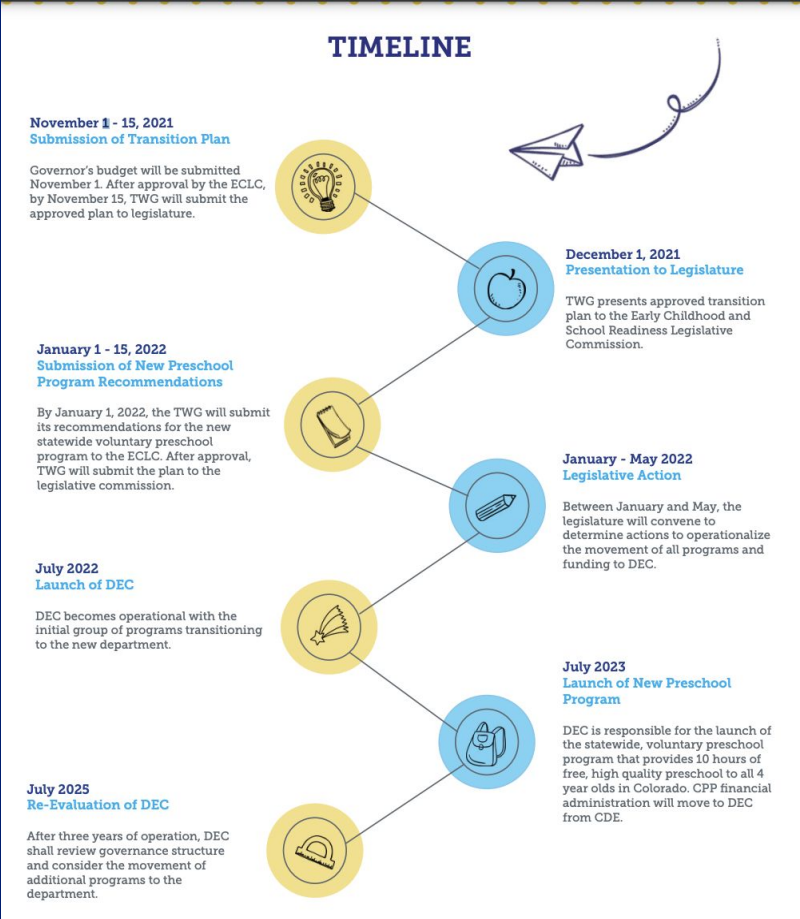
Challenges for Providers (Q6)



A Historic Opportunity: Department of Early Childhood (Q6-7)



Department of Early Childhood Transition Process



Overview of Transition Report Recommendations

The transition report covers the following topics:

- Vision, Mission, Values, and Guiding Principles
- Governance
- Structure of DEC
- Programs and Services to Transition to DEC Beginning July 2022
- Fiscal Structures and Funding Transition to DEC Beginning July 2022
- Re-evaluation of Transition by July 2025
- Ongoing Alignment and Collaboration with Other State Agencies
- Blending and Braiding Funding
- Technology and Data Systems
- Early Childhood Workforce

Agile and Representative Governance (Q2-4)

Rules and Regulations Advisory Council (RRAC)

- Up to 15 members
- 50%: lived experience in the EC system or from historically underserved communities
- Holds public, simple majority votes on rules and regulations

Executive Director

- Expert in the field of Early Childhood
- With the advice of RRAC, holds ultimate rulemaking authority

Additional, existing advisory structures

- Groups that currently advise CDE and OEC such as:
- Early Childhood Leadership Commission
 - Counties
 - School Districts

DEC Administration (Q5)



- Given the complexity of creating a new department and the level of change that is recommended in the Transition Plan, standing up DEC and having full operational capacity will require a thoughtful, agile, phased, multi-year transition.
- This first year will build a strong foundation of key staff members to stand up the new department, which will then be in a position to identify the long term staffing needs in a manner that is both financially sustainable and aligned to the day-to-day needs of the department.

Department of Early Childhood Budget Requests (Q1)

November 1, 2021

December 10, 2021

January 3, 2022

Department of Early Childhood Administration Request (20 total FTE, \$13M)

Universal Preschool Information Technology Request (\$3.5M)

Department of Early Childhood Administration Supplemental Request (3.0 FTE for 6 staff for 6 months, \$552k)

Transfer Early Childhood Programs Budget Amendment

Early Childhood Foundations and Universal Preschool Administration (10 FTE, \$722k)

Lean Foundations (Q5, Q10)

Office of Early
Childhood
Positions



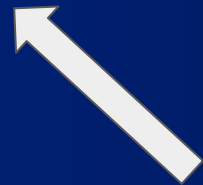
Colorado
Department of
Education
Positions



Dept. of
Early
Childhood



Foundational
FTE



Short-term
utilization
of DHS
Central

DEC Administration Prior to July 1st (Q7)

Executive
Director

Chief Financial
Officer

Human
Resources
Director

Data Systems
Analysis Director

Program
Delivery Director

Human
Resources
Specialist

Proposed Long Bill Structure

Proposed Long Bill Structure Has 5 Divisions:

- Executive Director's Office
- Partnerships and Collaborations
- Early Learning Access and Quality
- Community and Family Support
- Licensing and Administration

The Challenge: Ensuring Every 4-Year-Old Has Access to Preschool (Q11-12)

- Local solutions for local challenges
- A single, unified application for universal preschool
- Streamlining quality and evaluation standards
- Workforce development
- Special education



Key Partners in Implementation (Q 6,7)

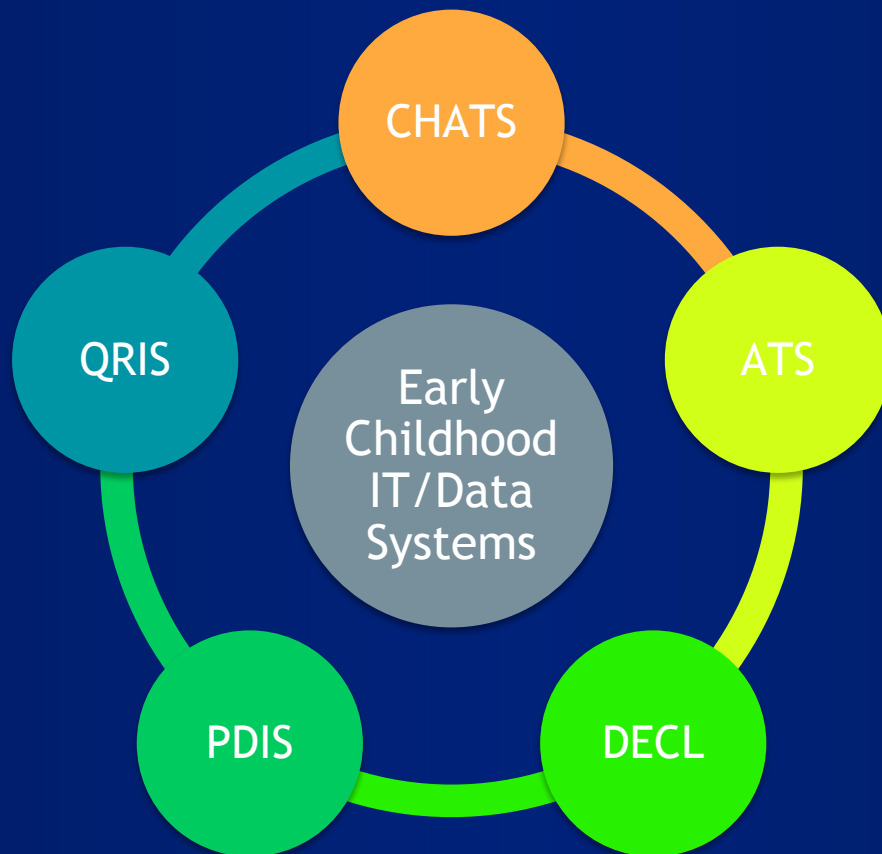


Budget Amendments for Universal Preschool (Q11)

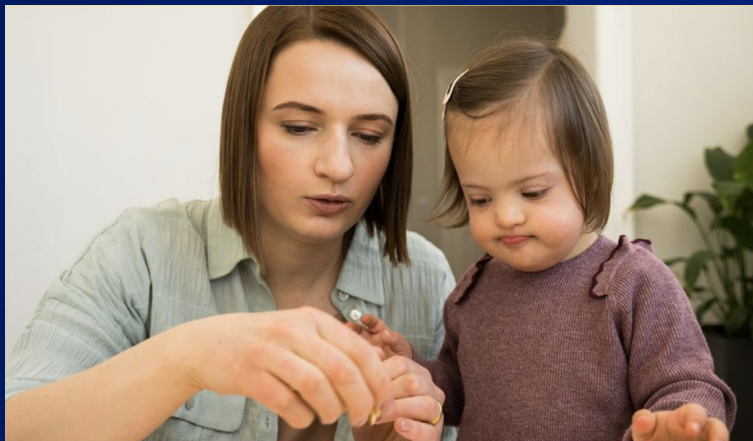
Given the need for collaborative partnerships to build the department and provider infrastructure necessary to ensure universal preschool by 2023, the Governor's office will submit budget amendments or requests in order to:

- Hire the staff necessary to operationalize universal preschool throughout the state
 - Early Childhood Foundations and Universal Preschool Administration (10 FTE, \$722k)
- Develop and build universal preschool information technology system
 - Universal Preschool Information Technology Request (\$3.5M)

Current Early Childhood IT/Data Systems (Q11)



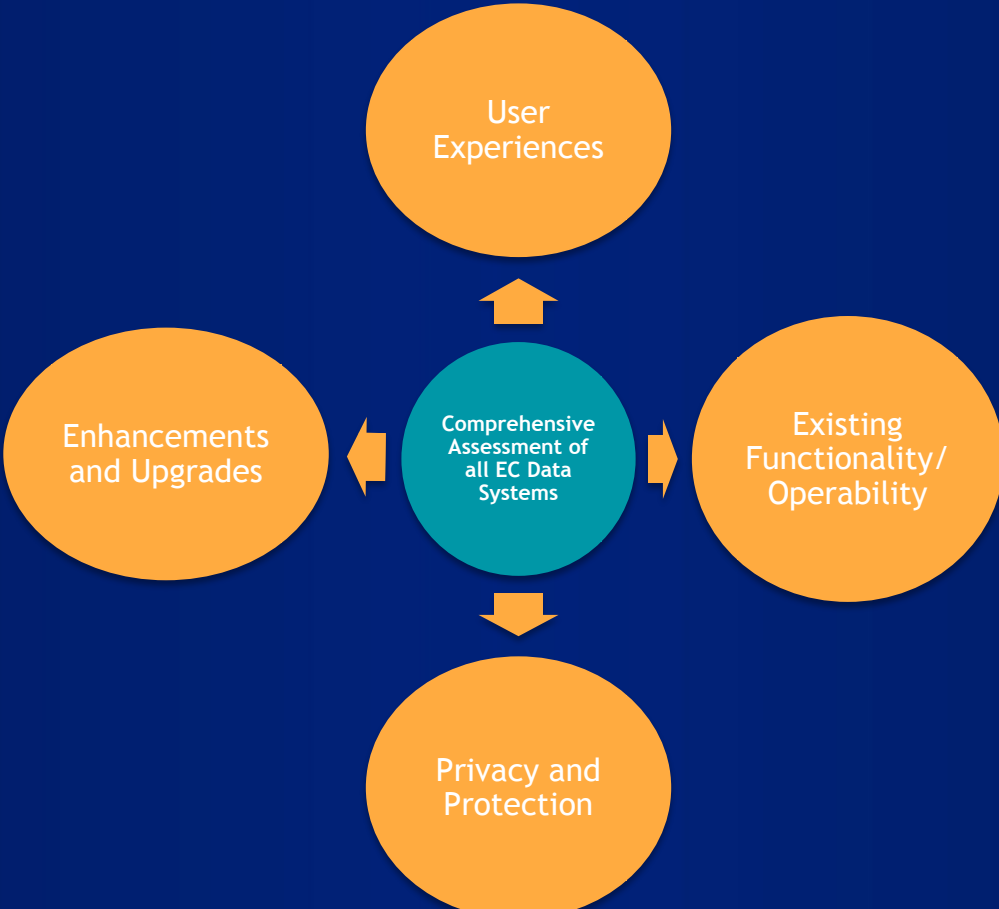
Current Early Childhood IT/Data Systems: Upcoming Enhancements (Q1)



IT Capital request submitted to the JTC on Dec. 10th:

- Creating the technology foundation for universal preschool
 - Common application
 - Provider payments
- Comprehensive analysis of all early childhood systems and planning for the future

Data Systems: Comprehensive Analysis (Q1)



Build Back Better (Q13-14)

Build Back Better presents a historic opportunity to right size our investment in child care and preschool across the country. Key components include:

- Free voluntary universal preschool for 3- and 4-year olds;
- Right sizing the child care subsidy (CCCAP) to reflect the actual cost of quality child care and a living wage for all providers; and
- Expanding child care subsidy to provide access to child care assistance for more than 90 percent of families.

The HB21-1304 stakeholder process around the DEC and universal preschool program has put us in a position to hit the ground running when it comes to Build Back Better.

Evaluation and Outcomes

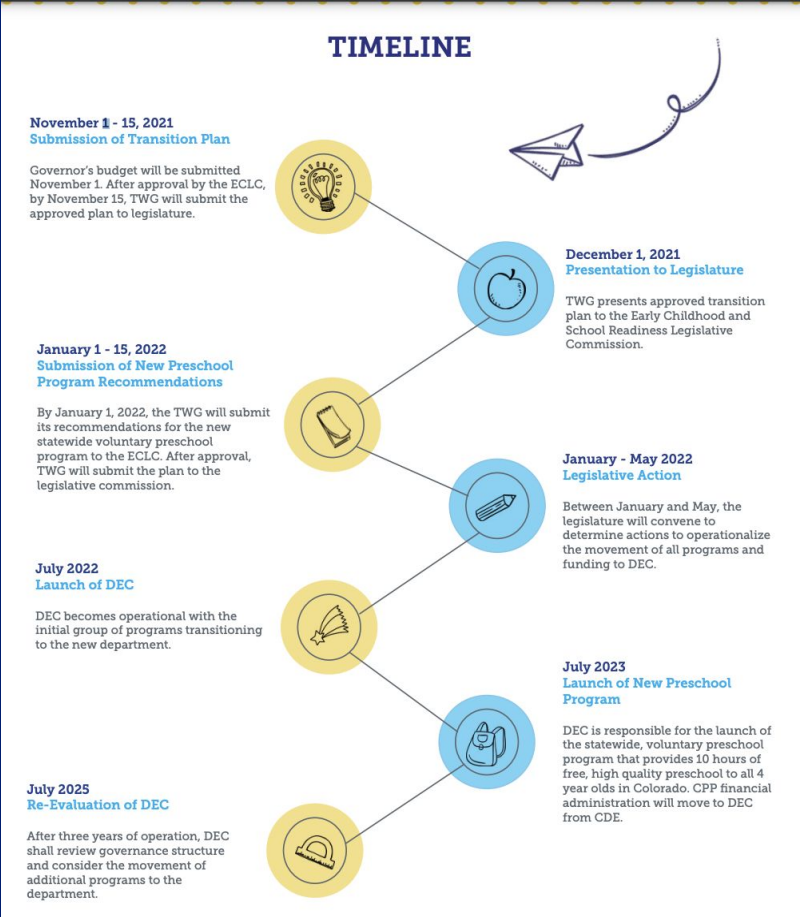
Performance Plans
and Performance
Management

2025 Re-evaluation

Ongoing Continuous
Improvement and
Evaluation

Joining us on the Journey

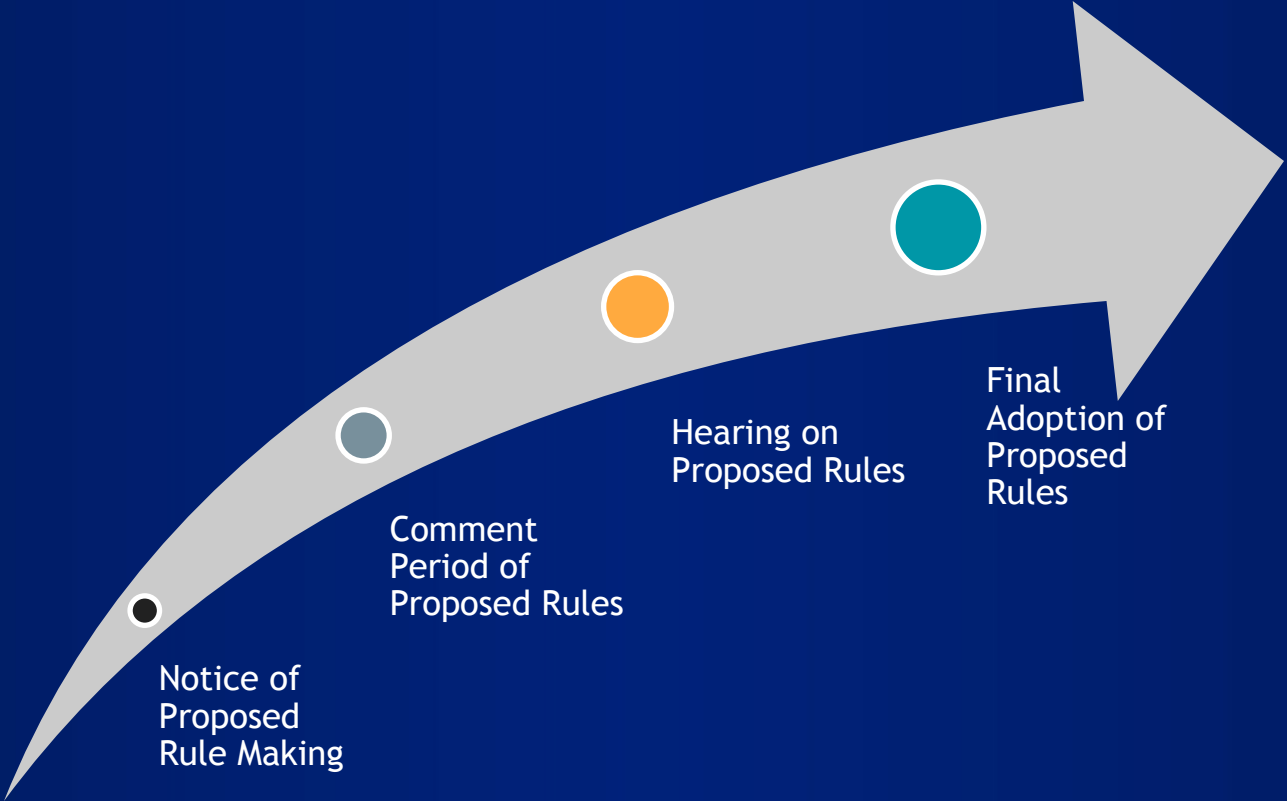
Thank you!



Questions?

Appendix

Rule Making Process



Boards

Agencies with Boards

- Dept. of Agriculture
- Dept. of Healthcare Policy and Financing
- Dept. of Human Services
- Dept. of Personnel and Administration
- Dept. of Transportation
- Dept. of Public Health and Environment
- Dept. of Education
- Dept. of Higher Education

Agencies without Boards

- Dept. of Labor and Employment
- Dept. of Local Affairs
- Dept. of Natural Resources
- Dept. of Regulatory Agencies
- Dept. of Revenue
- Dept. of Corrections
- Dept. of Public Safety

Membership requirements of RRAC

- Parents, families, or caregivers of children who are enrolled in a variety of public and private early childhood programs;
- Members of the early childhood workforce, including community and school-based educators;
- Representatives of geographically and programmatically diverse community and school-based public and private early childhood programs and Family, Friend, and Neighbor (FFN) providers;
- County and school district officials, including preschool directors and charter schools;
- Representatives from foundations, business, and advocacy organizations;
- Experts in finance and/or regulations;
- Representation from culturally and linguistically diverse communities;
- Representation from higher education; and
- Representation from health / mental health / oral health care professionals.

Office of Early Childhood
(OEC)

Every Child Thrives



COLORADO
Department of Human Services



To ensure all children are valued, healthy, and thriving, we lead bold and innovative programming, remove barriers, and implement systems change.

The OEC's "How"

The 6 Strategies to ensure all children are valued, healthy, and thriving:

Strategy 1 Access

Ensure all families have equitable and easy access to high quality early childhood services so that all children start school ready to succeed.

Strategy 2 Workforce

Support the early childhood workforce, so that they have the tools to nurture and teach children in their care.

Strategy 3 Family Strengthening

Provide communities and families with the support they need so children have a strong environment in which to thrive.

Strategy 4 Awareness

Educate the public and policymakers about the evolving needs of young children and families to ensure effective advocacy and systems change .

Strategy 5 Funding Alignment

Align available public and private funding streams to simplify administration and amplify the impact of early childhood services.

Strategy 6 Culture

Align our work with our mission, vision and values to ensure we implement bold, effective and innovative early childhood programming.



Stimulus Funding Strategies

Access

14 Activities

\$333 Million

Workforce

10 Activities

\$74 Million

Family Strengthening

9 Activities

\$127.2 Million



FY 2022-23 Budget Requests

R-01 Promoting Safe Child Care

R-02 Early Intervention Early Start Program

R-03 Refinance Child Care Assistance Program



R-01 Promoting Safe Child Care (Q15, pg. 14)

Reasons for a new unit in the Office of Early Childhood focused on promoting safe and nurturing environments for children in all types of child care settings.

Raises awareness of safe child care

Supports legal family, friend and neighbor care

Moves the Office of Early Childhood from a reactive approach to a proactive approach

Addresses providers seeking to deceive families desperate for care

R-03 Refinance Child Care Assistance Program (Q16, pg. 15)

How child care providers can be eligible to serve CCCAP families.

Licensed Child Care Provider

Have a Current Child Care License

Have a CCCAP Fiscal Agreement with a local county department of human services

Qualified Exempt

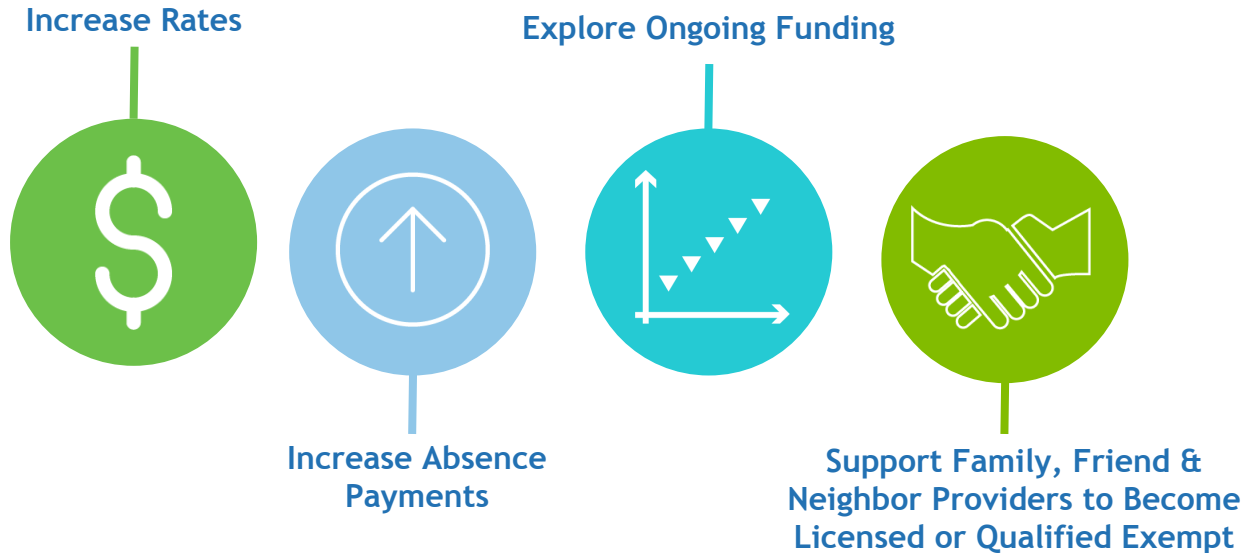
CCCAP family must request

Meet CCDF requirements

Have a CCCAP Fiscal Agreement with a local county department of human services

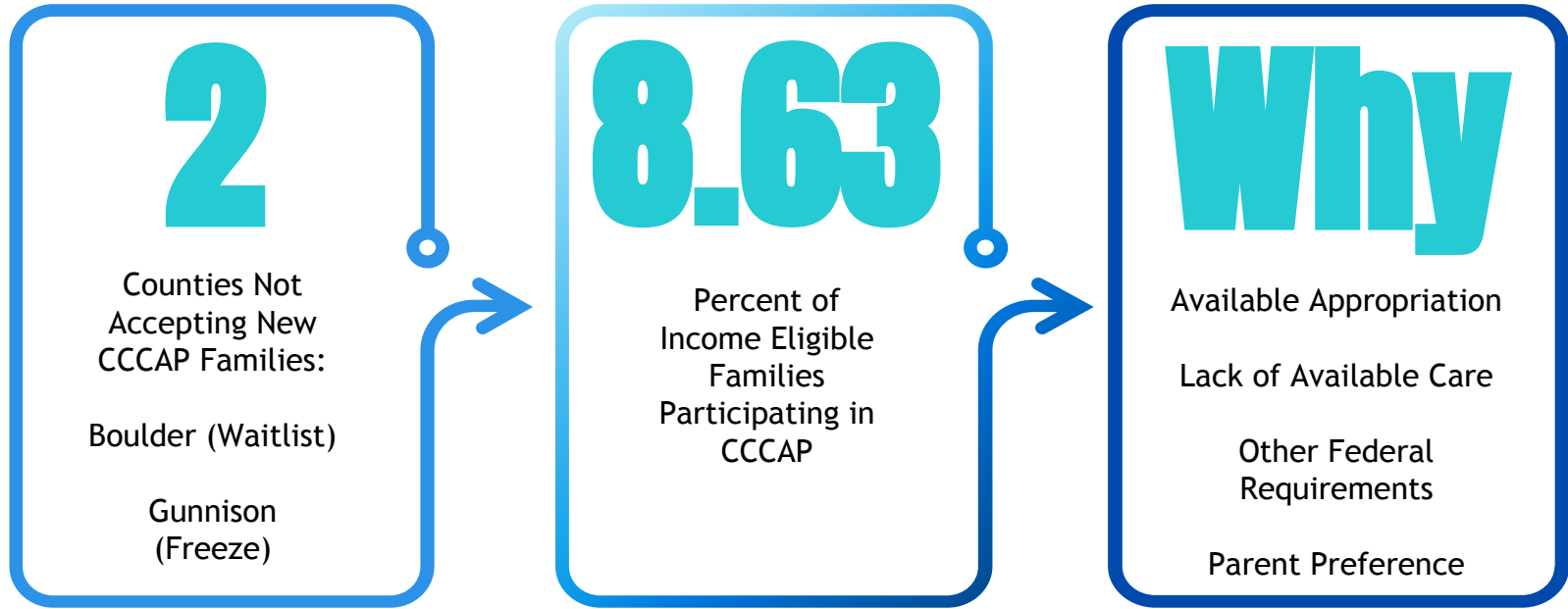
R-03 Refinance Child Care Assistance Program (Q16, pg. 15)

How the Office of Early Childhood is increasing participation in the Child Care Assistance Program.



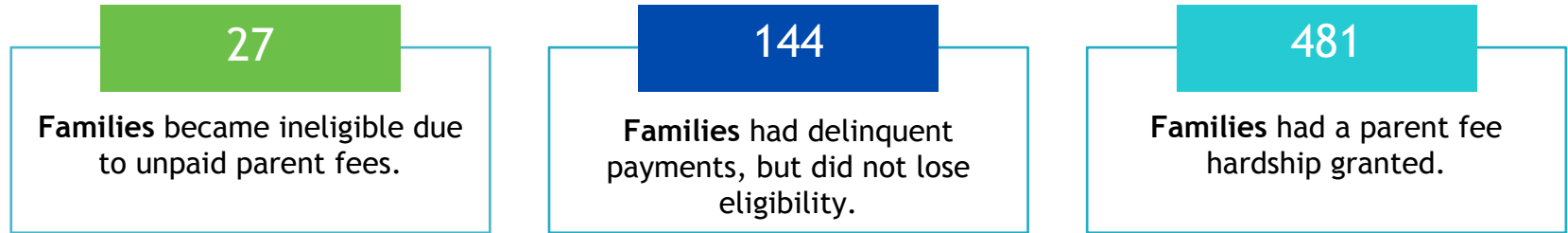
R-03 Refinance Child Care Assistance Program (Q17, pg. 16)

Exploring how many families are currently served by the Child Care Assistance Program.



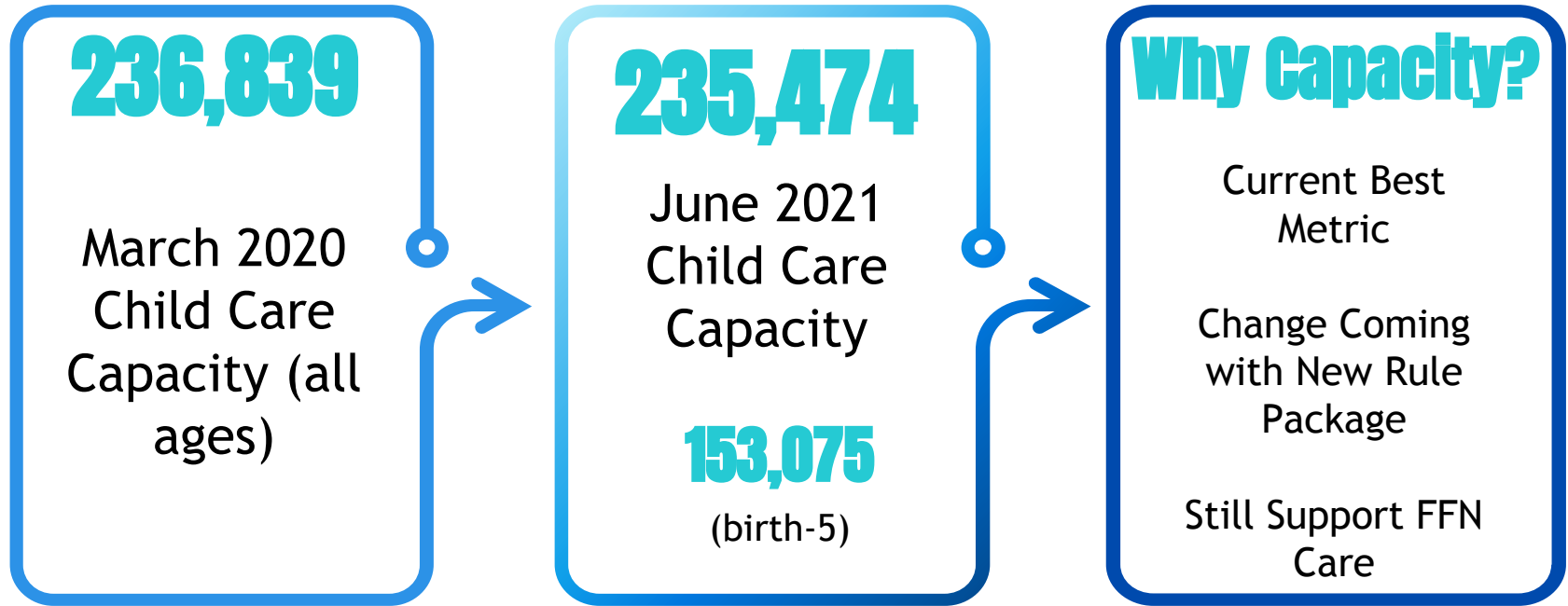
R-03 Refinance Child Care Assistance Program (Q18, pg. 18)

Number of families ineligible to participate in CCCAP because of inability to pay.



Wildly Important Goal (WIG): Increase Statewide Child Care Capacity (Q19, pg. 19)

Child care capacity in Colorado throughout COVID-19.



Wildly Important Goal (WIG): Increase Statewide Child Care Capacity (Q19, pg. 19)

Increasing child care capacity in Colorado.

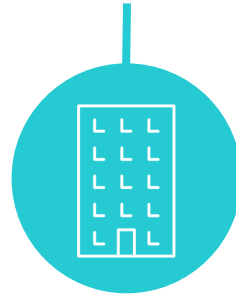
Employer-Based
Child Care Design
Lab



Employer-Based Facility Development
and Renovation



Business Development
Training and
Consultation



Sustainability Grants



Workforce
Strategies



Wildly Important Goal (WIG): Diverse and Qualified Child Care Workforce (Q20, pg. 20)

Understanding the child care workforce in Colorado.

Work with the Colorado Evaluation and Action Lab at the University of Denver

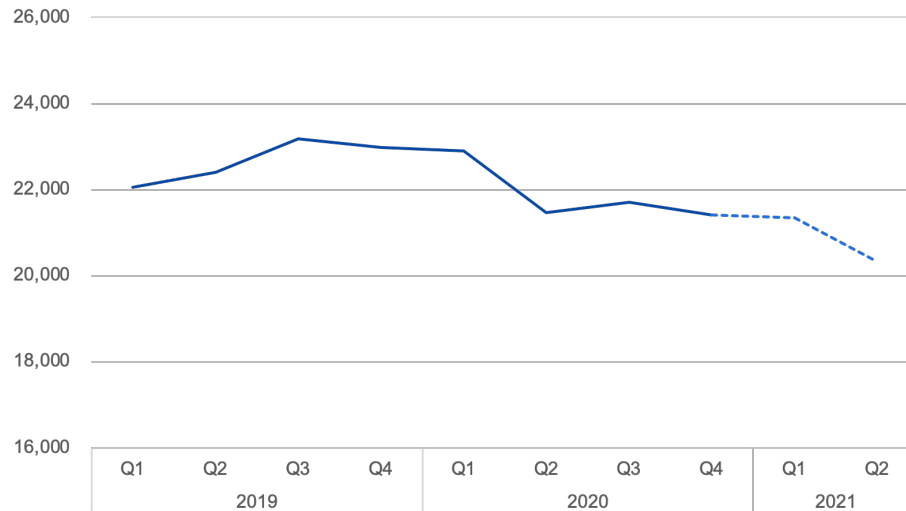
Research done in 2019 and repeated in 2021

Workforce is diverse and reflective of Colorado, except in leadership positions

Early childhood workforce must now register in the Professional Development Information System (PDIS)

Wildly Important Goal (WIG): Diverse and Qualified Child Care Workforce (Q20, pg. 20)

Active Colorado ECE Professionals



The chart shows the number of active early childhood education (ECE) professionals by quarter between 2019 and the end of 2020. The dotted line represents best estimates of recent numbers between the final quarter of 2020 and the end of the second quarter of 2021.

Wildly Important Goal (WIG): Diverse and Qualified Child Care Workforce (Q20, pg. 20)

Supporting the child care workforce in Colorado.

\$70 million investment in workforce through stimulus funds

Sustainability Grants for Workforce Retention

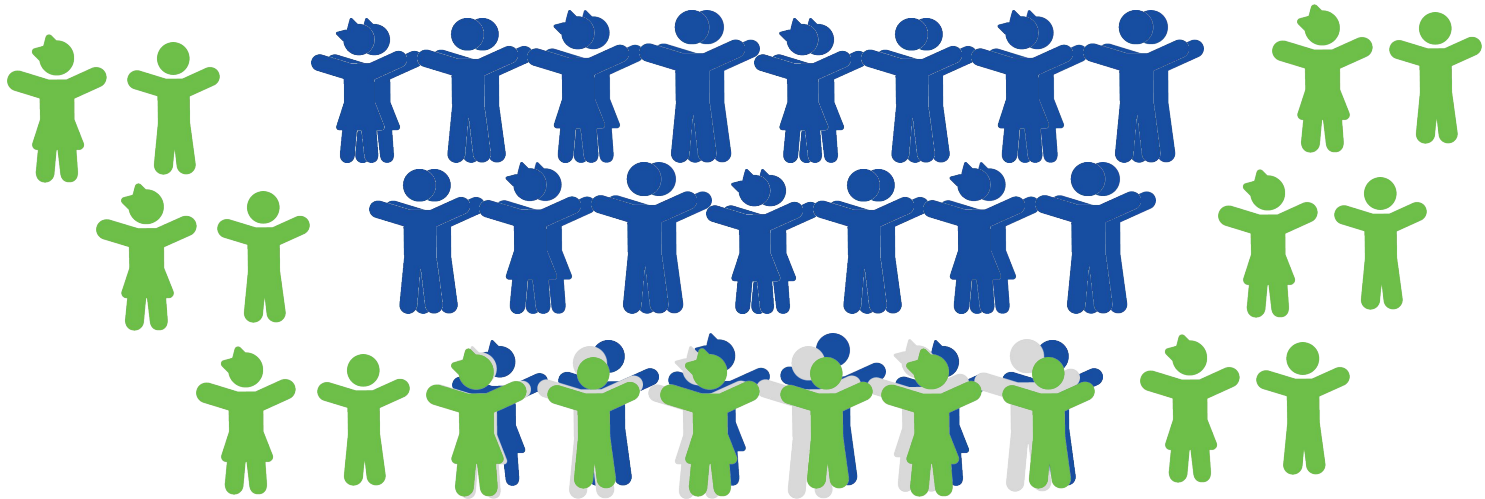
CCCAP Teacher Salary Increase

Free Online Professional Development

Partnerships with CDE, CDHE and CDLE

R-02 Early Intervention Early Start Program (Q21, pg. 23)

Early Start program overview: right services at the right time.



R-02 Early Intervention Early Start Program (Q22, pg. 24)

Early Intervention vs. Early Start.



Early Intervention Part C



Early Start



Early Start

R-02 Early Intervention Early Start Program (Q23, pg. 27)

Cost savings in the Early Start program.

Right Service

Children receive the level of service they need.



Right Time

Children receive services as early as possible.

Cost Savings

Families getting the correct amount of services upstream saves costs later on.

Prevention

Getting families services early prevents more costly intervention later on.

R-02 Early Intervention Early Start Program (Q24, pg. 28)

Pilot vs. full implementation.

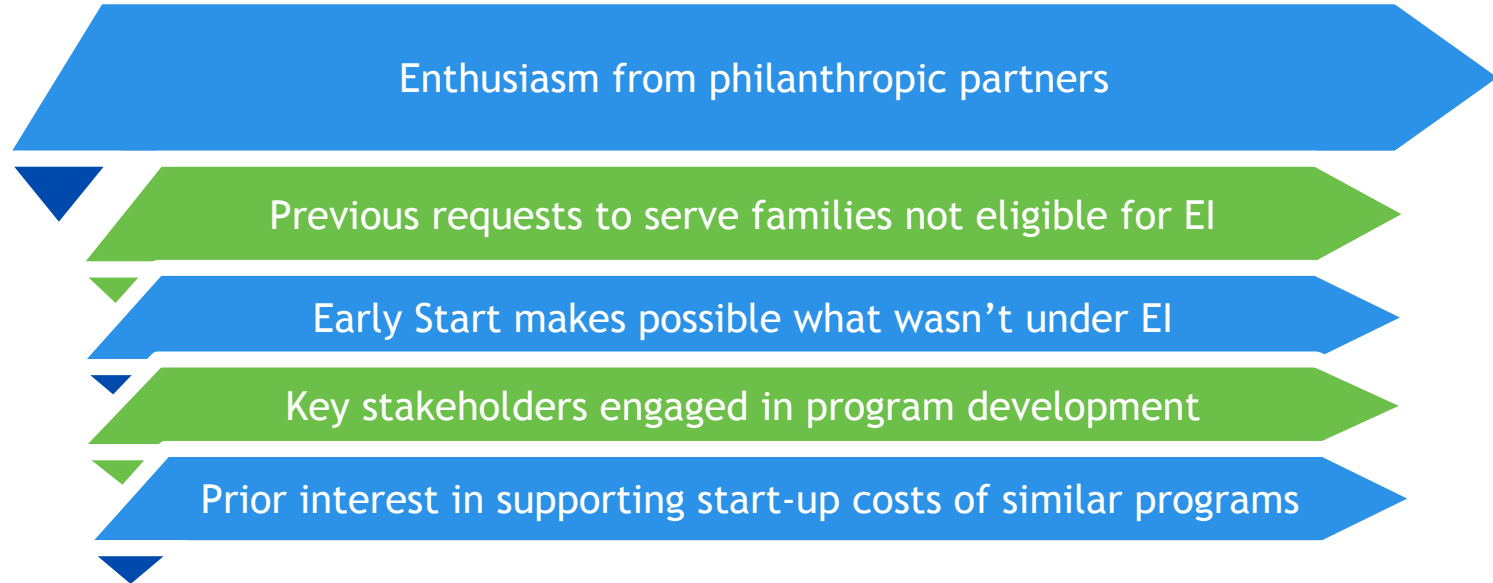
Intensive stakeholder engagement done

In a pilot, many children would go without services

Pilot possible if funding not secured

R-02 Early Intervention Early Start Program (Q25, pg. 29)

Philanthropic funding.



