# Joint Budget Committee



# Supplemental Budget Requests FY 2024-25

### **Department of Human Services**

(Executive Director's Office, Administration & Finance, Office of Civil and Forensic Mental Health, Behavioral Health Administration)

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

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### **Overview of Department**

The Department of Human Services is responsible for the administration and supervision of all non-medical public assistance and welfare programs in the state. This document includes discussion of the Executive Director's Office, Administration and Finance, and the Office of Children, Youth and Families.

**Executive Director's Office (EDO):** Manages and administers the Department, including budgeting, human resources, and quality control. The division's budget primarily consists of compensation items for all the Department's employees, but also includes the Office of the Ombudsman for Behavioral Health Access to Care.

Administration and Finance: Supports Department-wide accounting, facility management, capital construction, vehicle leases, and information technology. The division operates 330 buildings over 3.7 million gross square feet of space. IT functions support the major centralized computer systems that link human services programs in all 64 counties across the state.

**Behavioral Health Administration:** Responsible for the oversight of the state's public behavioral health system. Funding primarily supports community-based prevention, treatment, and recovery safety net services for people with mental health and substance use disorders who are uninsured or under-insured.

**Office of Civil and Forensic Mental Health:** Operates two state mental health hospitals that serve civil and forensic patients in Pueblo and the Fort Logan campus in Denver, as well as mental health transitional living homes and additional forensic services in courts, community, and jail-based settings.

**Civil** patients are voluntarily or involuntarily committed to the department's care at the state hospitals by a civil court.

**Forensic** patients include individuals with mental health conditions or developmental disabilities that may prevent them from assisting in their own defense during criminal proceedings, referred to as "competency." The Department conducts court-ordered competency evaluations and restoration services that may occur in the community, jails, or inpatient hospitals. Forensic patients also include individuals found not guilty by reason of insanity (NGRI).

# Summary of Staff Recommendations

Department of Human Services: Recommended Changes for FY 2024-25									
ltem	Total Funds	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE			
FY 2024-25 Appropriation									
HB 24-1430 (Long Bill)	\$913,168,250	\$635,896,654	\$86,708,306	\$121,872,414	\$68,690,876	2,330.6			
Other legislation	18,318,729	-53,632,173	67,182,048	0	4,768,854	6.7			
Current FY 2024-25 Appropriation	\$931,486,979	\$582,264,481	\$153,890,354	\$121,872,414	\$73,459,730	2,337.3			
Recommended Changes									
Current FY 2024-25 Appropriation	\$931,486,979	\$582,264,481	\$153,890,354	\$121,872,414	\$73,459,730	2,337.3			
S2 Transitional living home Medicaid	0	-2,582,515	0	2,582,515	0	0.0			
S4 Fort Logan G-wing delay	-1,506,062	-1,506,062	0	0	0	-8.4			
BHA S1 School screening contract	-1,637,776	-1,637,776	0	0	0	0.0			
BHA S2 CYMHTA reduction	-500,000	-500,000	0	0	0	0.0			
BHA S3 Circle program reduction	-300,000	-300,000	0	0	0	0.0			
SNP DOC food service	616,829	0	0	616,829	0	0.0			
Statewide common policy supplemental requests	-1,115,478	-216,356	-47,426	-831,424	-20,272	0.0			
Recommended FY 2024-25 Appropriation	\$927,044,492	\$575,521,772	\$153,842,928	\$124,240,334	\$73,439,458	2,328.9			
Recommended Increase/-Decrease from 2024-25	-\$4,442,487	-\$6,742,709	-\$47,426	\$2,367,920	-\$20,272	-8.4			
Percentage Change	-0.5%	-1.2%	0.0%	1.9%	0.0%	-0.4%			
FY 2024-25 Executive Request	\$927,044,492	\$575,521,772	\$153,842,928	\$124,240,334	\$73,439,458	2,337.3			
Staff Rec. Above/-Below Request	\$0	\$0	\$0	\$0	\$0	-8.4			

### FY 2024-25 Description of Incremental Changes

**DHS S2 Transitional living home Medicaid:** The request is a net zero change to provide spending authority for Medicaid funds that support mental health transitional living homes operated by OCFMH. Amounts include a decrease of \$2.6 million General Fund offset by an equal increase in reappropriated funds from the Department of Health Care Policy and Financing. Staff recommends approval of the request with technical changes to the appropriation structure in HCPF.

