

Second Regular Session  
Seventy-fifth General Assembly  
STATE OF COLORADO

INTRODUCED

LLS NO. 26-0825.01 Chelsea Princell x4335

HOUSE BILL 26-1411

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HOUSE SPONSORSHIP

**Brown and Taggart**, Sirota

SENATE SPONSORSHIP

**Amabile and Kirkmeyer**, Bridges

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**House Committees**  
Appropriations

**Senate Committees**

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A BILL FOR AN ACT

101 CONCERNING CHANGES TO HEALTH INSURANCE BENEFITS FOR CERTAIN  
102 LOW-INCOME INDIVIDUALS WHO ARE NOT ELIGIBLE FOR  
103 MEDICAL ASSISTANCE DUE TO THEIR IMMIGRATION STATUS,  
104 AND, IN CONNECTION THEREWITH, MAKING AND REDUCING AN  
105 APPROPRIATION.

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov/>.)*

**Joint Budget Committee.** The bill limits the benefits pregnant women and children with a certain family household income and citizen

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
Capital letters or bold & italic numbers indicate new material to be added to existing law.  
Dashes through the words or numbers indicate deletions from existing law.

or immigration status are eligible for under the state medical assistance program and the medical assistance program.

Eligible pregnant women and children are subject to the following limitations on benefits:

- Beginning July 1, 2026, there is an annual cap on dental services in the amount of \$750;
- Beginning January 1, 2027, behavioral health services offered must be provided on a fee-for-service basis only;
- Beginning January 1, 2027, services offered through the accountable care collaborative are no longer covered; and
- Beginning January 1, 2027, managed care services through the medical assistance program are no longer covered.

Beginning January 1, 2027, children under 19 years old whose family household income does not exceed 260% of the federal poverty line, adjusted for family size, and who are not eligible for the medical assistance program due to their immigration status, are not eligible for home- and community-based services, community first choice, long-term home health, private duty nursing, hospice care, and nursing home care unless those children already receive those services on or before December 31, 2026.

For the 2026-27 state fiscal year, the bill caps enrollment of children in the state medical assistance program at 25,000 children if certain conditions are met.

The bill repeals provisions requiring the department of health care policy and financing to develop an outreach and enrollment strategy for enrolling eligible groups into new coverage options.

The bill repeals the state children's basic health plan.

The bill makes and reduces an appropriation to the department of health care policy and financing.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2           **SECTION 1.** In Colorado Revised Statutes, 25.5-2-104, **amend**  
3 (1); and **add** (3.5) as follows:

4           **25.5-2-104. State-funded health and medical care - rules.**

5           (1) (a) ~~Beginning no later than January 1, 2025,~~ There is created  
6 the state medical assistance program, referred to in this section as "state  
7 medical assistance". SUBJECT TO THE LIMITATIONS DETAILED IN  
8 SUBSECTION (1)(b) OF THIS SECTION, state medical assistance includes all

1 benefits and services at the same cost to the beneficiary as ~~are~~ BENEFITS  
2 AND SERVICES offered pursuant to the medical assistance program,  
3 defined in section 25.5-4-103 (13), such that, to the maximum extent  
4 possible, AN eligible ~~individuals must not be~~ INDIVIDUAL IS NOT able to  
5 tell that ~~the person is~~ THEY ARE enrolled in a different program from  
6 medical assistance, ~~pursuant to~~ AS DEFINED IN section 25.5-4-103 (13).