R-02 Early Intervention Early Start Program (Q26, pg. 29)

Federal Guidance on Group Settings.



A woman with long blonde hair is seen from the side, carrying a young child on her back. They are standing in a vast, open landscape with rolling hills and mountains in the background under a clear blue sky. The woman is wearing a patterned shirt and a backpack. The child is wearing a light-colored jacket. The overall scene is peaceful and scenic.

THANK YOU.
Questions?



COLORADO

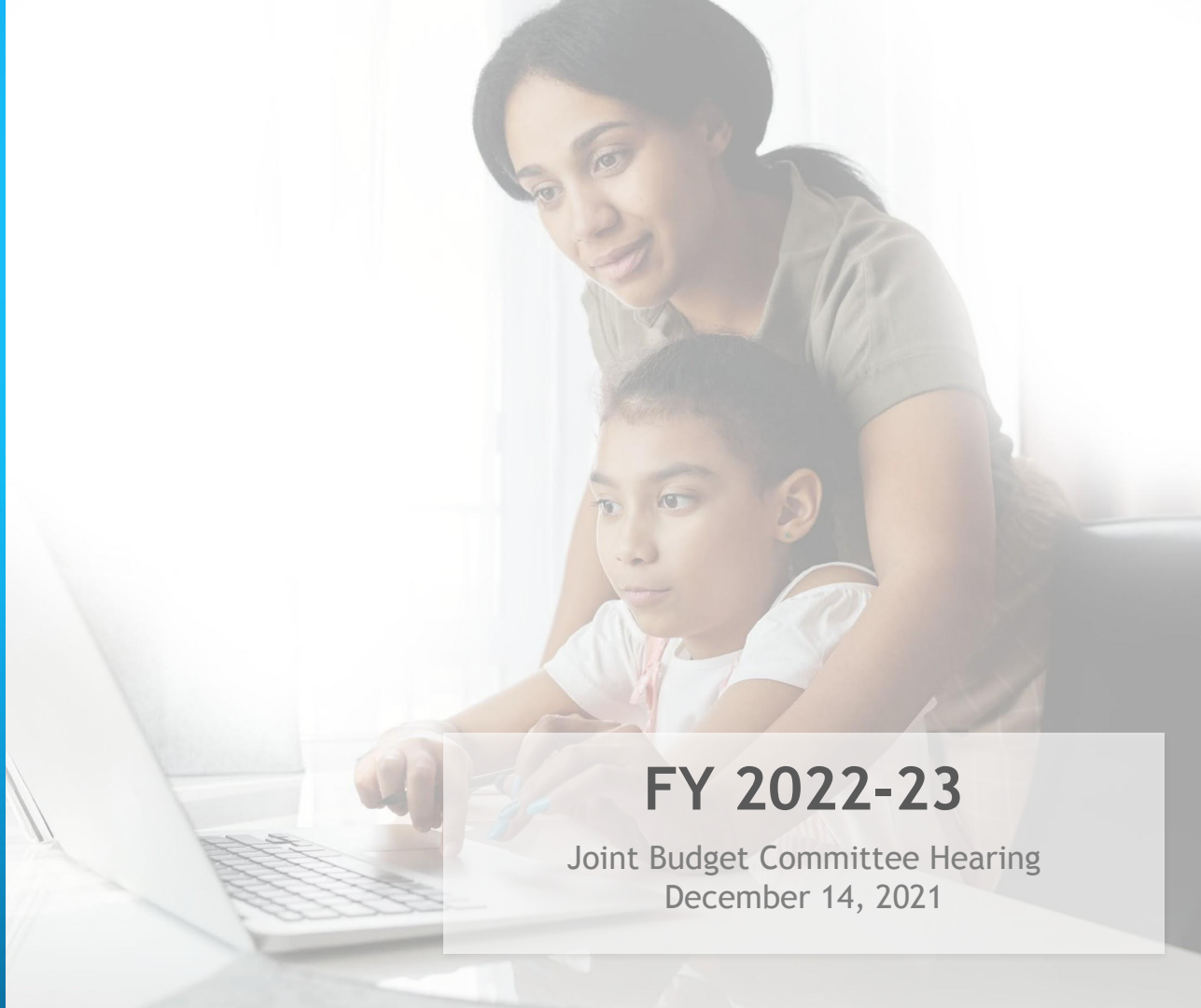
Department of Human Services

CDHS

WE ARE
THE PEOPLE
WHO HELP
PEOPLE



COLORADO
Department of Human Services



FY 2022-23

Joint Budget Committee Hearing
December 14, 2021



Michelle Barnes

Executive Director

Email: Michelle.Barnes@state.co.us

Phone: 303.866.5091

Agenda

Dec. 14, 10-noon; 1:30-4:15

- Department of Early Childhood (OSPB)
- Office of Early Childhood
- Executive Director's Office and Administrative Solutions
- Office of Economic Security
- Office of Adult, Aging and Disability Services

Dec. 17, 1:30-5:00

- Office of Behavioral Health
- Office of Children, Youth and Families



OUR MISSION

Together, we empower
Coloradans to thrive.



OUR VISION

To serve Coloradans through bold and
innovative health and human services.



OUR VALUES

A People-First Approach
Balance Creates Quality of Life
We Hold Ourselves Accountable
Transparency Matters
We are Ethical
Collaboration Helps us Rise Together





BETTER TOGETHER THE FOUR KEYS

Our Better Together Strategic Plan is the driving force to elevate the work we do as the people who help people.

01

Focus on the whole person, the whole family, and the whole community.

02

Create efficient and effective processes.

03

Leverage technology to ensure success.

04

Make CDHS a great place to work.

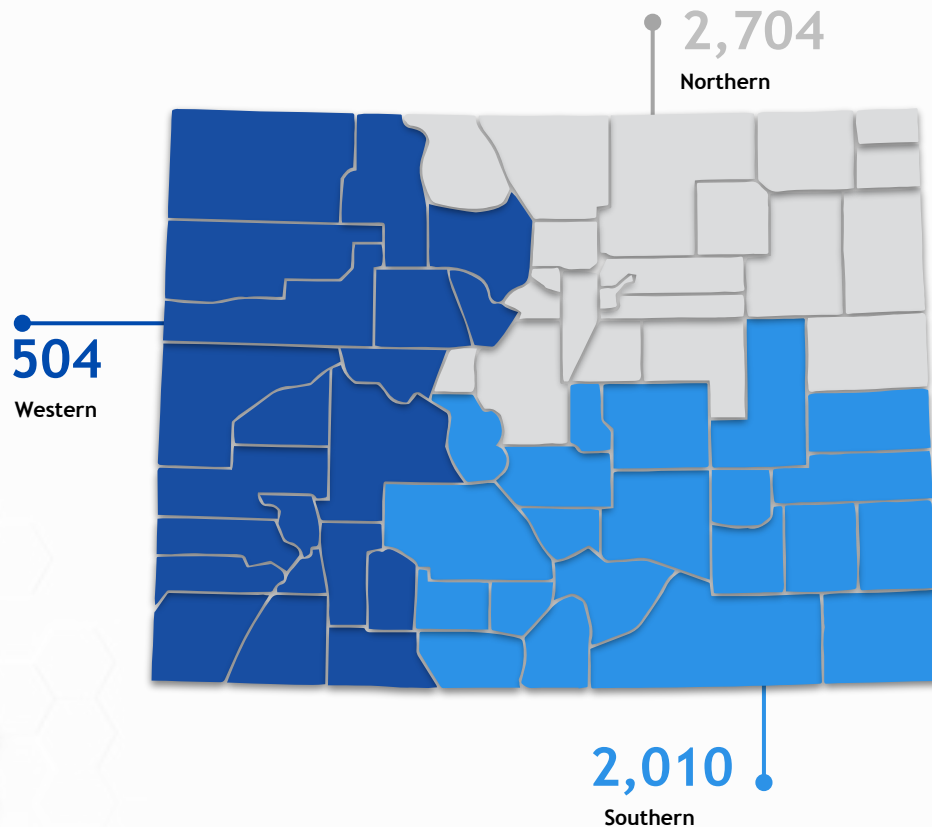
Our Team

4,997

employees across the state
over 70% work in direct care

CDHS Team Members by Region

- Northern: 2,704
- Southern: 2,010
- Western: 504

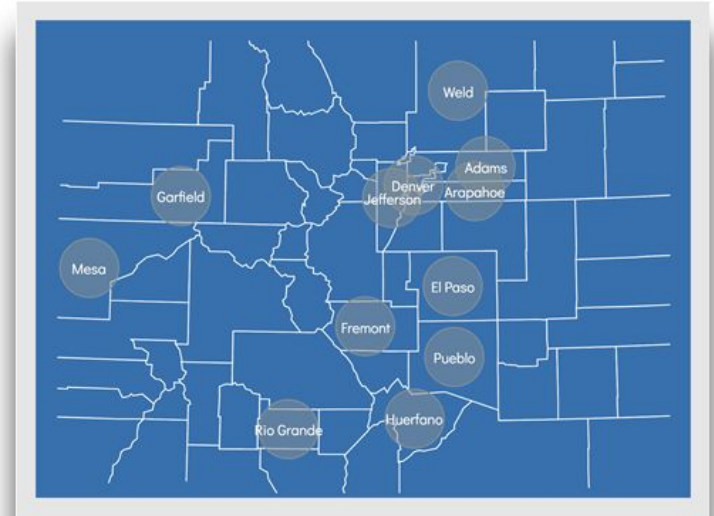


Our Care Centers

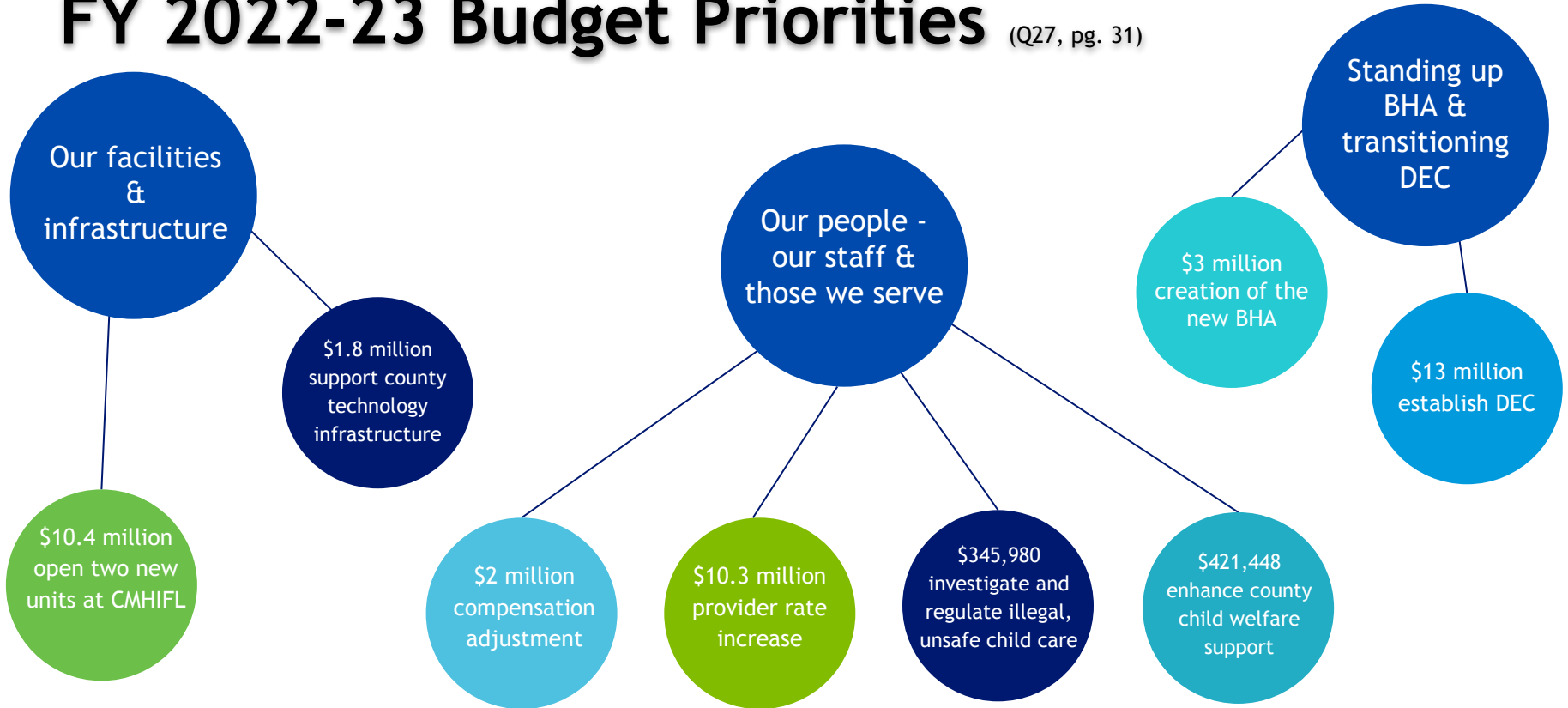
We provide almost 2,000 beds across the state to serve our clients.

339 buildings in 13 counties

- 3 Regional Centers
- 40 Group Homes
- 11 Leased Properties
- 13 Youth Service Centers
- 2 Mental Health Institutes
- 5 Veterans Community Living Centers



FY 2022-23 Budget Priorities (Q27, pg. 31)



Other Priorities

Workforce

Ongoing impacts of the pandemic

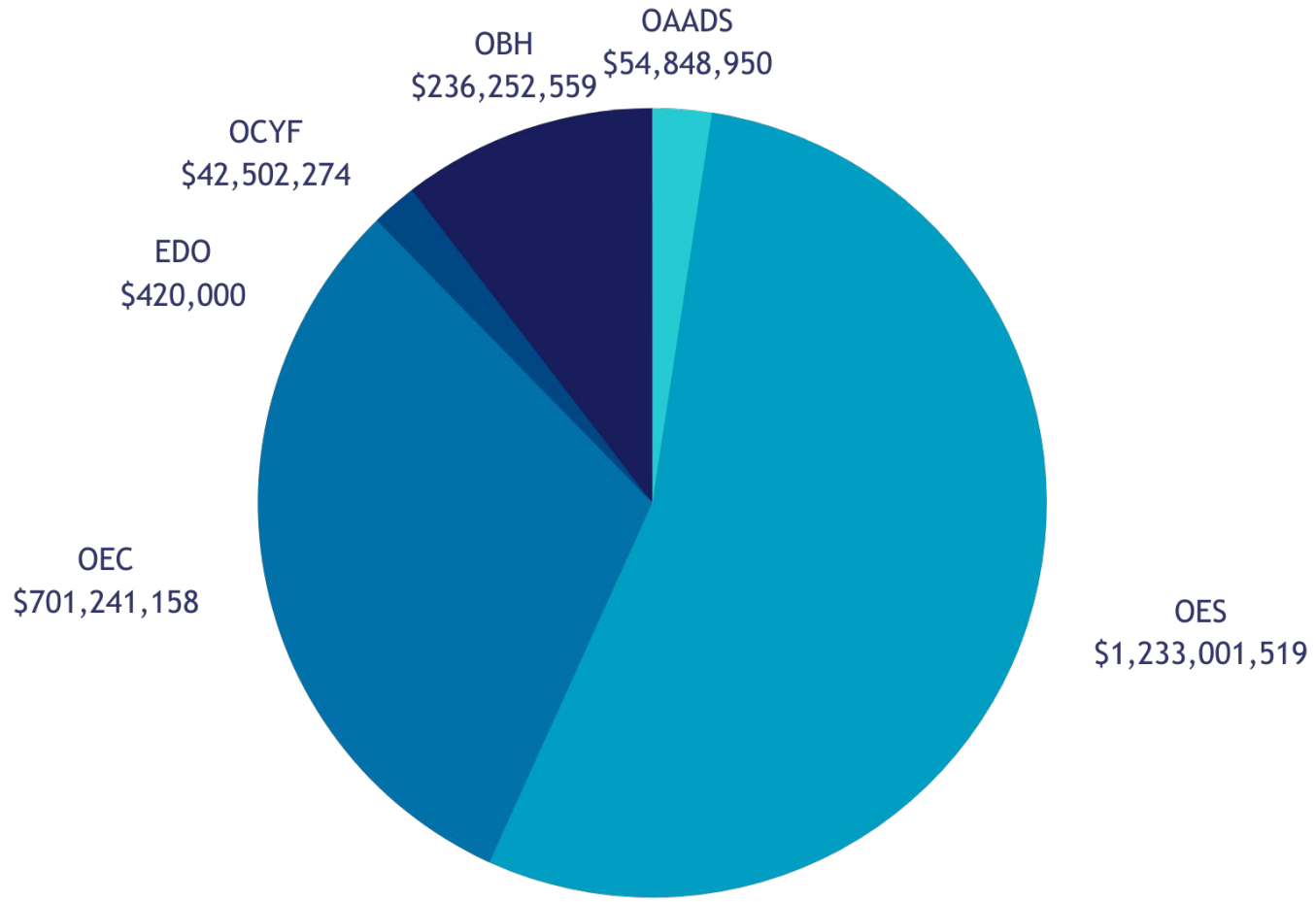
ARPA State and Local Federal Recovery
Funds

Equity, Diversity and Inclusion

CDHS Stimulus Funds

(Q28, pg. 31)

Total:
\$2,268,266,460
60+ awards





THANK YOU.
Questions?

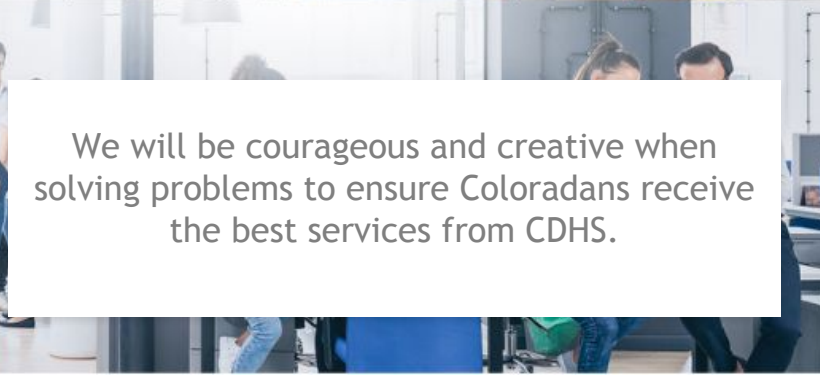


COLORADO

Department of Human Services

Administrative Solutions
(AS)

Better Together Bold Moves



We will be courageous and creative when solving problems to ensure Coloradans receive the best services from CDHS.



COLORADO
Department of Human Services



CDHS STAFFING PRIORITIES

01

Remote work

02

Recruitment and retention

03

Vacancy and turnover

04

Impacts to the programs

Remote Work (Q29, pg. 34)

How Remote Work has Impacted CDHS



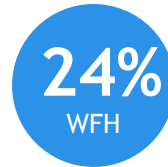
Leases of office space have been terminated and staff relocated where possible



CDHS Facility Master Plan (FMP) has suggested further reductions in space



DEC and BHA complications and Space Needs





CDHS RECRUITMENT & RETENTION

01

Department-wide YTD 1,625 Hires, 1,574 Separations

02

Streamline hiring process

03

Recruitment and retention bonuses

04

Revised flex place policy

05

Professional Development Opportunities

06

New EDI program and action plan

Vacancy and Turnover Rates (Q30, pg. 34)

Nationwide Healthcare Crisis

	Vacancy (as of 12/7/21)	Turnover FY 20-21
24/7 Facilities	784	32.73%
Non-24/7 Facilities	166	16.43%



DEPARTMENTAL STAFFING IMPACTS

01

Competency waitlist at the Mental Health Institutes (MHI)

02

Programming within facilities

03

Ability to get ARPA Stimulus funding out the door

04

COVID Fatigue and General Recruitment: Facilities Food Service & Housekeeping



R-01 Coordinated Compensation Increase (Q31-32, pg. 37)

\$2.1 Million For Food Services and Housekeeping Employees

CDHS has experienced increasing critical staffing shortages as a result of heavy workloads, the COVID-19 pandemic, unprecedented competition for quality talent, lack of ability to respond to changes in the labor market, and high turnover.

What is the problem?

(Q31-32, pg. 37)

- Dining Services experiencing 38% turnover
- CDHS is not competitive within the market (Dining Services)
 - \$13-\$20 (CDHS) vs
 - \$18-\$25 (Market)
- Recruiting struggles impact retention, creating a cyclical effect

Staff Leave CDHS for higher salaries or other positions

Struggle to recruit staff due to market



Adjustments made within operations to address short staffing

Increase workload and short staffed - more staff leave



R-06 Facilities Management Operating Increase

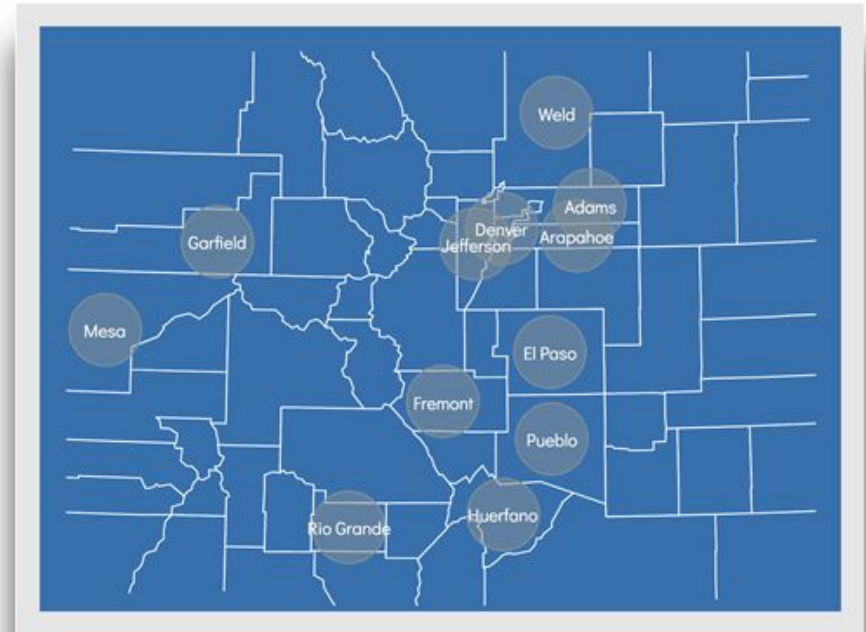
\$1,247,980 FY 2022-23 | \$1,995,960 FY 2023-24

Address increases in operating costs for facilities and CDHS operational support

- Inflationary impact on materials supplies & services needed to support facilities
- Technological tools and services needed to provide effective managerial and operational support of programmatic offices

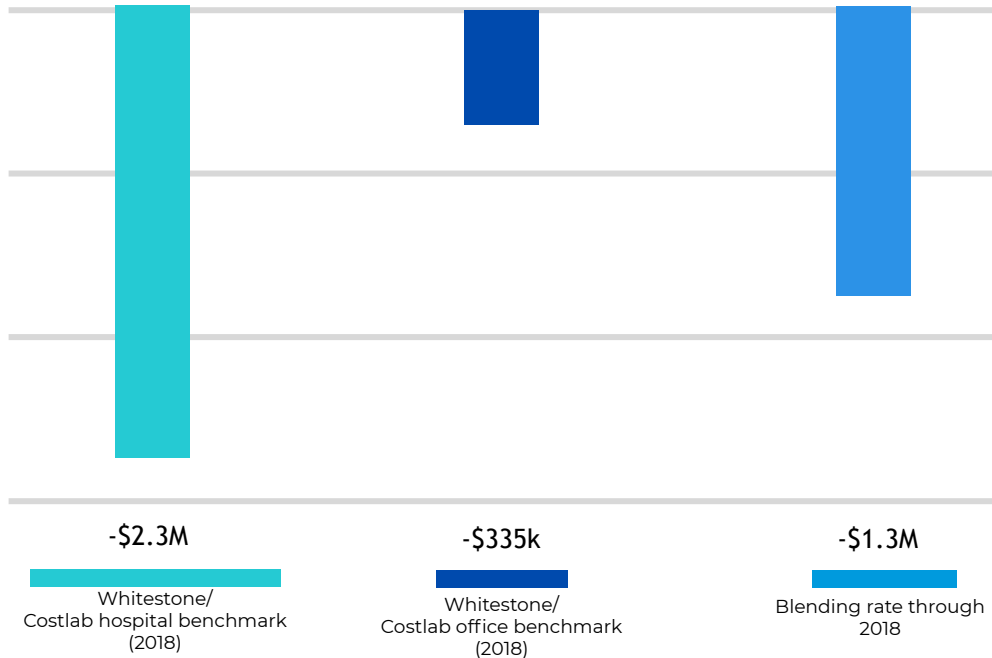
Facilities Management

- Operating dollars provide the materials, supplies and purchased services necessary to support CDHS facilities
- 339 Buildings, 1,500+ acres at multiple campuses/sites across the State
- More than \$3.5 million square feet of space, 80% at 24/7 facilities
- Total Replacement Value of \$835M
- Average age of these facilities: 65+ years
- FCI 67% (target is industry standard 85%)
- 24/7 facilities require specialized equipment and fixtures that are more expensive with fewer sourcing options and higher price volatility



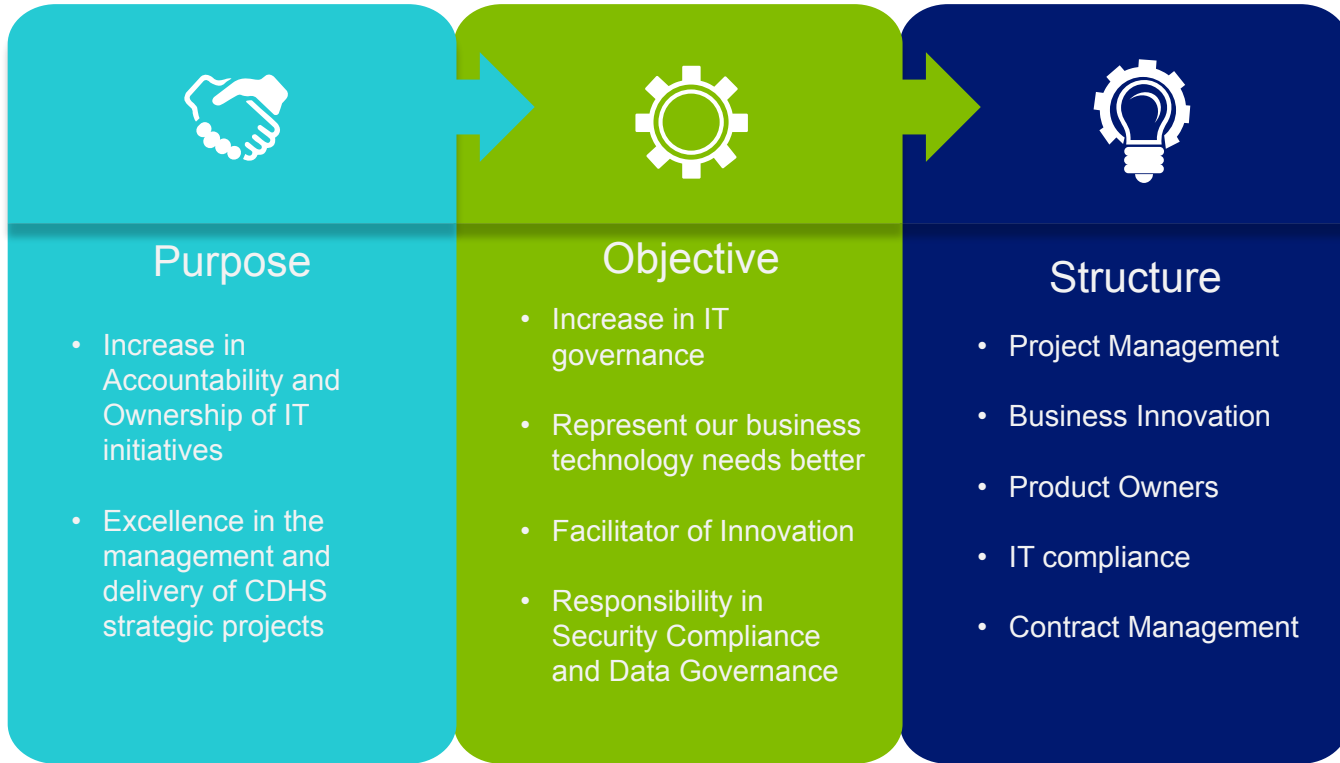
Inflationary Indices/Benchmarking

DFM Budget Shortfalls



- Additional 10% (Economic Consumer Index) for 2018-2021 totals \$1.5 M
- Department proposed two stage increase

Business Innovation, Technology & Security



Business Innovation, Technology & Security

Technology and Strategic Project Management

- Program Management
- Project Management
- Change Management
- Process Improvement

Product Ownership

- Product Owner
- Business Analysis
- Quality Assurance

Security Compliance

- Risk and Compliance
- Data Governance



Business Innovation

- Consulting
- Enterprise Solutions
- Feasibility Studies

Contract Management

- Vendor Management
- * Budget Management

Technical Administration

- Technology Upgrade
- Asset Management
- Communications

Capital Investments

Mental Health Institutes	Total cost	Why
HVAC at CMHIP	\$17,559,780	HVAC systems at four Program buildings on CMHIP campus have reached or exceeded their useful life spans.
Infrastructure - Fort Logan	\$19,114,483	The infrastructure network supporting the 231-acre Fort Logan campus is well past its life expectancy and continues to experience significant, ongoing problems.
Infrastructure - Pueblo	\$10,682,004	The viability of the CMHIP campus, which forms the arteries that provide needed services to all the programs on the campus, requires significant infrastructure upgrades.



HVAC at CMHIP

Title: HVAC REPLACEMENT IN FOUR BUILDINGS and Emergency Suicide Mitigation, CMHIP (Capital Renewal)

Phase: 2 of 3

Total: \$17,559,780

Location: Colorado Mental Health Institute at Pueblo

Why

- HVAC systems at four Program buildings on CMHIP campus have reached or exceeded their useful life spans

What We Will Do:

- Provide professional services including design for all four facilities used by Program and patients on the CMHIP campus
- The 3-phased project, if funded, will replace the HVAC systems in four vital buildings on the campus using renewable geothermal heat as the energy source



Infrastructure Upgrade - CMHIFL

Title: Campus Utility Infrastructure Upgrade, CMHIFL (Capital Renewal)

Phase: 2 of 3

Total: \$19,114,483

Location: Fort Logan Campus

Why

- The infrastructure network supporting the 231-acre Fort Logan campus is well past its life expectancy and continues to experience significant, ongoing problems

What We Will Do:

- Phase 2 will address aging campus infrastructure systems by replacing pavement, sidewalks, fire and domestic water lines, and sanitary sewers
- Phase 2 will also improve storm drainage, exterior lighting, and install below-grade conduits in concrete trenches for campus communication and security needs



Infrastructure Upgrade - CMHIP

Title: Campus Utility Infrastructure Upgrade, CMHIP (Capital Renewal)

Phase: 1 of 3

Total: \$10,682,004

Location: Colorado Mental Health Institute at Pueblo Campus

Why

- The viability of the CMHIP campus, which forms the arteries that provide needed services to all the programs on the campus, requires significant infrastructure upgrades

What We Will Do:

- Design will be completed for Phase 1 work and for the extensive Phase 1 & 2 utility upgrades and abatement within the utility tunnels and the storm sewer
- Phase 1 includes work on the south campus including initial construction of the water and sewer line replacement, as well as new roads and walkways



THANK YOU.
Questions?



COLORADO

Department of Human Services

Financial Services (FS)
**Accountable
and
Transparent
Spending**



The office's primary functions are accounting, budgets and policy, and contracts and procurement.



COLORADO
Department of Human Services

Long Bill Reorganization (Q33, pg. 40)

Current Long Bill Structure	Proposed Long Bill Structure (FY 2021-22 RFI #22)
(1) Executive Director's Office	Executive Director's Office
(2) Office of Information Technology Services (3) Office of Operations	Administration and Finance
(9) Services for People with Disabilities (10) Adult Assistance Programs	Office of Adult, Aging and Disability Services
(8) Office of Behavioral Health	Office of Behavioral Health
(5) Division of Child Welfare (11) Division of Youth Services	Office of Children, Youth and Families
(6) Office of Early Childhood	Office of Early Childhood
(4) County Administration (7) Office of Self Sufficiency (9) Services for People with Disabilities (10) Adult Assistance Programs	Office of Economic Security

R-19 Indirect Cost Adjustments

Request for \$279,076 total funds including a reduction of \$7.0 million General Fund and an increase of \$7.2 million reappropriated funds

- Indirect Cost Recovery Cash Fund has built up a significant fund balance, propose to refinance General Fund with the balance
- Rebalance the indirect recoveries to reduce General Fund needed to support the Department's central administrative costs



THANK YOU.
Questions?



COLORADO

Department of Human Services

Office of Economic
Security (OES)

Working Together To Fortify Families



COLORADO
Department of Human Services



Providing income, nutritional and support
services to those in need.

About the Office of Economic Security

Food and Energy Assistance Division	FY 2020-21	Present
Supplemental Nutrition Assistance Program	265,821 households, monthly average	Increased by 20% since Jan. 2020
The Emergency Food Assistance Program	870,224 cases of USDA Food distributed	980,984 cases of food distributed
Commodity Supplemental Food Program	14,524 monthly average older adults served	13,693 monthly average older adults served with increased home delivery
National School Lunch Program-Commodities	\$20 Million annual entitlement	Nimble meeting school needs with grab 'n go individually-wrapped items; facing extreme product shortages and price increases.
Low-Income Energy Assistance Program	77,255 households annually	20% increase in households served
Staff Development Division		
Eligibility Technician Trainings	7,427 trainings, monthly average	Shifted training venue from 100% in-person to 100% virtual

About the Office of Economic Security

Employment and Benefits Division	FY 2020-21	Present
Colorado Works - Basic Cash Assistance	13,877 cases, monthly average	11,522, monthly average (decrease of 2,355 (17%))
Adult Financial -Aid to the Needy Disabled, Home Care Allowance, and Burials	5,571 clients, monthly average	4,549, monthly average (decrease of 1,022 (18.3%))
Old Age Pension	17,748 clients, monthly average	15,695, monthly average (decrease of 2,053 (11.6%))
Employment Programs -Colorado Works Workforce Development, ReHIRE, CW STEP, Employment First	9,100 clients, monthly average	9,400 monthly average (increase of 300 (3.3%) by reinstating CW STEP and expanding EF program operators)
Refugee Services	3,018 clients, monthly average	1,000+ arrivals since August 2021
Child Support Division		
Child Support Services	136,800 families, monthly average	129,000 monthly average (decrease of 7,800 (5.7%))

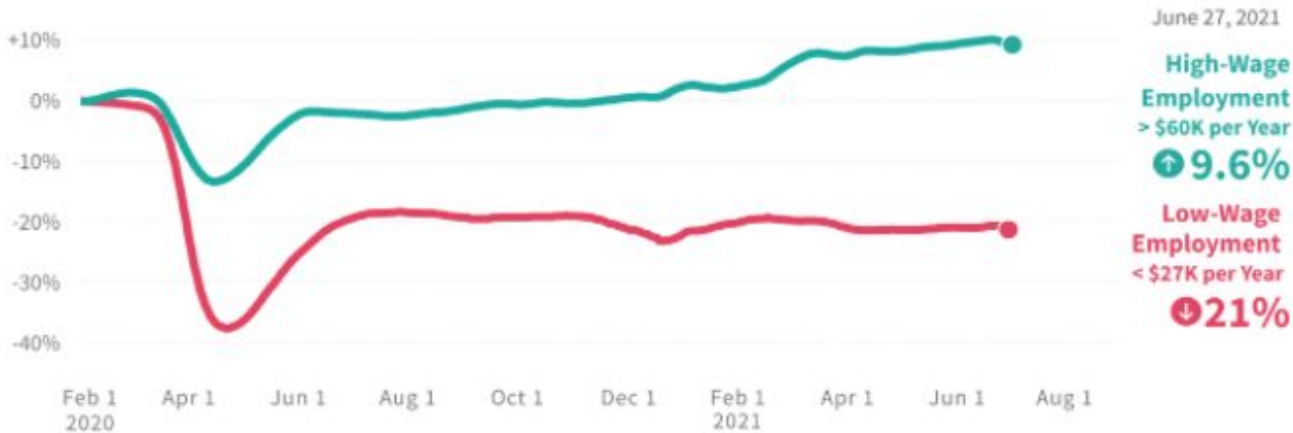
Continued Investments in Economic Security

	Food Assistance	Cash Assistance	Energy Assistance
Colorado		<ul style="list-style-type: none"> • \$2 M Diaper Distribution Program (SB 21-027) • \$3 M SNAP Employment & Training (began Oct. 2021; HB 21-1270) 	<ul style="list-style-type: none"> • Potential Heat and Eat support (HB 21-1105)
Federal/AARPA	<ul style="list-style-type: none"> • \$480 M SNAP max allotment in FFY 20-21 • \$331 M Pandemic-EBT in FFY 20-21 • \$3.1 M (FFY 20-21) + \$5.8 M (FFY 21-22) SNAP Admin • \$5 M Food Pantry grants (SB 21-027) 	<ul style="list-style-type: none"> • \$13.5 M cash assistance issued in August 2021 to basic cash assistance families 	<ul style="list-style-type: none"> • \$77 M LIHEAP • \$15 M Water Utility assistance

Low-income wage workers have lost ground

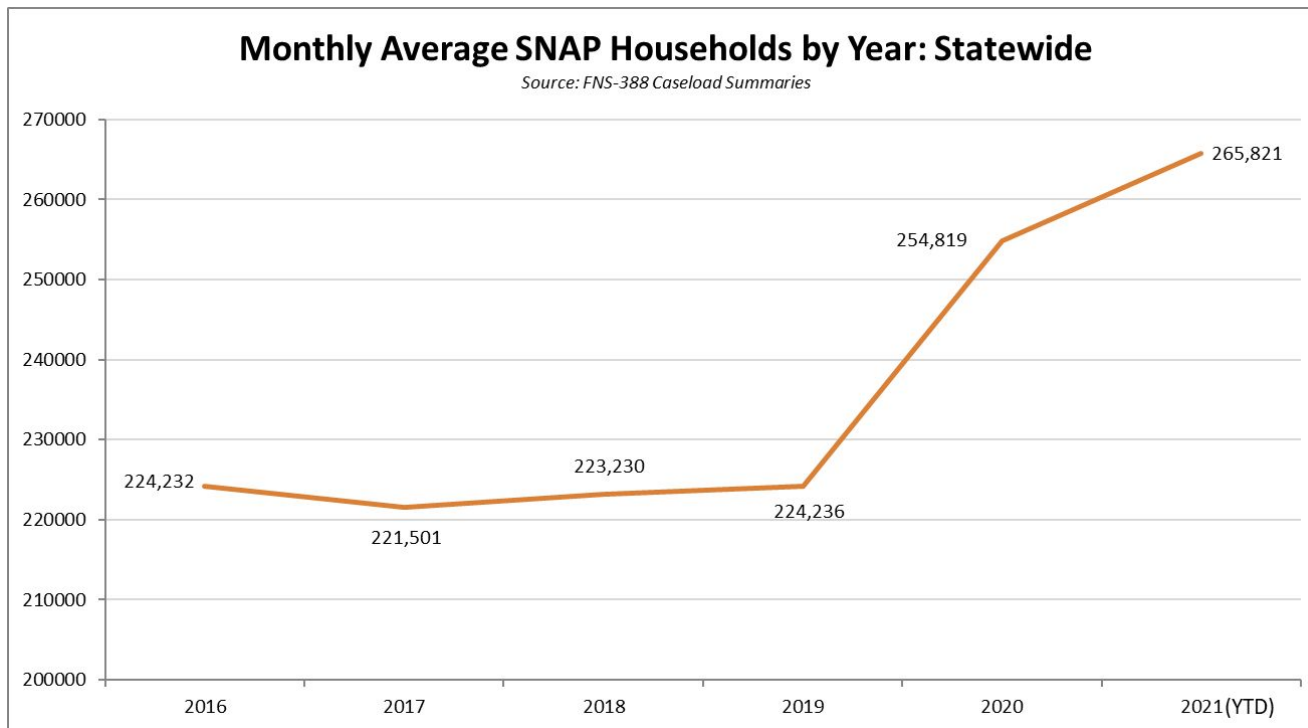
Recession has Ended for High-Wage Workers, Job Losses Persist for Low-Wage Workers

While employment rates have rebounded past pre-COVID-19 levels for high-wage workers, they remain significantly lower for low-wage workers.