**DHS S4 Fort Logan G-wing delay:** The request is a decrease of \$1.5 million General Fund related to the Fort Logan G-wing. The decrease is due to construction delays to open the new unit. Staff recommends approval of the request with an additional reduction of 8.4 FTE.

**BHA S1 School screening contract:** The request is a decrease of \$1.6 million General Fund for the implementation of H.B. 23-1003 (School Mental Health Assessment). The decrease is due to lower contract expenses and is not anticipated to impact services. Staff recommends approval of the request.

**BHA S2 Children and Youth Mental Health Treatment Act (CYMHTA) reduction:** The request is a decrease of \$500,000 General Fund for CYMHTA. The decrease is due to anticipated underutilization from prior projections and is not anticipated to impact services. Staff recommends approval of the request.

**BHA S3 Circle program and rural treatment reduction:** The request is a decrease of \$300,000 General Fund for the Circle program and rural treatment programs for people with co-occurring disorders. The decrease is due to expected under-utilization and is not anticipated to impact services. Staff recommends approval of the request.

**SNP DOC food service:** The request includes an increase of \$616,829 reappropriated funds for a request that originates in the Department of Corrections.

**Statewide common policy supplemental requests:** The request includes a net decrease of \$1.1 million total funds, including \$216,356 General Fund, for non-prioritized requests associated with statewide common policies. The change is associated with adjustments to the Department's payments for vehicle leases, state property risk management, and to the Office of Information Technology (OIT). The Committee will act on common policies during the supplemental presentations for the Department of Personnel (vehicle and state property) and Office of the Governor (OIT).

# **Prioritized Supplemental Requests**

### DHS S2 Transitional living home Medicaid

ltem	Total Funds	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE
Request	\$0	-\$2,582,515	\$0	\$2,582,515	\$0	0.0
Recommendation	\$0	-\$2,582,515	\$0	\$2,582,515	\$0	0.0
Staff Recommendation Higher/-Lower than Request	\$0	\$0	\$0	\$0	\$0	0.0

**Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria?** YES [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]

**Explanation:** JBC staff and the Department agree that this request is the result of data that was not available when the original appropriation was made, or an error in calculating the original appropriation.

#### Request

The Department requests a net zero change to account for Medicaid funds that support mental health transitional living homes. Amounts include a decrease of \$2.6 million General Fund, offset by an equal increase of reappropriated funds from the Department of Health Care Policy and Financing. The request only applies to FY 2024-25, but the Department has also submitted a separate request for FY 2025-26 and ongoing that will be considered during figure setting.

### Recommendation

Staff recommends approval of the request, with changes to where the original appropriation is reflected in the Department of Health Care Policy and Financing.

### Analysis

Mental health transitional living homes (MHTLH) were created within the Office of Civil and Mental Health (OCFMH) by <u>H.B. 22-1303 (Increase Residential Behavioral Health Beds</u>). The bill required the Department to establish at least 125 beds for individuals in need of ongoing support services. The homes are expected to serve as an intermediary on the care continuum between the state hospitals and community-based services. The bill appropriated stimulus funds that originated from the federal American Rescue Plan Act of 2021 (ARPA) to support construction and renovation projects to establish the beds.

The bill required the Department to establish at least 125 beds. The fiscal note assumed that of that amount, 18 beds would be at state-operated facilities and 107 beds would operate through contracts with private providers. The bill included \$33.5 million ARPA funds to support renovation projects at state and private facilities, as well as the first year of operating costs. This amount was reduced to \$11.2 million in H.B. 24-1465 after actual construction expenses came in under projections and homes did not open in FY 2023-24 as anticipated.

The Department indicates that 164 beds have been established and are operational in FY 2024-25, including 140 private contract beds and 24 state-operated beds. The state-operated beds are located at three renovated former group-homes. The homes serve different acuity levels referred to as Level 1, 2, and 3.

**Level 1 homes (L1)** are responsible for daily living with support including medication dispensation, minimal therapeutic activities, and regularly scheduled daily activity support. Programming is geared toward supporting engagement and work toward full independence.

