

DEPARTMENT OF HUMAN SERVICES

Office of Information Technology Services, County Administration, Office of Self Sufficiency,
Adult Assistance Programs, and the Division of Youth Corrections

FY 2016-17 JOINT BUDGET COMMITTEE HEARING AGENDA

Monday, January 11, 2016

1:30 pm – 4:30 pm

1:30-1:40 INTRODUCTIONS AND OPENING COMMENTS

1:40-2:00 COLORADO BENEFITS MANAGEMENT SYSTEM (CBMS) FUNDING REQUEST

- 1. Has CBMS, as the single, integrated system for all public assistance programs, solved the issues it was intended to fix at the onset of its development?**

CBMS has addressed the issues it was originally intended to fix and has continued to evolve systematically and programmatically as the statewide case management and eligibility system.

CBMS replaced six aging legacy systems supporting various state-administered public assistance programs with a single system. The legacy systems relied on manual paper driven processes and required face to face interactions between consumers and eligibility workers. Through technological advancements CBMS, PEAK and related applications provide automated processes and minimize worker intervention. The systems create opportunities for consumers that do not require assistance from a county or state employee. During this historical period of increased enrollments, the technology has minimized the burden on workers and stabilized the funding associated with county administration.

CBMS and PEAK are essential technologies through which Coloradans most in need receive food, cash and medical assistance. CBMS is the statewide case management system and rules engine through which the program applications are processed and eligibility determinations made. PEAK is the online service where Coloradans can apply for benefits and access benefit information at their convenience. CBMS, PEAK and related applications offer real-time eligibility (RTE) determinations for medical assistance. Through the RTE innovation, Coloradans are able to obtain eligibility results for the medical assistance program in 45 minutes rather than 45 days.

Federal regulations, state requirements and stakeholder feedback propel system modifications and new functionality. Supporting those objectives is critical to technical standards and the systems life cycle.

Colorado has built a strong IT infrastructure and continues to incorporate flexible technologies that drive sustainable and intelligent business decisions. The advancements to CBMS, PEAK and related applications have led to newly engaged, empowered and educated consumers. The technological investments made to date have been pivotal to improved outcomes.

2. Please describe the components, including estimated costs, which make up the base need (“keeping the lights on”) of the system.

The following response is provided by the Governor’s Office of Information Technology.

The “base” for CBMS as it has been budgeted historically is represented in the request by Tables 4.1 & 4.2 to Attachment A of the request, and is summarized below:

Table 1 – Projected base CBMS appropriation by category – FY 2016-17

Item	Cost (\$)	Description
Personal Services	\$5,195,849	Payroll costs for OIT FTE supporting CBMS & professional services costs.
Operations & Maintenance base contract costs	\$10,797,150	Basic vendor maintenance and operations costs to maintain the system. Includes base pool of maintenance hours but not project specific allocations to be used at discretion of OIT/CDHS/HCPF.
Client Correspondence	\$5,000,000	Estimated costs for client correspondence generation, including postage costs
County Infrastructure Management Costs	\$3,250,000	State paid vendor support costs for county equipment used by CBMS workers
Hardware & Software/Equipment Leases/Licenses/Maintenance	\$4,396,360	Basic hardware/software upgrades and maintenance. Includes items such as: Coding Software Licenses, Business Intelligence/Reporting Tools, Performance Management Tools Rules Engine Software System Monitoring & Scheduling tools Includes State & county leased equipment (Includes PCs & servers).
Building Lease Costs	\$130,000	Lease costs at 639 East 18 th Avenue
SAS 70 Audit	\$149,000	Annual Audit Costs
Maximus	\$84,000	RMS expenses
OIT/CBMS General Operating	\$60,000	General operating for OIT-CBMS
Staff Development Center costs	\$775,000	Staff Development Center training costs
TOTAL	\$29,837,359	

Table 1 outlines the components of the annual base operating/contract obligations for CBMS and includes a basic summary of what each component provides. The key point from this summary is that a very small number of obligations are key to basic CBMS operations (i.e. “keeping the lights on”) and consume the majority of the contract/operating budget on an annual basis, leaving almost no room for any discretionary expenditures, no matter how valid, necessary or justifiable.

Of specific note, the second line in the Table 1 reflects \$10.8 million for annual vendor costs for operations and maintenance, which correlates to 19,320 hours, the majority of which are for ongoing maintenance and not specific projects nor enhancements. Each month the vendor provides a status report showing hours utilized that supports what they have done and how they have met their service level agreement with the State.

The 19,320 hours includes all components of development work for CBMS and PEAK (requirements, application design, development and regression testing, documentation, business analysis, data replication, change management, data analytics, incident management, release management, and project management). Typically the base pool is used to keep the system at a level of base functionality expected by users and stakeholders. It is not intended to fund system changes or enhancements in functionality. For further context, a review of the “projects” allocated against these 19,320 hours for the most recent fiscal year indicates the following:

- Roughly half of the maintenance hours were dedicated to platform migrations, annual COLA adjustments, upgrades to email distribution functionality for clients, and critical interface requirements dictated by federal partners.
- When base coding changes related to client correspondence are included, approximately well over three quarters of the base maintenance hours were already committed.

Given that, there is no room for projects or system changes specific to program and federal requirements within the base CBMS operating appropriation. The only way to support such projects or system changes is to request additional funding resources that are outside of the base operations and maintenance contract as reflected in the submitted funding request.

Additionally, while there are projects requested by stakeholders (HCPF, CDHS and counties) that require less than 1,000 hours, the more complex projects take several thousand hours, which cannot be carved out of the base maintenance hours.

For context, note also that over the last three fiscal years major quarterly project builds have typically averaged between 30,000 and 40,000 hours per quarter, and the ongoing annual request included in the funding request is at a materially similar level.

The Agencies have determined that the level of annual state investment required for system modifications and new functionality to support enrollment increases, new federal regulations and other ongoing compliance needs is not expected to decrease in the foreseeable future. The anticipated ongoing need is anticipated to be comparable to or exceed the amounts appropriated over the past two or three fiscal years (including roll-forward funding).

The Agencies, OSPB and county stakeholders all support an ongoing base adjustment to align the budget with true annual need for CBMS, PEAK and related applications.

3. What specific needs of the system and the system's users are resulting in this funding request?

The following response is provided by the Governor's Office of Information Technology.

OIT has provided release notes and help desk ticket (HDT) summaries for Calendar Year 2015 and for the January 2016 build. Two charts have also been provided that break out 2015 projects by different categories. Finally, a refreshed work plan for the remainder of the current fiscal year is provided as an example of the most current prioritized projects/enhancements from the last approved funding request.

Projects and system changes utilize pool hours that are allocated among Agency stakeholders, (HCPF, DHS and OIT), based on their needs. County stakeholders are continually engaged and are active participants in the CBMS Executive Steering Committee governance structure and OIT works with Counties in determining their needs and allocates them pool hours to use accordingly.

The following response was provided by Counties

The county pool hours, managed through the County CBMS User Group (CCUG), have been used by counties to prioritize projects, mainly in improving customer outcomes. Since county technicians are the main "users" of the CBMS system, they are best able to identify system changes that can enhance the client's. The partnership between counties and state agencies is strengthened by this ability of counties to help drive system improvements that are beneficial in not only improving CBMS functionality, but also providing an opportunity for improvement in service delivery to clients.

Below are just a sampling of the recent improvements to the CBMS system from this past year that were county led, and the positive impact they have made on the ability to serve Colorado residents. This is just a few from a much longer list over the last year.

- **Project 8220: Modifications to PEAK RTE Decision Tree** (implemented January, 2015). PEAK Real Time Eligibility was creating new duplicate IDs for clients who already had a State ID within CBMS. This was leading to duplicate work on the part of counties to merge client IDs with existing cases and meant that clients were unable to link to their complete case information through PEAK Manage My Accounts. The modifications changed the system so that any client who scored between an 85 – 95.99 match would be sent to the PEAK Inbox so that county workers could match their application to an existing State ID and case.
- **Project 7847: Verifications Due Report Modifications** (implemented March, 2015). This was an expansion of an existing report to include all High Level Program Groups (HLPG) so that counties could better manage their workloads and avoid cases going overdue that are pending

verifications. It allowed for more proactive engagement of clients around submitting verifications, and worked to increase timeliness statewide.

- **Project 8031: Identify Active Household Members** (implemented June, 2015). This project changed how active and inactive household members appear on a case in CBMS – putting inactive household members in a different font and listing them at the bottom of the case information. This change enables county technicians to process cases more efficiently by clearly indicating who is active and inactive on a particular case.
- **Project 8047: Automated Effective End Date for Earned Income** (implemented June, 2015). This project automated changes to the effective end date for income when the technician end dates employment on the Employment History page in CBMS. This change ended the duplication of entering end dates on multiple pages in CBMS and greatly reduced errors by eliminating the need to manually enter end dates on multiple pages. The impact to clients has been improved determination accuracy and the correct calculation of benefits based on true income. This project was so well received that CCUG is sponsoring a second project to include this functionality on additional pages in CBMS.
- **Project 8049: PEAK Interview Message** (implemented June, 2015). This change added language to the PEAK results page to inform clients of the need to complete an interview when applying for Food Assistance, Adult Financial programs, and/or Colorado Works. Counties see a large number of no-shows and reschedules for interviews for these programs, and this change helped to educate clients as to the next steps in the process. This change also aided in reducing the number of client inquiries received at the County level around next steps in the application process.
- **Project 8568: Verification Check List Updates** (implemented October, 2015). This project included the expansion of the verifications field in CBMS to 325 characters so that more information could be provided to the technician regarding which verifications are needed to process the case. Additionally, this change included the addition of an “Inquire” button that allows a technician to quickly view which verifications caused a program or case to close.

County worker involvement in system development is critical to developing and maintaining a successful system. Making pool hours available for projects initiated by the county departments of human/social services helps to ensure that the system is meeting the needs of the county workers using it every day and those needs of the customers. County staff have been instrumental in identifying system flaws and inefficiencies since the inception of CBMS. Significant improvements in CBMS functionality for both customers and workers have been and will continue to be achieved through county involvement in the system.

The following is provided by the Department of Health Care Policy and Financing.

The Departments continue to implement changes to the systems that are required by federal and/or state regulations or guidance. These modifications to CBMS, PEAK and related applications result in improved customer and user experiences. Some of these changes include the second phase of the Electronic Document Management System (EDMS), Client Correspondence improvements, and simplified data entry for users of CBMS.

4. If the amount of funding requested is appropriated by the legislature, what specific system improvements will be implemented?

The following response is provided by the Governor's Office of Information Technology.

CBMS and PEAK will be maintained and enhanced based on the following categories of work:

- Upgrade software to current vendor supported versions. Software is procured through third party vendors and requires the payment of annual maintenance fees which entitle the owner to obtain and implement regular patches (system and security fixes) as well as to upgrades which are made available usually on a twelve to twenty-four month basis. After a period, older versions of software are no longer supported and they can be a functional and security risk. Many software upgrade projects are required each year for CBMS and PEAK
- Continue to expand and improve storage and processing capability to maintain performance goals. As the number of applicants and clients supported through PEAK and CBMS continues to grow, the demands for processing speed and storage continue to grow. As new functions are implemented, such as mandatory noticing to clients and IRS for medical insurance benefits received in a year, allowing clients to upload verification documents scanned or from mobile devices, interacting with clients through mobile devices, increased use of email/text/SMS and mobile apps, etc., the need for hardware, software and storage increases. Also, the expectation for real time processing, no delays, and self-service support is growing. Procure and implement new hardware and software to support new functionality.
- Add security software and modify architecture or infrastructure to meet growing and changing security requirements. In November 2015, CMS finalized the new IT security requirements. CMS is also requiring that HCPF and Connect for Health Colorado combine their individual interfaces with the Federal Hub into one joint Authority to Connect. OIT/CBMS will develop and maintain this gateway in the next fiscal years. This will require that CBMS, PEAK and the related application; and the data centers/infrastructures that they depend upon, be upgraded to meet IRS requirements for handling Federal Tax information.
- Re-write older sections of the 15 million lines of code in CBMS to take advantage of features available in the upgraded software and hardware.
- Changes to CBMS and PEAK based on feedback from users and clients.
- Implement changes to reduce browser dependency and the need to make significant code changes when a new version of a browser is released. Currently, CBMS only works with Internet Explorer. It requires a project and significant testing each time a new version becomes available. This project will reduce the use of browser specific functions, lessening the work when a new version of Internet Explorer (IE) is released and making it feasible from

a level of effort and support perspective to potentially support other browsers in the future, such as Chrome, Firefox or Safari.

The following response is provided by the Department of Human Services.

Several initiatives have been proposed for system improvements in 2016, including:

- Modernize Adult Financial programs, including clarifying and streamlining rules to align Adult Financial programs with other programs as permitted by statute
- Build functionality, both on-line and mobile, to allow clients to upload documents that would affect timeliness, accuracy, and work participation rate (WPR).
- Simplify the Interim Assistance Reimbursement collection process to increase state funds recovered and comply with pending federal audit results.
- Create functionality to provide Colorado Works benefits after a customer becomes employed (yet loses benefits) in order to increase countable Work Participation hours/activities and support families to transition from welfare to work.
- Reduce user errors by automating processes (i.e. automatically starting redeterminations).
- Improve system interfaces to more readily access data across programs.
- Implement a Quality Assurance real time, error prone solution which will identify error trends to allow proactive resolution to root causes, identify user-created inefficiencies that potentially drive errors, and more quickly intervene in problematic areas that typically cause errors.
- Enhance client correspondence to update language in response to changing policy requirements (e.g., non-discrimination statement, safeguards to prevent erroneous and duplicative mailing, and automated correspondence interfaces to ensure proper client noticing.)
- Integrate The Work Number (TWN) income verification system to expedite eligibility redetermination, income verification, and residence status to improve timeliness in processing applications.

5. Has the CBMS team enlisted the support of a third party to assist in determining the appropriate level of base funding needed to “keep the lights on” and the appropriate amount of additional vendor support hours needed for ad-hoc compliance issues that arise?

The following response is provided by the Governor’s Office of Information Technology.

No third party vendor has specifically been enlisted to determine the appropriate level of base funding or vendor support hours required annually for CBMS, PEAK and its related applications.

However, OIT has been tasked with providing the statewide, enterprise level IT strategy for the entire Executive Branch since FY 2008-09. Subsequent to the consolidation of IT functions under the oversight of the Governor’s Office of Information Technology (OIT),

during FY 2008-09 the General Assembly approved a budget action that consolidated appropriations for CBMS in OIT with programs and funding streams from the Departments of Health Care Policy and Financing (HCPF) and Human Services (CDHS) supporting the funding needs of CBMS. This was done primarily to provide the budget authority for OIT to implement both infrastructure/technology needs of the system but also to position OIT as the entity tasked with managing the third party maintenance and operations vendor contract and resulting system requirements on behalf of the state stakeholders.

For the majority of the past five fiscal years, during which the General Assembly has twice approved significant funding for system enhancements and stakeholder projects, OIT, OSPB and the stakeholder departments provided detailed quarterly reports and work plans outlining the enhancements and projects implemented with the referenced General Assembly approved funding. Additionally, OIT and its stakeholders presented a quarterly summary on CBMS directly to the Joint Budget Committee to keep the Committee directly apprised of any outcomes or issues. Further, when the Joint Technology Committee was established, OIT took a direct role in collaboration with the JTC on enterprise IT projects and the strategy for future state investments in systems and technology.

Finally, OIT and its partners have specifically engaged a third party vendor with expertise in related public sector solicitations to review the statement of work and request for proposals for the re-solicitation of the CBMS, PEAK and related applications vendor operations and maintenance contract. This review and the associated feedback are intended to help support the baseline assumptions of vendor requirements, support, etc. that will result in the final RFP and subsequent contract negotiations with the selected vendor, and to ensure the contract is acceptable to the states' federal partners.

6. With the funding requested, what is the overall strategy for addressing both technology and people issues that are contributing to error rates in the administration of programs, including SNAP and TANF?

The following response is provided by the Department of Human Services.

CBMS enhancements have significantly improved Colorado's ability to administer its programs. While error rates are still higher than desired, Colorado has made significant, measurable gains in moving its error rate in the right direction. For instance, Colorado received notification from FNS in December 2014 that our PER rate had improved to the point of being released from FNS' watch list, eliminating liability status and potential for fiscal sanctions related to the PER. Although errors originate from both technical and human input, ongoing strategies to improve CBMS functionality will continue to streamline eligibility determination and decrease sources of errors.

The Department has made significant strides in performance resulting in more timely and accurate benefits to Colorado's most vulnerable citizens. Timeliness for new SNAP

applications has improved from below 80% in 2008 to 97.7% in December 2015; timeliness for SNAP redetermination applications has followed a similar trend, improving from just over 50% in 2008 to 95.9% in December 2015. For Colorado Works, timeliness for new applications improved from below 90% in 2008 to 99.5% in December 2015, while timeliness of redetermination applications improved from just over 60% in 2004 to 93.7% in December 2015. Accuracy for SNAP Payment Error Rate (PER) has improved during the same time period. Colorado's current PER of 4.03% (as of August 2015) demonstrates a marked improvement from its PER rate of 7.42% in federal fiscal year 2005. The Case and Procedural Error Rate (CAPER) was established by FNS in 2012 at which time Colorado had a 68.79% error rate. This measure also steadily declined to its current rate of 43.11%.

Table 2, identifies the strategies, to be implemented via CBMS funding, will address both the technology and people issues that contribute to the TANF (Colorado Works) and SNAP (Food Assistance) error rates in Colorado, as further explained in the Department's answer to Question #21.

Table 2

Error	Cause(s) of Error (s)	Performance Measures	Ongoing Strategies	New Strategies to Mitigate Errors
<p>Untimely benefit issuance</p>	<ul style="list-style-type: none"> • Untimely first touch • Inconsistent triggering of redetermination process • Delay in the verification of household information 	<p>Standard: 95%</p> <p>Performance-Colorado Works New Applications 99.49% Redeterminations 93.72%</p> <p>SNAP New applications 97.68% Expedited applications 95.67% Redeterminations 95.85%</p>	<p>System-</p> <ul style="list-style-type: none"> • The Work Number pilot provided counties with real-time access to income and address verification data that assists with eligibility determination <p>Policy and Practice-</p> <ul style="list-style-type: none"> • Outlined processes to streamline and more efficiently manage eligibility work • Counties have begun to change eligibility technicians' reception areas to expedite the redetermination process 	<p>System-</p> <ul style="list-style-type: none"> • Permanent implementation of The Work Number statewide • Triggers to identify when income verification is present via The Work Number • System modifications that reduce the number of entries and navigation necessary to make eligibility decisions • Automation of regulation
<p>Noticing</p>	<ul style="list-style-type: none"> • CBMS batch process • Improper noticing • Lack of noticing • Noticing with confusing information • Inconsistencies with language information specific to client demographics 	<p>Standard: 21.98%</p> <p>Performance- 43.70%</p>	<p>System-</p> <ul style="list-style-type: none"> • Changes to ensure that the batch processes run as scheduled • Discrepancies in noticing data will trigger an error alert to the vendor at which point the information can be regenerated and processed as required • Restructured batch process for noticing • Revised correspondence with 3-phase rewrite • Automation of NOMI (Notice of Missed Interview) 	<p>System-</p> <ul style="list-style-type: none"> • Correspondence modifications • Automation of system notices • Discrepancies in noticing data will trigger an error alert to the vendor at which point the information can be regenerated and processed as required • Notices will be updated to reflect any new state or federal regulatory changes <p>Policy and Practice-</p> <ul style="list-style-type: none"> • Work continues among all parties to develop safeguards to prevent erroneous and/or duplicative mailings • Translator option for technicians that do not speak a secondary language
<p>Measuring Performance</p>	<ul style="list-style-type: none"> • Inconsistent data use • Limited data 	<p>C-Stat measures Federal Measures</p>	<p>Policy and Practice-</p> <ul style="list-style-type: none"> • Business Process Reengineering <p>System-</p>	<p>System-</p> <ul style="list-style-type: none"> • Explore a statewide workload management system

	<p>evaluation</p> <ul style="list-style-type: none"> • Ineffective workload management 		<ul style="list-style-type: none"> • State and county report utilization 	<ul style="list-style-type: none"> • Enhance statewide data and reports to permit adequate time for reviewing data to improve outcomes and promote efficiency • Enhance statewide data to use of real-time data in assisting counties to evaluate individual, team, and county-wide performance
Data entry	<ul style="list-style-type: none"> • User errors • Self-employment income • Household composition determination errors • Improper wage and salary entry • System enhancements requiring altered processes 	<p>Standard- PER 3.48% CAPER 21.98%</p> <p>Performance PER 4.40% CAPER 43.70%</p> <p>TANF C-Stat Accuracy - 97% Performance- 96.22%</p>	<p>System-</p> <ul style="list-style-type: none"> • Simplified data entry <p>Policy and Practice-</p> <ul style="list-style-type: none"> • Ongoing staff development and training • Desk-aides • Alignment of rules and practice 	<p>System –</p> <ul style="list-style-type: none"> • Streamline and simplify process and enhance end user efficiencies to eliminate data entry errors • Streamlined windows in CBMS to limit the duplicative entries that may result in errors <p>Policy and Practice-</p> <ul style="list-style-type: none"> • Ongoing training and collaborative meetings with county staff highlight error prone tendencies while outlining techniques to mitigate similar errors
Documentation of Work Activities for work eligible Colorado Works customers	<ul style="list-style-type: none"> • Lack of any data entry • Inconsistent data entry • User error 	<p>Standard- 50% All-families 90% Two parent households</p> <p>Performance- FFY 2012: 35.1% All-families 75.1% Two-parent households</p>	<p>System-</p> <ul style="list-style-type: none"> • Implemented interface with Colorado Department of Labor and Employment • Simplified creation of a work activities plan in the system • Modernized workforce screens 	<p>System-</p> <ul style="list-style-type: none"> • Implement additional interfaces to simplify verification processes • Continue to update and modernize workforce screens to ease data entry <p>Policy and Practice-</p> <ul style="list-style-type: none"> • Frequently develop and provide both web-based and in-person training and develop of desk-aides to promote good practice • Data management of counties' documentation of work activities via state and county reports, C-Stat, and QA/QC processes

Delayed data evaluation methodology	<ul style="list-style-type: none"> • Errors contributing to payment error and case and procedural errors 	<p>Standard: PER 3.48% CAPER 21.98%</p> <p>Performance: PER 4.40% CAPER 43.70%</p> <p>TANF C-Stat Accuracy 97%</p> <p>Performance- 96.22%</p>	<p>System-</p> <ul style="list-style-type: none"> • Exploring system capability to develop data evaluation method. 	<p>System-</p> <ul style="list-style-type: none"> • Ability to review error trends in real time to allow prompt corrections • Build analytical tools to identify system glitches and interventions required to fix • Build predictive tools to drive training and process development
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7. Explain how the CBMS team performs quality control functions for the technology components of the system and the human interactions with system.

The following response is provided by the Governor's Office of Information Technology.

From a technical perspective for CBMS, PEAK and related applications, the majority of Quality Assurance is done as a part of one of the integrated testing functions (User Acceptance Testing, System Integration Testing, regression testing and load testing) and recent improvements in tracking and quality have been realized concurrent with the implementation of a new Quality Center tool capturing both requirements and test scripts, using common software industry standards for development. However, the volume of change that is currently being experienced is expected to continue based on federal guidance and mandates and program requirements, which carries more risk and requires increased quality assurance.

In order to minimize security risk for CBMS, PEAK and all related applications it is evident that additional technical quality assurance resources need to be dedicated to align with the full scope of the technical architecture and system changes and to reduce potential coding defects in application releases through dedicated code review. To address this need, additional operational support resources were included in the funding request to partially address this need.

Additionally, in the current environment, there is not a centralized integrated consumer support model across stakeholder programs for the consumer to call with questions around their issues using PEAK or questions related to benefits. This can often result in citizens experiencing long delays and unsatisfactory service, and existing county resources are

compromised as incorrect information entered inadvertently by clients causes increased workload for the county workers and additional delays before clients receive their benefits.

From a business process perspective the state has leveraged existing resources to address this gap to the extent possible. In the past year, OIT successfully realigned the CBMS Tier II Service Desk in order to:

- Strategically address user issues,
- Better prioritize and resolve service desk tickets,
- Incorporate business intelligence metrics and data, and
- To better integrate the activities of the Tier II Service Desk with the focused training delivery efforts of the Staff Development Center, existing resources in stakeholder programs, and PEAK outreach activities.

The funding request also includes additional resources for PEAK outreach and training and for an integrated support model framework developed by a cross jurisdictional group of stakeholders from HCPF, CDHS, counties, and other stakeholders which will further reduce this gap in service delivery.

The following response is provided by the Department of Human Services.

In FY 2008-09, the Department's Audit Division performed an internal audit of CBMS security profiles and caseload access rights, whereby the Division carefully reviewed a sample of users' access levels and whether their access aligned with their job duties. Following that internal audit, a workgroup compiled a best practices guide for identifying and granting appropriate access levels to help mitigate some of the risks identified in the audit. After that work was completed, CDHS, in collaboration with OIT, provided a series of regional county trainings, in which a best practices guide and corresponding portal reports were presented. By September 2013, all CDHS recommendations from this audit were implemented.

Audit staff also created several reports to mine CBMS and Electronic Benefits Transfer (EBT) data. These reports were provided to county fraud investigators and supervisors across the State. Since September 2014, the Audit Division has transitioned those reports to CDHS and/or county program staff to run.