National review, Opportunity Insights, Economic Tracker, 6/2021

Needs remain high



Investments averting further decline

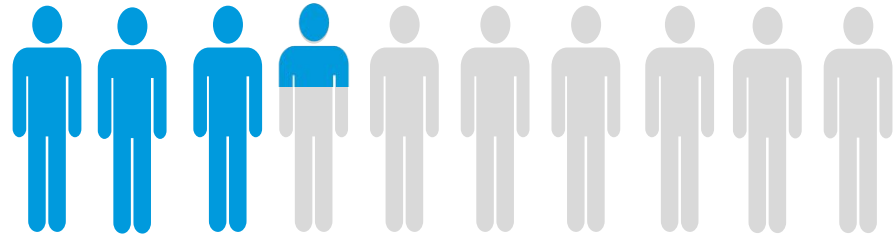
2019

1 in 10
Coloradans
experiencing hunger
(Blueprint to End Hunger, 2018)



2020 to Present

1 in 3
Coloradans
experiencing hunger
(Hunger Free Colorado, 4/2021)



OES FY 2021-22 Budget Priorities

Our funding requests are focused on complying with federal regulations alongside managing funds responsibly.

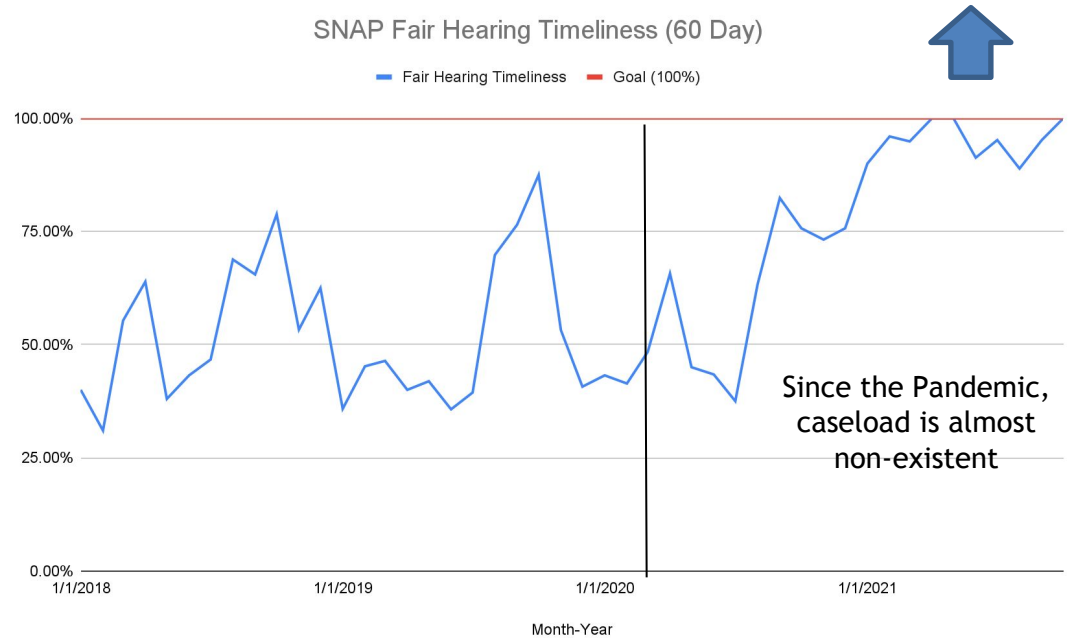
R-4: SNAP Fair Hearing Timeliness

R-16: Aid to the Needy Disabled Reduction

R-4: SNAP Fair Hearing Timeliness (Q34, pg. 41)



SNAP Fair Hearing Timeliness (60 Day)



Since the Pandemic, caseload is almost non-existent

Colorado has been under a Corrective Action Plan with Food and Nutrition Service since 2013.

R-4: SNAP Fair Hearing Timeliness (Q34, pg. 41)

A number of efforts have been implemented to reduce the time to complete a fair hearing.

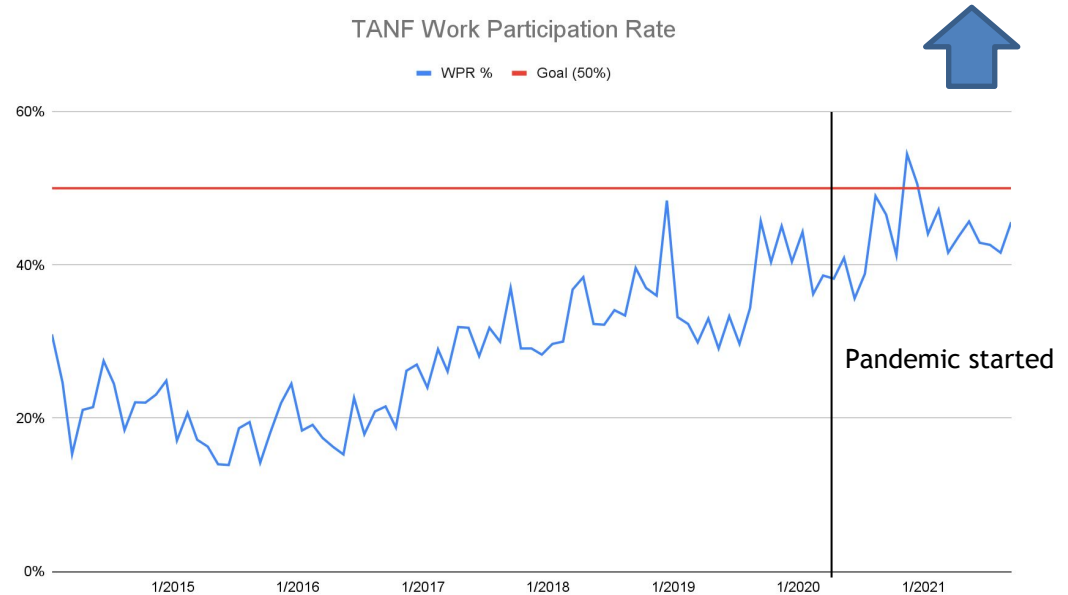
- LEAN Events
- Rule Changes
- Statute Change
- Procured a shared data system between the Office of Administrative Courts and the Office of Appeals

Colorado was recently alerted that our CAP will be escalated to the National Office, likely resulting in fines absent any no new efforts to comply.

Questions from the JBC (Q35, pg. 41)

Please describe and discuss the metrics used to evaluate the services funded with TANF dollars and how the Department measures participant success.

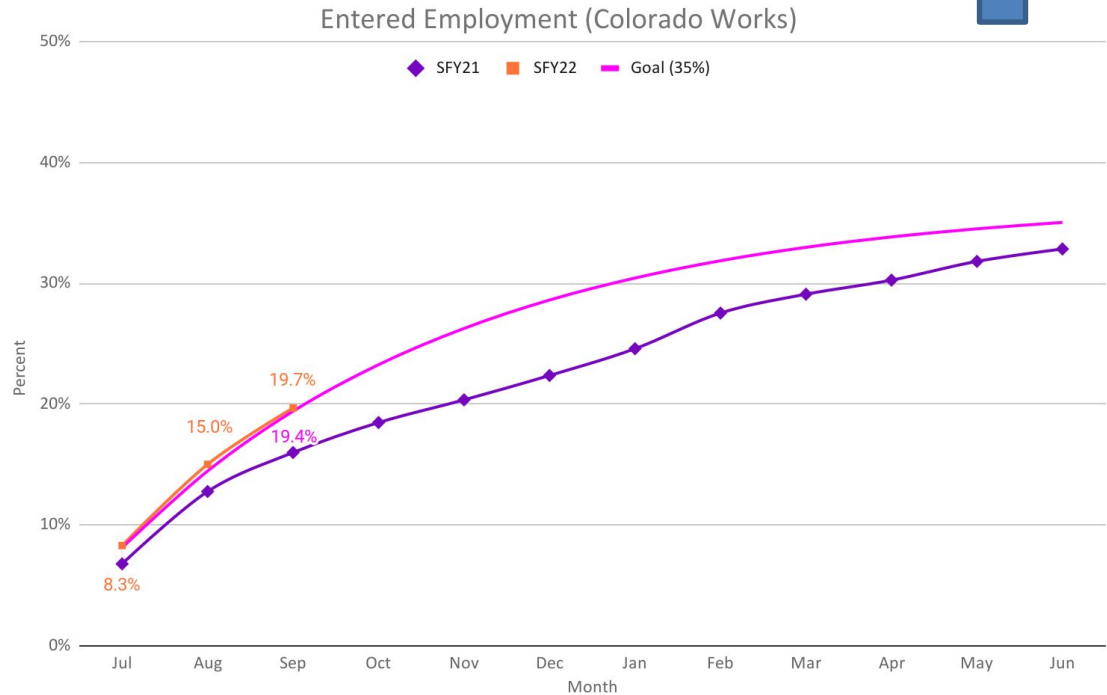
There is only one federal metric for TANF; Work Participation Rate. This has remained mostly steady throughout the pandemic.



Questions from the JBC (Q35, pg. 41)



Please describe and discuss the metrics used to evaluate the services funded with TANF dollars and how the Department measures participant success.



Questions from the JBC (Q36, pg. 42)

Please provide an update on the implementation of SB 16-190, specifically the quality improvement project funded through this bill.

Efforts conducted

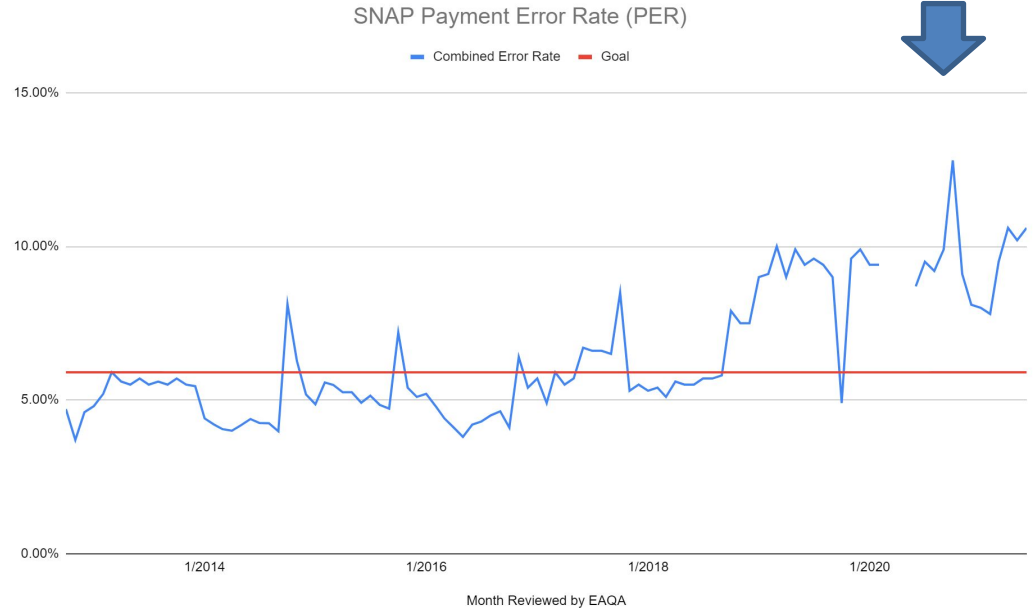
- Created county-led CQI workgroup
- Used existing C-Stat infrastructure

Efforts on hold

- Since the Pandemic there has been a strain on resources.

Future investments

- Focused incentives on performance - HCPF
- Standing up QA structure like CDHS - HCPF
- Required county training - CDHS/HCPF



Questions from JBC (Q37, pg. 43)

Please provide an update on the implementation of H.B. 19-1223 (Social Security Disability Application Assistance), which created the Disability Benefits Application Assistance Program.

a. What have been the effects of this program on the Aid to the Needy Disabled caseload?

- ❖ The Navigator program is intended to facilitate attachment to SSI. It is unlikely to affect caseload.
- ❖ 17 counties have opted into the program in FY 2021-22
- ❖ The majority of participating counties received funds in September; the remaining 3 contracts will be finalized in December

Questions from the JBC (Q38, pg. 44)

There has been a steady decline in the number of individuals receiving benefits from the Old Age Pension program. What are the reasons for the overall decline in caseload for programs serving older Coloradans?

	1937	2021
Workforce demographics	OAP thought to benefit women who lost their spouses and had little/no social security; 401k, IRAs not in existence	Women are a significant portion of the workforce; anyone with a pension or retirement likely not eligible
Eligibility Criteria	US Citizen; CO resident; at least age 60; net income	US Citizen or Qualified Non-citizen; CO resident, at least age 60; net income and resources; counting sponsor's income and resources
Benefit Amount vs. Rent Amount	\$45/month vs. \$26/month	\$832/month vs. \$1,824/month



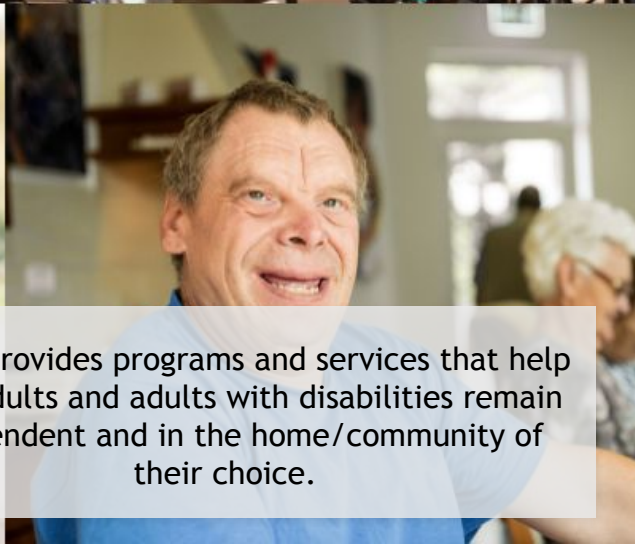
THANK YOU.
Questions?



COLORADO
Department of Human Services

Office of Adult, Aging and
Disability Services
(OAADS)

Independence Quality Service Support



OAADS provides programs and services that help older adults and adults with disabilities remain independent and in the home/community of their choice.



COLORADO
Department of Human Services

Office of Adult, Aging and Disability Services (OAADS)

Divisions:

- Aging and Adult Services
- Disability Determination Services
- Division of Regional Centers
- Veterans Community Living Centers

Programs:

- Colorado Commission for the Deaf, Hard of Hearing and Deafblind
- MINDSOURCE Brain Injury Network





FY 2022-23 Budget Requests

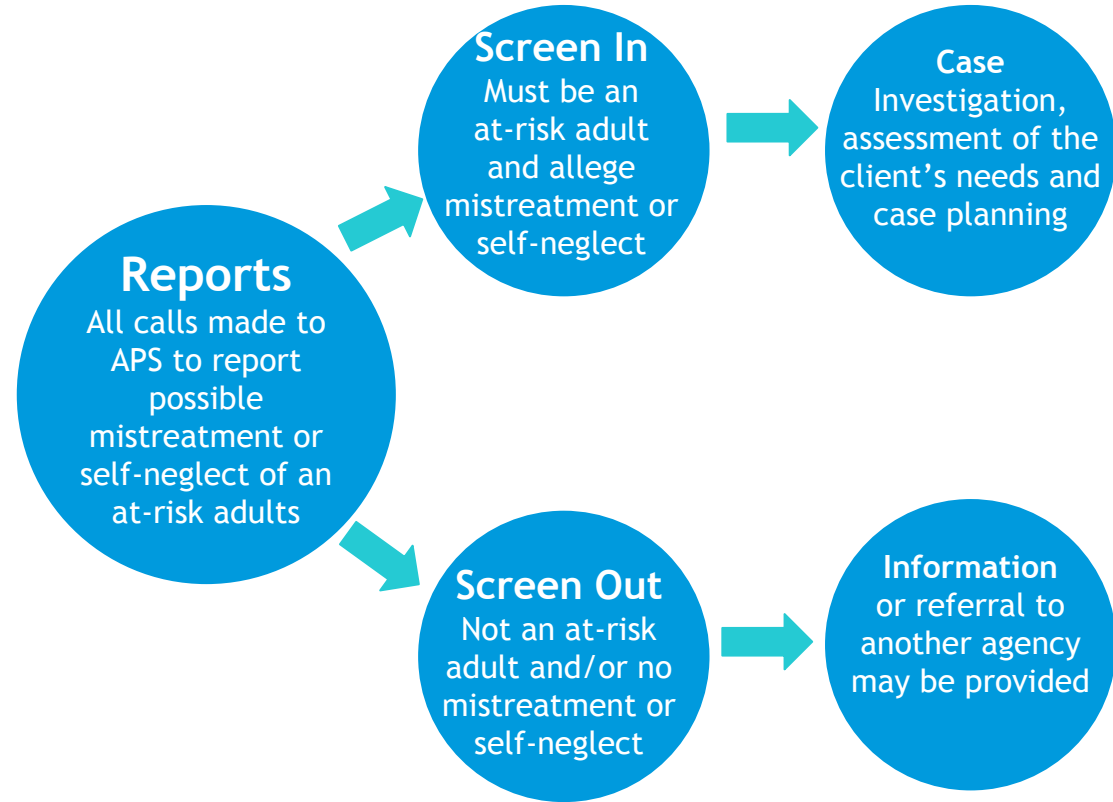
Division of Aging and Adult Services

- R-08 Older Coloradans Cash Fund Spending Authority
- R-14 Adult Protective Services Data System
- R-20 CAPS Fee Reduction



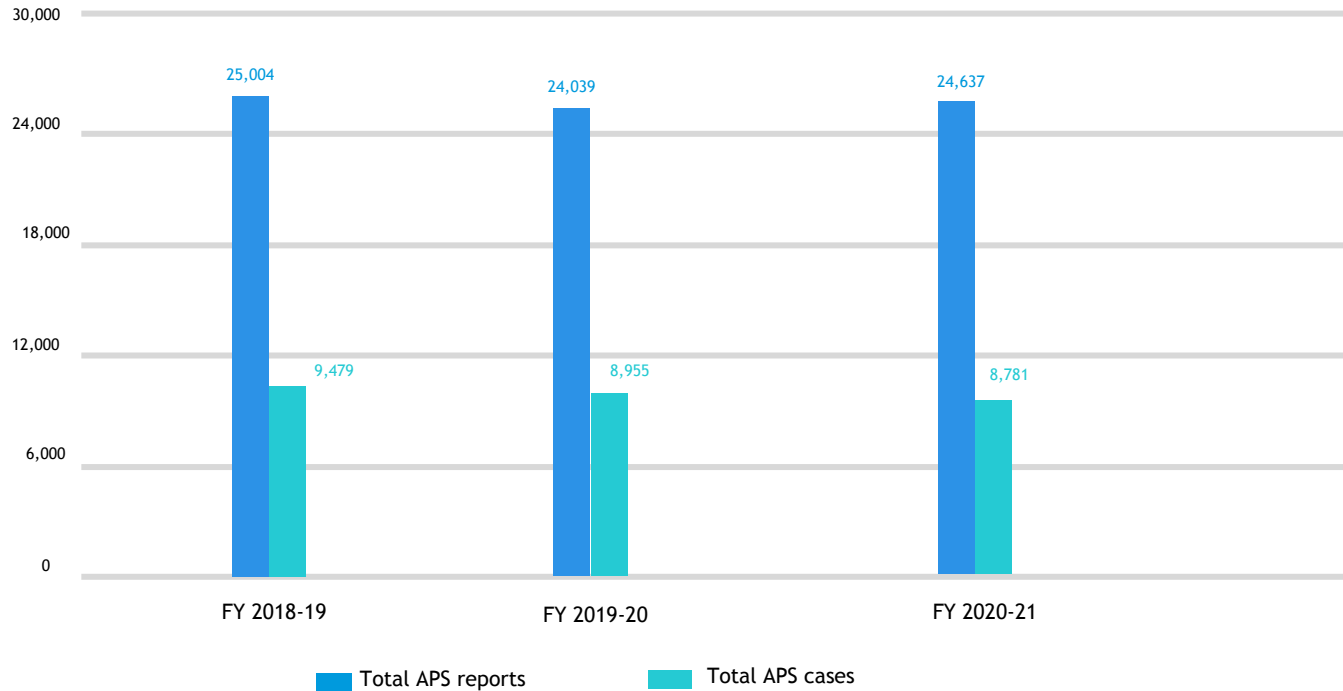
Adult Protective Services

Adult Protective Services (APS) responds to reports of self-neglect by at-risk adults and to reports of abuse, neglect, exploitation, and other harmful acts (collectively termed 'mistreatment') committed against at-risk adults.



APS Reports and Cases

FY 2018-19 through FY 2020-21



R-14 Adult Protective Services Data System (Q39, pg. 45)

Seek to transfer \$105,000 General Fund from the Adult Protective Services Data System line item to the program's administration line.

Increase 1.0 FTE to hire a data system administrator in place of contract services previously used to support the Colorado Adult Protective Services (CAPS) data system.



R-20 CAPS Fee Reduction (Q39, pg. 45)

A \$9 dollar fee is currently charged for Colorado Adult Protective Services (CAPS) background checks, which are used for individuals working with at-risk adults.

Propose a fee reduction from \$9 to \$5 in order to reduce the fund balance and align revenues and expenditures.

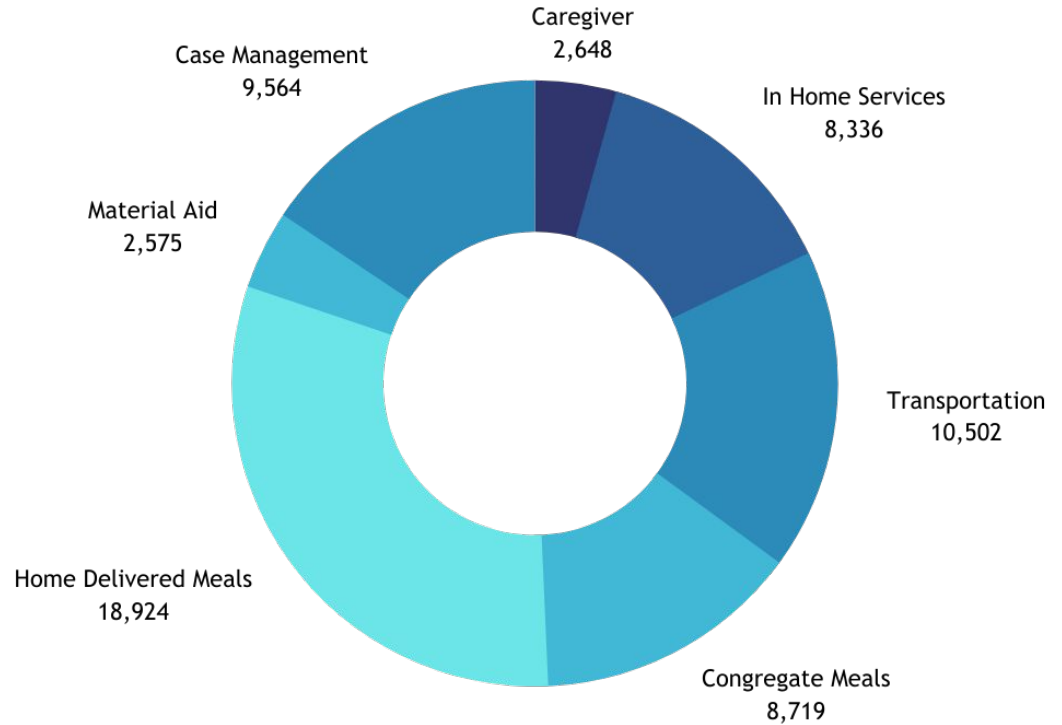


State Unit on Aging

Q38, pg. 44 and 40, pg. 45

The State Unit on Aging oversees programs funded by the federal Older Americans Act and State Funding for Senior Services.

Unduplicated Clients Served FY 2020-21





AAAs make a difference in the lives of older adults in Colorado

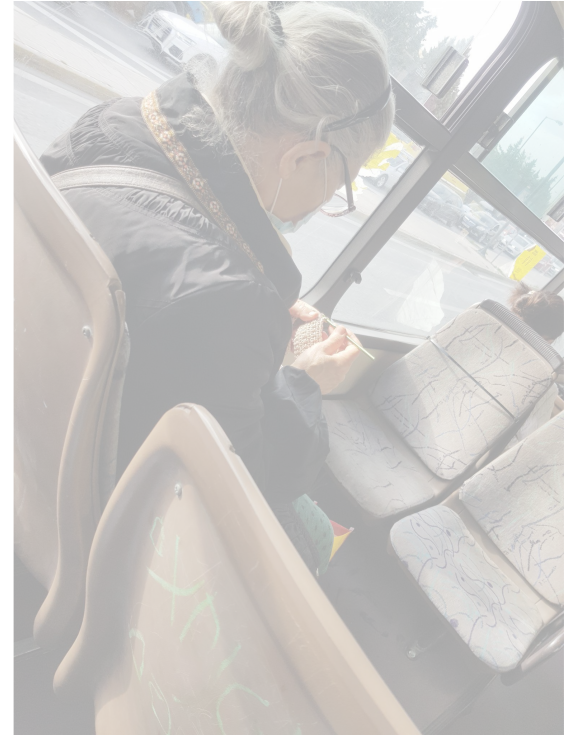
- One older adult was able to utilize Rural Alternative for Transportation (RAFT-an Area Agency on Aging partner) to go from Berthoud to Longmont to receive dialysis services three times a week. He was able to ride for free instead of \$81 per trip.
- Several AAAs coordinated with local Farmers Market programs to provide fresh fruits and vegetables to older adults in their area.

R-08 Older Coloradans Cash Fund Spending Authority

(Q41, pg. 46)

This request seeks \$1.1 million cash funds from the Older Coloradans Cash Fund in FY 2022-23 and beyond to serve as a match to draw down over \$18.0 million in federal American Recovery Plan Act (ARPA) dollars.

This funding will help Area Agencies on Aging (AAAs) to continue to provide important and necessary services to older adults, such as home delivered meals, transportation, and caregiver support as well as further build capacity for these services throughout Colorado.



Veterans Community Living Centers

A person-centered home environment for veterans, veterans spouses and Gold Star Parents where they share camaraderie with fellow veterans and are honored for their service.

The VCLCs offer both short term rehabilitation and long term care. Services offered include:

- 24 hour skilled nursing care
- Restorative nursing
- Recreational therapy
- Secured memory care neighborhoods
- Compassionate end of life care
- Domiciliary cottages located in Homelake

*Update on VCLCs Needs Assessment

Veterans Community Living Centers

OAADS operates four skilled nursing centers for honorably discharged veterans, veteran spouses and Gold Star parents, and through a public-private partnership provides oversight for a fifth center in Walsenburg.

Homelake

Est. 1891- Monte Vista

24/7 Skilled Nursing Care
Domiciliary Care

Bruce McCandless

Est. 1975-Florence

24/7 Skilled Nursing Care
Memory Care Neighborhood

Fitzsimons

Est. 2003- Aurora

24/7 Skilled Nursing Care
Memory Care Neighborhood

Rifle

Est. 1987-Rifle

27/7 Skilled Nursing Care
Memory Care Neighborhood

Spanish Peaks

Est. 1993-Walsenburg

24/7 Skilled Nursing Care
Memory Care Neighborhood



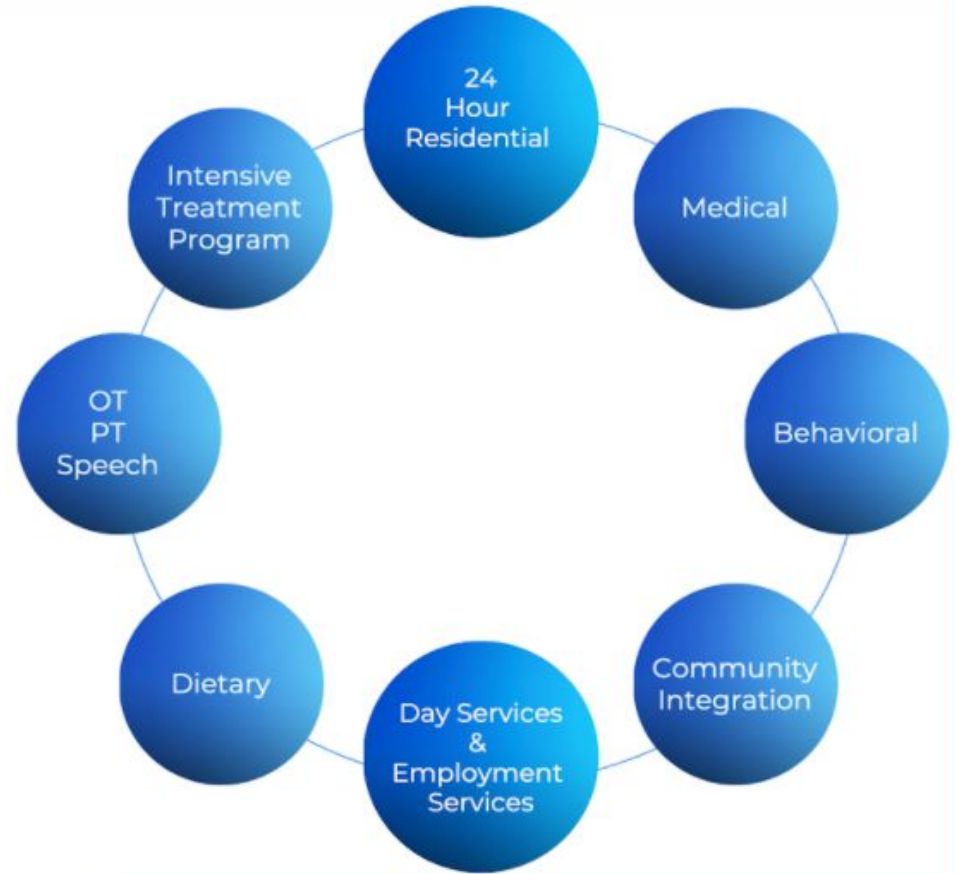
VCLC COVID-19 Infection Prevention Audit

- Colorado Office of the State Auditor completed a comprehensive audit of COVID-19 infection prevention measures taken at the Veterans Community Living Centers.
- “COVID-19 Infection Prevention at the Veterans Community Living Centers Performance Audit” was issued in October 2021.
- The report had no findings.



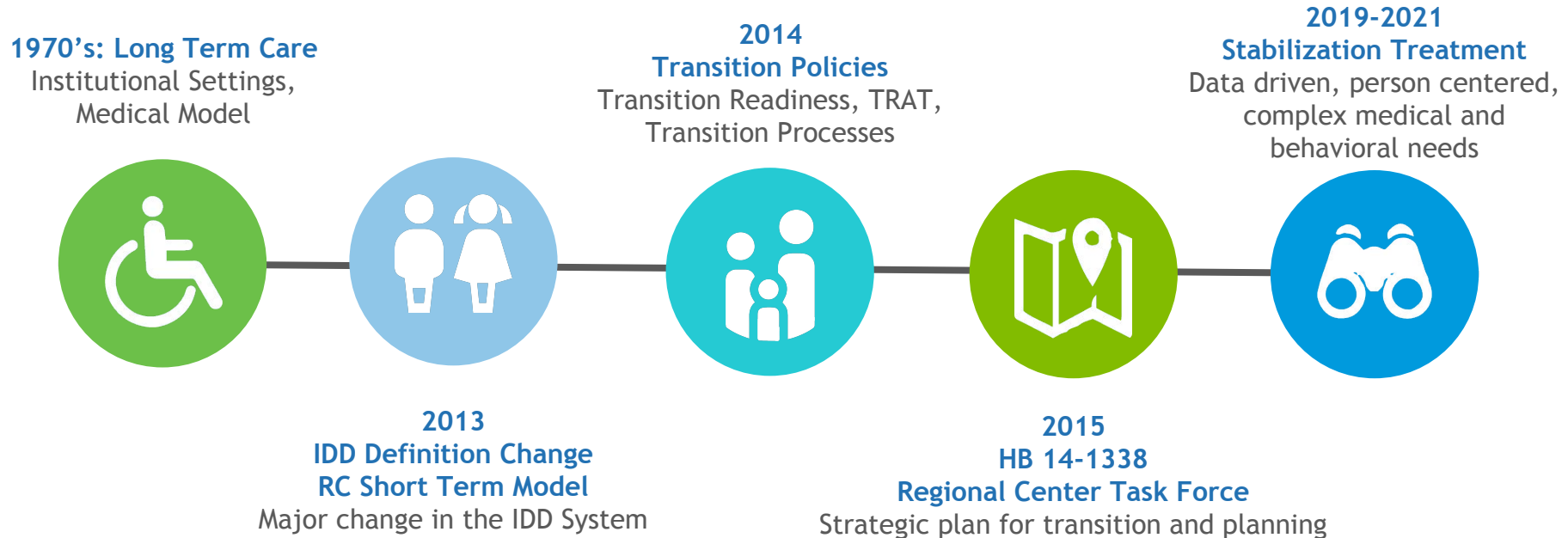
Division of Regional Centers System

The Division of Regional Centers serve as Colorado's safety net by offering treatment-focused stabilization to individuals with Intellectual and Developmental Disabilities (IDD).



Division of Regional Centers Support

The Regional Centers deliver RELEVANT and INNOVATIVE approaches that support successful outcomes for Individuals with Intellectual and Developmental Disabilities.



Grand Junctions RC Campus Move Status Update

(Q42, pg. 47)

- Land for two group homes purchased
- Architect plans approved
- Community meetings and public comment completed
- We are hoping to have groundbreaking for the new homes in 2022



Capital Request: Regional Center Depreciation

This request seeks \$1.0 million in cash funds from the Regional Center Depreciation Cash Fund, which received funding through daily reimbursement rates, to address ongoing capital improvements at the Regional Center group homes.

The request focuses on making capital improvements that will improve resident safety and quality of life in group homes built in the early 1980s.

MINDSOURCE - Brain Injury Network

MINDSOURCE strives to enhance the quality of life for everyone in Colorado living with or affected by traumatic brain injury.

There are approximately **one million Coloradans** living with a history of brain injury, half of whom are also living with a disability.

Trust Fund Statutory Purposes:

- Provide services for people with brain injuries
- Deliver educational programming about brain injuries
- Research related to the treatment of brain injuries



Colorado Commission for the Deaf, Hard of Hearing, and DeafBlind (CCDHHDB)

There are 748,636 people in Colorado who are Deaf, Hard of Hearing or Deafblind (2019 Census Data)

CCDHHDB provides the following services:

- Information, referral and consultation
- Coordinate and provide auxiliary services
- Distribute grants
- Disseminate communications resources/tools
- Environmental navigating support for deafblind individuals
- Assists state agencies and community organization in building their capacity to serve deaf, hard-of-hearing, and deafblind individuals

THANK YOU.
Questions?



COLORADO
Department of Human Services

FY22-23	FY 23-24	NEW	From DHS	From CDE	Mix of New & From DHS
Department of Early Childhood					
		Division	Subdivision	Original Source	Line Item
		(1) Executive Directors Office			
			(A) Administration		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			new FTE & portion from DHS	personal services
<input checked="" type="checkbox"/>	<input type="checkbox"/>			new FTE & portion from DHS	health, life, and dental
<input checked="" type="checkbox"/>	<input type="checkbox"/>			new FTE & portion from DHS	short-term disability
<input checked="" type="checkbox"/>	<input type="checkbox"/>			new FTE & portion from DHS	sb 04-257 amortization equalization disbursement
<input checked="" type="checkbox"/>	<input type="checkbox"/>			new FTE & portion from DHS	sb 06-235 supplemental amortization equalization disbursement
<input checked="" type="checkbox"/>	<input type="checkbox"/>			new FTE & portion from DHS	salary survey
<input checked="" type="checkbox"/>	<input type="checkbox"/>			Portion of DHS	Capitol Complex Leased Space
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	PERA direct distribution
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	shift differential
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	workers compensation
<input checked="" type="checkbox"/>	<input type="checkbox"/>			new FTE & portion from DHS	operating expenses
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	legal services
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	administrative law judge services
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	payment to risk management and property funds
			(B) Information Technology Services		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	payments to OIT
<input checked="" type="checkbox"/>	<input type="checkbox"/>			portion of DHS	core operations
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Care Automated Tracking System
<input type="checkbox"/>	<input type="checkbox"/>				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	(2) Partnerships and Collaborations			

FY22-23	FY 23-24	NEW	From DHS	From CDE	Mix of New & From DHS
Department of Early Childhood					
		Division	Subdivision	Original Source	Line Item
<input checked="" type="checkbox"/>	<input type="checkbox"/>		(A) Administration		Administration
<input checked="" type="checkbox"/>	<input type="checkbox"/>		(B) External Collaborations		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Early Childhood Leadership Council
<input type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Rules and Regulations Advisory Council
<input checked="" type="checkbox"/>	<input type="checkbox"/>		(C) Distributions to Local Partners		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Early Childhood Councils
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Care Resource & Referrals
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Family Resource Centers
<input checked="" type="checkbox"/>	<input type="checkbox"/>		(D)	NEW	Indirect Cost Assessment
		(3) Early Learning Access and Quality			
			(A) Administration		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			New plus DHS	Administration
<input type="checkbox"/>	<input checked="" type="checkbox"/>			(CDE)	Preschool Team
<input type="checkbox"/>	<input type="checkbox"/>		(B) Universal Preschool Services		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			NEW	Universal Preschool Funding [<i>combines Prop EE and CPP</i>]
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDE)	Preschool Assessment (Results Matter)
			(C) Child Care and Support Programs		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Care Assistance Program
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Intrastate Child Care Assistance Program Redistribution
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Care Assistance Program Support
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Colorado Child Care Assistance Program Rate Setting Study
<input type="checkbox"/>	<input type="checkbox"/>		(D) Early Childhood Workforce		
<input type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Workforce Recruitment & Retention Grants [<i>combines Early Care and Education Recruitment & Retention Grants and Teacher Salary Grant Program</i>]
<input type="checkbox"/>	<input type="checkbox"/>			(CDHS and CDE)	Professional Development and Training [<i>combines Colorado Shines PDIS, CDE's Workforce Team--all of this funding will be carved out of the current Child Care Grants for Quality & Availability and Continuation of Child Care Quality Initiatives lines</i>]
			(E) Quality and Access		

FY22-23	FY 23-24	NEW	From DHS	From CDE	Mix of New & From DHS
Department of Early Childhood					
		Division	Subdivision	Original Source	Line Item
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Early Childhood Quality [<i>combines School-Readiness Quality Improvement Program, Child Care Grants for Quality and Availability and Federal Targeted Fund Requirements, Continuation of Child Care Quality Initiatives</i>]
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Care Access Grants [<i>combines Sustainability Grants, CIRCLE Grants, Employer-based Child Care Facility Grants, and Emerging and Expanding Grants</i>]
<input type="checkbox"/>	<input type="checkbox"/>		(F) Indirect Cost Assessment		Indirect Cost Assessment
(4) Community and Family Support					
			(A) Administration		Administration
			(B) Family Supports		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Home Visiting [<i>combines Home Visiting for School Readiness, Nurse Home Visitor Program</i>]
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Maltreatment Prevention [<i>combines Community-Based Child Abuse Prevention Services, and Colorado Child Abuse Prevention Trust Fund</i>]
			(C) Health and Mental Health		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Early Intervention [<i>combines EI Services, EI Evaluations, and EI Start funding or recommend footnote to allow for transfer between</i>]
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Early Childhood Mental Health Services
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Incredible Years Program
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Care Services and Substance Use Disorder Treatment Pilot Program
<input checked="" type="checkbox"/>	<input type="checkbox"/>		(D)	NEW	Indirect Cost Assessment
(5) Licensing and Administration					
			(A) Administration		Administration
			(B) Child Care Licensing and Compliance		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Child Care Licensing and Administration
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Fine Assessed Against Licensees
<input type="checkbox"/>	<input type="checkbox"/>		(C) Child Care Administration		

FY22-23	FY 23-24	NEW	From DHS	From CDE	Mix of New & From DHS
Department of Early Childhood					
		Division	Subdivision	Original Source	Line Item
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Background Investigation Unit
<input checked="" type="checkbox"/>	<input type="checkbox"/>			(CDHS)	Records and Reports of Child Abuse or Neglect
<input checked="" type="checkbox"/>	<input type="checkbox"/>		(D)	NEW	<i>Indirect Cost Assessment</i>

DEPARTMENT OF HUMAN SERVICES
 FY 2022-23 JOINT BUDGET COMMITTEE HEARING
WRITTEN RESPONSES ONLY

DEPARTMENT OF EARLY CHILDHOOD

1 **[Sen. Moreno]** Please provide information on the existing early childhood fragmented systems.

a. **Data basics: How many kids by age? How many are receiving services? How good are those services? How many teachers do we have? How many child care deserts do we have? What is the quality of our families' options?**

How many kids by age? How many are receiving services? How good are those services?