**Level 2 homes (L2, Supported Therapeutic Transitional Living)** provide coordinated care including medication dispensation, therapeutic services, daily social and life skills training, and group activities. This is a higher level of care for patients needing continued management of mental illness. This may include additional supervision to support safety, which may or may not require increased staffing and delayed egress systems.

**Level 3 homes (L3, Supported Therapeutic Skilled Nursing Transitional Living)** provide a therapeutic environment of care and treatment. Services include intensive psychiatric and skilled nursing care in addition to medication management, daily social and life skills, and group activities. This is the highest acuity level, and provides 24-hour care due to ongoing, complex medical conditions.

Both state and private facilities are supported with \$12.6 million General Fund through the Department of Human Services as well as Medicaid for eligible clients. How Medicaid funds are received and reflected in the budget varies between the two facility types as well as the level of home.

The private contractors bill directly to Medicaid and do not flow through the Department of Human Services. Human Services pays the contractors on top of the Medicaid reimbursement to support the contracts and costs not covered by Medicaid. This is supported by the General Fund appropriation in the Department of Human Services. It is staff's understanding that HCPF anticipates that Level 1 patients are eligible for the Home and Community-based Services wavier (HCBS). Level 2 and 3 may still be eligible for and receive Medicaid reimbursement, but not through HCBS waivers.

For state-operated beds, Medicaid funds for eligible clients should be reappropriated from HCPF to the Department of Human Services. The request indicates that the amount of these reappropriated funds was not known during figure setting, and therefore was not included in the appropriation. However, the necessary funds were included in the HCPF forecast. The request would allow the Department of Human Services to expend the Medicaid funds already accounted for by HCPF for eligible clients in state-operated beds.

### Medicaid calculations

The requested amount only reflects the reappropriated funds required to operate stateoperated beds, and does not include Medicaid funds for private contract beds that are included in the HCPF forecast. The amount requested is based on the following assumptions.

- 24 state-operated beds.
- Beds opened in January for 181 operable days in FY 2024-25.
- Medicaid per diem rate of \$772.08.
- Medicaid eligibility rate of 77%.

 $24 \ beds \times 181 \ days = 4,344$ 

4,344 × \$772.08 *rate* = \$3,353,916

 $3,353,916 \times 77\%$  eligibility = 2,582,515

#### **Technical Appropriation Recommendation**

Human Services indicates that adjustments are not required to the HCPF budget as the amounts have already been incorporated into the forecast. While staff agrees that the associated amounts are accounted for, staff recommends changing where the HCPF appropriation is reflected.

The associated appropriations in the HCPF section of the long bill are within the Medical Services Premiums line item. This is the largest line item within the HCPF budget that provides funding for physical health and long-term care services. Appropriations for the line are set by the HCPF's R1 forecast.

The HCPF budget also includes a section specific to amounts associated with reappropriated funds in other Departments. Staff recommends moving the current HCPF appropriation for state-operated beds from the Medical Services Premiums line to a new line item for Mental Health Transitional Living Homes in the Transfers to Other Agencies section of the HCPF budget.

This adjustment would align the budget structure with the current practice for other Medicaidsupported, state-operated programs in Human Services.

HCPF would prefer to maintain the appropriation in the Medical Services Premiums line item. The staff recommendation splits funding associated with the homes between two sections of the budget. Therefore, staff agrees with the Department that funding may be managed more effectively if the appropriation is kept in Medical Services Premiums. However, separating the funds that are reappropriated to DHS is common practice for similar programs and necessary to consistently align funding between the two agencies.

### DHS S4 Fort Logan G-wing delay

	Total	General	Cash	Reapprop.	Federal	
Item	Funds	Fund	Funds	Funds	Funds	FTE
Request	-\$1,506,062	-\$1,506,062	\$0	\$0	\$0	0.0
Recommendation	-\$1,506,062	-\$1,506,062	\$0	\$0	\$0	-8.4
Staff Recommendation Higher/-Lower than Request	\$0	\$0	\$0	\$0	\$0	-8.4

**Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria?** YES [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]

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

#### Request

The Department requests a decrease of \$1.5 million General Fund for the delayed opening of a new unit at Fort Logan. While a decrease is requested for FY 2024-25, the Department has requested a \$6.9 million General Fund increase in FY 2025-26 to account for a full year of staffing that the Committee will consider during figure setting.