In response to the quality control functions for the human interactions with CBMS, the Department uses an internal team of staff wholly dedicated to quality assurance and quality improvement (QA/QI) duties. In July 2014, the Department consolidated the QA/QI activities for the SNAP, Colorado Works, and Adult Financial programs into the Office of Performance and Strategic Outcomes. The primary objective of centralizing these responsibilities was to increase the rigor of the QA/QI efforts and the reliability of the review findings. Staff conduct monthly case and other reviews of the SNAP, Colorado Works and Adult Financial programs to monitor a variety of activities, including payment and case management accuracy;

eligibility determination; and whether a SNAP denial/termination reason and noticing was correct. The prescribed sample size ranges from 21 Colorado Works cases per month to 93 active SNAP cases per month. The QA findings are analyzed to identify trends and organized into reports and dashboards that are shared with the counties. The findings are also used to inform training and technical assistance.

The following is provided by the Department of Health Care Policy and Financing.

As a result of the Affordable Care Act (ACA) implementation, a new set of federally required data requirements (Performance Indicators) was established. The performance metrics include data on call center statistics, applications received, enrollment data, application disposition data and processing times. HCPF is required to provide a monthly report to the Centers for Medicare and Medicaid Services (CMS). Audits are performed to ensure the State is in compliance with determining eligibility based on the state and federal regulations. System related issues identified are reported to the CBMS team to be researched, systematically corrected and monitored through help desk tickets. Human error related issues are reported to the Staff Development Center (SDC) or HCPF County Liaison team so the information is disseminated to the end users and issue corrected.

- 8. The CBMS team often cites “federal compliance” as the justification for requesting additional funds to improve the system. Please describe the processes used by the Departments of Health Care Policy and Financing and Human Services to monitor and report on specific federal compliance issues.**

The following is provided by the Department of Health Care Policy and Financing.

The Department of Health Care Policy and Financing monitors and reports on federal compliance issues through regularly scheduled meetings with the Centers for Medicare and Medicaid Services (CMS). During these State Operations & Technical Assistance (SOTA) meetings, CMS requests updates regarding the specific federal compliance issues. In addition to the meetings, CMS has requested system implementation timelines identifying all key milestones within the system development cycle. Along with the timelines, they often require bi-monthly reports with a status update for each of the milestones and risks identified in implementing the policy.

In addition to the monitoring and reporting made to CMS, HCPF monitors the implementation through internal project management. This monitoring includes ensuring funds are properly allocated to each project and deliverables are met within the timelines set forth by CMS. The HCPF Eligibility Policy team along with the HCPF Eligibility Systems team collaborate to identify system requirements that will achieve federal compliance and approval from CMS.

The following response is provided by the Department of Human Services.

The Supplemental Nutrition Assistance Program (SNAP), also known as Food Assistance is directed, funded, and regulated by the United States Department of Agriculture, Food and Nutrition Services (FNS). In Colorado, SNAP operates under the oversight of the Mountain Plains Regional Office (MPRO). Nationwide, FNS evaluates state program administration through a variety of management evaluations, including Program Access, Recipient Integrity, Fiscal Management, Case and Procedural Error Rates (CAPER), Claims Management, Fair Hearings, and other federally prescribed areas of focus. FNS documents findings where practice--both systemic and user-error issues--does not align with regulations and imposes corrective action. In instances where resolving the corrective action requires system changes, FNS is integrally involved in the process to ensure that the proposed solutions address the compliance concerns. Furthermore, FNS must pre-approve all contracts, contract amendments, and other mechanisms where SNAP funds are being used to support required system changes and/or other system enhancements.

The SNAP projects are prioritized by federal policy memos outlining regulatory changes and outstanding compliance issues. The Department shares this information with OIT through the work plan subcommittee, which identifies and recommends program changes that require altering CBMS functionality. For the SNAP, this process includes review and approval from FNS to validate that the projects' scopes address compliance and/or new regulatory changes. FNS reviews technical documents, testing scripts, and training material created to inform counties of new processes relating to system changes.

The Colorado Works Temporary Assistance for Needy Families (TANF) program is overseen by the United States Department of Health and Human Services, Administration for Children and Families (ACF). Complying with the federal TANF program requires the State's CBMS vendor to run data monthly and transmit required case data quarterly, as well as run annual data for a required annual report the Department submits to ACF. Additionally, ACF uses the Colorado Office of Statewide Audit's single audit to evaluate state program administration. The Department also reports quarterly expenditure data and annual Maintenance of Effort (MOE) data to ACF. Similar to SNAP and other federal programs, when ACF changes rules or reporting requirements, CBMS functionality changes may be required to comply with the new mandate.

For both the SNAP and TANF programs, the Department uses a variety of internal mechanisms to monitor program performance, including its C-Stat performance management strategy, internal quality assurance processes as described in Question #7, work plans, program reviews, and more. C-Stat is a particularly important tool to monitor and evaluate performance measures, including timeliness and accuracy in eligibility determinations and

payments. These monthly discussions reinforce performance expectations and drill into county performance, both aggregated and individually. C-Stat data drives continuous attention to performance and assesses fidelity to service delivery and to our customers. This performance data is shared monthly with counties and serves as a good reminder of both our outcomes and our customer-centered focus approach in delivering public assistance programs.

Therefore, complying with evolving federal program mandates requires CBMS to be programmed and re-programmed to ensure program fidelity, monitoring, and accurate reporting.

9. What is the anticipated life-span of the next CBMS support contract and what services will be included in this contract?

The following response is provided by the Governor's Office of Information Technology.

The anticipated life span is four years with the option to extend up to an option of four additional years, based on the current contract. The contract is for the maintenance and operation of CBMS, PEAK and all related applications. This contract is intended to be all-inclusive for the multiple components that make up the systems, and the contract will also cover system changes (i.e. projects) funded by the General Assembly and/or supported by stakeholder programs.

10. What performance standards will be included in the procurement process for the next CBMS contract and how will the standards and milestones be enforced?

The following response is provided by the Governor's Office of Information Technology.

The statement of work as currently drafted includes performance standards for each contractor responsibility and outlines how the contractor's performance of those responsibilities will be monitored.

The current contract contains 18 service level agreements including timeliness of benefit issuance and cyber security compliance. These are monitored by OIT on a monthly basis. It is anticipated that these service level agreements in the current contract will be applied to the future contract, with additional service level agreements included based on lessons learned, to address expanded systems and platforms (e.g., PEAK, mobile applications). These will be enforced through defined and reported metrics outlined in the statement of work and through ongoing monitoring performed by OIT.

11. Why was this funding request submitted as an operating request rather than a capital construction request?

The following response was provided by the Governor's Office of State Planning and Budgeting.

This request is a continuation of items previously approved by the JBC and previously OSPB did not believe the request fit the definition of Capital Construction. The Agencies are not requesting "new" items, but continued funding for CBMS. The Agencies will work with the JTC for this request, if the JBC directs the Agencies need to do so.

12. Please describe the interactions the CBMS team has (and will have in the future) with the Joint Technology Committee.

The following response is provided by the Governor's Office of Information Technology.

When the past two multi-year funding requests for CBMS were developed, submitted to and approved by the General Assembly, the Joint Technology Committee did not exist, and OIT and its partners worked directly with the Joint Budget Committee with regard to CBMS issues and funding requests. As a result, OIT's interaction, consultation and coordination with the JTC has focused primarily on enterprise technology projects and strategy outside of CBMS. OIT anticipates a more direct interaction with the JTC if the JBC directs the agencies need to do so

With regard to accountability to the General Assembly, OIT and its partners have regularly reported to the JBC on a quarterly basis on funding and resources used to implement/deliver specific CBMS projects and system changes in previous fiscal years, and will be prepared to provide a similar level of detailed reporting to both the JBC and the JTC assuming approval of the project/pool hours components included in the funding request and if such reporting is requested.

13. Please explain any lessons learned from the implementation of the CBMS modernization project that have been applied to the CORE project (and vice versa).

The following response is provided by the Governor's Office of Information Technology.

CORE was the implementation of a new system and CBMS modernization was an enhancement of an existing system so parallels are not always evident. The key lesson learned is that systems should always include future modifications and system changes (total cost of ownership) that will be necessary to keep the system sustainable, and current with technology requirements and standards throughout the life of the application without the unrealistic

expectation that there is a static state and cost to maintain large enterprise level citizen facing technology solutions.

OIT applies lessons learned from all projects for the benefit of any future projects to the extent possible as part of our enterprise IT strategy, pursuant to statute. However, there are some differences inherent between a statewide enterprise level project such as CORE and a project that has a smaller but more focused group of direct stakeholders and program sponsors (CDHS, HCPF, OIT and counties) such as CBMS modernization, including the end users. Additionally, both projects were implemented concurrently to a large degree and this left limited ability to leverage lessons learned from implementation of CORE to CBMS Modernization, and vice versa, but commonalities do exist with regard to ongoing operations. One of the keys to the success of the CBMS modernization effort was the dedicated efforts of the state CBMS team (business analysts, governance portfolio coordinators, and technical operations staff) that initiate approve, execute and support projects for CBMS, PEAK and related applications on a daily basis in coordination with the program management and staff at CDHS and HCPF that does not exist for CORE. CBMS modernization involved a third party vendor responsible for system operations, maintenance and application development, etc. that was already under contract with the state for a number of years before the system enhancements commenced.

This enabled the state CBMS team and our state and county partners to work directly with the vendor to define requirements, system interdependencies and essentially develop a comprehensive roadmap to guide the projects associated with CBMS modernization upfront. In the case of CORE implementation, while the state had significant experience operating and maintaining the previous state financial system (COFRS), the request for proposals that resulted in the final third party vendor contract was done subsequent to the budget request being submitted and approved, which in some ways made it impossible to develop a fully comprehensive plan prior to the associated budget submission absent the ability to engage the vendor already familiar with and contracted to operate the system.

2:00-2:15 COUNTY ADMINISTRATION

14. Why was a county workload study not included in the Department's FY 2016-17 budget request?

Significant events in Colorado, including the Great Recession and its aftermath and roll-out of the Affordable Care Act, have dramatically increased the volume of applications for public and medical assistance; in response, the Department as well as, OIT, HCPF have addressed to the needs, implementing massive policy and systems changes in a very compressed timeframe. All in all, these factors have made our service delivery system a system in transition. In partnership with county departments and other stakeholders, the Department has responded to the following significant changes:

- Implementation of the Affordable Care Act (ACA);
- Implementation of major CBMS changes and upgrades;
- Expansion of PEAK as an online application web-based platform which now includes programs outside of the current CBMS eligibility system (e.g. Colorado Childcare Assistance Program (CCAP), Women, Infants, and Children (WIC), and Low Income Energy Assistance (LEAP));
- Aligned program rules and policies (e.g. aligning programs' redetermination time frames);
- Removed administrative burdens that failed to add value to the eligibility determination efforts (e.g. eliminating Monthly Status Reports); and
- Completed comprehensive rule reduction efforts; and
- Implemented Business Process Reengineering (BPR).

These significant efforts have ultimately improved system and customer experiences – yet, these efforts have been implemented in such a compact period of time, the entire system has been operating in a state of flux as we find our collective rudder. Counties are at varying degrees and stages of implementing service delivery improvements through business process reengineering and some may not have had the capacity to evaluate the impact of these efforts yet. The Department believes it would be prudent to allow counties to settle into new processes, evaluate the impacts, and assess current delivery models prior to a workload study. Ultimately, this approach would likely yield a more comprehensive baseline of counties' workloads before launching a workload study.

15. If a county workload study was funded for FY 2016-17, what benefits would it provide the Department, as well as the Department of Health Care Policy and Financing, in supervising county-administrated social services programs?

The following response is provided by the Department of Human Services.

Between 2013 and the present, the Department contracted with the Change and Innovation Agency to implement Business Process Reengineering (BPR) efforts in the ten largest counties with funds appropriated by the General Assembly. This work included assessments of county business practices, recommendations for process redesign, over-the-shoulder support in implementing the changes, and post-implementation reviews and supervisory academies. The assessments that occurred in the beginning of the process indicated that each county department had adequate staffing to meet demand, but those staff needed to be deployed differently to maximize efficiency. During the same time period, the Department received direct BPR interventions, funded and directed by FNS, in four medium counties. While a different model was promoted, these efforts concluded similar findings and indicated that the counties had adequate staff numbers to meet the demand.

Overall, processes and outcomes have improved in Colorado simultaneous with dramatic caseloads increases due to the economic downturn and implementation of the Affordable Care Act. As a result of the BPR interventions and other technical assistance provided by the Department, processes have been implemented to different degrees. Many counties are operating efficiently and successfully achieving outcomes and serving customers, month after month. However, the efforts are varied and producing different results among counties; furthermore, as explained in Question 6, the system is in a state of change. Efforts to evaluate workloads and workers' time to process cases on a statewide basis, while counties are operating in a system in flux could result in unreliable data. However, it could be useful to conduct a workload study in counties that have implemented recommended BPR processes and strategies, followed recommended protocol created through CBMS improvements, and are using data and reports. In counties that have not had the capacity to implement various recommended strategies, a workload study could report how work is accomplished, but it may not measure the effectiveness or efficiency of those processes operating in such a state of flux.

Ultimately, assuring governmental efficiencies should be our ultimate priority as stewards of public funds.

The following is provided by the Department of Health Care Policy and Financing.

As shared in the Department of Health Care Policy and Financing's Main Briefing to the JBC Committee on December 16, 2016 (Question #41 regarding the adequacy of County Administration funding), conducting a new workload study could reflect numerous changes that have taken place since 2007 including population expansions, changes in business processes and technology advancements which may have impacted business operations in counties.

County Administration Funding

The State reimburses the cost of administration for county-administered social services programs, including Medicaid, subject to the General Assembly approved county administration appropriation and available federal funds. A workload study could inform the county administration allocation to each county, but overall funding is subject to appropriation from the General Assembly and federal partners.

Below are key Medicaid changes that could impact county workloads since the original study was completed in 2007.

Caseload Changes

Caseloads have grown by nearly 890,000 members since 2007. A workload study could identify the fiscal, business process and staffing impacts of administering public benefits for expanded caseloads. There could also be a review of potential impact to the base cost to "open the door" of county departments of human/social services to provide services.

Business Processes

The Department is continuously working on business process redesign strategies with counties to improve processing and client outcomes. Additionally, the Department incorporated the utilization of Medical Assistance sites, Presumptive Eligibility sites and Certified Application Assistance sites throughout the state to assist with eligibility determinations. An updated workload study could take these changes into account and offer further recommendations for improvement.

Technological Advances

Many technological advances the Department has implemented, such as Real Time Eligibility (RTE) implemented in October 2013 and other recent improvements through PEAK, are targeted at reducing the need for manual labor by eligibility technicians. A workload study could assess how RTE and PEAK have altered how counties interact with clients and the state eligibility determination system.

A workload study could review existing technology and identify operational modifications, sometimes including “work arounds” individual counties use to meet their workload demands within current funding structures, and identify innovative practices that could lead to new business process improvements and service delivery models statewide.

A workload study could also outline potential technology enhancements and tools to help counties better manage their workload.

Other Workload Impacts to Consider

In an updated workload study, other program areas could be included that were not included in 2007 such as emergency and nonemergency medical transportation services (NEMT).

The benefits of a new workload study could be to continue to identify strategies to improve service delivery, streamline business processes and improve client experience/customer services. An updated workload study could help provide recommendations on how to move forward in our current and evolving technological and service delivery system. Adoption of any recommendations from a workload study would be contingent upon funding from the General Assembly.

16. What guidance would the Department offer to counties in administering social services programs within the existing appropriation of moneys to the County Administration line item given that counties consistently over-expend the dollar amount provided? Has the Department considered relaxing performance standards (e.g. timeliness and accuracy)?

The Department’s highest priority in administering public assistance programs is serving the vulnerable Coloradoans struggling to meet fundamental needs and overcome poverty. Public Assistance programs provide lifesaving supports to families, including food, shelter, and heating assistances. Yet, baseline program eligibility is framed by such low income standards

(some of which are below 100% of the federal poverty level) that any delays in providing these necessary supports may result in Coloradans going hungry, cold, or without other necessities to survive. Easing standards for benefit issuance would create a multitude of social and health stresses for families. For instance, a seemingly innocuous variance in processing a case in 25 or 30 days could be the difference between a family having a stable home or facing homelessness.

Performance standards for timeliness and accuracy are set by state and federal guidelines. For the SNAP, all states are expected to meet a 95% timeliness standard along with aligning with national averages for accuracy:

- 3.48% for the payment error rate (PER), an indicator of correct benefit issuance; and
- 21.98% for the case and procedural error rate (CAPER), which indicates proper actions and noticing to clients.

As such, the Department has neither authority nor plans to relax these performance standards.

Since 2005, Colorado has been operating under the Davis v. Birch settlement agreement that requires sustained performance in processing 95% of applications within federal processing standards. In the past few years, programs have continued to demonstrate improvements in timely delivery of benefits, as detailed in the chart provided in the answer to Question #6. Accuracy measures also continue to improve.

Colorado has made great strides in meeting all performance standards, but we're still just short of the finish line. Supporting consistency and fidelity to our models and processes will be the final fuel to propel us to our goals. The most salient guidance the Department can give to counties is to evaluate the full scope of their service delivery models-including staffing patterns, use of data and reports, and supervisory roles-and consider full-scale implementation of practices recommended through business process reengineering. Counties may also benefit from evaluating their staffing models and considering whether they have the right people in the right roles to supervise the complex processes involved in delivering benefits to vulnerable Coloradans.

The Department acknowledges the challenges faced by counties to operate within their appropriations whereby only three of the ten largest counties operate within their administrative allocation. Overall, 93% of the overspent funds by county overspending is attributable to spending among the ten largest counties. Statewide, nearly 38% of counties (24 of the 64 counties) are able to operate within their administrative allocations. Understanding that adhering to business processes improvements can lead to more efficient use of staffing resources, it is critical that these efforts are reinforced and supported across the state. The Department recognizes the shared responsibility in these endeavors and is committed to providing value-added technical assistance, training, and other resources to county partners.

17. With counties seeking additional funding for a workload study and for additional staff to administer State-supervised social services programs, why did the Department choose to apply a provider rate decrease to cut funding to counties?

While client service providers are facing increased labor and supplies costs as a result of salary increases, cost of living adjustments and general inflation, Colorado is facing a projected budget deficit in FY 2016-17. Therefore, based on the revenue projections for the State of Colorado, a 1.0% provider rate reduction is proposed to address a projected budget deficit in FY 2016-17.

2:15-2:45 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

18. Please explain the distinct roles of the federal government, the State, and counties in providing food assistance to citizens.

Federal 7 CFR 271.3 - 271.4 explains the delegated roles of the federal government and the State in administering the SNAP. As such, the federal government sets uniform rules and regulations for the administration of the SNAP; States may request waivers to modify certain processes that are not specified in law. The definition of a “State agency” in CFR 271.2 is, “The agency of State government, including the local offices thereof, which is responsible for the administration of the federally aided public assistance programs within the State, and in those States where such assistance programs are operated on a decentralized basis, it includes the counterpart local agencies which administer such assistance programs for the State agency.” Thus, the State and counties are dually required to implement and comply with federal program rules and regulations.

Within Colorado’s state-supervised, county-administered structure, the SNAP administrative costs are shared: 50% federal, 30% state, and 20% county funded. The State provides the automated system, program policy, rule interpretation, guidance, staff training, program evaluation, and compliance monitoring. Counties are responsible for determining participant eligibility, benefit issuance, consumer fraud detection, and claims management according to federal and state rules. Counties have autonomy in developing their individual business processes to administer the program, yet the state is required to monitor and evaluate these processes for compliance and is ultimately responsible for any violations of federal policy.

More than \$64,000,000 is issued as monthly SNAP benefits to Coloradans; 100% of these funds are federal funds, passed through to customers.

19. Please explain the process used to determine if a county is compliant with federal performance standards? Is the process the same across all counties?

The process to determine compliance per federal timeliness and accuracy standards is the same for all counties and mirrors the process used by FNS to ensure state compliance. Colorado meets the federal standard of 95% timely application processing, but is continuing to work towards meeting the national standards for accuracy. Recently, Colorado's improvements to its payment error rate (PER) removed the State from liability status, while our ongoing efforts to improve accuracy drive us closer to the national average.

County performance is assessed via regular county management evaluation (ME) visits, the scope and frequency of which are defined via federally approved schedules and plans. Based on Colorado's current caseload, six counties receive annual ME reviews and nine counties receive bi-annual ME reviews; the remaining 49 counties are reviewed bi-annually through four regional (project area) ME visits. Each county review includes analysis of fiscal and performance data, case file reviews, and internal debriefs relative to the analyses. The overarching purpose of the ME reviews is to ensure compliance with all program requirements, including eligibility determination, disbursement of benefits, claims, and more. Findings are addressed with counties by written notification. Department staff follow-up with counties to review findings, discuss improvements, and assess progress.

The formal ME process is augmented by regular, ongoing review and analysis of county level processing data, the Department's C-Stat approach, trends identified as a result of the Quality Assurance (QA) process, and ongoing technical assistance. As warranted, this data is often incorporated into corrective action plans submitted to FNS outlining state trends and remedies to address program compliance.

20. Please provide data by county on Colorado's performance compared to federal performance standards.

Definitions/ Goals:

Payment Error Rate (PER): The sum of benefit dollars issued as overpayments and underpayments on active cases during a benefit month. The performance goal is to operate **at or below** the national average of **3.48%**.

Case and Procedural Error Rate (CAPER): An estimate of the proportion of improper action to deny, suspend, or terminate a case in a given month. The performance goal is to operate **at or below** the national average of **21.98%**.

Timeliness: The percentage of cases that were processed within 30 days. The performance goal is to **meet or exceed 95%**.

Table 3, represents county performance within the most recent set of validated data from October 2014 through July 2015. (There is a four to five month delay in data posting to allow for Quality Control (QC) validation.) Counties with bold text in their performance indicator column are meeting or exceeding performance goals for this period.

Table 3: PER/CAPER By County Source: October 2014 - July 2015 Validated Data					Applications Timeliness	
County	PER	% Above/Below Goal	CAPER	% Above/Below Goal	New	Recertify
001 - Adams	6.71%	3.23%	45.36%	23.38%	89.44%	69.27%
002 - Alamosa	0.00%	-3.48%	100.00%	78.02%	98.76%	96.82%
003 - Arapahoe	2.31%	-1.17%	26.19%	4.21%	97.86%	92.06%
004 - Archuleta	0.00%	-3.48%	75.00%	53.02%	97.07%	94.60%
005 - Baca	197.44%	193.96%	0.00%	-21.98%	80.81%	86.37%
006 - Bent	0.00%	-3.48%	0.00%	-21.98%	95.40%	91.64%
007 - Boulder	18.53%	15.05%	26.19%	4.21%	96.56%	89.10%
080 - Broomfield	0.00%	-3.48%	0.00%	-21.98%	96.71%	95.65%
008 - Chaffee	0.00%	-3.48%	-	-	94.84%	90.14%
009 - Cheyenne	-	-	-	-	89.88%	95.76%
010 - Clear Creek	0.00%	-3.48%	100.00%	78.02%	94.79%	94.67%
011 - Conejos	0.00%	-3.48%	0.00%	-21.98%	97.19%	93.97%
012 - Costilla	0.00%	-3.48%	0.00%	-21.98%	95.50%	94.49%
013 - Crowley	0.00%	-3.48%	-	-	98.66%	94.80%
014 - Custer	-	-	-	-	88.53%	96.85%
015 - Delta	5.35%	1.87%	100.00%	78.02%	98.09%	89.56%
016 - Denver	4.57%	1.09%	47.43%	25.45%	94.08%	88.70%
017 - Delores	-	-	-	-	89.93%	98.21%
018 - Douglas	0.00%	-3.48%	41.67%	19.69%	98.79%	94.61%
019 - Eagle	0.00%	-3.48%	0.00%	-21.98%	95.98%	90.55%
020 - Elbert	14.80%	11.32%	50.00%	28.02%	98.50%	94.74%
021 - El Paso	4.24%	0.76%	48.58%	26.60%	94.64%	96.22%
022 - Fremont	0.00%	-3.48%	26.67%	4.69%	99.58%	97.44%
023 - Garfield	0.00%	-3.48%	0.00%	-21.98%	98.94%	97.67%
024 - Gilpin	0.00%	-3.48%	0.00%	-21.98%	96.44%	97.59%
025 - Grand	-	-	-	-	92.04%	79.26%
026 - Gunnison	-	-	0.00%	-21.98%	97.36%	94.10%
027 - Hinsdale	-	-	-	-	92.50%	95.45%

028 - Huerfano	-	-	-	-	98.06%	96.69%
029 - Jackson	-	-	-	-	100.00%	95.19%
030 - Jefferson	7.56%	4.08%	51.95%	29.97%	95.59%	90.77%
031 - Kiowa	-	-	0.00%	-21.98%	98.57%	98.90%
032 - Kit Carson	0.00%	-3.48%	-	-	93.74%	93.47%
033 - Lake	-	-	100.00%	78.02%	97.88%	88.28%
034 - La Plata	0.00%	-3.48%	0.00%	-21.98%	88.86%	79.16%
035 - Larimer	4.71%	1.23%	47.78%	25.80%	96.70%	92.14%
036 - Las Animas	0.00%	-3.48%	100.00%	78.02%	96.80%	96.56%
038 - Logan	0.00%	-3.48%	-	-	95.63%	88.45%
039 - Mesa	0.00%	-3.48%	35.19%	13.21%	99.24%	97.98%
040 - Mineral	-	-	-	-	93.74%	94.72%
041 - Moffat	0.00%	-3.48%	100.00%	78.02%	73.33%	75.00%
042 - Montezuma	0.00%	-3.48%	0.00%	-21.98%	92.78%	58.41%
043 - Montrose	0.00%	-3.48%	50.00%	28.02%	96.53%	92.26%
044 - Morgan	0.00%	-3.48%	0.00%	-21.98%	99.18%	94.77%
045 - Otero	0.00%	-3.48%	-	-	99.31%	98.10%
046 - Ouray	-	-	50.00%	28.02%	97.04%	94.97%
047 - Park	0.00%	-3.48%	-	-	98.21%	94.07%
048 - Phillips	0.00%	-3.48%	-	-	94.58%	91.21%
049 - Pitkin	1041.18%	1037.70%	-	-	97.68%	95.35%
050 - Prowers	0.00%	-3.48%	100.00%	78.02%	97.22%	91.97%
051 - Pueblo	2.82%	-0.66%	70.42%	48.44%	94.04%	93.37%
052 - Rio Blanco	-	-	-	-	94.24%	80.69%
053 - Rio Grande	0.00%	-3.48%	50.00%	28.02%	98.09%	98.24%
054 - Routt	-	-	0.00%	-21.98%	96.65%	90.95%
055 - Saguache	0.00%	-3.48%	100.00%	78.02%	97.46%	92.27%
056 - San Juan	-	-	-	-	88.74%	81.81%
057 - San Miguel	-	-	50.00%	28.02%	100.00%	94.64%
058 - Sedgwick	-	-	-	-	96.89%	91.25%
059 - Summit	0.00%	-3.48%	100.00%	78.02%	98.46%	98.03%
060 - Teller	0.00%	-3.48%	-	-	98.52%	95.19%
061 - Washington	0.00%	-3.48%	-	-	98.93%	95.88%
062 - Weld	4.18%	0.70%	43.33%	21.35%	96.91%	98.80%
063 - Yuma	0.00%	-3.48%	100.00%	78.02%	96.39%	88.80%
State Average	4.40%	0.92%	43.70%	21.73%	95.47%	91.88%

*Counties with (-) indicated had no PER and/or CAPER data cases included in the sample.

