

JOINT BUDGET COMMITTEE



STAFF FIGURE SETTING FY 2023-24

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

(Office of Community Living)

JBC WORKING DOCUMENT - SUBJECT TO CHANGE
STAFF RECOMMENDATION DOES NOT REPRESENT COMMITTEE DECISION

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MARCH 8, 2023

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HOW TO USE THIS DOCUMENT

The Department Overview contains a table summarizing the staff recommended incremental changes followed by brief explanations of each incremental change. A similar overview table is provided for the division, but the description of incremental changes is not repeated, since it is available under the Department Overview.

In some of the analysis of decision items in this document, you may see language denoting certain 'levels of evidence', e.g. theory-informed, evidence-informed, or proven. For a detailed explanation of what is meant by 'levels of evidence', and how those levels of evidence are categorized, please refer to Section 2-3-210 (2), C.R.S.

DEPARTMENT OVERVIEW

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

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

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

This document covers the Office of Community Living, which oversees home- and community-based services for individuals with intellectual and developmental disabilities. The division is responsible for the following functions related to the provision of services by community-based providers:

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

SUMMARY OF STAFF RECOMMENDATIONS

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING (OFFICE OF COMMUNITY LIVING)						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$976,168,307	\$463,584,702	\$36,456,851	\$0	\$476,126,754	39.5
Recommended Long Bill Add-on	(28,747,810)	(36,421,057)	(579,040)	0	8,252,287	0.0
Other Legislation	(37,036,956)	(39,079,985)	(6,002,104)	0	8,045,133	0.0
TOTAL	\$910,383,541	\$388,083,660	\$29,875,707	\$0	\$492,424,174	39.5
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$910,383,541	\$388,083,660	\$29,875,707	\$0	\$492,424,174	39.5
R5 Office of Community Living	52,858,713	67,353,095	(291,256)	0	(14,203,126)	0.0
R7 Provider rates	26,131,936	12,949,772	208,819	0	12,973,345	0.0
R7 Targeted provider rates	50,380,173	15,892,721	8,793,573	0	25,693,879	0.0

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING (OFFICE OF COMMUNITY LIVING)						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
R10 Children with complex needs	3,538,858	0	1,769,429	0	1,769,429	0.0
R13 Case management redesign	2,956,309	0	1,478,155	0	1,478,154	0.0
BA7 Community based access to services	2,071,463	0	1,035,730	0	1,035,733	0.0
BA8 ARPA HCBS adjustments	16,027,286	0	6,979,326	0	9,047,960	0.0
Annualize prior year budget actions	11,766,231	33,682,808	(27,798,140)	0	5,881,563	0.0
TOTAL	\$1,076,114,510	\$517,962,056	\$22,051,343	\$0	\$536,101,111	39.5
INCREASE/(DECREASE)	\$165,730,969	\$129,878,396	(\$7,824,364)	\$0	\$43,676,937	0.0
Percentage Change	18.2%	33.5%	(26.2%)	0.0%	8.9%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$1,072,798,311	\$526,065,754	\$21,732,830	\$0	\$524,999,727	39.5
Request Above/(Below) Recommendation	(\$3,316,199)	\$8,103,698	(\$318,513)	\$0	(\$11,101,384)	0.0

DESCRIPTION OF INCREMENTAL CHANGES

R5 OFFICE OF COMMUNITY LIVING: The recommendation includes an increase of \$52.9 million total funds, including \$67.4 million General Fund, for caseload adjustments to maintain zero waitlists for the Home and Community Based Services Supported Living Services, Children’s Extensive Services, and Children’s Habilitation Residential Program waivers for individuals with intellectual and developmental disabilities, and fund 411 transition enrollments onto the Comprehensive waiver.

R7 PROVIDER RATES: The recommendation includes an increase of \$26.1 million total funds, including \$12.9 million General Fund, to reflect the Committee’s decision for a 3.0 percent common policy provider rate adjustment. Provider rates were discussed by Mr. Kurtz at a previous presentation.

R7 TARGETED PROVIDER RATES: The recommendation includes an increase of \$50.4 million total funds, including \$15.9 million General Fund, for a targeted rate increase for direct care workers providing HCBS services. Targeted rates affecting the Office of Community Living are the Non-Medical Transportation and Group Residential Services and Supports, as well as an increase in the base wage to \$15.75 in non-Denver counties, and \$17.29 in Denver (to comply with the recent increase in Denver’s minimum wage) for most other HCBS services. Provider rates were discussed by Mr. Kurtz at a previous presentation.

R10 CHILDREN WITH COMPLEX NEEDS: The recommendation includes \$3.5 million total funds in the Office of Community Living to expand skilled and therapeutic respite care for children with high physical and behavioral health needs. The recommendation proposes using federal funds made available through the American Rescue Plan Act to expand Home and Community Based Services through December 2024. The full General Fund cost will equate to \$1.8 million beginning in FY 2025-26.

R13 CASE MANAGEMENT REDESIGN: The recommendation includes an increase of \$3.6 million total funds, including \$168,000 General Fund in FY 2023-24, annualizing to \$9.0 million total funds including \$2.0 million General Fund in FY 2024-25 and \$9.0 million total funds including \$4.0 million General Fund in FY 2025-26 and beyond. The request seeks to: (1) provide onetime costs for Community Centered Board and Single Entry Point closeout reviews, (2) increase rates and expand reimbursable activities for case management. (3) provide Case Management training and learning management system licenses, and (4) provide resources for the new Care/Case Management tool.

BA7 COMMUNITY BASED ACCESS TO SERVICES: The recommendation includes an increase of \$6.3 million total funds, including \$175,000 General Fund in FY 2023-24 to respond to the Department of Justice finding that Colorado is in violation of Title II of the Americans with Disabilities Act. The response is focused on providing more information to members on their options to prevent unnecessary institutionalization, providing effective transition services out of the nursing facilities, expanding access to the community-based service system, and increasing access to integrated community-based housing opportunities.

BA8 ARPA HCBS ADJUSTMENTS: The recommendation includes an increase of \$9.9 million total funds to true up spending authority for the Department’s ARPA Home and Community Based Services Spending Plan. This true up is driven by the primarily by the federal government extending the deadline for which these funds can be spent, allowing the Department to move current year costs into future years.

ANNUALIZE PRIOR YEAR BUDGET ACTIONS: The request includes adjustments for out-year impacts of prior year legislation and budget actions.

ANNUALIZE PRIOR YEAR LEGISLATION AND BUDGET ACTIONS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 R10 Provider rates	\$60,238,749	\$30,116,661	\$4,265	\$0	\$30,117,823	0.0
FY 2021-22 667 IDD enrollments	6,455,911	3,227,956	0	0	3,227,955	0.0
SB 21-039 Elimination of subminimum wage	471,421	235,710	1	0	235,710	0.0
FY 2022-23 R9 OCL program enhancements	280,038	140,018	0	0	140,020	0.0
FY 2022-23 BA10 HCBS ARPA spending authority	(55,602,668)	0	(27,801,334)	0	(27,801,334)	0.0
FY 2021-22 R6 Remote supports for HCBS programs	(77,220)	(37,537)	(1,072)	0	(38,611)	0.0
TOTAL	\$11,766,231	\$33,682,808	(\$27,798,140)	\$0	\$5,881,563	0.0

(4) OFFICE OF COMMUNITY LIVING

The Office of Community Living Division of Intellectual and Developmental Disabilities oversees home and community-based services for individuals with intellectual and developmental disabilities. The division is responsible for the following functions related to the provision of services by community-based providers:

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

OFFICE OF COMMUNITY LIVING						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$976,168,307	\$463,584,702	\$36,456,851	\$0	\$476,126,754	39.5
Recommended Long Bill Add-on	(28,747,810)	(36,421,057)	(579,040)	0	8,252,287	0.0
Other Legislation	(37,036,956)	(39,079,985)	(6,002,104)	0	8,045,133	0.0
TOTAL	\$910,383,541	\$388,083,660	\$29,875,707	\$0	\$492,424,174	39.5
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$910,383,541	\$388,083,660	\$29,875,707	\$0	\$492,424,174	39.5
R5 Office of Community Living	52,858,713	67,353,095	(291,256)	0	(14,203,126)	0.0
R7 Provider rates	26,131,936	12,949,772	208,819	0	12,973,345	0.0
R7 Targeted provider rates	50,380,173	15,892,721	8,793,573	0	25,693,879	0.0
R10 Children with complex needs	3,538,858	0	1,769,429	0	1,769,429	0.0
R13 Case management redesign	2,956,309	0	1,478,155	0	1,478,154	0.0
BA7 Community based access to services	2,071,463	0	1,035,730	0	1,035,733	0.0
BA8 ARPA HCBS adjustments	16,027,286	0	6,979,326	0	9,047,960	0.0
Annualize prior year budget actions	11,766,231	33,682,808	(27,798,140)	0	5,881,563	0.0
TOTAL	\$1,076,114,510	\$517,962,056	\$22,051,343	\$0	\$536,101,111	39.5
INCREASE/(DECREASE)	\$165,730,969	\$129,878,396	(\$7,824,364)	\$0	\$43,676,937	0.0
Percentage Change	18.2%	33.5%	(26.2%)	0.0%	8.9%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$1,072,798,311	\$526,065,754	\$21,732,830	\$0	\$524,999,727	39.5
Request Above/(Below) Recommendation	(\$3,316,199)	\$8,103,698	(\$318,513)	\$0	(\$11,101,384)	0.0

DECISION ITEMS – OFFICE OF COMMUNITY LIVING

→ R5 OFFICE OF COMMUNITY LIVING CASELOAD ADJUSTMENT

REQUEST: The Department's November 1, 2022 budget request included:

- A FY 2022-23 decrease of \$21.7 million total funds, including \$39.1 million General Fund.
- A FY 2023-24 increase of \$29.9 million total funds, including \$14.4 million General Fund.

The February forecast adjusts those request numbers based on recent enrollment and average cost trends, this year, the forecast also includes adjustments for the enhanced federal match. The Department’s updated request includes:

- A FY 2022-23 decrease of \$50.4 million total funds, including \$75.5 million General Fund.
- A FY 2023-24 increase of \$2.4 million total funds, including a reduction of \$8.1 million General Fund.

This request is based on prior year utilization and expenditure data and includes funding to maintain a zero enrollment waitlist for the Adult Supported Living Services, Children’s Extensive Services, and Children’s Habilitation Residential Program waivers and for an additional 411 transitional enrollments for the Adult Comprehensive Services waiver. Adjustments to appropriations are frequently requested as new information becomes available and forecasts are updated.

FY 2022-23: In addition to providing funding to ensure that there is no enrollment waiting list for the SLS, CES, and CHRP waivers, H.B. 22-1329 (Long Bill) raised the enrollment cap for the Comprehensive waiver by 633. This includes 189 emergency enrollments, 43 foster care transitions, 41 clients expected to move from an institutional setting into the community, 91 youth transitions from the CES waiver, 47 aging-caregiver enrollments, and 222 additional enrollments. The following adjustments will align appropriations with the February 2023 forecast.

FY 2022-23 CASELOAD EXPENDITURES ADJUSTMENT BASED ON THE FEBRUARY 15, 2023 FORECAST

LINE ITEM	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROP. FUNDS	FEDERAL FUNDS
SB 23-117 (Supplemental Bill)					
Adult Comprehensive Services	(\$10,639,705)	(\$27,141,831)	\$21,357	\$0	\$16,480,769
Adult Supported Living Services	(1,701,073)	(3,770,179)	471,974	0	1,597,132
Children's Extensive Support Services	(878,126)	(1,728,966)	0	0	850,840
Children's Habilitation Residential Program	1,290,910	231,969	0	0	1,058,941
Case Management	(9,769,429)	(6,670,978)	140,016	0	(3,238,467)
Family Support Services	2,901,200	2,901,200	0	0	0
State SLS	(5,295,723)	(5,295,723)	0	0	0
State Case Management	2,394,523	2,394,523	0	0	0
Total Adjustment in SB23-117 (Supplemental Bill)	(\$21,697,423)	(\$39,079,985)	\$633,347	\$0	\$16,749,215
Recommended Long Bill Adjustment					
Adult Comprehensive Services	(\$33,745,724)	(\$34,479,440)	(\$93,308)	\$0	\$827,024
Adult Supported Living Services	(2,250,384)	(2,820,372)	(382,844)	0	952,832
Children's Extensive Support Services	9,651,808	3,091,374	0	0	6,560,434
Children's Habilitation Residential Program	(1,596,193)	(1,077,391)	0	0	(518,802)
Case Management	(807,317)	(1,135,228)	(102,888)	0	430,799
Family Support Services	0	0	0	0	0
State SLS	0	0	0	0	0
State Case Management	0	0	0	0	0
Total Recommended Long Bill Adjustment	(\$28,747,810)	(\$36,421,057)	(\$579,040)	0	\$8,252,287
Total FY 2022-23 Adjustment					
Adult Comprehensive Services	(\$44,385,429)	(\$61,621,271)	(\$71,951)	\$0	\$17,307,793
Adult Supported Living Services	(3,951,457)	(6,590,551)	89,130	0	2,549,964
Children's Extensive Support Services	8,773,682	1,362,408	0	0	7,411,274
Children's Habilitation Residential Program	(305,283)	(845,422)	0	0	540,139
Case Management	(10,576,746)	(7,806,206)	37,128	0	(2,807,668)
Family Support Services	2,901,200	2,901,200	0	0	0

FY 2022-23 CASELOAD EXPENDITURES ADJUSTMENT BASED ON THE FEBRUARY 15, 2023 FORECAST

LINE ITEM	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROP. FUNDS	FEDERAL FUNDS
State SLS	(5,295,723)	(5,295,723)	0	0	0
State Case Management	2,394,523	2,394,523	0	0	0
Total FY 22-23 Adjustment	(\$50,445,233)	(\$75,501,042)	\$54,307	\$0	\$25,001,502

The decrease in total appropriations for the Office of Community Living in FY 2022-23 can be primarily attributed to three factors:

- A 1.4 percent decrease in expected enrollment for the Comprehensive waiver, offset slightly by increased enrollment in the Children’s Extensive Support waiver. This equates to a \$13.5 million reduction in total funds, including \$6.7 million General Fund.
- A 1.6 percent decrease driven by lower utilization of services. This equates to a \$15.3 million reduction in total funds, including \$6.7 million General Fund.
- A net zero refinancing for the increased federal match for two additional quarters. This equates to a \$23.0 million reduction in General Fund, a \$0.5 million reduction in cash funds, and an increase of including \$23.5 million in federal funds.

