JOINT BUDGET Committee



STAFF FIGURE SETTING FY 2024-25

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

(Office of Community Living)

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

PREPARED BY: Eric Kurtz, JBC Staff March 13, 2024

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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 each division, but the description of incremental changes is not repeated, since it is available under the Department Overview. More details about the incremental changes are provided in the sections following the Department Overview and the division summary tables.

Decision items, both department-requested items and staff-initiated items, are discussed either in the Decision Items Affecting Multiple Divisions or at the beginning of the most relevant division. Within a section, decision items are listed in the requested priority order, if applicable.

DEPARTMENT OVERVIEW

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

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

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

SUMMARY OF STAFF RECOMMENDATIONS

In the table below, the highlighted rows are those that will be discussed as part of the figure setting recommendations for the Office of Community Living. The remaining rows represent the staff recommendations on items that were covered in other figure setting presentations. The figures in the table represent the staff recommendations and not the JBC's actions.

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING									
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FTE			
FY 2023-24 APPROPRIATION									
FY 2023-24 Appropriation	\$15,340,335,131	\$4,509,692,766	\$1,788,606,414	\$117,280,880	\$8,924,755,071	805.5			
Long bill supplemental	(325,638,598)	(45,244,896)	(31,583,344)	0	(248,810,358)	0.0			
TOTAL	\$15,014,696,533	\$4,464,447,870	\$1,757,023,070	\$117,280,880	\$8,675,944,713	805.5			
FY 2024-25 RECOMMENDED APPROPRIA	TION								
FY 2023-24 Appropriation	\$15,014,696,533	\$4,464,447,870	\$1,757,023,070	\$117,280,880	\$8,675,944,713	805.5			
Enrollment/utilization trends									
R1 Medical Services Premiums	488,069,566	310,722,337	48,532,452	0	128,814,777	0.0			
R2 Behavioral Health	(109,762,232)	(10,980,415)	(7,628,662)	0	(91,153,155)	0.0			
R3 Child Health Plan Plus	71,926,571	15,997,713	9,821,673	0	46,107,185	0.0			
R4 Medicare Modernization Act	(729,368)	(729,368)	0	0	0	0.0			
R5 Office of Community Living	63,687,003	37,429,372	64,930	0	26,192,701	0.0			
BA9 Public school health services	9,682,177	<u>0</u>	<u>9,246,240</u>	<u>0</u>	435,937	0.0			
Subtotal - Enrollment/utilization trends	522,873,717	352,439,639	60,036,633	0	110,397,445	0.0			
Eligibility/benefit changes									
R9 Access to benefits	308,000	153,999	0	0	154,001	0.9			

		~	~	-		
	Total	GENERAL	Cash	Reappropriated	Federal	
	Funds	Fund	Funds	Funds	Funds	FTE
Provider rates						
R6a Provider rates	181,974,452	69,860,142	7,242,701	0	104,871,609	0.0
R6b Targeted provider rates	<u>198,389,998</u>	<u>57,140,818</u>	27,182,819	<u>0</u>	<u>114,066,361</u>	<u>0.0</u>
Subtotal - Provider rates	380,364,450	127,000,960	34,425,520	0	218,937,970	0.0
Administration and other						
R7 Behavioral health continuum	4,382,060	934,458	316,094	0	3,131,508	1.4
R8 Eligibility process compliance	8,479,360	788,878	633,101	0	7,057,381	1.8
R10 Assessments for skilled nursing	1,938,600	484,650	0	0	1,453,950	0.0
R11 Program support	570,508	223,810	16,635	0	330,063	2.9
R12a Accessibility	353,971	134,310	42,675	0	176,986	0.9
R12b Senior dental administration	75,000	75,000	0	0	0	0.0
R13 Convert contracts to FTE	133,723	(53,845)	(33,016)	307,417	(86,833)	12.0
R14 Contract true up	43,910	90,668	(47,844)	0	1,086	0.0
R15 Denver Health	0	0	0	0	0	0.0
BA6 Public health emergency unwind	21,670,244	5,378,942	1,805,859	0	14,485,443	3.2
BA7 Transport credentialing & reviews	279,533	83,861	55,907	0	139,765	0.
BA8 Community-based access to services	1,896,701	325,564	908,021	0	663,116	0.0
BA10 CO Benefits Management System	0	0	0	0	0	0.0
BA11 ARPA HCBS adjustments	4,608,068	0	2,495,840	0	2,112,228	29.0
BA14 Legal services	237,200	71,160	47,440	0	118,600	0.0
Care & case management stabilization	4,369,584	2,163,555	0	0	2,206,029	1.8
DACA Recipients	(2,061,189)	(1,030,594)	0	0	(1,030,595)	0.0
Autism report	(62,000)	(31,000)	0	0	(31,000)	0.0
Payments to OIT	7,888,029	1,665,364	688,427	1,068,127	4,466,111	0.0
Centrally appropriated items	10,530,499	4,757,805	781,868	23,179	4,967,647	0.0
Human Services	3,868,746	2,786,159	(47,820)	0	1,130,407	0.0
Transfers to other departments	745,851	352,690	0	0	393,161	0.0
Indirect costs	136,603	(136,603)	77,822	161,372	34,012	0.0
Annualize prior year funding	(63,668,911)	11,517,416	(58,593,233)	445	(16,593,539)	(24.2
TOTAL	\$15,924,658,790	\$4,974,624,716	\$1,800,632,999	\$118,841,420	\$9,030,559,655	836.5
INCREASE/(DECREASE)	\$909,962,257	\$510,176,846	\$43,609,929	\$1,560,540	\$354,614,942	31.
Percentage Change	6.1%	11.4%	2.5%	1.3%	4.1%	3.8%
reitentage Change	0.1%	11.4%	2.3%	1.3%	4.1%	3.6%
FY 2024-25 EXECUTIVE REQUEST	\$16,460,377,917	\$4,970,656,091	\$1,844,949,470	\$134,016,094	\$9,510,756,262	832.
Request Above/(Below) Recommendation	\$535,719,127	(\$3,968,625)	\$44,316,471	\$15,174,674	\$480,196,607	(4.3

DESCRIPTION OF INCREMENTAL CHANGES

FY 2023-24

RECOMMENDED LONG BILL ADD-ON: Staff recommends a supplemental adjustment to the FY 2023-24 appropriations to account for enrollment and utilization trends identified in the Department's February forecast for the Office of Community Living plus \$23.4 million total funds, including \$11.7 million General Fund, for care and case management stabilization.

FY 2024-25

R5 OFFICE OF COMMUNITY LIVING: Staff recommends a net increase of \$63.7 million total funds, including an increase of \$37.4 million General Fund, for projected changes in caseload, per capita expenditures, and fund sources for long-term services and supports for people with intellectual and developmental disabilities.

BA8 COMMUNITY-BASED ACCESS TO SERVICES: Staff recommends a net increase of \$1.9 million total funds, including \$325,564 General Fund, to modify previously approved funding to respond to the Department of Justice's (DoJ's) March 2022 findings letter alleging that Colorado is violating Title II of the Americans with Disabilities Act 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 changes include \$970,722 total funds, including \$485,361, to expand access to transition coordination and case management services for an estimated 193 members using housing navigation who are at risk of institutionalization and \$1,256,400 General Fund for legal consultations related to the DoJ lawsuit. The remaining modifications align the funding with the actual contracts and implementation schedule.

CARE AND CASE MANAGEMENT STABILIZATION: Staff recommends \$29.7 million total funds, including \$14.0 million General Fund, and 1.8 FTE spread over FY 2023-24 and FY 2024-25 to stabilize care and case management services that are experiencing extraordinary workload and financial challenges due to: (1) implementation of the new care and case management information technology system; (2) the transition to conflict-free case management; and (3) the public health emergency unwind. The funding includes \$27.6 million total funds for payments to the care and case management agencies for unexpected workload increases and to stabilize finances during a period of rapid change. It also includes \$2.2 million total funds to accelerate information technology and process fixes.

Care and Case Man	agement Stab	oilization		
	Total Funds	General Fund	Federal Funds	FTE
<u>FY 2023-24</u>				
Case management agency stabilization funding	\$23,351,593	\$11,675,797	\$11,675,796	0.0
Department staff	<u>0</u>	<u>0</u>	<u>0</u>	0.0
Quality & technical assistance program manager	0	0	0	0.0
System and technical adviser	0	0	0	0.0
Care and case management system funding	0	0	0	0.0
Total	\$23,351,593	\$11,675,797	\$11,675,796	0.0
<u>FY 2024-25</u>				
Case management agency stabilization funding	\$4,199,696	\$2,099,848	\$2,099,848	0.0
Department staff	169,888	63,707	106,181	1.8
Quality & technical assistance program manager	84,944	42,472	42,472	0.9
System and technical adviser	84,944	21,235	63,709	0.9
Care and case management system funding	2,000,000	200,000	1,800,000	0.0
			\$4,006,029	1.8

MAJOR DIFFERENCES FROM THE REQUEST

The largest dollar difference between the request and the JBC staff recommendation is due to the JBC staff using the Department's February 2024 forecast of expenditures for the Office of Community Living, rather than the November 2023 forecast that was used for the Governor's request. The February 2024 forecast is lower than the forecast used for the Governor's request by \$11.7 million total funds, including \$5.8 million General Fund, in FY 23-24 and \$12.5 million total funds, including \$6.3 million General Fund, in FY 24-25. The cumulative General Fund difference over the two years is \$12.0 million lower than the Governor's November request.

The next largest difference from the request is the staff recommendation to provide \$29.7 million total funds, including \$14.0 million General Fund, and 1.8 FTE spread over FY 2023-24 and FY 2024-25 to stabilize care and case management services that are experiencing extraordinary workload and financial challenges. This is an issue that was identified by the Department after the statutory deadlines for supplementals and budget amendments and was not including in the Governor's budget balancing.