The Office of Early Childhood (OEC) focuses on a whole child, whole community approach so that each individual child has the chance to thrive, and the services administered by the Office's staff are efficient and effective. OEC serves not only children, but parents and professionals as well. Overall, there are 27 programs within the Office ranging from child care licensing and quality initiatives to early childhood mental health consultation and home visiting, and much more. The programs intersect, supporting the development of families and children across Colorado in a myriad of ways. While the Office will provide as much in-depth data and detail as requested at any time, given the breadth of the question, the following information highlights the children and families served by the OEC's highest profile and highly utilized programs, including child care licensing, the Colorado Child Care Assistance Program (CCCAP), Early Intervention, and home visiting.

Child Care Licensing: The Office licenses both family child care homes (FCCHs) and non-home child care facilities, often referred to as centers. Child care licensing licenses nearly 5,000 child care providers in total in Colorado that provide less than 24-hour care, and those licensed child care providers comprise over 150,000 individual slots for children aged zero to five.

Table 1: Total Child Care Licensed Capacity in Colorado by Year for Children Aged 0 to 5	
Year*	Licensed Capacity
2021	153,421
2020	150,699
2019	151,955
2018	147,067
* Reported for June for each year for consistency.	

Table 2: Less Than 24-Hour Child Care Programs Overseen by OEC Child Care Licensing	
Licensed as of June 30th FY	Numbers of Licensed Programs
2020-21	4,657
2019-20	4,782
2018-19	4,870

Colorado Child Care Assistance Program: The Colorado Child Care Assistance Program (CCCAP) is the State’s program to aid lower-income families and children access safe, affordable care options for children aged birth to 13. It effectively provides families with affordable access to quality child care.

Table 3: Number of Families and Children Receiving Child Care Services in Colorado by Federal Fiscal Year (FFY)		
FFY	Number of Families Receiving Child Care Services	Number of Children Receiving Child Care Services
20	16,196	26,086
19	17,579	28,412
18	18,366	30,038
17	19,546	31,858
16	20,070	32,865

Early Intervention: Early Intervention (EI) Part C provides services for children from birth through two years of age (ending on the third birthday) who have developmental delays or disabilities and their families under the federal Individuals with Disabilities Education Act (IDEA), Part C. EI Part C prepares children to be successful in their current learning environment before transitioning successfully to Part B preschool special education, community preschool, or other supports. These learning environments include any place infants and toddlers spend their day, including at home, at child care, or with extended family. On average, approximately 9,500 infants and toddlers are served each month with a total served each year of over 15,000 children and families.

The EI Part C program effectively identifies developmental delays in infants and toddlers to proactively address these delays and mitigate the impact they have on a child’s growth so that the child will have as many skills as possible when they enter preschool. The five developmental areas, also known as domains, that EI services assess and target are adaptive skills, cognitive skills, communication skills, motor skills, and social and emotional skills. Data collected for Colorado’s EI Part C program have demonstrated positive outcomes for children served through the program:

- 49 percent of children enrolled in EI Part C do not go on to need Part B Preschool Special Education services.
- 99 percent of children show at least some progress in development.
- 60 percent of children show significant progress toward reaching development closer to their same-age peers.

EI Part C is a preventive, cost-saving program that contributes to young children’s school readiness and reduces the need for additional costs incurred when a child is found eligible for preschool special education services.

Fiscal Year	Average Monthly Enrolled
2016-17	8,236
2017-18	8,542
2018-19	9,300
2019-20	9,225
2020-21	7,782

Home Visiting Programming: The OEC oversees four home visiting programs directly, but the OEC has been providing resources to support eight evidence-based home visiting models. In total, at least 12,000 children annually receive home visiting services funded through the Office. Parents of children, however, are also served directly by home visiting programs and benefit from them. Collectively, these programs are highly effective at improving child health, school readiness, responsive parenting, and child abuse prevention outcomes.

How many teachers do we have?

There are currently 20,325 teachers, family child care educators, and directors in the workforce that work at licensed child care centers and family child care homes.

How many child care deserts do we have?

As an overview, there are 59 counties (95%) that are lacking sufficient licensed capacity for infants, 41 counties (64%) that are lacking sufficient capacity for toddlers, one county (1.6%) that is lacking sufficient capacity for preschoolers, and twenty counties (31.3%) that are lacking sufficient capacity for all ages of children between zero and 60 months-old. For a more detailed examination of Colorado’s child care deserts by county, [see this report](#).¹

Measuring deserts is exceedingly difficult. Given both the changing landscape of early childhood care in the broader economy and that precise demand among families for specific types of care is not known, measures and metrics vary. To place the above analysis into a broader perspective, it can be useful to compare it to other analyses. The United States Treasury, [in a recent report](#)² identifies deserts as having only one licensed child care opening or slot per every three children. The Center for American Progress

¹ https://drive.google.com/file/d/1akl9H6e90hVx_rpfAc8w2AWhAahcwkY1/view

² <https://home.treasury.gov/system/files/136/The-Economics-of-Childcare-Supply-09-14-final.pdf>

(CAP) has also analyzed and identified Colorado's [child care deserts on its resource webpage](#)³, concluding that 51 percent of the State's population lives in a child care desert.

What is the quality of our families' options?

Fifty-five of Colorado's 64 counties have at least one high-quality option for families. A high-quality option is defined as a child care provider that has achieved a level 3, 4, or 5 (the highest level) on the State's quality rating system, known as Colorado Shines or the Quality Rating and Improvement System (QRIS). Statewide there are 1,084 child care providers (949 Centers, 136 Homes) that have achieved a level 3 or higher. There are 3,589 eligible child care programs across the State (2,514 Centers, 1,075 Homes). Eligible providers are licensed providers that are serving children age 0 to 5 years. Upon getting licensed, providers earn a Level 1 within the Colorado Shines rating system. From there, providers opt into higher levels of quality, first earning a Level 2, which consists of staff completing training, creation of a quality improvement plan, and registering in the Professional Development Information System (PDIS). Once a program earns a Level 2, they can apply for a Colorado Shines rating to earn a high quality designation of Levels 3 through 5. All levels are licensed and are child care environments that have been evaluated by the State to offer safe, stable, and caring learning environments for children.

The State continues to work through Early Childhood Councils (ECCs) to support child care providers to engage in quality improvement activities as well as participate in a Colorado Shines rating. Stimulus funds will be made available effective January 2022 to encourage programs to increase their rating level to high quality levels. The State anticipates seeing the number of high-quality programs increase over the next two years.

b. CCCAP: What is our utilization or underutilization on CCCAP slots overall? By age? By region? How has that changed over time? In other words, who doesn't use the payment once they get it, and do we know why?

There is not a set number of slots for CCCAP, so there is no utilization or underutilization equivalent. When a child is determined eligible for the program, the family is able to choose a CCCAP-eligible provider accepting CCCAP children. An authorization for each child is then set up at that provider based on the family's need for child care. The provider is then reimbursed for child care provided that it is properly authorized and attended by the child. In addition to being reimbursed for child care that is authorized and attended, CCCAP providers also can receive a certain number of monthly absence payments for days in which a child was authorized to be in care but did not attend, just as is seen and done in normal private-pay child care. The Department has not historically analyzed data around families who don't use their CCCAP benefit, and is working to collect and analyze data to understand the number of families approved for CCCAP who do not use their benefit and why. There are two different scenarios that have been identified. The first scenario is when a family is determined eligible for CCCAP but never has a child care authorization created at a provider. The second scenario is a family that is determined eligible, has a child care authorization created at a provider but does not use care.

³ <https://childcaredeserts.org/2018/index.html?state=CO&split=true>

- c. **CPP: How many children do we serve in CPP? How many children are eligible but unserved, and why? To what extent does CPP support a mixed delivery system that is inclusive of the array of ECE settings parents choose for the education of their young children (i.e., licensed family child care homes, licensed centers, school district preschool)?**

The following response was provided by the Colorado Department of Education (CDE), which houses the CPP program.

Each year, CPP is statutorily authorized to provide funding for **29,360 preschool positions, which provide half-day programming for children.** Districts may use up to 5% of CPP positions and an unlimited number of Early Childhood At-Risk Enhancement (ECARE) positions to provide full-day preschool programming. Each year, the number of half-day positions combined to make full-day positions fluctuates with a growing trend to maximize ECARE positions for this purpose. Combining positions in this manner reduces the total number of positions. The table below illustrates the position availability and usage since the 2016-17 school year. It is important to note that the decline in enrollment between the 2019-20 and the 2020-21 school year is a result of the COVID-19 pandemic.

Table 5: Colorado Preschool Program Positions 2016 - 2021				
School Year	Authorized CPP Positions from the Legislature	Number of Funded Positions Utilized for Preschool	Children served with Half-Day Preschool Positions	Children Served for Full-Day Preschool (with two Half-Day Positions)
2016-17	28,360	23,257*	19,987	3,270 positions (1,635 children)
2017-18	29,360	23,157*	19,735	3,422 positions (1,711 children)
2018-19	29,360	23,744*	20,116	3,658 positions (1,829 children)
2019-20	29,360	29,360	17,588	11,772 positions (5,886 children)
2020-21	29,360	24,411	12,863	11,548 positions (5,774 children)

*Prior to the 2019-20 school year, ECARE positions could also be used to fund full-day kindergarten positions. These values exclude the positions used to fund full-day kindergarten positions under ECARE.

In its 2020 legislative report, CDE estimated there were **65,933 3- and 4-year-olds eligible for CPP in Colorado. Currently, there are 29,360 CPP half-day positions available for 3- and 4-year-olds.** Using population estimates from school district enrollment counts and eligibility data from CPP district annual reports, **CDE estimates that 36,573 of 3- and 4-year-olds potentially eligible for CPP were not enrolled in the program (55.5 percent of the total estimated eligible 3- and 4-year-olds).**

Head Start is another major source of preschool funding for many Colorado children. In 2018-19, **Head Start served 8,516 3- and 4-year-olds in Colorado.** Subtracting this figure from 36,573—the overall estimate of unmet need—leaves **28,057 potentially eligible children not served by CPP or Head Start.**

CPP was statutorily created through the school finance formula for school districts to administer preschool educational services to students at risk for learning challenges. CPP statute authorizes school districts to determine whether to contract out all, or a portion of, their allocated preschool positions to community-based child care providers serving their geographic region.

As outlined in the CPP Act, the district's decision to contract out positions must be based on the ability of such programs to meet the requirements for offering a quality program. School districts must, at least once every two years, assess whether alternative community providers are available and issue a request for proposal to identify those that may wish to participate who meet the program requirements. The CPP Act directs school districts to identify and submit a request for proposals from “publicly funded early childhood education agencies or privately funded child care centers”. As currently written, only entities defined as child care centers, pursuant to Colorado’s Child Care Licensing Act, are eligible for participation.

Over ninety districts have established some mixed delivery within the current community capacity and program structures, which includes districts that deliver all programming through one or more contracts to community providers. Eighty districts do not have an option to partner with a community provider due to circumstances including the availability of eligible community partners. Information on previous school years can be found in the annual CPP legislative reports⁴.

- 2 ***[Sen. Moreno]* How will the new Department of Early Childhood align with existing efforts and programs?**
 - a. **How will we make sure that child abuse prevention services and child welfare stay connected? What is the plan to ensure the DEC doesn’t hurt child welfare-involved families?**

⁴ <http://www.cde.state.co.us/cpp/legreports>

The separation of home visiting and certain family support programs from the child welfare system at CDHS will help further reduce the stigma associated with the uptake of these services, increase program engagement by families before or after involvement with child welfare services, and strengthen protective factors in the whole child, whole family approach of the new Department. Housing these programs with the new Department allows more families to become aware of these voluntary supportive services right from the start as they become parents.

Child abuse prevention services and child welfare will stay connected, collaborating and maintaining established alignments. DEC will operate under MOUs with CDHS, and other state agencies, that ensure continued seamless services for children of all ages and emphasize the utilization of interoperable referral pathways. Over the course of the next several months, we will develop the details of the systems and the MOUs as we build out the transition. In addition, the Transition Report stipulates that DEC be guided by existing advisory structures that currently advise OEC and CDE, such as the Early Childhood Leadership Commission and the Colorado Child Abuse Prevention Trust Fund Board, the membership of which has county and state child welfare representation. The continued alignment by these groups will further ensure continuity of expertise in the protection of children. In addition the MOU will include specific responsibilities for DEC staff including:

- Continuing to serve on existing CDHS advisory groups such as the Delivery of Child Welfare Services Task Force and the Prevention Task Force Group from the Child Welfare Subcommittee of the Policy Advisory Committee.
- Working with state child welfare staff on completing the annual progress report (APSR) and the annual report for the Community-Based Child Abuse Prevention (CBCAP) funds to reflect the impact of the entire continuum of child abuse prevention strategies in Colorado.
- Working with CDHS staff on claiming for Title IV-E reimbursement for DEC state investment in eligible programs on the Family First Prevention Services Clearinghouse.

b. What about programs and successes at CDE, especially with P-3? Does the transition plan address how this new agency will continue those advancements and not bring us backwards?

The following response was provided by the Colorado Department of Education.

CDE has successfully managed the Colorado Preschool Program(CPP) for over 30 years. Longitudinal data for students who participated in CPP show positive long-term outcomes related to grade retention, Colorado Measures of Academic Success (CMAS) assessment, and on-time graduation. Key outcomes for CPP include the following:

- (1) Students who participated in CPP are retained at a lower rate in grades K-3 than children who did not participate in CPP. Compared to at-risk peers who did not attend state-funded preschool, CPP graduates are less likely to be retained (i.e., held back in a grade) by about half in K-3 overall and as low as

two-thirds the rate in first grade. This translates to lower costs for children repeating a grade.

- (2) The percentage of CPP graduates who meet or exceed CMAS expectations is higher compared to at-risk peers in most subject areas. These trends are seen as far out as 11th grade in the case of science.
- (3) Students who participated in CPP are more likely to graduate on time than children who did not participate in CPP. The odds of graduating on time with a high school diploma (within four years of entering ninth grade) were 12 percent higher for children who participated in CPP in the 2004-05 school year, even when controlling for key demographic variables.

With the launch of universal preschool, there is an opportunity to build on the success of CPP to extend the opportunity to achieve these outcomes to all four-year-olds in Colorado. CDE has a strong commitment to the continued success of CPP and will work closely with the Department of Early Childhood..

Over the past five years, CDE has launched and implemented a preschool through third grade (P - 3) approach to instruction, curriculum, professional development, and policies in support of P - 12 education in Colorado. CDE has heard from districts the value of a P - 3 approach to their elementary programming, and the Department will continue to support this important work to the extent possible. The initiative has included:

- Supporting a cadre of lead school districts with implementation of P - 3 strategies. The P-3 School Leadership Cadre engaged small school leadership teams (i.e., principal, preschool and K-3 teacher leaders, instructional coaches, etc.) from across the state in a professional learning community from 2016 to 2018. Profiles of participating districts can be found at <http://www.cde.state.co.us/early/p3leadershipcadre>.
- Releasing resources to support transitions and planning for kindergarten: <https://www.cde.state.co.us/schoolreadiness/kindergartenresources>, including: K Bridge programming in alignment with extended learning opportunities and ESSR funds, kindergarten enrollment, and improvement planning in early learning (<https://www.cde.state.co.us/early/elna>).
- Collaborating with the Office of Early Childhood on the Preschool Development Grant to support preschool to kindergarten transitions, including the development of a Colorado Transitions Roadmap and providing funding to support preschool teams that provide professional development in reading.

DEC is committed to advancing the important preschool to kindergarten transition projects currently underway with the Department of Education, Office of Early Childhood at CDHS and other state partners.

- c. **What about local initiatives and efforts to provide funding for child care and preschool? How will those be taken into account with a new state agency and preschool program?**

The following response was provided by the Governor's Office.

Certain localities have varying degrees of programs and funding in place for childcare and preschool - this means more funding for families. The Department of Early Childhood will develop a system to work with local leads to help “stack” these various funding sources, including the ten hours of universal preschool, so that parents and families are able to take advantage of all of the funding available to them.

- [Denver Preschool Program \(DPP\)](#)
- [Summit PreK](#)
- [Town of Breckenridge Child Care Tuition Assistance Program](#)
- [Cathy James Financial Aid Program for San Miguel County](#)
- [Aspen Kids First Child Care Program](#)

As part of its mandate to streamline and improve quality and evaluation standards for preschools, the Department will work closely with the local leads to ensure that these programs meet the standards and guidelines set out by the Department.

DIVISION OF CHILD WELFARE

- 3 ***[Rep. McCluskie]* Please provide an update on foster parent recruitment activities – particularly with a lens on equity and diversity.**

In Colorado we continue to see that white/non-Hispanic individuals are the majority of our foster care parents. The second highest is identified as unknown, followed by Black, Asian, Multi-Race, lowest is American Indian and Alaska Native (AIAN) and Native Hawaiian Pacific Islanders (NHPI). A few technical restraints somewhat limit our ability to report on this accurately:

- Currently, the Adoption and Foster Care Analysis and Reporting System (AFCARS) under the US Administration of Children and Families Regulation does not reflect a Race for Hispanic (Latina/Latino). Unfortunately, that means those who identify as Hispanic are often considered White in our reporting system.
- We are also encouraging county workers to ask families how they identify rather than only reporting how a family presents.
- This is also information that often does not get filled out as it is not mandatory.

CDHS recognizes that there is tremendous opportunity for improvement in this space, and has taken several steps to ensure we can have foster and adoptive parents who represent all kids of Colorado. Colorado has been working with counties and Child Placement Agencies (CPAs) to expand their diverse foster families through encouraging more representation in recruitment materials such as media, foster parent panels, and other recruitment strategies. CDHS has also assisted in developing tools such as the geographic information system (GIS) to help counties/CPAs visualize in what communities foster families are most needed based on removal rates and encouraging targeted recruitment in those communities which are often communities of diverse racial backgrounds.

The State is also working to increase the number of kinship families that are eligible to foster as they tend to also be from the diverse communities that our children and young people represent. This includes increasing accessibility and removing barriers to certification. Finally, Colorado has been encouraging counties, Child Placement Agencies, and stakeholders to employ professionals who are from diverse backgrounds to assist in the recruitment of diverse potential foster parents. One county in particular has hired a bi-lingual Hispanic male who has been able to assist the San Luis Valley in recruiting Spanish speaking families as caregivers. In addition, diverse professionals have seen an increase of interested families stepping forward when they see their own racial or ethnic identity reflected in the professionals recruiting.

FY 2022-23 PRIORITIZED BUDGET REQUESTS

R2 CMHIFL 44 BED OPERATING BUDGET

4 **[Rep. McCluskie] Request R2 includes the following major categories of operating expenses: (1) \$490,247 General Fund in FY 2022-23 (increasing to \$641,794 in FY 2023-24) for ongoing programmatic operating expenses; and (2) \$300,403 General Fund in FY 2022-23 (which is eliminated for FY 2023-24) for “one-time start-up operating expenses.” Please provide detail on what the Department is including in each of those categories.**

- On-going costs include phone/communication charges, custodial/cleaning/waste disposal, medical supplies, other supplies, printing services, rental of equipment, repair and maintenance, and patient meals.
- One-Time startup costs include furniture, food carts, dining trays and dining accessories, medication carts, medication refrigerators, exam tables, cameras and installation, washer and dryer, beds, nightstands, wardrobes, etc.

R6 FACILITY MANAGEMENT OPERATING RESOURCES

5 **[Sen. Rankin/Sen. Moreno] Please identify department facilities by at least these two categories: 24/7 facilities and office space. If there are other categories that should be included, please include them. For each category included, please describe the requested funding related to each category.**

The following table breaks out the Department of Human Services facilities into office-only space vs 24/7 and other facilities.

Table 6: Department of Human Services Facilities			
DFM Maintained Space	Office Only	24/7 & Other	Total
Buildings	10	266	276
Square Footage	103,124	3,051,017	3,154,141
Percentage	3.3%	96.7%	100%
Note: Square footage calculations based on occupied buildings only, and do not include vacant properties nor VCLC facilities, which are not maintained using this appropriation.			

The majority of CDHS office spaces are not maintained by CDHS staff. Of the office-specific locations utilized by the Department, 70% are either leased commercial space or managed by the Department of Personnel & Administration through Capitol Complex (1575 Sherman). The remaining 30% of office space (103,124 square feet) exists in ten CDHS owned buildings. This 103k square feet is less than 3.3% of the total space maintained by the CDHS Division of Facilities Management (DFM). In general, housekeeping and maintenance costs for office space are much lower than the costs associated with operating 24/7 facilities. Based on the

benchmarking study commissioned by DFM in 2018, the Whitestone hospital benchmark was more than six times higher than the office benchmark. Both the goods (fixtures, parts, supplies) and services (kitchen equipment, medical waste, campus landscaping) required to operate 24/7 facilities are specialized and far more expensive than those required for typical office space.

- a. **With respect to office space, please describe the Department’s current and planned remote work policies and practices, as well as the impacts on the need for office space and related expenses (i.e., base expenses that may not be addressed by R6).**

Early in the pandemic, the Department identified leased space that could be phased out. Leases for the Staff Development Center (SDC), the Low Income Energy Assistance Program (LEAP) and the Colorado Refugee Services Program (CRSP) were terminated and staff was relocated. Phase 1 of the CDHS Facility Master Plan (FMP) has suggested further reductions in space where possible. The Department instituted a new FlexPlace policy in 2020 to allow widespread use of work from home opportunities, but has yet to transition jobs to permanent telecommuting positions. The Department is closely monitoring the current COVID-19 case and transmission rates in Colorado, as well as recent developments regarding new variants. The Department had a “Return to Office” plan for office specific spaces that aimed to gradually increase capacity from 20% upward during the second half of 2021. Currently, we are limiting staff to 30% of capacity, and the plan to expand that has been paused due to Colorado’s COVID-19 numbers. Future decisions around space capacity and needs will depend partly on the trending path of the pandemic. The Department does anticipate a reduction of space needs as compared to pre-pandemic needs. However, the Department has also experienced growth in many programs over the past two years and anticipates additional changes to space needs with the new Department of Early Childhood and the Behavioral Health Administration.

R10 SNAP FAIR HEARING COMPLIANCE

- 6 **[Sen. Moreno] Please describe the steps included in the current fair hearing process, from the initial request for a hearing through the final decision.**

The Fair Hearings process begins by notifying an appellant household of a potentially-appealable issue with their benefits (e.g. establishment of an overpayment claim or the denial/termination of benefits) through a specific Notice of Adverse Action. That Notice includes instructions for how to request a fair hearing, including the timeframe for requesting an appeal and contact information for the Office of Administrative Courts (OAC) to submit an appeal. If the household makes its request for hearing through the County Office, instead of the Office of Administrative Courts, the County is responsible for forwarding that request to the OAC.

Following receipt of a request for a fair hearing, OAC clerical staff review the appeal for validity (i.e. conformity with Federal regulations printed at §273.15(g)). If the request is valid, OAC sets a time and date for the hearing and notifies the parties (County Department and Appellant). That notification also requires an evidentiary packet to be submitted by the County Department to both the Appellant and the OAC by the specified due date.

The presiding Administrative Law Judge (ALJ) conducts the hearing, which involves gathering testimony and reviewing the provided evidence. Once the hearing has concluded, the ALJ renders an Initial Agency Decision (IAD) on the case. That IAD is transmitted electronically to the Office of Appeals (OOA); the OOA mails the IAD to the parties according to mail protocols outlined in regulation and the State Administrative Procedure Act (APA). That notification includes two due dates for any involved parties to register exceptions to the IAD: 1) the date by which any involved party must register their intent to file exceptions; 2) the date by which any exceptions must be received (and is only applicable to those parties that registered an intent to file exceptions). Exceptions that aim to challenge any Findings of Fact established in the IAD must be presented simultaneously with a transcript or recording of the hearing, because there is no established protocol to exchange recorded material. Once the due date to register an exception has passed, the OOA considers the case “ripe” for review, and begins reviewing the IAD in order to render a Final Agency Decision (FAD). In the course of rendering a FAD, the OOA reviews any exceptions that have been submitted. The FAD is final and binding upon all parties. However, if the Appellant registered exceptions to the IAD and the FAD still does not support their exceptions, the Appellant can escalate the matter for further review by Denver District Courts.

a. How will bringing the entire process under the auspices of the Department ensure compliance with the federal requirement to issue a final decision within 60-days?

Bringing the entire Fair Hearings process within the Department of Human Services will consolidate the flow of work and tight deadlines within one Department. This will eliminate additional steps of communication between the Department and the Office of Administrative Courts. Additionally, this process will target the work as the Department will focus solely on SNAP hearings, instead of managing multiple types of fair hearings. It is worth noting that the Department of Human Services is responsible for any fines or sanctions that are levied per SNAP performance. Thus, the Department has an especially vested interest in ensuring compliance with the 60 day requirement.

b. How will the Department ensure impartiality in the hearing and decision making process?

In the Department’s administrative structure, the Office of Appeals hearing officers operate separately from the staff who are responsible for managing and administering the SNAP. This separation will ensure impartial reviews of evidence and resulting decisions. Additionally, the Department currently has final say in the hearing and decision process, thus the ultimate decision-maker for these cases is not changing.

c. Are there other types of SNAP hearings that would still be referred to the Office of Administrative Courts in the Department of Personnel? If so, how will the Department ensure that SNAP recipients are aware of and understand the differences between hearing processes?

Fair Hearings involving Intentional Program Violations (IPVs) will continue to be heard by the Office of Administrative Courts (OAC). The process for filing a Fair Hearing

request for an IPV is a separate process and will continue as such. When clients receive a notice of action or correspondence regarding an IPV, information on their right to appeal and how to appeal are included in the document. As such, the client notification will articulate the types of appeals and processes. Additionally, the Department will create a process to immediately forward any IPV Fair Hearing requests received by the OOA to the OAC.

7 ***[Sen. Moreno]* How will the Department address and fund the operating costs associated with this request (e.g. translation services, courtrooms and waiting areas, recording equipment, etc.)?**

Currently, the Office of Administrative Courts is holding hearings via ‘Google Meets’ and using the recording function. The Department will continue this practice of using Google Meets and its recording function. Very rarely does a client request a face-to-face hearing. However, in such cases when no public safety concerns exist with in-person contact, the Department will provide an appropriate physical hearing space and waiting area for the client. The procedural rules are the same for either type of hearing. If a foreign language interpreter is needed, the county department will provide a foreign language interpreter and coordinate with the Department for the hearing, mirroring the current process by the OAC. No additional funding is anticipated to be needed.

8 ***[Sen. Moreno]* The request includes the hiring of two Administrative Law Judges.**
a. **What training will these judges receive? Will it be comparable to current ALJ training or specific to SNAP fair hearings?**

The manager of the Office of Appeals was previously an ALJ and will be able to train the new staff. Because these new ALJs will only be working with SNAP cases, it presents an opportunity to ensure a thorough understanding of SNAP. The Department’s SNAP administrative team will provide SNAP-specific training to the new ALJs to provide a baseline understanding of program rules, etc.

b. **From where will funding for ALJ training originate?**

As explained in the previous answer, the training will be provided by the manager of the OOA and SNAP program subject-matter experts in the Department. No additional training resources are required outside the available funds.

9 ***[Sen. Moreno]* How will the Department ensure that appellants who represent themselves are afforded the same level of due process as those who hire lawyers?**

Currently, appellants receive information about where to find pro bono support and translation services for the Fair Hearing process. The Department will continue this practice. Additionally, the Department intends to provide clear, understandable information in notification on how to navigate the Fair Hearing process.

- 10 *[Sen. Moreno]* Please describe and discuss any stakeholder and community advocate organization outreach conducted by the Department in relation to this request.
- What concerns have been raised?
 - With which stakeholders and community advocate organizations has the Department engaged?

Since September 2021, the Department has held monthly meetings with staff from the Center on Law and Policy, the Blueprint to End Hunger, and Hunger Free Colorado to discuss various concerns and other issues per SNAP Fair Hearings. Specifically, the group discussed concerns related to which cases will be absorbed by the Department, how Fair Hearing process steps could be eliminated or improved, and how the Department will remain impartial. Additionally, the group explored efficient processes from other states.

R11 CBH CRIMINAL JUSTICE LONG BILL LINE CONSOLIDATION

- 11 **[Rep. McCluskie]** Request R11 indicates that consolidating the two line item will help avoid reversions in the Criminal Justice Diversion Programs line item and the Jail Based Behavioral Health Services line item. Please provide detail on the reversions from each line item in each of the past five years, both as a dollar amount and as a percentage of the appropriation. If there are specific circumstances that explain those reversions then please explain those circumstances. In addition, please provide reversion data for any other criminal justice based line item that has had significant reversions over that period.

The tables below represent Appropriations, expenditures, reversions and the percentage of reversions relative to the appropriation. In FY 2020-21 reversions were related to the on-going issue of behavioral health workforce shortages and the jails and diversion programs' ability to fill and retain staff.

In FY 2020-21 there were no other criminal justice programs with reversions.

Table 7: Diversion Program, Appropriations, Expenditures and Reversions FY 2020-21 to FY 2017-18					
Fiscal year	Funding Type	Appropriation	Expenditures	Reversions	% of Appr.
2020-21	Cash	\$5,634,898	\$5,579,570	\$55,328	1%
2020-21	General	\$1,165,052	\$1,019,331	\$145,721	13%
Total FY 2020-21		\$6,799,950	\$6,598,901	\$201,049	3%
2019-20	Cash	\$5,689,020	\$4,593,951,66	\$1,095,068	19%
2019-20	General	\$1,165,052	\$659,074.08	\$505,978	43%
Total FY 2019-20		\$6,854,072	\$5,253,026	\$1,601,046	23%
Total FY 2018-19	Cash	\$5,561,828	\$3,924,203	\$1,637,624	29%

Total FY 2017-18	Cash	\$5,517,942	\$1,186,673	\$4,331,269	78%
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Table 8: Jail-based Behavioral Health Program Appropriations, Expenditures and Reversions FY 2015-16 to FY 2020-21					
Fiscal Year	Funding Type	Appropriation	Expenditures	Reversions	% of Appr.
2020-21	Reappropriated	\$7,105,078	\$6,993,406	\$111,672	2%
2020-21	General Fund	\$6,127,117	\$6,006,513	\$120,604	2%
Total 2020-21		\$13,323,195	\$12,999,919	\$232,276	2%
2019-20	Reappropriated	\$7,176,846	\$5,620,599	\$1,556,247	22%
	General Fund	\$5,277,387	\$3,491,651	\$1,785,736	34%
Total 2019-20		\$12,454,233	\$9,112,250	\$3,341,983	27%
2018-19	Reappropriated	\$5,297,61	\$5,179,380	\$118,230	2%
2018-19	General Fund	\$1,426,667	\$506,705	\$919,962	64%
Total 2018-19		\$6,724,277	\$5,686,085	\$1,038,192	15%
2017-18	Reappropriated	\$5,256,185	\$4,996,063	\$260,122	5%
	General Fund	\$0	\$0	\$0	0%
Total 2017-18		\$5,256,185	\$4,996,063	\$260,122	5%
2016-17	Reappropriated	\$5,083,522	\$4,890,717	\$192,805	4%
2016-17	General Fund	\$0	\$0	\$0	0%
Total 2016-17		\$5,083,522	\$4,890,717	\$192,805	4%
2015-16	Reappropriated	\$5,128,522	\$4,340,271	\$788,251	15%
2015-16	General Fund	\$0	\$0		0%

Total 2015-16		\$5,128,522	\$4,340,271		0%
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R19 *INDIRECT COST ASSESSMENT REFINANCE*

- 12 ***[Sen. Moreno]* Please provide an update on the indirect cost process for the Department, the balance in the Indirect Cost Recovery Fund, any recent transfers out of that fund for budget balancing, and how approval of this request would affect indirect cost recoveries in the future.**

As of December 20, 2021 the balance of the Department's Indirect Cost Recovery Fund was \$6,040,195. The fund is not used for budget balancing unless non-General Fund is under-collected versus the budget, which has not occurred since the Department began utilizing the fund. In FY 2019-20, \$4,049,005 was transferred from the Fund to the State General Fund as part of budget balancing required due to COVID.

Approval of the Department's R-19 request, and specifically the use of funds in the Indirect Cost Recovery Fund to offset the General Fund need, will not impact future cost recoveries as recoveries are from the non-General Fund sources for allowable administrative expenditures. Rebalancing the indirect cost lines to reflect the current allocation of administrative expenditures relative to the Department's current average collections of non-General Fund revenues results in annual savings to the State of \$1.9 million General Fund. Additionally, in the first year, the Department is proposing an additional \$5.0 million savings to the General Fund by utilizing the above-mentioned accumulated balance in the Indirect Cost Recovery Fund to offset what would normally be General Fund expenditures. The net result of the two moves is intended to result in maintaining an ongoing fund balance of roughly \$1.0 million annually in case the Department experiences any under-collections of non-General Fund revenue sources in future years.

TURNOVER AND VACANCY RATES

- 13 ***[Sen. Rankin]* With the assistance of the Department of Personnel, please conduct an analysis of the Department of Human Services vacancy and turnover rates to provide recommendations to the Joint Budget Committee concerning potential actions the General Assembly should consider to address this issue.**

During FY 2020-21, CDHS turnover was 25.3%, with 1,285 positions becoming vacant. Currently in FY 2021-22, CDHS is experiencing increased turnover with a total turnover for the Department of 26.29%, and 33.48% in our direct care positions. Additionally, as of 12/10/21, 783 (82.4%) of CDHS's 950 vacancies were in 24/7 direct care facilities.

The Summer 2021 CDHS Employee Engagement Survey and the CDHS Exit Survey combined identify key drivers of employee engagement across the organization. The Exit Survey indicates that the majority of employees (64%) are leaving CDHS voluntarily (for reasons other than retirement or involuntary termination). That means that we can take action as an organization to positively impact turnover rates.

The following responses are from the 2021 CDHS Employment Engagement Survey taken this past summer.

1. "My total compensation (base salary + benefits) is fair compared to the market."

- The majority of employees (77%) responded to this question neutrally or unfavorably.
 - Potential action: raising base salary for positions with high turnover/vacancy rates to be more competitive with the market, offering retention bonuses, signing bonuses and referral bonuses. Approval of the proposed statewide salary survey and range adjustment requests would not only help to address compensation disparities with the market, but also demonstrate the State's commitment to our employees.
2. The Department believes that a significant portion of the turnover being experienced is due to employee COVID-19 fatigue. The cyclical nature of employee's leaving causes added stress on those choosing to stay. The workforce within the State is insufficient to meet the needs of all of the healthcare positions available. The Department recommends significant support for workforce development to address the overall shortage of employees.
3. "Overall, I feel that my career goals can be met at CDHS".
- Approximately half (49%) of employees responded to this question neutrally or unfavorably. 34% of employees indicated "Lack of career path/promotional opportunities" as a major factor in their decision to leave the organization.
 - In response to this feedback, earlier this year CDHS created the first Career Pathing Program Manager position in Human Resources to improve this score.
 - Potential action: Investment in programs designed to facilitate employee growth such as funded educational opportunities or tuition reimbursement programs would give employees greater opportunities for career development.

COMMON QUESTIONS: PLEASE RETAIN THE NUMBERING IN ORDER TO MAINTAIN CONSISTENT LABELING FOR COMMON QUESTIONS ACROSS DEPARTMENTS.

- 1 Provide a list of any legislation with a fiscal impact that the Department has: (a) not implemented, (b) partially implemented, or (c) missed statutory deadlines. Explain why the Department has not implemented, has only partially implemented, or has missed deadlines for the legislation on this list. Please explain any problems the Department is having implementing any legislation and any suggestions you have to modify legislation.**

The Offices of Behavioral Health; Children, Youth and Families; Early Childhood; and Economic Security have implemented legislation with fiscal impacts enacted in prior years. The following list does not reflect legislation in the process of being implemented in FY 2021-22.

The following Offices have legislation from prior years that is pending implementation.

Administrative Solutions

HB 18-1128 Concerning Strengthening Protections for Consumer Data Privacy

This bill directed the Department to destroy physical data containing Personally Identifiable Information (PII) that is no longer needed for business purposes. Further, the bill requires that the Department's information technology (IT) platforms and applications purge electronic data containing PII that is no longer needed. The Department had undertaken initial discussions regarding how to implement these requirements and had started the process of identifying and destroying some records. However, these efforts were placed on hold at the start of the pandemic. The Department recently hired a new records retention manager to ensure all CDHS records are managed or destroyed in accordance with legislative and regulatory requirements.

Office of Adult, Aging and Disability Services

SB 16-178 Concerning the Grand Junction Regional Center Campus

In 2016, SB 16-178 instructed the Department to vacate and move all remaining residents off the Grand Junction Regional Center Campus by July 1, 2018. The legislation stipulated that if the Department could not vacate the campus by July 1, 2018, the Department was required to provide quarterly updates to the Colorado General Assembly in writing beginning June 1, 2018. The Department's Division of Regional Centers (DRC) has consistently submitted the quarterly updates.