7 (b) PREGNANT WOMEN WHO ARE NOT ELIGIBLE FOR THE MEDICAL  
8 ASSISTANCE PROGRAM SOLELY DUE TO THEIR IMMIGRATION STATUS AND  
9 CHILDREN UNDER NINETEEN YEARS OLD WHOSE FAMILY HOUSEHOLD  
10 INCOME DOES NOT EXCEED TWO HUNDRED SIXTY PERCENT OF THE  
11 FEDERAL POVERTY LINE, ADJUSTED FOR FAMILY SIZE, AND WHO DO NOT  
12 MEET THE IMMIGRATION REQUIREMENTS FOR ELIGIBILITY ARE SUBJECT TO  
13 THE FOLLOWING LIMITATIONS ON BENEFITS:

14 (I) BEGINNING JULY 1, 2026, THEY ARE SUBJECT TO AN ANNUAL  
15 CAP ON DENTAL SERVICES IN THE AMOUNT OF SEVEN HUNDRED FIFTY  
16 DOLLARS;

17 (II) BEGINNING JANUARY 1, 2027, THEY MUST BE OFFERED  
18 BEHAVIORAL HEALTH SERVICES ON A FEE-FOR-SERVICE BASIS ONLY;

19 (III) BEGINNING JANUARY 1, 2027, THEY ARE NOT ELIGIBLE FOR  
20 SERVICES OFFERED THROUGH THE ACCOUNTABLE CARE COLLABORATIVE  
21 PURSUANT TO SECTION 25.5-5-419; AND

22 (IV) BEGINNING JANUARY 1, 2027, THEY SHALL NOT RECEIVE  
23 MANAGED CARE SERVICES PURSUANT TO PART 4 OF ARTICLE 5 OF THIS  
24 TITLE 25.5.

25 (c) BEGINNING JANUARY 1, 2027, CHILDREN UNDER NINETEEN  
26 YEARS OLD WHOSE FAMILY HOUSEHOLD INCOME DOES NOT EXCEED TWO  
27 HUNDRED SIXTY PERCENT OF THE FEDERAL POVERTY LINE, ADJUSTED FOR

1 FAMILY SIZE, AND WHO ARE NOT ELIGIBLE FOR THE MEDICAL ASSISTANCE  
2 PROGRAM DUE TO THEIR IMMIGRATION STATUS, SHALL NOT RECEIVE,  
3 PURSUANT TO THE STATE MEDICAL ASSISTANCE PROGRAM CREATED IN  
4 THIS SECTION, LONG-TERM SERVICES AND SUPPORTS DESCRIBED IN  
5 SECTION 25.5-5-102 (1)(e); SECTION 25.5-5-202 (1)(c), (1)(n), AND (1)(p);  
6 HOME HEALTH SERVICES DESCRIBED IN SECTION 25.5-5-102 (1)(f) FOR  
7 MEMBERS WHO REQUIRE ONGOING HOME HEALTH SERVICES FOLLOWING  
8 SIXTY DAYS OF ACUTE HOME HEALTH SERVICES; AND SERVICES DESCRIBED  
9 IN PART 19 OF ARTICLE 6 OF THIS TITLE 25.5 UNLESS THEY ALREADY  
10 RECEIVE THESE SERVICES ON OR BEFORE DECEMBER 31, 2026.

11 (3.5) (a) FOR THE 2026-27 STATE FISCAL YEAR, ENROLLMENT IN  
12 STATE MEDICAL ASSISTANCE OF CHILDREN UNDER NINETEEN YEARS OLD  
13 WHOSE FAMILY HOUSEHOLD INCOME DOES NOT EXCEED TWO HUNDRED  
14 SIXTY PERCENT OF THE FEDERAL POVERTY LINE, ADJUSTED FOR FAMILY  
15 SIZE, AND WHO ARE NOT ELIGIBLE FOR THE MEDICAL ASSISTANCE  
16 PROGRAM DUE TO THEIR IMMIGRATION STATUS, IS SUBJECT TO AN  
17 ENROLLMENT CAP OF TWENTY-FIVE THOUSAND IF ONE OF THE FOLLOWING  
18 CONDITIONS IS MET:

19 (I) ENROLLMENT OF THE CHILDREN DESCRIBED IN THIS SUBSECTION  
20 (3.5)(a) IN STATE MEDICAL ASSISTANCE EXCEEDS TWENTY-FIVE THOUSAND  
21 CHILDREN; OR

22 (II) EXPENDITURES FOR A FISCAL QUARTER OF THE 2026-27 STATE  
23 FISCAL YEAR EXCEED ONE QUARTER OF THE APPROPRIATION FOR STATE  
24 MEDICAL ASSISTANCE PLUS FIVE PERCENT TO ACCOUNT FOR COST  
25 FLUCTUATIONS DUE TO SEASONALITY.