FY 2023-24: In addition to maintaining a zero enrollment waitlist for SLS, CES, and CHRP waivers, the department requests funding for an additional 411 Comprehensive waiver enrollments, increasing the maximum enrollment number to 9,202. The following table includes the line item adjustments for FY 2023-24.

FY 2023-24 CASELOAD EXPENDITURES ADJUSTMENT BASED ON THE FEBRUARY 15, 2023 FORECAST

Line Item	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	Reapprop. Funds	FEDERAL FUNDS
Adult Comprehensive Services	\$32,992,707	\$48,787,659	\$118,328	\$0	(\$15,913,280)
Adult Supported Living Services	590,788	4,294,072	(312,095)	0	(3,391,189)
Children’s Extensive Support Services	5,748,338	5,326,661	0	0	421,677
Children’s Habilitation Residential Program	1,651,970	1,382,157	0	0	269,813
Case Management	11,874,910	7,562,546	(97,489)	0	4,409,853
Total FY 2023-24 Recommendation	\$52,858,713	\$67,353,095	(\$291,256)	\$0	(\$14,203,126)

The increase in total appropriations for the Office of Community Living in FY 2023-24 can be primarily attributed to three factors:

- A 5.7 percent increase in expected enrollment across HCBS waivers.
- A 0.9 percent increase in per capita costs.
- The enhanced federal match stepdown though calendar year 2023.

RECOMMENDATION: Staff recommends approval of the adjustments to appropriations for both FY 2022-23 and FY 2023-24.

ANALYSIS:

The Department is responsible for the administration of four Medicaid waivers through which eligible individuals with intellectual and developmental disabilities (IDD) may access services. Individuals who are not eligible for Medicaid may access IDD services through programs funded with state General Fund. The Department uses per capita costs and average full program equivalent (FPE) to calculate the funding needs for each waiver.

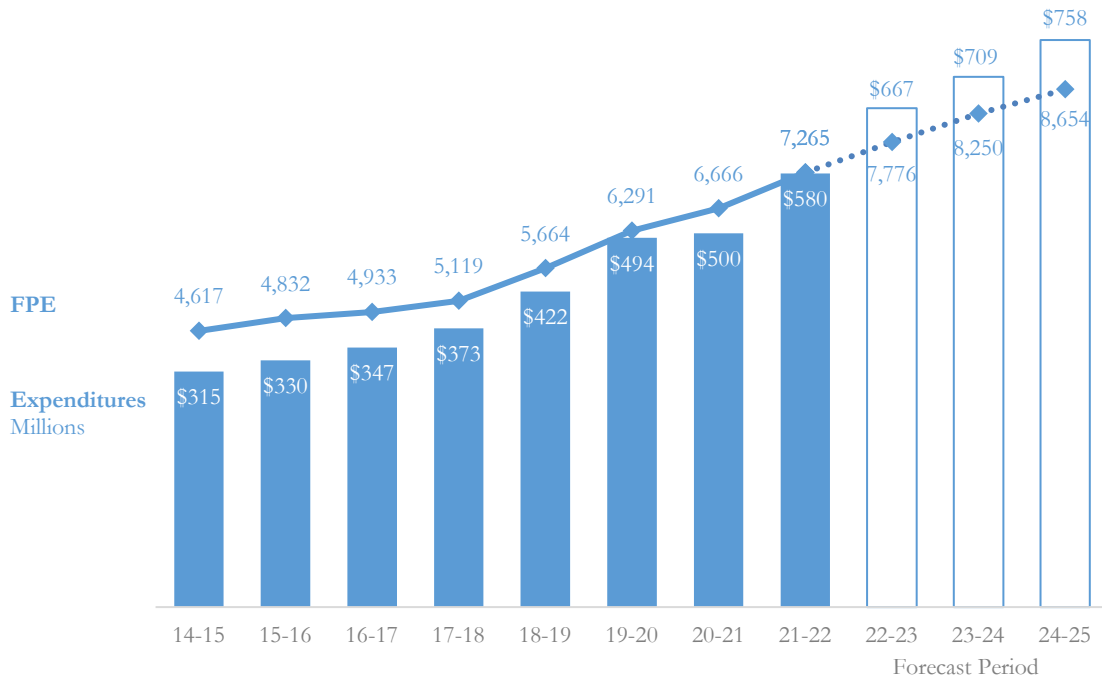
Comprehensive/Developmental Disabilities Waiver

The Comprehensive waiver provides access to 24-hour/seven-day-a-week supervision through Residential Habilitation and Day Habilitation Services and Supports. The service provider is responsible for supporting individuals in securing living arrangements that can range from host home settings with 1-2 persons, individualized settings of 1-3 persons, and group settings of 4-8 persons. Support is also available for participants who live in their own home or who live with and/or are provided services by members of their family.

Annually, the Department requests funding for reserved capacity and emergency enrollments. The FY 2022-23 appropriation includes funding for 411 enrollments, including 41 transitions from institutions, 47 ageing caregiver enrollments, 189 emergency enrollments, 43 foster care transitions, and 91 youth transitions. The Department is requesting the same 411 enrollment spots for FY 2023-24 as well.

The estimated FY 2023-24 maximum enrollment in the Comprehensive waiver is 9,202 members. With the accounting for churn and enrollment lag, the estimated fiscal year-end enrollment is an estimated 8,580 members. The forecast is based on the number of FPE who are anticipated to be served, in this case 8,250 at an anticipated cost of \$85,947 per FPE.

Comprehensive Services



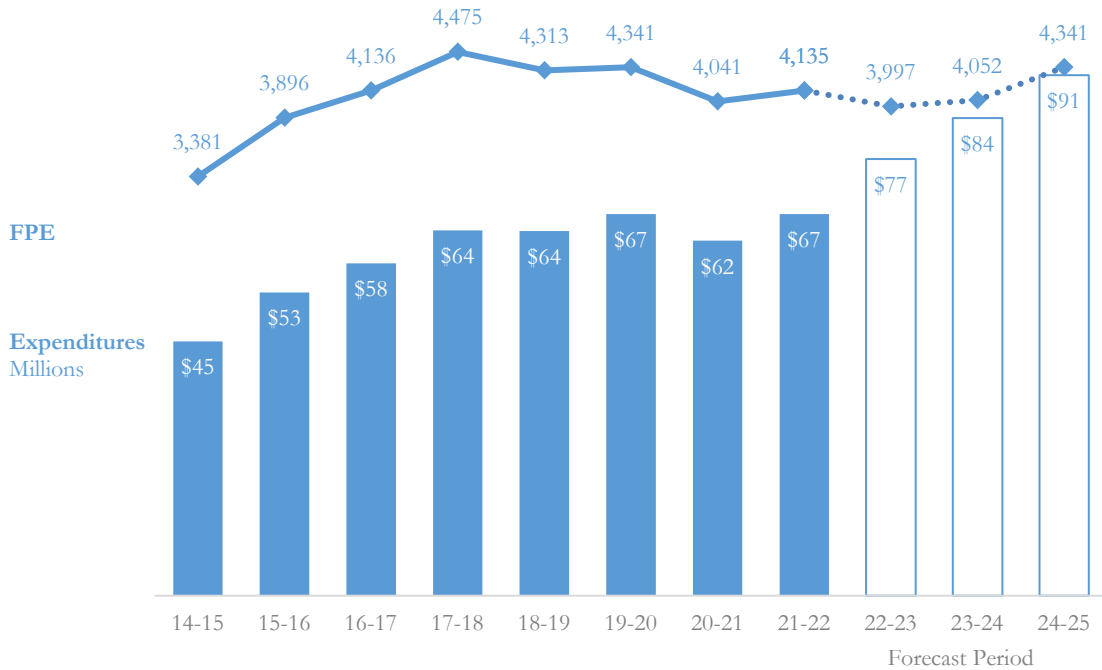
Supported Living Services Waiver

The Supported Living Services (SLS) waiver provides necessary services and supports for adults with intellectual or developmental disabilities so they can remain in their homes and communities with minimal impact to the individual’s community and social supports. It promotes individual choice and decision-making through the individualized planning process and the tailoring of services and supports to address prioritized, unmet needs. In addition, this waiver is designed to supplement existing natural supports and traditional community resources with targeted and cost-effective services and supports.

The person receiving services is responsible for his or her living arrangements that can include living with family or in their own home. Up to three persons receiving services can live together. Participants on this waiver do not require twenty-four (24) hour supervision on a continuous basis for services and supports offered on this waiver. The rate of some services and the Service Plan Authorization Limit (SPAL) is determined through member intake and assessments. The number of FPE anticipated to be served in FY 2023-24 is 4,052 with an average cost of \$20,704. There is no waiting list for SLS waiver enrollment, therefore the Department will adjust the costs based on actual enrollment, utilization, and per capita trends.

The forecast reflects a pretty stable FPE for previous and upcoming fiscal years related to enrollment trends. Increased enrollment on the Comprehensive waiver results in a reduction in the number of members enrolled on the SLS waiver.

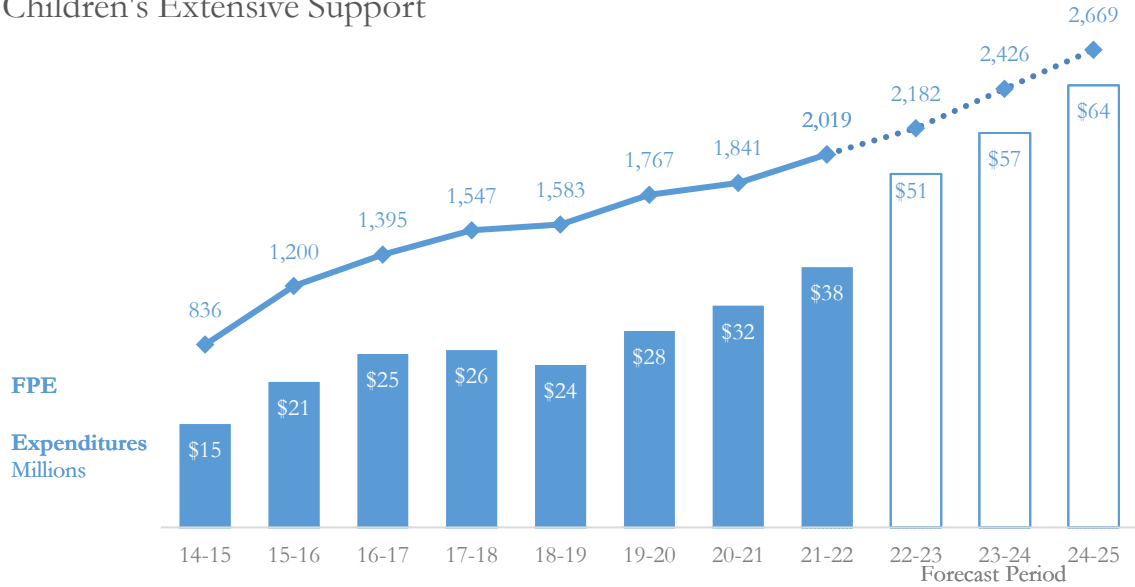
Supported Living Services



Children’s Extensive Support Waiver

The Children’s Extensive Support (CES) waiver provides services and supports to children and families that will help children establish a long-term foundation for community inclusion as they grow into adulthood. The number of FPE anticipated to be served in FY 2023-24 is 2,426, at an average cost of \$23,566. There is no waiting list for CES enrollment, therefore the Department will adjust the costs based on actual enrollment, utilization, and per capita trends.

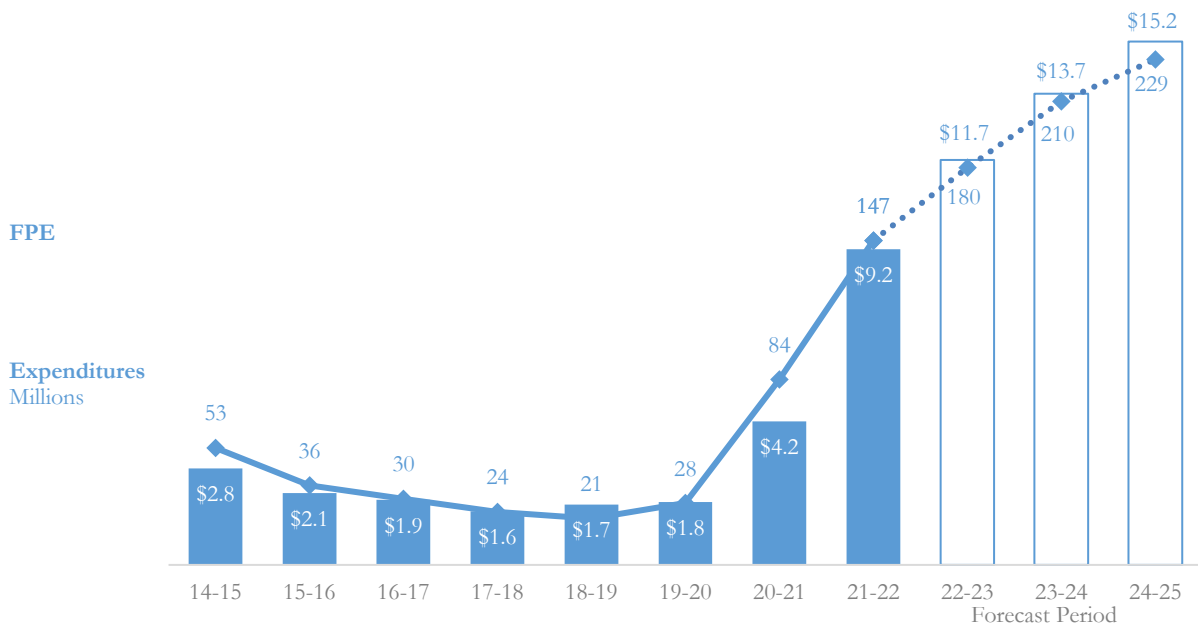
Children's Extensive Support



Children's Habilitation Residential Program Waiver

The Children’s Habilitation Residential Program (CHRP) waiver provides residential services for children and youth in foster care or at risk of child welfare involvement who have a developmental disability and very high needs that put them at risk for institutional care. Services are intended to help children and youth learn and maintain skills that are necessary for successful community living. The number of FPE anticipated to be serviced in FY 2023-24 is 210 at an average cost of \$64,965. There is no waiting list for CHRP enrollment, therefore the Department will adjust the costs based on actual enrollment, utilization, and per capita trends.