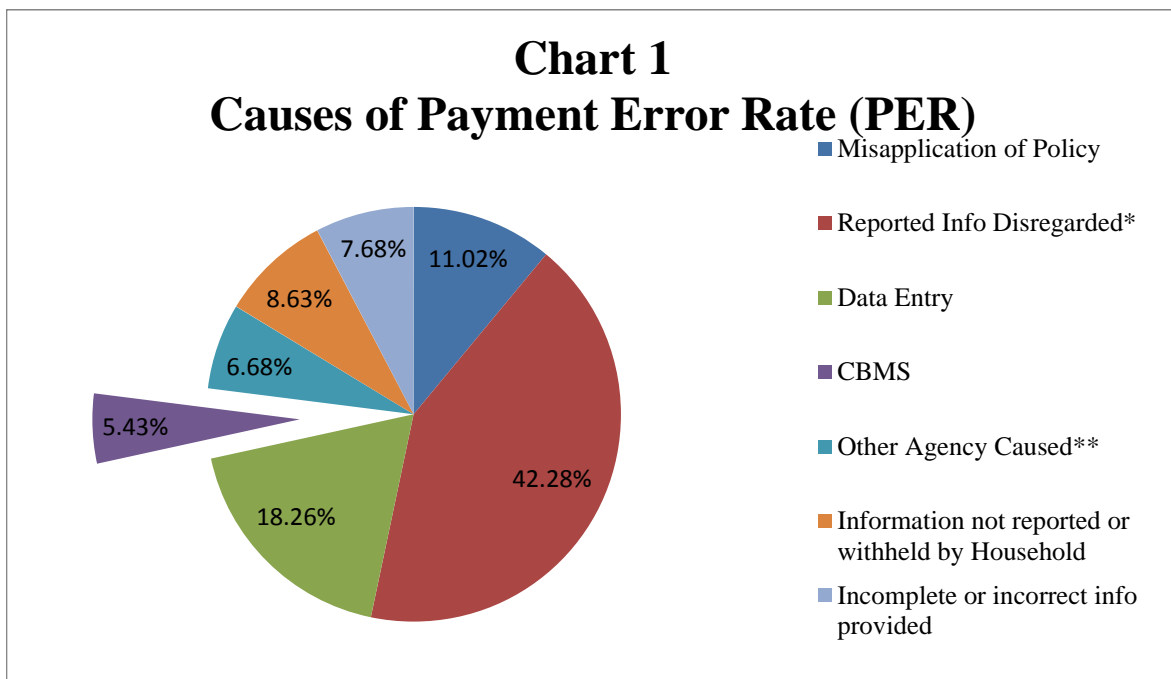
** Counties with 0% had no errors in the sample pulled.

*** Indications above 100% reflect the percentage of payment error dollar amounts relative to benefits issued

21. What percentage of failures to meet federal performance standards are a result of CBMS issues and what percentage are due to human and/or process errors?

For FFY 2015 (October 2014 through July 2015), Quality Control (QC) data has identified the following sources of errors attributable to CBMS and to user errors:

Payment Error Rate (PER): Fewer than 6% of the PER is attributed to system-derived (CBMS) errors. The largest contributor to the PER (42.28%) is the existence of relevant case information provided by the participant yet not considered in the eligibility determination. The next largest contributor to the PER (18.26%) is data entry errors. Chart 1 details all the error sources contributing to the PER and their relevant contribution to the total.

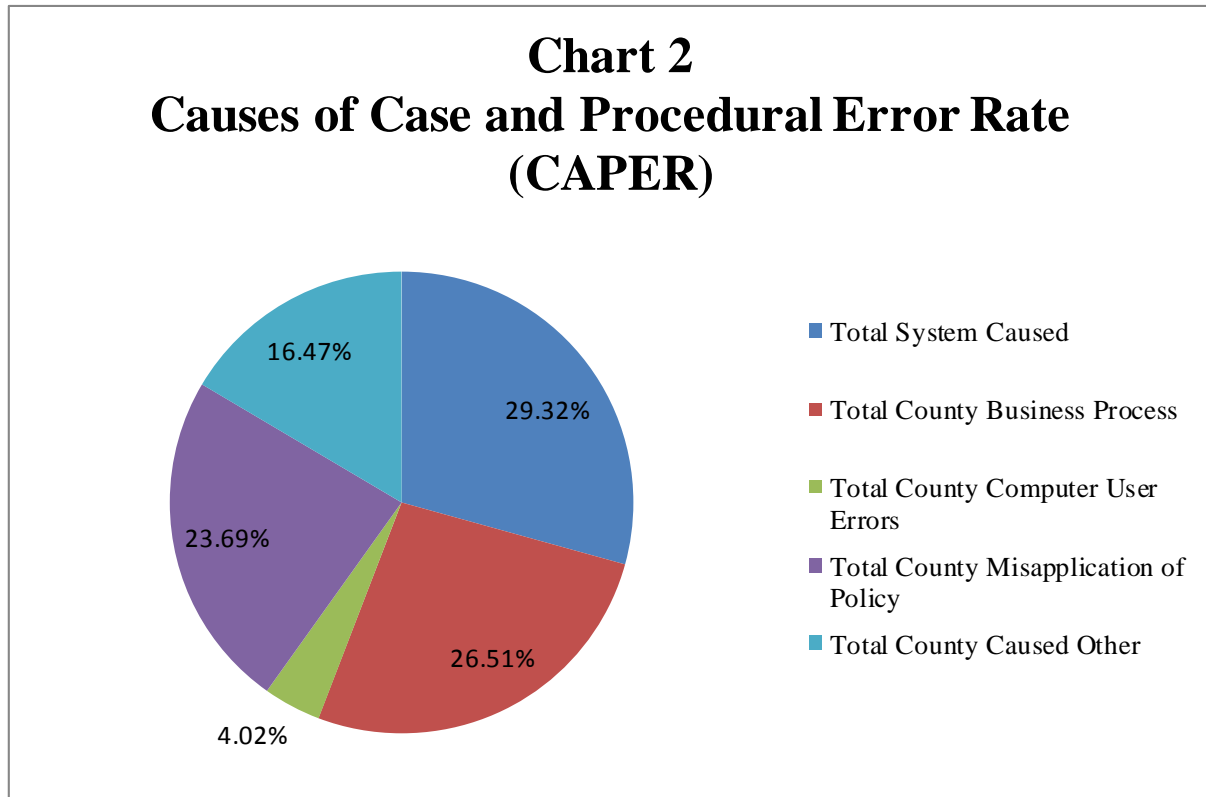


*Reported Information Disregarded Errors include client-reported information provided but not used, changes reported but not researched; and lack of follow-up to case information.

** Other Agency-caused Errors include errors are associated with the failure to verify information, computer user error, and unidentifiable causes.

Case and Procedural Error Rate (CAPER): 29.32% of Colorado’s CAPER is attributable to system errors stemming from CMBS noticing and programming errors. The remaining 70.68% of the CAPER results from errors attributed to county business processes (26.51%); misapplication of policy (23.69%); other county errors, outside of policy- and systems-derived

errors, generally related to case actions like misapplying income, resources, or sanctions; and, to a lesser extent, data entry and other user errors (4.02%). Chart 2 details all the error sources contributing to the CAPER and their relevant contribution to the total.



22. How does the CBMS funding request relate to fixing issues that result in counties failing to meet federal performance standards?

The CBMS funding request includes projects that will address federal performance issues related to client correspondence and noticing. Several other planned system improvement projects may positively impact compliance and performance, including:

Table 4

Change	Type of Change		Basis for Change
	Performance Standard	Compliance	
Create a fraud reporting mechanism	√	√	Compliance with federal systems
Integrate Tax Offset functionality and reporting		√	Federal Treasury Offset protocol
Streamline data entry for timely processing	√	√	Federal and State Performance Standards, Davis v. Birch
Updated exception process	√	√	Improves timeliness and accuracy - Federal and State Performance Standards, Davis v. Birch
Automate eligibility criteria for non-citizens and individuals with sponsors		√	Federal and State regulations
Update to self-employment and limited liability income to correctly calculate benefits		√	Federal and State regulations, improved PER, decreased county workload with claims and restoration processes.
Development of predictive analytic tool to identify error prone cases	√	√	CAPER, PER, correspondence errors, and proactive responses to performance trends.

23. What actions does the Department take when a county fails to meet federal performance standards? Are other tools available to the Department that are not currently being used?

The State employs a collaborative, multi-pronged approach to aid county program compliance:

1. State procedures, processes, and tools to monitor county operations and compliance are aligned with and support policy.
2. The State develops and delivers training, provides customized technical assistance, and assists counties interpret reports and evaluate data.
3. The State utilizes a collaborative approach to engage counties as partners in performance improvement, including the development of performance improvement plans (PIP) that set specific action items, deliverables, and timelines. These plans are monitored and updated regularly and ongoing technical assistance is provided by the state to help alleviate gaps.
4. The Executive Management Team (EMT) visits county Directors and local elected officials to address unresolved performance standards. These meetings are simultaneously run as working sessions to collaborate on strategies for improvement and to notify local elected officials of chronic performance issues.
5. If all the collaborative efforts fail to achieve the desired performance outcomes, the State may utilize a more formalized corrective action process as outlined in Volume 1 of the Human Service Code, as cited below. However, Volume 1 processes have not yet been used as the collaborative approaches have yielded improvement.

Pursuant to Colorado Human Service Code, 9 CCR 2501-1, Volume 1 permits the following remedies to address poor performance and noncompliance:

Section 1.152 Sanctions [Rev. Eff. 2/1/11]

If a county department does not meet the requirements of this Rule or fails to comply with an approved Corrective Action Plan, the State Department may impose any financial sanction as set forth in the Human Services Code, Section 26-1-109 (4)(b), (c), (d), (e), C.R.S. These sanctions may include, but are not limited by, the following:

1. Disallowance of State funds equal to the salary of the County Director of Human/Social Services from the grant which the Corrective Action Plan (CAP) is issued.
2. The State Department may undertake the administration of the public assistance or welfare program for which the county department has not met the requirements of a Corrective Action Plan.

24. If Colorado receives a financial penalty for failure to meet federal performance standards, who would pay the penalty? Would the State pay? Would the counties failing to comply with the standards pay?

Any penalty for non-compliance with federal performance standards would be analyzed individually on its own circumstances. Due diligence would be used to determine the root cause of the penalty; once established, penalties would be assessed to the responsible party, which could be the State, counties, Office of Information Technology (OIT), or the vendor.

25. What internal solutions is the Department putting in place to correct issues that are contributing to counties failing to meet federal performance standards?

Ongoing improvement efforts include county monitoring, developing tools and procedures, business process reengineering, and county staff training and support. Additionally, the Department has solicited input from FNS and contracted with consultants to assess and evaluate various aspects of the SNAP administration. Understanding the shared role in program integrity, the Department is continuing to execute four key strategies to improve the SNAP compliance and program delivery, as follows:

- State Program Administration Assessment – A vendor was contracted to evaluate the efficacy of the State staff in administering the SNAP program. The assessment included an evaluation of staff workload, processes, organizational structure, technology use and funding, and overall functionality in county oversight. Key findings from the report identified that caseload growth and compliance issues have significantly increased the workload among State program staff, yet administrative resources have remained static. The report provided insight on the appropriate level of State administrative resources needed to support county staff meet program requirements. Other recommendations are in the process of being evaluated.
- Business Process Redesign (BPR) Post Implementation Reviews -- The BPR model that Colorado deployed utilizing the Change and Innovation Agency has demonstrated success in other states and within some Colorado counties; however, Colorado continues to be challenged in meeting performance standards statewide. This gap has resulted in CDHS re-contracting with the Change & Innovation Agency, to reassess county business practices, evaluate counties' fidelity to their process redesign models, recommend improvements, and train supervisors to excel as their responsibilities have evolved.
- Quality Control Assessment -- A nationally recognized vendor has been procured and is currently analyzing and evaluating Colorado's SNAP quality control functions that

identify and report error rates to FNS. The philosophy behind this assessment is to evaluate whether accurate information is used to determine case validity. Given the four or five month lag between eligibility determination and case review, it can be difficult to differentiate the actions affecting the data since eligibility determination. Therefore, it is beneficial to assess actions that may assist with this process.

- **County Processes and Tools Assessment** -- The Department is in the final stages of selecting a vendor to analyze and evaluate county processes and tools that may be contributing to error rates. In order to minimize distractions to many county staff who have been inundated with Medicaid applications during the Affordable Care Act's open enrollment period (November through January), the Department has timed this work to be completed during the second half of the fiscal year.

Collectively, these carefully executed approaches to evaluating the SNAP operations will provide a more comprehensive view of Colorado's strengths and areas for improvement. This insight will drive policy and additional strategies to improve program performance.

26. What is the Department's opinion on the six solutions put forth by Committee staff to begin addressing issues contributing to Colorado's inability to meet federal performance standards?

The solutions presented could enhance staff capacity for greater SNAP oversight and monitoring, increase training and staff development, institute incentive-based accountability measures, create efficiencies in responding to federal policy changes, build transparency in funding utilization, and support integrated, cross-agency relationships. The Department will continue to work with the JBC staff to fully understand the proposed solutions and looks forward to the opportunity to collaborate with our county and other partners in order to fully vet the proposed strategies, assess pros and cons of implementation, and explore proactive solutions to mitigate any unintended consequences.

27. If the Department is tasked with developing a pay for performance model for providing funding to counties for administering SNAP, what would this look like? How would base funding be calculated for each county? Would financial incentives be included? Would financial penalties be included?

The Department would like to explore the statewide interest in the application and funding of an incentive-based performance model with counties for the SNAP administration. While intriguing, the concept of pay for performance requires in-depth evaluation of its potential impacts on a) base administrative funding available to counties and b) outcomes to be

achieved. It would also be prudent to explore the application of potential penalties within the overall evaluation of pay for performance and its utility in Colorado.

If the exploration results in recommendations to move forward, the federal SNAP incentive model provides a solid framework to consider. Nationally, bonuses are awarded to agencies that show best or most improved performance in the areas of lowest and most improved payment error rate, lowest and most improved case and procedural error rate, best application processing timeliness rate, and best and most improved Program Access Index (PAI).

While current federal law allows states to implement a performance based model for the SNAP, the Department is reluctant to move forward with this approach without new and/or additional funding to support the initiative.

28. If SNAP is no longer part of the Department's rules making process, will this impair the State's ability to implement strategies at the county level for improving performance against federal standards?

Eliminating administrative rules for the SNAP is a strategy used by many states and could alleviate some of Colorado's compliance issues. However, the Department would need time to fully evaluate the impact that such a significant programmatic change would have on directing policy, guidance, and oversight to ensure that Colorado's performance meets all federal standards and other requirements.

29. Please describe how the Department is using moneys appropriated for the current fiscal year to contract with a third party to review SNAP processes and procedures.

The Department is utilizing the \$300,000 that was appropriated by the General Assembly in FY 2015-16, consistent with the JBC staff comeback memo dated March 13, 2015.

- Quality Control Assessment -- A Request for Proposal (RFP) to procure a vendor for a SNAP Quality Control Study was released and closed in July 2015. No proposals were submitted in response to this solicitation. The Department re-released the RFP in August 2015; it closed in September 2015. This resulted in a contract award to Osnes Consulting, Inc. located in Pierre, South Dakota. The contract was executed in December 2015 and will be completed by the end of FY 2015-16 using \$150,000 of the funds appropriated by the General Assembly. The work will result in a sustainable process for continuous improvement, including institutionalizing best practices in the SNAP quality assurance.

- County Process and Tools Assessment -- In October 2015, the Department released a RFP to procure a vendor to analyze and evaluate county processes and tools that may be contributing to error rates. The RFP closed in November 24, 2015; the Department is currently in the final stage of awarding the contract. Using \$150,000 of the funds appropriated by the General Assembly, this work will drill into county staff practices, including both the use of CBMS as a tool to support that work and various system and procedural “work-arounds” used to compensate for various challenges. In order to minimize distractions to many county staff who have been inundated with Medicaid applications during the Affordable Care Act’s open enrollment period (November through January), the Department has timed this work to be completed during the second half of the fiscal year.

30. Do county and State employees need more training to properly implement SNAP? If so, what entity should provide the training?

Because training and staff development are key components to properly implementing the SNAP and ensuring program integrity, training will always be required. FNS routinely communicates program changes, policy memos, and audit findings with State program staff; in turn, State staff translates this information into rule changes, systems projects, and procedures to share with county staff. This process requires significant subject matter expertise in the Department in order to respond to the federal mandates via business requirements for systems changes and rule packages. FNS sponsors an array of training opportunities for State staff to stay abreast of changes and equip themselves to better support counties.

However, it is the State’s responsibility to train county staff. Since 2013, the Department has used the Staff Development Center (SDC) to create statewide new worker training specific to the SNAP. This training is augmented by webinars and regional and subject specific training to address error prone trends delivered by State SNAP staff. Additionally, across the State many counties and groups of counties have employed a train-the-trainer model whereby trained, certified county staff train their peers. However, the SDC is also responsible for new worker and systems changes training for Medicaid, Colorado Works, and Adult Financial programs. The SDC fills a gap that had existed in delivering consistent, statewide training, yet there are capacity constraints that affect the frequency and depth of training. For the SNAP, these constraints, coupled with the fact that training is not mandated, results in many counties training their own staff.

2:45-2:50 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

31. Please provide an update on the current status of the potential financial penalty for Colorado's failure to meet federal work participation standards for 2012.

In response to the Department's notification in May 2015 that Colorado had not met the federal work participation rate (WPR) for FFY 2011-12, the Department submitted a dispute letter to the Administration for Children and Families (ACF) on July 28, 2015. To date, ACF has not yet responded. ACF confirms that no state has had to pay a fiscal penalty to date. If Colorado's dispute is denied, the Department will submit a request for relief and/or reduction in the penalty under the terms of a "discretionary reduction," as outlined in federal regulations. If a reasonable cause penalty reduction is denied or data analysis proves insubstantial, Colorado will enter into a corrective action plan (CAP) that, as strictly followed, will ameliorate any penalty. Given the three year lag in notification of performance, meaning that processes were not reviewed and improved until 2015, the Department anticipates receiving similar notification of missing the WPR for FFYs 2012-13 and 2013-14.

Meanwhile, the Department has developed an extensive work plan that addresses state administrative procedures, county processes, systems enhancements, and reporting requirements to improve Colorado's WPR in future fiscal years. If Colorado meets its WPR at any time during this process, the Department will be released from any liability for non-compliance.

2:50-3:20 DIVISION OF YOUTH CORRECTIONS STAFFING REQUEST

32. Please describe the goals of the youth corrections system and how the State-owned and -operated detention and commitment facilities meet the goals.

Colorado Revised Statutes, Section 19-2-203 formally creates the Division of Youth Corrections (Division) and places it within the Colorado Department of Human Services. Statute mandates the Division provide services for pre-adjudicated youth in detention and for adjudicated youth in commitment with the dual goals of promoting public safety and rehabilitating youth so that they may become successful, productive members of the community. In addition, Section 19-2-209, C.R.S. charges the Division with the administration of juvenile parole services throughout the State. The Division provides residential treatment services to youth placed in State-operated secure programs, privately operated secure programs, community residential facilities, group homes, or foster homes. The Division operates ten secure facilities that serve youth between the ages of 10-21 who are pre-adjudicated or committed. Colorado Statute allows for the detention of youth between the ages of 10-18, while the State's jurisdiction over committed youth ends at age 21.

Table 5 lists the Division’s ten State-owned and –operated secure facilities by the type of population they serve. Detailed information on each youth service center (YSC) can be found in the Residential Facilities Section of the Division website.

Table 5 State-Owned and -Operated Facilities		
Detention Only	Commitment Only	Detention and Commitment (Multi-purpose)
<ul style="list-style-type: none"> • Gilliam YSC • Marvin Foote YSC • Adams YSC • Pueblo YSC 	<ul style="list-style-type: none"> • Lookout Mountain YSC • Zebulon Pike YSC 	<ul style="list-style-type: none"> • Platte Valley YSC • Mount View YSC • Spring Creek YSC • Grand Mesa YSC

The Department also contracts with private providers to operate three State-owned facilities (currently all are under contract by Rites of Passage, Inc.): a 500 bed, staff secure campus (no secure perimeter) at Ridge View YSC; a facility secure program for high risk girls at Betty K. Marler YSC; and a facility secure program for detained and committed youth in Durango at Robert E. Denier YSC).

In addition to residential programming, the enactment of Senate Bill 91-94 resulted in the creation of a State funded, locally administered program, overseen by the Division, to provide pre-adjudication services to youth at risk of admission to a detention facility. In sum, the Department provides a continuum of residential and non-residential services and mandated functions that encompasses juvenile detention, commitment and parole.

Juvenile Detention

Colorado’s juvenile detention “continuum” consists of community based screening in each judicial district to determine detention needs, community supervision strategies, treatment programs, and secure detention in facilities operated by or contracted with the. The goals of the detention continuum include:

1. Youth supervised within the continuum who have pending court cases appear for all scheduled court hearings.
2. Youth supervised within the continuum who have pending court cases do not acquire new criminal offenses while awaiting the disposition of their case.
3. Classify youth in the appropriate level of detention across the continuum, i.e. from community supervision to the highest level, secure detention. This goal strives to ensure youth are neither over-incarcerated based upon their level of risk nor pose a risk to public safety.
4. Partner with community stakeholders through Senate Bill 91-94 to identify and provide services to youth in the continuum that will reduce the likelihood a detainee will later return to detention.

In most cases, youth will be monitored through non-secure, community-based services such as day reporting, electronic home monitoring, and/or enhanced community supervision. For those youth who are a risk to others or are likely to violate conditions of community supervision, they are detained in one of the eight secure juvenile detention facilities or in one of the three contracted detention facilities.

Commitment Services

The Division operates a full continuum of services for committed youth through a continuum of care. The model incorporates the Division's Five Key Strategies and Five Core Values as a foundational framework for planning, decision making and service provision. The care of youth is determined by their needs and is delivered throughout the commitment process from the initial assessment, to residential placement, transition and parole supervision and services.

In order to determine the appropriate service for each youth, a comprehensive assessment for all youth occurs within the first 30 days of their commitment. This assessment process includes a multi-disciplinary team that meets to discuss the youth and family's needs, which establishes an individual plan and appropriate placement type for each youth. In addition to ensuring community safety by having youth placed at an appropriate security level, the Division strives to ensure that each youth has a treatment plan that is comprehensive and puts them on a path to educational, emotional, and societal success.

The goals of the commitment system are to match treatment services to each youth's individual risk and need in order to:

- Support youth in attaining their educational and vocational goals, i.e. a high school diploma, GED or to enroll in college courses.
- Address mental health (including trauma) and substance use issues that impact their ability to successfully function as a productive citizen.
- Teach youth prosocial skills as well as introduce them to prosocial activities.
- Prepare youth to successfully transition to life in the community.
- Successfully connect youth with sustainable community resources that will support them following discharge from the Department.
- Repair and restore the relationship between youth and their family and community.
- Reduce the risk that youth will reoffend when released back to the community.

With the goal of placing youth at the least restrictive commitment setting, residential placements are classified by level of security and the types of services provided. Security categories include State- and privately- operated secure facilities, contractor-operated staff-supervised programs, and open community placements. Programs offer a variety of services that include education, vocation, medical, substance use treatment, offense specific treatment, restorative justice services, recreation, gender specific treatment and transition services as well as individual, group and family treatment.

33. What is the average length of stay for youth in State-owned and -operated detention and commitment facilities?

Table 6 identifies the average length of stay for detention and committed youth in State-operated facilities for the past 17 months.