26 (b) IF A CONDITION DETAILED IN SUBSECTION (3.5)(a) OF THIS  
27 SECTION IS MET, THE STATE DEPARTMENT MUST CAP THE ENROLLMENT OF

1 THE CHILDREN DESCRIBED IN SUBSECTION (3.5)(a) OF THIS SECTION AT  
2 TWENTY-FIVE THOUSAND CHILDREN BEGINNING ON THE FIRST DAY OF THE  
3 MONTH FOLLOWING SIXTY DAYS AFTER THE STATE DEPARTMENT  
4 DETERMINES THAT A CONDITION DETAILED IN SUBSECTION (3.5)(a) OF THIS  
5 SECTION IS MET.

6 (c) THE STATE DEPARTMENT SHALL ADOPT RULES NECESSARY TO  
7 IMPLEMENT THE ENROLLMENT CAP DETAILED IN THIS SUBSECTION (3.5).

8 (d) ON OR BEFORE NOVEMBER 1, 2026, THE STATE DEPARTMENT  
9 SHALL SUBMIT A REPORT TO THE JOINT BUDGET COMMITTEE DETAILING  
10 WHAT IS DRIVING ENROLLMENT AND UTILIZATION OF STATE MEDICAL  
11 ASSISTANCE BY CHILDREN WHO ARE UNDER NINETEEN YEARS OLD WHOSE  
12 FAMILY HOUSEHOLD INCOME DOES NOT EXCEED TWO HUNDRED SIXTY  
13 PERCENT OF THE FEDERAL POVERTY LINE, ADJUSTED FOR FAMILY SIZE, AND  
14 WHO ARE NOT ELIGIBLE FOR THE MEDICAL ASSISTANCE PROGRAM DUE TO  
15 THEIR IMMIGRATION STATUS. THE REPORT MUST INCLUDE STRATEGIES FOR  
16 REDUCING COSTS ASSOCIATED WITH ENROLLING THESE CHILDREN IN STATE  
17 MEDICAL ASSISTANCE.

18 **SECTION 2.** In Colorado Revised Statutes, 25.5-5-201, **amend**  
19 (6)(a) and (6)(b) as follows:

20 **25.5-5-201. Optional provisions - optional groups - rules.**

21 (6) (a) ~~Beginning no later than January 1, 2025,~~ A pregnant person  
22 who is not a citizen and who is not eligible for medical assistance  
23 pursuant to subsection (4) of this section is eligible to receive medical  
24 assistance pursuant to this subsection (6)(a), SUBJECT TO THE LIMITATIONS  
25 DETAILED IN SECTION 25.5-2-104 (1)(b), if the individual meets the  
26 eligibility requirements other than those related to citizenship and  
27 immigration status.

1 (b) A pregnant person who is eligible for medical assistance  
2 pursuant to this subsection (6) remains continuously eligible for all  
3 medical services pursuant to the medical assistance program, SUBJECT TO  
4 THE LIMITATIONS DETAILED IN SECTION 25.5-2-104 (1)(b), for the  
5 twelve-month postpartum period, so long as eligibility remains in effect  
6 pursuant to subsection (4.5)(a) of this section.