Children's Residential Habilitation



Case Management

Individuals with IDD who are enrolled in HCBS waivers receive case management, monitoring, and assessment services.

- Targeted Case Management (TCM) provides assessment of each client’s long-term care needs, the development and implementation of personalized care plans, coordination and monitoring of the delivery of services, and evaluation of the effectiveness of services. The State’s 20 Community Centered Boards receive a per member per month TCM payment for each client.
- Four monitoring visits per year are provided to each client. These quarterly visits with a case manager include an evaluation of service delivery and quality, evaluation of choice in providers, and the promotion of self-determination, self-representation, and self-advocacy.
- Intake, an annual Continued Stay Review assessment, and a Supports Intensity Scale (SIS) assessment are required and are necessary to determine the member’s functional level for activities of daily living. The SIS specifically measures support needs in the areas of home living, community living, lifelong learning, employment, health and safety, social activities, and protection and advocacy. For children enrolled in the CHRP waiver, the Inventory for Client and Agency Planning assessment is used to measure support needs by determining adaptive behavior skills. Support needs identified by the assessments help determine the level of support each client needs, which subsequently informs the Service Plan Authorization Limit (SPAL).

STATE-ONLY PROGRAMS

State-only programs are made available to individuals with intellectual and developmental disabilities who do not meet the Medicaid eligibility requirements. State supported programs include:

- *FAMILY SUPPORT SERVICES (FSSP)* - Provides support for families who have children with developmental disabilities or delays with costs that are beyond those normally experienced by other families, with the intent of keeping children with their own family.
- *PREVENTATIVE DENTAL HYGIENE* – Supports a contract with the Colorado Foundation of Dentistry for the Handicapped to provide services to improve oral hygiene in persons with developmental disabilities in order to prevent dental disease.

COMPREHENSIVE WAIVER WAITLIST

Individuals are placed on waiting lists when enrollments meet the limit of a federally-approved waiver application or when additional enrollments would exceed the General Fund appropriation for a given program. The waitlist includes four timelines:

- As soon as available (ASAA) – The individual has requested enrollment as soon as available;
- Date specific – The individual does not need services at this time but has requested enrollment at a specific future date, including those who have not yet reached the age of 18.
- Safety net – The individual does not need or want services at this time, but requests to be on the waiting list in case a need arises at a later time, including those who have not yet reached the age of 18; and
- Internal Management – Individuals who have indicated interest in SLS waiver services and are in the enrollment process.

In FY 2021-22 1,216 individuals were added to the DD waitlist while 1,757 were carried over from the previous year. As of August 1, 2022, 79 percent of those on the DD ASAA waiting list are between 18-39 years of age, with the average age being 26. The average person on the waitlist is waiting six

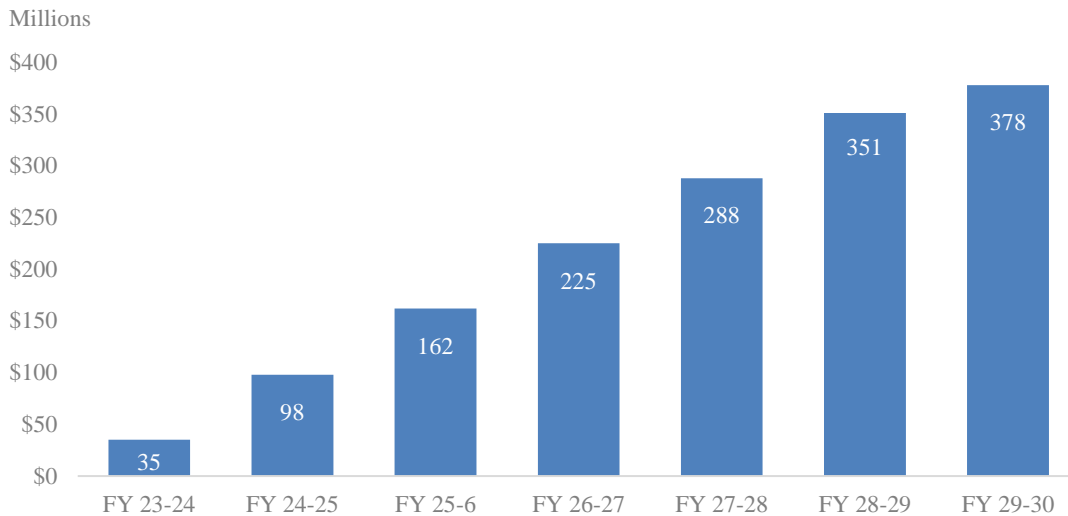
years from their order of selection date and enrollment date. This is a three-year decrease from June 30, 2018, when the average was nine years.

Historically, there has been considerable concern regarding the Comprehensive (DD) Waiver enrollment waitlist. As of December 2022, 3,969 individuals were identified as needing DD services as soon as available. The Department has forecasted that in order to eliminate the waitlist over the next seven years the total increased annual cost would reach \$378.0 million in ongoing expenses. Each year, the cost per FPE of individuals on the DD waiver tends to grow, meaning that each year the cost of each slot opened up grows as well. The Department expects that by FY 2029-30 the average per member cost will increase by \$70,000.

However, we know from previous experience that not all individuals on the DD waitlist accept an enrollment when it is offered to them. Because of the six year lag many individuals who are offered open slots decline enrollment, stating that they are happy with their current service structure but they wish to stay on the waitlist in case their situation changes. We also know that many of the DD waitlist are receiving services on other waivers (such as SLS). Because of this the cost for those individuals would be incremental, and not cumulative. For example, an individual moving from the SLS waiver to the DD waiver would be expected to cost an additional \$65,000, rather than the full \$85,000 cost per FPE. Further muddying the waters is that every year more and more people sign up for the DD waitlist. The Department expects an average of 216 additions to the waitlist annually, or an additional 1,296 cumulative individuals by the time the waitlist is eliminated in FY 2029-30.

DD WAITLIST STEPDOWN PLAN							
ITEM	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30
Waitlist at Beginning of Fiscal Year	4,088	3,407	2,726	2,045	1,364	683	0
Estimated Annual Additions to Waitlist	216	216	216	216	216	216	0
Annual Waitlist Reduction	897	897	897	897	897	899	0
Annual Total Cost (millions)	\$35	\$98	\$162	\$225	\$288	\$351	\$378

Investment needed to end the Comprehensive Waitlist over the next 7 years



WAIVER ENROLLMENT AND EXPENDITURES

Although the Department utilizes the average full program equivalent (FPE) as the basis for annual caseload forecasts, the number of individuals served through each waiver can be communicated in three ways:

- Maximum enrollment represents the allowable number of individuals that can be served in a given year.
- Average monthly enrollment represents an average of the actual number of individuals enrolled in each waiver during a 12-month period.
- Full program equivalent (FPE) represents the number of clients with a paid claim in a given year. The average monthly FPE is determined by multiplying the average monthly enrollment for a 12-month period by the FPE conversion factor of 80.0 percent (because not every client who is authorized to receive services has a paid service each month).

Appropriations to line items that funds waiver services and targeted case management for individuals with intellectual and developmental disabilities are set in advance of the fiscal year, based on prior year utilization and expenditures. The Department performs forecast analyses throughout a given fiscal year and uses the information to determine necessary adjustments to the appropriations for the current fiscal year and for the upcoming fiscal year. If necessary, current fiscal year adjustments are made to the appropriation through the Department’s supplemental bill based on the November forecast, and/or through a Long Bill add-on based on the February forecast. Appropriations for the upcoming fiscal year are determined at figure setting and are based on the February caseload forecast provided by the Department. Appropriations reflect the current cost per FPE and are based on current spending trends in the waiver programs. The Department’s requested FY 2023-24 appropriation for the waiver programs, includes:

- Adult Comprehensive Services – \$709.1 million total funds, including \$346.3 million General Fund;
- Adult Supported Living Services – \$83.1 million total funds, including \$35.4 million General Fund;
- Children’s Extensive Support Services – \$57.2 million total funds, including \$28.0 million General Fund; and
- Children’s Habilitation Residential Program – \$13.7 million total funds, including \$6.7 million General Fund.

In its forecasting process, the Department uses several categories of data, two of which are significant in understanding adjustment made to current-year appropriations. The first data type that is monitored is an indicator of the number of clients actually enrolled and the types of services each client is authorized to receive. This data type is referred to as the Prior Authorized Request (PAR).

OFFICE OF COMMUNITY LIVING AVERAGE MONTHLY ENROLLMENT (AME) FORECAST										
FISCAL YEAR	COMPREHENSIVE SERVICES		SUPPORTED LIVING SERVICES		CHILDREN’S EXTENSIVE SERVICES		CHILDREN’S HABILITATION RES. PROGRAM		TARGET CASE MANAGEMENT	
	AME	CHG	AME	CHG	AME	CHG	AME	CHG	AME	CHG
2007-08	4,399	n/a	2,871	n/a	383	n/a	-	-	7,773	n/a
2008-09	4,390	-0.2%	2,992	4.2%	400	4.4%	-	-	7,911	1.8%
2009-10	4,401	0.3%	3,104	3.7%	404	1.0%	-	-	8,027	1.5%
2010-11	4,397	-0.1%	3,116	0.4%	385	-4.7%	-	-	8,020	-0.1%

OFFICE OF COMMUNITY LIVING AVERAGE MONTHLY ENROLLMENT (AME) FORECAST											
FISCAL YEAR	COMPREHENSIVE SERVICES		SUPPORTED LIVING SERVICES		CHILDREN'S EXTENSIVE SERVICES		CHILDREN'S HABILITATION RES. PROGRAM		TARGET CASE MANAGEMENT		
	AME	CHG	AME	CHG	AME	CHG	AME	CHG	AME	CHG	
2011-12	4,397	0.0%	3,140	0.8%	373	-3.1%	-	-	8,032	0.1%	
2012-13	4,384	-0.3%	3,178	1.2%	377	1.1%	72	n/a	8,074	0.5%	
2013-14 *	4,392	0.2%	3,183	0.2%	607	61.0%	64	-11.1%	8,309	2.9%	
2014-15	4,685	6.7%	3,678	15.6%	971	60.0%	51	-20.3%	9,458	13.8%	
2015-16	4,903	4.7%	4,311	17.2%	1,373	41.4%	36	-29.4%	10,703	13.2%	
2016-17	5,077	3.5%	4,637	7.6%	1,602	16.7%	34	-5.6%	11,428	6.8%	
2017-18	5,162	1.7%	4,778	3.0%	1,696	5.9%	31	-8.8%	11,740	2.7%	
2018-19 *	5,741	11.2%	4,788	0.2%	1,861	9.7%	30	-3.2%	12,523	6.7%	
2019-20	6,316	10.0%	4,652	-2.8%	2,037	9.5%	52	73.3%	13,129	4.8%	
2020-21	6,802	7.7%	4,853	4.3%	2,227	9.3%	123	136.5%	14,090	7.3%	
2021-22	7,404	8.9%	4,668	-3.8%	2,375	6.6%	193	56.9%	14,723	4.5%	
2022-23 (est)	7,776	5.0%	3,997	-14.4%	2,182	-8.1%	180	-6.7%	15,398	4.6%	
2023-24 (est)	8,250	6.1%	4,052	1.4%	2,426	11.2%	210	16.7%	16,180	5.1%	
2024-25 (est)	8,654	4.9%	4,341	7.1%	2,669	10.0%	229	9.0%	17,057	5.4%	

*Administration of waiver programs (excluding the Children's Habilitation Residential Program (CHRP) waiver) was transferred from the Department of Human Services (DHS) to the Department of Health Care Policy and Financing (HCPF) in March 2014. Administration of the CHRP waiver was transferred from DHS to HCPF in July 2018.

The second type of data is the projected cost of the claims filed for the delivery of the services identified in the PAR, and the estimated date the payment will be made. Because Medicaid expenditures are reported on a cash basis as opposed to an accrual basis, forecasting for the purpose of the budget is not based on the date the individual begins receiving services, but rather on the date and the fiscal year in which the payment for those services is expected to be made. This results in a lag between the actual start of services and the payment for those services, subsequently affecting the fiscal year in which the Department will need the funding to cover the associated cost. It is important to note that a reduction in a given year's appropriation does not mean that enrollments have declined, nor does it mean that individuals have not been served.