#### Recommendation

Staff recommends a decrease of \$1.5 million General Fund and 8.4 FTE.

### Analysis

House Bill 22-1303 (Increase Residential Behavioral Health Beds) appropriated funds that originated from ARPA for the renovation of existing facilities to create a new 16 bed unit at Fort Logan. The unit is expected to serve forensic clients initially, but transition to serving civil clients when the competency restoration waitlist is eliminated or trending toward elimination.

The fiscal note for the bill anticipated that the unit would be operational in FY 2023-24, and that ongoing operational expenses would be fully supported with General Fund beginning in FY 2024-25. The unit is currently under construction and is not yet operational.

The Department initially included the full year of operating costs as part of the FY 2024-25 November budget submission in alignment with the fiscal note. Staff worked with the Department to identify a lower amount during figure setting since the unit was not yet constructed.

At the time, the Department expected that the unit would open in June of 2025. The Department indicated that operating funding was necessary for one-quarter of FY 2024-25 to facilitate hiring and training in order for the unit to open doors in June. The Committee therefore approved funding for one-quarter of the fiscal year, totaling \$2.7 million General Fund and 14.6 FTE.

The Department now indicates that construction delays will prevent opening of the unit until September 2025. The postponement is due to shipping delays to acquire security grade windows, anti-barricade doors, electrical equipment, and HVAC equipment. The Department therefore assumes that hiring and training will begin in June rather than April as anticipated when the original appropriation was made.

Even though the request reflects a reduction, the reduction is not as high as might be anticipated given a funding reduction from three months to one month. This is due to one-time operating start-up costs that are unchanged regardless of whether staffing is supported for one month or several months. Anticipated costs are provided in the table below.

S4 Request Detail								
	Current							
	Appropriation	Request	Difference					
Personal services	\$2,229,554	\$687 <i>,</i> 059	-\$1,542,495					
One-time operating	458,180	458,180	0					
Ongoing operating	53,008	82,774	29,766					
Contract medical services	15,667	0	-15,667					
Pharmacy	22,333	44,667	22,334					
	\$2,778,742	\$1,272,680	-\$1,506,062					

The Department has also identified increased costs associated with pharmacy and operating costs than initially anticipated based on other newly established units. The pharmacy must be fully stocked with medications prior to the unit opening in order to be fully functional for patients. The Department recently opened two additional units in Fort Logan through budget requests last year. In opening the units, the Department found that actual pharmacy and operating costs exceeded initial estimates, and have therefore increased the associated budget for the G-wing in alignment with recent actual expenditures.

The Committee could eliminate the appropriation for FY 2024-25 if there is concern that the unit will open even later than currently anticipated. However, this would have the effect of pushing one-time operating costs to FY 2025-26, increasing the overall General Fund obligation in FY 2025-26.

Staff anticipates that the General Fund reduction identified in the request will revert if the request is not approved. Staff finds that the request is the result of information that was not available when the original appropriation was made. Staff recommends approval of the requested \$1.5 million General Fund reduction, as well as a reduction of 8.4 FTE associated with the requested personal services reduction.

### BHA S1 School screening contract

ltem	Total Funds	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE
Request	-\$1,637,776	-\$1,637,776	\$0	\$0	\$0	0.0
Recommendation	-\$1,637,776	-\$1,637,776	\$0	\$0	\$0	0.0
Staff Recommendation Higher/-Lower than Request	\$0	\$0	\$0	\$0	\$0	0.0

**Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria?** YES [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]

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

#### Request

The BHA requests a decrease of \$1.6 million General Fund in FY 2024-25 for the implementation of <u>H.B. 23-1003 (School Mental Health Assessment)</u>. The BHA has submitted a related reduction for FY 2025-26 and ongoing that will be considered during figure setting.

#### Recommendation

Staff recommends approval of the request.