7 **SECTION 3.** In Colorado Revised Statutes, 25.5-8-107, **repeal**  
8 (1)(i) as follows:

9 **25.5-8-107. Duties of the department - schedule of services -**  
10 **premiums - copayments - subsidies - purchase of childhood**  
11 **immunizations.**

12 (1) In addition to any other duties pursuant to this article 8, the  
13 department has the following duties:

14 (i) ~~(F) The department shall develop and implement an outreach~~  
15 ~~strategy for Coloradans who become eligible for health coverage pursuant~~  
16 ~~to section 25.5-2-104, 25.5-2-105, 25.5-5-201 (6), or 25.5-8-109 (7). The~~  
17 ~~state department shall work with stakeholders to develop an outreach~~  
18 ~~strategy that includes:~~

19 ~~(A) Funding for community-based organizations to partner with~~  
20 ~~the department on outreach;~~

21 ~~(B) A method for providing information related to eligibility and~~  
22 ~~enrollment that can be provided to nonprofit partners, school districts, and~~  
23 ~~charter schools for outreach purposes; and~~

24 ~~(C) At a minimum, providing information related to eligibility and~~  
25 ~~coverage in English, Spanish, and in each language spoken by at least~~  
26 ~~two-and-one-half percent of the population of any county who speak~~  
27 ~~English less than very well, as defined by the United States bureau of the~~

1 ~~census American community survey, and who speak the minority~~  
2 ~~language at home;~~

3 ~~(H) Approximately twelve and twenty-four months after~~  
4 ~~implementation of the strategy required pursuant to subsection (1)(i)(I) of~~  
5 ~~this section, the department shall convene stakeholders, including directly~~  
6 ~~impacted individuals, service providers, and advocacy organizations that~~  
7 ~~are diverse with regard to race, ethnicity, immigration status, sexual~~  
8 ~~orientation, and gender identity and who are affected by higher rates of~~  
9 ~~health disparities and inequities. The department shall report on the~~  
10 ~~outreach and enrollment strategy outcomes, including enrollment of~~  
11 ~~eligible persons into these programs compared to those persons who are~~  
12 ~~eligible for coverage, but not enrolled.~~

13 **SECTION 4.** In Colorado Revised Statutes, **repeal** 25.5-2-105.

14 **SECTION 5.** In Colorado Revised Statutes, 24-75-109, **repeal**  
15 (1)(a.8) as follows:

16 **24-75-109. Controller may allow expenditures in excess of**  
17 **appropriations - limitations - appropriations for subsequent fiscal**  
18 **year restricted - repeal.**

19 (1) For the purpose of closing the state's books, and subject to the  
20 provisions of this section, the controller may, on or after May 1 of any  
21 fiscal year and before the forty-fifth day after the close thereof, upon  
22 approval of the governor, allow any department, institution, or agency of  
23 the state, including any institution of higher education, to make an  
24 expenditure in excess of the amount authorized by an item of  
25 appropriation for such fiscal year if:

26 (a.8) ~~The overexpenditure is by the department of health care~~  
27 ~~policy and financing for the state children's basic health plan, established~~

1 pursuant to ~~section 25.5-2-105~~; or

2 **SECTION 6.** In Colorado Revised Statutes, 25.5-4-201, **amend**  
3 (1) as follows:

4 **25.5-4-201. Cash system of accounting - financial**  
5 **administration of medical services premiums - medical programs**  
6 **administered by department of human services - federal**  
7 **contributions - rules.**

8 (1) The state department shall utilize the cash system of  
9 accounting, as enunciated by the governmental accounting standards  
10 board, regardless of the source of revenues involved, for all activities of  
11 the state department relating to the financial administration of any  
12 nonadministrative expenditure that qualifies for federal financial  
13 participation under Title XIX of the federal "Social Security Act", and for  
14 the administration of the state-funded health and medical care program,  
15 created pursuant to section 25.5-2-104, ~~and for the state children's basic~~  
16 ~~health plan, created pursuant to section 25.5-2-105~~, except for  
17 expenditures under the program for the medically indigent, article 3 of  
18 this title 25.5.