The remaining differences are due to the JBC's actions on provider rates to increase the common policy provider rate adjustment to 2.5 percent from 1.0 percent and to make the HCBS minimum wage adjustment \$1.00 statewide rather than the requested \$1.00 in Denver and \$0.80 outside of Denver.

(4) OFFICE OF COMMUNITY LIVING

The Office of Community Living provides leadership and case management services for all of the Department's long-term care programs.

For Medicaid clients with intellectual and developmental disabilities, the division includes funding for:

- Residential services through the Adult Comprehensive and Children's Habilitation waivers
- Non-residential services through the Adult Supported Living and Children's Extensive Support waivers

Independent of Medicaid, the Division operates programs for people with intellectual and developmental disabilities to provide:

- Funding for extraordinary costs incurred by families
- Preventive dental hygiene
- Supported employment

	OFFICE OF CO	OMMUNITY I	LIVING			
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FTE
FY 2023-24 Appropriation						
FY 2023-24 Appropriation	\$1,050,387,184	\$511,265,372	\$20,466,680	\$0	\$518,655,132	39.5
Long bill supplemental	11,648,902	5,924,273	19,750	0	5,704,879	0.0
TOTAL	\$1,062,036,086	\$517,189,645	\$20,486,430	\$0	\$524,360,011	39.5
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,062,036,086	\$517,189,645	\$20,486,430	\$0	\$524,360,011	39.5
R5 Office of Community Living	63,687,003	37,429,372	64,930	0	26,192,701	0.0
R6a Provider rates	26,121,583	13,045,008	275,603	0	12,800,972	0.0
R6b Targeted provider rates	29,098,165	14,549,100	0	0	14,549,065	0.0
BA8 Community-based access to services	(565,469)	(1,171,606)	888,871	0	(282,734)	0.0
Care & case management stabilization	4,199,696	2,099,848	0	0	2,099,848	0.0
Annualize prior year funding	16,372,040	16,796,621	(9,413,699)	0	8,989,118	0.0
TOTAL	\$1,200,949,104	\$599,937,988	\$12,302,135	\$0	\$588,708,981	39.5
INCREASE/(DECREASE)	\$138,913,018	\$82,748,343	(\$8,184,295)	\$0	\$64,348,970	0.0
Percentage Change	13.1%	16.0%	(39.9%)	0.0%	12.3%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$1,192,156,815	\$595,568,902	\$12,119,172	\$0	\$584,468,741	39.5
Request Above/(Below) Recommendation	(\$8,792,289)	(\$4,369,086)	(\$182,963)	\$0	(\$4,240,240)	0.0

DECISION ITEMS – OFFICE OF COMMUNITY LIVING

→ R5 Office of Community Living Caseload Adjustment

REQUEST

The Department requests a change to the Office of Community Living (OCL), Medicaid Programs appropriations for both FY 23-24 and FY 24-25 based on a new forecast of caseload and expenditures under current law and policy. The OCL Medicaid Programs pay for Home- and Community-Based Services to Medicaid members with intellectual and developmental disabilities.

On February 15, 2024, the Department submitted an update to the R1 forecast. This update is not an "official" request and it is not accounted for in the Governor's budget balancing. It was submitted after the General Assembly's budget request deadlines. However, it represents the most current forecast of expenditures available. The February 2024 forecast is lower than the forecast used for the Governor's request by \$11.7 million total funds, including \$5.8 million General Fund, in FY 23-24 and \$12.5 million total funds, including \$6.3 million General Fund, in FY 24-25. The cumulative General Fund difference over the two years is \$12.0 million lower than the Governor's November request.

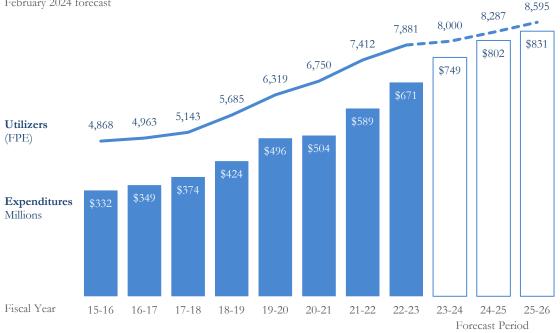
RECOMMENDATION

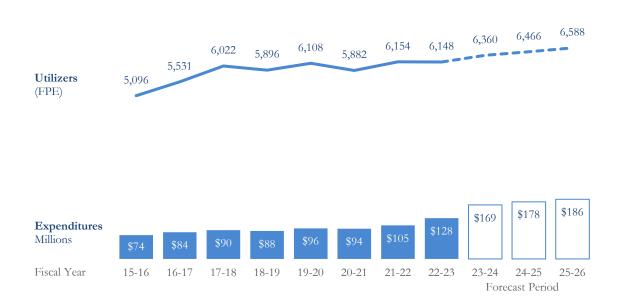
Staff recommends using the Department's February 2024 forecast of enrollment and expenditures to modify both the FY 2023-24 and FY 2024-25 appropriations. This is the best estimate available of what the actual costs will be for the program based on current law and policy.

The graphs below summarize the Department's forecast.

Office of Community Living Residential Services

Adult Comprehensive Services and Children's Habilitation Residential Services February 2024 forecast





Office of Community Living Nonresidential Services Adult Supported Living Services and Childrens' Extensive Support Services February 2024 forecast

FY 2023-24

The table below shows the most significant factors driving the change in the Department's forecast for FY 23-24. Note that this table displays changes from the appropriation and not changes from FY 22-23. A negative number does not necessarily indicate negative growth for the fiscal year, but just slower growth than had been assumed for the appropriation.

FY 2023-24 Office of Co	mmunity Livin	ng Enrollmer	nt/Utilizatio	on Trends	
	Total	General	CF -	CF -	Federal
	Funds	Fund	HAS Fee	ARPA	Funds
FY 2023-24 Appropriation					
Adult Comprehensive Services	\$752,788,451	\$366,679,938	\$1,286,019	\$5,101,628	\$379,720,866
Adult Supported Living Services	91,038,265	36,260,032	8,220,110	192,738	46,365,385
Children's Extensive Support Services	62,163,555	29,629,196	0	978,522	31,555,837
Children's Habilitation Residential Program	13,967,626	6,714,361	0	127,133	7,126,132
Case Management	104,655,935	48,089,048	1,536,389	3,023,886	52,006,612
Subtotal - Appropriation	\$1,024,613,832	\$487,372,575	\$11,042,518	\$9,423,907	\$516,774,832
Recommended adjustment					
Adult Comprehensive Services	(\$16,699,536)	(\$8,190,600)	\$7,827	\$0	(\$8,516,763)
Adult Supported Living Services	(2,284,184)	(1,119,250)	0	0	(1,164,934)
Children's Extensive Support Services	14,086,672	6,890,553	0	11,916	7,184,203
Children's Habilitation Residential Program	116,392	57,025	0	7	59,360
Case Management	(6,922,035)	(3,389,252)	0	0	(3,532,783)
Subtotal - Adjustment	(\$11,702,691)	(\$5,751,524)	\$7,827	\$11,923	(\$5,970,917)
FY 2023-24 Forecast (Feb 2024)					
Adult Comprehensive Services	\$736,088,915	\$358,489,338	\$1,293,846	\$5,101,628	\$371,204,103
Adult Supported Living Services	88,754,081	35,140,782	8,220,110	192,738	45,200,451
Children's Extensive Support Services	76,250,227	36,519,749	0	990,438	38,740,040

Funds 14,084,018	Fund 6,771,386	HAS Fee 0	ARPA 127,140	Funds 7,185,492
97,733,900	44,699,796	1,536,389	3,023,886	48,473,829
	14,084,018	14,084,0186,771,38697,733,90044,699,796	14,084,0186,771,386097,733,90044,699,7961,536,389	14,084,0186,771,3860127,14097,733,90044,699,7961,536,3893,023,886

Adult Comprehensive Services

The forecast decreased the expected reserve capacity needed from 411 to 292. The General Assembly provides funding for reserve capacity for emergency placements due to factors such as homelessness or abuse and for people transitioning from foster care, a youth waiver, or an institutional setting. Adult Comprehensive Services includes residential habilitation, day habilitation, prevocational services, supported employment, dental and vision services, behavioral services, non-medical transportation, and specialized medical equipment and supplies.

Adult Supported Living Services

The forecast decreased primarily due to lower actual utilization of Supported Living Services by people enrolled in the waiver through the first half of the year. Supported Living 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.

CHILDREN'S EXTENSIVE SUPPORT SERVICES

The forecast increase is primarily attributable to higher costs per utilizer (or full program equivalent FPE), driven by respite services and community connector services. During the COVID public health emergency, the federal Centers for Medicare and Medicaid Services (CMS) directed states to allow payments to parents for community connector services and recent CMS guidance has made that change in policy permanent. Since the change, the Department has seen significant growth in the utilization of community connector services. Children's Extensive Support Services include: homemaker services, respite, vision care, adapted and therapeutic recreation equipment, equipment and supplies, vehicle modifications, and parent education.

CASE MANAGEMENT

The decrease in the forecast is primarily due to the delay in implementing the Single Assessment Tool pushing projected reassessment costs into FY 2024-25.

FY 2024-25

The next table shows the projected changes in expenditures by program from FY 2023-24 to FY 2024-25. The table combines the impact of changes in the forecast and anualizations, which are sometimes separated in other tables within this document.