In 2017, the Department submitted a supplemental request for \$703,750 to begin the process of moving residents off the campus. The request covered a resident engagement consultant to assist residents in choosing new homes, costs to convert a Home and Community Based Services (HCBS) home to an Intermediate Care Facility (ICF) home, project management, moving fees, acquisition of food storage facilities, lease costs and build out for administrative offices, and decommissioning of the campus. \$200,000 was approved for the Department to hire the engagement consultant and pay the fees of the project manager.

In 2018, the Department was granted permission via HB 18-1049 to continue leasing space on the campus to third party behavioral health providers until June 30, 2020.

The Department was also provided \$887,250 in operating funding to decommission and close the administrative building and other non-resident facilities, acquisition of food storage facilities, new lease space for the administrative offices, and a consultant to assist residents in choosing new homes.

In addition, in 2018 the Department requested \$6,422,682 in capital construction funds to build four new six-bedroom ICF homes for the residents that remained living on the campus. The legislature provided \$3,511,341 in funding to acquire land and build two six-bedroom ICF homes, and to repurpose two HCBS homes to ICF homes.

In 2019, HB 19-1062 provided the Department with the option of selling all or part of the campus, or it could transfer all or a portion of the campus to a State Institution of Higher Education, a local government, or a State agency that is interested in its acquisition.

In 2020, several of the residents living on the campus moved to the two homes that were converted to ICF homes and the Department began the process to purchase property to build two new group homes so it can move the remaining eleven residents from the campus. Following a lengthy process, the Department purchased property in December 2020. Site plans were developed to build two new homes. Following the move of the remaining residents off the campus, the Department can begin the process to sell all or part of the campus, or transfer all or a portion of the campus to a State institution of higher education, a local government, or a State agency that is interested in its acquisition.

In 2021, related to the purchase of property for the two new group homes, the Department entered into an interagency agreement to define legal ownership, operations, and maintenance responsibilities for the State Departments involved in the purchase of the property. The Department concluded the assessment process of the land and worked with the Department of Personnel and Administration and the Capital Development Committee of the General Assembly to obtain a contract and title on the property located at 639 Pioneer Road in Grand Junction. The Department had a site survey for 639 Pioneer Road completed and moved forward with Chamberlin Architects for the site design work for the new group homes. The Department requested and was approved for an additional \$1.6 million in funding from the legislature in order to build the appropriate design needed to support individuals.

Throughout 2021, design review has been ongoing and has involved the Grand Junction Regional Center Group Home Advisory Committee, which also includes a parent of an individual who will move into one of the new homes. A pre-application meeting was held with Grand Junction Planning. Two community meetings with neighbors for public comment were held and feedback was provided to the Department and the City of Grand Junction. The Capital Development Committee visited the Grand Junction Regional Center campus and met with key Department leaders in July 2021 to discuss the current group home design and plans. Due to a City of Grand Junction decision about not needing to connect the local roads, a redesign of the parking area was needed. The architectural firm will now need to meet with Grand Junction Planning and Zoning and then make two appearances before the Grand Junction City Council to address that change. Construction documents are anticipated to be completed by the end of December 2021. Groundbreaking on the site for the two new homes is anticipated to take place in early 2022.

- 2 **Does the Department have any HIGH PRIORITY OUTSTANDING recommendations with a fiscal impact identified in the Office of the State Auditor's "Annual Report: Status of Outstanding Audit Recommendations"? What is the Department doing to resolve these HIGH PRIORITY OUTSTANDING recommendations? Please indicate where in the Department's budget request actions taken towards resolving HIGH PRIORITY OUTSTANDING recommendations can be found.**

The 2021 report will be published on December 6, 2021 and can be found at this link: <http://leg.colorado.gov/content/audits>. JBC staff will send out an updated link once the report is published.

https://leg.colorado.gov/sites/default/files/documents/audits/2154s_2021_annual_report_status_of_audit_recommendations.pdf

The Department has one high priority audit recommendation that is not fully implemented. The recommendation is to strengthen its internal controls over, and ensure compliance with, the Colorado Child Care Assistance Program (CCCAP) requirements by developing a formal method to accumulate and assess errors at each county that will allow the Department to analyze error rates for the entire State as well as on a county by county basis and using the information to implement a targeted training and improvement plan for all errors identified. To implement this recommendation the Department is developing formal indicators to measure county and statewide performance for timely processing of new applications and re-determinations, and to establish error rates to measure accuracy. The new performance measures and reports are anticipated to be available by June 2022, and CCCAP will implement monitoring, and tracking of the new performance indicators when resources are available.

- 3 **Is the Department spending money on public awareness campaigns? If so, please describe these campaigns, the goal of the messaging, the cost of the campaign, and distinguish between paid media and earned media. Further, please describe any metrics regarding effectiveness and whether the Department is working with other state or federal departments to coordinate the campaign?**

Please see [Attachment A](#): CDHS Public Awareness Campaigns.

- 4 **Please identify how many rules you have promulgated in the past year (FY 2020-21). With respect to these rules, have you done any cost-benefit analyses pursuant to Section 24-4-103 (2.5), C.R.S., regulatory analyses pursuant to Section 24-4-103 (4.5), C.R.S., or any other similar analysis? Have you conducted a cost-benefit analysis of the Department's rules as a whole? If so, please provide an overview of each analysis.**

The Department has four Type I entities with the capacity to promulgate rules. These rule-making entities include: the Executive Director of the Department of Human Services; the State Board of Human Services; the Juvenile Parole Board; and the Adoption Intermediary Commission. Presently, only the State Board of Human Services promulgates rules on a regular basis, and none of the other entities promulgated rules between July 1, 2020 and June 30, 2021.

When promulgating rules, the State Board of Human Services follows the requirements set forth in the Colorado Administrative Procedure Act (APA) concerning posting, noticing, and preparing regulatory analyses, to include an analysis of expected costs and benefits or a proposed rule, for each rule proposed for adoption by its respective board. The proposed rule combined with the regulatory analyses constitutes a rule “packet.”

State Board of Human Services

The State Board of Human Services meets on a monthly basis to conduct business, including rule-making. Prior to the rule-making session, stakeholder input and feedback are sought on all proposed new rules, modifications to existing rules, and repeal of outdated or redundant rules.

The State Board of Human Services promulgated 48 permanent rule packets between July 1, 2020 and June 30, 2021. There were 8 emergency/temporary rules within this same time frame that were later promulgated as permanent. (Those 8 emergency/temporary rules are included in the total count.)

Cost-benefit analyses are completed upon request through the Department of Regulatory Agencies. For FY 2020-21 there were no requests.

For FY 2020-21, no cost-benefit analysis of the Department’s rules has been conducted as a whole.

- 5 What are the major cost drivers impacting the Department? Is there a difference between the price inflation the Department is experiencing compared to the general CPI? Please describe any specific cost escalations, as well as cost impacts driven by COVID-19 and supply chain interruptions.**

Administrative Solutions

Operating Costs

The Division of Facilities Management (DFM) has grappled with rising costs and prices for years. The goods and services utilized by the DFM have been increasing at rates beyond the CPI. These cost increases have been even more dramatic given the COVID-19 pandemic and recent supply chain issues that have affected so much of the economy. Much of the material used for maintenance and repairs exhibit cost increases more closely related to construction indices. The Department’s 24/7 facilities contain a vast array of safety and security fixtures that make them more expensive to replace/maintain. These specialized items have fewer suppliers, less competition and more price volatility. Additionally, many of the vendor provided services utilized by the DFM are also specialized and seeing rapidly rising rates. These services include services like elevator repair/maintenance, kitchen hood servicing, medical waste removal and many others.

Information Technology (IT) Costs - Hardware and Software

IT costs are increasing for a number of reasons, including industry trends, a shifting landscape due to the pandemic, and the cost of IT professionals. In recent years, the management and procurement of both hardware and software have shifted from a purchase model to annual service contracts. Rather than buying rooms full of servers, switches and routers then staffing to maintain them, the trend is toward Infrastructure-as-a-Service (IaaS), where vendors (Amazon

Web Services, Google, Salesforce, etc) provide these services as part of an annual service package. Similarly, rather than buying products like Microsoft Office and using that product until it is no longer supported, software providers now require an annual subscription (Software-as-a-Service). This normalizes expenditures from year to year but ultimately results in higher costs.

The COVID-19 pandemic has necessitated a shift in both how we support our employees and how we serve our clients. New and additional technologies are needed to support a mobile workforce and increase on-line service delivery.

Information Technology (IT) Costs - Security

Information security is another cost driver. As our dependency on digital information increases, so does the risk of inappropriate use of that data, and information security is a critical element of information technology management. Additional security controls such as encryption, event monitoring, two-factor authentication, and ensuring redundancy to protect against a disruption in access, etc. come with a premium.

Office of Adult, Aging and Disability Services

People with Disabilities Division

Veterans Community Living Centers (VCLC): The major cost drivers affecting the VCLCs include decreased revenue due to lower census and personnel costs. The higher acuity of resident medical needs and the additional medical supplies are also significant cost drivers during the pandemic. To honor and retain essential employees working onsite at the VCLC, the Department of Human Services increased the staff wages with incentive pay beginning in March 2020. Personnel costs significantly increased during the COVID-19 pandemic as a result of the incentive pay and overtime required to meet resident care needs.

Regional Center Operations: The major driver affecting the Regional Centers Operations and costs is the increasing acuity level of individuals served. The additional medical supplies have also been significant cost drivers during the pandemic. To honor and retain essential employees working onsite at the Regional Centers, the Department of Human Services increased the staff wage with incentive pay beginning in March 2020. Personnel costs significantly increased during the COVID-19 pandemic as a result of the incentive pay and overtime required to meet resident care needs.

Aging and Adult Services: Aging and Adult Services provides services to older adults and vulnerable adults through Adult Protective Services (APS) and the Older Americans Act (OAA) Programs. According to data from the State Demographer's Office, Colorado is currently home to more than 1,183,300 individuals over the age of sixty, and that number is growing. During the next four-year period, that number is projected to increase by nearly thirteen percent. Currently, one in five Coloradans is sixty or older. By 2050, more than a quarter of the State's population will be sixty or older. This unprecedented demographic shift will require special attention to ensure that communities are livable and accessible and appropriate services are available for older adults in the State. Further, since the population of older adults has been increasing, the number of eligible individuals for these programs has increased. Currently, approximately five percent of the population of older adults is served by at least one of the Division's programs annually. Even if the percent of older adults in the State that access these services remains constant, with the increased number of older adults in the State, there will be a greater demand for services.

Office of Behavioral Health

Community Behavioral Health

The majority of cost for behavioral health services is labor, specifically behavioral health professionals. It has been reported across mental health, substance use and crisis services providers that competition amidst workforce shortages is driving the price of qualified behavioral health professional candidates up and as a result of this it that providers have experienced unprecedented vacancies in staffing. The Office of Behavioral Health does not have statewide salary data incorporating the public and private sector to quantify the impact of this market condition. There has not been any recent reporting of supply chain issues significantly impacting operating expenses.

Mental Health Institutes: COVID-19 Temporary Staff

COVID-19 is driving significant costs increases associated with the continued use of contracted medical/administrative staff originally hired in FY 2020-21 to assist with critical COVID-19 related functions in FY 2021-22 for the Colorado Mental Health Institute at Pueblo (CMHIP), as well and newly needed contracted positions at the Colorado Mental Health Institute at Fort Logan (CMHIFL). The 23 positions include Registered Nurses, Licensed Practical Nurses, Certified Nursing Assistants, Administrative Assistants, and Binax Testers. Cost estimates are \$1.5M to \$1.8M for FY 2021-22.

Mental Health Institutes: Escalating Contracted Staffing Cost

The Office of Behavioral Health continues to experience significant contractor rate increases, which are absorbed in the MHIs’ personal services appropriation. Table 9 below provides an illustration of rate increases for Medical Edge Recruitment from Q1 to Q2 of this fiscal year. The cost of contract staff continues to significantly outpace the cost of State classified staffing. Table 10 provides a comparative analysis of contractor rates as compared to average State FTE costs for the quarter ending 12/31/2021. In many cases, contractor rates are over 300 percent higher than average FTE costs.

Table 9: Medical Edge Recruitment Q-2 Rate Increases by Classification

Position	07/1/2021 - 09/30/2021 Maximum Total Cost to the State (new assignments)	10/1/2021 - 12/31/2021 Maximum Total Cost to the State (new assignments)	Classified Title	Change (\$)	Change (%)
Registered Nurse (RN)	\$ 73.00	\$ 85.00	Nurse I, II, III	\$ 12.00	16.44%
Mid Level - Physician Assistant (PA)	\$ 100.00	\$ 200.00	Mid Level Provider	\$ 100.00	100.00%
Mid Level - Nurse Practitioner (NP)	\$ 70.00	\$ 200.00	Mid Level Provider	\$ 130.00	185.71%
Health Care Technician (HCT)	\$ 40.00	\$ 50.00	HCT I, II, III	\$ 10.00	25.00%
Certified Nursing Assistant (CNA)	\$ 40.00	\$ 50.00	Client Care Aide II	\$ 10.00	25.00%
Mental Health Clinician (MHC)	\$ 40.00	\$ 50.00	Mental Health Clinician I, II, III	\$ 10.00	25.00%
Licensed Practical Nurse (LPN)	\$ 58.00	\$ 70.00	HCT I, II, III	\$ 12.00	20.69%
Licensed Psychiatric Technician (LPT)	\$ 35.00	\$ 50.00	HCT I, II, III	\$ 15.00	42.86%
Sitters	\$ 40.00	\$ 50.00	Client Care Aide I, II	\$ 10.00	25.00%

Table 10: Medical Edge Recruitment Q-2 FTE vs. Contract Staff Cost Comparison

For the Period Beginning 10/1/2021 - 12/31/2021				
<u>Position</u>	<u>Maximum Total Cost to the State (new assignments)</u>	<u>State Total Cost (midpoint)</u>	<u>Classified Title</u>	<u>Difference</u>
Registered Nurse (RN)	\$ 85.00	\$ 41.51	Nurse I, II, III	\$ 43.49
Mid Level - Physician Assistant (PA)	\$ 200.00	\$ 48.76	Mid Level Provider	\$ 151.24
Mid Level - Nurse Practitioner (NP)	\$ 200.00	\$ 48.76	Mid Level Provider	\$ 151.24
Health Care Technician (HCT)	\$ 50.00	\$ 21.08	HCT I, II, III	\$ 28.92
Certified Nursing Assistant (CNA)	\$ 50.00	\$ 15.79	Client Care Aide II	\$ 34.21
Mental Health Clinician (MHC)	\$ 50.00	\$ 24.78	Mental Health Clinician I, II, III	\$ 25.22
Licensed Practical Nurse (LPN)	\$ 70.00	\$ 17.82	HCT I, II, III	\$ 52.18
Licensed Psychiatric Technician (LPT)	\$ 50.00	\$ 17.82	HCT I, II, III	\$ 32.18
Sitters	\$ 50.00	\$ 15.34	Client Care Aide I, II	\$ 34.67

Critical Staffing Shortage Resulting in Excessive OT Usage

The Colorado Mental Health Institute at Pueblo (CMHIP) continues to experience critical staffing shortages. In addition to hiring contracted staffing to backfill some vacant positions, the Department has significantly increased the use of overtime to ensure minimum staffing levels are being met.

Office of Children, Youth and Families

Division of Child Welfare

The Division of Child Welfare (DCW) allocates three primary funding streams to counties with the Child Welfare Block, Core Services, and New County Staffing funds via SB 15-242. Appropriations from each of these line items in the Long Bill are used in their respective allocation models to allocate funds to the counties. The following data elements are used to allocate funds to counties, which directly affects county budgets:

- **County Category:** County categories are distinguished in two ways. One category captures the eleven counties which represent 80% of child welfare services provided (referred to as the Big 11 or B11) and the other contains the remaining counties and is referred to as the Balance of State (BOS). The weight of this category affects how much a county will be allocated in the models. There is no change expected in the next few years. The following counties are considered the B11 counties; all others are BOS counties: El Paso, Arapahoe, Denver, Adams, Jefferson, Larimer, Weld, Boulder, Douglas, Mesa and Pueblo.
- **Child Population:** Counties' child populations come from the State Demographer's Office and affect the amount of their allocation with the use of a weighting factor. Actual data for Calendar Years 2017-2021 are shown in Table 11. The State Demographer's projections for Calendar Years 2022-2026 are shown in Table 12.
- **Poverty:** Both child and family census poverty statistics are used in the allocation models. The weight of this variable affects the distribution of a county's allocation. Any changes in poverty rates are incorporated into the allocation models.
- **Workload measures:** Referrals, Assessments, Involvements, number of Out-of-Home Placements (OOH), Program Services Costs, Foster Care Days Paid, and Congregate Care Days Paid are all workload measures used to allocate funds to the counties. Each item has a weight within the allocation model. Actual workload metrics for State Fiscal Years 2017-2021 are shown in Table 11 and an estimate of each of these out to 2026 is provided in Table 12. With the implementation of the Family First Prevention

Services Act (Family First), there are considerations for these estimates. Because Family First will focus heavily on prevention work to prevent any OOH placements, and because certain OOH placements will not be eligible for federal reimbursement, the Division expects to see an increase in prevention services work/cost and a decrease in the utilization of the OOH placements not eligible for federal reimbursement, as well as overall OOH placements to come down as prevention services are more heavily offered and will potentially offset the need for OOH services. As a result, there may be higher numbers of work activity and expenses related to in-home involvements and lower numbers of OOH work activity and expenses related to OOH involvements. During 2021, some workload measures modestly decreased largely due to the COVID pandemic as children and youth were not in school and mandatory reporters were not able to observe and report concerns or signs of child neglect and abuse. Abuse and neglect referrals to the statewide child welfare hotline are expected to rebound as awareness efforts have increased calls measurably.

**Table 11: Child Welfare Budget Drivers and Programmatic Costs,
Actuals From State Fiscal Years 2017-2021**

Year	2017	2018	2019	2020	2021
Child Population (State Demographer's Office-Calendar Year)	1,341,344	1,342,861	1,338,614	1,331,960	1,325,951
FY Referrals	101,278	109,806	113,019	107,674	102,433
FY Assessments	37,183	38,485	38,475	36,186	35,592
FY Involvement Days	4,096,445	4,153,156	4,066,342	3,971,042	3,688,661
# of FY Out-of-Home Placements	10,820	10,162	9,125	8,113	7,572
FY Program Services Costs	\$245,624,071	\$249,605,092	\$253,230,557	\$259,107,840	\$262,822,922
FY Foster Care Days Paid	896,329	925,509	963,390	989,891	930,834
FY Congregate Care Days Paid	300,864	292,807	246,620	180,115	138,237

**Table 12: Child Welfare Budget Drivers and Programmatic Costs - Projected State Fiscal Years
2022-2026**

Year	2022	2023	2024	2025	2026
Child Population (State Demographer's Office - Calendar Year)	1,319,762	1,313,845	1,309,654	1,307,746	1,311,618
FY Referrals	110,489	112,046	113,604	115,162	116,720
FY Assessments	39,039	39,590	40,140	40,690	41,241
FY Involvement Days	4,087,954	4,109,397	4,130,839	4,152,281	4,173,724
# of FY Out-of-Home Placements	7,496	7,271	7,053	6,842	6,636

Division of Youth Services (DYS)

Population projections for DHS are done for committed, detained, and paroled youth by the Division of Criminal Justice (DCJ) as well as Legislative Council Staff (LCS). Traditionally, these forecasts are finalized in December or January of each year.

Budget drivers for DHS are often external and can be the product of federal or State legislation. Federal programs, such as the Family First Prevention Services Act (Family First) are expected to increase the cost of residential programs where DHS youth identified as lower risk are often placed for commitment and parole. During the 2021 legislative session, Senate Bill 21-071

reduced the maximum capacity for detention youth in DYS facilities (those that are awaiting adjudication) which has had the effect of reducing the detention population to the highest risk youth who have been determined to be at substantial risk of serious harm to others or a substantial risk of flight from prosecution and where community-based alternatives to detention are insufficient. Additionally, recent national evidence-based trends supporting treatment based and trauma informed programming (as opposed to more traditional “corrections” based programming) continue. These standards typically cost more, however, research shows they yield better outcomes in terms of recidivism and diverting youth from the adult justice system, and better prepare youth for transition back into communities and job readiness.

Office of Early Childhood

The Colorado Child Care Assistance Program (CCCAP) serves children 0 to 13, but is not an entitlement program and so its caseload is constrained more by available resources than by shifts in population, in that not all eligible children are served. CCCAP costs are driven by three factors: (1) caseload, (2) time spent in care per capita, and (3) rates. CCCAP rates are set by the State, and are not directly impacted by inflation.

In response to COVID-19, the Department utilized stimulus funding in FY 2020-21 to increase the number of absences paid to providers, which effectively increased the amount of time a child receives paid care, and lower family copayment amounts, which increased the rate paid by the county. SB 21-236 continued these strategies in FY 2021-22 and FY 2022-23 and also provided funding to increase provider rates, also in response to COVID-19.

As these factors increase, so too does the cost of CCCAP. Caseload often varies along with the resources made available, with more children being served when more dollars are made available. As rates or time in care increases though, more dollars are required to serve the same number of children. Enrollment in CCCAP has decreased since the start of the pandemic. The unduplicated count of children who utilized CCCAP at any point during FY 2020-21 was 24,055.

The Early Intervention (EI) program serves children from birth until age 3, and the federal law prohibits a waiting list for services. As a result, shifts in population, particularly the population of children under three years of age, can directly impact the Department’s budget for the EI program. As shown in Table 13, the population for children under three years of age has remained relatively stable. Table 14 shows that the number of children receiving EI services decreased in FY 2020-21 after years of significant increases. The reduction was due to a change in program eligibility criteria that occurred in July 2020, and fewer families accessing services due to COVID-19. Program funding was reduced to account for the caseload reduction through a FY 2021-22 budget request.

Table 13: Children Under 3 Years of Age in Colorado Population	
Year	Number of Children Under Age 3
2016	201,094
2017	200,160
2018	197,220
2019	192,506
2020	189,868
2021	188,023*
* Projected estimate	

Table 14: Monthly Average of Children Enrolled in Early Intervention Services	
Fiscal Year	Number of Children
FY 2016-17	8,236
FY 2017-18	8,542
FY 2018-19	9,295
FY 2019-20	9,225
FY 2020-21	7,782
FY 2021-22*	7,697
* July 1, 2021 - November 30, 2021.	

Office of Economic Security

The Office of Economic Security’s programs are primarily caseload-driven per eligibility factors and generally unaffected by price inflation or supply chains. Specifically, the Old Age Pension (OAP) program caseload has declined 32.2% to 16,343 in June 2021. This consistent decline is despite an estimated increase in the number of Coloradans who are potentially eligible for the program based on their age. OAP benefits are adjusted annually, based on the COLA applied by the Social Security Administration. Historically, the TANF caseload loosely follows

unemployment, rising and falling accordingly. The caseload spiked for several months at the outset of the Pandemic, rising to 16,849 in May 2020 and has consistently dropped to 11,424 at the end of FY 2020-21. The block grant funding has remained consistent. The Colorado Refugee Program caseload is aligned with the number of arrivals into the United States. The Department received an additional \$489,000 to serve the Afghan Special Immigrant Visa (SIV) population expected to be resettled in federal FY 2021-22.

However, amid the pandemic, OES is facing some direct effects on its costs and operations. In particular, the caseload-driven programs are facing issues related to shrinking pools of workers to process applications and rising costs to do the work.

Additionally, the General Assembly approved funding in 2021 to operate the National School Lunch Commodity Distribution program internally, including refurbishing warehouse space and purchasing vehicles. Given the supply chain issues affecting the commercial vehicle industry, the Department has not yet been able to procure the trucks needed to distribute USDA food around the State.

6 How is the Department’s caseload changing and how does it impact the Department’s budget? Are there specific population changes, demographic changes, or service needs (e.g. aging population) that are different from general population growth?

Office of Adult, Aging and Disability Services

Division of Aging and Adult Services

This Division does not carry caseloads per se through its Area Agencies on Aging (AAA) network. Most of the programs and services offered through the AAAs are available to anyone 60 and older, with no other income or eligibility requirements. However, we know that Colorado has more than 1.25 million residents over the age of sixty and by 2030, there will be over 1.5 million residents over the age of sixty. Compared to the rest of the United States, Colorado has the second-fastest aging population. By 2023, there will be more Coloradans over the age of 60 than under 18, which has never happened before and will become our new normal. As a result, it is anticipated that this shifting demographic will have an impact on the need for services to older Coloradans.

Division of Regional Centers

The Regional Centers have a commitment to meet both the HCBS Final Settings Rule through CMS and requirements under the Olmstead Act. As such our census has steadily declined at our Regional Centers. This means for us that we are actively placing individuals in the least restrictive environment in the homes and communities of their choice in the community. While our population has changed steadily over the past few years and we are seeing individuals that come to us with more complex needs, such as dually diagnosed with Behavioral Health, Substance Abuse, and other high intensive complex needs...this reduction in census does not mean we need fewer staff to serve. On the contrary, those with complex needs often require more staff who are highly trained and can provide 1:1 or often 1:2 coverage.

Division of Veterans Community Living Centers

Our Veteran Community Living Centers have seen a decline in our long-term care facilities due to COVID. While we are actively continuing to admit any veteran, veteran spouse or gold star

family member, the challenges with quarantines have deterred those in need of long term care from seeking such care. The VCLC challenge is also with staffing and we are watching admissions carefully until our staffing numbers for clinical, housekeeping and dietary staff can also turnaround.

Office of Behavioral Health

Community Behavioral Health

Community Behavioral Health Services consists of Mental Health Services provided primarily by Community Mental Health Centers and Clinics, Substance Abuse Treatment Providers by Managed Service Organizations and their subcontractors, Behavioral Health Crisis Services provided by the Crisis Line and Administrative Service Organizations and their subcontractors.

Each contractor is responsible for a specified geographic area to manage.

The Community Behavioral Health budget structure is not a caseload-driven budget. The Office of Behavioral Health operates safety net service contracts that cover contractor personal services, operating costs and a limited amount of fee for service for the non-Medicaid population that does not have another payer source. These contracts are capped based upon contract allocations that balance to the appropriations made through the Long Bill or special bills. Many of the clients that are served through the safety net are eventually enrolled in Medicaid because they meet Medicaid eligibility criteria.

Community Behavioral Health providers or their subcontractors typically contract with Medicaid Administrative Services organizations and the services, revenue, and Medicaid membership caseload growth are accounted for at the Department of Health Care Policy and Financing based upon their budget projection model.

Mental Health Institutes

The caseload for the Mental Health Institutes and Forensic Services continues to rise based on the number of court orders received for competency exams, sanity exams, restoration, education, and inpatient care. Between FY 2019-20 and FY 2020-21, the Department saw an increase of approximately 650 orders and continues to see historically high orders for evaluations in FY 2021-22 to date. The increase evaluations eventually lead to findings of incompetent to proceed findings, requiring resources for restoration services in both inpatient and outpatient settings. The increase in projections impacts the need for additional beds, staff and operational resources in order to meet demands and stay in compliance with a court settlement agreement.

The Department received funding to address this increased caseload through additional jail-based restoration beds, private hospital contractors, additional psychologist evaluators, and through capital construction for additional bed space at the Colorado Mental Health Institute at Pueblo and at Ft. Logan. However, it is anticipated the increase in demand will continue, and the Department will need to explore other solutions (including legislative) in order to meet the ongoing needs. The waitlist on December 6, 2021 for inpatient services was at a historic high with 352 individuals awaiting admission. The Outpatient Restoration Program has doubled in size since FY 2018-19 and is currently serving an active caseload of 733 individuals. This program is anticipated to reach capacity in FY 2021-22 with the current projected increase. The program will require additional funding for restoration services and wraparound services to meet

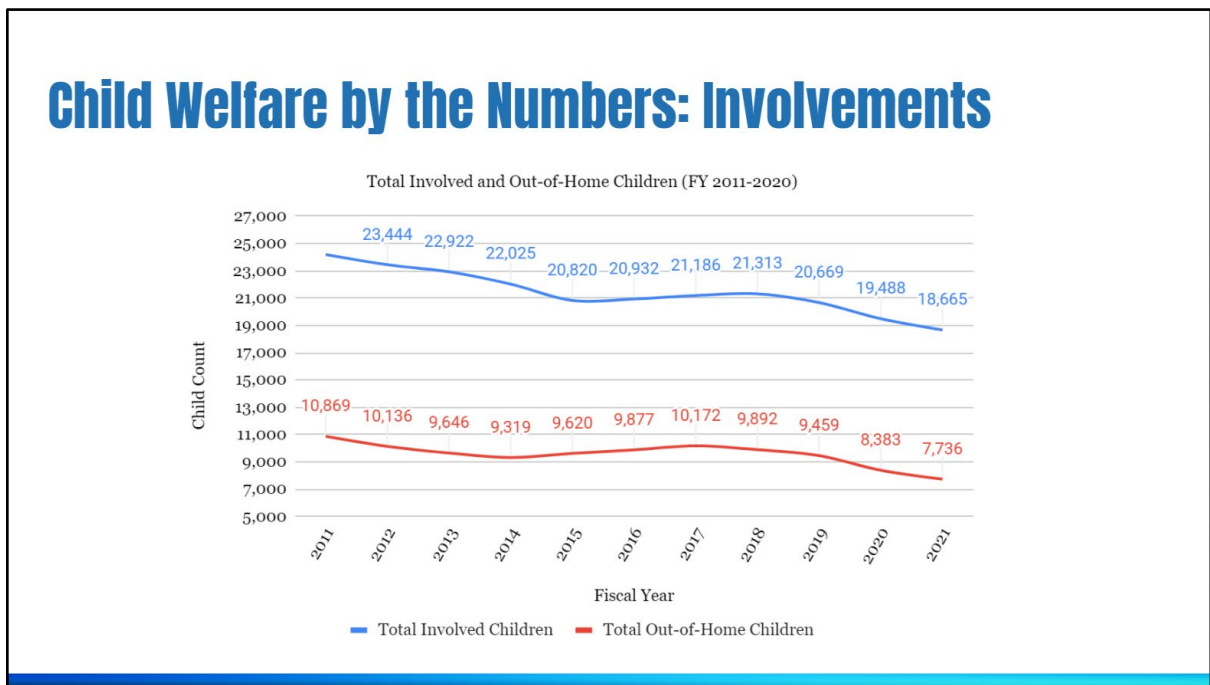
the needs of the higher-acuity individuals being served. The program would also benefit from dedicated Forensic Navigators to offer care coordination services for the individuals being served by this program to increase the program’s efficacy.

High caseload coupled with the critical staffing shortages will continue to impact OBH’s Consent Decree fines and fees liability. The original terms of the Consent Decree reset on July 1, 2022 at \$10 million (plus annual CPI-U starting June, 2020, which could increase fines up to \$1M in FY 2022-23). This does not include the costs of fees to the court-appointed Special Masters and the trust company, Cordes and Company, which is estimated at \$400,000 annually.

Office of Children, Youth and Families

Division of Child Welfare

In terms of children and youth served, the Division of Child Welfare has seen a decline in the number of involvements over the past ten years. In addition, the number of children and youth being served in out-of-home placement has also been declining as shown in the following figure.



The blue line includes the total number of children and youth in open cases, whether they’re served in-home or in an out-of-home placement. The red line is the number of children and youth being served in an out-of-home placement. Last year, nearly seventy percent of Colorado children and their families involved in an open child welfare case, received services and were able to stay together in their home. This steady decline is the result of strengthening and supporting families in earlier phases of involvement, by offering supportive services, providing resources, and effective engagement of all family members who can provide support.

Additional information on the Division of Child Welfare caseload for the past five years is shown in the following table:

Table 15: Child Welfare Caseload Data Actual 2016 - 2020					
Year	2016	2017	2018	2019	2020
Child Population (State Demographer's Office)	1,337,532	1,340,374	1,341,841	1,341,399	1,339,803
FY Referrals	96,003	101,288	109,805	113,021	107,669
FY Assessments	36,327	37,185	38,487	38,474	36,190
# of FY Out-of-home Placements	10,382	10,820	10,162	9,125	8,113

In 2020, our county departments of human services across the State continually achieved the lowest numbers of out-of-home placement and the highest percentage of kinship placements in Colorado's history. These kinship placements can be grandparents, aunts, uncles, trusted adults, and family friends.

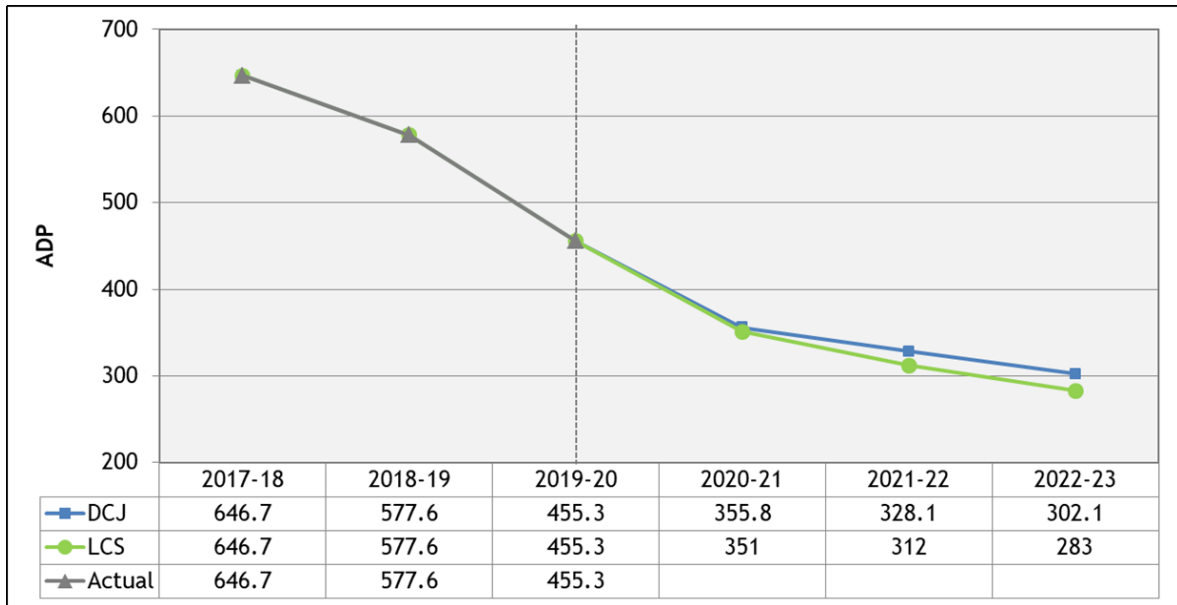
- Average Daily Out-of-Home Placement Rate State Fiscal Year (FY):
FY: 2018 = 4.34 2019 = 4.13 2020 = 3.9
- Increase of in-home involvements compared to total involvements % change over
FY: 2018 = 2.7% 2019 = 0.2% 2020 = 4.2%

Of those children being served in the child welfare system, children who are between the ages of zero to two and youth who are age fifteen plus represent the largest population. In addition, youth ages fifteen plus can struggle in achieving permanency due to separation from siblings due to family size, traumatic experiences, significant placement moves, delinquency and running away behaviors. Also, youth who are fifteen plus have a higher risk of not graduating from high school and becoming homeless. As a result, the likelihood of these youth returning into the system as adults with children is substantial. Finally, quantitative data show that this age group has a higher risk of having an Intellectual and Developmental Disability (IDD) diagnosis and higher risk of exiting child welfare through emancipation.

Division of Youth Services

The Division of Youth Services forecasts for committed youth caseloads were released in December 2020 by the Legislative Council Staff (LCS) and in January 2021 by the Division of Criminal Justice (DCJ). It is anticipated that the average daily population (ADP), will decline as shown in the following figure.

DYS Commitment Forecast



Source: Legislative Council Staff (LCS), December 2020 population projections and Division of Criminal Justice (DCJ), January 2021 population projections.

The decrease in caseload is a national phenomenon that is not specific to only Colorado and there have been a myriad of theories attempting to explain this reduction; however, a definitive, causal relationship between potential factors and the reduction has not been established. The shrinking juvenile justice population involves all aspects of the system, including declining arrests, juvenile delinquency court filings, new probation intakes, as well as detention screens, admissions, and new commitments.

It is important to note that, although caseload is declining, reductions in costs are not necessarily proportional to the caseload reductions, largely because the youth now being served in DYS have a higher level of acuity than those historically served. More specifically, the complexity of needs for our committed population has grown and continues to grow. This includes:

- The severity of their crimes.
- The complexity of their treatment needs including co-occurring treatment such as mental health and substance abuse needs.
- Higher levels of trauma/Post Traumatic Stress Disorder (PTSD) as well as aggression.
- Co-occurring treatment needs such as mental health and substance abuse which has increased from 56% in FY 2018-19 to 63% in FY 2019-20.
- The number of youth requiring mental health treatment services has increased from 64% in FY 2018-19 vs. 66% in FY 2019-20 and while this is a one-year two percentage-point increase; this area has increased by nine percentage-points since FY 2015-16.
- The need for substance abuse services have also increased from 83% in FY 2018-19 vs. 89% in FY 2019-20.

Office of Early Childhood

The Colorado Child Care Assistance Program (CCCAP) serves children birth to age thirteen, but is not an entitlement program and so its caseload is constrained more by available resources than

by shifts in population, in that not all eligible children are served. CCCAP costs are driven by three factors: (1) caseload, (2) time spent in care per capita, and (3) rates. CCCAP rates are set by the State, and are not directly impacted by inflation.

In response to COVID-19, the Department utilized stimulus funding in FY 2020-21 to increase the number of absences paid to providers, which effectively increased the amount of time a child receives paid care, and lower family copayment amounts, which increased the rate paid by the county. SB 21-236 continued these strategies in FY 2021-22 and FY 2022-23 and also provided funding to increase provider rates, also in response to COVID-19.

As these factors increase, so too does the cost of CCCAP. Caseload often varies along with the resources made available, with more children being served when more dollars are made available. As rates or time in care increases though, more dollars are required to serve the same number of children. Enrollment in CCCAP has decreased since the start of the pandemic. The unduplicated count of children who utilized CCCAP at any point during FY 2020-21 was 24,055.

The Early Intervention (EI) program serves children from birth until age three, and the federal law prohibits a waiting list for services. As a result, shifts in population, particularly the population of children under three years of age, can directly impact the Department's budget for the EI program. As shown in Table 13, the population for children under three years of age has remained relatively stable. Table 14 shows that the number of children receiving EI services decreased in FY 2020-21 after years of significant increases. The reduction was due to a change in program eligibility criteria that occurred in July 2020, and fewer families accessing services due to COVID-19. Program funding was reduced to account for the caseload reduction through a FY 2021-22 budget request.

Office of Economic Security

Temporary Assistance for Needy Families (TANF)

Following a small caseload increase of 2.5% in FY 2019-20, Colorado's TANF caseload declined substantially in FY 2020-21, dropping by 31%. The pandemic-driven caseload increase peaked in July 2020. However, in each subsequent month in FY 2020-21, the caseload declined by an average of 470 cases per month. Outside the pandemic-related caseload increase in FY 2019-20, caseloads had been trending down, with three straight years of drops greater than 3% (-3.7% in 2016-17, -3.1% in FY 2017-18, and -5.1% in FY 2018-19). However, the accelerated decline in FY 2020-21 reflects the influence of some extenuating economic factors.

County block grant allocations, from the State's federal TANF block grant, pay for benefits to Coloradans determined eligible for TANF benefits. When counties underspend their block grants, the unspent funds carry forward in their County TANF Reserves, up to a statutory cap. If a county overspends its block grant, funds can be covered through expenditures from other counties or a county could use its county TANF Reserve. As of the end of FY 2020-21, counties collectively have more than \$61 million in reserve and all but one county has reached its respective cap. Caseload changes are not expected to impact the Department's budget.