19 **SECTION 7.** In Colorado Revised Statutes, 25.5-5-335, **amend**  
20 (2)(a), (2)(b), and (7)(b) as follows:

21 **25.5-5-335. Continuous medical coverage for children and**  
22 **adults feasibility study - federal authorization - rules - report -**  
23 **definition.**

24 (2) At a minimum, the feasibility study must consider the costs;  
25 implementation factors, including county workload, training, and  
26 administrative burdens on the counties, information technology systems,  
27 upgrades, and associated costs; potential health benefits for individuals

1 and communities, including disadvantaged and marginalized groups;  
2 impacts of increased use of preventive and high-value health services;  
3 administrative savings, including, but not limited to, reducing or  
4 eliminating eligibility processing for populations during the continuous  
5 eligibility period; reductions in administrative turnover and coverage loss;  
6 and, to the extent practicable, social and economic impacts with respect  
7 to the following:

8 (a) Allowing an eligible child, as defined in this article 5 and  
9 articles 2, 3, 6, and 8 of this title 25.5, including children eligible under  
10 ~~sections 25.5-2-104 and 25.5-2-105~~ SECTION 25.5-2-104, to remain  
11 continuously eligible for medical assistance ~~and the children's basic~~  
12 ~~health plan~~ for twenty-four months after the last day of the month in  
13 which the child was enrolled;

14 (b) Allowing an eligible child, as defined in this article 5 and  
15 articles 2, 3, 6, and 8 of this title 25.5, including children eligible under  
16 ~~sections 25.5-2-104 and 25.5-2-105~~ SECTION 25.5-2-104 who are less than  
17 six years ~~of age~~ OLD, to remain continuously eligible for medical  
18 assistance ~~or the children's basic health plan~~ without regard to a change  
19 in household income until the child reaches six years ~~of age~~ OLD;

20 (7) (b) For purposes of seeking federal authorization pursuant to  
21 subsection (7)(a) of this section, an eligible child is as defined in this  
22 article 5 and articles 2, 3, 6, and 8 of this title 25.5, including a child  
23 eligible pursuant to ~~sections 25.5-2-104 and 25.5-2-105~~ SECTION  
24 25.5-2-104, and must be under three years ~~of age~~ OLD. An eligible child  
25 ~~shall remain~~ REMAINS continuously eligible without regard to household  
26 income until the eligible child reaches three years ~~of age~~ OLD; except that  
27 a child is no longer eligible and must be disenrolled from a medical

1 assistance program if the state department becomes aware that the child  
2 has moved out of the state, the state department or county possesses facts  
3 indicating that the family has requested the child's voluntary  
4 disenrollment, the state department determines eligibility was erroneously  
5 granted, or the child is deceased.

6 **SECTION 8. Appropriation - adjustments to 2026 long bill.**

7 (1) For the 2026-27 state fiscal year, \$3,378,166 is appropriated to the  
8 department of health care policy and financing. This appropriation is from  
9 the general fund. To implement this act, the department may use this  
10 appropriation as follows:

11 (a) \$2,286,549 for Medicaid management information system  
12 maintenance and projects;

13 (b) \$1,017,700 for Colorado benefits management systems,  
14 operating and contract expenses; and

15 (c) \$73,917 for behavioral health fee-for-service payments, which  
16 amount is subject to the "(M)" notation as defined in the annual general  
17 appropriation act for the same fiscal year.

18 (2) For the 2026-27 state fiscal year, the general assembly  
19 anticipates that the department of health care policy and financing will  
20 receive \$137,274 in federal funds for behavioral health fee-for-service  
21 payments to implement this act. The appropriation in subsection (1)(c) of  
22 this section is based on the assumption that the department will receive  
23 this amount of federal funds.