FY 2024-25 Office of Co	mmunity Livi	ng Enrollme	nt/Utilizati	on Trends	
	Total Funds	General Fund	CF - HAS Fee	CF - ARPA	Federal Funds
FY 2023-24 Forecast (Feb 2024)					
Adult Comprehensive Services	\$736,088,915	\$358,489,338	\$1,293,846	\$5,101,628	\$371,204,103
Adult Supported Living Services	88,754,081	35,140,782	8,220,110	192,738	45,200,451
Children's Extensive Support Services	76,250,227	36,519,749	0	990,438	38,740,040

FY 2024-25 Office of Co	ommunity Livi	ng Enrollme	nt/Utilizati	on Trends	
	Total	General	CF -	CF -	Federal
	Funds	Fund	HAS Fee	ARPA	Funds
Children's Habilitation Residential Program	14,084,018	6,771,386	0	127,140	7,185,492
Case Management	97,733,900	44,699,796	1,536,389	3,023,886	48,473,829
Subtotal - Appropriation	\$1,012,911,141	\$481,621,051	\$11,050,345	\$9,435,830	\$510,803,915
Change by Program					
Adult Comprehensive Services	\$34,232,148	\$20,657,595	\$67,971	\$0	\$13,506,582
Adult Supported Living Services	3,120,990	2,364,016	11,168	0	745,806
Children's Extensive Support Services	5,513,598	3,511,973	0	0	2,001,625
Children's Habilitation Residential Program	2,240,575	1,253,538	0	0	987,037
Case Management	18,579,692	9,642,250	(14,209)	0	8,951,651
Subtotal - Adjustment	\$63,687,003	\$37,429,372	\$64,930	\$0	\$26,192,701
FY 2024-25 Forecast (Feb 2024)					
Adult Comprehensive Services	\$785,772,515	\$391,520,269	\$1,365,989	\$0	\$392,886,257
Adult Supported Living Services	94,506,524	39,004,614	8,248,649	0	47,253,261
Children's Extensive Support Services	83,809,764	41,086,264	0	818,618	41,904,882
Children's Habilitation Residential Program	16,444,526	8,156,167	0	66,096	8,222,263
Case Management	137,944,348	68,096,185	1,526,925	0	68,321,238
Subtotal - FY 2024-25	\$1,118,477,677	\$547,863,499	\$11,141,563	\$884,714	\$558,587,901

Adult Comprehensive Services

The increase is primarily to provide reserve capacity to add 292 adults to the waiver. The General Assembly provides funding for reserve capacity for emergency placements due to factors such as homelessness or abuse and for people transitioning from foster care, a youth waiver, or an institutional setting. Adult Comprehensive Services includes residential habilitation, day habilitation, prevocational services, supported employment, dental and vision services, behavioral services, non-medical transportation, and specialized medical equipment and supplies.

SUPPORTED LIVING SERVICES

The increase is primarily due to a projected 3.7 percent increase in costs per utilizer based on prior year trends. Enrollment is projected to grow only 0.3 percent. Offsetting people entering the waiver there are people who leave the waiver due to entering the Adult Comprehensive Services. Supported Living 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.

CHILDREN'S EXTENSIVE SUPPORT SERVICES

The increase reflects projected increases in enrollment of 3.9 percent and cost per utilizer of 3.6 percent. Children's Extensive Support Services include: homemaker services, respite, vision care, adapted and therapeutic recreation equipment, equipment and supplies, vehicle modifications, and parent education.

CHILDREN'S HABILITATION RESIDENTIAL PROGRAM

The forecast reflects projected increases in enrollment of 13.9 percent and cost per utilizer of 2.5 percent. The enrollment growth is due to action by the General Assembly that expanded eligibility for the waiver from children in foster care to children with very high needs but no foster care involvement.

CASE MANAGEMENT

The forecasted increase is primarily due to the expected implementation of the Single Assessment Tool and the associated costs for reassessing all clients, which drives a cost of \$13.4 million total funds, and higher rates for case management approved by the General Assembly as part of the transition to conflict free case management, which drives a cost of \$15.9 million total funds. The implementation of conflict free case management is transferring responsibility for case management from 20 Community Centered Boards that serve people with intellectual and developmental disabilities and 24 Single Entry Points that serve all other people eligible for long term care programs to 15 case management agencies. The new rates are being implemented as the transitions occur in three phases over the later half of FY 2023-24, so there is a large annualization of the cost for the higher rates in FY 2024-25.

FUND SOURCE ADJUSTMENTS

Included in the projected changes in expenditures by program are changes in the fund sources. This includes an increase of \$5.5 million total funds and a corresponding decrease in federal funds due to the end of the enhanced federal match during the public health emergency. It also includes an increase of \$10.8 million General Fund and a corresponding decrease in cash funds for the end of one-time federal funds deposited in the Home- and Community-Based Services Improvement Fund that were used to support provider rate increases.

→ BA8 Community based access to services

REQUEST

The Department requests several modifications to previously approved funding that is intended to respond to the Department of Justice's (DoJ's) March 2022 findings letter alleging that Colorado is violating Title II of the Americans with Disabilities Act 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." In September 2023 the DoJ filed suit against the State.

In FY 2023-24 the General Assembly approved BA7 that provided funding for 15 initiatives to respond to the DoJ's findings. This request and the related supplemental that the General Assembly already approved make modifications to the funding for a handful of those 15 initiatives.

RECOMMENDATION

Staff recommends approval of the request to continue the policies approved by the General Assembly in the supplemental. The changes include \$970,722 total funds, including \$485,361, to expand access to transition coordination and case management services for an estimated 193 members using housing navigation who are at risk of institutionalization and \$1,256,400 General Fund for legal consultations related to the DoJ lawsuit. The remaining modifications align the funding with the actual contracts and implementation schedule. The staff recommendation is summarized in the table below and each component of the recommendation is described in more detail in the subsections following the table.

BA8 Community Base	ed Access to	Services		
	Total Funds	General Fund	Cash Funds	Federal Funds
FY 2023-24 Approved supplemental				
Transition coordination and case management	\$0	\$0	\$0	\$0
Diversion and rapid reintegration	(294,049)	0	(147,025)	(147,024)
Community option outreach materials	(266,000)	0	(133,000)	(133,000)
Budget neutrality certification & independent review	0	0	0	0
Legal consultations for ongoing litigation	508,390	508,390	0	0
Individual and group in-reach counseling	(1,255,993)	0	(627,996)	(627,997)
Total	(\$1,307,652)	\$508,390	(\$908,021)	(\$908,021)
FY 2024-25				
Transition coordination and case management	\$970,722	\$485,361	\$0	\$485,361
Diversion and rapid reintegration	(140,402)	(70,201)	0	(70,201)
Community option outreach materials	(50,000)	(25,000)	0	(25,000)
Budget neutrality certification & independent review	0	0	0	0
Legal consultations for ongoing litigation	1,256,400	1,256,400	0	0
Individual and group in-reach counseling	(1,447,670)	(812,605)	0	(635,065)
Total	\$589,050	\$833,955	\$0	(\$244,905)
FY 2025-26				
Transition coordination and case management	\$970,722	\$485,361	\$0	\$485,361
Diversion and rapid reintegration	(140,402)	(70,201)	0	(70,201)
Community option outreach materials	(50,000)	(25,000)	0	(25,000)
Budget neutrality certification & independent review	56,700	28,350	0	28,350
Legal consultations for ongoing litigation	1,256,400	1,256,400	0	0
Individual and group in-reach counseling	(664,686)	(421,113)	0	(243,573)
Total	\$1,428,734	\$1,253,797	\$0	\$174,937

TRANSITION COORDINATION AND CASE MANAGEMENT

Staff recommends the requested increase of \$970,722 total funds, including \$485,631 General Fund, to expand access to transition coordination and case management services for an estimated 193 members using housing navigation who are at risk of institutionalization. The General Assembly previously approved an increase in the number of transition coordination units per utilizer for these same services. This request would expand the number of people who can use the services. The request assumes federal approval and implementation of the benefit change by July 1, 2024.

DIVERSION AND RAPID REINTEGRATION

Staff recommends a decrease in previously approved funding for developing rapid reintegration plans based on the Department building the responsibility for developing rapid reintegration plans into the contracts with the case management agencies. In addition, staff recommends an adjustment to the timing of funding for screenings for the rapid reintegration plans. The Department pushed back the expected implementation to July 1, 2024, due to delays in needed information technology updates, so less funding was needed in FY 2023-24 for screenings, but the costs restart in FY 2024-25. Rapid reintegration plans are developed for individuals that are interested in community living but still need to move into a nursing facility for a short term stay while community services are arranged.

COMMUNITY OPTION OUTREACH MATERIALS

Staff recommends eliminating funding for community option outreach materials. The Department developed the initial outreach materials that teach people about community living options with federal stimulus funding and plans to absorb on-going update and material costs within approved funding for in-reach counseling (see below), so the Department no longer needs the funding intended for this

purpose. The FY 2023-24 appropriation included one-time material development funding and the base budget for FY 2024-25 included on-going funding for reprints and updates.

BUDGET NEUTRALITY CERTIFICATION AND INDEPENDENT REVIEW

Staff recommends the requested update to projected funding needs in FY 2025-26 to add contract services for an independent review and budget neutrality certification for a federal waiver to implement presumptive eligibility for members with disabilities. With funding provided by the General Assembly, the Department is pursuing the federal waiver and as part of the process the Department must have an independent review and certification that the cost is expected to be budget neutral in the long run. In this case, the Department expects an increase in expenditures for Home- and Community-Based Services as people become eligible more quickly but a decrease in utilization of higher cost institutional services in the long run. The Department did not build the cost for the budget neutrality certification and independent review into the original FY 2023-24 BA7 and so the Department is seeking to correct that oversight in this request. The cost will not be incurred until FY 2025-26.

LEGAL CONSULTATIONS FOR ONGOING LITIGATION

Staff recommends an increase in funding for legal and expert testimony services specific to the DoJ case. The request assumes an average rate of \$314.20 per hour with 1,619 hours in FY 2023-24 and 4,000 hours each year from FY 2024-25 through FY 2027-28. This is consistent with the assumptions and amounts approved in the supplemental.