Table 6			
Detention			
	Average	Minimum	Maximum
FY 2014-2015	14.6 days	<1 day	543.4 days
FY 2015-2016 (7/1/15-11/1/15)	15.3 days	<1 day	940.6 days
Commitment			
FY 2014-2015	9.1 months	.59 months	48.5 months
FY 2015-2016 (7/1/15-11/1/15)	8.5 months	.76 months	49.9 months

Detention facilities serve youth who are primarily awaiting court hearings for a variety of reasons, for example, new criminal charges or probation revocations.

Commitment facilities and programs serve youth who are: (1) In the initial assessment process – the first 30 days; (2) in a long-term treatment program; (3) in custody following a failed placement in the community; or (4) in custody awaiting a parole revocation hearing.

34. Please describe the difference between youth served in State-owned and –operated commitment facilities and youth served by privately-operated commitment facilities.

The Department makes decisions about where youth are placed based upon several principles and factors. These include:

1. The level of risk posed to the community based upon the Division of Youth Corrections’ risk and classification instruments.
2. The treatment needs identified through a comprehensive assessment conducted in the first thirty days of commitment.
3. The results of a multi-disciplinary team decision-making process designed to ensure the correct security level and a matching of the youth’s treatment needs to the appropriate placement type.
4. In addition to matching treatment needs to program type, placements are selected that are located as close to the family as possible to ensure continued family contact and family participation in treatment.

State-owned and operated facilities house and treat youth who:

- Are newly committed and either engaged in the assessment process or are awaiting their first placement.
- Have been classified as requiring a secure setting based upon the level of risk posed to the community.
- Present with combinations of security concerns and treatment needs. Examples include: (1) security concerns – histories of running from placements prior to commitment, histories of failed child-welfare placements, sex-offense specific treatment needs, and violent and aggressive behaviors in the community and in prior placement; (2) Treatment issues - mental health treatment needs, substance abuse treatment needs, and cognitive/intellectual functioning concerns.
- Were placed in a community placement and have either escaped or been terminated from the program. Often these youth are awaiting court proceedings on new criminal offenses.

Privately-operated commitment facilities house and treat youth who:

- Have been classified as medium-secure or community (programs with lower levels of supervision and increased access to the community) using the Division of Youth Corrections classification instrument.
- May have acute treatment needs that are not combined with high security needs, such as secure classification, prior escapes, prior treatment failures, and violent and assaultive behaviors.
- Have “stepped-down” from a State-operated secure facility to an open community program to prepare for parole, i.e. access to a variety of transition activities that may include employment, school in the community, family visits and therapy, and connections to sustainable community resources.

35. Are State-owned and –operated commitment facilities considered facilities of last resort for the most difficult to manage youth?

Yes, State-owned and –operated commitment facilities are the last resort for commitment youth with complex behavioral needs who are a risk to themselves and/or the community. However, youth may be placed at these facilities for other reasons than complex behavioral needs to manage, such as:

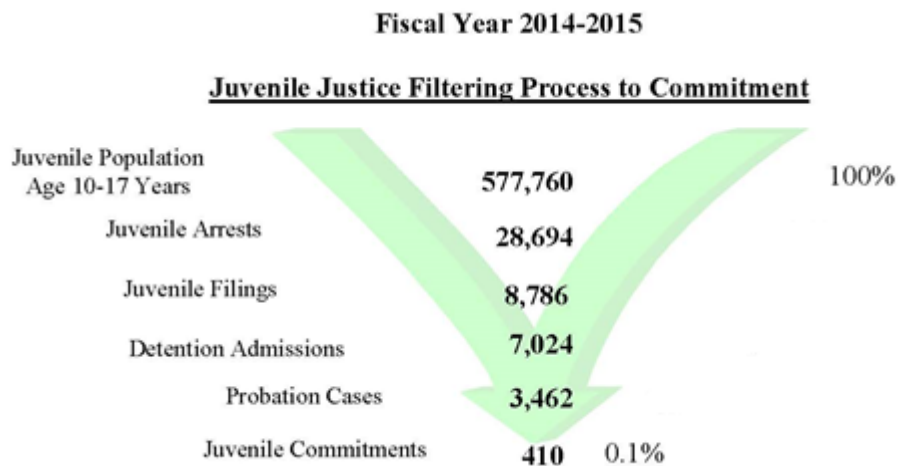
- Newly committed youth engaged in the assessment process or are awaiting their first placement.
- Were placed in a community placement and have either escaped or been terminated from the program. Often these youth are awaiting court proceedings on new criminal offenses.
- Parole Violation – allegation of parole violation or parole revoked by the Juvenile Parole Board.

Youth with complex behavioral needs are those who require a secure setting and services to address a complexity of treatment needs. Youth committed to the custody of the Department

have often exhausted community resources and alternatives, failing in-home treatment and/or residential placement(s). The large majority of these youth have been on probation supervision and acquired new charges or failed to comply with court orders and subsequently been committed to the Department’s custody.

Graphic 1 that follows depicts the population of committed youth in the context of all youth aged 10-17 years in the State for Fiscal Year 2014-15. It then shows the juvenile justice continuum: arrests, filings, detention admissions, probation cases and finally commitments.

Graphic 1



Youth committed to the Department represent .01% of Colorado’s population of youth in the age range of 10-17. In addition, the 410 committed youth represent:

- 4.6% of youth with a juvenile court petition;
- 5.8% of youth with a detention admission; and,
- 11.8% of youth on probation.

In this context, the Department’s Division of Youth Corrections is the alternative of last resort for the juvenile court when probation and non-residential community or residential services have been unsuccessful.

36. Do private facilities for committed youth have the option of refusing a youth for admission?

Yes, contracted private facilities may refuse to accept a youth for admission, or terminate a placement at any time after a youth has been accepted. Newly committed youth are assigned a security classification and are assessed for treatment needs, and those deemed appropriate for contract placements are referred to a provider. The provider reviews assessment information, treatment needs, health and mental health status, and other variables to determine

whether the youth is an appropriate fit for the program. Although every provider has an intended target population and guidelines for placement, referrals can be rejected for any reason. Some examples include:

- Borderline or lower IQ/poor cognitive functioning (unable to benefit from treatment modality);
- Severe attachment issues and an inability to function well in a group setting;
- Client refusing medications deemed clinically necessary;
- Lack of readiness for treatment at the intensity of the provider's program;
- Inappropriate placement due to current program population, for example, a sibling or relative already placed in the program, a significant history between current client and the referred youth (such as victimization, co-defendant, gang affiliations, or other); and,
- A diagnosis beyond the current capability of the program, such as schizophrenic disorders, intermittent explosive disorder, etc.

A youth may also be approved by the program but rejected by the local Community Review Board in a county where such boards must approve a placement in a community-level residential program (See C.R.S. Section 19-2-210. *Juvenile community review board*).

Youth rejected by the provider can be re-referred to another contract provider for assessment and potential placement or placed in a secure state operated program.

37. Please discuss the Department's performance against the metrics captured as part of the C-Stat process for the Division of Youth Corrections.

The Department's C-Stat process includes several measures that focus on the performance of the Division. Examples of these measures and performance over the past 12 months (December 1, 2014 through November 30, 2015) are described below. Several of these measures, including Fights/Assaults, Youth Injuries and Staff Injuries are measured in rates. These rates are calculated on a bed-day basis. This looks at the average daily population of youth in facilities each month and multiplies this by the number of days per month. The raw number of occurrences of each particular measure (Fights/Assaults, Injuries) is then divided by the bed days calculation to arrive at the rate. The Division's facilities vary greatly in size; therefore, the use of rates provides the best possible comparison of facility performance. The C-Stat measures include:

1. Escapes and Walkaways (Escapes are runs from State-operated secure programs while on pass or beyond the secure perimeter fence of the facility itself; and walkaways are runs from private contract programs.)

Performance: The goal for this measure is 10 or fewer total escapes or walkaways per month. The Division has averaged 12.6 walkaways from private contract programs and .75 escapes by youth on pass from secure facilities per month. During this time period

there were no escapes beyond the secure perimeter fence at State-operated facilities. The Division has met the goal 5 of the 12 months (12/1/14-11/30/15).

As the performance on this measure is primarily driven by youth in non-secure contract programs, the Department has extensively researched the issue, and worked closely with providers to devise strategies to reduce occurrences. These strategies have produced mixed results over time as a high percentage of committed youth have significant run histories from prior placements and home. The Division must make placement decisions that take all factors into account and not rely on run history as the sole determinant in security classification. This may therefore result in situations whereby despite having a high run risk a youth may have treatment needs and a security classification that are best matched through a contract non-secure placement.

2. Youth who discharge from the Division of Youth Corrections with a Full or Part-Time program, e.g. work, school, volunteer.

Performance: The goal for this measure is that 85% of all youth who discharge from youth corrections will have a full- or part-time program. Program is defined as a gainful, productive, prosocial activity such as work, school, volunteer activities, or parenting.

For the past 12 months (12/1/14-11/30/15), the Division has averaged 86.3% of youth discharging have a full- or part-time program. The high was 92% while the low was 69.7%. The Division met the goal in 7 of 12 months.

3. Youth who discharge from the Division of Youth Corrections with a GED or Diploma.

Performance: The goal for this measure is that 90% of all discharged youth will have a GED or Diploma. The measure does not count youth who are currently in an educational program at discharge.

Performance has fallen during this 12 month period (12/1/14-11/30/15) from an average of 90.3% to 79.1% over the previous 12 months. While the number of youth achieving a high school diploma has remained the same over the two years, the number of youth attaining a GED has decreased significantly during this time period from 194 to 147. This is attributed to the changes in the GED test that occurred in January 2015 which resulted in youth struggling to pass the math portion of the test. The Department suspects that these challenges are not limited to youth committed to the Division, and is working with Colorado Department of Education to confirm. The Division has invested in new tools to assist youth in test preparation to attempt to improve the rate of passing all of the tests prior discharge. Overall, education is an area of focus for the Department as exemplified by the current budget request for an educational assessment to ensure we are meeting the needs of the youth we serve.

4. Fights and assaults in State-operated facilities

Performance: The ambitious goal for fights and assaults is less than or equal to .26 fights and assaults per 100 bed days per month (national standard recently set by Performance Based Standards was .42 per 100 bed days). While the Division has consistently not met the goal, performance has improved during this 12-month period (12/1/14-11/30/15) with a rate of .47 per 100 bed days; an average of 86.25 fights and assaults per month. Average fights and assaults per facility vary as some facilities have higher incidents based upon their size, while smaller facilities experience fewer. A greater explanation of what steps the Division and Department have taken to address fights and assaults are described in Question 41.

5. Youth injuries in State-operated facilities. (For the purposes of C-Stat, youth injuries are defined as injuries sustained from physical management, fights and assaults or that are self-inflicted.)

Performance: The Department's goal for youth injuries in State-operated facilities is less than or equal to .07 youth injuries per 100 bed days per month. With a rate of .08 per 100 bed days, the Division has not consistently met the goal over the past 12 months (12/1/14-11/30/15); however youth injuries improved to an average of 15.41 times per month, compared to the previous 12 month average of 17.08 injuries per month.

6. Staff Injuries on the job in State-operated facilities as a direct result of youth contact. (Staff injuries captures anytime a staff member completes an Injury on the Job (IOJ) form as a result of youth contact.)

Performance: The ambitious goal for this measure is less than or equal to .02 staff injuries per 100 bed days per month. With a rate of .067 per 100 bed days, the Division has not met this goal over the past 12 months (12/1/14-11/30/15); however staff injuries improved to an average of 12.3 per month over the past 12 months, compared to the previous 12 month average of 17.2 staff injuries per month. The number of injuries varies by facility size.

38. Please describe how recommitments occur and how the number of recommitments in the State-owned commitment facilities compares to the overall number of youth in the facilities.

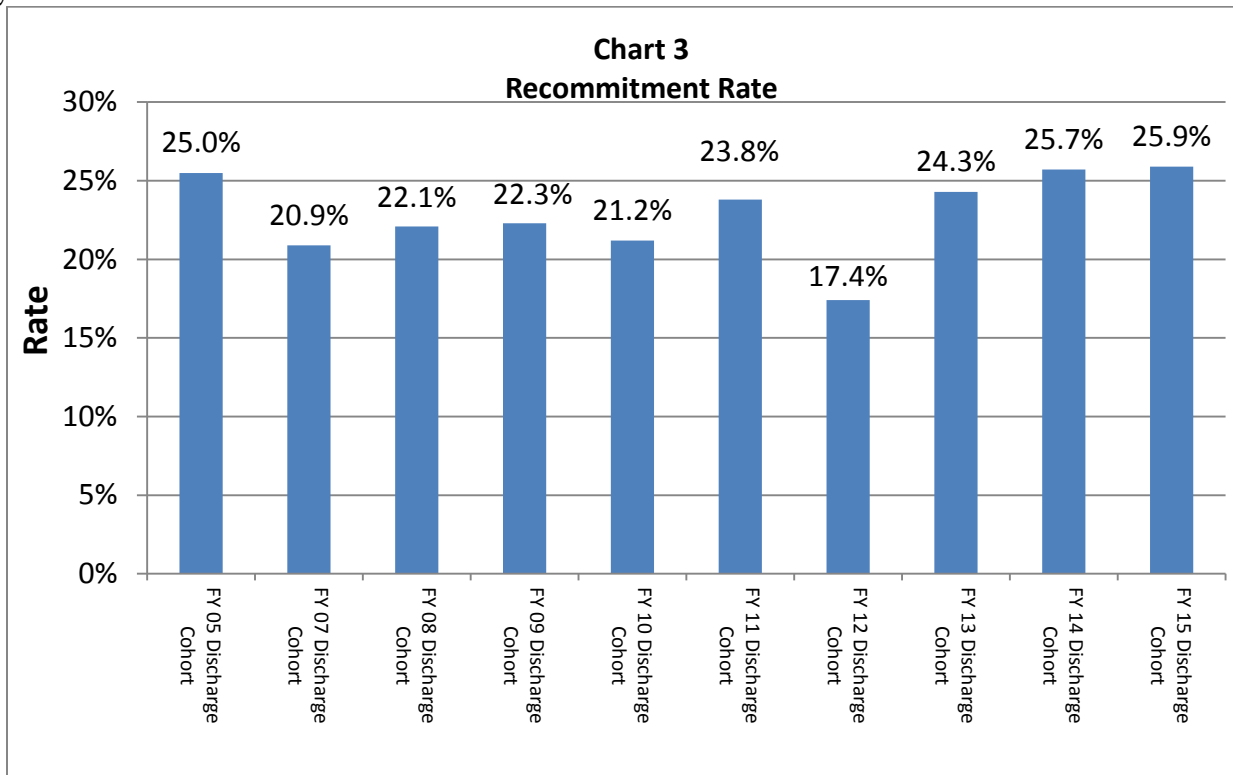
A recommitment occurs when a youth serving a commitment to the Department acquires new criminal charges, is adjudicated on those charges and committed again by the District Court prior to the end of the first sentence. Specifically recommitments are defined by DYC Policy:

- When a youth placed in a State-operated facility or a privately-owned residential program acquires new criminal charges and is adjudicated and sentenced under a new commitment; or

- When a parolee whose original sentence has not expired and is adjudicated and sentenced under a new commitment.

The chart shows the percentage of the average daily population with a recommitment status in a given fiscal year, which shows some fluctuation over the past 10 years.

Chart 3: Percentage the average daily population with a Recommitment Status in a given fiscal year.



39. Is there a relationship between the success (or lack thereof) of the Department and its partners in serving youth in the justice system and the increased number of recommitments?

The Department’s success with youth in the Division’s commitment system is most accurately assessed through several types of outcome measures, including but not limited to recidivism and recommitments.

The Department defines recidivism as a new adjudication or conviction resulting from a misdemeanor or felony offense, within the prescribed follow-up time period(s). This definition was changed in FY 2012-13 from defining recidivism as a new filing (irrespective of a guilty finding) within the same time parameters. The definition was changed from a new

filing to a new adjudication or conviction to be more comparable to other states who track juvenile recidivism.

Table 7: States with Comparable Juvenile Recidivism Measures

State/District	One-Year Recidivism Rate	Two-Year Recidivism Rate	Three-Year Recidivism Rate
Maine*	13%	13%	N/A
Louisiana	20%	36%	46%
Maryland	21%	36%	47%
Colorado	28%	44%	52%
District of Columbia*	37%	N/A	N/A
Idaho*	40%	N/A	N/A
Florida*	42%	N/A	N/A
Virginia	49%	65%	74%
<i>*State does not track youth for a full three year time period.</i>			

Recommitments are another measure of performance; however, this indicator does not represent the larger view of youth success or failure. The Department works with youth to gain long-term success in areas that include: a reduction in the overall risk to reoffend, educational and vocational achievement, the development of critical thinking and emotional regulation skills, gains in mental health (including trauma) and substance use treatment, reductions in the number of recommitments (new charges, adjudications and commitments that occur prior to the original sentence expiration), improvement in family functioning, parole adjustment and reductions in post-discharge recidivism. The overall goal is that youth will become law-abiding, successful members of the community.

Recommitments are reflective of the profile of youth entering the commitment system. The “funnel” to commitment shown in the response to Question 35, shows how the commitment population represents the highest risk youth in the juvenile justice system. They are the relatively few who have been unsuccessful on juvenile probation and often in prior residential treatment programs in the community. Youth who are at the deepest end of the juvenile justice system have ingrained patterns of behavior and of responses to stressful situations (e.g. fighting or running away). They require long-term approaches to treatment and rehabilitation. The act of commitment alone is not the instrument of change. The process of rehabilitation takes a coordinated and integrated approach from several disciplines.

Recommitments based upon new charges for fights and assaults are impacted by the staffing resources available to committed youth. The ability for direct-care staff to develop strong

relationships with committed youth to work one-on-one in the development and practicing of critical skills is a key element to the long-term success described above. Direct-care staff must be able to process with youth in the moment, using real-life situations to establish new behaviors and thinking patterns. Direct-care staff work with individual youth in restorative justice activities (e.g. giving back to the community through mural projects, or preparing a cemetery for Memorial Day, working directly with victims through intensive victim offender dialogue and developing victim empathy) is an example of how favorable staffing ratios can reconnect youth to their communities and, at times, to their victim(s), playing an essential role in treatment. In relation to recommitments, the appropriate amount of direct-care staff allows the Department to not only supervise youth more closely, but provide services that deescalate, defuse and redirect potential violent situations.

40. How did the average daily population in State-owned and –operated facilities compare to the number of assaults and fights from January 2014 through September 2015?

An analysis of Department data indicates that while there has been a modest decline in State-operated secure facilities' Average Daily Population (ADP), the number of fights and assaults did not demonstrate the same trend (see Chart 4). It is important to note that ADP is not a reliable measure for understanding actual highs and lows of daily population within a facility. There are times when a facility can admit and release several youth within a day and this would increase the number of youth served, which is not captured in an ADP measure.

Chart 4: Average Daily Population

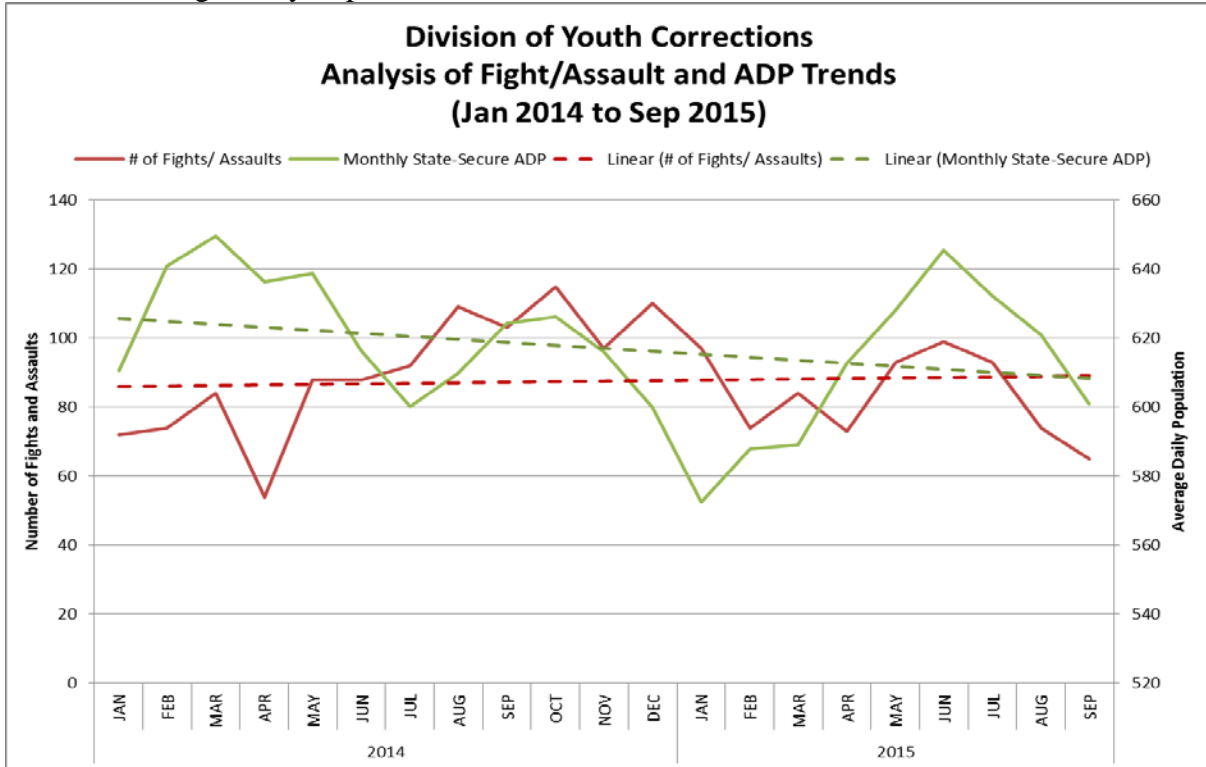
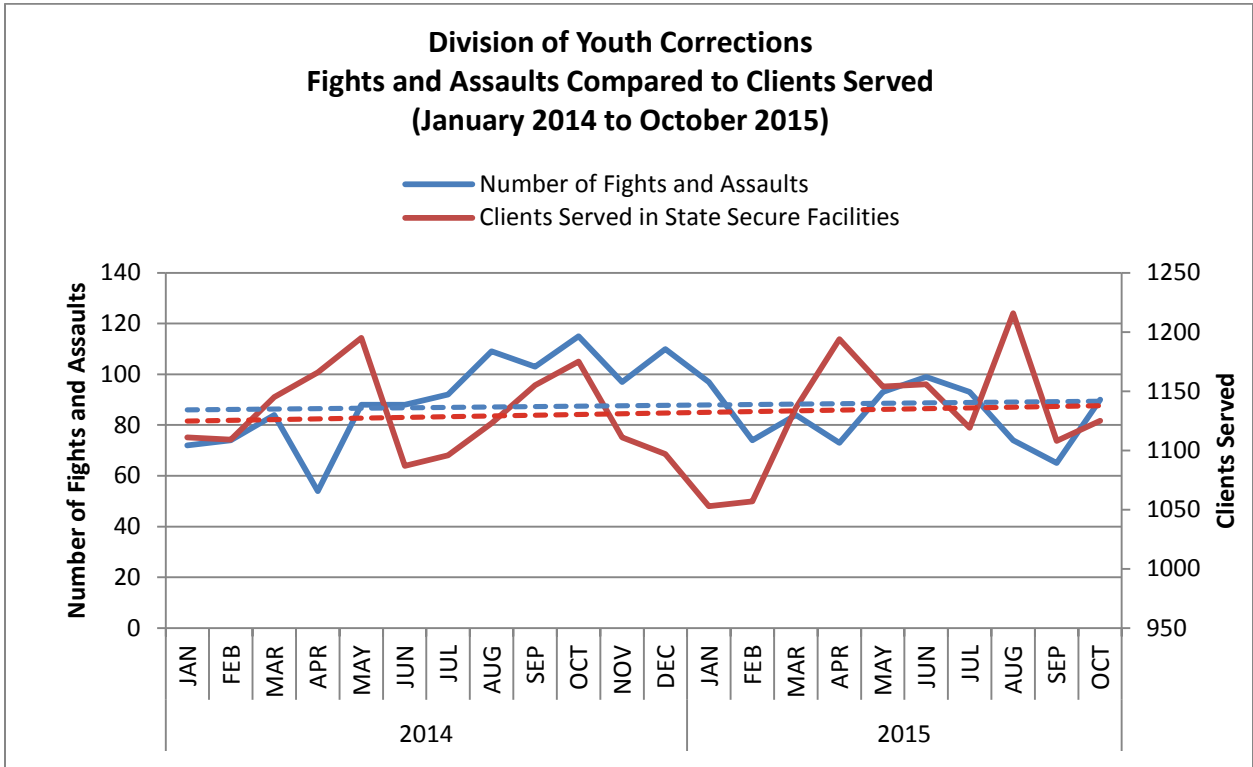


Chart 5 depicts a comparison to fights and assaults to total youth served. This chart demonstrates an almost identical trend line between youth served to fights and assaults. Clients served captures repeat youth incidents and therefore this comparison provides a more complete opportunity to effectively understand how the two measures influence each other.