Old Age Pension (OAP)

The Old Age Pension (OAP) caseload continued to decrease in FY 2020-21, but at an accelerated level relative to the last four fiscal years. OAP caseload dropped 13% in FY 2020-21 compared

to -4.7% in FY 2019-20, -4.8% in FY 2018-19, - 4.1% in FY 2017-18, and -2.7% in FY 2016-17. This decrease is counter to the population growth among Coloradans over age 65. This year, the Department explored issues surrounding the decrease and found that the percentage of the population likely eligible for OAP is growing at a lower rate than the overall 65+ population, and households' additional resources may be influencing those who are eligible.. The Department presents quarterly OAP spending projections to the Office of State Planning and Budgeting (OSPB) and the General Assembly in order to inform the State's economic forecasts. Given the effects of a declining caseload, the Department used available funds in FY 2020-21 to pay additional benefits to OAP participants in order to ensure Colorado meets its Maintenance of Effort (MOE) requirement with the Social Security Administration. Falling short of its MOE obligation puts Colorado at-risk of being sanctioned for one quarter of its Medicaid funding.

Aid to the Needy Disabled (AND)

The AND caseload decrease accelerated in FY 2020-21, dropping by 31.6%.. The program has seen a steady decline in cases over the last several fiscal years: -11.4% in FY 2019-20, -3.0% in FY 2018-19, -12.6% in FY 2017-18, and -8.2% in FY 2016-17. The Department is exploring possible factors associated with the decline. Similar to OAP, the Department can make additional payments to AND-Colorado Supplement recipients in order to meet the State's MOE requirement.

Colorado Refugee Services Program (CRSP)

Overall, funding and demand for services has remained relatively static in Colorado. Nationally, new refugee and Special Immigrant Visa arrivals remained at an all time low in FY 2020-21, about 25% of historical averages, partially due to the Covid-19 Pandemic. Yet, other refugee eligible populations (e.g. asylees) have increased. Furthermore, refugee populations qualify for services for up to five years post arrival. In federal FY 2020-21, the refugee caseload seeking services decreased only 5% from the previous year as the refugee population who are beyond their first year of resettlement are seeking employment and other services.

Some components of the Department's federal funding, such as Refugee Cash Assistance (which is time-limited from date of arrival), have decreased with the decline in arrivals. However, CRSP has architected a 21% increase in the average amount paid to each case over the last three years (compared to the previous three years) by restructuring the payment schedule to issue tiered amounts, with the highest payments coming in the first few months following enrollment.

House Bill 21-1150 (HB21-1150) was signed on June 25, 2021. This act created the Colorado Office of New Americans (ONA) within the Colorado Department of Labor and Employment (CDLE). The bill includes a provision for the convening of stakeholders and State agencies to develop recommendations to the Governor's Office per the ongoing administration of the CRSP. Recommendations are required to be presented no later than one year following the act's effective date.

Supplemental Nutrition Assistance Program (SNAP)

Following a trend of slightly declining SNAP caseloads from FY 2014-15 through FY 2016-17, Colorado's SNAP caseload increased slightly (2.4%) in FY 2017-18. Then, caseload jumped 23.5% in FY 2019-20 and 12% in FY 2020-21. (As of November 2021, SNAP caseload is 20% higher than in January 2020, prior to the Pandemic.) In addition to the Pandemic-driven caseload, the Department's outreach efforts have influenced the SNAP caseload. In federal FY 2020-21,

SNAP Outreach goals were to penetrate into the higher education community (i.e. a new target audience) and expand services with WIC (Women Infants and Children program) clinics to improve cross-program enrollment. In federal FY 2021-22, the Department is striving to reach 29,211 Coloradans. SNAP outreach requires 50% of the outreach costs to be matched with State and/or private funds. In FY 2020-21, the General Assembly appropriated \$400,000 in General Fund for SNAP outreach. This General Fund appropriation, combined with \$100,000 of private funds, leveraged \$500,000 in federal funds, for a total investment of \$1 million in Colorado for SNAP outreach efforts. The General Assembly appropriated an additional \$500,000 General Fund for SNAP outreach in FY 2021-22 for a total investment of \$2 million for SNAP outreach. Once a SNAP application is approved, all benefits are paid directly to the household by the federal government.

Colorado implemented Pandemic Electronic Benefits Transfer (P-EBT) in FY 2020-21 and FY 2021-22. The first iteration of the program's benefits was funded through the Families First Coronavirus Response Act. The federal guidance included no administrative funds to states to develop the program to issue benefits. P-EBT provided nearly \$50 million in benefits to support more than 180,000 Colorado children who would have received free or reduced-price breakfasts and lunches while in school or subsidized child care during the spring of 2020. The Consolidated Appropriations Act provided funds to extend P-EBT, along with administrative funds to implement it. Colorado issued \$338 million in benefits to students and children in childcare for the 2020-2021 school year plus \$179 million for the Summer of 2021. Colorado has submitted a P-EBT plan to FNS to cover the 2021-2022 school year and Summer 2022.

Employment First

Colorado's Employment First caseload declined 38% between FY 2019-20 and FY 2020-21. However, the Department is beginning to see an increase in the Employment First caseload across the State as a result of two recent system design projects, including the federal SNAP 2 Skills project and a rapid cycle evaluation with Mathematica. Both projects aim to increase the focus on participation and engagement in Employment First, using behavioral science insights. A number of Employment First program operators participated in these projects, and systematic approaches from each study are being implemented across the State. The Department anticipates a caseload increase this year (the goal is to reach 6,550 SNAP recipients) through county departments of human/social services and Third-Party Partner recruitment efforts.

Low-income Energy Assistance Program (LEAP)

The LEAP caseload increased during the 2020-2021 season, likely at least partially attributed to the ongoing effects of the Pandemic on Colorado households. LEAP funding is provided to the State through a federal block grant. The Department allocates funds to counties/LEAP contractor (Discover Goodwill) to administer the program in counties. Because the program is 100% federally funded, caseload changes are not expected to impact the Department's budget.

During federal FY 2021-22, the Department will administer the Low Income Household Water Assistance Program (LIHWAP) in conjunction with LEAP. Colorado received \$15 million in LIHWAP funding through the Consolidated Appropriations Act and the American Rescue Plan Act (ARPA). Colorado has aligned program eligibility with LEAP eligibility, with households required to be approved for LEAP, pay a water bill directly to a water vendor, and have a water account in arrears and/or shut off. No additional application is required to apply for LIHWAP, only a supplemental page on the LEAP application to collect the necessary water bill information.

Child Support Services

Increased child support collections that have been passed directly to Colorado Works Basic Cash Assistance cases (versus retained by the government) have increased the Department's cost to pay the federal government its share of collections and backfill the counties (50% of collections). This requires a General Fund appropriation to pay the federal government and counties their shares of collections that are now passing directly to households. In 2020, HB 20-1100 made important structural changes to the pass-through policy to ensure that it is not turned off in the last month or two of the fiscal year, if collections exceed the appropriation, reducing the risk to Colorado's poorest families. Caseload changes are not expected to impact the Department's budget.

- 7 **In some cases, the roles and duties of existing FTE may have changed over time. Please list any positions that have been created in the Department since FY 2019-20 that were not the result of legislation or a decision item.**

The following table illustrates a summary of the positions created in the Department since FY 2019-20. A detailed list of positions that were created and did not result from legislation or a decision item is provided in Attachment [B \(Q7\): Positions Added](#).

Please note: The "Positions Created" do not necessarily indicate an increase in overall positions or staffing levels. It is common when staffing priorities change for vacant positions to go unfilled and for new positions to be created using the same appropriated funding. In this way, Department and program management can shift resources to meet changing business needs and avoid the need for additional funding. Positions created include state temporary positions and the creation of substitute positions (S Positions), which are used to fill positions and allow the departing employee to train their replacement. In FY 2020-21, there were 64 temporary positions created and 15 substitute positions created and 80 positions abolished, for a net gain of 104 new positions, including those created by legislation. In FY 2021-22, there were 18 temporary positions created, six substitute positions created and 29 positions abolished, for a net gain of 148 positions, including those created by legislation.

Fiscal Year	Total New Positions	Created by Leg/DI	Temp/S Positions	Positions Abolished	Net Increase/Decrease
2020-21	263	45	79	80	59
2021-22	201	15	24	29	133
Totals	464	60	103	109	192

For all FY 2022-23 budget requests that include an increase in FTE:

- a. Specify whether existing staff will be trained to assume these roles or these duties, and if not, why;
- b. Specify why additional FTE are necessary; and
- c. Describe the evaluation process you used to determine the number of FTE requested.

See [Attachment C \(Q7\): Requests for Additional FTE](#)

- 8 **Please describe any ongoing or newly identified programmatic impacts for the Department resulting from cash fund transfers as part of the FY 2019-20 and FY 2020-21 balancing process.**

The Department's programs have not been affected by cash fund transfers in FY 2019-20 and FY 2021-22 to balance the State's budget.

- 9 **Please describe the Department's FY 2020-21 vacancy savings, as well as projected vacancy savings for FY 2021-22 and FY 2022-23. How has the Department utilized vacancy savings in recent years?**

Due to increased overtime and contracted staffing costs related to the COVID pandemic, the Department did not have vacancy savings in FY 2020-21 and is not expected to have vacancy savings in FY 2021-22. Overtime costs are 1.5 times the base employee salary and contracted staffing at 24/7s is currently costing anywhere from 2 to 3 times the amount of normal staffing. Generally speaking, vacancies are driving increased costs rather than savings.

- 10 **State revenues are projected to exceed the TABOR limit in each of the next two fiscal years. Thus, increases in cash fund revenues that are subject to TABOR will require an equivalent amount of General Fund for taxpayer refunds. Please:**
- a. **List each source of non-tax revenue (e.g., fees, fines, parking revenue, etc.) collected by your department that is subject to TABOR and that exceeds \$100,000 annually. Describe the nature of the revenue, what drives the amount collected each year, and the associated fund where these revenues are deposited.**
 - b. **For each source, list actual revenues collected in FY 2020-21, and projected revenue collections for FY 2021-22 and FY 2022-23.**
 - c. **List each decision item that your department has submitted that, if approved, would increase revenues subject to TABOR collected in FY 2022-23.**

For Question 10, parts a and b see [Appendix D: Non-Tax Revenues Collected and Subject to TABOR](#)

The Department has not submitted decision items for FY 2022-23 that will increase revenues subject to TABOR.

- 11 **Please describe one-time federal stimulus funds (such as the CARES Act, ARPA, and the Federal Infrastructure Investment and Jobs Act) that the Department has received or expects to receive.**

NOTE: A template for providing data for this question will be provided by the JBC Staff.

See [Attachment E: Stimulus Funds](#).

Attachment A: CDHS Public Awareness Campaign Information (Common Question 3)

Office	Campaign Name	Brief Description of Campaign Goals	Total FY 2020-21 Campaign Budget	Paid Media	Earned Media	Outcomes/Metrics Concerning Effectiveness	Coordination and Collaboration with Other State Departments or Federal Departments
OAADS (VCLC)	Veterans Community Living Center at Homelake Advertising/Public Awareness	Increase census, recruit staff, enlist community support, bring attention to veterans, increase community awareness	KSLV/KYDN/ Country Top 40 \$3,694.20 (Cash Fund)	KSLV/KYDN/ Country Top 40 46,000 listening audience throughout San Luis Valley. These are for prospective veterans, families and community.	Free press releases are provided to local newspapers to promote events, celebrate veterans and highlight staff	Over the years, the paid ads have resulted in direct admissions, inquiries for admission, attendance at events, volunteer expansion and increased community support. They have also resulted in donations to the veterans' home for the resident fund.	N/A
OAADS (VCLC)	Bruce McCandless Veterans Community Living Center Advertising Campaign	Increase census, create awareness, staff recruitment, holiday resident and/or staff recognition ads, recognition of veterans organizations and community involvement with residents, volunteers, staff and families.	Radio ads are \$2,100 (Cash Fund) Bulletin ads are \$445 (Cash Fund)	Advertising on Star Country/KRLN Radio stations and a small ad in a local bulletin	Press releases are provided for events such as Veterans Day, Memorial Day, resident accomplishments, resident events, community activities and special programs. The Canon City Daily Record, Pueblo Chieftain, Florence Citizen, as well as other publications will run these articles and stories.	Over the years, the paid ads have resulted in direct admissions, inquiries for admission, donations to the resident fund, attendance at events, staff recruitment, volunteer expansion and increased community support.	N/A

OEC	Colorado Shines Consumer Education and Engagement	Increase awareness of the Colorado Shines brand, child care quality improvement, child development resources, and usage of the Colorado Shines website and statewide child care referral phone line	\$109,957 (Colorado Shines Quality Improvement funds (26% federal Child Care Development Fund and 74% State General Fund from the Infant Toddler Quality & Availability (ITQA) program))	\$64,997 (digital advertising, Colorado Parent print advertising)	N/A	The Department will measure the number of visits to the Colorado Shines website, the Early Learning and Development Guidelines website, the number of calls to the Colorado Shines Child Care Referral at Mile High United Way, and the number of child care searches completed	Colorado Department of Education, Early Childhood Councils, Child Care Resource & Referral, federal Administration for Children and Families (Child Care and Development Fund administration)
OEC	SafeCare Colorado	Increase awareness of, and the number of referrals to, the SafeCare Colorado home visiting program	\$200,000 (State General Fund)	\$100,000 (digital advertising)	N/A	The Department will measure the number of visits to the SafeCare Colorado webpage and the number of referrals made to the program	N/A
OES	Low-Income Energy Assistance (LEAP)	The campaign is geared towards educating the public of the LEAP heating season, eligibility requirements, and the application process.	\$220,000 (federal LEAP allocation)	\$160,000	N/A	The vendor will track and monitor outcomes.	N/A

OES	Eat Better Together (SNAP-Ed)	The mission of the Eat Better Together campaign is to promote and encourage Coloradans to make healthy food choices by including more fruits and vegetables into their diets. The campaign was created in 2019 and continues in a sustainability phase.	\$871,288 (FFY 2018-19); \$66,049 (FFY 2019-20); \$100,000 (FFY 2020-21) 100% federal SNAP-Ed dollars	\$45,000	N/A	In FFY 20-21, the Social Marketing and Outreach campaign successfully generated 3.9M Impressions, 738K Exploratory Engagements (defined as clicks, video/GIF completions, web sessions, reactions, Facebook/Instagram saves, and interactions on the campaign's tips page), and 2.9K Active Engagements (defined as shares, comments, page likes, Pinterest saves, digital experience social shares, and recipe saves).	N/A
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OBH	Colorado Crisis Services (CCS)/Below the Surface (BTS)	CCS: Increase statewide awareness of services across all audiences about crisis services. Create understanding of how and when to use services, as well as what to expect when utilizing the services. BTS: Increase teens' awareness of Colorado's Crisis Text Line.	The Office of Behavioral Health's base \$600,000 General Fund appropriation for the Crisis System Public Information Line item was reduced as part of the JBC's budget balancing actions for FY 2020-21. As a result, the Office of Behavioral Health did not spend General Fund money in FY 2020-21. The Office of Behavioral Health, however, did dedicate \$150K Mental Health Block Grant and \$600K State Opioid Response federal funds on this campaign. FY20-21: Total CCS Budget: \$750,000 FF	FY20-21 Total CCS Total Actual Spend Across ALL efforts: \$630,069.85 FY20-21 Total General Market Media Pay Per Click: \$55,591.61 Social: \$38,487.11 Digital Display: \$50,313.03 Digital Video: \$100,819.99 TV: \$48,000 Print Ads: \$2,950 Entravision: \$25,000 Juneteenth: \$5,000 Pride: \$7,500 Total: \$333,661.74 FY20-21 Total BTS Media Pay Per Click: \$9,835.04 Social: \$31,858.40 Digital Video: \$27,849.68 YouTube: \$35,294.13	Reach: FY20-21 (through Nov. 30): 624,585,879	FY 20-21 CCS Website Metrics Website Sessions: 306,598 Walk-in Center Engagements: 6,187 Substance Use CTA clicks: 848 Page Views (BelowTheSurfaceCO.com): 12,502 FY 20-21 General Market Media Results Total Impressions: 40,508,637 PPC: 672,202 Digital Display: 18,931,815 Digital Video: 13,474,426 Social: 7,430,194 Total Clicks: 153,511 PPC: 53,800 Digital Display: 17,141 Digital Video: 41,610 Social: 40,960 FY 20-21 Below the Surface Media Metrics Total Impressions: 5,656,741 PPC: 26,663 Digital Video: 1,681,811 Social: 3,948,267	Partnerships with the Department of Agriculture targeting rural audiences, Colorado Department of Public Health and Environment on COVID and mental health messaging, and the Colorado Consortium for Prescription Drug Abuse Prevention on substance use messages.
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				<p>Denver Post: \$6,000 Total Spend: \$110,837.25</p> <p>FY20-21 Total Substance Use Media Pay Per Click: \$12,744.75 Social: \$0 Digital Display: \$31,300.95 Digital Video: \$53,204.67 TV: \$24,000 Total: \$121,250.37</p> <p>FY20-21 Total Walk-in Media Pay Per Click: \$10,235.65 Social: \$9,290.26 Digital Display: \$44,794.58 Total: \$64,320.49</p>		<p>Total Clicks: 19,295 PPC: 759 Digital Video: 7,461 Social: 9,751</p>	
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OBH	Lift the Label/Recovery Cards Project	Remove the damaging labels and stigma that prevent those with opioid addiction from seeking effective treatment.	<p>Lift The Label is on the federal fiscal year, so the two Federal Fiscal Years (FFY) that fall into the State Fiscal Year are included.</p> <p>FFY 20-21 (September 30, 2020 - September 29, 2021) \$1,200,000 FF</p> <p>FFY 21-22 (September 30, 2021 - September 29, 2022) \$1,250,000 FF</p>	<p>Paid Media Budget</p> <p>FFY 20-21 (September 30, 2020 - September 30, 2021) \$511,301</p> <p>FFY 21-22 (September 30, 2021 - September 29, 2022) \$300,000</p>	<p>Since its launch in May 2018, the campaign has caught the attention of both local and national media outlets, resulting in more than 122 million earned media impressions over the lifetime of the campaign.</p>	<p>The campaign has amassed over 418 million impressions during its lifetime. In FY 20-21, there were 74,247 website sessions. Lift the Label was named a model anti-stigma campaign in the American Journal of Public Health.</p> <p>The Recovery Cards Project, launched under the Lift The Label brand, is a line of free greeting cards that support someone's recovery from addiction. Since its launch in September 2019, 55,587 cards have been sent to people in all 50 states through either online orders of individual cards, or agencies requesting display kits that come stocked with 250 cards for their agencies who serve people who need to send or receive a message of hope.</p>	<p>We worked with Tough As A Mother to promote the card we created in collaboration with them on Mother's Day.</p>
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OBH	COACT (Colorado’s high-fidelity wraparound program for children, youth and families)	<p>1. Reduce stigma around mental health topics and encourage frank discussions on mental health experiences.</p> <p>2. Educate audiences on common mental health disorders and when to seek support.</p> <p>3. Raise awareness of state resources that can support individuals and families.</p> <p>4. Recognize inequities that preclude people from accessing mental health services.</p>	<p>Total budget of the project was \$11,000.</p> <p>COACT used \$5,989.55 FF along with the integration of funds from Colorado Crisis Services, Office of Behavioral Health, Colorado Department of Public Health & Environment, and the Office of Early Childhood</p>	<p>FY 20-21</p> <p>1.91 million impressions</p> <p>1,600 clicks</p> <p>\$0.006 per impression</p> <p>\$0.14 per click</p>	<p>7 articles including:</p> <p><u>Ranchers Struggle with Access to Mental Health Services as COVID Puts Stress on Rural Communities</u>, People</p> <p><u>May is Mental Health Awareness Month</u>, Colorado State Publications Blog</p> <p><u>CDPHE gives an update on COVID-19</u>, Fox 31</p> <p><u>May is Mental Health Month in Colorado</u>, Fox 31</p> <p><u>Mental Health Awareness Month More Important Than Ever In Post-Pandemic World</u>, CBS 4</p> <p><u>Colorado leaders address mental health and COVID-19 recovery</u>, KKTU</p> <p><u>Colorado leaders advocate for ‘healing together’ during Mental Health Month in May</u>, KRDO</p>	<p>Overall, OBH has continued to leverage this campaign to elevate awareness of mental health in Colorado.</p> <p>Paid media accounted for most impressions by far, reaching about 35% of Coloradans.</p> <p>Partnering with Mental Health Colorado garnered well-rounded media coverage.</p>	<p>SAMHSA no longer requires activities connected to this important awareness month; however, it continues to be a value to talk about mental health in Colorado.</p> <p>FY20-21 campaign was a joint effort involving the Office of Behavioral Health, the Office of Early Childhood, the Colorado Department of Public Health & Environment, the CDHS Executive Communications team, the Office of Children, Youth and Families, and the Colorado Department of Agriculture</p>
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<p>OBH (joint campaign with CDPHE)</p>	<p>Forward Together (previously called Healthy Youth Campaign before branding was established)</p>	<p>To impact multiple health behaviors and outcomes, including tobacco, marijuana, opioid, alcohol and other substance use and risky behaviors through a culturally responsive, strengths- based social marketing and outreach campaign.</p>	<p>FY 21 budget (7/1/21 - 6/30/22) \$2,930,762 total/\$1,625,200 of which is from OBH</p>	<p>FY21 Paid Media \$1,807,000 (includes \$50,000 from Summit County)</p>	<p>FY 21 Earned Media \$20,051</p>	<p>Campaign launched September 2020. As of November 2021, the adult- parent focused campaign has amassed over 58 million impressions, and the youth focused campaign has amassed over 80 million impressions.</p>	<p>Forward Together is a collaboration of CDPHE and CDHS.</p>
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<p>OBH (in partnership with Managed Service Organizations)</p>	<p>Tough as a Mother</p>	<p>Connect pregnant, postpartum and parenting moms to SUD treatment providers in their communities -Decrease stigma around seeking SUD treatment as a mom</p>	<p>\$110,055 FF total budget for 2020/2021</p> <p>All of the campaign funds are OBH funds in contract with our Managed Service Organizations, so the MSOs actually contribute the dollars from OBH as follows:</p> <p>\$68,480- Signal Behavioral Health Network \$6k- Mental Health Partners \$22,575 AspenPointe \$13k- WestSlope Casa</p>	<p>\$72,800- total budget for 2020/2021</p>	<p>No budget for earned media activities in FY 20/21.</p>	<p>Social Media Impressions: 499,870 Engagements 14,860 Post Link Clicks: 1,963</p>	<p>Collaborated with Lift the Label’s Recovery Cards Project to create a new recovery card for moms seeking treatment and recovery.</p> <p>Collaboration with CDPHE’s maternal child health team in promotion of Tough as a Mother.</p>
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OCYF	CO4Kids Campaign - Colorado Child Abuse and Neglect Public Awareness Campaign	Colorado Child Abuse and Neglect Public Awareness Campaign to engage all Coloradans in strengthening families and promotes the Colorado Child Abuse and Neglect Hotline 844-CO-4-Kids.	The Department received an appropriation of \$1,008,890 in SFY 2020-21 from the General Fund to continue to support one full-time employee and the continued implementation of the Child Abuse and Neglect Hotline Public Awareness Campaign.	\$644,328	\$102,150.50	<p>-During FY 20-21, the campaign delivered more than 630 million overall impressions with 4% reaching a Latinx audience.</p> <p>-During FY20-21, the online mandatory reporter training - a tool to educate professionals mandated to report child abuse and neglect in Colorado - was taken by 26,867 individuals.</p> <p>- Prior to the launch of the campaign in 2015, it was estimated that 75% of reports of child abuse and neglect in Colorado came from mandatory reporters of child abuse and neglect. In FY20-21, 58% of all calls through the hotline system came from non-mandatory reporters, individuals who are not required by law to report child abuse and neglect, whereas mandatory reporters made up 41% of all child abuse and neglect reports.</p>	<p>For FY 20-21, the Department contracted \$895,112.00 of these General Fund dollars to continue the CO4Kids Campaign by supporting shared messaging, earned media, paid media, social media and an extensive toolkit of materials to help county departments and nonprofits raise awareness to support the promotion of the hotline and reporting.</p> <p>The Department worked with the Colorado Department of Education, teachers and advocacy groups to develop and promote an online toolkit to help teachers identify signs of abuse and neglect in an online classroom.</p>
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						<p>- In FY 20-21, there were 229,534 calls to the Child Abuse and Neglect Hotline System.</p> <p>- During FY 20-21 OCYF did 24 media interviews and child abuse prevention was featured in 638 news articles.</p>	
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Attachment B (Q7): Positions Added

CDHS Positions Created

FY 2020-21 & FY 2021-22 (through 12/13/2021)

FY	Count of Agency	Total New			
		Fiscal Year	Pos	Leg/DI	Other
21	263	2020-21	263	45	218
22	201	2021-22	201	15	186
Grand Total	464	Totals	464	60	404

Postions Created in Fiscal Year

FY 2021-22 * * through Dec 13, 2021

Total Positions Created	201
Less Postions Created due to DI or Legislation	15

FY 2021-22	Postions created not due to DI or Legislation	186
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FY 2020-21

Total Positions Created	263
Less Postions Created due to DI or Legislation	45

FY 2020-21	Postions Created not due to DI or Legislation	218
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Note: The Department is not able to identify from this data which positions were or were not created due to DI or Legislation

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06496	IHA-06496	MKTG & COMM SPEC III	DEPT OF HUMAN SERVICES	IHBA COMMUNICATIONS DIRECTOR	7/13/2020	21
IHA	95835	IHA-95835	ACCOUNTING TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	7/13/2020	21
IIB	04869	IIB-04869	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	7/13/2020	21
IIB	06148	IIB-06148	HEALTH PROFESSIONAL VI	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	7/13/2020	21
IIC	04940	IIC-04940	NURSE III	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	7/13/2020	21
IIC	04941	IIC-04941	PROGRAM MANAGEMENT II	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	7/13/2020	21
IKA	00285	IKA-00285	MID-LEVEL PROVIDER	DIV OF YOUTH CORRECTIONS	DYSR-ADAMS YOUTH SVC FACILITY	7/13/2020	21
IKA	00297	IKA-00297	HEALTH PROFESSIONAL V	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL ADMINISTRATION OFC	7/13/2020	21
IKA	00311	IKA-00311	YOUTH SERV COUNSELOR II	DIV OF YOUTH CORRECTIONS	DYSR-NORTH EAST REGIONAL OFFICE	7/13/2020	21
IKA	00317	IKA-00317	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	7/13/2020	21
IKA	00328	IKA-00328	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	7/13/2020	21
IKA	00335	IKA-00335	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	7/13/2020	21
IKA	00339	IKA-00339	NURSE I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	7/13/2020	21
IKA	00375	IKA-00375	ANALYST IV	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL ADMINISTRATION OFC	7/13/2020	21
IKA	00384	IKA-00384	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	7/13/2020	21
IKA	00399	IKA-00399	PROGRAM MANAGEMENT II	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	7/13/2020	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	00414	IKA-00414	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-PUEBLO YOUTH SVC FACILITY	7/13/2020	21
IKA	02130	IKA-02130	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02131	IKA-02131	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02132	IKA-02132	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02133	IKA-02133	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02134	IKA-02134	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02135	IKA-02135	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02136	IKA-02136	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02137	IKA-02137	STATE TEACHER II	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02138	IKA-02138	STATE TEACHER III	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02139	IKA-02139	PROGRAM ASSISTANT I	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	02144	IKA-02144	STATE TEACHER II	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	7/13/2020	21
IKA	05434	IKA-05434	SOCIAL WORK/COUNSELOR III	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	7/13/2020	21
IKA	91322	IKA-91322	PROGRAM ASSISTANT I	DIV OF YOUTH CORRECTIONS	DYSR-PUEBLO YOUTH SVC FACILITY	7/13/2020	21
IKA	91919	IKA-91919	HEALTH PROFESSIONAL V	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL ADMINISTRATION OFC	7/13/2020	21
ILB	88558	ILB-88558	TEMPORARY AIDE	VET COMM LVNG CTR AT HOMELAKE	IHKA VET COMM LVNG CTR AT HOMELAKE	7/13/2020	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
ILB	88559	ILB-88559	TEMPORARY AIDE	VET COMM LVNG CTR AT HOMELAKE	IHKA VET COMM LVNG CTR AT HOMELAKE	7/13/2020	21
ILB	88560	ILB-88560	TEMPORARY AIDE	VET COMM LVNG CTR AT HOMELAKE	IHKA VET COMM LVNG CTR AT HOMELAKE	7/13/2020	21
ILC	00187	ILC-00187	THERAPY ASSISTANT I	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	7/13/2020	21
IHA	06490	IHA-06490	ANALYST IV	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	8/17/2020	21
IHA	06493	IHA-06493	SOC SERVICES SPEC III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/17/2020	21
IHA	06497	IHA-06497	SOC SERVICES SPEC III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/17/2020	21
IHA	06498	IHA-06498	COMPLIANCE SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/17/2020	21
IHA	81130	IHA-81130	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	8/17/2020	21
IHA	81153	IHA-81153	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHAA EXECUTIVE DIRECTORS OFFICE	8/17/2020	21
IHA	81154	IHA-81154	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/17/2020	21
IHA	93550	IHA-93550	UTILITY PLANT OPER II	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - SD	8/17/2020	21
IIB	06150	IIB-06150	PROGRAM MANAGEMENT I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	8/17/2020	21
IKA	00312	IKA-00312	YOUTH SERV COUNSELOR II	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL REGIONAL OFFICE	8/17/2020	21
IKA	00320	IKA-00320	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/17/2020	21
IKA	00332	IKA-00332	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/17/2020	21
IKA	00336	IKA-00336	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-GILLIAM YOUTH SVC FACILITY	8/17/2020	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	00352	IKA-00352	PROGRAM ASSISTANT I	DIV OF YOUTH CORRECTIONS	DYSR-NORTH EAST REGIONAL OFFICE	8/17/2020	21
IKA	00368	IKA-00368	YOUTH SERV COUNSELOR II	DIV OF YOUTH CORRECTIONS	DYSR-SOUTHERN REGIONAL OFFICE	8/17/2020	21
IKA	00377	IKA-00377	PROGRAM ASSISTANT I	DIV OF YOUTH CORRECTIONS	DYSR-ADAMS YOUTH SVC FACILITY	8/17/2020	21
IKA	05693	IKA-05693	PROGRAM MANAGEMENT III	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL REGIONAL OFFICE	8/17/2020	21
IHA	06499	IHA-06499	COMPLIANCE SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	9/21/2020	21
IHA	06501	IHA-06501	TRAINING SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	9/21/2020	21
IHA	06503	IHA-06503	TRAINING SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	9/21/2020	21
IHA	06504	IHA-06504	TRAINING SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	9/21/2020	21
IHA	06507	IHA-06507	PROGRAM MANAGEMENT II	DEPT OF HUMAN SERVICES	IHGA DIR OFC ECONOMIC SECURITY	9/21/2020	21
IHA	06511	IHA-06511	CONTRACT ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHGA DIR OFC ECONOMIC SECURITY	9/21/2020	21
IHA	81155	IHA-81155	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHGA EMPLOYMENT & BENEFITS SVCS	9/21/2020	21
IIB	06149	IIB-06149	PSYCHOLOGIST CANDIDATE	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	9/21/2020	21
IIC	92344	IIC-92344	PROGRAM MANAGEMENT I	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	9/21/2020	21
IKA	00287	IKA-00287	MID-LEVEL PROVIDER	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	9/21/2020	21
IKA	00302	IKA-00302	FOOD SERV MGR I	DIV OF YOUTH CORRECTIONS	DYSR-ADAMS YOUTH SVC FACILITY	9/21/2020	21
IKA	00321	IKA-00321	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	9/21/2020	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	85002	IKA-85002	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL REGIONAL OFFICE	9/21/2020	21
IKA	91866	IKA-91866	YOUTH SERV COUNSELOR II	DIV OF YOUTH CORRECTIONS	DYSR-WESTERN REGIONAL OFFICE	9/21/2020	21
ILC	00188	ILC-00188	FOOD SERV MGR I	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	9/21/2020	21
ILG	90209	ILG-90209	CUSTODIAN III	VET COMM LVNG CTR AT FITZSIMNS	IHKA VET COMM LVNG CTR AT FITZSIMNS	9/21/2020	21
IHA	06500	IHA-06500	COMPLIANCE SPECIALIST IV	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	10/12/2020	21
IHA	06502	IHA-06502	TRAINING SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	10/12/2020	21
IHA	06512	IHA-06512	TECHNICIAN III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	10/12/2020	21
IHA	06516	IHA-06516	TRAINING SPECIALIST III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	10/12/2020	21
IHA	70017	IHA-70017	SENIOR EXECUTIVE SERVICE	DEPT OF HUMAN SERVICES	IHHA DIR OFC OF ADMIN SOLUTIONS	10/12/2020	21
IHA	90001	IHA-90001	SENIOR EXECUTIVE SERVICE	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	10/12/2020	21
IKA	00279	IKA-00279	ANALYST VI	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL REGIONAL OFFICE	10/12/2020	21
IKA	00296	IKA-00296	TRAINING SPECIALIST III	DIV OF YOUTH CORRECTIONS	DYSR-STAFF DVLPMNT CNTR AT MVYSC	10/12/2020	21
IHA	06508	IHA-06508	COMPLIANCE SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	11/16/2020	21
IHA	06509	IHA-06509	COMPLIANCE SPECIALIST III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	11/16/2020	21
IHA	06510	IHA-06510	COMPLIANCE SPECIALIST IV	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	11/16/2020	21
IHA	06519	IHA-06519	CUSTODIAN I	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - SD	11/16/2020	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06520	IHA-06520	ELECTRICAL TRADES II	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - SD	11/16/2020	21
IHA	06522	IHA-06522	TRAINING SPECIALIST IV	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	11/16/2020	21
IIB	06173	IIB-06173	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/16/2020	21
IIB	06183	IIB-06183	HEALTH PROFESSIONAL III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/16/2020	21
IIB	06188	IIB-06188	CLINICAL BEHAV SPEC II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/16/2020	21
IIB	06201	IIB-06201	PSYCHOLOGIST I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/16/2020	21
IIB	06203	IIB-06203	SOCIAL WORK/COUNSELOR III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/16/2020	21
IIB	06204	IIB-06204	DINING SERVICES III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/16/2020	21
IIB	06206	IIB-06206	DINING SERVICES V	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/16/2020	21
IKA	86045	IKA-86045	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	11/16/2020	21
IHA	06517	IHA-06517	SOC SERVICES SPEC III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	12/21/2020	21
IHA	06518	IHA-06518	PROGRAM ASSISTANT II	DEPT OF HUMAN SERVICES	QAQI ADMINISTRATIVE REVIEW	12/21/2020	21
IHA	06523	IHA-06523	TECHNICIAN II	DEPT OF HUMAN SERVICES	IHEA AGING AND ADULT SERVICES	12/21/2020	21
IHA	06525	IHA-06525	PROGRAM MANAGEMENT II	DEPT OF HUMAN SERVICES	IHBA DED OF ENTERPRISE PTNRSHPS	12/21/2020	21
IHA	06530	IHA-06530	ANALYST III	DEPT OF HUMAN SERVICES	IHGA EMPLOYMENT & BENEFITS SVCS	12/21/2020	21
IHA	06533	IHA-06533	HUMAN RESOURCES SPEC VI	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	12/21/2020	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	81156	IHA-81156	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	QAQI ADMINISTRATIVE REVIEW	12/21/2020	21
IHA	81157	IHA-81157	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	QAQI ADMINISTRATIVE REVIEW	12/21/2020	21
IIB	06045	IIB-06045	DATA MANAGEMENT III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ FT LGN	12/21/2020	21
IIB	06151	IIB-06151	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06152	IIB-06152	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06153	IIB-06153	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06154	IIB-06154	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06155	IIB-06155	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06156	IIB-06156	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06157	IIB-06157	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06158	IIB-06158	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06159	IIB-06159	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06160	IIB-06160	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06161	IIB-06161	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06162	IIB-06162	CLIENT CARE AIDE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06163	IIB-06163	HEALTH CARE TECH II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21

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IIB	06164	IIB-06164	HEALTH CARE TECH II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06165	IIB-06165	HEALTH CARE TECH II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06166	IIB-06166	HEALTH CARE TECH III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06167	IIB-06167	HEALTH CARE TECH III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06168	IIB-06168	MID-LEVEL PROVIDER	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06170	IIB-06170	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06171	IIB-06171	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06172	IIB-06172	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06174	IIB-06174	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06175	IIB-06175	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06176	IIB-06176	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06177	IIB-06177	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06178	IIB-06178	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06179	IIB-06179	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06180	IIB-06180	NURSE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06181	IIB-06181	NURSE II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21

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IIB	06182	IIB-06182	NURSE III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06190	IIB-06190	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06191	IIB-06191	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06193	IIB-06193	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06202	IIB-06202	SOCIAL WORK/COUNSELOR I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06205	IIB-06205	DINING SERVICES III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06207	IIB-06207	DIETITIAN III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06208	IIB-06208	MATERIALS SUPERVISOR	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06212	IIB-06212	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06213	IIB-06213	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIB	06214	IIB-06214	NURSE I	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	12/21/2020	21
IIC	04942	IIC-04942	PROGRAM MANAGEMENT II	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	12/21/2020	21
IKA	00286	IKA-00286	MID-LEVEL PROVIDER	DIV OF YOUTH CORRECTIONS	DYSR-GILLIAM YOUTH SVC FACILITY	12/21/2020	21
IKA	00299	IKA-00299	PSYCHOLOGIST I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	12/21/2020	21
IKA	86039	IKA-86039	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	12/21/2020	21
IKA	86040	IKA-86040	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	12/21/2020	21

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IKA	86041	IKA-86041	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	12/21/2020	21
IKA	86042	IKA-86042	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	12/21/2020	21
IKA	86043	IKA-86043	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	12/21/2020	21
IKA	86044	IKA-86044	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	12/21/2020	21
IKA	88382	IKA-88382	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88383	IKA-88383	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88384	IKA-88384	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88385	IKA-88385	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88386	IKA-88386	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88387	IKA-88387	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88388	IKA-88388	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88389	IKA-88389	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88390	IKA-88390	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88391	IKA-88391	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88392	IKA-88392	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88393	IKA-88393	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	88394	IKA-88394	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88395	IKA-88395	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	IHAA EXECUTIVE DIRECTORS OFFICE	12/21/2020	21
IKA	88396	IKA-88396	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	12/21/2020	21
IKA	88397	IKA-88397	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-GILLIAM YOUTH SVC FACILITY	12/21/2020	21
ILC	80923	ILC-80923	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80924	ILC-80924	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80925	ILC-80925	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80926	ILC-80926	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80927	ILC-80927	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80928	ILC-80928	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80929	ILC-80929	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80930	ILC-80930	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80931	ILC-80931	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
ILC	80932	ILC-80932	TEMPORARY AIDE	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	12/21/2020	21
IIB	06192	IIB-06192	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	1/11/2021	21
IIB	06199	IIB-06199	CLINICAL THERAPIST II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	1/11/2021	21