INDIVIDUAL AND GROUP IN-REACH COUNSELING

Staff recommends an update to the expected cost for individual and group counseling to people living in nursing facilities on their options for living in the community. In FY 2023-24 the counseling is being provided by existing Department staff, and so the supplemental removed the appropriated funding for contract services. The Department has a contract to provide group counseling beginning July 2024 and expects to implement individual counseling through the case management agencies beginning January 2025. The rates developed for the services are lower than originally projected, so this budget amendment reduces the expected costs to align with the actual rates. In addition, staff recommends the requested technical adjustment to where the funding is provided, since the group counseling is being provided by a contractor that is separate from the case management agencies. Finally, staff recommends the requested added costs for software licenses for the group counseling and reduction based on lower projected travel by Department staff.

→ Staff Initiated: Care and Case Management Stabilization

REQUEST

After the statutory deadlines for submitting supplementals and budget amendments, the Department identified an urgent need for funding to stabilize care and case management services that are experiencing extraordinary workload and financial challenges due to: (1) implementation of the new care and case management information technology system; (2) the transition to conflict-free case management; and (3) the public health emergency unwind. The Department identified a need for \$23.4 million total funds, including \$11.7 million General Fund, in FY 2023-24 and \$6.4 million total funds, including \$12.4 million General Fund, in FY 2024-25. This is not an official request and was not accounted for in the Governor's budget balancing, but the Office of State Planning and Budgeting indicates that the Governor supports the proposal. According to staff from the Office of Community

Living, stabilizing the care and case management delivery system is currently the Department's number one priority and significant internal resources and staff have been diverted to address the issues.

The new care and case management information technology system is replacing decades old legacy systems and provides necessary functional enhancements to support a wide range of major department initiatives, such as the single assessment tool, person-centered budget algorithm, community first choice, and conflict free case management. The Department believes the system will eventually improve the experience of case managers and clients by automating currently manual procedures and providing quicker and more accurate access to necessary and useful information.

However, the system is currently in a roll out phase where there is a steep learning curve for case managers and there are a number of system bugs getting worked out that are having major impacts on case manager workload and client access to care. The Department attributes most of the problems to data integrity issues in the migration of information from the legacy systems. These are causing problems with Prior Authorization Requests (PARs) that are necessary for providers to get paid, member program cards that show a client is eligible and enrolled, care and service plans that describe what services the client is supposed to receive, and reporting that helps the Department and case managers track and attribute clients. Some of the issues are due to bad data that didn't cause issues in the legacy systems but is problematic in the new system that has more robust logic and controls so that previously manual procedures can be automated when the data in the system is accurate and complete. Other issues are related to mapping the data to the right place or a lack of autofills, for example if there was missing information in the legacy system because the case manager judged it wasn't relevant but the new system requires an entry to determine that the information isn't relevant. In addition to the data integrity concerns, the Department says there are known issues where certain features of the new system are not working as intended around critical incident reports and the certification page and notice of action letter.

Learning the new system and dealing with the system bugs is dramatically increasing the workload of case managers. Processes that used to take minutes are requiring work arounds or producing errors that are taking hours or days to sort out. In some situations, providers are not getting paid or clients are not getting services. As one measure of the magnitude of the problem, the Department says that case management agencies are reporting approximately 5,000 missing, incomplete, or erroneous PARs. The Department says most providers are temporarily continuing to provide services despite the missing PARs, but the lack of reimbursement is unsustainable long term and the Department is aware of some providers that have stopped providing services without a PAR.

The transition to conflict-free case management involves moving clients from 20 Community Centered Boards that serve people with intellectual and developmental disabilities and 24 Single Entry Point agencies that serve all other utilizers of long term care programs to 15 newly created case management agencies. Conflict free case management is required by federal regulation to ensure there is a financial and leadership separation between the entities authorizing, arranging, and coordinating services and the entities delivering services. Colorado is the last state to come into compliance with the federal regulation and there is no room to further delay the transition. The transition has been happening in waves since the start of 2024 and will be complete by the start of FY 2024-25. The transition requires proper attribution of the clients to their new case management providers and a handoff of information from the old provider to the new one. This was supposed to be facilitated by the new case management information technology system. Providers are reporting fluctuating censuses, unexpected and unexplained reattributions of clients, and system lockouts that prevent a case management agency from researching and determining why a client suddenly moved, whether it was appropriate or an error, and whether the client is getting services. The transition itself generated a lot of uncertainty and risk for case management agencies that needed to significantly scale up staffing based on projected budgets and workload. With the simultaneous implementation of the new case management information technology system and associated learning curve and system bugs, the case management agencies are experiencing unexpected call volumes from members in crisis who need help identifying their providers, members requesting transfers to a new provider, and members having problems accessing services due to missing, incomplete, or erroneous authorizations and system errors. As an indicator of the size of the problem, the Department described one case management agency that is experiencing a 280 percent increase in calls per assigned member.

The third component of the perfect storm described by the Department is the unwind of the federal public health emergency. During the pandemic, Medicaid clients retained eligibility regardless of changes in income or family status. With the return to more normal operations, all Medicaid clients need a redetermination of eligibility. For people utilizing long term care programs, this requires not only an analysis of income eligibility, but also consideration of assets and a functional assessment of the applicants' need for long term care services. The case management agencies are providing additional outreach, support, and question answering for members as well as performing the functional assessments. Between June and December 2023 there were 4,044 members utilizing long term services and supports who lost eligibility due to a procedural reason such as not providing verification for all of their paperwork. The Department is investigating each of these cases to determine if the eligibility termination was appropriate or a system processing issue caused by the backlog at the county or case management agency. The decrease in enrollment of members using long term care is more than what was assumed when building the rates for the case management agencies and more than what the case management agencies expected when building their budgets.

To mitigate the problems and stabilize the case management system, the Department is proposing three funding initiatives:

- 1 Case Management Agency Stabilization Funding The Department proposes sending \$27.6 million total funds, including \$13.8 million General Fund, to the case management agencies over FY 2023-24 and FY 2024-25 to help them stabilize financially and deal with the unexpected workload.
- 2 Department staff The Department is proposing \$206,165 total funds, including \$77,312 General Fund, in FY 2024-25 and FY 2025-26 for two term-limited positions to accelerate the Department's response to the crisis.
- 3 Care and case management system funding The Department is proposing \$2,000,000 total funds, including \$200,000 General Fund, in FY 2024-25 and ongoing for contract programming resources to design, develop, and implement system changes.

RECOMMENDATION

Staff recommends approval of the funding identified by the Department, with modification to apply the JBC's common policies regarding new FTE and a shorter duration for the care and case management system funding than the Department proposed. Given the urgency of the positions, staff assumes the Department will do an accelerated hiring process and have the positions in place by July 1, 2024. Staff assumes no increase in leased space for the term-limited positions.

There might be questions about duplication of funding requests. In addition to this request, the Department requested and the JBC approved resources in *BA6 Public Health Emergency Unwind* for an outbound contact center for long term care, backlog processing for long term care eligibility, an escalations resolution unit, and communications. Those resources were primarily focused on county income eligibility verifications, but some of the rising backlogs, escalations, and communication needs are connected with the problems in the case management system. Also, the Department requested resources in *R11 Program Support* that at the time this document was published the JBC had not approved for Home- and Community-Based Services systems support. The three positions requested in R11 are more generically to support all the Home- and Community-Based Services system improvements that were financed with federal stimulus funds, but the one that is having the most issues at the moment and ties all the other systems together is the care and case management system. Staff's analysis is that the Department would benefit from the funding in all three proposals

	agement Stal			
	TOTAL	GENERAL	Federal	
	Funds	Fund	Funds	FTE
<u>FY 2023-24</u>				
Case management agency stabilization funding	\$23,351,593	\$11,675,797	\$11,675,796	0.0
Department staff	<u>0</u>	<u>0</u>	<u>0</u>	<u>0.0</u>
Quality & technical assistance program manager	0	0	0	0.0
System and technical adviser	0	0	0	0.0
Care and case management system funding	0	0	0	0.0
Total	\$23,351,593	\$11,675,797	\$11,675,796	0.0
FY 2024-25				
Case management agency stabilization funding	\$4,199,696	\$2,099,848	\$2,099,848	0.0
Department staff	169,888	63,707	106,181	1.8
Quality & technical assistance program manager	84,944	42,472	42,472	0.9
System and technical adviser	84,944	21,235	63,709	0.9
Care and case management system funding	2,000,000	200,000	1,800,000	0.0
Total	\$6,369,584	\$2,363,555	\$4,006,029	1.8
<u>FY 2025-26</u>				
Case management agency stabilization funding	\$0	\$0	\$0	0.0
Department staff	<u>195,654</u>	73,369	122,285	2.
Quality & technical assistance program manager	97,827	48,913	48,914	1.
System and technical adviser	97,827	24,456	73,371	1.
Care and case management system funding	2,000,000	200,000	1,800,000	0.
Total	\$2,195,654	\$273,369	\$1,922,285	2.0

The components of the staff recommendation on this proposal are summarized in the table below.

CASE MANAGEMENT AGENCY STABILIZATION FUNDING

The amount is equivalent to two months of funding. The proposal spreads the money over FY 2023-24 and FY 2024-25 in alignment with when the transitions to conflict free case management are scheduled to occur. The federal Centers for Medicare and Medicaid Services (CMS) is aware of the issues the Department is encountering and the Department has received verbal confirmation that the payments will receive federal approved. The Department estimates that expenditures for case management are trending \$5.8 million total funds below what the Department's forecasting models expected and some of that is likely due to the case management perfect storm described above. In

addition, the funding is intended to acknowledge increases in workload due to the time required per case, higher call volumes, and outreach required to make sure people are connected with services. The Department is not proposing any new performance requirements with the funding. Rather, the proposed funding is intended to help the case management agencies meet their existing performance objectives that they are not currently able to meet. The Department's intent is to provide a significant amount of funding for a significant problem and the size of the request is loosely informed by the Department's conversations with stakeholders about their financial needs, but there is nothing magic about the two months of funding and the JBC could choose to go lower or higher.