24 (3) Except as provided in subsection (5) of this section, to  
25 implement this act, general fund appropriations made in the annual  
26 general appropriation act for the 2026-27 state fiscal year to the  
27 department of health care policy and financing are decreased as follows:

1 (a) \$262,500 for general professional services and special  
2 projects;

3 (b) \$271,951 for medical and long-term care services for  
4 Medicaid-eligible individuals, which amount is subject to the "(M)"  
5 notation as defined in the annual general appropriation act for the same  
6 fiscal year;

7 (c) \$753,747 for behavioral health capitation payments, which  
8 amount is subject to the "(M)" notation as defined in the annual general  
9 appropriation act for the same fiscal year; and

10 (d) \$15,006,358 for health benefits for children lacking access  
11 due to immigration status.

12 (4) The decrease of the appropriations in subsection (3) of this  
13 section is based on the assumption that the anticipated amount of federal  
14 funds received for the 2026-27 state fiscal year by the department of  
15 health care policy and financing will decrease as follows:

16 (a) \$487,500 for general professional services and special  
17 projects, which is subject to the "(I)" notation as defined in the annual  
18 general appropriation act for the same fiscal year;

19 (b) \$505,052 for medical and long-term care services for  
20 Medicaid-eligible individuals; and

21 (c) \$1,399,814 for behavioral health capitation payments.

22 (5) Subsection (3) of this section does not require a reduction of  
23 an appropriation in the annual general appropriation act for the 2026-27  
24 state fiscal year if either:

25 (a) The amount of the general fund appropriation made in the  
26 annual general appropriation act for the 2026-27 state fiscal year to the  
27 department of health care policy and financing is less than the amount of

1 the adjustments required in subsection (3) of this section for:

2 (I) General professional services and special projects;

3 (II) Medical and long-term care services for Medicaid-eligible  
4 individuals;

5 (III) Behavioral health capitation payments; or

6 (IV) Health benefits for children lacking access due to  
7 immigration status; or

8 (b) The annual general appropriation act for the 2026-27 state  
9 fiscal year does not include an appropriation to the department of health  
10 care policy and financing for:

11 (I) General professional services and special projects;

12 (II) Medical and long-term care services for Medicaid-eligible  
13 individuals;

14 (III) Behavioral health capitation payments; or

15 (IV) Health benefits for children lacking access due to  
16 immigration status.

17 **SECTION 9. Appropriation - adjustments to 2026 long bill.**

18 (1) Except as provided in subsection (3) of this section, to implement this  
19 act, the cash funds appropriation from the adult dental fund created in  
20 section 25.5-5-207 (4)(a), C.R.S., made in the annual general  
21 appropriation act for the 2026-27 state fiscal year to the department of  
22 health care policy and financing for medical and long-term care services  
23 for Medicaid-eligible individuals is decreased by \$396,038

24 (2) The decrease of the appropriations in subsection (1) of this  
25 section is based on the assumption that the anticipated amount of federal  
26 funds received for the 2026-27 state fiscal year by the department of  
27 health care policy and financing for medical and long-term care services

1 for Medicaid-eligible individuals will decrease by \$735,499.

2 (3) Subsection (1) of this section does not require a reduction of  
3 an appropriation in the annual general appropriation act for the 2026-27  
4 state fiscal year if either:

5 (a) The amount of the cash funds appropriation from the adult  
6 dental fund created in section 25.5-5-207 (4)(a), C.R.S., made in the  
7 annual general appropriation act for the 2026-27 state fiscal year to the  
8 department of health care policy and financing for medical and long-term  
9 care services for Medicaid-eligible individuals is less than the amount of  
10 the adjustment required in subsection (1) of this section; or

11 (b) The annual general appropriation act for the 2026-27 state  
12 fiscal year does not include an appropriation to the department of health  
13 care policy and financing for medical and long-term care services for  
14 Medicaid-eligible individuals.