OFFICE OF COMMUNITY LIVING TOTAL PROGRAM EXPENDITURES											
FISCAL YEAR	COMPREHENSIVE SERVICES		SUPPORTED LIVING SERVICES		CHILDREN'S EXTENSIVE SERVICES		CHILDREN'S HABILITATION RES. PROGRAM		TARGET CASE MANAGEMENT		
	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	
2007-08	\$202,943,588	n/a	\$39,607,629	n/a	\$5,894,263	n/a	-	-	\$13,661,560	n/a	
2008-09	223,362,025	10.1%	46,391,718	17.1%	6,913,410	17.3%	-	-	13,848,967	1.4%	
2009-10	253,798,612	13.6%	37,399,799	-19.4%	7,158,025	3.5%	-	-	16,484,735	19.0%	
2010-11	273,096,876	7.6%	37,579,497	0.5%	7,956,073	11.1%	-	-	19,114,672	16.0%	
2011-12	264,899,518	-3.0%	37,030,578	-1.5%	7,361,601	-7.5%	4,167,690	-	16,875,522	-11.7%	
2012-13	261,817,957	-1.2%	37,273,663	0.7%	7,015,707	-4.7%	3,410,635	-18.2%	16,117,073	-4.5%	
2013-14*	282,475,249	7.9%	39,288,448	5.4%	9,125,302	30.1%	3,089,752	-9.4%	17,441,960	8.2%	
2014-15	314,878,204	11.5%	44,654,327	13.7%	14,967,843	64.0%	2,793,542	-9.6%	20,230,023	16.0%	
2015-16	330,217,987	4.9%	53,275,897	19.3%	21,074,423	40.8%	2,084,490	-25.4%	22,103,255	9.3%	
2016-17	347,057,913	5.1%	58,395,990	9.6%	25,113,943	19.2%	1,889,200	-9.4%	22,242,358	0.6%	

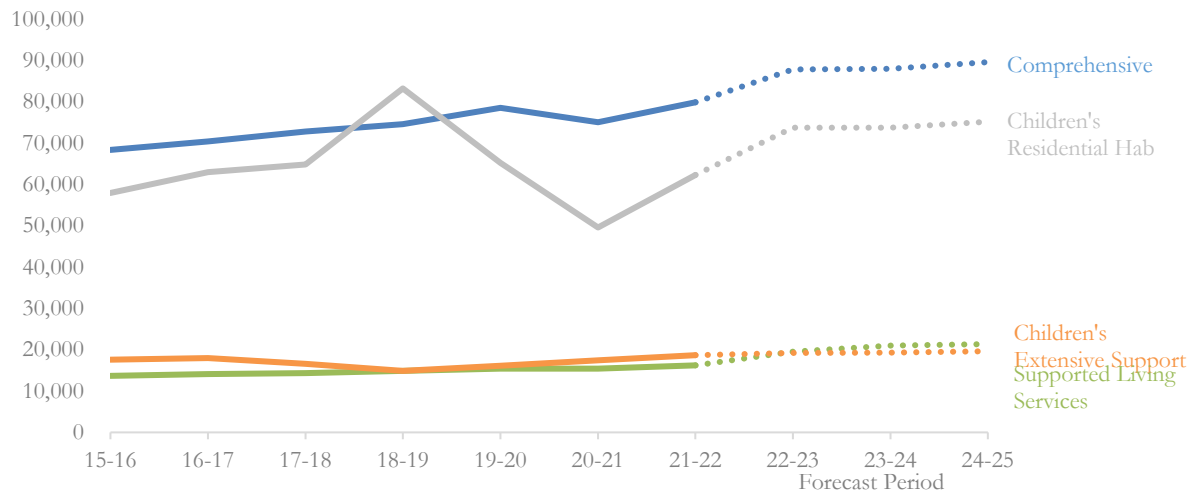
OFFICE OF COMMUNITY LIVING TOTAL PROGRAM EXPENDITURES										
FISCAL YEAR	COMPREHENSIVE SERVICES		SUPPORTED LIVING SERVICES		CHILDREN'S EXTENSIVE SERVICES		CHILDREN'S HABILITATION RES. PROGRAM		TARGET CASE MANAGEMENT	
	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG
2017-18	372,706,454	7.4%	64,188,404	9.9%	25,698,431	2.3%	1,556,384	-17.6%	30,164,217	35.6%
2018-19*	422,166,719	13.3%	64,028,069	-0.2%	23,559,173	-8.3%	1,747,427	12.3%	29,560,074	-2.0%
2019-20	493,903,708	17.0%	67,042,737	4.7%	28,486,561	20.9%	1,826,561	4.5%	30,231,811	2.3%
2020-21	500,009,085	1.2%	62,348,319	-7.0%	32,136,505	12.8%	4,163,856	128.0%	32,871,410	8.7%
2021-22	580,126,261	16.0%	67,044,692	7.5%	37,704,513	17.3%	9,153,153	119.8%	34,650,834	5.4%
2022-23 (est.)	667,098,109	15.0%	76,706,620	14.4%	51,261,575	36.0%	11,742,050	28.3%	39,785,024	14.8%
2023-24 (est.)	709,087,326	6.3%	83,910,661	9.4%	57,194,047	11.6%	13,660,887	16.3%	45,508,533	14.4%
2024-25 (est.)	758,494,064	7.0%	91,426,344	9.0%	64,129,232	12.1%	15,179,686	11.1%	45,802,020	0.6%

*Administration of waiver programs (excluding the Children's Habilitation Residential Program (CHRP) waiver) was transferred from the Department of Human Services (DHS) to the Department of Health Care Policy and Financing (HCPF) in March 2014. Administration of the CHRP waiver was transferred from DHS to HCPF in July 2018.

OFFICE OF COMMUNITY LIVING COST PER FPE								
FISCAL YEAR	COMPREHENSIVE SERVICES		SUPPORTED LIVING SERVICES		CHILDREN'S EXTENSIVE SERVICES		CHILDREN'S HABILITATION RES. PROGRAM	
	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG	TOTAL FUNDS	CHG
2007-08	\$55,540	n/a	\$17,319	n/a	\$20,255	n/a	-	-
2008-09	57,956	4.4%	19,583	13.1%	21,077	4.1%	-	-
2009-10	62,466	7.8%	14,248	-27.2%	22,025	4.5%	-	-
2010-11	66,237	6.0%	13,195	-7.4%	22,224	0.9%	-	-
2011-12	64,405	-2.8%	12,948	-1.9%	21,780	-2.0%	-	-
2012-13	62,998	-2.2%	12,338	-4.7%	20,219	-7.2%	50,905	n/a
2013-14*	65,101	3.3%	13,031	5.6%	18,324	-9.4%	48,277	-5.2%
2014-15	68,200	4.8%	13,207	1.4%	17,904	-2.3%	52,708	9.2%
2015-16	68,340	0.2%	13,675	3.5%	17,562	-1.9%	57,903	9.9%
2016-17	70,354	2.9%	14,119	3.2%	18,003	2.5%	62,973	8.8%
2017-18	72,808	3.5%	14,343	1.6%	16,611	-7.7%	64,849	3.0%
2018-19	74,535	2.4%	14,845	3.5%	14,882	-10.4%	83,210	28.3%
2019-20	78,509	5.3%	15,444	4.0%	16,121	8.3%	65,234	-21.6%
2020-21	75,008	-4.5%	15,248	-1.3%	17,456	8.3%	49,569	-24.0%
2021-22	79,852	6.5%	16,213	6.3%	18,674	7.0%	62,266	25.6%
2022-23 (est.)	85,786	7.4%	19,189	18.4%	23,490	25.8%	64,916	4.3%
2023-24 (est.)	85,947	0.2%	20,704	7.9%	23,566	0.3%	64,965	0.1%
2024-25 (est.)	87,643	2.0%	21,059	1.7%	24,019	1.9%	66,214	1.9%

*Administration of waiver programs (excluding the Children's Habilitation Residential Program (CHRP) waiver) was transferred from the Department of Human Services (DHS) to the Department of Health Care Policy and Financing (HCPF) in March 2014. Administration of the CHRP waiver was transferred from DHS to HCPF in July 2018.

Average Cost Per FPE



In addition to the variables discussed above, the Department accounts for enrollment lag time, cost shifts related to changes in the State Medicaid Plan, and movement of individuals from one waiver to another.

➔ R7 PROVIDER RATES

REQUEST: For the line items discussed in this document, the Department requests an increase of \$46.3 million total funds, including \$14.3 million General Fund for provider rate increases.

FY 2023-24 PROVIDER RATE REQUESTED INCREASES					
LINE ITEM	TOTAL FUNDS	GENERAL FUND	CASH FUND	REAPPROP. FUNDS	FEDERAL FUNDS
Common policy provider rate increase (0.5%)					
Adult Comprehensive Services	\$788,223	\$392,751	\$1,360	\$0	\$394,112
Adult Supported Living Services	351,971	149,251	26,734	0	175,986
Children's Extensive Support Services	177,406	88,703	0	0	88,703
Children's Habilitation Residential Program	55,748	27,874	0	0	27,874
Case Management	452,367	225,351	6,513	0	220,503
Total Common Policy Provider rate increase, Department request	\$1,825,715	\$883,930	\$34,607	\$0	\$907,178
Targeted rate increases					
Adult Comprehensive Services	\$38,975,581	\$11,586,766	\$7,901,025	\$0	\$19,487,790
Adult Supported Living Services	4,348,641	1,281,775	892,548	0	2,174,318
Children's Extensive Support Services	805,652	402,828	0	0	402,824
Children's Habilitation Residential Program	388,281	194,141	0	0	194,140
Case Management	0	0	0	0	0
Total Targeted Rate Increases, Department request	\$44,518,155	\$13,465,510	\$8,793,573	\$0	\$22,259,072
Total FY 2023-24 Department Request					
Adult Comprehensive Services	\$39,763,804	\$11,979,517	\$7,902,385	\$0	\$19,881,902
Adult Supported Living Services	4,700,612	1,431,026	919,282	0	2,350,304
Children's Extensive Support Services	983,058	491,531	0	0	491,527
Children's Habilitation Residential Program	444,029	222,015	0	0	222,014
Case Management	452,367	225,351	6,513	0	220,503
Total FY 2023-24 Department Request	\$46,343,870	\$14,349,440	\$8,828,180	\$0	\$23,166,250

The Department has two targeted rate adjustments that affect this division in addition to the across the board common policy increase.

GRSS AND NMT RATE ADJUSTMENTS

Group Residential Services and Supports (GRSS) and Non-Medical Transportation (NMT) are two services that are offered on the Comprehensive and Supported Living Services waivers for individuals with intellectual and developmental disabilities. GRSS benefits provide 24/7 residential services and offers training and hands on assistance for self-advocacy, independent living, money management, decision making, and emergency assistance. The Department requests funding to increase rates to cover the additional costs associated with additional staff to support individuals with higher acuity. NMT benefits allow members to gain access to non-medical community services and supports as required by the care plan in order to prevent institutionalization. The Department requests funding to increase rates in order to align with NMT service offered on other waivers.

MINIMUM WAGE ADJUSTMENTS

Home and Community-Based Service (HCBS) waiver members can receive care in their home or community with services such as personal care, residential care, day habilitation services and behavioral services. These types of services allow individuals to receive essential care and remain in a community setting. With a significant direct care workforce shortage already occurring, the need for professionals is anticipated to grow by 40 percent between 2018 and 2028. In FY 2021-22, through enhanced funding pursuant to the American Rescue Plan Act of 2021, the Department increased rates for certain HCBS services with a mandated wage pass through for providers to pay at least \$15 per hour base wage for frontline staff providing direct hands-on care.

The Committee has approved an increase above the Department’s request for non-targeted provider rates of 3.0 percent rather than 0.5 percent. Committee’s action to date, as well as minor adjustments based on the February forecast, have been included in the table below. The table below also includes staff’s recommendation for a higher than requested increase for GRSS and NMT services.

JBC ACTION AND STAFF RECOMMENDATION ON PROVIDER RATES					
LINE ITEM	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROP. FUNDS	FEDERAL FUNDS
Adult Comprehensive Services	\$60,656,851	\$21,791,841	\$7,930,017	\$0	\$30,934,993
Adult Supported Living Services	9,299,201	3,526,204	1,030,410	0	4,742,587
Children's Extensive Support Services	2,378,486	1,165,460	0	0	1,213,026
Children's Habilitation Residential Program	763,955	374,339	0	0	389,616
Case Management	2,791,092	1,362,126	41,965	0	1,387,001
Family Support Services	321,811	321,811	0	0	0
Preventive Dental Hygiene	2,034	2,034	0	0	0
State SLS	151,267	151,267	0	0	0
State Case Management	147,409	147,409	0	0	0
Total	\$76,512,106	\$28,842,491	\$9,002,392	\$0	\$38,667,223

RECOMMENDATION: The Committee has approved a 3.0 percent common policy provider rate increase. Targeted rate increases requested in the Department’s R7 prioritized budget request will be presented on March 8, 2020 by Eric Kurtz. JBC Staff requests permission to reflect Committee action in the Office of Community Living line items.

→ R10 CHILDREN WITH COMPLEX NEEDS

REQUEST: For the line items discussed in this document, the Department requests an increase of \$3.5 million total funds, including \$1.8 million cash funds from the HCBS ARPA cash fund to expand respite services for children with high physical and behavioral health needs. This cash fund amount will transition to General Fund after December 2024.

RECOMMENDATION: Staff recommends that the Committee approve the portion of the request pertaining to the expansion of respite services on the CES and CHRP waivers.

EVIDENCE LEVEL: The Department indicated that this request item is theory informed, and staff agrees with this designation. When a request item is designated theory informed it means that the program “reflects a moderate to low, or promising level of confidence related to the effectiveness, ineffectiveness, or harmfulness as determined by tracking and evaluating performance measures including pre and post intervention evaluation of program outcomes. Evaluation of program outputs, identification and implementation of a theory change, or equivalent measures.” (Section 2-3-210 (2)(f), C.R.S.)

ANALYSIS:

The Department has indicated a lack of access to appropriate levels of in-home respite care for high-needs children on the CHRP and CES waivers. The respite services that are currently offered on the CHRP and CES waivers are often inadequate to meet the level of care needed to support certain children with high medical and behavioral needs. As a result, families often struggle to find appropriate in-home care for their children, leading to the risk of institutionalization or out-of-home placement. The Department is requesting to expand respite services for children enrolled in the CHRP and CES waivers to include Skilled and Therapeutic Respite. These enhanced respite services would be targeted towards high-needs children who require services to manage behavior and engagement.

To calculate the total cost to add Skilled and Therapeutic Respite to the CHRP and CES waivers, the Department analyzed the number of children on the waivers that are currently utilizing 90% or greater of their respite unit limit. The Department assumes that these high-needs children would be likely to access a higher-level of respite care if it were available to them. Additionally, the Department believes that there are currently children enrolled in the waivers who are not utilizing respite services because the current level of care does not meet their needs. The Department has assumed that an additional 5.0 percent of the total CES and CHRP waiver population would choose to access Skilled and Therapeutic Respite if it were to become available. The Department has assumed the rates for Skilled would be identical to the rate for CNA Respite offered under the Children with Life Limiting Illness waiver, and Therapeutic Respite would equal the rate of a Registered Behavioral Technician.

EXISTING AND NEW RESPITE UTILIZATION	
Substitution for enhanced respite	
Members using over 90% of respite	42
Unit per utilizer	3,080
Current respite rate	6.56
Enhanced respite rate	7.70
Difference in rate	1.14
Increased costs for existing respite substitution	\$147,470
New utilization	

EXISTING AND NEW RESPITE UTILIZATION	
Estimated members	143
Units per utilizer	3,080
Enhanced respite rate	7.70
New enhanced respite utilization	\$3,391,388

Because this request expands home and community based services, the Department would be able to support this initiative through funding provided by the American Rescue Plan Act (ARPA) through December 31, 2024. The request assumes that approval for amendments to the CES and CHRP waivers from the Centers for Medicare & Medicaid Services would be received during FY 2023-24 for an implementation date of January 1, 2024.