Department Staff

One position would be a quality and technical assistance program manager with a 50 percent federal match for administration. The position would develop and monitor individual technical assistance plans for each case management agency. The position is intended to improve communication with the case management agencies, identify and quantify performance problems, analyze the root causes and design solutions, and monitor improvement progress. The second position would provide additional support to improve and speed up the information technology fixes for the care and case management system with an expected 75 percent federal match rate for information technology maintenance. To the extent the information technology staff works on system development issues, some of the staff time may qualify for a 90 percent federal match. Providers specifically requested dedicated staff to improve communication with HCPF about the problems they are encountering and resources to accelerate system fixes.

CARE AND CASE MANAGEMENT SYSTEM FUNDING

As the Department fixes the data integrity issues and features in the care and case management system that are not working as intended, the Department expects there will be proposals from the case management agencies for ways to improve the user experience and optimize the system. These additional resources would help the Department address those feature and functionality issues more quickly. It is expected the system development work will qualify for a 90 percent federal match. **The Department had proposed that this funding be ongoing, but the staff recommendation is for two years of funding in FY 2024-25 and FY 2025-26.** As the system becomes more stable, the Department can reevaluate the ongoing needs for system updates and submit a new request, if warranted, for FY 2025-26.

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 manage services for people with 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 from the Department of Human Services to the Department of Health Care Policy and Financing. 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 continuation funding.

RECOMMENDATION: Staff recommends the Department's request.

OFFICE OF COMMUNITY LIV	ving, Divisi	ON FOR IN	DIVIDUAL	S WITH INTELL	ECTUAL ANI)
DEVELOPI	MENTAL DIS	SABILITIES, 1	PERSONAL	L SERVICES		
	TOTAL	GENERAL	Cash	REAPPROPRIATED	Federal	
	Funds	Fund	Funds	Funds	Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 APPROPRIATION FY 2023-24 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
FY 2024-25 RECOMMENDED APPROPRIAT	TION					
FY 2023-24 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 2024-25 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 continuation funding and annualizations of prior year budget actions.

OFFICE OF COMMUNITY LIVE DEVELOPME	<i>,</i>			als With Intel ng Expenses	LECTUAL AN	ND
	Total	GENERAL	Cash	REAPPROPRIATED	Federal	
	Funds	Fund	Funds	Funds	Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$431,510	\$239,636	\$ 0	\$0	\$191,874	0.0
TOTAL	\$431,510	\$239,636	\$0	\$0	\$191,874	0.0
FY 2024-25 RECOMMENDED APPROPRIAT	ION					
FY 2023-24 Appropriation	\$431,510	\$239,636	\$0	\$ 0	\$191,874	0.0
Annualize prior year funding	(75,000)	(37,500)	0	0	(37,500)	0.0
TOTAL	\$356,510	\$202,136	\$0	\$0	\$154,374	0.0
INCREASE/(DECREASE)	(\$75,000)	(\$27 500)	\$0	\$0	(\$27,500)	0.0
	(\$75,000)	(\$37,500)		+-	(\$37,500)	
Percentage Change	(17.4%)	(15.6%)	0.0%	0.0%	(19.5%)	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$356,510	\$202,136	\$0	\$0	\$154,374	0.0
Request Above/(Below) Recommendation	\$ 0	\$0	\$ 0	\$0	\$0	0.0

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

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 continuation funding

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

OFFICE OF COMMUNITY LIV	VING, DIVI	SION FOR I	NDIVIDUAI	LS WITH INTELLE	ECTUAL ANI)
DEVELOPMENTAL DISABIL	ITIES, COM	MUNITY A	ND CONTR	ACT MANAGEME	NT SYSTEM	
	Total	GENERAL	Cash	REAPPROPRIATED	Federal	
	Funds	Fund	Funds	Funds	Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$137,480	\$89,362	\$0	\$0	\$48,118	0.0
TOTAL	\$137,480	\$89,362	\$0	\$0	\$48,118	0.0
FY 2024-25 RECOMMENDED APPROPRIA	TION					
FY 2023-24 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 2024-25 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 continuation funding

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

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, SUPPORT LEVEL ADMINISTRATION

L11L0, 0	UTIONTI				
TOTAL	GENERAL	Cash	REAPPROPRIATED	Federal	
Funds	Fund	Funds	Funds	Funds	FTE
\$58,350	\$28,920	\$255	\$0	\$29,175	0.0
\$58,350	\$28,920	\$255	\$0	\$29,175	0.0
\$58,350	\$28,920	\$255	\$0	\$29,175	0.0
\$58,350	\$28,920	\$255	\$0	\$29,175	0.0
0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
\$58,350	\$28,920	\$255	\$0	\$29,175	0.0
\$0		A 0	\$0	\$0	0.0
	TOTAL FUNDS \$58,350 \$58,350 \$58,350 \$58,350 0.0% \$58,350	TOTAL FUNDS GENERAL FUND \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920 \$58,350 \$28,920	TOTAL FUNDs GENERAL FUND CASH FUNDs \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$58,350 \$28,920 \$255 \$6,00% 0.00% 0.00% \$58,350 \$28,920 \$255	TOTAL FUNDS GENERAL FUND CASH FUNDS REAPPROPRIATED FUNDS \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0 \$58,350 \$28,920 \$255 \$0	FUNDS FUND FUNDS FUNDS FUNDS \$58,350 \$28,920 \$255 \$0 \$29,175 \$58,350 \$28,920 \$255 \$0 \$29,175 \$58,350 \$28,920 \$255 \$0 \$29,175 \$58,350 \$28,920 \$255 \$0 \$29,175 \$58,350 \$28,920 \$255 \$0 \$29,175 \$58,350 \$28,920 \$255 \$0 \$29,175 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% \$58,350 \$28,920 \$255 \$0 \$29,175

(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 a caseload adjustment in R5 and provider rate adjustments in R6a and R6b.

RECOMMENDATION

FY 2023-24: Staff recommends a supplemental decrease of \$16.7 million total funds, including a decrease of \$8.2 million General Fund, for enrollment and utilization trends identified in the Department's February 2024 forecast.

FY 2024-25: Staff recommends adjustments for enrollment and utilization trends identified in the Department's February 2024 forecast and the JBC's actions on provider rates to increase the common policy provider rate adjustment to 2.5 percent from 1.0 percent and to make the HCBS minimum wage adjustment \$1.00 statewide rather than the requested \$1.00 in Denver and \$0.80 outside of Denver.

OFFICE OF COMMUNITY LI	IVING, DIVIS	ION FOR IN	DIVIDUALS	WITH INTELLE	CTUAL AND)
DEVELOPMENTAL D	ISABILITIES, I	ADULT COM	PREHENSIV	VE WAIVER SER	VICES	
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$752,788,451	\$366,679,938	\$6,387,647	\$0	\$379,720,866	0.0
Long bill supplemental	(16,699,536)	(8,190,600)	7,827	0	(8,516,763)	0.0
TOTAL	\$736,088,915	\$358,489,338	\$6,395,474	\$0	\$371,204,103	0.0
FY 2024-25 RECOMMENDED APPROPRIA	ATION					
FY 2023-24 Appropriation	\$736,088,915	\$358,489,338	\$6,395,474	\$0	\$371,204,103	0.0
R5 Office of Community Living	34,232,148	20,657,595	67,971	0	13,506,582	0.0
R6b Targeted provider rates	24,976,086	12,488,049	0	0	12,488,037	0.0
R6a Provider rates	18,007,286	8,972,339	31,304	0	9,003,643	0.0
Annualize prior year funding	15,451,452	12,373,336	(5,097,456)	0	8,175,572	0.0
TOTAL	\$828,755,887	\$412,980,657	\$1,397,293	\$0	\$414,377,937	0.0
INCREASE/(DECREASE)	\$92,666,972	\$54,491,319	(\$4,998,181)	\$0	\$43,173,834	0.0
Percentage Change	12.6%	15.2%	(78.2%)	0.0%	11.6%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$840,396,437	\$418,837,312	\$1,360,909	\$0	\$420,198,216	0.0
Request Above/(Below) Recommendation	\$11,640,550	\$5,856,655	(\$36,384)	\$0	\$5,820,279	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 a caseload adjustment in R5 and provider rate adjustments in R6a and R6b.

RECOMMENDATION

FY 2023-24: Staff recommends a supplemental decrease of \$2.3 million total funds, including a decrease of \$1.1 million General Fund, for enrollment and utilization trends identified in the Department's February 2024 forecast.

FY 2024-25: Staff recommends adjustments for enrollment and utilization trends identified in the Department's February 2024 forecast and the JBC's actions on provider rates to increase the common policy provider rate adjustment to 2.5 percent from 1.0 percent and to make the HCBS minimum wage adjustment \$1.00 statewide rather than the requested \$1.00 in Denver and \$0.80 outside of Denver.