#### Analysis

House Bill 23-1003 required the BHA to administer a school mental health screening program. The bill required the BHA to contract with a qualified provider to conduct screenings, and contract with a data vendor. The fiscal note assumed a cost of \$2.0 million for the qualified provider and \$525,000 for the data vendor.

The BHA has since contracted with one provider that can conduct both requirements at a lower cost. The actual contract cost for FY 2024-25 is \$898,930, allowing the BHA to request a \$1.6 million reduction on a one-time basis without impacting services. Actual costs were not known until the contract was finalized in July, 2024.

#### Implementation updates

The school mental health screening program is intended to serve sixth through twelfth grade students. The bill required that the BHA work with the departments of Public Health and Environment (CDPHE), Education (CDE), and Human Services to identify priority counties and school districts. The BHA indicates that after collaboration with CDPHE and CDE, all public schools were deemed eligible for the program.

A public school must notify the BHA before May 1 of the prior school year to participate.<sup>1</sup> There are currently 11 schools participating in the program, but the BHA expects to expand to 100 schools in FY 2025-26. The original fiscal note assumed that 265 schools would participate in the program.

The request indicates that the requested reduction will support the consolidated contract services for the 11 schools currently in the program in FY 2024-25. The BHA has requested a lower ongoing reduction beginning in FY 2025-26 that is expected to account for the consolidated contract and expansion to 100 schools. The Committee will consider that reduction as part of the Department's figure setting.

Staff anticipates that the General Fund reduction identified in the request will revert if the request is not approved. Staff finds that the request meets supplemental criteria because it is based off information that was not available when the original appropriation was made. Staff therefore recommends approval of the request.

### BHA S2 CYMHTA reduction

Item	Total Funds	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE
Request	-\$500,000	-\$500,000	\$0	\$0	\$0	0.0
Recommendation	-\$500,000	-\$500,000	\$0	\$0	\$0	0.0
Staff Recommendation Higher/-Lower than Request	\$0	\$0	\$0	\$0	\$0	0.0

**Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria?** YES [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]

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

#### Request

The BHA requests a one-time decrease of \$500,000 for the Children and Youth Mental Health Treatment Act due to expected under-utilization. The BHA has submitted a separate request to implement a \$600,000 decrease on an ongoing basis that the Committee will consider during figure setting.

#### Recommendation

Staff recommends approval of the request.

<sup>&</sup>lt;sup>1</sup> Section 27-50-903 (2) and (3), C.R.S.

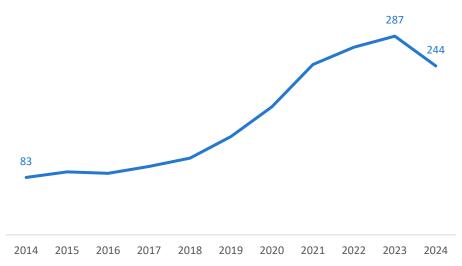
### Analysis

The Children and Youth Mental Health Treatment Act (CYMHTA) provides families with access to community-based and residential services not covered by private insurance and Medicaid. The program is expected to serve youth at risk of out-of-home placement.

Participation in the program is voluntary and requires a CYMHTA assessment.<sup>2</sup> Youth and families may access services by contacting a CYMHTA liaison at the Administrative Service Organization (ASO) for their region. The role of the ASO will be replaced by BHASOs beginning in FY 2025-26.

Funding for the program was increased by \$2.0 million on an ongoing basis through a budget request in FY 2023-24. Current funding for FY 2024-25 is \$8.5 million total funds, including \$7.9 million General Fund. Additional funds are from the Marijuana Tax Cash Fund and reappropriated Medicaid funds. Prior to FY 2023-24, appropriations mostly only increased by the community provider rate common policy.

The FY 2023-24 request was driven by multiple components. First, caseload more than doubled from 111 youth in 2018 to 287 youth in 2023. Patient acuity and healthcare costs increased at the same time, driving up program expenditures. Additionally, the Department received federal stimulus funds through the COVID-19 Community Mental Health Block Grant. Federal stimulus funds expired in 2023, and a General Fund increase was thought to be necessary to sustain current program levels.



After consistent increases, CYMHTA caseload decreased in 2024.