➔ R13 CASE MANAGEMENT REDESIGN

REQUEST: The Department requests \$3.6 million total funds, including \$168,000 General Fund in FY 2023-24, to support case management rate increases, continuous system enhancements to the Care/Case Management Tool, case management training resources, and financial closeout reviews for existing entities. The request annualizes to \$9.0 million total funds, including \$2.1 million General Fund in FY 2024-25 and \$9.0 million total funds, including \$4.0 million General Fund in FY 2025-26 and ongoing.

RECOMMENDATION: Staff recommends approval of the Department’s request.

EVIDENCE LEVEL: The Department indicated that this request item is theory informed, and staff agrees with this designation. When a request item is designated theory informed it means that the program “reflects a moderate to low, or promising level of confidence related to the effectiveness, ineffectiveness, or harmfulness as determined by tracking and evaluating performance measures including pre and post intervention evaluation of program outcomes. Evaluation of program outputs, identification and implementation of a theory change, or equivalent measures.” (Section 2-3-210 (2)(f), C.R.S.)

ANALYSIS:

The Department currently serves members with Intellectual & Developmental Disabilities (IDD) through Community Centered Boards (CCBs) and members in need of Long-Term Services & Support (LTSS) through Single Entry Point (SEP) Agencies. House Bill 21-1187 (Long-term Services and Support Case Management Redesign) directed the Department to consolidate IDD, LTSS into overarching Case Management Agencies (CMAs). Beginning in FY 2021-22, the Department consolidated CCB and SEP funding to a single case management appropriation in preparation for updated CMA service rates. The Department has used a Contractor to perform a review of current CCB and SEP case management rates. The Contractor’s responsibilities include:

- Conducting a study of all Department case management activities required in regulation, contract, and Home and Community Based Services (HCBS) waivers;
- Conducting stakeholder engagement with CCB and SEP leadership and case management staff to gather information and establish areas of work that are not currently captured in existing CCB and SEP rates; and

- Make recommendations to the Department where current rates are not sufficient to support the volume and quality of work required.

The Department has also developed new CMA defined service areas to be implemented upon consolidation of CCB, SEP, and private case management entities. Currently, service areas are split differently for SEPs than they are for CCBs, making it difficult for members and families to access necessary services, especially if they are navigating between LTSS or IDD services. The Department created new defined service areas based on population size, environment, and ease of transportation.

The Department is currently developing a new Care/Case Management (CCM) Tool to simplify the process of member intake assessments, as well as a Learning Management System (LMS) for CMA training. To receive waiver services, members must take an assessment to determine the appropriate level of care. The CCM Tool consolidates all IDD and LTSS case management intake assessments to a single system.

The Department's FY 2023-24 request specifically seeks:

- \$336,000 total funds including \$168,000 General Fund with roll forward for financial closeout reviews of 20 CCBs (\$4,500 per agency) and 24 SEPs (\$14,000 per agency).
- \$3.0 million total funds, including \$1.5 million from the HCBS Improvement Fund, for increased rates for the new CMAs, and the inclusion of previously unbillable activities.
- \$60,000, including \$30,000 from the HCBS Improvement Fund for the LMS and Case Management Training/licenses.
- \$250,000 total funds, including \$25,000 General Fund, for ongoing CCM updates and enhancements.

CLOSEOUT REVIEWS

The Department is federally required to perform financial closeout reviews of all SEPs and CCBs while they transition to a single CMA model. The transition process will begin in November and end by June 30th 2024 as specified in H.B. 21-1187. The financial reviews include an examination of financial records to determine if funding provided through the contract was used on federally allowable expenditures, if there is unexpended funding, and the fair market value of any equipment purchased by the program. Roll forward authority will allow this closeout period to span multiple fiscal years as the Department has 90 days to complete closeout related activities, which may push the process into FY 2024-25 and verify that all funding was used on CCB and SEP programs, returning funding to the Department and federal partners where appropriate.

RATE CHANGES

The proposed incremental rate changes for CMAs are to address two areas found to be inadequate by the Department hired contractor: 1) an increase to existing rates determined insufficient for the work being done, and 2) the inclusion of currently unreimbursed activities that should be included in case management services. Preliminary efforts to review existing CCB and SEP rates and develop new rates for CMAs have shown that certain tasks such as intake, screening, and referral are not being reimbursed under the current methodology. It has also indicated that current case manager salaries in Colorado are below national averages identified by the Bureau of Labor and Statistics and that caseload

sizes at some existing SEPs are three times higher than recommended averages per case manager. Rate changes will be implemented in eight phases beginning November 2023 through June 2024. All CMAs will be operating under the new rates by July 1, 2024.

The Department currently reimburses CCBs for IDD waiver members' Case Management at a rate of \$144.59 per member per month. The Department reimburses SEPs for Case Management at tiered rates based on the size of the SEP entity, currently ranging anywhere between \$74.84 and \$91.42 per member per month. After the redesign is implemented the consolidated Case Management rate is expected to be \$118.04 per member per month, with an intended caseload of 65 clients per case manager.

During the staff briefing in November the Committee expressed concern about whether the new rates would be enough to sustain or improve services. Moving to the new rate model will increase case management appropriations by \$7.9 million (or 8 percent) total funds in FY 24-25.

CASE MANAGEMENT APPROPRIATIONS INCREASE	
Total Forecasted Increase	\$9,093,338
Estimated Ongoing Administrative Savings from the Redesign	1,209,847
Total Request	\$7,883,491

However, staff has heard from at least one potential CMA that the proposed rate revenue, combined with federal revenue and expected personal and operating expenses, would leave the organization with a projected \$1.2 million budget deficit. This organization has calculated a new blended rate of \$149.17 being necessary in order to “break even”.

CASE MANAGEMENT APPROPRIATIONS INCREASE			
	HCPF PROPOSED RATE	CMA PROPOSED RATE	DIFFERENCE
Members	46,874	46,874	0
Rate	118.04	149.17	31.13
Monthly Total	5,533,007	6,992,195	1,459,188
Annual Total	\$66,396,241	\$83,906,340	\$17,510,099

The Department has indicated that in addition to the reimbursement for ongoing case management, CMAs will continue to receive reimbursement for other activities. CMAs will receive separate reimbursements for activities including:

- Monitoring contacts
- Rural travel add-on
- Critical incident reporting
- Appeals
- Waiting list management
- Level of Care (LOC) screen
- Needs assessment
- Intellectual and developmental disabilities (IDD) and delay determination

CASE MANAGER TRAINING

The Department is seeking resources for ten hours of administrative duties per week related to material development, user account access, and training platform maintenance for the Department's Learning Management System. In addition, the Department provides LMS software licenses to Case Managers free of charge, at a cost of \$16 per license. There are roughly 1,300 Case Managers in the state at any given time. Because of high turnover in the industry the Department assumes a need of 2,000 licenses need annually, as licenses are not transferable between users.

CASE MANAGEMENT SYSTEM ENHANCEMENTS

The Department's Care and Case Management tool is used by both Case Managers and members to add and track assessments and support plans, as well as allow for critical incident reporting. Funding for the CCM tool will allow for modifications to the system related to policy changes and other needs resulting in required system modifications. System enhancements for the CCM tool are subject to a 90 percent federal match rate.

→ BA7 COMMUNITY BASED ACCESS TO SERVICES

REQUEST: The Department requests \$6.4 million total funds, including \$175,000 General Fund in FY 2023-24 to implement initiatives in response to findings that Colorado violated Title II of the Americans with Disabilities Act (ADA). The request annualizes to \$17.3 million total funds, including \$8.1 million General Fund and 13.0 FTE in FY 2024-25 and beyond.

RECOMMENDATION: Staff recommends approval of the Department's request.

ANALYSIS:

In March 2022, the Department of Justice (DOJ) issued a findings letter stating that Colorado is in violation of Title II of the Americans with Disabilities Act (ADA) by "administering its long-term care system in a way that unnecessarily segregates individuals with physical disabilities in nursing facilities and places others with physical disabilities at serious risk of unnecessary institutionalization." The letter suggested four main areas for improvement:

- Provide Information to Prevent Unnecessary Institutionalization,
- Provide Effective Transition Services,
- Expand Access to Colorado's Community-Based Service System, and
- Increase Access to Integrated Community-Based Housing Opportunities

PROVIDE INFORMATION TO PREVENT UNNECESSARY INSTITUTIONALIZATION

DOJ findings suggested that the Department could improve the process to provide information to individuals living in nursing facilities, and those that are considering placement in a nursing facility, around the alternative options available in the community. To do this the Department proposes to:

- Fund a contractor to develop materials on community options for individuals, and distribute those materials on an ongoing basis to Regional Accountable Entities, Case Management Agencies, and hospitals.

- Provide optional counseling to members living in nursing facilities on their options for living in the community.
- Increase to the current rate paid to the CMAs for nursing facility screenings to advise members on long term care options and create a reintegration plan for members who are interested in community living.
- Provide case management services for individuals not receiving HCBS services, including members discharged from hospitals to nursing facilities and members discharged from short term nursing home stays.

PROVIDE EFFECTIVE TRANSITION SERVICES

The DOJ findings suggested there are not enough transition coordination services, the services are not available statewide, there are not enough HCBS providers, and members experience delays in eligibility determination. The Department proposes to address this by:

- Increasing the amount of billable time that transition coordination agencies have to provide transition services to members by 50 percent, from 60hrs to 90hrs. Transition coordination activities include assessment, transition planning, referral, and monitoring.
- Increase the amount of one-time expense costs a member can receive when transitioning out of a facility, from \$1,500 to \$2,000.
- Align eligibility coding between nursing facilities and HCBS waivers.
- Implement presumptive eligibility for members with disabilities.

INCREASE ACCESS TO INTEGRATED COMMUNITY-BASED HOUSING SYSTEMS

The DOJ letter found that “Barriers to accessing affordable, accessible housing opportunities frequently prevent nursing facility transitions. They can also lead to unnecessary institutionalization for individuals living in the community with unstable housing, or whose housing becomes unsuitable when they develop accessibility needs.” The Department proposes to address this DOJ concern by:

- Doubling the amount going to a Department contractor that provides housing navigation services (identifying available units, recruiting landlords, processing vouchers) to be able to serve more members and in particular to expand to members who are at risk of institutionalization. The Department anticipates a high uptake of the benefit due to the significant barrier that housing costs represent for members.
- There is currently a lifetime limit (\$14,000) on the home modification benefit for members enrolled in the waivers for individuals who do not have intellectual and developmental disabilities, whereas the limit resets every five years for members enrolled in the waivers for individuals who have intellectual and developmental disabilities (with a five-year cap of \$10,000). The Department requests to apply the 5 year reset for all waivers, which would support members who move or whose needs change over time. Home modifications typically include:
 - Installing or building ramps
 - Modifying bathrooms
 - Installing grab-bars and other durable medical equipment as part of a larger Home Modification Project
 - Widening doorways
 - Modifying kitchen facilities

- Installing specialized electric and plumbing systems that are necessary to accommodate medically necessary equipment and supplies.
- The Department requests to extend two FTE focused on housing initiatives that were appropriated on a term-limited basis through HB 22-1302. This includes the Division of Housing Specialist and the Nursing Facility Diversion and Home Modification Advisor.

EXPAND ACCESS TO COMMUNITY BASED SERVICE SYSTEM

The Department has identified challenges across the State with members being able to access home health services, personal care, and homemaker services. In order to increase access, the Department requests to:

- Expand access to community-based services for additional members who are at risk of institutionalization and to expand service delivery options to members on existing HCBS waivers. **To do this the Department seeks to take several HCBS services and move them into the State Plan, and by doing so receive an additional federal match of 6.0 percent.** This change would require additional staffing, system changes, and case management expansion.
- Continue 1.0 FTE identified under H.B. 22-1302 (Increase Residential Behavioral Health Beds) to lead development of step-down programs for members transitioning from institutional settings into alternative care facilities (ACFs). This term limited FTE position was initially set to expire after FY 2024-25. Not all individuals are able to transition from an institution straight to living independently, and an ACF would provide a step-down level of care for those members. This position will also assist members and providers with the transition process, helping to educate about the transition process and the services available to assist members.

The Department requests to move both mandatory services and optional services to the State Plan to provide home and community-based service options to members who do not qualify for a waiver, expand consumer directed service options to existing waiver members, and to capitalize on the additional federal match. Per CMS guidance, the Department is required to move certain services to the State Plan to gain the additional federal match. All services moved to the State Plan will receive an additional 6.0 percent federal match. The Department proposes transitioning Personal Care, Homemaker, Health Maintenance, Acquisition Maintenance and Enhancement of Skills, Personal Emergency Response System, and Medication Reminder services to the State Plan for all members who meet institutional level of care.

By moving certain HCBS services into the State Plan, the Department anticipates significant General Fund savings on current waiver expenditure and future eligible expenditure due to the 6.0 percent federal match bump. CMS requires the Department to maintain the level of state fund expenditure for the first twelve months of implementation as compared to the previous twelve months. The Department requests to create a cash fund in FY 2025-26, when the services are anticipated to move to the State Plan, in which to move the General Fund savings that accrue from the federal match bump from the first twelve months of implementation to maintain state expenditures. The Department would then move the revenue that has accumulated in the cash fund back to the General Fund after the 12-month maintenance of state expenditure period has concluded.

Implementing the Department's full request would cost the General Fund around \$8.1 million in FY 2024-25. However, assuming CMS approves the additional services into the state plan beginning in

FY 2025-26, the proposed actions would pay for themselves, and result in additional General Fund savings of between \$33.0 and \$35.0 million annually.

→ BA8 ARPA HCBS ADJUSTMENTS

REQUEST: The Department requests an increase of \$42.5 million total funds for FY 23-24 as well as extending the roll forward authority on HCBS funds to FY 24-25.

RECOMMENDATION: Staff recommends that the Committee approve an increase of \$9.9 million total funds based on more recent Department projections. The Department indicates that the original request misrepresented a need for the funds that had already been appropriated with roll forward authority. Staff also recommends extending the roll forward authority associated with the HCBS Improvement Fund for an additional year.