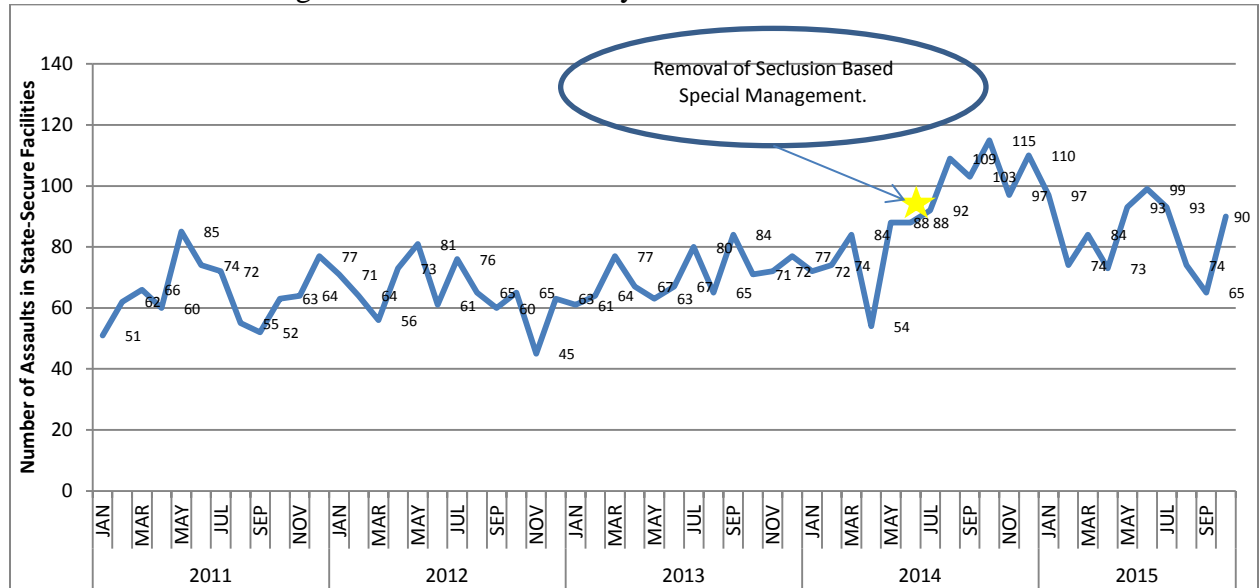
Chart 5: Clients Served



It is important to note the Department has collected data over the course of the last six months that demonstrates roughly 90% of youth served in all State-operated facilities do not have any incidents of a fight, assault, or were a victim of a fight and assault.

41. Are there seasonal factors that contribute to a higher or lower occurrence of assaults and fights in State-owned and -operated facilities? Are there other factors that cause the variability in the monthly level of assaults and fights? Does the Department see the same trends occurring each year?

Chart 6: Number of Fights in DYC from January 2011 to October 2015



The Department continues to look for meaningful trends in the fight and assault data. The question of seasonality has been investigated on numerous occasions. In reviewing this data (58-months of data), the Department has determined that there is not a meaningful seasonal trend; however there are other factors that are suspected to contribute to the frequency of fights and assaults. It is important to note that changes to policy that resulted in the reduction of the usage of seclusion went into effect in July of 2014.

The Department is committed to understanding this phenomenon and implementing interventions to decrease the number of fights and assaults. The factors that could influence the increase in fights and assaults include but are not limited to:

1. Increased density of youth with complex treatment needs (larger portion of youth with multiple treatment needs in the overall milieu and fewer program spaces) of the commitment population in combination with the overall reduction in the size of the commitment population. Both the Colorado Juvenile Risk Assessment (CJRA) and the Colorado Clinical Assessment Record (CCAR) data has remained relatively unchanged in most criminogenic need areas. Although the complexity of these youth contribute to higher degrees of impulsive and aggressive behaviors. The reduction in the commitment and detention populations results in a more concentrated population of difficult to treat complex youth. Lower risk youth who may have in the past contributed to a more pro-

social environment are served in the community and not in a Division detention or commitment facility.

2. As the community has experienced an increase in gang activity, the Department has experienced an increase in gang affiliation, gang recruiting, and gang related incidents within the State-operated facilities. Community gang issues frequently “spill-over” into State-operated facilities, creating a level of unpredictability and often an increase in fights and assaults.
3. In July of 2014 the Division implemented new policies to end the usage of seclusion as a standard practice for special management program. Its use is limited to when there is the presence of threat to self or others. The result of the policy changes increased the amount of time disruptive youth spent in the milieu with other youth and less time residing in seclusion; however the Division did so for six months without reducing staff to youth ratios.

While staff resources alone are not the solution to youth violence in Division facilities, improved staff to youth ratios increase the effectiveness to which the Division delivers the multiple ongoing initiatives designed to impact this dynamic. These include but are not limited to the implementation of: a verbal de-escalation protocol, restorative justice model to repair relationships, a structured behavioral management framework (Positive Behavioral Interventions and Supports), and a trauma-responsive organizational approach and practices (Sanctuary Model).

42. Across the State facilities, do more assaults and fights occur with youth in detention or commitment?

Rates do not appear to differ between commitment and detention facilities. Recently, the Department analyzed over 10 years of Fight/Assault data (FY04-05 through FY14-15 January). Over 127 months, average rate of fights and assaults for committed youth per 100 bed days was .274 and the average rate for detained youth per 100 bed days was .284. The difference in these rates is not statistically significant.

43. Why aren't level one assault incidents declining across the State-owned and –operated facilities as much as level two and level three incidents?

Level One Assaults, the most serious assaults, have remained at a very low number over the last 24 months. Specifically, Level One Assaults have peaked at eight in a single month, with a 24-month average of just slightly fewer than four per month. With such a low sample size it is extremely difficult to demonstrate a comparable decrease in relation to Level Two and Level Three Assaults.

Incident Type	Monthly Average (Pre Staffing Increase)	Monthly Average (Post Staffing Increase)	Difference
Level I Assault	4.7	3.9	(0.78)
Level II Assault	16.5	10.7	(5.83)
Level III Assault	28.5	26.7	(1.83)
Fights	40.2	41.7	1.5

44. Is there a relationship between the lack of a State-owned and –operated facility for youth with severe behavioral health needs and the high number of fights and assaults?

The Department does not believe there is a direct relationship between the lack of a State-owned and –operated facility for youth with severe behavioral health needs and the number of assaults and fights.

Commitment Youth

It is important to note that the Department has not necessarily experienced an increase in the proportion of committed youth with severe mental health needs; rather, there has been an increase in the proportion of youth with complex combinations of treatment needs. These treatment needs include but are not limited to:

- Histories and current incidences of violent and aggressive behavior in the community, in placement and in DYC facilities (detention and assessment).
- Histories of multiple past placement failures in the community or in DYC.
- Secure classification.
- Extensive criminal histories.
- Substance use treatment needs.
- Mental health treatment needs, including severe trauma.
- Family treatment needs, often requiring placing youth in close proximity to parents and the issue of keeping youth with their own children close to facilitate ongoing bonding.

- Gang involvement and histories of multi-generational gang membership.
- Sex offense specific treatment needs.
- Cognitive functioning issues.
- Refusal to participate in treatment.

Detention Youth

The response to Question 42 above explains that there is no real difference between detention and commitment youth in terms of who is responsible for fights and assaults. Since half of all fights and assaults are attributed to detained youth, a State-operated facility for committed youth with severe behavioral health needs would not influence the detained population.

Assaultive and Aggressive Youth

The Department has not found a direct connection between youth with severe mental illness and assaultive and aggressive behaviors. In December of 2014, the Department provided the Joint Budget Committee with information on the increase in gang activity in Division of Youth Corrections' facilities. It was reported that a May of 2013 review of six-months of incidents report data found that approximately 65% of assaults and fights included an element of gang involved youth/issues. This information is provided to demonstrate that assaults and fights can be attributed to a number of issues that include but are not limited to a history of complex trauma, violence and aggression, gang involvement and mental health issues.

Sol Vista Youth Services Center

The Department did operate Sol Vista, a small facility for committed youth with severe mental health issues. The program closed in 2011. The facility was able to serve 20 males. The data provided in Question 41 shows the history of fights and assaults in NYC State-operated facilities since 2011. The chart demonstrates that following the closure of Sol Vista in November of 2011, there was no significant increase in the number of fights and assaults until mid-2014. There does not appear to be a direct relationship between the closure of Sol Vista and the rise in such incidents.

The Department believes that placing youth with complex behavioral health needs all in one facility is not feasible and has clear drawbacks. The Department serves such a large number of youth who fit this profile that a single facility would not be adequate. Rather the Department believes the optimal method to serving these youth lies in ensuring an integrated treatment approach at all commitment facilities with appropriate staff to youth ratios for supervision and behavioral health staff.

Family proximity is a primary consideration for the placement of committed youth. A single facility approach would restrict the family's ability to remain engaged in youth's lives and treatment as well as hinder transition to home communities.

45. How do the number of fights in State-owned and –operated commitment facilities compare to privately-operated commitment facilities?

The Department has conducted a review of several privately-operated facilities. The privately-operated fight and assaults definitions vary greatly from facility to facility and do not align with the DYC fight and assault definitions. The Department’s fight and assault definitions are comprehensive and include any incident where contact was made between parties, including assaults on youth and staff, as well as a separate category for fights. Because of the wide disparity between the State-operated definitions and the privately-operated definitions, an accurate comparison cannot be made between placement types. It is important to note, that as a result of placements via the assessment process, privately-operated facilities in the community serve a lower risk population and subsequently have a reduced risk for fights/assaults.

46. What is the target number for assaults and fights in State-owned and –operated detention and commitment facilities?

The Department’s C-Stat goal for fights and assaults is a rate of less than 0.26 fights per 100 bed days. As discussed in Question 37, the Department uses this rate to measure fights and assaults in DYC State-operated facilities. This approach allows the Department to view facilities from a level playing field, allowing comparisons between facilities of disparate size. In addition, the Department’s Lookout Mountain Youth Services Center (LMYSC), the largest state-operated facility, participates in a national review of facilities known as Performance Based Standards (PbS). PbS promotes itself as a data-driven improvement model grounded in research that holds juvenile justice agencies, facilities and residential care providers to the highest standards for operations, programs and services. PbS has reported that the national field average for October is approximately 0.42 fights and assaults per 100 bed days. In comparison to the field average, LMYSC had 38% fewer fights and assaults than the national average. The Statewide fight and assault rate for the month of October was 0.47.

47. What is the relationship between staff-to-youth ratios and the number of assaults and fights over the last ten years?

The Department does not have comparable data on fights and assaults over the past ten years. During this period, the definition of fights and assaults has been revised on several occasions, while documentation and data collection methods and practices have also been modified. In addition, historically, Division facilities have been staffed based upon a critical post model

which does not account for staff to youth ratios. A review of the average staff-to-youth ratios prior to the initial staffing increase in January of 2015 as compared to the post averages showed a slight improvement of the overall staff-to-youth ratio, as demonstrated in Table 9. It is important to note that the number of allocated FTEs from month to month will impact the ratio to some small degree.

Table 9	Prior to staff increase		Post Staff Increase	
	Waking	Sleeping	Waking	Sleeping
Division	10.99	18.35	9.68	15.62

The incorporation of last year’s staffing allocation helped to support the mission of the Department and positively affected safety and security. While all facilities saw an infusion of new staff, many were allocated where the need for relief was greatest; an example of this was after information determined deficiency in night shift staff, FTE were allocated where increased supervision was needed. In facilities where the greatest need was on active shifts, there as a notable positive impact on the level of violence. For example, Zebulon Pike has seen a 30% reduction in the average number of monthly assaults and fights since the addition of 9 staff.

48. What are the correct staff-to-youth ratios at each of the State-owned and –operated facilities? How many additional positions at each facility are required to get to the correct level?

In consideration of safety and security issues, the Division is ultimately requesting alignment with Prison Rape Elimination Act (PREA) standards of staffing ratios which are 1:8 during waking hours and 1:16 during sleeping hours. With 125.0 additional FTE, the Department will achieve a 1:10 ratio during waking hours and a 1:20 ratio during sleeping hours. An additional 80.0 FTE in a future year will allow the Department to reach the PREA standards of staffing ratios to effectively and safely supervise youth in DYC detention and commitment systems. This has been determined by reviewing the capacity of each living unit within each facility to calculate staff required. In addition, operational duties which are performed by direct care staff have been incorporated into the calculation, as these duties remove direct care staff from direct supervision of youth.

In addition to improved supervision, an improved staff to youth ratio results in other significant benefits. Such benefits include (1) An ability for direct-care staff to engage youth in appropriate relationships that positively impact fights and assaults as well as a youth’s ability to take advantage of treatment; (2) An ability for direct-care staff to work directly with youth to practice skills that will promote emotional regulation and non-violent conflict resolution; (3) An ability for direct-care staff to employ restorative justice practices and engage in activities both as a response to specific behaviors and as a treatment practice to reconnect youth to local communities; (4) Staff resources to intervene in situations before they become violent; and (5) Encourage and support family engagement activities within facilities.

In summary, an improved staff to youth ratio has short- and long-term benefits that include: greater safety of a facility for both youth and staff, the ability for youth to take full advantage of educational and vocational opportunities as well as the services offered to change their behavior and increase their skills.

49. Are staff-to-youth ratios different between State-owned and -operated detention and commitment facilities?

No, while each facility has a different ratio based on physical plant layout and existing staff allocated, there is no intentional difference in ratios between State-owned and -operated detention and commitment facilities. While needs and services vary by facility type, staffing supervision needs of youth are consistent.

50. Are penalties associated with failing to meet PREA-prescribed staff-to-youth ratios one-time or ongoing?

The penalties are ongoing. Under PREA, states that receive Department of Justice (DOJ) grant funding must certify that they are in compliance with the DOJ National Standards to Prevent, Detect, and Respond to Prison Rape, 42 U.S.C. 15607(e), or else be subject to the loss or reallocation of specified funding. Because funding can be utilized for a variety of purposes, a 5% reduction (\$210,109) will be applied each year a Governor does not certify full compliance with the PREA standards.

51. Why does the Gilliam facility have an identical staff-to-youth ratio during the waking hours and during the sleeping hours?

Calculating staff ratios in aggregate for the entire facility does not adequately portray staffing ratios by living unit. Gilliam has slightly higher staff to youth ratio during sleeping hours than has been presented. The facility’s small pod sizes result in ratios that are more alike during waking and sleeping hours than any other facility. As shown in Table 10, Gilliam has living units sized 8 and 12 beds, with the available staff (Note: the assignment of a “second” staff in living units A and X is for demonstration purposes of ratio and it is more likely those two staff float between units as needed), the facility runs from 1:6 up to 1:12 during the day and 1:8 to 1:12 during the evening.

Table 10 Living Units	Waking Hours			Sleeping Hours	
	Beds	Staff	Ratio	Staff	Ratio
A	12	2	6:1	1	12:1
B	12	1	12:1	1	12:1
C	8	1	8:1	1	8:1
X	12	2	6:1	1	12:1
Y	8	1	8:1	1	8:1
W	12	1	12:1	1	12:1

52. Why does the Gilliam facility have a better staff-to-youth ratio than any of the other State-owned and -operated detention and commitment facilities?

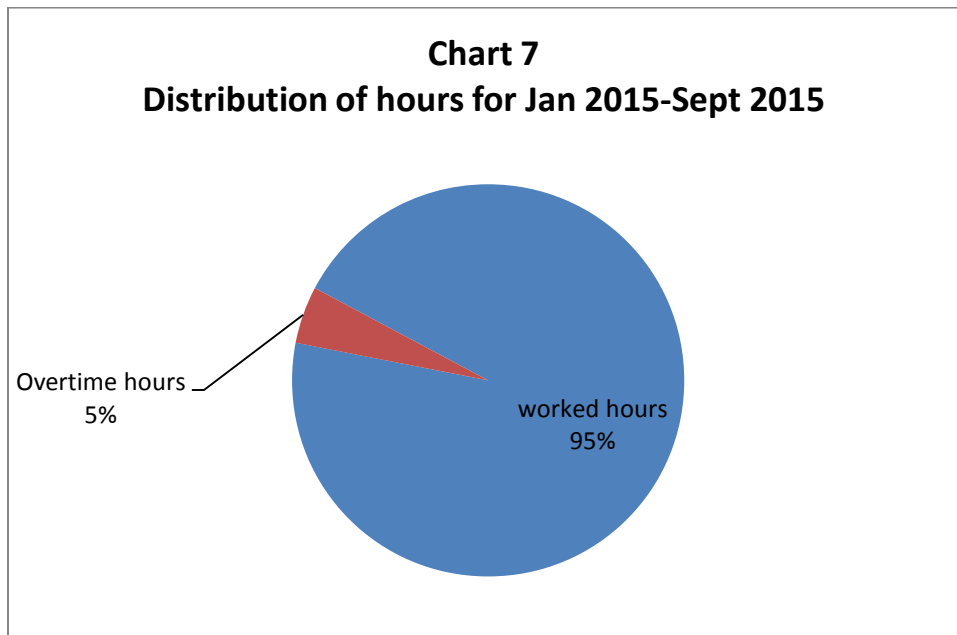
Gilliam Youth Services Center’s staff to youth ratio is driven by the facility’s unique design. Gilliam has housing units of either eight or twelve beds. Since each of Gilliam’s living units operate with one staff member, the ratios are typically lower than those in other facilities where housing units can be up to twenty beds. Those 20-bed units would be generally be manned with 1 or 2 staff resulting in a 1:10 or 1:20 ratio compared to Gilliam’s 1:8 ratio in an 8-bed unit and 1:12 ratio in the 12-bed units.

53. Since 75 new FTE were added last year, why is the Department experiencing an increase in overtime work hours in the State-owned and -operated detention and commitment facilities? Why do temporary hours continue to increase?

The new FTE added last FY were not intended to reduce overtime utilization, but were intended to create new posts in an effort to improve services, i.e. improve the staff to youth ratio and not to enhance the shift relief factor. The shift relief factor is defined as the number

of FTE required to cover one post 24/7, 365 days per year. The factor includes such things as annual and sick leave, training and forms of unpaid leave. Since the Division views having adequate staff to youth ratios as integral to the success of the programming provided to youth, it works to keep posts fully staffed. If the Department used the new FTE to address overtime situations, it would not be able to achieve improvements through the 75 new positions.

In addition to overtime and temporary employees serving to cover critical posts in the situations mentioned above, the normal flow of vacancies and the increased requirements for training contribute to the need for overtime. Additionally, an effort to improve programming and create a stronger milieu resulted in an increase of annual training requirements, which is greater than the hours calculated in the shift relief factor and therefore is covered by overtime. Most temporary employees are utilized to cover for military leave. Specifically, the facilities in the southern region (Spring Creek, Zebulon Pike, and Pueblo YSC) have the highest proportion of staff serving in the military and subsequently utilize the largest percent of temporary hours. The average amount of overtime per month per employee is 7.7 hours (only considering employees who are eligible to earn overtime).



54. How much would the staffing increase sought for FY 2016-17 lower the hours of overtime and temporary help worked in each facility?

In the same manner as the 75 FTE added last FY, the staffing increase sought for FY 2016-17 is intended to create new posts to enhance safety and programming through improved staff to youth ratios. Overtime is a necessary tool to manage normal day-to-day vacancies and to ensure safe environments for youth and staff. Temporary positions will continue to be utilized to hold positions for our staff serving in the military, awaiting their return. With an increase

staff, the Division will be better situated to manage overtime and will need to change its approach to keeping all post filled at all times; however the existence of additional posts would reduce the impact on programming.

55. Does the Department consider the number of unplanned absences throughout the State-owned and -operated detention and commitment facilities to be a management issue that must be addressed?

The Department does not consider that unplanned absences are a management issue. Unplanned leave includes many situations beyond the control of a facility's administration. The circumstances that are classified as unplanned leave include sick leave, unpaid leave, jury duty, funeral leave, administrative leave and Workers Comp. For 2015, sick leave accounted for 45% of unplanned leave followed by unpaid leave which accounted for 36%. Unpaid leave occurs when an employee is out for an extended time and has no other leave banks available. This typically occurs in cases of military deployment and for medical issues. Other types of unplanned absence include employees on administrative leave, funeral leave, jury duty, worker's compensation, and family medical leave. In summary, unpaid leave has a similar impact to unplanned leave, but does not reflect particular management practices.

To ensure consistent oversight of these issues, internal monthly management reports are produced that track absences by facility due to Injury on the Job and Family Medical Leave, as well the overall number of deployable direct care staff. The Division's Leadership Team reviews these regularly for anomalies.

As explained in Question 40, the Department anticipates unplanned absences via the calculation of a Shift-Relief Factor. Further, the Division has compared the Shift Relief Factors used by several other juvenile justice agencies. A report published March 6, 2015 by the Association of State Correctional Administrators (ASCA) notes the following shift relief comparisons:

Vermont:	5.46
Nevada:	5.41
Oregon:	5.16
ASCA Recommendation:	5.43

The Department utilizes a shift relief factor of 5.2, a figure that appears to be close to the states and organizations noted above.

56. Does the Department hire and train on a continuous basis in an effort to decrease the number of vacancies?

Yes, the Department is continuously recruiting, posting, testing, and hiring. The Department takes steps to fill a position immediately upon official notice that a position will be vacated.

Recruiting efforts have included the establishment of routine job fairs around the State. The Department has established contacts Statewide with higher education and consistently participates in on-campus job fairs. The Department has also developed a brochure and recruitment banner that provides detailed information on job opportunities within the Division. These tools are utilized at each of the job fairs. In addition, the job fair booth is staffed by State-operated facility administrators to provide detailed information to potential candidates and answer specific questions about positions. The Department has also widened their approach to advertising open positions by utilizing websites such as Indeed and Monster. These efforts allow access to a larger applicant pool, specifically people who may not review the State website job postings. The Department continues to develop other tools, for example, there is currently work in progress on a recruitment video that features current Division employees. The video provides prospective applicants a “day in the life” perspective of a youth corrections direct-care worker.

In addition to recruiting the Department has developed a method to gain efficiencies and coordination among the ten facilities through a database that tracks applicants across the ten state-operated facilities. This allows for the coordination of interviews, and eventually the best placement of a successful candidate. The Department is also working on a program to screen applicants to ensure a good “fit” for work in a juvenile corrections setting.

Based upon the normal cycle of vacancies and hiring expected from a work force of approximately 600 direct-care staff and supervisors, which are typically entry level positions, the Department is continually training new staff. Training includes a three week “academy” and then an on-the-job-training program called Field Training Orientation (FTO). The FTO program pairs a new employee with a veteran employee for approximately three weeks and requires the new staff to demonstrate proficiency in a number of areas.

57. Are pay levels for staff at State-owned and –operated commitment facilities comparable to pay levels for staff at privately-operated commitment facilities?

At the direct-care level, State-owned and -operated commitment facility staff are typically paid more than staff with similar responsibilities at privately-operated commitment facilities. While contract providers consider their pay grades proprietary information, some entry level salaries are published for employment recruiting purposes. The entry level direct line staff position salaries were examined for six contractors that offer residential services for committed youth in Colorado. The posted entry level range was \$1,680 to \$2,500/month. That compares to a starting salary of \$3,949 for a Division of Youth Corrections Youths Services Counselor I.

Direct care supervisor-level positions were examined for two providers. Entry level salaries for these positions ranged from \$3,000 to \$4,000 monthly. A supervisor-level position in a DYC facility (i.e., Correctional Officer III) earns \$4,019.

Some of this difference in salary is explained by educational qualifications for employment. Among private contractors a high school diploma is required, and for DYC entry level positions, a college degree is required or some experience in the field can substitute for the degree.

58. What data are collected regarding job satisfaction for staff in State-owned and – operated facilities? What does the data show? Is the Department implementing strategies to improve employee satisfaction and, if so, what are the strategies?

The Department has conducted a Division of Youth Corrections' Employee Job Satisfaction Survey in 2010, 2012 and 2015. In 2015, 836 out of approximately 1,000 employees completed the survey. Overall, the results of the 2015 survey were very positive. The following are examples of the survey results.

Greater than 90% of Department employees working in the Division of Youth Corrections report that they:

- Understand the mission and vision of the agency;
- Feel treated with respect and appreciated by their peers;
- Feel sexually safe at work;
- Believe that staff treat youth with respect; and,
- Believe that if staff or youth witness misconduct they report it.

80% or more Division of Youth Corrections staff:

- Believe they are positively challenged in their work;
- Receive adequate support from supervisors;
- Are treated with respect by managers;
- Believe managers use their authority appropriately;
- Believe the Division fosters an atmosphere of dignity and respect; and
- Believe their work environment is physically safe for them;
- Believe the work environment is physically safe for youth.

In addition to ongoing efforts to continually improving the areas above; the survey identified issues that require more attention. Examples include:

- 50% of staff feel that youth do not treat them with respect.
- 30% of staff believe they can professionally disagree with decisions and not be subject to retaliation. This has improved 17 percentage points since 2010; however, it is an area the Department would like continue to improve.
- Through the comments section of the survey, a recurring theme for staff is their desire to have more interaction with Division leadership.
- Another theme has been staff feelings of being overwhelmed by the pace of change in the organization. This is primarily in regard to programmatic changes.

- This survey, as well as that in 2012, has included many comments about the nature of working with very complex and often assaultive and aggressive youth.