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IJD	93101	IJD-93101	HEALTH PROFESSIONAL IV	PUEBLO REGIONAL CENTER	IHKA REGIONAL CENTER AT PUEBLO	1/11/2021	21
IKA	80005	IKA-80005	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	1/11/2021	21
IKA	88398	IKA-88398	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-ZEB PIKE YOUTH SVC FACILITY	1/11/2021	21
IKA	88399	IKA-88399	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-GILLIAM YOUTH SVC FACILITY	1/11/2021	21
IHA	06513	IHA-06513	COMPL INVESTIGATOR II	DEPT OF HUMAN SERVICES	IHHA QUAL ASSUR & QUAL IMPRVMNT	2/22/2021	21
IHA	06514	IHA-06514	COMPL INVESTIGATOR II	DEPT OF HUMAN SERVICES	IHHA QUAL ASSUR & QUAL IMPRVMNT	2/22/2021	21
IHA	06515	IHA-06515	COMPL INVESTIGATOR II	DEPT OF HUMAN SERVICES	IHHA QUAL ASSUR & QUAL IMPRVMNT	2/22/2021	21
IHA	06526	IHA-06526	STRUCTURAL TRADES II	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - ND	2/22/2021	21
IHA	06527	IHA-06527	STRUCTURAL TRADES III	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - ND	2/22/2021	21
IHA	06528	IHA-06528	CUSTODIAN II	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - ND	2/22/2021	21
IHA	06529	IHA-06529	GROUNDS & NURSERY I	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - ND	2/22/2021	21
IHA	06531	IHA-06531	PROGRAM ASSISTANT I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	2/22/2021	21
IHA	06532	IHA-06532	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	2/22/2021	21
IHA	06534	IHA-06534	CONTRACT ADMINISTRATOR III	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	2/22/2021	21
IHA	06535	IHA-06535	ADMIN ASSISTANT III	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	2/22/2021	21
IHA	06538	IHA-06538	DATA MANAGEMENT IV	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	2/22/2021	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06539	IHA-06539	HUMAN RESOURCES SPEC V	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	2/22/2021	21
IHA	06540	IHA-06540	DATA MANAGEMENT V	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	2/22/2021	21
IHA	81158	IHA-81158	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHEA CENTRAL ADMINISTRATION OFFICES	2/22/2021	21
IIB	06189	IIB-06189	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	2/22/2021	21
IIB	06194	IIB-06194	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	2/22/2021	21
IIC	04946	IIC-04946	LIAISON V	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	2/22/2021	21
IJC	92102	IJC-92102	ACCOUNTING TECHNICIAN III	WHEATRIDGE REGIONAL CTR	IHKA REGIONAL CENTER AT WHEATRDG	2/22/2021	21
IKA	05694	IKA-05694	ADMINISTRATOR III	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL REGIONAL OFFICE	2/22/2021	21
IKA	80596	IKA-80596	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-ZEB PIKE YOUTH SVC FACILITY	2/22/2021	21
IKA	80847	IKA-80847	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-ZEB PIKE YOUTH SVC FACILITY	2/22/2021	21
ILC	00189	ILC-00189	PIPE/MECH TRADES II	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	2/22/2021	21
IHA	06536	IHA-06536	DATA MANAGEMENT III	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	3/15/2021	21
IHA	06537	IHA-06537	DATA MANAGEMENT III	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	3/15/2021	21
IHA	81159	IHA-81159	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	3/15/2021	21
IHA	81160	IHA-81160	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	3/15/2021	21
IHA	90364	IHA-90364	LEGAL ASSISTANT II	DEPT OF HUMAN SERVICES	IHHA QUAL ASSUR & QUAL IMPRVMT	3/15/2021	21

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IKA	85575	IKA-85575	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	3/15/2021	21
IKA	86046	IKA-86046	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	3/15/2021	21
IKA	86048	IKA-86048	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	3/15/2021	21
IKA	88400	IKA-88400	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	3/15/2021	21
IKA	88401	IKA-88401	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-ADAMS YOUTH SVC FACILITY	3/15/2021	21
IHA	06542	IHA-06542	ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHGA CHILD SUPPORT SERVICES	4/12/2021	21
IHA	06543	IHA-06543	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06544	IHA-06544	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06545	IHA-06545	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06546	IHA-06546	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06547	IHA-06547	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06548	IHA-06548	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06549	IHA-06549	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06550	IHA-06550	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	4/12/2021	21
IHA	06551	IHA-06551	ADMINISTRATOR III	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	4/12/2021	21
IHA	06553	IHA-06553	ACCOUNTANT II	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	4/12/2021	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06557	IHA-06557	DATA MANAGEMENT III	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	4/12/2021	21
IHA	06559	IHA-06559	SOC SERVICES SPEC III	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	4/12/2021	21
IHA	06561	IHA-06561	ACCOUNTANT III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	4/12/2021	21
IHA	96331	IHA-96331	ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHIA COMM & FAMILY SUPPORT SVCS	4/12/2021	21
IKA	81845	IKA-81845	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	4/12/2021	21
IHA	06521	IHA-06521	ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHAA EXECUTIVE DIRECTORS OFFICE	5/17/2021	21
IHA	06558	IHA-06558	ANALYST III	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	5/17/2021	21
IHA	06560	IHA-06560	PROGRAM ASSISTANT II	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	5/17/2021	21
IHA	06571	IHA-06571	TECHNICIAN III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	5/17/2021	21
IHA	06572	IHA-06572	SOC SERVICES SPEC IV	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	5/17/2021	21
IHA	70018	IHA-70018	SENIOR EXECUTIVE SERVICE	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	5/17/2021	21
IHA	70019	IHA-70019	SENIOR EXECUTIVE SERVICE	DEPT OF HUMAN SERVICES	IHAA EXECUTIVE DIRECTORS OFFICE	5/17/2021	21
IHA	90438	IHA-90438	ACCOUNTING TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	5/17/2021	21
IIB	06128	IIB-06128	BUDGET ANALYST II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	5/17/2021	21
IIB	06195	IIB-06195	MENTAL HLTH CLINICIAN II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	5/17/2021	21
IKA	06132	IKA-06132	YOUTH SERV COUNSELOR III	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	5/17/2021	21

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IKA	86049	IKA-86049	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	5/17/2021	21
IKA	86050	IKA-86050	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	5/17/2021	21
IKA	86051	IKA-86051	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	5/17/2021	21
ILG	80034	ILG-80034	TEMPORARY AIDE	VET COMM LVNG CTR AT FITZSIMNS	IHKA VET COMM LVNG CTR AT FITZSIMNS	5/17/2021	21
IHA	06569	IHA-06569	SOC SERVICES SPEC IV	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	6/14/2021	21
IHA	06573	IHA-06573	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	6/14/2021	21
IHA	06574	IHA-06574	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	6/14/2021	21
IHA	06575	IHA-06575	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	6/14/2021	21
IHA	06576	IHA-06576	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	6/14/2021	21
IHA	06577	IHA-06577	HUMAN RESOURCES SPEC V	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	6/14/2021	21
IHA	06578	IHA-06578	ADMINISTRATOR III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	6/14/2021	21
IHA	06579	IHA-06579	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	6/14/2021	21
IHA	06580	IHA-06580	TECHNICIAN IV	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - SD	6/14/2021	21
IHA	70021	IHA-70021	SENIOR EXECUTIVE SERVICE	DEPT OF HUMAN SERVICES	IHCA EXEC DIR OF OPERATIONS	6/14/2021	21
IHA	91816	IHA-91816	CONTRACT ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	6/14/2021	21
IIC	90226	IIC-90226	NURSE VI	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	6/14/2021	21

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	05696	IKA-05696	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	6/14/2021	21
IKA	05697	IKA-05697	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	6/14/2021	21
IKA	05699	IKA-05699	PROGRAM ASSISTANT I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	6/14/2021	21
IKA	86047	IKA-86047	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	6/14/2021	21
IKA	86081	IKA-86081	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	ASPIRE YOUTH SERVICES CENTER	6/14/2021	21
ILC	00190	ILC-00190	FOOD SERV MGR II	VET COMM LVNG CTR AT FLORENCE	IHKA VET COMM LVNG CTR AT FLORENCE	6/14/2021	21
ILG	80036	ILG-80036	TEMPORARY AIDE	VET COMM LVNG CTR AT FITZSIMNS	IHKA VET COMM LVNG CTR AT FITZSIMNS	6/14/2021	21
IHA	06541	IHA-06541	MKTG & COMM SPEC III	DEPT OF HUMAN SERVICES	IHEA CENTRAL ADMINISTRATION OFFICES	7/12/2021	22
IHA	06556	IHA-06556	TECHNICIAN IV	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	7/12/2021	22
IHA	06581	IHA-06581	ANALYST IV	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	7/12/2021	22
IHA	06582	IHA-06582	HUMAN RESOURCES SPEC IV	DEPT OF HUMAN SERVICES	IHGA EMPLOYMENT & BENEFITS SVCS	7/12/2021	22
IHA	06583	IHA-06583	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	7/12/2021	22
IHA	06584	IHA-06584	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	7/12/2021	22
IHA	06588	IHA-06588	PROGRAM ASSISTANT II	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	7/12/2021	22
IHA	06589	IHA-06589	DATA MANAGEMENT IV	DEPT OF HUMAN SERVICES	IHEA CENTRAL ADMINISTRATION OFFICES	7/12/2021	22
IHA	06596	IHA-06596	GROUND & NURSERY I	DEPT OF HUMAN SERVICES	IHHA FACILITIES MANAGEMENT - ND	7/12/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06599	IHA-06599	PROGRAM ASSISTANT II	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	7/12/2021	22
IHA	81163	IHA-81163	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	7/12/2021	22
IHA	81164	IHA-81164	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	7/12/2021	22
IHA	81165	IHA-81165	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	7/12/2021	22
IIC	04938	IIC-04938	ANALYST III	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	7/12/2021	22
IIC	04961	IIC-04961	PROGRAM MANAGEMENT I	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	7/12/2021	22
IKA	05695	IKA-05695	STATE TEACHER II	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL ADMINISTRATION OFC	7/12/2021	22
IKA	06832	IKA-06832	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	7/12/2021	22
IKA	07001	IKA-07001	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	7/12/2021	22
IKA	07021	IKA-07021	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	7/12/2021	22
IHA	06554	IHA-06554	PROJECT MANAGER III	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	8/16/2021	22
IHA	06562	IHA-06562	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	8/16/2021	22
IHA	06563	IHA-06563	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	8/16/2021	22
IHA	06564	IHA-06564	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	8/16/2021	22
IHA	06565	IHA-06565	ADMINISTRATOR I	DEPT OF HUMAN SERVICES	IHEA DISABILITY DETERM SVCS	8/16/2021	22
IHA	06570	IHA-06570	CONTRACT ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/16/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06585	IHA-06585	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	8/16/2021	22
IHA	06586	IHA-06586	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06587	IHA-06587	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/16/2021	22
IHA	06590	IHA-06590	ACCOUNTANT I	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	8/16/2021	22
IHA	06591	IHA-06591	DATA MANAGEMENT III	DEPT OF HUMAN SERVICES	IHEA AGING AND ADULT SERVICES	8/16/2021	22
IHA	06592	IHA-06592	PROGRAM MANAGEMENT II	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	8/16/2021	22
IHA	06595	IHA-06595	BUDGET & POLICY ANLST III	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	8/16/2021	22
IHA	06597	IHA-06597	PLANNING SPECIALIST IV	DEPT OF HUMAN SERVICES	IHEA AGING AND ADULT SERVICES	8/16/2021	22
IHA	06598	IHA-06598	ACCOUNTANT II	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	8/16/2021	22
IHA	06600	IHA-06600	AUDITOR II	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	8/16/2021	22
IHA	06601	IHA-06601	AUDITOR II	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	8/16/2021	22
IHA	06602	IHA-06602	AUDITOR II	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	8/16/2021	22
IHA	06603	IHA-06603	AUDITOR II	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	8/16/2021	22
IHA	06604	IHA-06604	ACCOUNTANT II	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	8/16/2021	22
IHA	06605	IHA-06605	ANALYST IV	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	8/16/2021	22
IHA	06607	IHA-06607	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06608	IHA-06608	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06609	IHA-06609	PROJECT MANAGER III	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	8/16/2021	22
IHA	06610	IHA-06610	TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06611	IHA-06611	TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06612	IHA-06612	HUMAN RESOURCES SPEC V	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06613	IHA-06613	TECHNICIAN IV	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06614	IHA-06614	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06615	IHA-06615	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06616	IHA-06616	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06617	IHA-06617	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06618	IHA-06618	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06619	IHA-06619	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06620	IHA-06620	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06624	IHA-06624	ADMIN ASSISTANT III	DEPT OF HUMAN SERVICES	IHHA LEGAL	8/16/2021	22
IHA	06625	IHA-06625	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	06626	IHA-06626	CONTRACT ADMINISTRATORIII	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	8/16/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06630	IHA-06630	GRANTS SPECIALIST IV	DEPT OF HUMAN SERVICES	IHEA AGING AND ADULT SERVICES	8/16/2021	22
IHA	81166	IHA-81166	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	81167	IHA-81167	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	81168	IHA-81168	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	8/16/2021	22
IHA	81169	IHA-81169	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/16/2021	22
IHA	81170	IHA-81170	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/16/2021	22
IHA	81171	IHA-81171	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	8/16/2021	22
IHA	92029	IHA-92029	CONTRACT ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHEA AGING AND ADULT SERVICES	8/16/2021	22
IHA	94917	IHA-94917	PROGRAM MANAGEMENT II	DEPT OF HUMAN SERVICES	IHEA AGING AND ADULT SERVICES	8/16/2021	22
IIB	06215	IIB-06215	PSYCHOLOGIST I	C M H I AT PUEBLO	IHJA FORENSIC SERVICES	8/16/2021	22
IIB	06216	IIB-06216	PSYCHOLOGIST I	C M H I AT PUEBLO	IHJA FORENSIC SERVICES	8/16/2021	22
IIB	06217	IIB-06217	PSYCHOLOGIST I	C M H I AT PUEBLO	IHJA FORENSIC SERVICES	8/16/2021	22
IIB	94560	IIB-94560	HEALTH PROFESSIONAL VII	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	8/16/2021	22
IIC	04957	IIC-04957	GRANTS SPECIALIST IV	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	8/16/2021	22
IIC	04958	IIC-04958	DATA MANAGEMENT III	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	8/16/2021	22
IIC	04960	IIC-04960	COMPLIANCE SPECIALIST IV	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	8/16/2021	22
IIC	04962	IIC-04962	MKTG & COMM SPEC IV	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	8/16/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	05698	IKA-05698	STATE TEACHER I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	8/16/2021	22
IKA	06133	IKA-06133	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06134	IKA-06134	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06135	IKA-06135	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06136	IKA-06136	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06137	IKA-06137	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06138	IKA-06138	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06139	IKA-06139	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06140	IKA-06140	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06141	IKA-06141	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06142	IKA-06142	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	8/16/2021	22
IKA	06143	IKA-06143	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06144	IKA-06144	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06145	IKA-06145	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06146	IKA-06146	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06147	IKA-06147	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	06148	IKA-06148	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06149	IKA-06149	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06150	IKA-06150	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06151	IKA-06151	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06152	IKA-06152	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06153	IKA-06153	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06154	IKA-06154	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06155	IKA-06155	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06156	IKA-06156	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06157	IKA-06157	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06158	IKA-06158	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06159	IKA-06159	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06161	IKA-06161	PROGRAM MANAGEMENT II	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06162	IKA-06162	PROGRAM MANAGEMENT III	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06163	IKA-06163	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06164	IKA-06164	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IKA	06165	IKA-06165	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	06166	IKA-06166	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	8/16/2021	22
IKA	07000	IKA-07000	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	8/16/2021	22
IKA	07002	IKA-07002	CORR/YTH/CLIN SEC OFF I	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	8/16/2021	22
IKA	07020	IKA-07020	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	8/16/2021	22
IKA	07024	IKA-07024	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	8/16/2021	22
IKA	07025	IKA-07025	CORR/YTH/CLN SEC SUPV III	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	8/16/2021	22
IKA	07028	IKA-07028	STATE TEACHER II	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	8/16/2021	22
IHA	06593	IHA-06593	ANALYST IV	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	9/20/2021	22
IHA	06594	IHA-06594	ANALYST IV	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	9/20/2021	22
IHA	06606	IHA-06606	PROGRAM MANAGEMENT I	DEPT OF HUMAN SERVICES	IHIA COMM & FAMILY SUPPORT SVCS	9/20/2021	22
IHA	06622	IHA-06622	CONTRACT ADMINISTRATORIII	DEPT OF HUMAN SERVICES	OCYF CENTRAL ADMINISTRATION OFC	9/20/2021	22
IHA	06623	IHA-06623	SOC SERVICES SPEC III	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	9/20/2021	22
IHA	06627	IHA-06627	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	9/20/2021	22
IHA	06628	IHA-06628	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	9/20/2021	22
IHA	06631	IHA-06631	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHHA BUSINESS TECHNOLOGY SVCS	9/20/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06633	IHA-06633	CONTRACT ADMINISTRATORIII	DEPT OF HUMAN SERVICES	IHGA DIR OFC ECONOMIC SECURITY	9/20/2021	22
IHA	06634	IHA-06634	CONTRACT ADMINISTRATORIII	DEPT OF HUMAN SERVICES	IHGA DIR OFC ECONOMIC SECURITY	9/20/2021	22
IHA	06643	IHA-06643	AUDITOR III	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	9/20/2021	22
IHA	06652	IHA-06652	PROGRAM MANAGEMENT II	DEPT OF HUMAN SERVICES	IHAA EXECUTIVE DIRECTORS OFFICE	9/20/2021	22
IIC	04963	IIC-04963	PROGRAM MANAGEMENT I	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	9/20/2021	22
IIC	04964	IIC-04964	PROGRAM MANAGEMENT I	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	9/20/2021	22
IKA	05424	IKA-05424	STATE TEACHER AIDE	DIV OF YOUTH CORRECTIONS	DYSR-PLATTE VALLEY YTH SVC FCLTY	9/20/2021	22
IKA	06160	IKA-06160	PROGRAM ASSISTANT I	DIV OF YOUTH CORRECTIONS	DYSR-LOOKOUT MTN YOUTH SVC FCLTY	9/20/2021	22
IKA	06167	IKA-06167	PROGRAM MANAGEMENT II	DIV OF YOUTH CORRECTIONS	DYSR-CENTRAL REGIONAL OFFICE	9/20/2021	22
IKA	07022	IKA-07022	CORR/YTH/CLIN SEC OFF II	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	9/20/2021	22
IKA	86053	IKA-86053	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	PRAIRIE VISTA YOUTH SERVICES	9/20/2021	22
IKA	86054	IKA-86054	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	9/20/2021	22
IKA	86055	IKA-86055	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-GRAND MESA YOUTH SVC FCLTY	9/20/2021	22
IHA	06552	IHA-06552	PURCHASING AGENT IV	DEPT OF HUMAN SERVICES	IHHA PROCUREMENT SERVICES	10/18/2021	22
IHA	06632	IHA-06632	TECHNICIAN IV	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	10/18/2021	22
IHA	06646	IHA-06646	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHIA COMM & FAMILY SUPPORT SVCS	10/18/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06656	IHA-06656	ACCOUNTING TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	10/18/2021	22
IHA	06657	IHA-06657	ACCOUNTING TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	10/18/2021	22
IHA	06658	IHA-06658	ACCOUNTING TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	10/18/2021	22
IHA	06659	IHA-06659	ACCOUNTING TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	10/18/2021	22
IHA	06660	IHA-06660	ACCOUNTING TECHNICIAN III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	10/18/2021	22
IHA	06663	IHA-06663	PROGRAM ASSISTANT II	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	10/18/2021	22
IHA	06670	IHA-06670	PROGRAM MANAGEMENT II	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	10/18/2021	22
IHA	06681	IHA-06681	CONTRACT ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	10/18/2021	22
IHA	81178	IHA-81178	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	10/18/2021	22
IIC	04965	IIC-04965	MANAGEMENT	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	10/18/2021	22
IIC	91776	IIC-91776	ACCOUNTING TECHNICIAN III	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	10/18/2021	22
IHA	06123	IHA-06123	AUDITOR III	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	11/22/2021	22
IHA	06647	IHA-06647	SOC SERVICES SPEC V	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	11/22/2021	22
IHA	06648	IHA-06648	SOC SERVICES SPEC IV	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	11/22/2021	22
IHA	06649	IHA-06649	SOC SERVICES SPEC IV	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	11/22/2021	22
IHA	06651	IHA-06651	GRANTS SPECIALIST IV	DEPT OF HUMAN SERVICES	IHEA AGING AND ADULT SERVICES	11/22/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06653	IHA-06653	HUMAN RESOURCES SPEC III	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	11/22/2021	22
IHA	06665	IHA-06665	PROGRAM MANAGEMENT I	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	11/22/2021	22
IHA	06671	IHA-06671	PROGRAM MANAGEMENT I	DEPT OF HUMAN SERVICES	IHIA COMM & FAMILY SUPPORT SVCS	11/22/2021	22
IHA	06673	IHA-06673	PROGRAM MANAGEMENT I	DEPT OF HUMAN SERVICES	IHGA EMPLOYMENT & BENEFITS SVCS	11/22/2021	22
IHA	06674	IHA-06674	SOC SERVICES SPEC IV	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	11/22/2021	22
IHA	06678	IHA-06678	TRAINING SPECIALIST III	DEPT OF HUMAN SERVICES	IHGA EMPLOYMENT & BENEFITS SVCS	11/22/2021	22
IHA	06679	IHA-06679	TRAINING SPECIALIST III	DEPT OF HUMAN SERVICES	IHGA EMPLOYMENT & BENEFITS SVCS	11/22/2021	22
IHA	06680	IHA-06680	DATA MANAGEMENT IV	DEPT OF HUMAN SERVICES	IHGA FOOD & ENERGY ASSIST SVCS	11/22/2021	22
IHA	06703	IHA-06703	AUDITOR II	DEPT OF HUMAN SERVICES	IHHA DIVISION OF FIELD AUDITS	11/22/2021	22
IHA	06777	IHA-06777	ANALYST IV	DEPT OF HUMAN SERVICES	IHHA PERFORMANCE MANAGEMENT	11/22/2021	22
IHA	70022	IHA-70022	SENIOR EXECUTIVE SERVICE	DEPT OF HUMAN SERVICES	IHAA EXECUTIVE DIRECTORS OFFICE	11/22/2021	22
IHA	81175	IHA-81175	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	11/22/2021	22
IHA	81176	IHA-81176	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	11/22/2021	22
IHA	81177	IHA-81177	TEMPORARY AIDE	DEPT OF HUMAN SERVICES	IHHA EMPLOYMENT AFFAIRS	11/22/2021	22
IHA	92820	IHA-92820	ACCOUNTANT III	DEPT OF HUMAN SERVICES	IHHA ACCOUNTING & FINANCIAL SVCS	11/22/2021	22
IIB	06210	IIB-06210	DATA MANAGEMENT III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/22/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IIB	06220	IIB-06220	PROGRAM COORDINATOR	C M H I AT PUEBLO	IHJA FORENSIC SERVICES	11/22/2021	22
IIB	06222	IIB-06222	HEALTH PROFESSIONAL III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/22/2021	22
IIB	06223	IIB-06223	HEALTH PROFESSIONAL III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/22/2021	22
IIB	06225	IIB-06225	LABORATORY TECHNOLOGY II	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ PUEBLO	11/22/2021	22
IIC	04966	IIC-04966	ADMIN ASSISTANT III	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	11/22/2021	22
IIC	04967	IIC-04967	PROGRAM MANAGEMENT I	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	11/22/2021	22
IIC	04969	IIC-04969	PROGRAM MANAGEMENT I	C M H I AT FT LOGAN	IHJA MENTAL HEALTH INST @ FT LGN	11/22/2021	22
IKA	86052	IKA-86052	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-MOUNT VIEW YOUTH SVC FCLTY	11/22/2021	22
IHA	06637	IHA-06637	MKTG & COMM SPEC III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	12/13/2021	22
IHA	06638	IHA-06638	MKTG & COMM SPEC III	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	12/13/2021	22
IHA	06639	IHA-06639	MKTG & COMM SPEC III	DEPT OF HUMAN SERVICES	IHGA DIR OFC ECONOMIC SECURITY	12/13/2021	22
IHA	06644	IHA-06644	PROGRAM COORDINATOR	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	12/13/2021	22
IHA	06645	IHA-06645	PROJECT MANAGER I	DEPT OF HUMAN SERVICES	IHIA COMM & FAMILY SUPPORT SVCS	12/13/2021	22
IHA	06662	IHA-06662	SOC SERVICES SPEC V	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	12/13/2021	22
IHA	06684	IHA-06684	CONTRACT ADMINISTRATOR III	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	12/13/2021	22
IHA	06685	IHA-06685	ADMINISTRATOR III	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	12/13/2021	22

Agy	Pos Nbr	Agy&Pos Nbr	Class Title	Agency	Office	Month Created	FY
IHA	06687	IHA-06687	CONTRACT ADMINISTRATOR III	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	12/13/2021	22
IHA	06688	IHA-06688	ADMINISTRATOR III	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	12/13/2021	22
IHA	06696	IHA-06696	PROGRAM MANAGEMENT II	DEPT OF HUMAN SERVICES	IHIA DIR OFC OF EARLY CHILDHOOD	12/13/2021	22
IHA	06725	IHA-06725	BUSINESS APP SUP SPL I	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	12/13/2021	22
IHA	06726	IHA-06726	PROGRAM MANAGEMENT I	DEPT OF HUMAN SERVICES	IHIA EARLY CARE & LEARNING SVCS	12/13/2021	22
IHA	06781	IHA-06781	ANALYST V	DEPT OF HUMAN SERVICES	IHHA PERFORMANCE MANAGEMENT	12/13/2021	22
IHA	06784	IHA-06784	ANALYST IV	DEPT OF HUMAN SERVICES	IHHA PERFORMANCE MANAGEMENT	12/13/2021	22
IHA	06785	IHA-06785	ANALYST IV	DEPT OF HUMAN SERVICES	IHHA PERFORMANCE MANAGEMENT	12/13/2021	22
IHA	96310	IHA-96310	ADMINISTRATOR IV	DEPT OF HUMAN SERVICES	IHFA CHILD WELFARE SERVICES	12/13/2021	22
IIB	06224	IIB-06224	SOCIAL WORK/COUNSELOR III	C M H I AT PUEBLO	IHJA MENTAL HEALTH INST @ FT LGN	12/13/2021	22
IIC	05122	IIC-05122	ANALYST III	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	12/13/2021	22
IIC	05844	IIC-05844	ANALYST III	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	12/13/2021	22
IIC	05845	IIC-05845	ANALYST III	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	12/13/2021	22
IIC	05846	IIC-05846	ANALYST III	C M H I AT FT LOGAN	OBHC CENTRAL ADMINISTRATION OFC	12/13/2021	22
IKA	89060	IKA-89060	TEMPORARY AIDE	DIV OF YOUTH CORRECTIONS	DYSR-SPRING CREEK YTH SVC FCLTY	12/13/2021	22

Attachment C: Requests for Additional FTE (Common Question 7)

Request (Office)	Requested Annualized FTE (FY 2022-23)	Why won't Existing staff be Trained to Assume these roles?	Why are additional FTE needed?	What evaluation process was used to determine the number of FTE requested?
R-02 CMHIFL 44 Bed Operating Budget	104.3 FTE	The 44 beds added to Colorado Mental Health Institute at Fort Logan (CMHIFL) is a new forensic restoration program consisting of two units. We will need the additional FTE to staff these two new units.	The additional FTE are needed to staff units appropriate to provide psychiatric and restoration treatment to individuals waiting in jail for inpatient services.	CMHIFL used staffing ratios similar to the medium security restoration unit at the Colorado Mental Health Institute at Pueblo (CMHIP). This ratio meets licensing standards and allows both a safe environment conducive to restoration treatment.
R-04 Enhancing County Support	4.0 FTE	A workload study commissioned within the last 2 years indicated a need for additional Division of Child Welfare staff to support local departments of human services. Because Colorado is a state-supervised, county-administered system, we are required to maintain resources at CDHS to ensure the safe, appropriate, and effective delivery of services to a very vulnerable group of Coloradans: children who, without intervention, have been maltreated or are unsafe. A child's entitlement for protection is ensured through a complexity of systems, policies, and practices that requires a robust, well-trained, and dynamic staff that supports thousands of facility and county department workers in their services to hundreds of thousands of Coloradans every year.	<p>County Intermediary (2.0 FTE): There is an incredible volume of work in the child welfare system, consisting of over 100,000 annual concerns of maltreatment, just under 10,000 open involvements in Colorado's child welfare system, and over 300,000 Coloradans served annually. Furthermore, there are current personnel vacancy issues in local communities coupled with well-known issues with children experiencing critical behavioral health and complex out of home placement needs. Providing additional support to ensure that counties can provide high-quality services is critical.</p> <p>Facility Monitor (1.0 FTE): There have been several high-profile media stories about increased support needed to ensure safe and compliant out of home facilities for children. Adding staff reduces workloads and allows CDHS to develop other ways to support providers, such as Continuous Quality Improvement support and support for the implementation and development of a trauma-informed system of care.</p> <p>Permanency Specialist (1.0 FTE): There are just under 600 children/youth that are legally free for adoption but have not achieved permanency, and just under 10,000 open involvements in child welfare. This specialist monitors these cases and partners with local departments to ensure barriers are removed and permanency goals are met expeditiously and according to law.</p>	<p>County Intermediary (2.0 FTE): the request was made after a workload study determined a need for additional county monitoring staff given the volume of activity and important responsibilities of county departments of human services and child welfare. Balancing the need with cost, it was determined that a pilot program of 2 FTE would be best to begin implementation.</p> <p>Facility Monitor (1.0 FTE): an addition of 1 staff decreases workload from 40 to approximately 33-35 facilities.</p> <p>Permanency Specialist (1.0 FTE): currently, these duties are being performed by 2 time limited full time staff. This new FTE would absorb new duties as well as cover existing needs.</p>

R-09 Improving Involuntary Mental Health Treatment	1.0 FTE	<p>The Office of Behavioral Health (OBH) currently has one staff (27-65 Program Manager) dedicated to 27-65, C.R.S. related administrative duties, completely funded through OBH’s Federal Community Mental Health Block Grant. This federally funded FTE does not have the capacity to expand duties, as this FTE enforces OBH rules on all facilities designated to provide involuntary mental health treatment in Colorado.</p>	<p>The federally funded 27-65 Program Manager, in addition to her position described duties of inspection of all designated facilities, provides approximately 20 hours per week of technical assistance to intervening professional and designated and non-designated facilities. The FTE requested in this decision item will take on this 20 hour/week technical assistance role. Furthermore, the requested FTE will be responsible for rule promulgation and regulatory enforcement regarding staff training requirements within designated facilities. Staff within designated facilities only represent a small portion of the intervening professionals allowed to placed holds pursuant to 27-65-105(1)(a)(II), C.R.S.; OBH will update the staff training regulatory requirements to ensure the direct care staff in designated facilities will be regulatorily required to receive the training created by this decision item. Currently, there are 62 facilities that have an active 27-65 designation. It is further assumed that non-designated facilities, such as emergency departments, will also benefit from this publicly available training, as those facilities routinely request technical assistance from OBH, even though OBH does not regulate those non-designated facilities.</p>	<p>OBH reviewed the current program and how it is being administered. OBH has no General Fund FTE for 27-65, C.R.S. related duties. OBH has created one FTE dedicated to 27-65, C.R.S. related administrative duties, completely funded through federal funds, or OBH’s Community Mental Health Block Grant. This request would double the FTE assigned to the very technical article of statute that impacts the rights that individuals have in Colorado. One FTE is insufficient given the complexity of administering the statute.</p>
R-10 SNAP Fair Hearing Compliance	2.5 FTE	<p>Completing SNAP Fair Hearings requires Administrative Law Judges to review evidence and make decisions based on that evidence. The skills required for these positions are not available within existing staff and the workload exceeds the capacity among existing staff.</p>	<p>The Department does not currently complete this work in-house. Two Administrative Law Judges are needed to review evidence, rule on SNAP appeals, and issue initial decisions. 0.5 program assistant is required to complete the scheduling, mailing, and other administrative support required to issue timely decisions.</p>	<p>The Department evaluated the volume of work and processes required to render timely decisions. Additionally, information from other states was gathered.</p>
R-14 Adult Protective Services Data System	1.0 FTE	<p>The workload exceeds the bandwidth of existing staff. The new position will be a State FTE rather than paying for expensive IT contract services, thereby retaining the system knowledge in house.</p>	<p>To support the data system internally rather than with an expensive third party contractor. Workload has increased over time with new functionality in the system.</p>	<p>The Division evaluated the workload that exists without a vendor in place and determined that one FTE could manage that workload.</p>

DEC-01 Child Care Safety	<p>4.0 FTE</p> <p>Note: The Schedule 13 has been corrected to reflect the 4.0 annualized FTE.</p>	<p>The proposed work includes new and additional duties to existing programming. Current funding allows the Department to respond and react to complaints arising from the community but not to seek out and stop unsafe care from happening or actively support exempt providers found through this complaint process in engaging in licensing. The workload of proactively searching for and shutting down illegally operating individuals and supporting exempt providers located through this process exceeds the bandwidth of existing staff.</p>	<p>In an effort to further decrease the deaths and abuse or neglect of children in unsafe child care situations, the new staff will proactively search for unlicensed child care and support individuals who desire to become licensed to provide child care and will pursue and shut down illegal, unsafe child care providers.</p>	<p>This request is in response to the recommendations by the Safe Child Care Task Force. In researching other states that implemented similar strategies and units, they employed more significant numbers of FTE. The recommendation for the four FTE requested is the minimum FTE necessary to stand up the unit.</p>
DEC-02 Early Intervention Alternative	<p>2.0 FTE</p>	<p>The proposed work includes the development of a new program which is new and expanded work outside the capacity of the current Early Intervention Program staff.</p>	<p>The new FTE will support the implementation of the new alternative early intervention program (Early Start). This position will work with stakeholders to finalize the recommendations to be implemented and identify philanthropic partners to secure additional funding for the program as needed.</p>	<p>This request is in response to intensive, long-term stakeholder development, discussions, and agreement about how to serve children with developmental delays who do not qualify for the federal early intervention Part C program under the new eligibility definition as well as looking to serve children with developmental risk factors who have never been served by any program before.</p>

<p>NP-06 Equity Office</p>	<p>4.0 FTE</p>	<p>The proposed work includes new and expanded work that requires new staff. Currently, CDHS has one EDI Director and one Community Partnership Director responsible for supporting 5,333 employees, 2,000 contractors, and their populations. Additional resources are required to meet the needs of the communities we serve throughout the Department.</p>	<p>The Office of Equity will increase requirements around accessibility, language, justice, community, engagement, and reporting. The additional staff will include one Language Justice Specialist; one Data Analyst, one Community Engagement Coordinator, and one EDI Implementation Specialist.</p> <p>The Language Justice Specialist would develop a standard practice across the agency for accommodations, translation, interpretation, and CART services.</p> <p>The Data Analyst would capture, measure and report demographic data proactively instead of in response to scheduled or ad hoc requests.</p> <p>The Community Engagement Coordinator would support DHS-wide family and community engagement work ensuring that all rural and diverse communities have the access to human services, and are able to contribute meaningfully in program and policy advancements.</p> <p>The EDI Implementation Specialist would support the integration of the DHS Equity Action Plan initiatives.</p>	<p>DPA prioritized the top four positions that are the most essential.</p>
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Attachment D: Non-Tax Revenues Collected and Subject to TABOR

Non-Tax Revenues Collected by Department That Are Subject to TABOR (excluding sources that amount to less than \$100,000/year)					
Revenue Source	Associated Cash Fund	Revenues Collected Annually			Notes
		FY 2020-21 Actual	FY 2021-22 Projection	FY 2022-23 Projection	
Patient Revenue - Mental Health Institutes	General Fund - Unrestricted (Fund1000)	\$4,167,359	\$4,660,000	\$4,761,662	
Patient Revenue - Regional Centers	General Fund - Unrestricted (Fund 1000)	\$1,519,934	\$1,503,677	\$1,605,322	
Other Charges for Services - Division of Youth Services	General Fund - Unrestricted (Fund 1000)	\$75,000	\$0	\$0	This was revenue earned from Rite of Passage for Rigeview. Since the contract was terminated, revenues are projected at \$0 going forward.
Court Fines - Miscellaneous	Persistent Drunk Driver Fund (Fund 11Y0)	\$1,479,150	\$1,760,459	\$1,760,459	reflects fees only
Child Care Licenses	Child Care Licensing Cash Fund (Fund 12T0)	\$1,908,514	\$1,623,923	\$1,623,923	reflects fees only
Interest Income - Nonexempt	Older Coloradans Cash Fund (Fund 14F0)	\$226,597	\$226,597	\$226,597	
DUI and DWI Fines; Other Fines	Traumatic Brain Injury Fund (Mindsourc) (Fund 16X0)	\$2,092,554	\$2,189,006	\$2,238,894	reflects fees (fines) only
Other Social Service Fees - Fees paid to conduct background checks on people working with children or older adults.	Records and Reports Fund (17K0)	\$1,758,123	\$2,200,000	\$2,200,000	reflects fees only
Court Fines - Miscellaneous and Interest Income	Performance-Based Collaborative Management Incentive Fund (Fund 18Q0)	\$2,880,791	\$2,797,642	\$2,797,642	
Donated Foods/Recipient Agencies	Food Distribution Program Service Fund (18R0)	\$40,038	\$45,000	\$45,000	reflects fees only
Vital Records Fees and Court Fines	Colorado Domestic Abuse Program Fund (Fund 1940)	\$1,010,789	\$940,000	\$940,000	Amounts do not reflect interest, donations, or other revenues
Court Fines - Miscellaneous and Interest Income - Nonexempt	Colorado Children's Trust Fund (Fund 2290)	\$399,986	\$323,869	\$323,869	
Interest Income - Nonexempt	Family Support Registry Fund (Fund 2470)	\$132,692	\$120,641	\$121,074	

Non-Tax Revenues Collected by Department That Are Subject to TABOR
(excluding sources that amount to less than \$100,000/year)

Revenue Source	Associated Cash Fund	Revenues Collected Annually			Notes
		FY 2020-21 Actual	FY 2021-22 Projection	FY 2022-23 Projection	
DUI and DWI Fines	Rural Alcohol Substance Abuse Cash Fund (Fund 24T0)	\$89,527	\$101,795	\$102,431	
Court Fines - Miscellaneous	Crimes Against At-Risk Persons Fund (Fund 26U0)	\$33,397	\$35,000	\$35,000	
Interest Income - Nonexempt	Indirect Cost Excess Recovery Fund (27G0)	\$67,300	\$125,213	\$125,213	
Other Charges for Services	Work Therapy Cash Fund (Fund 5160)	\$191,162	\$223,367	\$227,834	
Rents from External Sources - Operating (Nonexempt)	Grounds Cash Fund (Fund 5300)	\$895,770	\$911,335	\$995,750	
Service Charges from External Sources	Early Intervention Services Trust Fund (Fund 8050)	\$60,633	\$86,000	\$86,000	Amounts reflect administrative fees only
TOTALS		\$19,029,315	\$19,873,524	\$20,216,670	