ANALYSIS:

During the FY 2021-22 supplemental process, the Department requested \$179.0 million total funds, including \$86.7 million cash funds from the Home and Community-based Services Improvement Fund and 53.5 FTE for the implementation of the American Rescue Plan Act Home and Community based Services (HCBS) Spending Plan approved by the Centers for Medicare and Medicaid Services (CMS) and the Joint Budget Committee (JBC) in September 2021. This request included roll-forward spending authority for funds through March 31, 2024.

The Department's FY 2022-23 BA-10 "American Rescue Plan Act Spending Authority" requested formal spending authority of an additional \$78.6 million total funds for the ARPA HCBS spending plan. Since this request was approved the Department has identified additional funding available for reinvestment through the finalization of enhanced match projections, the opportunity to draw down a larger federal match on technology projects, and the reduction of the projected amounts for HCBS rate increases. This funding must be reinvested through the spending plan, per federal regulation.

On June 3, 2022, CMS issued State Medicaid Director Letter #22-002. This letter gave the Department the opportunity to extend the deadline by which the funds in the Home and Community Based Services Improvements Fund can be spent until March 31, 2025, rather than March 31, 2024. Because of this, the Department is requesting to extend the life of the approved projects through FY 24-25.

The Department's revised request would increase spending authority by \$9.9 million in FY 23-24 and \$3.2 million in FY 24-25 to reflect the extension of the CMS deadline. The Department is also accounting for the HCBS ARPA funds through its FY 23-24 R13 Case Management Redesign (\$3.6 million) and R7 Provider Rate Adjustments (\$11.7 million) requests.

Because of the deadline extension, the Department is requesting to use some of the approved funds for temporary staff retention payments (\$334,254), and to extend employee contracts through FY 24-25 (\$1.1 million). In addition, the Department is requesting to use available funds to provide Case Management Agencies \$5.6 million for retention, startup, and transition costs. House Bill 21-1187 (Long-term Services and Support Case Management Redesign) directed the Department to consolidate IDD, LTSS, and Private Agencies into overarching Case Management Agencies (CMAs). This transition will consolidate from 44 agencies to 20 agencies with the first contracts starting in November 2023. As part of this transition process, new CMAs are expected to have start-up costs

such as staffing, equipment, and IT software. CMAs will also be working through the process with case managers continuing to support members. As such, the Department requests to provide start-up cost support through a grant process for CMAs and to provide incentive payments for case managers that work through the transition. This request is separate from the Department’s R13 Case Management Redesign request that will provide new blended per member per month rates for CMAs.

LINE ITEM DETAIL — OFFICE OF COMMUNITY LIVING

(A) DIVISION OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

(1) ADMINISTRATIVE COSTS

PERSONAL SERVICES

The Personal Services line item funds the Department’s expenditures for FTE and temporary staff who work in the Division of Intellectual and Developmental Disabilities. It was created as a part of H.B. 13-1314 (Transfer Developmental Disabilities to HCPF), which transferred the administration of long-term services for persons with intellectual and developmental disabilities to the Department. Allocated POTS for the FTE, including salary survey; merit pay; health, life, dental; short-term disability; and amortization and supplemental amortization equalization disbursements are paid through the Executive Director’s Office General Administration POTS appropriations.

STATUTORY AUTHORITY: Section 25.5-10-101, C.R.S.

REQUEST: The Department requests an appropriation of \$3,469,613 total funds, including \$1,858,480 General Fund, \$1,611,133 federal funds, and 39.5 FTE.

RECOMMENDATION: Staff recommends approval of the Department’s request.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$3,469,613	\$1,858,480	\$0	\$0	\$1,611,133	39.5
TOTAL	\$3,469,613	\$1,858,480	\$0	\$0	\$1,611,133	39.5
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$3,469,613	\$1,858,480	\$0	\$0	\$1,611,133	39.5
TOTAL	\$3,469,613	\$1,858,480	\$0	\$0	\$1,611,133	39.5
Percentage Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$3,469,613	\$1,858,480	\$0	\$0	\$1,611,133	39.5
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

OPERATING EXPENSES

The Operating Expenses line item provides for most of the non-personal services costs of the office, including telephones, computers, office furniture, and employees supplies. It supports a number of annual costs such as in- and out-of-state travel, records storage, postage costs, and subscriptions to federal publications.

STATUTORY AUTHORITY: Section 25.5-10-101, C.R.S.

REQUEST: The Department requests an appropriation of \$281,510 total funds, including \$164,636 General Fund and \$116,874 federal funds.

RECOMMENDATION: Staff recommends approval of the Department’s request.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, OPERATING EXPENSES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$281,510	\$164,636	\$0	\$0	\$116,874	0.0
TOTAL	\$281,510	\$164,636	\$0	\$0	\$116,874	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$281,510	\$164,636	\$0	\$0	\$116,874	0.0
TOTAL	\$281,510	\$164,636	\$0	\$0	\$116,874	0.0
Percentage Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$281,510	\$164,636	\$0	\$0	\$116,874	0.0
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

COMMUNITY AND CONTRACT MANAGEMENT SYSTEM

This line item funds licensing, reporting functions, and some limited information technology support for the Community and Contract Management System (CCMS) that is used to track client demographics and waiting list information and to bill for services for people with intellectual and developmental disabilities. CCMS is used for the purpose of authorizing and billing for services for state funded programs, including the Family Support Services Program and State Supported Living Services.

STATUTORY AUTHORITY: Section 25.5-10-204, C.R.S.

REQUEST: The Department requests an appropriation of \$137,480 total funds, including \$89,362 General Fund and \$48,118 federal funds.

RECOMMENDATION: Staff recommends approval of the Department’s request.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, COMMUNITY AND CONTRACT MANAGEMENT SYSTEM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$137,480	\$89,362	\$0	\$0	\$48,118	0.0

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, COMMUNITY AND CONTRACT MANAGEMENT SYSTEM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
TOTAL	\$137,480	\$89,362	\$0	\$0	\$48,118	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$137,480	\$89,362	\$0	\$0	\$48,118	0.0
TOTAL	\$137,480	\$89,362	\$0	\$0	\$48,118	0.0
Percentage Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$137,480	\$89,362	\$0	\$0	\$48,118	0.0
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

SUPPORT LEVEL ADMINISTRATION

The funding in this line item is used to pay for the ongoing costs associated with the administration of support level determination, including the Supports Intensity Scale (SIS), a tool that is used to determine the needs and authorize funding for individuals with developmental disabilities receiving Home and Community Based Waiver Services through the Supported Living Services or Comprehensive waiver. In addition, to the SIS, two external factors, including *danger to self* and *community safety risk*, are considered when determining an individual’s support level.

STATUTORY AUTHORITY: Section 25.5-10-204, C.R.S.

REQUEST: The Department requests an appropriation of \$58,350 total funds, including \$28,920 General Fund, \$255 cash funds, and \$29,175 federal funds.

RECOMMENDATION: Staff recommends approval of the Department’s request.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, SUPPORT LEVEL ADMINISTRATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$59,317	\$29,403	\$255	\$0	\$29,659	0.0
TOTAL	\$59,317	\$29,403	\$255	\$0	\$29,659	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$59,317	\$29,403	\$255	\$0	\$29,659	0.0
Annualize prior year budget actions	(967)	(483)	0	0	(484)	0.0
TOTAL	\$58,350	\$28,920	\$255	\$0	\$29,175	0.0
INCREASE/(DECREASE)	(\$967)	(\$483)	\$0	\$0	(\$484)	0.0
Percentage Change	(1.6%)	(1.6%)	0.0%	0.0%	(1.6%)	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$58,350	\$28,920	\$255	\$0	\$29,175	0.0
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

(2) MEDICAID PROGRAMS

ADULT COMPREHENSIVE SERVICES

This line item funds the costs of the adult Comprehensive Home and Community Based Services Waiver. Through this waiver, services are provided to individuals who require extensive supports to live safely in the community including day habilitation, prevocational services, residential habilitation, supported employment, dental and vision services, behavioral services, non-medical transportation, and specialized medical equipment and supplies.

STATUTORY AUTHORITY: Sections 25.5-6-401 through 412 and 25.5-10-206, C.R.S.

REQUEST: The Department requests an appropriation of \$786,098,887 total funds, including \$384,321,080 General Fund, \$9,133,363 cash funds, and \$393,454,444 federal funds.

RECOMMENDATION

FY 2022-23: Staff recommends an appropriation of \$660,401,744 total funds, including \$271,715,607 General Fund, \$19,606,380 cash funds, \$369,079,757 federal funds.

FY 2023-24: Staff recommends an appropriation of \$769,828,554 total funds, including \$368,065,426 General Fund, \$9,151,410 cash funds, and \$392,611,718 federal funds.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, ADULT COMPREHENSIVE WAIVER SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$713,885,548	\$333,336,878	\$23,605,897	\$0	\$356,942,773	0.0
Recommended Long Bill Add-on	(33,745,724)	(34,479,440)	(93,308)	0	827,024	0.0
Other Legislation	(19,738,080)	(27,141,831)	(3,906,209)	0	11,309,960	0.0
TOTAL	\$660,401,744	\$271,715,607	\$19,606,380	\$0	\$369,079,757	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$660,401,744	\$271,715,607	\$19,606,380	\$0	\$369,079,757	0.0
R7 Targeted provider rates	42,323,557	12,837,519	7,901,025	0	21,585,013	0.0
R5 Office of Community Living	32,992,707	48,787,659	118,328	0	(15,913,280)	0.0
R7 Provider rates	18,333,294	8,954,322	28,992	0	9,349,980	0.0
BA8 ARPA HCBS adjustments	9,182,752	0	3,969,754	0	5,212,998	0.0
Annualize prior year budget actions	6,594,500	25,770,319	(22,473,069)	0	3,297,250	0.0
TOTAL	\$769,828,554	\$368,065,426	\$9,151,410	\$0	\$392,611,718	0.0
INCREASE/(DECREASE)	\$109,426,810	\$96,349,819	(\$10,454,970)	\$0	\$23,531,961	0.0
Percentage Change	16.6%	35.5%	(53.3%)	0.0%	6.4%	0.0%
FY 2023-24 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$17,080,333	\$16,255,654	(\$18,047)	\$0	\$842,726	0.0

ADULT SUPPORTED LIVING WAIVER SERVICES

This line item funds the costs of adult supported living services provided through the Home and Community Based Services Supported Living Services waiver. This waiver provides supported living services in the home or community to persons with intellectual and developmental disabilities. Services include: day habilitation, homemaker, personal care, respite, supported employment, dental and vision services, assistive technology, behavioral services, home accessibility adaptation, mentorship, non-medical transportation, personal emergency response systems, professional therapeutic services, specialized medical equipment and supplies, and vehicle modification. These

waiver services are intended to be flexible and individualized based on the needs of each individual and may help avoid or delay the individual's need for services through the comprehensive waiver.

STATUTORY AUTHORITY: Sections 25.5-6-401 through 412 and 25.5-10-206, C.R.S.

REQUEST: The Department requests an appropriation of \$91,733,120 total funds, including \$39,114,313 General Fund, \$6,752,249 cash funds, and \$45,866,558 federal funds.

RECOMMENDATION

FY 2022-23: Staff recommends an appropriation of \$73,814,616 total funds, including \$24,387,041 General Fund, \$8,362,151 cash funds, and \$41,065,424 federal funds.

FY 2023-24: Staff recommends an appropriation of \$93,765,842 total funds, including \$38,926,121 General Fund, \$7,024,708 cash funds, and \$47,815,013 federal funds.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, ADULT SUPPORTED LIVING WAIVER SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$80,658,077	\$30,977,592	\$9,351,449	\$0	\$40,329,036	0.0
Other Legislation	(4,593,077)	(3,770,179)	(606,454)	0	(216,444)	0.0
Recommended Long Bill Add-on	(2,250,384)	(2,820,372)	(382,844)	0	952,832	0.0
TOTAL	\$73,814,616	\$24,387,041	\$8,362,151	\$0	\$41,065,424	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$73,814,616	\$24,387,041	\$8,362,151	\$0	\$41,065,424	0.0
R7 Targeted provider rates	6,862,683	2,470,172	892,548	0	3,499,963	0.0
Annualize prior year budget actions	6,613,253	6,718,804	(3,412,176)	0	3,306,625	0.0
BA8 ARPA HCBS adjustments	3,447,984	0	1,356,418	0	2,091,566	0.0
R7 Provider rates	2,436,518	1,056,032	137,862	0	1,242,624	0.0
R5 Office of Community Living	590,788	4,294,072	(312,095)	0	(3,391,189)	0.0
TOTAL	\$93,765,842	\$38,926,121	\$7,024,708	\$0	\$47,815,013	0.0
INCREASE/(DECREASE)	\$19,951,226	\$14,539,080	(\$1,337,443)	\$0	\$6,749,589	0.0
Percentage Change	27.0%	59.6%	(16.0%)	0.0%	16.4%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$91,733,120	\$39,114,313	\$6,752,249	\$0	\$45,866,558	0.0
Request Above/(Below) Recommendation	(\$2,032,722)	\$188,192	(\$272,459)	\$0	(\$1,948,455)	0.0

CHILDREN'S EXTENSIVE SUPPORT SERVICES

This line item funds the costs of children's extensive support services waiver which provides services to families and their children with developmental disabilities whose behavior and/or medical condition require constant supervision, and who are at high risk of out-of-home placements. The services provided through this waiver enable the child to remain in the family home and include: homemaker services, respite, vision care, adapted and therapeutic recreation equipment, equipment and supplies, vehicle modifications, and parent education.

STATUTORY AUTHORITY: Sections 25.5-6-401 through 412 and 25.5-10-206, C.R.S.

REQUEST: The Department requests an appropriation of \$48,241,851 total funds, including \$22,483,692 General Fund, \$22,483,692 cash funds, and \$24,120,923 federal funds.

RECOMMENDATIONS:

FY 2022-23: Staff recommends an appropriation of \$49,334,765 total funds, including \$21,642,950 General Fund and \$27,691,815 federal funds.