In response to the findings of this survey and the previous surveys, the Department has implemented several strategies, examples include:

1. The Division Director and Associate Directors have begun quarterly visits at each facility and regional office to allow staff the opportunity to discuss their concerns and challenges directly with leadership.
2. Expanded the Field Training Officer (FTO) program to all 10 facilities. This program is designed to give new employees a mentor during the first months of employment.
3. Developed training for staff in leadership skills to prepare those interested in advancing in the organization.
4. Developed an “Employee Voice Line”, a telephone number for employees to call in and provide Division leadership with direct feedback regarding pressing issues or concerns or to discuss what may be working well.
5. Implemented approaches intended to assist staff in working with complex youth both in detention and commitment. These include:
 - The Sanctuary Model – a trauma-responsive cultural change model that provides Department staff with tools to work with traumatized youth in new ways. The model is also effective in assisting and supporting staff who have been traumatized.
 - Verbal de-escalation- the Department has implemented a verbal de-escalation model that provides staff with concrete tools to use with youth.
6. Implemented Change Management practices to slow the pace of change to ensure staff involvement in change processes and overall improve communication between leadership and line staff.

Professional Growth and Training

7. The Department understands that professional growth and training is important to retention, recruitment and employee morale. This year we made major improvements to develop and deliver a strategic training program that is aligned with the mission and vision of the Department is to ensure that employees have the right training at the right time.
8. The most exciting initiative this year is the development of a Learning Management System, Cornerstone. Cornerstone will allow for training to be web based, self-directed, trackable and also tied into individual performance.
9. We are providing a catalog of new trainings for all employees including iLove Feedback, Crucial Conversations, and Leading at the Speed of Trust. We have also brought in industry leaders in training such as Franklin Covey, Vital Smarts and Fred Pryor. These trainings are offered free of charge to all employees. For new managers and supervisors, we now have a Leadership Series.

Increased Communications

10. The Department has worked to increase communications to our employees including a weekly, department-wide newsletter, Connections, that highlights all of the great things

our employees do on a daily basis. We also have a weekly newsletter, Solutions, which is sent out to all employees to communicate items such as changes to benefits, revised policies, wellness opportunities, and upcoming training opportunities.

11. The Department has also dedicated additional resources to communications and has asked each office to designate a communications person.

Improved Technology

12. The Department understands that having a computer not working or waiting for a technology fix can be very detrimental to performance and effectiveness. We listened and heard that slow IT support and service adversely impacted our employee work environment. We stepped up and initiated several efforts to improve the IT environment. We upgraded over 4,000 computers from Windows XP and Office 2000 to Windows 7 and Office 2010. We removed Novell from the IT environment to make our computing environment less complex and easier to support.
13. The Department led the effort to include performance management in our Service Level Agreement (SLA) with OIT. We jointly focused on the Service Desk, Access Control and Desk Side Support. In the first year, we reduced Desk Side Support tickets from a peak of almost 900 tickets in January 2015 to less than 600 in September 2015. At the same time we improved resolution time for changes by 66% from an average of 19 days in October 2014 to 6.4 days in August 2015.
14. The Department's SLA was so successful that it is being used by OIT for all agencies in FY 2015-16. We have also expanded performance management this year to the IT systems that OIT operates for the Department to include Trails, CHATS, and ACSES.

Increased Safety and Security

15. The Department understands that it is important to work in an environment that is safe, clean and functional and have striven to improve conditions throughout all campuses and buildings. Over the last two years we have managed significant face-lifts and security improvements of office space, not only here at 1575 Sherman, but at Ft. Logan, CMHIP, and Grand Junction.
16. Over the last two years we have also managed \$20 million dollars' worth of facility improvements including Capital Appropriations, Controlled maintenance and Capital Outlay. We have made improvements in the Youth Correction Facilities, in the Mental Health Hospitals and in the Regional Centers. Many of these improvements have focused on suicide mitigation and safety and risk mitigation within the facilities.
17. The Department has hired additional staff at the Division of Youth Corrections to ensure that staff are properly supported.
18. The Department updated our Continuity of Operations Plan to ensure we can continue to operate smoothly during a large-scale disaster. All facility emergency plans have also been updated.
19. The Department has created a Risk Management Unit by bringing together Safety and Workers' Compensation, with the intent to lower the number of injuries that we employees sustain and consistently manage our workers' compensation claims.
20. The Department has implemented a safety visit program for our direct care facilities wherein the Risk Management Unit, in partnership with Facilities Management, visits

each facility bi-annually to assist them with any safety issues, including fire safety, life safety code, and injury prevention initiatives.

21. The Department has also implemented a department-wide safety competency—the only state agency to do so. We are serious about creating a safe work environment and want to raise safety awareness across the Department.
22. The Department has also increased the availability of training related to safety. We offer CPR/First Aid training throughout the state, workers’ compensation training, safety for employees who often have to work alone, be it conducting home visits or travelling frequently, as well as offering scholarships for employees to attend “Fundamentals of Safety” training through Department of Personnel and Administration.

59. How is the State able to meet its educational obligations if the Department is requesting a 1.0 percent provider rate decrease for teachers?

Detention education is provided by local school districts and will not be impacted by a 1% provider rate decrease.

Education programs for committed youth at Mount View, Grand Mesa, and Zeb Pike are staffed by State teachers. Lookout Mountain, Spring Creek, Platte Valley are operated through contracts. The total impact to these three contracted educational programs is \$31,953. The Department is hopeful the amount will be absorbed through operating expense reductions, and therefore anticipate this will have a negligible impact upon services.

60. How would the proposed 1.0 percent reduction in rates paid to community providers impact behavioral health services offered to youth?

A reduction in rates, or available funding, could potentially impact behavioral health services in community provider programs. The Department has not yet received detailed feedback from community providers and other contractors however, the Department anticipates that this decrease in revenue will have a negative impact on the capacity to serve clients and maintain competitive salaries. Regardless of reduced rates, providers will need to continue direct line supervision staffing ratios to maintain licensing compliance. As a result, providers will likely have to turn to reductions in operational costs, behavioral health services, educational programming and other budget lines. It is too early to know how they would distribute the reduction across lines or the depth of any such impacts.

61. How would additional staff lead to reductions in the use of seclusion and isolation?

The Department, by statute and policy, only uses seclusion in cases of emergency when a serious probable, imminent threat of bodily harm to self or others exists and where there is the present ability for a youth to affect such bodily harm. Additional FTE ensures staffing assignments are adequate to engage youth in a proactive manner to meet their needs, establish relationships, de-escalate potentially explosive and/or dangerous milieu episodes and effectively intervene before a major incident occurs. Division staff have been trained in a formal verbal de-escalation practice that with an increase in staff can be used most effectively and frequently.

Given a greater staff to youth ratio, one staff can engage and/or remove a youth from a living area/classroom/volatile situation and deescalate the youth while the other staff is available to supervise those remaining in the milieu. In addition, this affords an opportunity to have one staff supervise a pod of youth while a second staff on a pod to mediate conflict between two youth before it escalates into a physical altercation. These interventions reduce opportunities for an emergent issue that results in seclusion. With an appropriate staff to youth ratio, the Department improves the response time for emergency situations and therefore, increases safety. Reports from the field indicate that staff have more success with youth when they have the ability to address low level behaviors before they escalate, which is supported by the appropriate staff to youth ratio.

In addition, appropriate ratios allow staff to establish therapeutic relationships with youth as opposed to a supervision-only focus. These relationships are critical in 1) creating a foundation for de-escalating behaviors with youth; and 2) direct-care staff's work to teach youth new skills in such areas as regulating behaviors, and positively addressing conflict and frustration. Youth who have been taught skills in anger management, to regulate their emotions, and conflict resolution skills are less likely to engage in assaultive behaviors. The Department, by statute and policy, only uses seclusion in cases of emergency when a serious probable, imminent threat of bodily harm to self or others exists and where there is the present ability for a youth to affect such bodily harm. Additional FTE ensures staffing assignments are adequate to engage youth in a proactive manner to meet their needs, establish relationships, de-escalate potentially explosive and/or dangerous milieu episodes and effectively intervene before a major incident occurs.

62. Please provide a status update on the Department's efforts to reduce the occurrences of medication misuse.

As reported to the Legislative Audit Committee in July of 2015, the Department has taken extensive steps to improve the medical care provided to detained and committed youth in Division of Youth Corrections facilities.

The Department restructured the system for the provision and oversight of all medical services provided to detained and committed youth. This new structure placed a new set of guidelines and expectations on the 3rd party medical administrator (specific to the provision of services by contract physicians), Division staff, and the privately contracted residential programs that have on-site medical services. The information below outlines these new guidelines and expectations. They include but are not limited to a monthly review of medications (with a specific focus on the use of psychotropics), review of complex medical cases, new procedures for reviewing the care of youth with chronic diseases, expectations for standards of care through the adoption of the Parameters for the use of Psychotropic Medications in Children and Adolescents and Clinical Guidelines in Family Practice, expectation for documentation and the creation of a medical oversight team with the responsibility to audit facilities, and review critical incidents. The following is a detailed explanation of each of these areas:

1. Adoption of the “Parameters for the Use of Psychotropic Medications in Children and Adolescents.” The parameters address issues related to treatment of psychiatric diagnoses, conducting baseline and ongoing laboratory and vital signs testing, and monitoring psychotropic use. The parameters also encourage greater consistency between providers.
2. Through the Legislature’s appropriation of new positions for medical oversight, the Department has been able to develop a team of one physician, two nurses, and two healthcare professionals to:
 - a. Review data, ensure case coordination, and monitor compliance with evidence-based practices for youth with complex conditions.
 - b. Conduct regular chart reviews at NYC State-operated facilities and those contract programs with on-site medical services.
 - c. Identify complex cases for clinical review.
 - d. Allow for specific drug monitoring according to the guidelines adopted by the Department.
 - e. Conduct regular site monitoring at State-operated facilities and contractors with on-site medical services.
3. The same appropriation has allowed the Department to develop a relationship with the National Commission on Correctional Health Care (NCCHC). The Department’s intention is to have all Division facilities meet NCCHC standards.
4. The Department has made improvements in the process for obtaining consent for the use of psychotropic medications. These improvements have resulted in improved documentation, as well as a more thorough process for obtaining appropriate consent.
5. The Department has also taken numerous steps to improve the administration of medication. These include:
 - a. Directives that require that the execution of all physician orders be entered into Trails.
 - b. Directive that requires all medical notes are entered into Trails.
 - c. Developed implementing procedures to ensure orders are entered into Trails.
 - d. Developed policy to ensure orders are transcribed and executed within 24 hours.
 - e. Developed policy and protocol for Direct Observation Therapy.

- f. Added review of all elements to the Department's Audit process for NYC State-operated facilities and those contract facilities with on-site medical care.
6. In regard to the monitoring of medication effectiveness and safety, the Department has developed and implemented a list of high risk conditions to monitor, including psychotropic medications. Monitoring the documentation will be the purview of the newly created medical oversight team.
7. The Department has made significant progress in the safeguarding of prescription medications. Implementing procedures have been developed for inventorying controlled substances and quarterly monitoring of inventory practices will be conducted by the Department's medical oversight team. The contract pharmacy for NYC State-operated facilities has been engaged to package all medications for youth leaving facilities on pass. Hazardous waste will be disposed of through the contract vendor.
8. Providing new procedures and tools to monitor youth with chronic conditions.

3:20-3:30 SENATE BILL 15-109 TASK FORCE FINDINGS AND RECOMMENDATIONS

63. Please provide an update on the Department's intentions to implement the Task Force's recommendations.

The Department supports the recommendations of the At-Risk Adults with Intellectual and Developmental Disabilities Mandatory Reporting Task Force, created by S.B. 15-109 and will work collaboratively with the Governor's Office of State Planning and Budgeting and the Legislature to determine how to implement the recommendations.

64. Why did the Department not request funding in the FY 2016-17 budget request to implement the recommendations from the Task Force?

The Department supports the recommendations of the At-Risk Adults with Intellectual and Developmental Disabilities Mandatory Reporting Task Force, created by S.B. 15-109 and will work collaboratively with the Governor's Office of State Planning and Budgeting and the Legislature to determine how to implement the recommendations.

3:30-3:35 ADULT ASSISTANCE PROGRAM FUNDING

65. Does the Department project that it will receive a transfer into the Older Coloradoans Cash Fund due to under-expenditures in the Senior Citizen and Disabled Veteran Property Tax Exemption? If so, should the Joint Budget Committee anticipate a supplemental request for the Department to expend the moneys? How would these moneys be used?

On July 24, 2015, the Department received a transfer of \$1,519,482.11 cash funds into the Older Coloradoans Cash Fund from the Department of Revenue.

Yes, the Department submitted a supplemental request on January 4, 2016 for spending authority in FY 2015-16 to allocate funds to the Area Agencies on Aging. Because supplemental spending authority would not be available to spend until March or April 2016, the Department requested that the spending authority for these funds have roll forward authority to FY 2016-17 so that the funds can be fully utilized.

The funds will be used to increase services currently provided by Area Agencies on Aging (AAAs) through the State Funding For Senior Services line item, such as transportation, home care assistance, and home delivered meals. Per statute, the funds will be distributed to AAAs based on the current funding formula. AAAs will be instructed to focus on areas of most need in their communities.

3:35-3:45 COLORADO REFUGEE SERVICES PROGRAM

66. Please provide an overview of the services the Department provides to refugees entering and residing in Colorado.

The Department coordinates refugee resettlement in Colorado through partnerships with federal, state, county, and local entities and by federally-funded grant awards to nonprofit agencies serving refugees. The Department does not offer direct services; instead, it works through its contractors to assist refugees work towards employment, self-sufficiency, and cultural integration.

Refugees receive individualized services to meet their needs through the assortment of contractors:

- Employment assistance via dedicated career counselors, job developers, and job clubs;
- English as a Second Language (ESL) training;
- Cultural Orientation classes;
- Case Management, including intensive case management for complex cases;

- Mental health services tailored for refugees’ experiences and background;
- Health services, including refugee medical screenings and facilitation of medical home relationships;
- Refugee Community Navigation which enables refugee leaders to interface between refugee and mainstream communities
- Job preparation programs, including health care professional re-certification and sewing/tailoring;
- Legal services, including status adjustment to Legal Permanent Residency;
- Support to children/youth through local school systems, including afterschool English classes, cultural adjustment groups, and parent engagement services;
- Support to older refugees through a partnership with the Denver Regional Council of Governments;
- Health education;
- Unaccompanied Refugee Minors program; and/or Financial and Food Assistance.

67. How many Syrian refugees are anticipated to arrive in Colorado? When will they arrive?

While it is difficult to predict actual numbers of refugees that will arrive in Colorado from any particular group, the Department does not anticipate large numbers of refugees arriving from Syria in FFY 2015-16. Because the overseas processes to resettle refugees includes steps, including security and health screenings, that occur mere days prior to refugees’ arrival in the United States, we do not know about pending arrivals into Colorado more than ten days in advance and these arrivals are still not “guaranteed.” Colorado resettles approximately 2-3% of the total number of refugees arriving in the United States; its caseload mirrors national trends in terms of country of origin. Nationwide, most refugee resettlement is based on family ties, which means that the majority of refugees arriving will already have family rooted in a community. Colorado has a higher than average number of cases that are joining family (85-90% statewide, 100% in Greeley/Ft. Morgan) and a relatively small Syrian community. Since 1980, Colorado has welcomed 30 individuals from Syria through its resettlement program. Together, these factors predict a relatively small number of Syrian refugees resettling in Colorado.

68. What documentation will be provided to Syrian refugees arriving in Colorado?

Refugees are admitted to the United States with an I-94 that denotes refugee status. As such, refugees are eligible to work immediately; within seven days of arrival, they apply for an Employment Authorization Document (EAD) and a Social Security Card. Refugees are required to adjust their status one year post arrival to Legal Permanent Residency (LPR) and are eligible to apply for citizenship five years post arrival.

69. What need would this proposed program address?

- **Growing education gap** — less than 10% of young adults from low-income families graduate college by their mid-20s¹
- **Increasing financial capability of children and their parents** — the CSA pilot program would be a two-generation strategy to support vulnerable children and their parents together; practical experience nationally has shown that CSAs can be an entry point for low-income families to a broader array of financial security tools and supports
 - CSAs can also help provide experiential financial education to children, in which they learn about savings and put their learnings into practice
- **Gaps in financial aid** for low-income students attending postsecondary education, which may cause them to drop out before completing a degree
- **Fostering greater college aspirations for both children and their parents** –
 - Research shows that children develop ideas about their higher education plans early on, and college savings help children think of themselves as college-bound.²
 - Research demonstrates that mothers of children with CSAs were more likely to maintain or raise their educational expectations for their children than those whose children did not have CSAs.³

70. What is the anticipated outcome of the proposed program?

- Short-term (Years 1-3)
 - Families begin saving for college
 - Increased math and reading scores
 - Improved kindergarten readiness
 - Parents and their children receive financial education
 - Parents have increased expectations for their children's future
- Intermediate-term (Years 4-10)
 - Children form a college-bound identity, i.e. they see themselves as someone who will go to college
 - Increased third grade reading scores

¹ The Pell Institute for the Study of Opportunity in Higher Education (Mortenson, December 2008), www.postsecondary.org. Based on original data from Census Bureau and National Center for Education Statistics.

² *Fact File*, 1.

³ Youngmi Kim, Michael Sherraden, Jin Huang and Margaret Clancy, "Child Development Accounts and Parental Educational Expectations for Young Children: Early Evidence from a Statewide Social Experiment," *Social Service Review* 89, no. 1 (2015): 99-137, http://www.jstor.org/stable/10.1086/680014?seq=1#page_scan_tab_contents.

- Improved high school readiness
- Parents and children build financial capability
- Long-term (Years 11+)
 - Increased high school graduation rates
 - Increased enrollment in postsecondary education
 - Increased completion of postsecondary education
 - Improved financial stability and asset building for participants as young adults

71. Is legislation required to create this new program?

No, legislation is not required for implementation of this pilot program.

72. Is the proposed program an evidence-based solution to an existing issue?

Yes. The CSA field is an evidence-based field that grew out of Professor Michael Sherraden’s 1991 book, *Assets and the Poor*. Since then, the research base has been bolstered by dozens of academic articles, pilot programs and research initiatives throughout the country. In 2003, the national SEED⁴ (Savings for Education, Entrepreneurship and Down payment) demonstration project was designed to develop, test, inform and promote matched savings accounts for children and youth. Over the course of ten years, the SEED initiative succeeded in showing the promise of CSAs to not only promote financial security for low- and moderate-income children, but also to raise the hopes and aspirations for the future for both children and adults.

SEED was only the beginning for CSAs. Over the past decade, dozens of academic papers have delved into various questions surrounding children’s savings and CSAs. These papers have found that children’s savings is positively associated with college access and success, long-term financial capability and economic mobility. Some of the key arguments in support of CSAs from the research include:⁵

- **Children’s savings improve college enrollment and completion.** Children with college savings of as little as \$1-499 are three times more likely to attend college and four times more likely to graduate.⁶
- **Children with college savings have greater college expectations.** Research shows that children develop ideas about their higher education plans early on, and college savings

⁴ Deborah Adams, et al., *Lessons from SEED: A National Demonstration of Child Development Accounts* (Washington, DC: CFED, 2010).

⁵ More information on CSA research is in CFED’s review of 27 academic studies relating to CSAs: *Fact File: Scholarly Research on Children’s Savings* (Washington, DC: CFED, 2014), <http://cfed.org/assets/pdfs/FactFile - Scholarly Research On Childrens Savings Accounts.pdf>.

⁶ Emily Rauscher and William Elliott, *Building Expectations, Delivering Results: Asset-Based Financial Aid and the Future of Higher Education* (Lawrence, KS: Center on Assets, Education and Inclusion, University of Kansas, 2013), <http://aedi.ku.edu/publication/report/building-expectations-delivering-results-asset-based-financial-aid-and-future>.

help children think of themselves as college-bound. CSAs also help children build a financial plan around paying for college.⁷

- **Children with college savings do better academically.** Children with savings have better math and reading scores and higher rates of college enrollment and completion.⁸
- **Children's savings provide financial benefits.** Families with children who are provided a savings account with an initial deposit and matched savings at birth save significantly more for college than families with children who do not receive these accounts⁹ and accumulate less college-related debt.¹⁰

In addition, rigorous research from the SEED for Oklahoma Kids randomized control trial demonstrates that CSAs have several positive impacts on young children and their mothers, including:

- **Improving mothers' educational expectations for their children.** Over the first four years of the experiment, mothers of children with CSAs were more likely to maintain or raise their educational expectations for their children than those whose children did not have CSAs.¹¹
- **Increasing college planning behavior.** Mothers whose children had a CSA were more likely than those without a CSA to have taken steps to save for their child's postsecondary education.¹²
- **Boosting mothers' mental health.** Mothers of children with CSAs had reduced symptoms of depression compared to mothers in the control group. This effect was particularly strong for low-income and less-educated mothers.¹³
- **Improving early child development.** CSAs had a positive impact on children's social-emotional development at age four, and the impact was greater for low-income children and children with less educated mothers.¹⁴

73. Is the proposed program modeled after one that was successful in another state?

⁷ Fact File, 1.

⁸ William Elliott, Hyunzee Jung and Terri Friedline, "Raising Math Scores among Children in Low-Wealth Households: Potential Benefit of Children's School Savings," *Journal of Income Distribution* 20, no. 2 (2011): 72-91; William Elliott, Hyunzee Jung and Terri Friedline, "Math Achievement and Children's Savings: Implications for Child Development Accounts," *Journal of Family and Economic Issues* 31 no. 2 (2010): 171-184.

⁹ Yungu Nam, Youngmi Kim, Margaret Clancy, Robert Zager and Michael Sherraden, *Do Child Development Accounts Promote Account Holding, Saving and Asset Accumulation for Children's Future? Evidence from a Statewide Randomized Experiment* (St. Louis, MO: Center for Social Development, Washington University in St. Louis, 2011), <http://csd.wustl.edu/Publications/Documents/WP11-33.pdf>.

¹⁰ William Elliott, Melinda Lewis, Michal Grinstein-Weiss and IISung Nam, "Student Loan Debt: Can Parental College Savings Help," *Federal Reserve Bank of St. Louis Review* 96, no. 4 (2014): 331-57.

¹¹ Youngmi Kim, Michael Sherraden, Jin Huang and Margaret Clancy, "Child Development Accounts and Parental Educational Expectations for Young Children: Early Evidence from a Statewide Social Experiment," *Social Service Review* 89, no. 1 (2015): 99-137, http://www.jstor.org/stable/10.1086/680014?seq=1#page_scan_tab_contents.

¹² Nam, Kim, Clancy, Zager and Sherraden, *Do Child Development Accounts Promote Account Holding*.

¹³ Jin Huang, Michael Sherraden Jason Purnell, "Impacts of Child Development Accounts on Maternal Depressive Symptoms: Evidence from a Randomized Statewide Policy Experiment," *Social Science & Medicine* 112, no. 1 (2014): 30-38.

¹⁴ Jin Huang, Michael Sherraden, Youngmi Kim, and Margaret Clancy, "Effects of Child Development Accounts on Early Social-Emotional Development: An Experimental Test," *JAMA Pediatrics* 168, no. 3 (2013): 265-271.

The program model in Colorado is a composite of elements from several other successful CSA programs. CFED, a national nonprofit based in Washington, DC, which has been developing CSA programs for more than a decade, helped design the Colorado pilot program based on best practices in the field. At the same time, the Colorado pilot program is customized to meet the unique needs of the state's participants.

Successful programs that helped shape the design of the Colorado pilot program include:

- **Kindergarten to College (San Francisco, CA)** —An account is opened by the City and County of San Francisco on behalf of every incoming kindergartner in the public school system. Accounts are seeded with \$50 for all children, with an extra \$50 deposited for children receiving free or reduced-priced lunch. In addition, the first \$100 in savings is matched, and families can receive a bonus for saving steadily for six months in a row. Kindergarten to College began in 2011.
- **Alfond College Challenge (Maine)** — All babies born as Maine residents automatically receive \$500 invested into a 529 account. Families are also encouraged to open their own accounts and take advantage of the Next Gen matched savings program. The Alfond College Challenge has been operating since 2009.
- **Nevada College Kick Start** — All incoming public school kindergartners in Nevada receive \$50 invested into a 529 account. Families are also encouraged to open their own accounts and take advantage of the Silver State Matching Program. College Kick Start began in 2013.

74. Does evidence exist that additional moneys will ever be deposited in the accounts?

There is evidence that low-income families can and will save in CSAs in several programs:

- **SEED** – Over 1,250 children participated in SEED, the first national demonstration of CSAs, across 12 sites nationwide. More than 90% of participating children were from low-income households. Savings participation was high, with 57% of children and their families contributing to their CSAs for a total of \$1.8 million accumulated in SEED accounts. The average account accumulation was more than \$1,500.
- **Kindergarten to College** — 2,600 families (about 14% of total participants) have made additional deposits into their accounts. This rate is more than four times higher than the national average of savings in 529s and Coverdell accounts. Families have saved more than \$1.4 million, with an average savings amount of \$500. Roughly half of the families making deposits are participating in the free or reduced-priced lunch program.
- **Inversant** – Inversant, formerly FUEL Education, runs a CSA program in Massachusetts focused on college access and completion for low-income children and young adults. On average, 39% of participants and their families contribute to their accounts in a month, with an average monthly deposit of \$37.

75. How does this funding request align with requested decreases in the Department of Higher Education's FY 2016-17 budget request?

There is no direct relationship between this funding request and any requested decreases in the Department of Higher Education's FY 2016-17 budget request. Reductions in higher education funding are not being offset by this funding request, given that the target population for participation in the CSA pilot program is families with children in Head Start settings who will not participate in the higher education system for approximately 15 years. The intent of the CSA pilot program is to create a savings solution which helps to bridge the financial aid gap for low-income families. In turn, this makes higher education more affordable and accessible, all while supporting children (and their parents) in the belief that they (their child) can attend college. Thus, the pilot program aims to increase college attendance and completion rates. Again, the CSA pilot program is not intended to offset any higher tuition costs that result from the Department of Higher Education's FY 2016-17 budget request.