However, actual caseload decreased in 2024.<sup>3</sup> The request indicates that overall caseload, as well as residential services, was lower than projections. Decreased utilization of high cost residential services has also decreased anticipated expenditures. Following the \$2.0 million

<sup>&</sup>lt;sup>2</sup> Children and Youth Mental Health Treatment Act 2024 Fact Sheet.

<sup>&</sup>lt;sup>3</sup> Children and Youth Mental Health Treatment Act 2024 Annual Report.

increase, the program reverted \$1.3 million General Fund in FY 2023-24. The line item had no or limited reversions in prior fiscal years.

The BHA anticipates that expenditures in FY 2024-25 will exceed FY 2023-24, but will be lower than prior projections and the current appropriation. The program has conducted 113 assessments this fiscal year, compared to 90 assessments at the same time in the prior year. There have been 63 admissions this fiscal year, compared to 38 at the same time last year. Similarly, the program has admitted 9 residential youth half way through the year, compared to a total of 8 residential admissions in all of FY 2023-24.

The BHA projects expenditures of \$7.7 million total funds in FY 2024-25 and indicates that a \$500,000 General Fund reduction can be supported without impacting services. Staff finds that the request meets supplemental criteria because it is based off information that was not available when the original appropriation was made. Staff recommends approval of the request to align the appropriation with anticipated expenditures.

### BHA S3 Circle program reduction

Item	Total Funds	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE
Request	-\$300,000	-\$300,000	\$0	\$0	\$0	0.0
Recommendation	-\$300,000	-\$300,000	\$0	\$0	\$0	0.0
Staff Recommendation Higher/-Lower than Request	\$0	\$0	\$0	\$0	\$0	0.0

**Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria?** YES [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]

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

#### Request

The BHA requests a one-time decrease of \$300,000 for the Circle Program and other rural treatment programs for co-occurring disorders due to expected under-utilization. The BHA has submitted a separate request for a \$638,286 decrease on an ongoing basis that the Committee will consider during figure setting.

#### Recommendation

Staff recommends approval of the request.

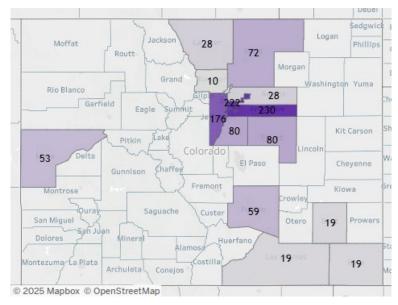
#### Analysis

The Circle Program provides intensive treatment programs for individuals with co-occurring mental health and substance use disorders. The Circle Program originally operated on campus of the state mental health hospital in Pueblo, but transitioned to community based providers in 2018. The BHA previously contracted with Managed Service Organizations to establish Circle Program locations in Pueblo, Fort Collins, and Grand Junction. The BHA will contract with

BHASOs to support the Circle Program beginning in FY 2025-26. The purpose of the program is to provide inpatient stabilization followed by a transition to ongoing outpatient services.

The line item that supports the Circle Program also supports rural co-occurring disorder services. Funding associated with that portion of the line item was established to support a full continuum of co-occurring behavioral health services for adolescents and adults in southern Colorado and the Arkansas Valley. The appropriation was the result of service gaps identified in the region. The program is expected to cover room and board costs and other wraparound services that are not covered by Medicaid.

The following map provides the number of residential beds for substance use disorder treatment in 2023 as reported by the BHA performance hub.<sup>4</sup>



The current appropriation is \$7.1 million total funds, including \$638,286 General Fund, \$5.7 million from the Marijuana Tax Cash Fund, and \$704,282 from the Correctional Treatment Cash Fund. Appropriations from the Correctional Treatment Cash Fund are awarded by the Correctional Treatment Cash Fund Board. The line item has only increased by the community provider rate common policy in recent years, and was reduced for budget balancing in FY 2020-21 and FY 2024-25.

Medicaid began covering residential substance use treatment in 2021. The request indicates that 94.0 percent of Circle Program participants are Medicaid eligible. Therefore, the BHA anticipates that the Circle Program appropriation will be under-utilized in FY 2024-25. The request indicates that a reduction can be supported without impacting services.