15 **SECTION 10. Appropriation - adjustments to 2026 long bill.**

16 (1) Except as provided in subsection (3) of this section, to implement this  
17 act, the general fund appropriation made in the annual general  
18 appropriation act for the 2026-27 state fiscal year to the department of  
19 health care policy and financing for medical and long-term care services  
20 for Medicaid-eligible individuals is decreased by \$396,038, which  
21 amount is subject to the "(M)" notation as defined in the annual general  
22 appropriation act for the same fiscal year.

23 (2) The decrease of the appropriations in subsection (1) of this  
24 section is based on the assumption that the anticipated amount of federal  
25 funds received for the 2026-27 state fiscal year by the department of  
26 health care policy and financing for medical and long-term care services  
27 for Medicaid-eligible individuals will decrease by \$735,499.

1           (3) Subsection (1) of this section does not require a reduction of  
2           an appropriation in the annual general appropriation act for the 2026-27  
3           state fiscal year if either:

4           (a) The amount of the general fund appropriation made in the  
5           annual general appropriation act for the 2026-27 state fiscal year to the  
6           department of health care policy and financing for medical and long-term  
7           care services for Medicaid-eligible individuals is less than the amount of  
8           the adjustment required in subsection (1) of this section; or

9           (b) The annual general appropriation act for the 2026-27 state  
10          fiscal year does not include an appropriation to the department of health  
11          care policy and financing for medical and long-term care services for  
12          Medicaid-eligible individuals.

APPROPRIATION FROM

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ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS
\$	\$	\$	\$	\$	\$	\$

1           **SECTION 11. Appropriation to the department of health care policy and financing for the fiscal year beginning July 1, 2025.** In Session Laws of Colorado 2025, section  
 2 of chapter 476, (SB 25-206), **amend** Part VI (1)(A) and the affected totals as Part VI is amended by section 5 of chapter 150, (SB 25-228), and section 17 of chapter 151, (SB 25-270),  
 3 and as Part VI (1)(A) and the affected totals are further amended by section 1 of HB 26-1155 as follows:

4           Section 2. **Appropriation.**

**PART VI**

**DEPARTMENT OF HEALTH CARE POLICY AND FINANCING**

8           **(1) EXECUTIVE DIRECTOR'S OFFICE**

9           **(A) General Administration**

10   Personal Services	76,144,403					
	(795.8 FTE)					
12   Health, Life, and Dental	13,063,358					
13   Short-term Disability	51,631					
14   Paid Family and Medical						
15   Leave Insurance	378,612					

APPROPRIATION FROM

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	ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS
	\$	\$	\$	\$	\$	\$	\$
1	Unfunded Liability						
2	Amortization Equalization						
3	Disbursement Payments	7,939,888					
4	Salary Survey	2,299,634					
5	Step Pay	151,359					
6	PERA Direct Distribution	1,638,429					
7	Workers' Compensation	230,107					
8	Operating Expenses	3,400,301					
9	Legal Services	2,824,915					
10	Administrative Law Judge						
11	Services	2,636,344					
12	Payment to Risk						
13	Management and Property						
14	Funds	280,008					
15	Leased Space	3,712,918					

APPROPRIATION FROM

	ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS
	\$	\$	\$	\$	\$	\$	\$
1	Payments to OIT	15,566,219					
2	CORE Operations	35,879					
3	General Professional						
4	Services and Special						
5	Projects	47,899,410					
6		47,524,410					
7		<del>178,253,415</del>	69,183,269		14,104,503 <sup>a</sup>	3,852,606 <sup>b</sup>	<del>91,113,037(I)</del>
8		177,878,415	69,052,019				90,869,287(I)
9							