FY 2023-24: Staff recommends an appropriation of \$62,870,839 total funds, including \$29,190,544 General Fund and \$32,031,143 federal funds.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, CHILDREN'S EXTENSIVE SUPPORT SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$42,487,893	\$20,280,542	\$963,405	\$0	\$21,243,946	0.0
Recommended Long Bill Add-on	\$9,651,808	\$3,091,374	\$0	\$0	\$6,560,434	0.0
Other Legislation	(2,804,936)	(1,728,966)	(963,405)	0	(112,565)	0.0
TOTAL	\$49,334,765	\$21,642,950	\$0	\$0	\$27,691,815	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$49,334,765	\$21,642,950	\$0	\$0	\$27,691,815	0.0
R5 Office of Community Living	5,748,338	5,326,661	0	0	421,677	0.0
R10 Children with complex needs	3,274,471	0	1,637,236	0	1,637,235	0.0
BA8 ARPA HCBS adjustments	1,950,643	0	975,321	0	975,322	0.0
R7 Provider rates	1,572,836	770,689	0	0	802,147	0.0
R7 Targeted provider rates	805,652	394,771	0	0	410,881	0.0
Annualize prior year budget actions	184,134	1,055,473	(963,405)	0	92,066	0.0
TOTAL	\$62,870,839	\$29,190,544	\$1,649,152	\$0	\$32,031,143	0.0
INCREASE/(DECREASE)	\$13,536,074	\$7,547,594	\$1,649,152	\$0	\$4,339,328	0.0
Percentage Change	27.4%	34.9%	n/a	0.0%	15.7%	0.0%
FY 2023-24 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	(\$14,628,988)	(\$6,706,852)	(\$11,916)	\$0	(\$7,910,220)	0.0

CHILDREN'S HABILITATION RESIDENTIAL PROGRAM

This line item funds residential services and supports for children and youth from birth to 21 years of age. Services include: self-advocacy training, independent living training, cognitive services, communication services, counseling and therapeutic services, personal care services, emergency assistance training, community connection training, travel services, supervision services, and respite services.

STATUTORY AUTHORITY: Sections 25.5-6-401 through 412 and 25.5-10-206, C.R.S.

REQUEST: The Department requests an appropriation of \$15,105,423 total funds, including \$7,420,518 General Fund, 132,193 cash funds, and \$7,552,712 federal funds.

RECOMMENDATIONS:

FY 2022-23: Staff recommends an appropriation of \$11,741,502 total funds, including \$5,177,697 General Fund and \$6,563,805 federal funds.

FY 2023-24: Staff recommends an appropriation of \$14,689,243 total funds, including \$7,068,174 General Fund, \$132,000 cash funds, and \$7,488,869 federal funds.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, CHILDREN'S HABILITATION RESIDENTIAL PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$12,047,333	\$6,023,119	\$548	\$0	\$6,023,666	0.0
Other Legislation	\$1,290,362	\$231,969	(\$548)	\$0	\$1,058,941	0.0
Recommended Long Bill Add-on	(1,596,193)	(1,077,391)	0	0	(518,802)	0.0
TOTAL	\$11,741,502	\$5,177,697	\$0	\$0	\$6,563,805	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$11,741,502	\$5,177,697	\$0	\$0	\$6,563,805	0.0
R5 Office of Community Living	1,651,970	1,382,157	0	0	269,813	0.0
R7 Targeted provider rates	388,281	190,259	0	0	198,022	0.0
R7 Provider rates	375,674	184,080	0	0	191,594	0.0
Annualize prior year budget actions	266,867	133,981	(548)	0	133,434	0.0
R10 Children with complex needs	264,387	0	132,193	0	132,194	0.0
BA8 ARPA HCBS adjustments	562	0	555	0	7	0.0
TOTAL	\$14,689,243	\$7,068,174	\$132,200	\$0	\$7,488,869	0.0
INCREASE/(DECREASE)	\$2,947,741	\$1,890,477	\$132,200	\$0	\$925,064	0.0
Percentage Change	25.1%	36.5%	n/a	0.0%	14.1%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$15,105,423	\$7,420,518	\$132,193	\$0	\$7,552,712	0.0
Request Above/(Below) Recommendation	\$416,180	\$352,344	(\$7)	\$0	\$63,843	0.0

CASE MANAGEMENT SERVICES

This line item funds 20 Community Centered Boards (CCBs) and 24 Single Entry Points (SEPs) that administer the supports intensity scale and provide case management, utilization review, and quality assurance. Case management is provided for the three Home and Community Based Services waivers, the State Supported Living Services delivery option, the State Supported Family Support Services Program, and the Family Support Loan Fund. Waiver services are delivered through community providers, including CCBs and two state-operated regional centers. Targeted case management refers to case management services funded with Medicaid reappropriated funds that are billed fee-for-service rates.

STATUTORY AUTHORITY: Sections 25.5-6-401 through 412 and 25.5-10-206, C.R.S.

REQUEST: The Department requests an appropriation of \$105,712,812 total funds, including \$49,435,488 General Fund, \$4,077,534 cash funds, and \$52,349,069 federal funds.

RECOMMENDATIONS:

FY 2022-23: Staff recommends an appropriation of \$90,089,117 total funds, including \$41,964,607 General Fund, \$1,906,921 cash funds, and \$46,217,589 federal funds.

FY 2023-24: Staff recommends an appropriation of \$109,336,680 total funds, including \$50,893,993 General Fund, \$4,093,618 cash funds, and \$54,349,069 federal funds.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, CASE MANAGEMENT FOR PEOPLE WITH IDD						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$102,087,659	\$49,770,813	\$2,535,297	\$0	\$49,781,549	0.0
Other Legislation	(11,191,225)	(6,670,978)	(525,488)	0	(3,994,759)	0.0
Recommended Long Bill Add-on	(807,317)	(1,135,228)	(102,888)	0	430,799	0.0
TOTAL	\$90,089,117	\$41,964,607	\$1,906,921	\$0	\$46,217,589	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$90,089,117	\$41,964,607	\$1,906,921	\$0	\$46,217,589	0.0
R5 Office of Community Living	11,874,910	7,562,546	(97,489)	0	4,409,853	0.0
R13 Case management redesign	2,956,309	0	1,478,155	0	1,478,154	0.0
R7 Provider rates	2,791,092	1,362,126	41,965	0	1,387,001	0.0
BA7 Community based access to services	2,071,463	0	1,035,730	0	1,035,733	0.0
BA8 ARPA HCBS adjustments	1,445,345	0	677,278	0	768,067	0.0
Annualize prior year budget actions	(1,891,556)	4,714	(948,942)	0	(947,328)	0.0
TOTAL	\$109,336,680	\$50,893,993	\$4,093,618	\$0	\$54,349,069	0.0
INCREASE/(DECREASE)	\$19,247,563	\$8,929,386	\$2,186,697	\$0	\$8,131,480	0.0
Percentage Change	21.4%	21.3%	114.7%	0.0%	17.6%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$105,712,812	\$49,435,488	\$4,077,534	\$0	\$52,199,790	0.0
Request Above/(Below) Recommendation	(\$3,623,868)	(\$1,458,505)	(\$16,084)	\$0	(\$2,149,279)	0.0

(3) STATE-ONLY PROGRAMS

STATE SUPPORTED LIVING SERVICES

This line item funds the costs of adult supported living services for individuals who do not qualify for Medicaid. The program provides supported living services in the home or community to persons with intellectual and developmental disabilities, including: day habilitation, homemaker, personal care, respite, supported employment, dental and vision services, assistive technology, behavioral services, home accessibility adaptation, mentorship, non-medical transportation, personal emergency response systems, professional therapeutic services, specialized medical equipment and supplies, and vehicle modification.

STATUTORY AUTHORITY: Sections 25.5-6-401 through 412 and 25.5-10-206, C.R.S.

REQUEST: The Department requests an appropriation of \$5,089,811 General Fund.

RECOMMENDATION: Staff recommends an appropriation of \$5,193,523 General Fund.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, STATE SUPPORTED LIVING SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$10,337,979	\$10,337,979	\$0	\$0	\$0	0.0
Recommended Long Bill Add-on	\$0	\$0	\$0	\$0	\$0	0.0
Other Legislation	(5,295,723)	(5,295,723)	0	0	0	0.0

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, STATE SUPPORTED LIVING SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
TOTAL	\$5,042,256	\$5,042,256	\$0	\$0	\$0	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$5,042,256	\$5,042,256	\$0	\$0	\$0	0.0
R7 Provider rates	151,267	151,267	0	0	0	0.0
R5 Office of Community Living	0	0	0	0	0	0.0
TOTAL	\$5,193,523	\$5,193,523	\$0	\$0	\$0	0.0
INCREASE/(DECREASE)	\$151,267	\$151,267	\$0	\$0	\$0	0.0
Percentage Change	3.0%	3.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$5,089,811	\$5,089,811	\$0	\$0	\$0	0.0
Request Above/(Below) Recommendation	(\$103,712)	(\$103,712)	\$0	\$0	\$0	0.0

STATE SUPPORTED LIVING SERVICES CASE MANAGEMENT

This line item funds 20 Community Centered Boards (CCBs) and 24 Single Entry Points (SEPs) that administer the supports intensity scale and provide case management, utilization review, and quality assurance. Case management is provided for the State Supported Living Services delivery option, the State Supported Family Support Services Program, and the Family Support Loan Fund. Services are delivered through community providers and two state-operated regional centers. Targeted case management refers to case management services funded with Medicaid reappropriated funds that are billed fee-for-service rates.

STATUTORY AUTHORITY: Sections 25.5-6-401 through 412 and 25.5-10-206, C.R.S.

REQUEST: The Department requests an appropriation of \$4,924,590 General Fund.

RECOMMENDATIONS: Staff recommends an appropriation of \$5,061,041 General Fund.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, STATE SUPPORTED LIVING SERVICES CASE MANAGEMENT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$2,519,109	\$2,519,109	\$0	\$0	\$0	0.0
Other Legislation	\$2,394,523	\$2,394,523	\$0	\$0	\$0	0.0
Recommended Long Bill Add-on	\$0	\$0	\$0	\$0	\$0	0.0
TOTAL	\$4,913,632	\$4,913,632	\$0	\$0	\$0	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$4,913,632	\$4,913,632	\$0	\$0	\$0	0.0
R7 Provider rates	147,409	147,409	0	0	0	0.0
R5 Office of Community Living	0	0	0	0	0	0.0
TOTAL	\$5,061,041	\$5,061,041	\$0	\$0	\$0	0.0
INCREASE/(DECREASE)	\$147,409	\$147,409	\$0	\$0	\$0	0.0
Percentage Change	3.0%	3.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$4,924,590	\$4,924,590	\$0	\$0	\$0	0.0

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, STATE SUPPORTED LIVING SERVICES CASE MANAGEMENT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Request Above/(Below) Recommendation	(\$136,451)	(\$136,451)	\$0	\$0	\$0	0.0

FAMILY SUPPORT SERVICES

The Family Support Services line item provides financial support for families who have children, including adult children, with developmental disabilities or delays with costs that are beyond those normally experienced by other families. The intent of this funding is to provide supports that help reduce the likelihood of out-of-home placements. Services include: medical and dental expenses, additional insurance expenses, respite care and child care, special equipment, home or vehicle modifications or repairs, family counseling and support groups, recreation and leisure needs, transportation, and homemaker services.

STATUTORY AUTHORITY: Section 25.5-10-303 (1), C.R.S.

REQUEST: The Department requests an appropriation of \$10,763,595 General Fund.

RECOMMENDATION: Staff recommends an appropriation of \$11,048,853 General Fund.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, FAMILY SUPPORT SERVICES PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$7,825,842	\$7,825,842	\$0	\$0	\$0	0.0
Other Legislation	\$2,901,200	\$2,901,200	\$0	\$0	\$0	0.0
Recommended Long Bill Add-on	\$0	\$0	\$0	\$0	\$0	0.0
TOTAL	\$10,727,042	\$10,727,042	\$0	\$0	\$0	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$10,727,042	\$10,727,042	\$0	\$0	\$0	0.0
R7 Provider rates	321,811	321,811	0	0	0	0.0
R5 Office of Community Living	0	0	0	0	0	0.0
TOTAL	\$11,048,853	\$11,048,853	\$0	\$0	\$0	0.0
INCREASE/(DECREASE)	\$321,811	\$321,811	\$0	\$0	\$0	0.0
Percentage Change	3.0%	3.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$10,763,585	\$10,763,585	\$0	\$0	\$0	0.0
Request Above/(Below) Recommendation	(\$285,268)	(\$285,268)	\$0	\$0	\$0	0.0

PREVENTIVE DENTAL HYGIENE

This line item provides funding for the Preventive Dental Hygiene Program administered by a contract with the Colorado Foundation of Dentistry for the Handicapped. The program is designed to improve oral hygiene in persons with developmental disabilities in order to prevent dental disease. Funding also supports outreach services to match individuals needing care with dentists willing to provide pro-bono dental care. Medicaid eligible children may receive dental screening through the federal Early and Periodic, Screening, Diagnosis and Treatment Program; however, Colorado does not offer adult dental care through Medicaid.

STATUTORY AUTHORITY: Section 25.5-10-220, C.R.S.

REQUEST: The Department requests an appropriation of \$68,121 General Fund.

RECOMMENDATION: Staff recommends an appropriation of \$69,823 General Fund.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, PREVENTIVE DENTAL HYGIENE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$67,789	\$67,789	\$0	\$0	\$0	0.0
TOTAL	\$67,789	\$67,789	\$0	\$0	\$0	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$67,789	\$67,789	\$0	\$0	\$0	0.0
R7 Provider rates	2,034	2,034	0	0	0	0.0
R5 Office of Community Living	0	0	0	0	0	0.0
TOTAL	\$69,823	\$69,823	\$0	\$0	\$0	0.0
INCREASE/(DECREASE)	\$2,034	\$2,034	\$0	\$0	\$0	0.0
Percentage Change	3.0%	3.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$68,121	\$68,121	\$0	\$0	\$0	0.0
Request Above/(Below) Recommendation	(\$1,702)	(\$1,702)	\$0	\$0	\$0	0.0

SUPPORTED EMPLOYMENT PROVIDER AND CERTIFICATION REIMBURSEMENT

This line item is part of the supported employment three-year pilot program and funds the reimbursement of certification costs for supported employment providers required by S.B 18-145 (Implement Employment First Recommendations).

STATUTORY AUTHORITY: Section 8-84-106, C.R.S.

REQUEST: The Department requests an appropriation of \$303,158 General Fund.