The line item did not revert in FY 2023-24, but the request indicates that the BHA anticipates under-utilization in FY 2024-25. Staff finds that the request meets supplemental criteria

<sup>&</sup>lt;sup>4</sup> BHA Substance Use Data Performance Hub.

because it is based off information that was not available when the original appropriation was made. Staff therefore recommends approval of the request for budget balancing purposes.

### Non-Prioritized Supplemental Requests

### SNP DOC food service

ltem	Total Funds	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE
Request	\$616,829	\$0	\$0	\$616,829	\$0	0.0
Recommendation	616,829	0	0	616,829	0	0.0
Staff Recommendation Higher/-Lower than Request	\$0	\$0	\$0	\$0	\$0	0.0

The Department requests an increase of \$616,829 reappropriated funds to reflect the impact of a request driven by the Department of Corrections. Staff requests permission to adjust the appropriation as necessary to align with final action on the Department of Corrections.

# Statewide Common Policy Supplementals

These requests are not prioritized and are not analyzed in this packet. The JBC will act on these items later when it makes decisions regarding common policies.

Department Share of Statewide common policy supplemental requests										
ltem	Total Funds	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE				
DPA Risk management	\$544,070	\$417,184	8,500	\$84,201	\$34,185	0.0				
OIT Real time billing	-2,060,621	-488,713	-104,497	-1,144,135	-323,276	0.0				
DPA Annual fleet	-36,153	-11,827	-1,630	-16,144	-6,552	0.0				
Total	-\$1,552,704	-\$83,356	-\$97,627	-\$1,076,078	-\$295,643	0.0				

The staff recommendation for these requests is pending Committee action on common policy supplementals. Staff requests permission to adjust the appropriation as necessary to align with final action on statewide common policies. If staff believes there is reason to deviate from the common policy, staff will appear before the Committee at a later date to present the relevant analysis.

# Appendix A: Numbers Pages

Appendix A: Numbers Pages					
	FY 2023-24 Actual	FY 2024-25 Appropriation	FY 2024-25 Requested Change	FY 2024-25 Rec'd Change	FY 2024-25 Total w/Rec'd Change
Department of Human Services Michelle Barnes, Executive Director					
S2 Mental health transitional living homes					
(6) Office of Behavioral Health (F) Residential Behavioral Health Beds					
Residential Bed Program	<u>0</u>	<u>12,599,486</u>	<u>0</u>	<u>12,599,486</u>	
FTE	0.0	21.8	0.0	21.8	
General Fund	0	12,599,486	(2,582,515)	10,016,971	
Cash Funds	0	0	0	0	
Reappropriated Funds	0	0	2,582,515	2,582,515	
Federal Funds	0	0	0	0	
Total for S2 Mental health transitional living homes	0	12,599,486	0	12,599,486	
FTE	<u>0.0</u>	<u>21.8</u>	<u>0.0</u>	21.8	
General Fund	0	12,599,486	(2,582,515)	10,016,971	
Cash Funds	0	0	0	0	
Reappropriated Funds	0	0	2,582,515	2,582,515	
Federal Funds	0	0	0	0	

	FY 2023-24 Actual	FY 2024-25 Appropriation	FY 2024-25 Requested Change	FY 2024-25 Rec'd Change	FY 2024-25 Total w/Rec'd Change
S4 Fort Logan G-wing			,		
(6) Office of Behavioral Health (B) Mental Health Institute - Ft. Logan					
Personal Services	44,484,996	49,735,907	-1,506,062	48,229,845	
FTE	257.5	331.2	-8.4	322.8	
General Fund	11,868,289	47,929,302	(1,506,062)	46,423,240	
Cash Funds	32,584,829	1,712,179	0	1,712,179	
Reappropriated Funds	31,878	94,426	0	94,426	
Federal Funds	0	0	0	0	
Total for S4 Fort Logan G-wing	44,484,996	49,735,907	(1,506,062)	48,229,845	
FTE	<u>257.5</u>	<u>331.2</u>	<u>(8.4)</u>	<u>322.8</u>	
General Fund	11,868,289	47,929,302	(1,506,062)	46,423,240	
Cash Funds	32,584,829	1,712,179	0	1,712,179	
Reappropriated Funds	31,878	94,426	0	94,426	
Federal Funds	0	0	0	0	