3:55-4:00 FEDERAL SUPPLEMENTAL SECURITY INCOME APPLICATION ASSISTANCE PILOT PROGRAM

76. Was the Department able to adhere to the proposed timeline submitted in the request for proposals (RFP)?

No. The timeline to start the pilot program was delayed due to several challenges, including receipt of only one proposal in response to the RFP and lengthy contract negotiations. The State provided technical assistance and training to county staff and the vendor, which also contributed to the delayed start. The anticipated initial term of the contract was for one year, beginning October 1, 2014, with a one-year option to renew. The contract was signed in mid-December 2014. It has been renewed for an additional year.

77. Should the pilot program be extended based on factors related to unspent moneys, a late program start-date, and/or unmet data needs?

Yes. Because the program was delayed more than three months beyond its intended October 1, 2014 start date, the Department would like to complete the entire two year pilot. The FY 2014-15 appropriation was underspent given the delayed execution of the contract.

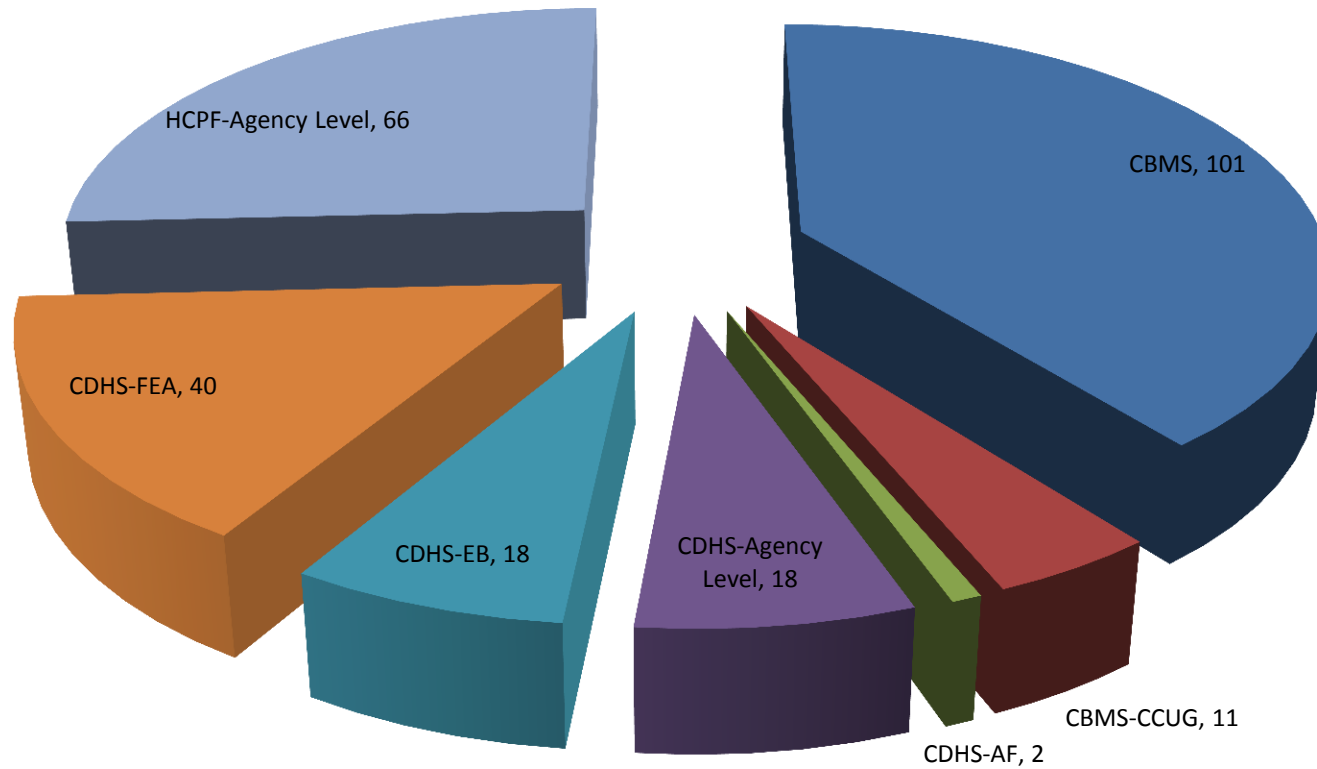
78. Were there any barriers to getting referrals from counties into the pilot program? If barriers existed, do they warrant an extension of the pilot program to make sure that sufficient data is collected?

Yes, a number of barriers emerged. Due to start-up issues, referrals were not made or accepted at the rate we anticipated. Because the existing pool of likely program referrals had already applied for Supplemental Security Income (SSI), initially or pending an appeal, at the time they applied for public assistance, those applicants with pending SSI applications are not appropriate referrals for the pilot which is intended to test the value of SSI application assistance. Additionally, staff turnover and vacancies, within both the vendor and participating counties, have impacted the rate of referrals.

Despite these challenges, the Department anticipates amassing enough information by the conclusion of the pilot to evaluate its costs and benefits

Attachment 1 - CBMS Projects Implemented

CBMS Projects Implemented 2015 January 1, 2015-December 31, 2015

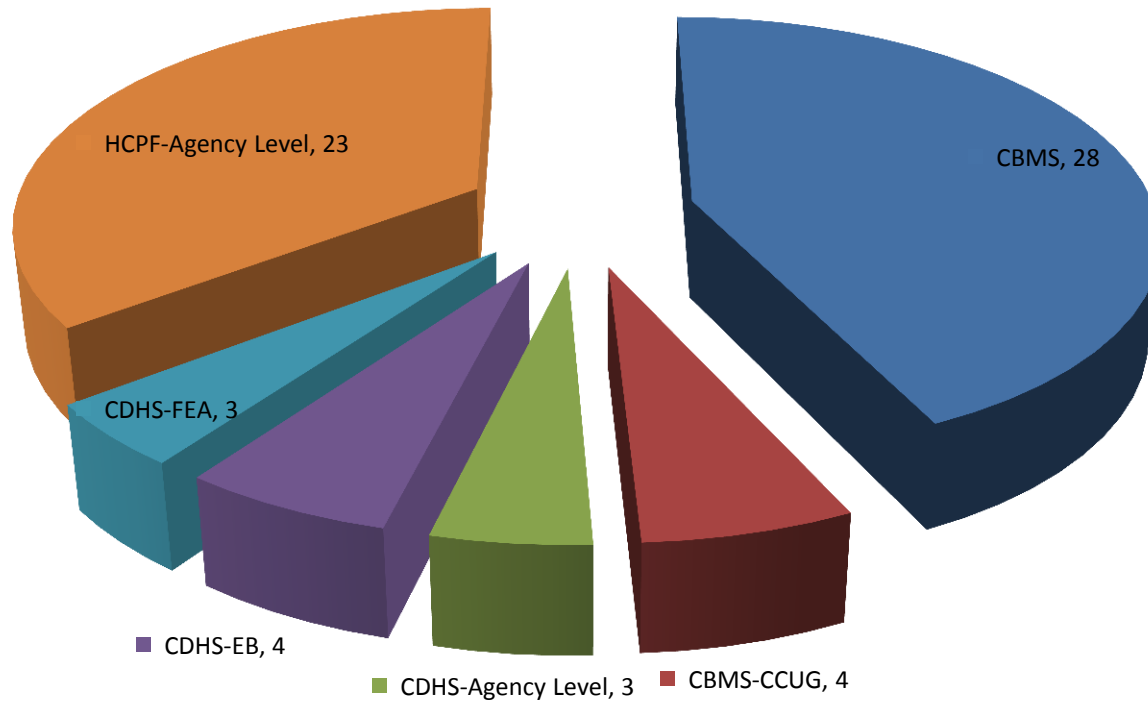


Other Project Information

- 256 Projects Implemented
- 18 CC HDT Projects
- 12 HDT Projects
- 21 Emergency Projects
- 34 Technical Projects
- 4 Online Help Changes

Attachment 2 - CBMS Projects Implemented

CBMS Projects Implemented Fourth Quarter October 1, 2015-December 31, 2015



Other Project Information

- 65 Total Projects Implemented
- 9 CC HDT Projects
- 3 HDT Projects
- 4 Emergency Projects
- 8 Technical Projects
- 1 Online Help

Attachment 3 - CBMS Work Plan

Project Number	Project Title	Source/ Sponsor	Funding Source	Priority	Development Track	Impacted Tracks	Release	Planned HIBR Submission	Actual HIBR Submission	Planned OOM Submission
9621	CBMS Emergency HDT Build December 20, 2015						12/20/2015			
9572	CBMS DynaTrace Upgrade from version 5.6 to 6.2	OIT			AA	AA	12/31/2015	11/24/2015	11/24/2015	12/2/2015
8057	CBMS Transitional FA for CW	EBD	CDHS Project Initiatives Pool	217	EDBC	EDBC, CC, AA, IN, UI, DA	1/10/2016	2/9/2015	2/9/2015	2/24/2015
8537	CBMS FA Medical Standard Deduction	FA	CDHS FY 15/16 Pool	216	EDBC	EDBC, AA	1/10/2016	2/10/2015	2/10/2015	2/25/2015
8599	CBMS CDLE > CBMS Interface and WFD/EF Changes	EBD	CDHS Project Initiatives Pool	217	UI	UI, AA, AU, CC, DA, EDBC, IN, PEAK	1/10/2016	4/24/2015	4/24/2015	5/8/2015
8828	Slip Page to display Correspondence Detail entered in Security	OIT	CC Funding Pool	218	CC	CC, AA, UI	1/10/2016	5/4/2015	5/4/2015	5/8/2015
8835	Addition of Verification Account Number to the SVES Interface Reqt	OIT	OIT FY 15/16 Funding Pool	220	IN	IN	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8844	FA Updates to LEVS	FA	CDHS FY 15/16 Pool	216	IN	IN, AA	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8845	FA Standard Medical Deduction (SMED)	FA	CDHS FY 15/16 Pool	216	EDBC	EDBC, DA, AA, CC	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8846	Employment First Exemptions	FA	CDHS FY 15/16 Pool	216	EDBC	EDBC	1/10/2016	5/12/2015	5/12/2015	5/26/2015
8847	FA Updates to ACSES Posting Logic	FA	CDHS FY 15/16 Pool	216	IN	IN, EDBC	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8848	Claim Summary Page Updates	CCUG	County Initiatives Funding Pool	215	UI	UI	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8849	Case Assignment Access Update	CCUG	County Initiatives Funding Pool	215	UI	UI	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8852	Notifying ABAWDS	FA			EDBC	EDBC, DA, CC, UI	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8854	FA Count CW Diversion Payments Correctly	FA	CDHS FY 15/16 Pool	216	EDBC	EDBC	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8855	Updates to Mandatory Questions for FA Apps Submitted through PI	FA	CDHS FY 15/16 Pool	216	PEAK	PEAK, UI	1/10/2016	5/12/2015	5/12/2015	5/19/2015
8858	Case Complete EDBC Alert	CCUG	County Initiatives Funding Pool	215	UI	UI	1/10/2016	5/12/2015	5/12/2015	5/18/2015
8863	Employment First COGNOS Reports	FA			DA	DA	1/10/2016	5/12/2015	5/12/2015	5/19/2015
8883	Security Report Corrections	CCUG	County Initiatives Funding Pool	215	DA	DA	1/10/2016	5/12/2015	5/12/2015	5/19/2015
8894	Corrections to Project 7205 Regarding SSN Verification Request	EBD	CDHS FY 15/16 Pool	216	EDBC	EDBC, CC	1/10/2016	5/13/2015	5/13/2015	5/19/2015
8912	CBMS Employment First Enhanced Funding I Updates	FA			UI	UI, DA, CC, AA	1/10/2016	5/12/2015	5/12/2015	5/19/2015
8919	Fixes to Work Program Summary (Employment First Registration)	FA			UI	IN, UI, AA, CC	1/10/2016	5/12/2015	5/12/2015	5/19/2015
9019	CBMS HDT Build - January 2016		No Cost				1/10/2016			
9128	PEAK Health Updates (Change Report PDF)	HCPF	HCPF 90/10 Pool	225	UX	PEAK, UX, IN, AA	1/10/2016	7/21/2015	7/21/2015	7/24/2015
9131	CBMS Minor Changes to CBMS Data Entry	OIT	Maint FY15	206	UI	UI, AA	1/10/2016	7/21/2015	7/21/2015	7/27/2015
9461	CBMS Confirmation message pop up timer	OIT	Maint FY15	206	AA	AA	1/10/2016	10/9/2015	10/9/2015	10/16/2015
9371	CBMS Oracle Audit Vault and DB Firewall	OIT	Maint FY15	206	AA	AA, IN	1/31/2016	9/1/2015	9/1/2015	9/9/2015
8422	CBMS Application Release Automation Tool	OIT	Maint FY15	206	AA	AA, PEAK	2/18/2016	11/17/2014	11/17/2014	1/23/2015
8718	Convert Broker Calls to SFTP Web Service Calls	OIT	OIT FY 15/16 Funding Pool	220	IN	IN, AA	2/18/2016	3/18/2015	3/18/2015	3/25/2015
9020	CBMS HDT Build - February 2016		No Cost				2/18/2016			
9095	CBMS Online Help Changes to Provide Performance Metrics and An	OIT	Maint FY15	206	AA	AA, DA	2/18/2016	6/16/2015	6/16/2015	7/1/2015
9298	CBMS Upgrade Perm Audit from Windows 2003 to 2008	OIT	Maint FY15	206	AA	AA, IN	2/18/2016	8/24/2015	8/24/2015	8/31/2015

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Project Number	Project Title	Source/Sponsor	Funding Source	Priority	Development Track	Impacted Tracks	Release	Planned HLBR Submission	Actual HLBR Submission	Planned OOM Submission
9373	CBMS CC Change Print file sent to IDS from PCL to PDF	OIT	Maint FY15	206	CC Redesign	CC Redesign, CC, AA	2/18/2016	9/11/2015	9/11/2015	9/18/2015
9458	DSS and PRDBAT Traffic Encryption	OIT	Maint FY15	206	AA	AA	2/18/2016	10/7/2015	10/7/2015	10/15/2015
9529	Update CC Print Process, Logic, & Functionality	OIT	Maint FY15	206	CC Redesign	CC Redesign, AA	2/18/2016	11/2/2015	11/2/2015	11/9/2015
9551	CBMS CC Zip +4 with alpha numeric characters	OIT	Maint FY15	206	AA	AA	2/18/2016	11/16/2015	11/16/2015	11/23/2015
8468	CBMS Convert E Notifications to Exact Target (6959)	OIT	OIT FY 15/16 Funding Pool	220	AA	AA, CC, IN, PEAK, UI	3/20/2016	12/18/2014	12/18/2014	1/9/2015
8601	CBMS MA Retro-Close/10 Day Noticing Exception Updates	HCPF	HCPF 90/10 Pool	225	EDBC	EDBC	3/20/2016	2/10/2015	2/10/2015	2/25/2015
8605	CBMS MA Appeals Updates	HCPF	HCPF Project Initiatives Pool	224	EDBC	UI, CC, DA, EDBC, IN, AA	3/20/2016	2/10/2015	2/10/2015	2/25/2015
8745	CBMS Universal App: Colorado Child Care Assistance Program CCCA	UA	Race to the Top Pool	214	PEAK	PEAK, IN, AA	3/20/2016	3/30/2015	3/30/2015	4/3/2015
8850	ACP Special Indicator	CCUG	County Initiatives Funding Pool	215	UI	UI, AA	3/20/2016	5/12/2015	5/12/2015	5/18/2015
8989	CBMS MA - CAHCO FDSH Interfaces	HCPF	SES Pool	227	IN	IN, AA	3/20/2016	5/27/2015	5/27/2015	6/3/2015
8991	CBMS MA MAGI Updates	HCPF	HCPF 90/10 Pool	225	EDBC	EDBC, PEAK, UI, AA, CC	3/20/2016	5/28/2015	5/28/2015	6/9/2015
8995	CBMS PEAK - Update Effective Begin Date Mapping for RMC	HCPF	HCPF 90/10 Pool	225	PEAK	PEAK, UI, UX	3/20/2016	5/28/2015	5/28/2015	6/4/2015
8997	Do Not Allow EX FA to Create for Late Verifications	FA	CDHS FY 15/16 Pool	216	UI	UI, EDBC, DA, AA	3/20/2016	6/15/2015	6/15/2015	6/26/2015
9024	CBMS HDT Build - March 2016		No Cost				3/20/2016			
9090	CBMS TOP Reconciliation Maintenance	FA	Maint FY15	206	IN	IN, DA	3/20/2016	7/2/2015	7/2/2015	7/17/2015
9242	CBMS SVES Interface Request and Response Changes.	OIT	Maint FY15	206	IN	IN, CC, UI	3/20/2016	8/11/2015	8/11/2015	8/19/2015
9251	Updates to the Exception Reports and Processes	EBD	CDHS FY 15/16 Pool	216	UI	UI, DA, AA	3/20/2016	8/11/2015	8/11/2015	8/20/2015
9252	CBMS Yearly TANF File Retransmission	EBD	CDHS FY 15/16 Pool	216	IN	IN	3/20/2016	8/11/2015	8/11/2015	8/18/2015
9253	Correcting Sponsor Deeming and Hardship Logic for Financial Progr	EBD	CDHS FY 15/16 Pool	216	EDBC	EDBC, UI, CC, AA	3/20/2016	8/11/2015	8/11/2015	8/18/2015
9256	CBMS MA DACA Non-Citizens	HCPF	HCPF 90/10 Pool	225	EDBC	EDBC, UI, PEAK, AA	3/20/2016	8/14/2015	8/14/2015	8/24/2015
9257	CBMS WPR Federal Reporting Fixes	EBD	CDHS FY 15/16 Pool	216	IN	UI, IN	3/20/2016	8/11/2015	8/11/2015	8/18/2015
9261	CBMS CDHS Client Correspondence - Timeliness Summit	EBD	CC Funding Pool	218	EDBC	EDBC, CC, AA	3/20/2016	8/11/2015	8/11/2015	8/18/2015
9266	CBMS Updates to PEAK Inbox Mapping	FA	CDHS FY 15/16 Pool	216	UI	UI, PEAK, AA	3/20/2016	8/11/2015	8/11/2015	8/18/2015
9268	CBMS Ad Hoc Reports for FS-14s	FA	CDHS FY 15/16 Pool	216	DA	DA	3/20/2016	8/11/2015	8/11/2015	8/18/2015
9270	CBMS PEAK Pro CBO Security Changes	HCPF	HCPF 90/10 Pool	225	PEAK	PEAK	3/20/2016	2/10/2015	2/10/2015	2/25/2015
9291	CBMS MA PE Updates	HCPF	HCPF 90/10 Pool	225	EDBC	EDBC, UI, CC	3/20/2016	5/26/2015	5/26/2015	6/5/2015
9293	CW/AF Modify Logic to set RRR to Discontinued	EBD	Maint FY15	216	EDBC	EDBC, UI, DA, CC, AA, PEAK	3/20/2016	8/19/2015	8/19/2015	8/25/2015
9307	CBMS PEAK Concurrent Sessions	OIT	Maint FY15	206	PEAK	PEAK	3/20/2016	8/14/2015	8/14/2015	8/26/2015
9313	CBMS PEAKPro System and Reporting Updates	HCPF	Data Insights Pool	223	PEAK	PEAK, UI, DA	3/20/2016	8/18/2015	8/18/2015	8/31/2015
9331	CBMS CW and AF - EDBC Reason Cleanup	EBD	CDHS FY 15/16 Pool	216	IN	EDBC, CC, AA	3/20/2016	8/11/2015	8/11/2015	8/19/2015
9341	CBMS Default to US Mail When E-Notification is Unavailable in PEAK	FA	CDHS FY 15/16 Pool	216	CC	CC, AA	3/20/2016	8/28/2015	8/28/2015	9/4/2015
9342	CBMS PEAK Medical Cards Request Updates	HCPF	HCPF Project Initiatives Pool	224	PEAK	PEAK, UI	3/20/2016	5/26/2015	5/26/2015	6/2/2015
9480	CBMS MA Automating 1094 IRS Transmittal (Part 2)	HCPF	SES Pool	227	IN	IN, AA	3/20/2016	10/6/2015	10/6/2015	10/14/2015
9583	PEAK Update MA Application (Add EPSDT and Auth Org)	HCPF	HCPF 90/10 Pool	225	PEAK	PEAK, UI	3/20/2016	11/12/2015	11/12/2015	11/19/2015
9587	CBMS CBMS Demographics Report for MA	HCPF	EDMS Pool	222	DA	DA	3/20/2016	11/12/2015	11/12/2015	11/20/2015

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CBMS Work Plan
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Actual OOM Submission	Planned OOM Approval	Actual OOM Approval	BA PFA Received	Planned BRD/ Backlog/PPF Submission	Actual BRD/ Backlog/PPF Submission	Planned BRD/ Backlog/PPF Approval	Actual BRD/ Backlog/PPF Approval	Planned LOE Submission	Actual LOE Submission	PFA Received	Planned First TDD Submission	Actual First TDD Submission	Planned First TDD Approval	Actual First TDD Approval	Planned TDD Later Ver. Submit
12/1/2015	12/3/2015	12/1/2015		12/4/2015	12/4/2015	12/4/2015	12/4/2015	12/11/2015	12/11/2015		12/15/2015	12/14/2015	12/18/2015	12/18/2015	
9/25/2014	2/23/2015	9/26/2014		2/6/2015	2/2/2015	2/17/2015	2/17/2015	2/25/2015	2/24/2015	3/12/2015	3/26/2015	3/26/2015	4/16/2015	4/13/2015	
2/20/2015	2/23/2015	2/20/2015		5/1/2015	4/30/2015	5/8/2015	5/4/2015	5/12/2015	5/15/2015	5/27/2015	5/29/2015	5/28/2015	6/8/2015	6/4/2015	
2/25/2015	2/27/2015	3/5/2015		8/7/2015	8/11/2015	8/14/2015	8/19/2015	8/26/2015	8/27/2015	10/6/2015	9/11/2015	9/14/2015	9/23/2015	9/24/2015	
5/5/2015	5/7/2015	5/8/2015		5/18/2015	5/18/2015	7/22/2015	7/22/2015	7/30/2015	7/29/2015	7/30/2015	8/14/2015	8/14/2015	8/28/2015	8/19/2015	
5/8/2015	5/12/2015	5/14/2015		7/14/2015	7/14/2015	7/23/2015	7/23/2015	7/31/2015	7/27/2015	7/29/2015	10/19/2015	10/19/2015	10/23/2015	10/28/2015	
5/15/2015	5/19/2015	5/15/2015		6/18/2015	6/18/2015	7/13/2015	7/10/2015	7/20/2015	7/20/2015	7/30/2015	8/24/2015	8/24/2015	9/3/2015	9/3/2015	
5/15/2015	5/19/2015	5/15/2015		7/20/2015	7/15/2015	7/27/2015	7/22/2015	8/3/2015	8/4/2015	8/14/2015	9/8/2015	9/8/2015	9/11/2015	9/11/2015	
5/15/2015	5/19/2015	3/15/2015		7/6/2015	7/17/2015	7/13/2015	7/24/2015	8/3/2015	8/4/2015	8/14/2015	8/26/2015	8/26/2015	9/8/2015	8/31/2015	
5/15/2015	5/19/2015	5/15/2015		6/26/2015	6/26/2015	7/13/2015	7/10/2015	7/20/2015	7/20/2015	7/24/2015	8/24/2015	8/24/2015	9/3/2015	9/3/2015	
5/18/2015	5/19/2015	5/15/2015		6/17/2015	6/17/2015	6/30/2015	6/30/2015	7/21/2015	7/21/2015	7/24/2015	8/28/2015	8/21/2015	9/4/2015	9/2/2015	
5/18/2015	5/19/2015	5/15/2015		7/8/2015	7/8/2015	7/13/2015	7/8/2015	7/20/2015	7/20/2015	7/23/2015	8/28/2015	8/21/2015	9/4/2015	9/3/2015	
5/18/2015	5/20/2015	5/18/2015		7/6/2015	7/10/2015	7/24/2015	7/24/2015	8/4/2015	8/4/2015	9/18/2015	9/21/2015	9/21/2015	9/28/2015	9/24/2015	
5/18/2015	5/20/2015	5/18/2015		6/17/2015	6/17/2015	6/18/2015	6/18/2015	7/20/2015	7/20/2015	7/24/2015	8/27/2015	9/8/2015	9/9/2015	9/9/2015	
5/18/2015	5/20/2015	5/18/2015		6/25/2015	6/25/2015	7/24/2015	7/22/2015	7/31/2015	7/30/2015	8/11/2015	8/27/2015	8/27/2015	9/9/2015	9/3/2015	
5/18/2015	5/20/2015	5/19/2015		6/17/2015	6/17/2015	6/30/2015	6/30/2015	7/20/2015	7/20/2015	7/23/2015	8/28/2015	8/21/2015	9/4/2015	9/8/2015	
5/20/2015	5/22/2015	5/20/2015		7/13/2015	7/17/2015	7/21/2015	7/21/2015	7/28/2015	7/29/2015	8/28/2015	8/28/2015	8/20/2015	9/4/2015	9/11/2015	
5/28/2015	6/1/2015	5/29/2015		6/29/2015	6/29/2015	7/10/2015	7/1/2015	7/17/2015	7/22/2015	7/24/2015	8/21/2015	8/20/2015	8/28/2015	8/27/2015	
5/19/2015	5/21/2015	6/2/2015		6/29/2015	6/29/2015	7/10/2015	7/10/2015	7/20/2015	7/20/2015	7/30/2015	8/27/2015	8/27/2015	9/7/2015	9/9/2015	
5/19/2015	5/21/2015	6/4/2015		6/16/2015	6/16/2015	7/8/2015	6/30/2015	7/17/2015	7/17/2015	9/3/2015	9/3/2015	9/24/2015	10/1/2015	10/2/2015	
5/18/2015	5/20/2015	6/4/2015		7/13/2015	7/16/2015	7/21/2015	7/16/2015	7/30/2015	7/30/2015	9/11/2015	9/11/2015	9/15/2015	9/22/2015	9/22/2015	
7/24/2015	7/24/2015	7/24/2015		8/14/2015	8/14/2015	8/21/2015	8/21/2015	9/2/2015	9/4/2015	9/14/2015	9/23/2015	9/23/2015	10/1/2015	10/8/2015	
7/27/2015	7/29/2015	7/27/2015		8/21/2015	8/24/2015	8/28/2015	8/24/2015	9/1/2015	9/3/2015	9/17/2015	9/23/2015	9/23/2015	10/1/2015	10/8/2015	
10/16/2015	10/21/2015	10/19/2015		11/16/2015	11/6/2015	11/10/2015	11/10/2015	11/17/2015	11/12/2015	11/16/2015	11/17/2015	11/13/2015	11/19/2015	11/17/2015	
9/14/2015	9/18/2015	9/22/2015		9/25/2015	9/25/2015	10/2/2015	10/3/2015	10/6/2015	10/5/2015	10/7/2015	10/7/2015	10/7/2015	10/14/2015	10/7/2015	
1/23/2015	1/27/2015	1/27/2015		9/22/2015	9/22/2015	9/28/2015	9/22/2015	9/29/2015	9/30/2015	10/2/2015	12/11/2015	12/10/2015	12/16/2015	12/10/2015	
3/26/2015	3/31/2015	4/1/2015		5/20/2015	5/20/2015	5/20/2015	5/20/2015	10/13/2015	10/13/2015	11/16/2015	11/4/2015	11/5/2015	11/12/2015	11/10/2015	
7/1/2015	7/7/2015	7/17/2015		7/23/2015	7/23/2015	8/17/2015	8/20/2015	9/3/2015	9/3/2015	9/16/2015	10/2/2015	10/2/2015	10/9/2015	10/15/2015	
8/31/2015	9/2/2015	9/1/2015		10/7/2015	10/7/2015	10/14/2015	10/9/2015	10/20/2015	10/20/2015	11/3/2015	11/13/2015	11/12/2015	11/24/2015	11/12/2015	