RECOMMENDATION: Staff recommends approval of the Department’s request.

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, SUPPORTED EMPLOYMENT PROVIDER AND CERTIFICATION REIMBURSEMENT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2022-23 APPROPRIATION						
H.B. 22-1329 (Long Bill)	\$303,158	\$303,158	\$0	\$0	\$0	0.0
TOTAL	\$303,158	\$303,158	\$0	\$0	\$0	0.0
FY 2023-24 RECOMMENDED APPROPRIATION						
FY 2022-23 Appropriation	\$303,158	\$303,158	\$0	\$0	\$0	0.0
R5 Office of Community Living	0	0	0	0	0	0.0
TOTAL	\$303,158	\$303,158	\$0	\$0	\$0	0.0

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND
DEVELOPMENTAL DISABILITIES, SUPPORTED EMPLOYMENT PROVIDER AND CERTIFICATION
REIMBURSEMENT

	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
INCREASE/(DECREASE)	\$0	\$0	\$0	\$0	\$0	0.0
Percentage Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
FY 2023-24 EXECUTIVE REQUEST	\$303,158	\$303,158	\$0	\$0	\$0	0.0
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

LONG BILL FOOTNOTES AND REQUESTS FOR INFORMATION

LONG BILL FOOTNOTES

Staff recommends **ADDING** the following footnote:

- N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, Medicaid Programs, Case management for People with Disabilities -- Of this appropriation, \$168,000 General Fund is appropriated for financial closeout activities for Case Management Agencies and Single Entry Points, and is available for expenditure until the close of the 2024-25 state fiscal year.

COMMENT: This footnote expresses legislative intent, and provides roll-forward authority for the Department to spend this appropriation over multiple fiscal years.

Staff recommends **CONTINUING OR MODIFYING AND CONTINUING** the following footnotes:

- N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, Medicaid Programs-- It is the General Assembly's intent that expenditures for these services be recorded only against the Long Bill group total for Medicaid Programs.

COMMENT: This footnote provides flexibility for the Department to move money between line items within the Office of Community Living.

- N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, Medicaid Programs, Adult Comprehensive Services -- Of this appropriation, cash funds appropriated from the Home- and Community-based Services Improvement Fund remain available for expenditure until the close of the ~~2023-24~~ 2024-25 state fiscal year.

COMMENT: This footnote expresses legislative intent, and provides roll-forward authority for the Department to spend this appropriation over multiple fiscal years.

- N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, Medicaid Programs, Adult Supported Living Services -- Of this appropriation, cash funds appropriated from the Home- and Community-based Services Improvement Fund remain available for expenditure until the close of the ~~2023-24~~ 2024-25 state fiscal year.

COMMENT: This footnote expresses legislative intent, and provides roll-forward authority for the Department to spend this appropriation over multiple fiscal years.

N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, Medicaid Programs, Children's Extensive Support Services -- Of this appropriation, cash funds appropriated from the Home- and Community-based Services Improvement Fund remain available for expenditure until the close of the ~~2023-24~~ 2024-25 state fiscal year.

COMMENT: This footnote expresses legislative intent, and provides roll-forward authority for the Department to spend this appropriation over multiple fiscal years.

N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, Medicaid Programs, Children's Habilitation Residential Program -- Of this appropriation, cash funds appropriated from the Home- and Community-based Services Improvement Fund remain available for expenditure until the close of the ~~2023-24~~ 2024-25 state fiscal year.

COMMENT: This footnote expresses legislative intent, and provides roll-forward authority for the Department to spend this appropriation over multiple fiscal years.

N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, Medicaid Programs, Case management for People with Disabilities -- Of this appropriation, cash funds appropriated from the Home- and Community-based Services Improvement Fund remain available for expenditure until the close of the ~~2023-24~~ 2024-25 state fiscal year.

COMMENT: This footnote expresses legislative intent, and provides roll-forward authority for the Department to spend this appropriation over multiple fiscal years.

N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, State-only Programs-- It is the General Assembly's intent that expenditures for these services be recorded only against the Long Bill group total for State-only Programs.

COMMENT: This footnote provides flexibility for the Department to move money between line items within the Office of Community Living.

N Department of Health Care Policy and Financing, Office of Community Living, Division of Intellectual and Developmental Disabilities, State-only Programs, Preventive Dental Hygiene -- It is the General Assembly's intent that this appropriation be used to provide special dental services for persons with intellectual and developmental disabilities.

COMMENT: This footnote was first added to the FY 2022-23 Long Bill, and reflects the legislative intent that funds appropriated in this line be used for a specific purpose.

REQUESTS FOR INFORMATION

Staff is not recommending any requests for information for FY 2023-24.

APPENDIX A: NUMBERS PAGES

JBC Staff Figure Setting - FY 2023-24
Staff Working Document - Does Not Represent Committee Decision

Appendix A: Numbers Pages

	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
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DEPARTMENT OF HEALTH CARE POLICY AND FINANCING Kim Bimestefer, Executive Director
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(4) OFFICE OF COMMUNITY LIVING

(A) Division for Individuals with Intellectual and Developmental Disabilities

(i) Administrative Costs

Personal Services	<u>3,407,396</u>	<u>3,129,269</u>	<u>3,469,613</u>	<u>3,469,613</u>	<u>3,469,613</u>
FTE	34.7	29.1	39.5	39.5	39.5
General Fund	1,539,405	1,307,493	1,858,480	1,858,480	1,858,480
Cash Funds	255,113	210,643	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,612,878	1,611,133	1,611,133	1,611,133	1,611,133
Operating Expenses	<u>160,560</u>	<u>72,072</u>	<u>281,510</u>	<u>281,510</u>	<u>281,510</u>
General Fund	112,261	36,038	164,636	164,636	164,636
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	48,299	36,034	116,874	116,874	116,874
Community and Contract Management System	<u>61,582</u>	<u>62,840</u>	<u>137,480</u>	<u>137,480</u>	<u>137,480</u>
General Fund	30,791	31,420	89,362	89,362	89,362
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	30,791	31,420	48,118	48,118	48,118

* Line reflects a Decision Item.

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	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
Support Level Administration	<u>49,266</u>	<u>51,404</u>	<u>59,317</u>	<u>58,350</u>	<u>58,350</u>
General Fund	24,633	25,702	29,403	28,920	28,920
Cash Funds	0	0	255	255	255
Reappropriated Funds	0	0	0	0	0
Federal Funds	24,633	25,702	29,659	29,175	29,175
Cross-System Response Pilot Program Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	0	0	0	0
SUBTOTAL - (i) Administrative Costs	3,678,804	3,315,585	3,947,920	3,946,953	3,946,953
<i>FTE</i>	<u>34.7</u>	<u>29.1</u>	<u>39.5</u>	<u>39.5</u>	<u>39.5</u>
General Fund	1,707,090	1,400,653	2,141,881	2,141,398	2,141,398
Cash Funds	255,113	210,643	255	255	255
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,716,601	1,704,289	1,805,784	1,805,300	1,805,300
Medicaid Programs					
Adult Comprehensive Waiver Services	<u>503,845,540</u>	<u>593,246,267</u> 0.0	<u>660,401,744</u>	<u>786,908,887</u>	<u>769,828,554</u> *
General Fund	208,587,557	188,425,770	271,715,607	384,321,080	368,065,426
Cash Funds	800,001	31,135,458	19,606,380	9,133,363	9,151,410
Reappropriated Funds	0	0	0	0	0
Federal Funds	294,457,982	373,685,039	369,079,757	393,454,444	392,611,718
Adult Supported Living Waiver Services	<u>65,883,070</u>	<u>68,257,740</u>	<u>73,814,616</u>	<u>91,733,120</u>	<u>93,765,842</u> *
General Fund	24,941,566	19,279,569	24,387,041	39,114,313	38,926,121
Cash Funds	4,090,144	5,981,477	8,362,151	6,752,249	7,024,708
Reappropriated Funds	0	0	0	0	0
Federal Funds	36,851,360	42,996,694	41,065,424	45,866,558	47,815,013

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	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
Children's Extensive Support Services	<u>32,668,165</u>	<u>37,846,959</u>	<u>49,334,765</u>	<u>48,241,851</u>	<u>62,870,839</u> *
General Fund	14,105,642	13,413,358	21,642,950	22,483,692	29,190,545
Cash Funds	0	623,899	0	1,637,236	1,649,152
Reappropriated Funds	0	0	0	0	0
Federal Funds	18,562,523	23,809,702	27,691,815	24,120,923	32,031,142
Children's Habilitation Residential Program	<u>4,229,118</u>	<u>9,153,153</u>	<u>11,741,502</u>	<u>15,105,423</u>	<u>14,689,243</u> *
General Fund	1,708,771	3,335,090	5,177,697	7,420,518	7,068,174
Cash Funds	0	5,089	0	132,193	132,200
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,520,347	5,812,974	6,563,805	7,552,712	7,488,869
Case Management for People with IDD	<u>0</u>	<u>80,740,234</u>	<u>90,089,117</u>	<u>105,712,812</u>	<u>109,336,680</u> *
General Fund	0	36,766,240	41,964,607	49,435,488	50,893,993
Cash Funds	0	762,621	1,906,921	4,077,534	4,093,618
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	43,211,373	46,217,589	52,199,790	54,349,069
Home and Community Based Services for People with Intellectual and Developmental Disabilities	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	0	0	0	0
Eligibility Determination and Waiting List Management	<u>1,597,270</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	1,301,521	0	0	0	0
Federal Funds	295,749	0	0	0	0

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	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
Case Management Services	<u>32,871,410</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	14,019,555	0	0	0	0
Cash Funds	187,939	0	0	0	0
Federal Funds	18,663,916	0	0	0	0
SUBTOTAL - Medicaid Programs	641,094,573	789,244,353	885,381,744	1,047,702,093	1,050,491,158
<i>FTE</i>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	264,664,612	261,220,027	364,887,902	502,775,091	494,144,259
Cash Funds	5,078,084	38,508,544	29,875,452	21,732,575	22,051,088
Reappropriated Funds	0	0	0	0	0
Federal Funds	371,351,877	489,515,782	490,618,390	523,194,427	534,295,811
State-only Programs					
Family Support Services Program	<u>8,636,298</u>	<u>9,818,346</u>	<u>10,727,042</u>	<u>10,763,585</u>	<u>11,048,853</u> *
General Fund	8,636,298	9,373,496	10,727,042	10,763,585	11,048,853
Cash Funds	0	444,850	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
State Supported Living Services	<u>5,539,938</u>	<u>4,898,139</u>	<u>5,042,256</u>	<u>5,089,811</u>	<u>5,193,524</u> *
General Fund	5,422,133	4,898,139	5,042,256	5,089,811	5,193,524
Cash Funds	117,805	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

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	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
State Supported Living Services Case Management	<u>3,703,361</u>	<u>4,494,161</u>	<u>4,913,632</u>	<u>4,924,590</u>	<u>5,061,041</u> *
General Fund	3,430,432	4,494,161	4,913,632	4,924,590	5,061,041
Cash Funds	272,929	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Preventive Dental Hygiene	<u>64,894</u>	<u>64,894</u>	<u>67,789</u>	<u>68,121</u>	<u>69,823</u> *
General Fund	64,894	64,894	67,789	68,121	69,823
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Supported Employment Provider and Certification					
Reimbursement	<u>157,100</u>	<u>148,800</u>	<u>303,158</u>	<u>303,158</u>	<u>303,158</u> *
General Fund	157,100	148,800	303,158	303,158	303,158
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Supported Employment Pilot Program	<u>153,814</u>	<u>415,969</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	415,969	0	0	0
Cash Funds	153,814	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Eligibility Determination and Waiting List					
Management	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	0	0	0	0

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	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
State-only Programs for People with Intellectual and Developmental Disabilities General Fund	<u>0</u> 0	<u>0</u> 0	<u>0</u> 0	<u>0</u> 0	<u>0</u> 0
SUBTOTAL - State-only Programs	18,255,405	19,840,309	21,053,877	21,149,265	21,676,399
<i>FTE</i>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	17,710,857	19,395,459	21,053,877	21,149,265	21,676,399
Cash Funds	544,548	444,850	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

(ii) Program Costs

Adult Comprehensive Services General Fund	<u>0</u> 0
Adult Supported Living Services General Fund	<u>0</u> 0
Children's Extensive Support Services General Fund	<u>0</u> 0
Children's Habilitation Residential Program General Fund	<u>0</u> 0
Case Management General Fund	<u>0</u> 0
Family Support Services General Fund	<u>0</u> 0

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	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
Preventive Dental Hygiene	<u>0</u>				
General Fund	0				
Eligibility Determination and Waiting List					
Management	<u>0</u>				
General Fund	0				
Supported Employment Provider and Certification					
Reimbursement	<u>0</u>				
General Fund	0				
Supported Employment Pilot Program					
General Fund	<u>0</u>				
SUBTOTAL - (ii) Program Costs	0				
<i>FTE</i>	<u>0.0</u>				
General Fund	0				
TOTAL - (4) Office of Community Living	663,028,782	812,400,247	910,383,541	1,072,798,311	1,076,114,510
<i>FTE</i>	<u>34.7</u>	<u>29.1</u>	<u>39.5</u>	<u>39.5</u>	<u>39.5</u>
General Fund	284,082,559	282,016,139	388,083,660	526,065,754	517,962,056
Cash Funds	5,877,745	39,164,037	29,875,707	21,732,830	22,051,343
Reappropriated Funds	0	0	0	0	0
Federal Funds	373,068,478	491,220,071	492,424,174	524,999,727	536,101,111

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	FY 2020-21 Actual	FY 2021-22 Actual	FY 2022-23 Appropriation	FY 2023-24 Request	FY 2023-24 Recommendation
TOTAL - Department of Health Care Policy and Financing	663,028,782	812,400,247	910,383,541	1,072,798,311	1,076,114,510
<i>FTE</i>	<u>34.7</u>	<u>29.1</u>	<u>39.5</u>	<u>39.5</u>	<u>39.5</u>
General Fund	284,082,559	282,016,139	388,083,660	526,065,754	517,962,056
Cash Funds	5,877,745	39,164,037	29,875,707	21,732,830	22,051,343
Reappropriated Funds	0	0	0	0	0
Federal Funds	373,068,478	491,220,071	492,424,174	524,999,727	536,101,111