	FY 2023-24 Actual	FY 2024-25 Appropriation	FY 2024-25 Requested Change	FY 2024-25 Rec'd Change	FY 2024-25 Total w/Rec'd Change
BHA S1 School mental health screenings					
(5) Behavioral Health Administration (D) Integrated Behavioral Health Services					
School Mental Health Screening Program	<u>0</u>	<u>2,536,706</u>	-1,637,776	<u>-1,637,776</u>	<u>898,930</u>
General Fund	0	2,536,706	(1,637,776)	(1,637,776)	898,930
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Total for BHA S1 School mental health screenings	0	2,536,706	(1,637,776)	(1,637,776)	898,930
FTE	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	0	2,536,706	(1,637,776)	(1,637,776)	898,930
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

	FY 2023-24 Actual	FY 2024-25 Appropriation	FY 2024-25 Requested Change	FY 2024-25 Rec'd Change	FY 2024-25 Total w/Rec'd Change
ВНА S2 СҮМНТА					
(5) Behavioral Health Administration (B) Community-based Mental Health Services					
Children and Youth Mental Health Treatment Act	<u>6,765,224</u>	<u>8,455,159</u>	-500,000	<u>7,955,159</u>	
General Fund	6,368,097	7,863,781	(500,000)	7,363,781	
Cash Funds	397,127	453,698	0	453,698	
Reappropriated Funds	0	137,680	0	137,680	
Federal Funds	0	0	0	0	
(5) Behavioral Health Administration (D) Integrated Behavioral Health Services					
Temporary Youth Mental Health Services Program	5,021,630 0.6	5,000,000 1.0	-500,000	<u>0</u>	5,000,000 1.0
General Fund	5,021,630	5,000,000	(500,000)	0	5,000,000
Cash Funds	0	0	0	0	C
Reappropriated Funds	0	0	0	0	C
Federal Funds	0	0	0	0	0
Total for BHA S2 CYMHTA	11,786,854	13,455,159	(500,000)	(500,000)	12,955,159
FTE	<u>0.6</u>	<u>1.0</u>	<u>0.0</u>	<u>0.0</u>	<u>1.0</u>
General Fund	11,389,727	12,863,781	(500,000)	(500,000)	12,363,781
Cash Funds	397,127	453,698	0	0	453,698
Reappropriated Funds	0	137,680	0	0	137,680
Federal Funds	0	0	0	0	0

	FY 2023-24 Actual	FY 2024-25 Appropriation	FY 2024-25 Requested Change	FY 2024-25 Rec'd Change	FY 2024-25 Total w/Rec'd Change
BHA S3 Circle program reduction					
(5) Behavioral Health Administration (D) Integrated Behavioral Health Services					
Circle Program and Other Rural Treatment Programs					
for People with Co-occurring Disorders	7,236,329	7,083,945	-300,000	-300,000	6,783,945
General Fund	626,462	638,286	(300,000)	(300,000)	338,286
Cash Funds	5,705,585	5,741,377	0	0	5,741,377
Reappropriated Funds	904,282	704,282	0	0	704,282
Federal Funds	0	0	0	0	0
Total for BHA S3 Circle program reduction	7,236,329	7,083,945	(300,000)	(300,000)	6,783,945
FTE	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	626,462	638,286	(300,000)	(300,000)	338,286
Cash Funds	5,705,585	5,741,377	0	0	5,741,377
Reappropriated Funds	904,282	704,282	0	0	704,282
Federal Funds	0	0	0	0	0
Totals Excluding Pending Items					
HUMAN SERVICES					
TOTALS for ALL Departmental line items	2,337,753,860	2,604,787,014	-2,437,776	-3,943,838	2,600,843,176
FTE	<u>4,596.7</u>	<u>5,434.3</u>	<u>0.0</u>	<u>(8.4)</u>	<u>5,425.9</u>
General Fund	857,084,187	1,249,542,319	(2,437,776)	(6,526,353)	1,243,015,966
Cash Funds	437,340,579	511,926,640	0	0	511,926,640
Reappropriated Funds	179,890,758	227,127,067	0	2,582,515	229,709,582
Federal Funds	863,438,336	616,190,988	0	0	616,190,988