10 <sup>a</sup> Of this amount, \$12,618,763 shall be from the Healthcare Affordability and Sustainability Fee Cash Fund created in Section 25.5-4-402.4 (5)(a), C.R.S., \$399,810 shall be from the  
11 Healthcare Affordability and Sustainability Nursing Facility Provider Fee Cash Fund created in Section 25.5-4-402.4 (5.5)(a), C.R.S., \$361,397 shall be from the Children's Basic Health  
12 Plan Trust created in Section 25.5-8-105 (1), C.R.S., \$278,999 shall be from the Adult Dental Fund created in Section 25.5-5-207 (4)(a), C.R.S., \$204,488 shall be from the Primary  
13 Care Fund created in Section 24-22-117 (2)(b)(I), C.R.S., \$131,531 shall be from the Nursing Home Penalty Cash Fund created in Section 25.5-6-205 (3)(a), C.R.S., \$59,140 shall be  
14 from the Healthcare Affordability and Sustainability Intermediate Care Facility Fee Cash Fund created in Section 25.5-4-402.4 (5.7)(a), C.R.S., and \$50,375 shall be from the Breast  
15 and Cervical Cancer Prevention and Treatment Fund created in Section 25.5-5-308 (8)(a)(I), C.R.S.

APPROPRIATION FROM

ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS
\$	\$	\$	\$	\$	\$	\$

1 <sup>b</sup> Of this amount, \$1,374,082 shall be transferred from the Department of Human Services from the Health Care and Economic Security Staff Development Center line item appropriation,  
 2 \$881,600 shall be from statewide indirect cost recoveries, \$839,181 shall be transferred from the Colorado Benefits Management System, Health Care and Economic Security Staff  
 3 Development Center line item appropriation in this department, \$577,832 shall be transferred from the Department of Higher Education from the Fee-for-service Contracts with State  
 4 Institutions for Speciality Education Programs line item, \$95,773 shall be from the Department of Personnel and Administration, \$57,678 shall be from the Department of Early Childhood,  
 5 and \$26,460 shall be from the Department of Public Health and Environment from the Women, Infants, and Children Supplemental Food Grant line item.

6 **TOTALS PART VI**

7 **(HEALTH CARE**

8 **POLICY AND**

9 **FINANCING)<sup>25</sup>**

	\$18,980,783,085	\$4,381,549,873	\$1,293,261,386 <sup>a</sup>	\$2,168,909,052 <sup>b</sup>	\$160,576,367	\$10,976,486,407 <sup>c</sup>
	\$18,980,408,085	\$4,381,418,623				\$10,976,242,657 <sup>c</sup>
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

12 <sup>a</sup> Of this amount, \$1,292,968,309 shall be from the General Fund Exempt Account created in Section 24-77-103.6 (2), C.R.S., and \$293,077 shall be General Fund Exempt pursuant to  
 13 Section 24-22-117 (1)(c)(I)(B.5), C.R.S. Said \$293,077 is not subject to the statutory limitation on General Fund appropriations imposed by Section 24-75-201.1, C.R.S.

14 <sup>b</sup> Of this amount, \$22,134,496 contains an (I) notation.

15 <sup>c</sup> Of this amount, ~~\$422,806,064~~ \$422,562,314 contains an (I) notation.

16

1           **SECTION 12. Effective date.** This act takes effect upon passage;  
2           except that section 8 of this act takes effect only if the annual general  
3           appropriation act for the 2026-27 state fiscal year becomes law, in which  
4           case section 8 takes effect upon the effective date of this act or of the  
5           annual general appropriation act for state fiscal year 2026-27, whichever  
6           is later; section 9 of this act takes effect only if House Bill 26-1401 does  
7           not become law, in which case section 9 takes effect upon the effective  
8           date of this act; and section 10 of this act takes effect only if House Bill  
9           26-1401 becomes law, in which case section 10 takes effect upon the  
10          effective date of this act or of House Bill 26-1401, whichever is later.

11          **SECTION 13. Safety clause.** The general assembly finds,  
12          determines, and declares that this act is necessary for the immediate  
13          preservation of the public peace, health, or safety or for appropriations for  
14          the support and maintenance of the departments of the state and state  
15          institutions.