OFFICE OF COMMUNITY LIV	· ·					D
DEVELOPMENTAL DISA	BILITIES, AD	DULT SUPPC	DRTED LIV	ING WAIVER SI	ERVICES	
	TOTAL	GENERAL	Cash	REAPPROPRIATED	Federal	
	Funds	Fund	Funds	Funds	Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$91,038,265	\$36,260,032	\$8,412,848	\$0	\$46,365,385	0.0
Long bill supplemental	(2,284,184)	(1,119,250)	0	0	(1,164,934)	0.0
TOTAL	\$88,754,081	\$35,140,782	\$8,412,848	\$0	\$45,200,451	0.0
FY 2024-25 RECOMMENDED						
APPROPRIATION						
FY 2023-24 Appropriation	\$88,754,081	\$35,140,782	\$8,412,848	\$0	\$45,200,451	0.0
R5 Office of Community Living	3,120,990	2,364,016	11,168	0	745,806	0.0
R6b Targeted provider rates	2,751,610	1,375,812	0	0	1,375,798	0.0
Annualize prior year funding	2,631,453	1,499,816	(175,367)	0	1,307,004	0.0
R6a Provider rates	2,165,775	893,856	189,032	0	1,082,887	0.0
TOTAL	\$99,423,909	\$41,274,282	\$8,437,681	\$0	\$49,711,946	0.0
INCREASE/(DECREASE)	\$10,669,828	\$6,133,500	\$24,833	\$0	\$4,511,495	0.0
Percentage Change	12.0%	17.5%	0.3%	0.0%	10.0%	0.0%
0 0						
FY 2024-25 EXECUTIVE REQUEST	\$101,049,045	\$42,200,264	\$8,324,262	\$0	\$50,524,519	0.0
Request Above/(Below) Recommendation	\$1,625,136	\$925,982	(\$113,419)	\$0	\$812,573	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 a caseload adjustment in R5 and provider rate adjustments in R6a and R6b.

RECOMMENDATION

FY 2023-24: Staff recommends a supplemental increase of \$14.1 million total funds, including an increase of \$6.9 million General Fund, for enrollment and utilization trends identified in the Department's February 2024 forecast.

FY 2024-25: Staff recommends adjustments for enrollment and utilization trends identified in the Department's February 2024 forecast and the JBC's actions on provider rates to increase the common policy provider rate adjustment to 2.5 percent from 1.0 percent and to make the HCBS minimum wage adjustment \$1.00 statewide rather than the requested \$1.00 in Denver and \$0.80 outside of Denver.

OFFICE OF COMMUNITY LIV DEVELOPMENTAL DIS	· ·					D
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$62,163,555	\$29,629,196	\$978,522	\$0	\$31,555,837	0.0
Long bill supplemental	\$14,086,672	\$6,890,553	\$11,916	\$0	\$7,184,203	0.0
TOTAL	\$76,250,227	\$36,519,749	\$990,438	\$0	\$38,740,040	0.0
FY 2024-25 RECOMMENDED APPROPRIA	TION					
FY 2023-24 Appropriation	\$76,250,227	\$36,519,749	\$990,438	\$0	\$38,740,040	0.0
R5 Office of Community Living	5,513,598	3,511,973	0	0	2,001,625	0.0
Annualize prior year funding	2,045,939	1,054,542	(171,820)	0	1,163,217	0.0
R6a Provider rates	1,920,640	941,560	18,760	0	960,320	0.0
R6b Targeted provider rates	934,498	467,252	0	0	467,246	0.0
TOTAL	\$86,664,902	\$42,495,076	\$837,378	\$0	\$43,332,448	0.0
INCREASE/(DECREASE)	\$10,414,675	\$5,975,327	(\$153,060)	\$0	\$4,592,408	0.0
Percentage Change	13.7%	16.4%	(15.5%)	0.0%	11.9%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$72,882,421	\$35,615,090	\$826,122	\$0	\$36,441,209	0.0
Request Above/(Below) Recommendation	(\$13,782,481)	(\$6,879,986)	(\$11,256)	\$0	(\$6,891,239)	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 a caseload adjustment in R5 and provider rate adjustments in R6a and R6b.

RECOMMENDATION

FY 2023-24: Staff recommends a supplemental increase of \$116,392 total funds, including an increase of \$57,025 General Fund, for enrollment and utilization trends identified in the Department's February 2024 forecast.

FY 2024-25: Staff recommends adjustments for enrollment and utilization trends identified in the Department's February 2024 forecast and the JBC's actions on provider rates to increase the common policy provider rate adjustment to 2.5 percent from 1.0 percent and to make the HCBS minimum wage adjustment \$1.00 statewide rather than the requested \$1.00 in Denver and \$0.80 outside of Denver.

	Total	GENERAL	Cash	Reappropriated	Federal	
	Funds	Fund	FUNDS	Funds	FUNDS	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$13,967,626	\$6,714,361	\$127,133	\$0	\$7,126,132	0.0
Long bill supplemental	\$116,392	\$57,025	\$7	\$0	\$59,360	0.0
TOTAL	\$14,084,018	\$6,771,386	\$127,140	\$0	\$7,185,492	0.0
FY 2024-25 RECOMMENDED						
APPROPRIATION	*	0 (57) 00 (#105 110	\$ 0	0- 10 - 10 -	0.(
FY 2023-24 Appropriation	\$14,084,018	\$6,771,386	\$127,140	\$0	\$7,185,492	0.0
R5 Office of Community Living	2,240,575	1,253,538	0	0	987,037	0.0
R6b Targeted provider rates	435,971	217,987	0	0	217,984	0.0
R6a Provider rates	376,854	186,912	1,515	0	188,427	0.0
Annualize prior year funding	119,933	131,243	(61,044)	0	49,734	0.0
TOTAL	\$17,257,351	\$8,561,066	\$67,611	\$0	\$8,628,674	0.0
INCREASE/(DECREASE)	\$3,173,333	\$1,789,680	(\$59,529)	\$0	\$1,443,182	0.0
Percentage Change	22.5%	26.4%	(46.8%)	0.0%	20.1%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$16,746,315	\$8,306,455	\$66,702	\$0	\$8,373,158	0.0
	<i>w10,740,010</i>	<i>\$0,000,100</i>	<i>400,102</i>	ψυ	<i>40,073,100</i>	0.

CASE MANAGEMENT SERVICES

This line item funds case management for utilizers of the Department's long term care programs. In FY 2023-24, to implement conflict free case management, the case management duties are transferring from 20 Community Centered Boards that serve people with intellectual and developmental disabilities and from 24 Single Entry Points that serve all other utilizers of long term care to 15 case management agencies.

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

REQUEST: The Department requests a caseload adjustment in R5, provider rate adjustments in R6a and R6b, BA8 Community-based access to services, and annualizations of prior year funding.

RECOMMENDATION

FY 2023-24: Staff recommends a supplemental increase of \$16.4 million total funds, including an increase of \$8.3 million General Fund, for enrollment and utilization trends identified in the Department's February 2024 forecast plus care and case management stabilization.

FY 2024-25: Staff recommends adjustments for enrollment and utilization trends identified in the Department's February 2024 forecast and the JBC's actions on provider rates to increase the common policy provider rate adjustment to 2.5 percent from 1.0 percent and to make the HCBS minimum wage adjustment \$1.00 statewide rather than the requested \$1.00 in Denver and \$0.80 outside of

Denver. The recommendation also includes annualizations of prior year funding, BA8 Communitybased access to services, care and case management stabilization.

OFFICE OF COMMUNITY LIVI DEVELOPMENTAL DISA	· · · · · · · · · · · · · · · · · · ·					
	TOTAL Funds	General Fund	CASH Funds	REAPPROPRIATED FUNDS	Federal Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$104,655,935	\$48,089,048	\$4,560,275	\$0	\$52,006,612	0.0
Long bill supplemental	\$16,429,558	\$8,286,545	\$0	\$0	\$8,143,013	0.0
TOTAL	\$121,085,493	\$56,375,593	\$4,560,275	\$0	\$60,149,625	0.0
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$121,085,493	\$56,375,593	\$4,560,275	\$ 0	\$60,149,625	0.0
R5 Office of Community Living	18,579,692	9,642,250	(14,209)	0	8,951,651	0.0
Care & case management stabilization	4,199,696	2,099,848	0	0	2,099,848	0.0
R6a Provider rates	3,161,225	1,560,538	34,992	0	1,565,695	0.0
R6b Targeted provider rates	0	0	0	0	0	0.0
Annualize prior year funding	(3,498,579)	2,078,342	(3,908,012)	0	(1,668,909)	0.0
BA8 Community-based access to services	(565,469)	(1,171,606)	888,871	0	(282,734)	0.0
TOTAL	\$142,962,058	\$70,584,965	\$1,561,917	\$0	\$70,815,176	0.0
INCREASE/(DECREASE)	\$21,876,565	\$14,209,372	(\$2,998,358)	\$0	\$10,665,551	0.0
Percentage Change	18.1%	25.2%	(65.7%)	0.0%	17.7%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$135,491,482	\$66,861,721	\$1,540,922	\$0	\$67,088,839	0.0
Request Above/(Below) Recommendation	(\$7,470,576)	(\$3,723,244)	(\$20,995)	\$ 0	(\$3,726,337)	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 a provider rate adjustment in R6a.

RECOMMENDATION: Staff recommends a provider rate adjustment based on the JBC's common policies.

DEVELOPMENTAL DISABI	LITIES, ST.	ATE SUPPO	DRTED]	LIVING SERVICI	ES	
	TOTAL	GENERAL	Cash	REAPPROPRIATED	Federal	
	Funds	Fund	Funds	Funds	Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$5,193,524	\$5,193,524	\$0	\$0	\$0	0.0
TOTAL	\$5,193,524	\$5,193,524	\$0	\$0	\$0	0.0
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$5,193,524	\$5,193,524	\$0	\$0	\$ 0	0.0
R6a Provider rates	119,018	119,018	0	0	0	0.0
TOTAL	\$5,312,542	\$5,312,542	\$0	\$0	\$0	0.0
INCREASE/(DECREASE)	\$119,018	\$119,018	\$0	\$0	\$0	0.0
Percentage Change	2.3%	2.3%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$5,241,131	\$5,241,131	\$0	\$0	\$0	0.0
Request Above/(Below) Recommendation	(\$71,411)	(\$71,411)	\$0	\$0	\$ 0	0.0

OFFICE OF COMMUNITY LIVING, DIVISION FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, STATE SUPPORTED LIVING SERVICES

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.

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

REQUEST: The Department requests a provider rate adjustment in R6a.

RECOMMENDATION: Staff recommends a provider rate adjustment based on the JBC's common policies.