Attachment E (Q11): One-time Funds Received/Anticipated to be Received

One-time Funds Received/Anticipated to be Received (amounts)										
State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	Families First Coronavirus Response Act	\$1,214,084	Families First Coronavirus Response Act, Older Americans Act Title III - Congregate Meals	Title III-C of the Older Americans Act supports Nutrition services, such as Congregate Meals	N/A	\$1,214,084	N/A	N/A	Formula Allocation	3/20/2020
CDHS	Families First Coronavirus Response Act	\$2,428,167	Families First Coronavirus Response Act, Older Americans Act Title III - Home-Delivered Meals	Title III-C of the Older Americans Act supports Nutrition services, such as Home Delivered Meals	N/A	\$2,428,167	N/A	N/A	Formula Allocation	3/20/2020
CDHS	Families First Coronavirus Response Act	\$1,429,449	TEFAP (The Emergency Food Assistance Program) ADMIN FFCRA PL 116-12	FFCRA provided \$400 million in additional food funding for TEFAP state agencies in FY 2020. Funding was directed to eligible food purchases, as allowed by the U.S. Department of Agriculture.	N/A	\$1,429,449	N/A	N/A	Formula Allocation	3/18/2020
CDHS	Families First Coronavirus Response Act	\$21,873	TEFAP (The Emergency Food Assistance Program) ADMIN FFCRA PL 116-12 FFY21	FFCRA allowed up to \$100 million of the \$400 million available for TEFAP to be converted into administrative funds.	N/A	\$21,873	N/A	N/A	Formula Allocation	10/1/2021
CDHS	Families First Coronavirus Response Act	\$49,779,597	SNAP (Supplemental Nutrition	Federal Pandemic Electronic Benefits Transfer (P-EBT) were	N/A	N/A	N/A	\$49,779,597	Entitlement	7/1/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
			Assistance Program) PEBT	federal entitlement funds to provide benefits to children who would have received free or reduced-price breakfasts and lunches while in school or subsidized childcare during the spring of 2020.						
CDHS	Families First Coronavirus Response Act	\$273,412,676	SNAP (Supplemental Nutrition Assistance Program) MAX Benefits	This provision allowed states to issue the maximum SNAP benefits available to households of similar sizes.	N/A	N/A	N/A	\$273,412,676	Entitlement	4/1/2020
CDHS	Coronavirus Preparedness and Response Supplemental Appropriations Act	\$755,454	Aging and Disability Resources for Colorado (ADRC) COVID-19 Pandemic Response	These funds support the work of the ADRCs in providing case management and referrals and was directed towards one-time infrastructure and technology improvements.	N/A	\$755,454	N/A	N/A	Grant Application	4/1/2020
CDHS	CARES COVID Received (P.L. 116-136)	\$1,408,258	CARES Act for Family Caregiver Support Program under Title III-E of the Older Americans Act	Title III-E of the Older Americans Act supports the Caregiver program and services	N/A	\$1,408,258	N/A	N/A	Formula Allocation	4/1/2020
CDHS	CARES COVID	\$7,284,502	CARES Act for Nutrition Services under Title III-C	Title III-C of the Older Americans Act supports Nutrition services, such	N/A	\$7,284,502	N/A	N/A	Formula Allocation	4/1/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
	Received (P.L. 116-136)		of the Older Americans Act	as Home Delivered Meals and Congregate Meals						
CDHS	CARES COVID Received (P.L. 116-136)	\$303,521	CARES Act for Ombudsman Program under Title VII of the Older Americans Act	This award was for Title VII of the Older Americans Act to provide support to the State and local ombudsman	N/A	\$303,521	N/A	N/A	Formula Allocation	4/1/2020
CDHS	CARES COVID Received (P.L. 116-136)	\$3,035,209	CARES Act for Supportive Services under Title III-B of the Older Americans Act	Title III-B of the Older Americans Act is for supportive services, such as Transportation and Material Aid	N/A	\$3,035,209	N/A	N/A	Formula Allocation	4/1/2020
CDHS	CARES COVID Received (P.L. 116-136)	\$2,144,174	TEFAP (The Emergency Food Assistance Program) ADMIN CARES P.L.116-13	The CARES Act provided provides \$450 million in supplemental funding for TEFAP for FY 2020. Up to \$150 million of the supplemental funding was available as administrative funds and the remaining amount was available for eligible food purchases, as allowed by the U.S. Department of Agriculture.	N/A	\$2,144,174	N/A	N/A	Formula Allocation	3/27/2020
CDHS	CARES COVID Received (P.L. 116-136)	\$45,100	TEFAP (The Emergency Food Assistance Program) ADMIN	Colorado's share of the supplemental administrative funding in support of TEFAP.	N/A	\$45,100	N/A	N/A	Formula Allocation	10/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
			CARES P.L116-13 FFY21							
CDHS	CARES COVID Received (P.L. 116-136)	\$1,400,923	TEFAP (The Emergency Food Assistance Program) ADMIN BBB (O)	CARES Act Division B provided supplemental funding to prevent, prepare for, and respond to coronavirus by providing support for agricultural producers impacted by the COVID-19 pandemic.	N/A	\$1,400,923	N/A	N/A	Formula Allocation	10/1/2021
CDHS	CARES COVID Received (P.L. 116-136)	\$42,457,884	Child Care and Development Block Grant (CARES)	On March 27, 2020, the Coronavirus Aid, Relief, and Economic Security (CARES) Act was signed into law (P.L. 116-136). The CARES Act includes \$3.5 billion in supplemental appropriations for the Child Care and Development Block Grant (CCDBG). These funds are to be used to “prevent, prepare for, and respond to coronavirus.” The CCDBG is a law that authorizes the Child Care and Development Fund (CCDF) program. CCDF is administered by states, territories and	N/A	\$42,457,884	N/A	N/A	Formula allocation	3/27/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				tribes and outlines how federal funds will be used.						
CDHS	CARES COVID Received (P.L. 116-136)	\$2,000,000	Emergency Grants to Address Mental and Substance Use Disorders During COVID-19	These funds are being used to provide services to individuals impacted by COVID-19 to include the following: crisis services, healthcare provider and educator supports, and technical assistance to homelessness services providers.	N/A	\$2,000,000	N/A	N/A	Formula allocation	4/20/2020
CDHS	CARES COVID Received (P.L. 116-136)	\$15,420,140	Low-Income Home Energy Assistance (CARES)	The CARES Act included \$900 million in funds to states to help households pay their energy bills. Funds were appropriated through section 2602 of the Low-Income Home Energy Assistance Act of 1981 (42 U.S.C. 8621 et seq.) and were available to be spent through September 2021.	N/A	\$15,420,140	N/A	N/A	Formula allocation	3/27/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	CARES COVID Received (P.L. 116-136)	\$598,251	Family Violence Prevention and Services (CARES)	The Family Violence Prevention and Services Program administers the Family Violence Prevention and Services Act (FVPSA), the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children. This supplemental CARES Act funding was awarded for efforts to prepare, prevent, and respond to the COVID-19 public health emergency.	N/A	\$598,251	N/A	N/A	Formula allocation and grant application	3/27/2020
CDHS	CARES COVID Received (P.L. 116-136)	\$714,583	Child Welfare Services_State Grants (CARES) Title IV-B	The CARES Act provided emergency funding for use by child welfare agencies to prevent, prepare for, and respond to child welfare needs arising from or relating to the COVID-19 pandemic.	N/A	\$714,583	N/A	N/A	Formula allocation to counties.	3/27/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	CARES Provider Relief	\$1,498,434	CARES Phase I Provider Relief Payments - Institutes	<p>The Mental Health Institutes at Fort Logan and Pueblo (“Institutes”) and Forensic Services, under the auspices of the Office of Behavioral Health (OBH), partners with patients, families, and their communities to provide quality services that assist patients in achieving their mental health and health care goals. The CARES Act Provider Relief Fund (PRF) appropriates \$50 Billion general distribution to healthcare providers to prevent, prepare for and respond to coronavirus. The funds were solely for the purpose of healthcare-related expenditures or lost revenues attributable to coronavirus. Specifically, the institutes created isolation treatment units for positive COVID-19 patients and purchased other necessary</p>	N/A	\$1,498,434	N/A	N/A	Formula allocation	4/17/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				equipment to prevent the spread of the virus.						
CDHS	CARES Provider Relief	\$408,842	CARES Phase I Provider Relief Payments - VCLCs	The VCLCs provide the long-term care, short-term rehabilitation, domiciliary cottages, secured memory care program, and end-of-life/comfort care to honorably discharged veterans, veteran's spouse/widows, and gold star parents. The CARES Act provider Relief appropriates \$50 Billion general distribution to healthcare provider to prevent, prepare for and respond to COVID-19. The funds are used to Medical supplies like PPE and lost of revenues attributable to COVID-19.	N/A	\$408,842	N/A	N/A	Formula Allocation	4/17/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	CARES Provider Relief	\$1,954,300	CARES Phase II - VCLCs, Targeted (Skilled Nursing)	The VCLCs provide the long-term care, short-term rehabilitation, domiciliary cottages, secured memory care program, and end-of-life/comfort care to honorably discharged veterans, veteran's spouse/widows, and gold star parents. The funds received from the Public Health and Social Services Emergency Fund as appropriated in Public Law 116-136 or Public Law 116-139 ("Relief Fund") for healthcare provider to prevent, prepare for and respond to COVID-19. The funds are only used for health care related expenses or loss revenues that are attributable to COVID-19.	N/A	\$1,954,300	N/A	N/A	Formula Allocation	5/22/2020
CDHS	CARES Provider Relief	\$883,412	CARES QIP Sept. 2020 - VCLCs	The VCLCs provide the long-term care, short-term rehabilitation, domiciliary cottages, secured memory care program, and end-of-life/comfort care to	N/A	\$883,412	N/A	N/A	Formula Allocation	11/2/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				honorably discharged veterans, veteran's spouse/widows, and gold star parents. The funds also received from the Public Health and Social Services Emergency Fund as appropriated in Public Law 116-136 or Public Law 116-139 (" Relief Fund") for Skilled Nursing Facility and Nursing Home Infection Control.						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$1,390,039	CRRSA Act, 2021 suppl. funding for Adult Protective Services under SSA Title XX Section 2042(b)	Funds awarded under this opportunity will provide Adult Protective Services programs (APS) in the States and territories with resources related to their response during the Coronavirus Public Health Emergency. This funding is intended to enhance, improve, and expand the ability of APS to investigate allegations of abuse, neglect, and exploitation in the context of COVID-19.	N/A	\$1,390,039	N/A	N/A	Formula Allocation	4/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$392,836	Aging and Disability Resources for Colorado (ADRC) COVID Vaccination Project	These funds support the work of the ADRCs in providing vaccine related access and services	N/A	\$392,836	N/A	N/A	Grant Application	4/1/2021
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$2,569,933	Consolidated Appropriations Act, 2021 suppl. funding, nutrition Older Americans Act (OAA) Title III-C2	Title III-C2 of the Older Americans Act supports Home Delivered Meal programs	N/A	\$2,569,933	N/A	N/A	Formula Allocation	12/27/2020
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$61,189	CRRSA Act, 2021 funding for Long Term Care (LTC) Ombudsman, SSA Title XX Section 2043(a)(1)(A)	For the State Ombudsman to help with getting Ombudsman back into facilities.	N/A	\$61,189	N/A	N/A	Grant Application	4/1/2021
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$764,861	(VAC5) Expanding Access to COVID-19 Vaccines via the Aging Network Award Authority: P.L. 116-260 and P.L. 116-131 (OAA) and 42 U.S. Code Sec. 241 (PHS Act)	Vaccine funding supports all vaccine related activities by the Area Agencies on Aging	N/A	\$764,861	N/A	N/A	Formula Allocation	4/1/2021
CDHS	HR 133 - Consolidated Appropriations	\$66,687	Expanding Disabilities Network's (DD	The DD Council used these funds to help providers of services	N/A	\$66,687	N/A	N/A	Direct Federal	4/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
	Act [P.L. 116-260]		Councils) Access to COVID 19 Vaccines. Award Authority: P.L. 116-260	that they fund buy PPE during the beginning of COVID					Award to Program	
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$50,732	Commodity Supplemental Food Program (CSFP) ADMN CVID SUPP PL116-26	The Consolidated Appropriations Act provides supplemental funding to states to cover increased costs in administering the Commodity Supplemental Food Program (CSFP) in FFY 2021.	N/A	\$50,732	N/A	N/A	Formula	10/1/2020
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$1,231,037	Consolidated Appropriations Act 2021 - SNAP State Admin Expense Allocation	The Act appropriates an additional \$100 million for SNAP administrative expenses in federal fiscal year 2021. Funds were available to offset the costs associated with implementing the temporary benefit increase and other allowable SNAP administrative costs.	N/A	\$1,231,037	N/A	N/A	Formula. Funds added to the State's line of credit	10/1/2020
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$4,741,465	SNAP (Supplemental Nutrition Assistance Program) PEBT	The Act provided guidance to states to issue P-EBT benefits during the 2020-2021 school year. Administrative funds	N/A	\$4,741,465	N/A	N/A	Formula	10/01/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				were made available to states to fund the system and other administrative costs to issue benefits.						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$1,120,738	TEFAP ADMN COVID S PL116-260	The Act included \$79.63 million in TEFAP administrative funds for states' costs to distribute commodities in federal FY 2021. States are allowed to use the funds for program administration or convert them into food funds.	N/A	\$1,120,738	N/A	N/A	Formula allocation	10/1/2020
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$119,294,226	CCDF Coronavirus Response and Relief Supplemental Act (CRRSA)	The Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act provided \$10 billion in supplemental Child Care and Development Fund (CCDF) funding to prevent, prepare for, and respond to coronavirus.	N/A	\$119,294,226	N/A	N/A	Formula allocation	12/27/2020
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$2,859,649	Emergency Grants to Address Mental and Substance Use Disorders During COVID-19	Connect Coloradans affected by COVID-19 with proper behavioral health care. This includes children, adolescents and adults	N/A	\$2,859,649	N/A	N/A	Formula allocation with grant application	02/01/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				who have serious emotional disturbances, serious mental illness, and substance use disorders.						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$16,240,446	Block Grants for Community Mental Health Services	Support states in carrying out plans for providing comprehensive community mental health services, with specific target populations being adults with serious mental illnesses and children with serious emotional disturbances.	N/A	\$16,240,446	N/A	N/A	Formula allocation with grant application	3/15/2021
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$27,102,042	Block Grants for Prevention and Treatment of Substance Abuse	The SABG program's objective is to help plan, implement, and evaluate activities that prevent and treat substance abuse.	N/A	\$27,102,042	N/A	N/A	Formula allocation with grant application	3/15/2021
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$8,518,221	Low Income Household Water Assistance Program (LIHWAP) PL 116-260	The Consolidated Appropriations Act appropriated \$638 million to forgive households' overdue water and sewer bills.	N/A	\$8,518,221	N/A	N/A	Formula	5/28/2021
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$1,525,883	Veteran's Community Living Centers (VCLC's) CAA1 Funds HR 133	The VCLCs provide the long-term care, short-term rehabilitation, domiciliary cottages, secured memory care	N/A	\$1,525,883	N/A	N/A	Formula	7/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				program, and end-of-life/comfort care to honorably discharged veterans, veteran's spouse/widows, and gold star parents. The purpose of this fund is for prevention, preparation, and response to COVID-19.						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$184,257	Domiciles CAA1 Grant	The VCLCs provide the long-term care, short-term rehabilitation, domiciliary cottages, secured memory care program, and end-of-life/comfort care to honorably discharged veterans, veteran's spouse/widows, and gold star parents. The purpose of this fund is for prevention, preparation, and response to COVID-19.	N/A	\$184,257	N/A	N/A	Formula	7/1/2021
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$847,869	PSSF - Supporting Foster Youth and Families through the Pandemic Act, Division X of Public Law (P.L.) 116-260, the Consolidated	This program prevents the unnecessary separation of children from their families, improves the quality of care and services to children and their families, and ensures permanency for	N/A	\$847,869	N/A	N/A	Formula Allocation	10/1/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
			Appropriations Act, 2021	children by reuniting them with their parents, by adoption or by another permanent living arrangement. 3,868 individuals are served in 36 counties.						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$4,302,679	Chafee IL - Supporting Foster Youth and Families through the Pandemic Act, Division X of Public Law (P.L.) 116-260, the Consolidated Appropriations Act, 2021	The John H. Chafee Foster Care Program for Successful Transition to Adulthood (Chafee program, formerly the John H. Chafee Foster Care Independence Program) was created following the passage of the Foster Care Independence Act (FCIA) of 1999 (Public Law 106-169). The program provides assistance to help youth currently and formerly in foster care successfully transition to adulthood by providing grants to States and eligible Tribes that submit an approvable plan. Activities and programs allowable under the Chafee program include help	N/A	\$4,302,679	N/A	N/A	Formula	10/1/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				with education, employment financial management, housing, emotional support, and assured connections to caring adults for older youth in foster care						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$1,781,814	FFY21 Title IV-E Prevention and Kinship Navigator	Section 8, Division X enacted temporary flexibilities in the title IV-E Kinship Navigator program and also authorizes 100 percent Federal Financial Participation (FFP) for allowable costs for a limited period of time. The flexibilities and enhanced funding are in effect during the COVID-19 public health emergency period, defined in Division X as the period from April 1, 2020 through September 30, 2021 (section 2(2) of Division X). The flexibilities authorized by Division X include the ability to use title IV-E Kinship Navigator funds “to provide short-term support to kinship	N/A	\$1,781,814	N/A	N/A	Entitlement	10/1/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				families for direct services or assistance during the COVID-19 public health emergency period.”						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$625,389	Chafee ETV - Supporting Foster Youth and Families through the Pandemic Act, Division X of Public Law (P.L.) 116-260, the Consolidated Appropriations Act, 2021	The Educational and Training Vouchers Program (ETV) for Youths Aging out of Foster Care was added to the CFCIP in 2002. ETV provides resources specifically to meet the education and training needs of youth aging out of foster care. This program makes available vouchers for the cost of attendance so youth can access post secondary education and training for eligible youth.	N/A	\$625,389	N/A	N/A	Formula	10/1/2020
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$397,092,825	SNAP (Supplemental Nutrition Assistance Program) PEBT	The Act provided food benefits issued to households who's children would have received free or reduced-price breakfasts and lunches while in school or subsidized childcare during the	N/A		N/A	\$397,092,825	Entitlement	5/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				2020-2021 school year and during the summer of 2021.						
CDHS	HR 133 - Consolidated Appropriations Act [P.L. 116-260]	\$225,182,068	SNAP (Supplemental Nutrition Assistance Program) MAX Benefits	The Act temporarily raised the maximum monthly Supplemental Nutrition Assistance Program (SNAP) allotments by 15%, effective January 1, 2021 through June 30, 2021.	N/A		N/A	\$225,182,068	Entitlement	1/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$7,001,538	American Rescue Plan (ARP) for Supportive Services under Title III-B of the Older Americans Act (OAA)	Title III-B of the Older Americans Act is for supportive services, such as Transportation and Material Aid	N/A	\$7,001,538	N/A	N/A	Formula Allocation	4/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$4,566,220	American Rescue Plan (ARP) for Congregate Meals under Title III-C1 of the OAA	Title III-C of the Older Americans Act supports Nutrition services, such as Congregate Meals	N/A	\$4,566,220	N/A	N/A	Formula Allocation	4/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$6,849,331	American Rescue Plan(ARP) for Home Delivered Meals under Title III-C2 of the OAA	Title III-C of the Older Americans Act supports Nutrition services, such as Home Delivered Meals	N/A	\$6,849,331	N/A	N/A	Formula Allocation	4/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$669,712	American Rescue Plan (ARP) for Preventive Health under Title III-D of the OAA	Title III-D of the Older Americans Act supports evidenced based services such as fall	N/A	\$669,712	N/A	N/A	Formula Allocation	4/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				prevention and chronic disease management						
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$2,060,027	American Rescue Plan (ARP) for Family Caregivers under Title III-E of the OAA	Title III-E of the Older Americans Act supports the Caregiver program and services	N/A	\$2,060,027	N/A	N/A	Formula Allocation	4/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$152,207	American Rescue Plan (ARP) for Ombudsman Program under Title VII of the OAA	This award from Title VII of the Older Americans Act is to support Ombudsman services	N/A	\$152,207	N/A	N/A	Formula Allocation	4/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$1,274,252	American Rescue Plan (ARP) for Adult Protective Services under SSA Title XX Section 2042(b)	The purpose of this opportunity is to enhance and improve adult protective services provided by states and local units of government. Funds awarded under this opportunity will provide Adult Protective Services (APS) programs in the states and territories with resources to enhance, improve, and expand the ability of APS to investigate allegations of abuse, neglect, and exploitation.	N/A	\$1,274,252	N/A	N/A	Grant Application	8/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$3,105,847	FY 2021 SNAP ARPA Funding - SNAP Contingency	Given the increased demand for SNAP benefits and numerous federal waivers to support eligible households apply for and receive benefits, the federal government provided additional State Program Administration (SAE) funds to support states' work to administer the program efficiently and effectively.	N/A	\$3,105,847	N/A	N/A	Formula Allocation	3/11/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$178,914,747	ARPA Child Care Supplemental Discretionary Funds	Supplemental Child Care and Development Fund (CCDF) Discretionary Funds Appropriated in the American Rescue Plan (ARP) Act of 2021 (Public Law 117- 2) signed into law March 11, 2021. Section 2201 of the ARP Act provides supplemental discretionary resources to states, territories, and tribes to implement the CCDF program. The ARP Act requires lead agencies to use these supplemental funds to	N/A	\$178,914,747	N/A	N/A	Formula allocation	10/1/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				carry out the program authorized under section 658C of the CCDBG Act (42 U.S.C. 9858a). Lead agencies have until September 30, 2023 to obligate the funds.						
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$286,156,175	ARPA Child Care Stabilization Funds	Supplemental Child Care and Development Fund (CCDF) Discretionary Funds Appropriated in the American Rescue Plan (ARP) Act of 2021 (Public Law 117- 2) signed into law March 11, 2021. Section 2202 of the ARP Act provides resources to states, territories, and tribes to provide stabilization grants to child care providers.	N/A	\$286,156,175	N/A	N/A	Formula allocation	10/1/2020
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$23,406,309	ARPA Substance Abuse Prevention & Treatment Block Grant	Bolstering programs that have experienced increased demand during the pandemic.	N/A	\$23,406,309	N/A	N/A	Formula allocation	9/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$28,051,679	ARPA Block Grants for Community Mental Health Services	Bolstering programs that have experienced increased demand during the pandemic.	N/A	\$28,051,679	N/A	N/A	Formula allocation	9/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$13,502,982	TANF, Pandemic Emergency Assistance Funds (PEAF)	ARPA appropriated emergency TANF funds to States, Territories, and Tribes to be used for non-recurrent, short-term (NRST) benefits. Law requires such benefits to meet a specific crisis situation, address short-term needs, and not exceed four months. Federal guidance stipulates that these funds cannot supplant existing TANF dollars. Colorado law requires TANF funds to be appropriated by the General Assembly. These funds were appropriated in SB 21-205 to be used as one-time payments to households receiving TANF cash assistance.	N/A	\$13,502,982	N/A	N/A	Formula allocation	10/1/2020
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$71,759,071	LEAP, American Rescue Plan (ARP)	ARPA appropriated funds to supplement states' block grant funding that is available to help eligible households with energy bill assistance, emergency furnace repair and replacement,	N/A	\$71,759,071	N/A	N/A	Formula allocation	3/11/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				and weatherization. Additionally, funds can be used to help customers pay down energy bill arrearages that have built up during the Pandemic.						
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$6,675,722	Low Income Household Water Assistance Program (LIHWAP) ARPA	ARPA appropriated funds to forgive households' overdue water and sewer bills. These funds supplement the water assistance funding provided to states through the Consolidated Appropriations Act.	N/A	\$4	N/A	N/A	Formula allocation	5/28/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$428,512	DOMICILES ARPA GRANT	The VCLCs provide the long-term care, short-term rehabilitation, domiciliary cottages, secured memory care program, and end-of-life/comfort care to honorably discharged veterans, veteran's spouse/widows, and gold star parents. The purpose of this fund is for prevention, preparation, and response to COVID-19.	N/A	\$428,512	N/A	N/A	Formula Allocation	7/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$3,915,717	One time ARPA funds from Veterans Affairs	The VCLCs provide the long-term care, short-term rehabilitation, domiciliary cottages, secured memory care program, and end-of-life/comfort care to honorably discharged veterans, veteran's spouse/widows, and gold star parents. The purpose of this fund is for prevention, preparation, and response to COVID-19.	N/A	\$3,915,717	N/A	N/A	Formula allocation	7/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$4,200,999	Community-Based Child Abuse Prevention Grants (CBCAP) ARPA	Community-Based Child Abuse Prevention (CBCAP) programs were established by Title II of the Child Abuse Prevention and Treatment Act Amendments of 1996. CAPTA has been amended several times and was last reauthorized on December 20, 2010, by the CAPTA Reauthorization Act of 2010 (P.L. 111-320). It was amended in 2015, 2016, and 2018, and 2019. Purpose is to	N/A	\$4,200,999	N/A	N/A	Formula allocation and grant application	10/01/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				<p>support community-based efforts to develop, operate, expand, enhance, and coordinate initiatives, programs, and activities to prevent child abuse and neglect and to support the coordination of resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect; and to foster understanding, appreciation and knowledge of diverse populations in order to effectively prevent and treat child abuse and neglect. AMong provisions of ARPA, P.L. 117-2 included \$250 million in supplemental funding for the CBCAP grant program.</p>						

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$3,339,306	Individuals with Disabilities Education Act (ARPA)	IDEA funds are appropriated by Congress and are intended to support early intervention and special education services for infants, toddlers, children and youth with disabilities and their families. ARPA included \$250 million for Part C, Early Intervention. Early Intervention provides services to infants and toddlers birth up to the age of three with developmental delays or disabilities, and their families. These services are provided under the federal Part C of the Disabilities Education Act (IDEA).	N/A	\$3,339,306	N/A	N/A	Formula allocation	07/01/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$829,563	Maternal, Infant and Early Childhood Homevisiting Grant Program (MIECHV)	The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program supports pregnant people and parents with young children who live in communities that face greater risks and	N/A	\$829,563	N/A	N/A	Formula allocaiton and grant application	5/1/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				barriers to achieving positive maternal and child health outcomes. Families choose to participate in home visiting programs, and partner with health, social service, and child development professionals to set and achieve goals that improve their health and well-being. ARPA awarded approximately \$40 million in emergency home visiting funds to the states.						
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$1,694,048	Maternal, Infant and Early Childhood Homevisiting Grant Program (MIECHV)	The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program supports pregnant people and parents with young children who live in communities that face greater risks and barriers to achieving positive maternal and child health outcomes. Families choose to participate in home visiting programs, and partner with health,	N/A	\$1,694,048	N/A	N/A	Formula allocation and grant application	12/01/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				social service, and child development professionals to set and achieve goals that improve their health and well-being. ARPA awarded approximately \$40 million in emergency home visiting funds to the states.						
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$2,027,062	Family Violence Prevention and Services/Domestic Violence Shelter & Supportive Services	The Family Violence Prevention and Services Program administers the Family Violence Prevention and Services Act (FVPSA), the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children. This supplemental award 'American Rescue Plan Supplemental Funding' was awarded for efforts to prepare, prevent, and respond to the COVID-19 public health emergency.	N/A	\$2,027,062	N/A	N/A	Formula allocation and grant application	10/01/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$2,796,371	Family Violence Prevention and Services/ Sexual Assault/ Rape Crisis Services and Supports	The Family Violence Prevention and Services Program administers the Family Violence Prevention and Services Act (FVPSA), the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children. This supplemental award 'American Rescue Plan Grants to Support Survivors of Sexual Assault' was awarded to 1) assist with the transition to virtual/remote assistance to survivors of sexual assault, and 2) support the increased emergency needs of sexual assault survivors as a result of the COVID-19 public health emergency.	N/A	\$2,796,371	N/A	N/A	Formula allocation and grant application	10/01/2020

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$5,806,277	Family Violence Prevention and Services/Domestic Violence Shelter and Supportive Services	The Family Violence Prevention and Services Program administers the Family Violence Prevention and Services Act (FVPSA), the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children. This supplemental award 'American Rescue Plan Act COVID-19 Testing, Vaccine Access, and Mobile Health Units Access Supplemental Funding' was awarded to prevent, prepare for, and respond to the COVID-19 virus with an intentional focus of increasing access to health care and increasing supports for domestic violence survivors and their dependents.	N/A	\$5,806,277	N/A	N/A	Formula allocation and grant application	10/01/2020
CDHS	HR 1319 - American Rescue Plan	\$1,708,243	Child Abuse and Neglect - ARPA	Supplemental CAPTA State Grant funds provided through the American Rescue Plan	N/A	\$1,708,243	N/A	N/A	Formula Allocation	10/01/2020

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State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
	Act [P.L. 117-002]			(ARPA) will improve child protection services, help mitigate risks and prevent child abuse and neglect focusing on black, brown and indigenous and LGBTQ+ children and families in underserved and over-represented communities.						
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$186,868	SNAP (Supplemental Nutrition Assistance Program) PEBT	Administrative funds awarded to states to issue P-EBT benefits to eligible households in the Summer of 2021.	N/A		N/A	\$186,868	Formula	11/1/2021
CDHS	HR 1319 - American Rescue Plan Act [P.L. 117-002]	\$135,439,397	SNAP (Supplemental Nutrition Assistance Program) MAX Benefits	ARPA extended the temporary 15% increase in the maximum monthly Supplemental Nutrition Assistance Program (SNAP) allotments to households' benefits from July 1, 2021 through September 30, 2021.	N/A		N/A	\$135,439,397	Entitlement	7/1/2021
CDHS	Disaster Emergency Fund	\$155,409	COVID Relief: Electronic Benefits Transfer Service	Funds available through the State's Disaster Recovery Fund were allocated to support the increased cost to issue electronic benefits	N/A	\$155,409	N/A	N/A	Executive Order	1/4/2021

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
				transfer cards per the increased volume of SNAP cases.						
CDHS	Disaster Emergency Fund	\$600,000	COVID Relief: P-EBT Emergency EO21-28	Funds were made available to support the cost of implementing P-EBT, before the federal government provided funds to states. Funds were used for making required changes by the Electronic Benefits Transfer sytem vendor, PEAK, and paying temporary staff to impelement the new program.	N/A	\$600,000	N/A	N/A	Executive Order	2/9/2021
CDHS	Disaster Emergency Fund	\$86,129	COVID Relief: Supplemental Nutrition Assistance Program	Funds were made available to pay for a contracted data analyst to work with CDHS and CDE data per the expanded food assistance benefits.	N/A	\$86,129	N/A	N/A	Executive Order	1/4/21
CDHS	Disaster Emergency Fund	\$264,000	COVID Relief: 2-1-1 Partnership With United Way	Contiued efforts to connect Coloradans with benefits and public assistance programs in partnership with the United Way.	N/A	\$264,000	N/A	N/A	Executive Order	1/4/21

One-time Funds Received/Anticipated to be Received (amounts)

State Department	Federal Bill (e.g., CARES, ARPA, Infrastructure Investment and Jobs Act)	Total Amount by Bill (Program Details Should Sum to These Figures)	Major Program Name	Brief Program Description	Funds originating as Coronavirus State Fiscal Recovery Funds (appropriated/transferred in 2021 legislative session)	Funds Provided Direct to the State Department for Administration or Other Specific Functions. (Exclude funds passed through to other governments or beneficiaries.)	Funds Provided to the State Department and Passed-through to Another Government Entity (e.g., ESSER funds)	Funds Provided to and Administered by the State Department, but Solely for Direct Allocation to Beneficiaries	For amounts other than Fiscal Recovery Funds, How does State Access the Funds (e.g., formula allocation, grant application)	When are the funds available? (e.g., Mar 2020-Dec 2022)
CDHS	SB21-292	\$4,750,000	ARPA - Domestic Abuse Program	SB21-292 allocates funds for victim's services programs to assist those who have been disproportionately and negatively affected by the COVID-19 public health emergency, including those affected by domestic violence, sexual assault, and violence generally. DVP will administer these funds to support operations at anti-domestic and sexual violence organizations and to establish a flexible financial assistance for survivors project to offset negative economic impacts and personal safety insecurity that has been compounded by the COVID-19 global pandemic.	4,750,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$300,000	Ombudsman for Behavioral Health	The Ombudsman for Behavioral Health may use the funds to help resolve behavioral health-care access and coverage concerns or	300,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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				complaints for consumers and health-care providers						
CDHS	SB21-137	\$10,000,000	MSOs increase SUD access	Funds are to be directed to the managed service organizations for increasing access to effective substance use disorder treatment and recovery.	10,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$5,000,000	Colorado Crisis System Services for Youth	Use of the funds is to address the crisis system services impacted by COVID-19. Colorado Crisis System Services in response to the effect of COVID-19 on the behavioral health of Colorado residents, including statewide access to crisis system services for children and youth. This funding will provide specialized in-home crisis resolution services for children, youth, and their families who do not need inpatient level of care.	\$5,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$500,000	Community Transition Services for Guardianship	OBH, Guardianship is needed for some clients that cannot make decisions for themselves nor have a family	\$500,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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				member able to step in. Without a guardian these client's would likely not be able to leave the Instittes.						
CDHS	SB21-137	\$5,000,000	Jail Based Behavioral Health Services	Provides appropriate behavioral health services to inmates while supporting continuity of care within the community after release from incarceration	\$5,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$1,000,000	BH and SUD Treatment for Children, Youth and Their Families - Mental Health	Use of the funds is to address the behavioral health and substance use disorder treatment for children and their families. Managed Service Organizations will provide services through an urban and a rural site and dedicated MSO staff will manage outreach and referrals for the treatment sites. Clients that will be targeted may include: referrals from schools, hospitals, child-welfare, juvenile justice and other community serving referral areas.	\$1,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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CDHS	SB21-137	\$1,000,000	BH and SUD Treatment for Children, Youth and Their Families - Substance Abuse	use of the funds is to address the behavioral health and substance use disorder treatment for children and their families. Managed Service Organizations will provide services through an urban and a rural site and dedicated MSO staff will manage outreach and referrals for the treatment sites. Clients that will be targeted may include: referrals from schools, hospitals, child-welfare, juvenile justice and other community serving referral areas.	\$1,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$1,000,000	Mental Health Awareness Campaign	Use of the funds are for a mental health awareness marketing and communications campaign.	\$1,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$18,000,000	Behavioral Health-care Workforce Development Program	Use of the funds are for a workforce development program in OBH to recruit, retain, and train the behavioral health workforce.	\$18,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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CDHS	SB21-137	\$26,000,000	Statewide Care Coordination Infrastructure	Use of the funds is to develop coordination infrastructure for all Coloradans to identify and locate behavioral health services in their community. The Behavioral Health Task Force prioritized care coordination as one of its top recommendations. The implementation of this recommendation will help Coloradans initiate care and navigate to the right behavioral health treatments, preventative care, and connect to services that address social determinants of health.	\$26,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$9,000,000	County-based Behavioral Health Grant Program	Use of the funds provides matching grants to county departments of human or social services for the expansion or improvement of local or regional behavioral health disorder treatment programs. Grant recipients may use the money received	\$9,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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				through the grant program for the following purposes: peer training; augmentation of direct therapy; acute treatment units; inpatient treatment programs; outreach and education; navigation or care coordination; capital investments in behavioral health center infrastructure; services for non-English-speaking individuals; culturally responsive and attuned services; suicide prevention and intervention; crisis response; withdrawal management; workforce development; supporting regional service delivery.						

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CDHS	SB21-137	\$3,000,000	High-Risk Families Fund	<p>OBH - CDHS may expend the funds for the following purposes: (a) services to high-risk parents, including pregnant and parent women, with SUD; (b) services for high-risk children and youth with BHD; (c) services for families with BH needs including family-centered treatment models. Money expended must be used for one-time allocations to increase treatment capacity, including start-up costs and capital expenditures, or to provide SUD recovery and wraparound services, including the Prenatal Plus Program and access to child care, to high-risk families.</p> <p>SECTION 37. Appropriation. (10) For the 2021-22 state fiscal year, \$3,000,000 is appropriated to the high-risk families cash fund created in section 27-80-123 (2), C.R.S.</p>	\$3,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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				This appropriation is from the behavioral and mental health cash fund created in section 24-75-230, C.R.S., and of money the state received from the federal coronavirus state fiscal recovery fund. The department of human services is responsible for the accounting related to this appropriation.						
CDHS	SB21-137	\$500,000	Community Mental Health Centers - COVID 19 PPE	OBH allocated \$3.25M of funds to the CMHC's to be used for COVID-related expenses: Personal Protective Equipment (PPE) Cleaning supplies, Protective barriers/shields, Trainings on disease prevention, use of PPE and cleaning procedures, payroll premiums, hazard pay, and staff incentives, telehealth.	\$500,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$1,500,000	Community Mental Health Centers - COVID 19 Mental Health	OBH allocated \$3.25M of funds to the CMHC's to be used for COVID-related expenses:	\$1,500,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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				Personal Protective Equipment (PPE) Cleaning supplies, Protective barriers/shields, Trainings on disease prevention, use of PPE and cleaning procedures, payroll premiums, hazard pay, and staff incentives, telehealth.						
CDHS	SB21-137	\$1,250,000	Community Mental Health Centers - COVID 19 Payroll	OBH allocated \$3.25M of funds to the CMHC's to be used for COVID-related expenses: Personal Protective Equipment (PPE) Cleaning supplies, Protective barriers/shields, Trainings on disease prevention, use of PPE and cleaning procedures, payroll premiums, hazard pay, and staff incentives, telehealth.	\$1,250,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021
CDHS	SB21-137	\$2,000,000	Community Mental Health Centers - School Aged Children	Use of the funds is to provide services and resources to school-aged children and parents by community mental health centers,	\$2,000,000	N/A	N/A	N/A	Legislative appropriation	7/1/2021

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				school-based clinicians and prevention specialists.						
				Use of the funds will be directed towards the new pilot program that will be initiated by the Division of Child Welfare, with the Department of Human Services. This funding will be used for a pilot program for residential placement of children and youth with high acuity physical, mental or behavioral health needs. The annual spending plan includes \$2,044,000 to contract with a Psychiatric Residential Treatment Facility (PRTF) for 7 beds, \$2,372,500 to contract with a Qualified Residential Treatment provider (QRTP) for 10 beds, and \$405,260 for 4 FTE, and \$155,125 to supplement therapeutic foster care rates for children stepping down					Legislative appropriation	7/1/2021
CDHS	SB21-137	\$5,000,000	Residential Placement for Youth with High Acuity Needs		\$5,000,000	N/A	N/A	N/A		

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				from the contracted facilities. The remaining \$23,115 will allow flexibility in these estimated costs.						
CDHS	SB21-137	\$500,000	Early Childhood Mental Health Consultation Program	ECMH Consultation (ECMHC) is a free, voluntary caregiver support program for parents and caregivers caring for children ages six and under who desire extra support to foster the social-emotional development and mental health of the children in their care.	\$500,000	N/A	N/A	N/A	Fiscal Recovery Funds	7/1/2021
CDHS	SB21-027	\$5,000,000	Food Pantry Assistance Grant Program	SB 21-027 appropriated funds to provide grants to food pantries and food banks across the State to address food insecurity in communities. The bill also allowed the Department to contract with a third-party provider to operate the program in FY 2021-22.	\$5,000,000	N/A	N/A	N/A	Legislative Appropriation	7/1/2021

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CDHS	SB21-288	\$20,450,000	Expand forensic capacity as the inpatient competency waitlist has worsened as a direct result of COVID-19	Support forensic services as pandemic has caused a shift in how services can be provided in hospital settings.	\$20,450,000	N/A	N/A	N/A	Interagency Agreement with the Office of State Planning and Budgeting	11/15/2021
CDHS	SB21-288	\$120,000	ARPA Administrative Personal Services Funding	Funding to support the CDHS Recovery Officer.	\$120,000	N/A	N/A	N/A	Interagency Agreement with the Office of State Planning and Budgeting	10/20/21
CDHS	SB21-288	\$11,891,605	ARPA Youth Residential Beds	This funding package includes three components: -\$5.0 million to expand the pilot established in SB21-137 to create up to 15 state-contracted residential beds for high acuity youth, -Approximately \$6.1 million dollars to open new high acuity beds at two Psychiatric Residential Treatment Facilities in Colorado, and -\$770,000 to pilot a youth assessment center to more appropriately	\$11,891,605	N/A	N/A	N/A	Interagency Agreement with the Office of State Planning and Budgeting	10/20/21

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				<p>match youth with placements and services responsive to their unique needs. Collectively, these funds will help rightsize Colorado's placement continuum and reduce the number of children and youth presently waiting in hospitals or in out-of-state residential facilities.</p>						