OFFICE OF COMMUNITY LIVING	, DIVISION F	or Indivi	DUALS	WITH INTELLE	CTUAL AI	ND
DEVELOPMENTAL DISABILITIES, S	STATE SUPPO	RTED LIVI	ING SEF	RVICES CASE MA	ANAGEM	ENT
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$5,061,041	\$5,061,041	\$0	\$0	\$ 0	0.0
TOTAL	\$5,061,041	\$5,061,041	\$0	\$0	\$0	0.0
FY 2024-25 RECOMMENDED APPROPRIATIO	N					
FY 2023-24 Appropriation	\$5,061,041	\$5,061,041	\$ 0	\$0	\$ 0	0.0
R6a Provider rates	115,982	115,982	0	0	0	0.0
TOTAL	\$5,177,023	\$5,177,023	\$0	\$0	\$0	0.0
INCREASE/(DECREASE)	\$115,982	\$115,982	\$0	\$0	\$0	0.0
Percentage Change	2.3%	2.3%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$5,107,434	\$5,107,434	\$0	\$0	\$0	0.0
Request Above/(Below) Recommendation	(\$69,589)	(\$69,589)	\$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 a provider rate adjustment in R6a.

RECOMMENDATION: Staff recommends a provider rate adjustment based on the JBC's common policies.

DEVELOPMENTAL DISABILITIES, FAMILY SUPPORT SERVICES PROGRAM Total GENERAL CASH REAPPROPRIATED FEDERAL FUNDS FUNDS FUNDS FUNDS FUNDS FUNDS FY 2023-24 APPROPRIATION #11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 TOTAL \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2024-25 RECOMMENDED APPROPRIATION #11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 R6a Provider rates 253,203 253,203 0 0 \$0 TOTAL \$11,302,056 \$10 \$0 \$0 \$0 Percentage Change 2.3% 2.3% </th <th>OFFICE OF COMMUNITY LIVING, I</th> <th>DIVISION F</th> <th>or Indivie</th> <th>DUALS V</th> <th>VITH INTELLEC</th> <th>TUAL AN</th> <th>D</th>	OFFICE OF COMMUNITY LIVING, I	DIVISION F	or Indivie	DUALS V	VITH INTELLEC	TUAL AN	D
TOTAL FUNDS GENERAL FUNDS CASH FUNDS REAPPROPRIATED FUNDS FEDERAL FUNDS FY 2023-24 APPROPRIATION \$11,048,853 \$11,048,853 \$0 \$0 \$0 TOTAL \$11,048,853 \$11,048,853 \$0 \$0 \$0 TOTAL \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2024-25 RECOMMENDED APPROPRIATION F \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 Rea Provider rates 253,203 \$11,048,853 \$0 \$0 \$0 TOTAL \$11,302,056 \$11,302,056 \$0 \$0 \$0 Percentage Change 2.3% 2.3% 0.0%	DEVELOPMENTAL DISAB	ILITIES, FAN	MILY SUPPO	ORT SER	VICES PROGRA	М	
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FY 2024-25 RECOMMENDED APPROPRIATION FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 R6a Provider rates 253,203 253,203 0 0 0 0 TOTAL \$11,302,056 \$11,302,056 \$0 \$0 \$0 \$0 INCREASE/(DECREASE) Percentage Change 2.3% 2.3% 0.0% 0.0% 0.0% FY 2024-25 EXECUTIVE REQUEST	FY 2023-24 Appropriation	\$11,048,853	\$11,048,853	\$ 0	\$0	\$0	0.0
FY 2023-24 Appropriation \$11,048,853 \$11,048,853 \$0 \$0 \$0 R6a Provider rates 253,203 253,203 0 0 0 TOTAL \$11,302,056 \$11,302,056 \$0 \$0 \$0 INCREASE/(DECREASE) \$253,203 \$253,203 \$0 \$0 \$0 Percentage Change 2.3% 2.3% 0.0% 0.0% 0.0% FY 2024-25 EXECUTIVE REQUEST \$11,150,134 \$11,150,134 \$0 \$0 \$0	TOTAL	\$11,048,853	\$11,048,853	\$0	\$0	\$0	0.0
R6a Provider rates 253,203 253,203 0 0 0 TOTAL \$11,302,056 \$11,302,056 \$0 \$0 \$0 INCREASE/(DECREASE) \$253,203 \$253,203 \$0 \$0 \$0 Percentage Change 2.3% 2.3% 0.0% 0.0% 0.0% FY 2024-25 EXECUTIVE REQUEST \$11,150,134 \$11,150,134 \$0 \$0 \$0	FY 2024-25 RECOMMENDED APPROPRIATION						
TOTAL \$11,302,056 \$11,302,056 \$0 \$0 \$0 INCREASE/(DECREASE) \$253,203 \$253,203 \$0 \$0 \$0 Percentage Change 2.3% 2.3% 0.0% 0.0% 0.0% FY 2024-25 EXECUTIVE REQUEST \$11,150,134 \$11,150,134 \$0 \$0 \$0	FY 2023-24 Appropriation	\$11,048,853	\$11,048,853	\$0	\$0	\$0	0.0
INCREASE/(DECREASE) \$253,203 \$253,203 \$0 \$0 \$0 Percentage Change 2.3% 2.3% 0.0% 0.0% 0.0% FY 2024-25 EXECUTIVE REQUEST \$11,150,134 \$11,150,134 \$0 \$0 \$0	R6a Provider rates	253,203	253,203	0	0	0	0.0
Percentage Change 2.3% 2.3% 0.0% 0.0% 0.0% FY 2024-25 EXECUTIVE REQUEST \$11,150,134 \$11,150,134 \$0 \$0 \$0	TOTAL	\$11,302,056	\$11,302,056	\$0	\$0	\$0	0.0
FY 2024-25 EXECUTIVE REQUEST \$11,150,134 \$11,150,134 \$0 \$0 \$0	INCREASE/(DECREASE)	\$253,203	\$253,203	\$0	\$0	\$0	0.0
	Percentage Change	2.3%	2.3%	0.0%	0.0%	0.0%	0.0%
$P_{a} = (121) (2121) P_{a} = (121) (2121) $	FY 2024-25 EXECUTIVE REQUEST	\$11,150,134	\$11,150,134	\$0	\$0	\$0	0.0
Request Above/ (below) Recommendation $(\$151,922)$ $(\$151,922)$ $\$0$ $\$0$	Request Above/(Below) Recommendation	(\$151,922)	(\$151,922)	\$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 probono 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 a provider rate adjustment in R6a.

RECOMMENDATION: Staff recommends a provider rate adjustment based on the JBC's common policies.

OFFICE OF COMMUNITY LIVING, D	D IVISION F	OR INDIV	/IDUAL	S WITH INTELL	ECTUAL A	AND
DEVELOPMENTAL DISA	ABILITIES,	PREVENT	TIVE DE	ENTAL HYGIEN	Е	
	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FTE
FY 2023-24 APPROPRIATION						
FY 2023-24 Appropriation	\$69,823	\$69,823	\$ 0	\$0	\$0	0.0
TOTAL	\$69,823	\$69,823	\$0	\$0	\$0	0.0
FY 2024-25 RECOMMENDED APPROPRIATION	Ň					
FY 2023-24 Appropriation	\$69,823	\$69,823	\$ 0	\$0	\$0	0.0
R6a Provider rates	1,600	1,600	0	0	0	0.0
TOTAL	\$71,423	\$71,423	\$0	\$0	\$0	0.0
INCREASE/(DECREASE)	\$1,600	\$1,600	\$0	\$0	\$0	0.0
Percentage Change	2.3%	2.3%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST	\$70,463	\$70,463	\$0	\$0	\$0	0.0
Request Above/(Below) Recommendation	(\$960)	(\$960)	\$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 a provider rate adjustment in R6a.

RECOMMENDATION: Staff recommends a provider rate adjustment based on the JBC's common policies.

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

DISABILITIES, SUPPORTED EMPLOYMENT PROVIDER AND CERTIFICATION REIMBURSEMENT								
	TOTAL	General	Cash	Reappropriated	Federal			
	Funds	Fund	Funds	Funds	Funds	FTE		
FY 2023-24 APPROPRIATION								
FY 2023-24 Appropriation	\$303,158	\$303,158	\$ 0	\$0	\$0	0.0		
TOTAL	\$303,158	\$303,158	\$0	\$0	\$0	0.0		
FY 2024-25 RECOMMENDED APPROPRIATION								
FY 2023-24 Appropriation	\$303,158	\$303,158	\$0	\$0	\$ 0	0.0		
Annualize prior year funding	(303,158)	(303,158)	0	0	0	0.0		
TOTAL	\$0	\$0	\$0	\$0	\$0	0.0		
INCREASE/(DECREASE)	(\$303,158)	(\$303,158)	\$0	\$0	\$0	0.0		
Percentage Change	(100.0%)	(100.0%)	0.0%	0.0%	0.0%	0.0%		
FY 2024-25 EXECUTIVE REQUEST	\$0	\$0	\$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 **CONTINUING** the following footnote:

23 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.

<u>Comment:</u> This long standing footnote provides flexibility for the Department to move money between line items within the Office of Community Living.

30 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.

<u>Comment:</u> This footnote provides flexibility for the Department to move money between line items within the Office of Community Living. The Department is complying with the footnote.

31 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.

<u>Comment:</u> This footnote explains the purpose of the appropriation to provide special dental services for persons with intellectual and developmental disabilities. The Department is complying with the footnote.

Staff recommends **DISCONTINUING** the following footnote:

24 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 2024-25 state fiscal year.

<u>Comment:</u> This footnote provided one-time roll-forward authority for appropriations from the Home- and Community-Based Services Improvement Fund. The money must be spent by March 31, 2025, so no rollforward authority is needed into FY 2025-26.

25 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 2024-25 state fiscal year.

<u>Comment:</u> This footnote provided one-time roll-forward authority for appropriations from the Home- and Community-Based Services Improvement Fund. The money must be spent by March 31, 2025, so no rollforward authority is needed into FY 2025-26.

26 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 Communitybased Services Improvement Fund remain available for expenditure until the close of the 2024-25 state fiscal year.

<u>Comment:</u> This footnote provided one-time roll-forward authority for appropriations from the Home- and Community-Based Services Improvement Fund. The money must be spent by March 31, 2025, so no rollforward authority is needed into FY 2025-26.

27 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 2024-25 state fiscal year.

<u>Comment:</u> This footnote provided one-time roll-forward authority for appropriations from the Home- and Community-Based Services Improvement Fund. The money must be spent by March 31, 2025, so no rollforward authority is needed into FY 2025-26.

28 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 2024-25 state fiscal year.

<u>Comment:</u> This footnote provided one-time roll-forward authority for appropriations from the Home- and Community-Based Services Improvement Fund. The money must be spent by March 31, 2025, so no rollforward authority is needed into FY 2025-26.

29 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.

<u>Comment:</u> This footnote provided one-time roll-forward authority for a portion of the appropriation related to financial closeout activities for Case Management Agencies and Single Entry Points. The footnote is no longer needed in FY 2024-25.

REQUESTS FOR INFORMATION

Staff recommends **DISCONTINUING** The following requests for information:

6 Department of Health Care Policy and Financing, Office of Community Living -- The Department is requested to submit a report by November 1, 2023, detailing the progress on all outstanding issues with administration of the Case Management Redesign. The report should include a progress report on the number of CMAs who applied, and which ones were selected as part of the redesign, and a report on the populations served by each awarded contract. Finally, the report should include the Department's plans for enforcing a case management ratio of 65 clients per case manager, as well as any stakeholder feedback on the 65:1 ratio.

Comment: The Department submitted the one-time report as requested.

JBC Staff Figure Setting - FY 2024-25 Staff Working Document - Does Not Represent Committee Decision

Appendix A: Numbers Pages							
	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation		
DEPARTMENT OF HEALTH CARE POLIC Kim Bimestefer, Executive Director	CY AND FINANCIN	1G					
(4) OFFICE OF COMMUNITY LIVING							
(A) Division for Individuals with Intellectual an	nd Developmental Di	sabilities					
(i) Administrative Costs							
Personal Services	3,129,269	<u>3,254,836</u>	3,469,613	<u>3,469,613</u>	<u>3,469,613</u>		
FTE	29.1	33.7	39.5	39.5	39.5		
General Fund	1,307,493	1,643,703	1,858,480	1,858,480	1,858,480		
Cash Funds	210,643	0	0	0	0		
Reappropriated Funds	0	0	0	0	0		
Federal Funds	1,611,133	1,611,133	1,611,133	1,611,133	1,611,133		
Operating Expenses	72,072	<u>70,769</u>	431,510	<u>356,510</u>	<u>356,510</u>		
General Fund	36,038	35,384	239,636	202,136	202,136		
Cash Funds	0	0	0	0	0		
Reappropriated Funds	0	0	0	0	0		
Federal Funds	36,034	35,385	191,874	154,374	154,374		
Community and Contract Management System	<u>62,840</u>	<u>62,528</u>	<u>137,480</u>	<u>137,480</u>	<u>137,480</u>		
General Fund	31,420	31,264	89,362	89,362	89,362		
Cash Funds	0	0	0	0	0		
Reappropriated Funds	0	0	0	0	0		
Federal Funds	31,420	31,264	48,118	48,118	48,118		

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Support Level Administration	<u>51,404</u>	<u>59,317</u>	<u>58,350</u>	<u>58,350</u>	<u>58,350</u>
General Fund	25,702	29,403	28,920	28,920	28,920
Cash Funds	0	255	255	255	255
Reappropriated Funds	0	0	0	0	0
Federal Funds	25,702	29,659	29,175	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
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
SUBTOTAL - (i) Administrative Costs	3,315,585	3,447,450	4,096,953	4,021,953	4,021,953
FTE	<u>29.1</u>	<u>33.7</u>	<u>39.5</u>	<u>39.5</u>	<u>39.5</u>
General Fund	1,400,653	1,739,754	2,216,398	2,178,898	2,178,898
Cash Funds	210,643	255	255	255	255
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,704,289	1,707,441	1,880,300	1,842,800	1,842,800
Medicaid Programs					
Adult Comprehensive Waiver Services	<u>593,246,267 0.0</u>	660,264,798 0.0	736,088,915	840,396,437	<u>828,755,887</u> *
General Fund	188,425,770	274,738,522	358,489,338	418,837,312	412,980,657
Cash Funds	31,135,458	15,581,089	6,395,474	1,360,909	1,397,293
Reappropriated Funds	0	0	0	0	0
Federal Funds	373,685,039	369,945,187	371,204,103	420,198,216	414,377,937

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Adult Supported Living Waiver Services	<u>68,257,740</u>	76,193,493	88,754,081	<u>101,049,045</u>	<u>99,423,909</u> *
General Fund	19,279,569	25,140,173	35,140,782	42,200,264	41,274,282
Cash Funds	5,981,477	7,593,201	8,412,848	8,324,262	8,437,681
Reappropriated Funds	0	0	0	0	0
Federal Funds	42,996,694	43,460,119	45,200,451	50,524,519	49,711,946
Children's Extensive Support Services	<u>37,846,959</u>	<u>51,164,467</u>	76,250,227	72,882,421	<u>86,664,902</u> *
General Fund	13,413,358	22,227,459	36,519,749	35,615,090	42,495,076
Cash Funds	623,899	0	990,438	826,122	837,378
Reappropriated Funds	0	0	0	0	0
Federal Funds	23,809,702	28,937,008	38,740,040	36,441,209	43,332,448
Children's Habilitation Residential Program	<u>9,153,153</u>	<u>11,513,849</u>	14,084,018	16,746,315	<u>17,257,351</u> *
General Fund	3,335,090	5,074,425	6,771,386	8,306,455	8,561,066
Cash Funds	5,089	6,829	127,140	66,702	67,611
Reappropriated Funds	0	0	0	0	0
Federal Funds	5,812,974	6,432,595	7,185,492	8,373,158	8,628,674
Case Management for People with IDD	80,740,234	88,501,594	121,085,493	135,491,482	142,962,058 *
General Fund	36,766,240	40,634,931	56,375,593	66,861,721	70,584,965
Cash Funds	762,621	2,266,858	4,560,275	1,540,922	1,561,917
Reappropriated Funds	0	0	0	0	0
Federal Funds	43,211,373	45,599,805	60,149,625	67,088,839	70,815,176
SUBTOTAL - Medicaid Programs	789,244,353	887,638,201	1,036,262,734	1,166,565,700	1,175,064,107
FTE	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	261,220,027	367,815,510	493,296,848	571,820,842	575,896,046
Cash Funds	38,508,544	25,447,977	20,486,175	12,118,917	12,301,880
Reappropriated Funds	0	0	0	0	0
Federal Funds	489,515,782	494,374,714	522,479,711	582,625,941	586,866,181

JBC Staff Figure Setting - FY 2024-25 Staff Working Document - Does Not Represent Committee Decision

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
State-only Programs					
Family Support Services Program	9,818,346	10,311,298	<u>11,048,853</u>	<u>11,150,134</u>	<u>11,302,056</u> *
General Fund	9,373,496	10,311,298	11,048,853	11,150,134	11,302,056
Cash Funds	444,850	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
State Supported Living Services	<u>4,898,139</u>	4,724,417	<u>5,193,524</u>	<u>5,241,131</u>	<u>5,312,542</u> *
General Fund	4,898,139	4,724,417	5,193,524	5,241,131	5,312,542
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
State Supported Living Services Case Management	<u>4,494,161</u>	4,682,356	<u>5,061,041</u>	<u>5,107,434</u>	<u>5,177,023</u> *
General Fund	4,494,161	4,682,356	5,061,041	5,107,434	5,177,023
Cash Funds	0	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>69,823</u>	70,463	71,423 *
General Fund	64,894	64,894	69,823	70,463	71,423
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Supported Employment Provider and Certification					
Reimbursement	<u>148,800</u>	<u>148,800</u>	<u>303,158</u>	<u>0</u>	<u>0</u>
General Fund	148,800	148,800	303,158	0	0
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	415,969	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	415,969	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
SUBTOTAL - State-only Programs	19,840,309	19,931,765	21,676,399	21,569,162	21,863,044
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	19,395,459	19,931,765	21,676,399	21,569,162	21,863,044
Cash Funds	444,850	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
TOTAL - (4) Office of Community Living	812,400,247	911,017,416	1,062,036,086	1,192,156,815	1,200,949,104
FTE	29.1	33.7	<u>39.5</u>	<u>39.5</u>	<u>39.5</u>
General Fund	282,016,139	389,487,029	517,189,645	595,568,902	599,937,988
Cash Funds	39,164,037	25,448,232	20,486,430	12,119,172	12,302,135
Reappropriated Funds	0	0	0	0	0
Federal Funds	491,220,071	496,082,155	524,360,011	584,468,741	588,708,981
TOTAL - Department of Health Care Policy and					
Financing	812,400,247	911,017,416	1,062,036,086	1,192,156,815	1,200,949,104
FTE	<u>29.1</u>	<u>33.7</u>	<u>39.5</u>	<u>39.5</u>	<u>39.5</u>
General Fund	282,016,139	389,487,029	517,189,645	595,568,902	599,937,988
Cash Funds	39,164,037	25,448,232	20,486,430	12,119,172	12,302,135
Reappropriated Funds	0	0	0	0	0
Federal Funds	491,220,071	496,082,155	524,360,011	584,468,741	588,708,981