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CBMS Work Plan															
12/18/2015															
Actual OOM Submission	Planned OOM Approval	Actual OOM Approval	BA PFA Received	Planned BRD/ Backlog/PPF Submission	Actual BRD/ Backlog/PPF Submission	Planned BRD/ Backlog/PPF Approval	Actual BRD/ Backlog/PPF Approval	Planned LOE Submission	Actual LOE Submission	PFA Received	Planned First TDD Submission	Actual First TDD Submission	Planned First TDD Approval	Actual First TDD Approval	Planned TDD Later Ver. Submt
9/17/2015	9/22/2015	9/22/2015	10/2/2015	11/2/2015	11/4/2015	11/6/2015	11/4/2015	11/12/2015	11/13/2015	11/16/2015	11/20/2015	11/24/2015	12/7/2015	12/2/2015	
10/15/2015	10/19/2015	10/19/2015	11/16/2015	11/6/2015	11/6/2015	11/10/2015	11/12/2015	11/17/2015	11/18/2015	11/19/2015	12/11/2015	12/9/2015	12/18/2015	12/14/2015	
11/9/2015	11/13/2015	11/10/2015	11/18/2015	11/18/2015	11/18/2015	12/2/2015	12/2/2015	12/8/2015	12/8/2015	12/10/2019	12/9/2015	12/11/2015	12/18/2015	12/18/2015	
11/20/2015	11/25/2015	11/23/2015	12/11/2015	12/11/2015	12/11/2015	12/11/2015	12/11/2015	12/16/2015	12/15/2015		12/18/2015	12/16/2015	12/23/2015		
1/9/2015	1/13/2015	1/30/2015	8/28/2015	8/28/2015	12/14/2015	9/4/2015	12/18/2015	12/30/2015	12/18/2015	12/30/2015					
2/23/2015	2/24/2015	3/6/2015	3/12/2015	5/5/2015	4/6/2015	5/8/2015	4/21/2015	5/12/2015	5/11/2015	5/13/2015	5/29/2015	5/28/2015	12/1/2015	12/2/2015	
2/25/2015	3/2/2015	3/6/2015	10/30/2015	10/30/2015	10/27/2015	11/30/2015	11/30/2015	12/3/2015	12/3/2015	12/3/2015	12/22/2015		1/6/2016		
4/3/2015	4/7/2015	4/7/2015	11/20/2015	11/20/2015	11/25/2015	11/27/2015	12/4/2015	12/15/2015	12/15/2015		1/5/2016		1/12/2016		
5/15/2015	5/19/2015	5/15/2015	6/17/2015	6/17/2015	6/17/2015	10/13/2015	10/13/2015	10/21/2015	10/20/2015	11/3/2015	11/24/2015	11/24/2015	12/9/2015	12/10/2015	
6/3/2015	6/4/2015	6/23/2015	7/27/2015	9/21/2015	9/17/2015	9/30/2015	9/21/2015	10/8/2015	10/8/2015	10/14/2015	11/5/2015	11/5/2015	11/24/2015	11/23/2015	
6/10/2015	6/12/2015	6/23/2015	7/27/2015	7/28/2015	7/29/2015	8/14/2015	8/14/2015	8/24/2015	8/20/2015	8/24/2015	11/23/2015	10/29/2015	12/1/2015	11/30/2015	
6/4/2015	6/17/2015	6/24/2015	7/27/2015	7/24/2015	7/27/2015	7/31/2015	8/14/2015	8/27/2015	8/27/2015	9/9/2015					
6/25/2015	6/29/2015	6/25/2015	9/16/2015	10/9/2015	10/9/2015	10/16/2015	10/15/2015	10/23/2015	10/22/2015		11/24/2015	11/24/2015	12/4/2015	12/3/2015	
7/16/2015	7/21/2015	7/17/2015	7/23/2015	8/13/2015	8/13/2015	8/20/2015	8/19/2015	10/28/2015	11/2/2015	11/4/2015	12/4/2015	12/7/2015	12/21/2015	12/21/2015	
8/19/2015	8/21/2015	8/19/2015	10/30/2015	10/30/2015	11/3/2015	11/10/2015	11/13/2015	11/20/2015	11/17/2015	11/18/2015	12/9/2015	12/9/2015	12/23/2015	12/23/2015	
8/18/2015	8/20/2015	8/21/2015	10/30/2015	10/30/2015	10/29/2015	11/6/2015	11/6/2015	11/13/2015	11/12/2015	11/16/2015	12/3/2015	12/4/2015	12/22/2015	12/22/2015	
8/18/2015	8/20/2015	8/21/2015	9/14/2015	10/23/2015	9/14/2015	9/23/2015	9/23/2015	10/28/2015	10/27/2015	12/2/2015	12/4/2015	11/19/2015	12/18/2015	12/17/2015	
8/18/2015	8/20/2015	8/21/2015	10/23/2015	9/22/2015	10/30/2015	10/30/2015	11/6/2015	11/13/2015	11/17/2015	11/18/2015	12/7/2015	12/8/2015	12/11/2015	12/11/2015	
8/24/2015	8/26/2015	8/26/2015	9/1/2015	10/30/2015	10/30/2015	10/23/2015	10/23/2015	10/30/2015	10/30/2015	11/4/2015	12/2/2015	11/24/2015	12/11/2015	12/11/2015	
8/21/2015	8/25/2015	8/25/2015	10/23/2015	10/23/2015	10/23/2015	11/25/2015	11/24/2015	12/2/2015	12/2/2015		12/23/2015		1/4/2016		
8/21/2015	8/26/2015	8/26/2015	9/16/2015	10/23/2015	10/23/2015	10/30/2015	11/4/2015	11/13/2015	11/12/2015	11/16/2015	11/30/2015	12/1/2015	12/8/2015	12/7/2015	
8/18/2015	8/20/2015	8/26/2015	9/16/2015	9/22/2015	9/22/2015	10/6/2015	10/6/2015	10/14/2015	10/13/2015	11/16/2015	12/9/2015	11/3/2015	11/18/2015	11/18/2015	
2/20/2015	8/27/2015	8/27/2015	10/23/2015	10/23/2015	10/16/2015	10/30/2015	10/27/2015	11/6/2015	11/2/2015	13/5/2015	12/9/2015	12/10/2015	12/15/2015	12/15/2015	
6/9/2015	6/11/2015	8/31/2015	9/3/2015	10/7/2015	10/7/2015	10/30/2015	10/30/2015	11/6/2015	11/2/2015	12/2/2015	11/13/2015	11/13/2015	11/25/2015	11/25/2015	12/18/2015
8/24/2015	8/26/2015	8/31/2015	9/3/2015	10/7/2015	10/7/2015	10/23/2015	10/21/2015	10/30/2015	10/30/2015	11/4/2015	12/1/2015	11/13/2015	12/2/2015	12/10/2015	
8/26/2015	8/28/2015	9/1/2015	10/28/2015	10/28/2015	10/28/2015	11/4/2015	11/13/2015	11/20/2015	11/19/2015	12/2/2015	12/4/2015	12/4/2015	12/11/2015	12/11/2015	
8/31/2015	9/3/2015	9/3/2015	10/30/2015	10/30/2015	10/30/2015	11/4/2015	11/4/2015	11/30/2015	11/30/2015	12/3/2015	12/21/2015	12/4/2015	12/30/2015	12/30/2015	
8/18/2015	8/20/2015	9/9/2015	10/30/2015	10/30/2015	11/4/2015	11/6/2015	11/9/2015	11/16/2015	11/16/2015	11/18/2015	12/7/2015	12/8/2015	12/15/2015	12/10/2015	
9/9/2015	9/11/2015	9/9/2015	9/16/2015	9/24/2015	9/24/2015	10/6/2015	10/6/2015	10/13/2015	10/13/2015	11/16/2015	12/9/2015	12/9/2015	12/17/2015	12/14/2015	
6/25/2015	6/29/2015	9/10/2015	10/30/2015	10/30/2015	10/28/2015	11/6/2015	11/6/2015	11/13/2015	11/13/2015	11/16/2015	11/20/2015	11/19/2015	12/8/2015	12/8/2015	
10/16/2015	10/21/2015	10/21/2015	10/22/2015	10/22/2015	10/22/2015	10/28/2015	11/6/2015	11/13/2015	11/13/2015	11/16/2015	12/14/2015	12/15/2015	12/28/2015	12/18/2015	
11/18/2015	11/23/2015	12/3/2015	12/3/2015	12/17/2015	12/17/2015	10/28/2015	10/28/2015	11/5/2015	11/4/2015	11/10/2015	12/14/2015	12/15/2015	12/28/2015	12/7/2015	
11/23/2015	11/25/2015	12/4/2015			12/17/2015										

Actual TDD Later Ver. Submit	Planned TDD Later Ver. Approve	Actual TDD Later Ver. Approve	Planned Code to SIT	Planned Code to UAT	Planned SIT Testing Cert	Actual SIT Certification	Planned UAT Testing Cert	Actual UAT Certification	Total OOM Stage Hours	Total LOE Stage Hours	Total TDD Stage Hours	BA Hours	TDD Hours	DEV Hours	SIT Hours	UAT Hours
						12/18/2015										
12/18/2015	12/21/2015	12/18/2015	11/13/2015	11/13/2015	12/4/2015	12/16/2015	12/11/2015	12/16/2015	85	85	85	5	8	72	0	0
12/7/2015	12/7/2015	12/7/2015	10/23/2015	11/10/2015	12/4/2015	12/4/2015	12/11/2015	12/16/2015	2533	2404	1789	0	348	833	608	450
12/3/2015	12/4/2015	12/10/2015	12/7/2015	12/7/2015	12/11/2015	12/18/2015	12/11/2015	12/16/2015	1093	306	256	0	30	156	70	50
8/24/2015	8/27/2015	8/24/2015	10/23/2015	11/10/2015	12/4/2015	12/9/2015	12/11/2015	12/16/2015	2005	2069	1905	0	250	1151	504	500
10/22/2015				11/13/2015			12/11/2015		163	100	85	0	8	59	18	30
10/23/2015	10/23/2015	10/23/2015	10/23/2015	10/27/2015	12/4/2015	12/9/2015	12/11/2015	12/16/2015	406	83	83	0	8	75	0	60
11/2/2015	12/7/2015	12/7/2015	11/6/2015	11/10/2015	12/4/2015	12/7/2015	12/11/2015	12/16/2015	571	287	287	0	31	175	81	75
8/28/2015			11/6/2015	11/10/2015	12/4/2015	12/4/2015	12/11/2015	12/16/2015	801	313	294	0	44	185	65	80
9/1/2015			11/6/2015	11/10/2015	12/4/2015	12/9/2015	12/11/2015	12/16/2015	483	333	276	0	33	193	50	100
10/21/2015	10/22/2015	10/28/2015	10/23/2015	10/27/2015	12/4/2015	12/3/2015	12/11/2015	12/16/2015	551	482	479	0	57	295	127	100
			10/23/2015	10/27/2015	12/4/2015	12/3/2015	12/11/2015	12/16/2015	173	164	164	0	16	98	50	50
11/24/2015	11/25/2015	11/24/2015	11/6/2015	11/6/2015	12/9/2015	12/10/2015	12/11/2015	12/16/2015	80	71	71	0	8	43	20	30
12/7/2015	12/8/2015	12/7/2015	11/12/2015	11/13/2015	12/9/2015	12/10/2015	12/11/2015	12/16/2015	857	632	480	0	57	304	119	110
10/26/2015	10/27/2015	10/26/2015	10/23/2015	11/10/2015	12/4/2015	12/4/2015	12/11/2015	12/16/2015	217	203	203	0	25	118	60	50
11/16/2015	11/17/2015	11/19/2015	10/23/2015	10/27/2015	12/4/2015	12/3/2015	12/11/2015	12/16/2015	766	699	641	0	94	397	150	175
12/18/2015	12/18/2015		11/27/2015	11/27/2015	12/4/2015	12/7/2015	12/11/2015	12/16/2015	161	152	109	0	13	86	10	30
8/27/2015			10/23/2015	10/27/2015	12/4/2015	12/4/2015	12/11/2015	12/16/2015	679	507	507	0	51	338	118	125
9/2/2015			11/6/2015	11/10/2015	12/4/2015	12/3/2015	12/11/2015	12/16/2015	76	66	66	0	8	38	20	20
11/19/2015	11/19/2015	12/2/2015	10/23/2015	10/27/2015	12/4/2015	12/18/2015	12/11/2015	12/16/2015	363	283	251	0	26	155	70	75
			10/23/2015	10/27/2015	12/4/2015	12/18/2015	12/11/2015	12/16/2015	762	714	714	0	77	442	195	150
12/1/2015	12/2/2015	12/10/2015	10/23/2015	11/2/2015	12/11/2015	12/11/2015	12/11/2015	12/16/2015	210	170	140	0	22	68	50	50
12/16/2015	12/17/2015	12/17/2015	11/20/2015	11/20/2015	12/4/2015	12/18/2015	12/11/2015	12/16/2015	0	0	0	0	200	667	204	200
10/28/2015	10/30/2015	10/29/2015	11/9/2015	11/20/2015	12/11/2015	12/18/2015	12/11/2015	12/16/2015	1134	406	396	0	51	219	126	100
			1/11/2016	1/11/2016	2/12/2016	1/11/2015	2/12/2016		465	76	76	8	11	37	20	100
11/10/2015			1/8/2016	1/8/2016	2/5/2016	1/11/2015	2/12/2016		67	346	346	15	32	275	24	8
									346	436	394	8	43	343	0	0
10/8/2015			2/1/2016	1/18/2016	2/12/2016		2/12/2016		0	0	0	9	386	1507	130	400
				2/1/2016	2/12/2016		2/12/2016		2565	2360	2032	0	0	0	0	0
				1/18/2016	2/12/2016		2/12/2016		0	0	0	0	118	472	0	40
				2/1/2016	2/12/2016		2/12/2016		606	590	590	8	32	160	0	8
									240	240	200					

Attachment 3 - CBMS Work Plan

Actual TDD Later Ver. Submit	Planned TDD Later Ver. Approve	Actual TDD Later Ver. Approve	Planned Code to SIT	Planned Code to UAT	Planned SIT Testing Cert	Actual SIT Certification	Planned UAT Testing Cert	Actual UAT Certification	Total OOM Stage Hours	Total LOE Stage Hours	Total TDD Stage Hours	BA Hours	TDD Hours	DEV Hours	SIT Hours	UAT Hours
12/2/2015			1/15/2016	1/15/2016	2/5/2016		2/5/2016		693	693	648	4	90	381	173	50
			1/19/2016	1/19/2016	2/5/2016		2/11/2016		108	108	108	10	18	80	0	0
			1/25/2016	1/25/2016	2/12/2016		2/12/2016		809	754	750	0	85	464	201	154
									47	46	46	10	7	19	10	10
									1083	0	0	0	153	655	275	
12/1/2015			2/12/2016	2/16/2016	3/4/2016		3/11/2016		467	467	421	27	34	250	110	80
			2/12/2016	2/16/2016	3/4/2016		3/11/2016		873	1015	0	0	106	649	260	220
			2/9/2016	2/9/2016	3/4/2016		3/11/2016		2582	1135	0	0	163	647	325	375
12/4/2015			1/29/2016	2/2/2016	3/4/2016		3/11/2016		282	264	264	0	30	160	74	50
11/19/2015			1/29/2016	1/29/2016	3/4/2016		3/11/2016		3318	566	445	80	50	235	80	150
11/24/2015			2/12/2016	2/16/2016	3/4/2016		3/11/2016		1736	1352	1352	110	172	790	280	200
12/3/2015			1/29/2016	2/2/2016	3/4/2016		3/11/2016		481	18	0	18	68	275	120	250
									472	732	732	27	89	456	160	110
12/16/2015			1/29/2016	2/5/2016	3/4/2016		3/11/2016		0	0	0	5	86	362	150	100
12/15/2015			2/12/2016	2/12/2016	3/4/2016		3/11/2016		727	691	603	0	68	476	230	275
			1/29/2016	2/2/2016	3/4/2016		3/11/2016		718	790	774	0	73	400	98	175
12/17/2015			1/29/2016	2/5/2016	3/4/2016		3/11/2016		845	601	571	0	33	173	80	40
12/10/2015			2/12/2016	2/16/2016	3/4/2016		3/11/2016		303	286	286	0	217	1302	386	350
12/9/2015			2/12/2016	2/12/2016	3/9/2016		3/11/2016		1877	1921	1905	0	217	1302	386	350
			1/29/2016	2/2/2016	3/4/2016		3/11/2016		573	525	480	45	58	332	45	130
			2/12/2016	2/12/2016	3/4/2016		3/11/2016		370	217	0	0	21	106	90	100
11/13/2015			1/29/2016	2/2/2016	3/4/2016		3/11/2016		1163	1073	1073	0	133	658	282	300
12/14/2015			1/29/2016	2/1/2016	3/4/2016		3/11/2016		351	371	343	13	47	198	85	150
12/18/2015	12/22/2016		1/29/2016	2/2/2016	3/4/2016		3/11/2016		334	264	202	0	36	106	60	50
12/10/2015			2/12/2016	2/12/2016	3/4/2016		3/11/2016		534	545	545	0	86	339	120	80
12/10/2015			2/2/2016	2/3/2016	3/4/2016		3/11/2016		634	615	374	55	32	187	100	165
12/10/2015			1/29/2016	2/1/2016	3/4/2016		3/11/2016		1559	1258	1134	0	113	639	382	350
12/14/2015			1/29/2016	2/1/2016	3/4/2016		3/11/2016		411	382	0	0	77	222	83	100
			2/5/2016	2/12/2016	3/4/2016		3/11/2016		2874	1571	1705	0	213	1042	450	350
			1/29/2016	2/2/2016	3/4/2016		3/11/2016		1643	567	351	0	38	213	100	200
			1/29/2016	2/2/2016	3/4/2016		3/11/2016		346	328	300	9	38	163	90	80
12/8/2015			1/29/2016	2/2/2016	3/4/2016		3/11/2016		379	351	351	0	54	217	80	0
			1/29/2016	2/2/2016	3/4/2016		3/11/2016		1227	1227	878	0	123	620	135	150
									623	0	0	0	81	344	144	80
									261	0	0	0	36	132	66	40

Attachment 3 - CBMS Work Plan

Agile Project Timelines										
Project #	Project Title	PA	Track	Release	Sprint	Sprint Submission Planned Date	Sprint Submission Actual Date	Sprint Approval Planned Date	Sprint Approval Actual Date	Planned Sprint Hours
9128	PEAK Health Updates (Change Report PDF)	HCPF	UX	1/10/2016	Sprint 01	11/9/2015	11/10/2015	11/10/2015	11/10/2015	165
9128	PEAK Health Updates (Change Report PDF)	HCPF	UX	1/10/2016	Sprint 02	11/20/2015	11/20/2015	11/23/2015	11/20/2015	165
9128	PEAK Health Updates (Change Report PDF)	HCPF	UX	1/10/2016	Sprint 03	12/10/2015	12/10/2015	12/10/2015	12/11/2015	167
8995	CBMS PEAK – Update Effective Begin Date Mapping for HCPF	PEAK	PEAK	3/20/2016	Sprint 01	1/12/2016		1/13/2016		206
8995	CBMS PEAK – Update Effective Begin Date Mapping for HCPF	PEAK	PEAK	3/20/2016	Sprint 02	1/28/2016		1/29/2016		206
8995	CBMS PEAK – Update Effective Begin Date Mapping for HCPF	PEAK	PEAK	3/20/2016	Sprint 03	2/15/2016		2/16/2016		206
8995	CBMS PEAK – Update Effective Begin Date Mapping for HCPF	PEAK	PEAK	3/20/2016	Sprint 04	3/2/2016		3/3/2016		204

Attachment 3 - CBMS Work Plan

CHGs for Scheduled Projects

Project #	Project Title	PA	Lead Track	Release Date	CHG #	CHG BRD Hours	CHG TDD Hours	CHG DEV Hours	CHG SIT Hours	Total CHG Hours
8057	CBMS Transitional FA for CW	EBD	EDBC	1/10/2016	768	0	97	375	165	637
8057	CBMS Transitional FA for CW	EBD	EDBC	1/10/2016	781	0	0	670	35	705
8057	CBMS Transitional FA for CW	EBD	EDBC	1/10/2016	852	0	11	31	13	55
8599	CBMS CDLE > CBMS Interface and WFD/EF Changes	EBD	UI	1/10/2016	840	0	0	0	0	0
8599	CBMS CDLE > CBMS Interface and WFD/EF Changes	EBD	UI	1/10/2016	851	0	11	53	-46	18
8599	CBMS CDLE > CBMS Interface and WFD/EF Changes	EBD	UI	1/10/2016	860	0	24	14	0	38
8599	CBMS CDLE > CBMS Interface and WFD/EF Changes	EBD	UI	1/10/2016	896	0	0	0	0	0
8845	FA Standard Medical Deduction (SMED)	FA	EDBC	1/10/2016	838	0	-5	-67	-20	-92
8852	Notifying ABAWDS	FA	EDBC	1/10/2016	837	0	43	226	99	368
8852	Notifying ABAWDS	FA	EDBC	1/10/2016	864	3	0	6	12	21
8854	FA Count CW Diversion Payments Correctly	FA	EDBC	1/10/2016	843	2	0	0	6	8
8854	FA Count CW Diversion Payments Correctly	FA	EDBC	1/10/2016	865	10	0	67	16	93
8863	Employment First COGNOS Reports	FA	DA	1/10/2016	857	0	19	77	30	126
8863	Employment First COGNOS Reports	FA	DA	1/10/2016	911	0	0	0	0	0
9131	CBMS Minor Changes to CBMS Data Entry	OT	UI	1/10/2016	863	0	0	0	0	0
9131	CBMS Minor Changes to CBMS Data Entry	OT	UI	1/10/2016	854	0	0	0	0	0
9131	CBMS Minor Changes to CBMS Data Entry	OT	UI	1/10/2016	854	0	40	210	0	250
9461	CBMS Confirmation message pop up timer	OT	AA	1/10/2016	905	2	5	15	0	22
8601	CBMS MA Retro-Close/10 Day Noticing Exception Updates	HCPF	EDBC	3/20/2016	917	2	7	76	24	109
9256	CBMS MA DACA Non-Citizens	HCPF	EDBC	3/20/2016	919	2	2	14	4	22
9270	CBMS MA DACA Non-Citizens	HCPF	PEAK	3/20/2016	910	0	-14	-75	-10	-99
9293	CW/AF Modify Logic to set RRR to Discontinued	EBD	EDBC	3/20/2016	912	0	1	0	0	1
9313	CBMS PEAKPro System and Reporting Updates	HCPF	PEAK	3/20/2016	898	0	3	19	8	30
9313	CBMS PEAKPro System and Reporting Updates	HCPF	PEAK	3/20/2016	915	0	36	142	8	186

Attachment 3- CBMS Work Plan

Project #	Title	HLBR Received	Planned OOM Submit	Actual OOM Submit	Planned OOM Approval	Actual OOM Approval	PA	Lead track
I-3200	PEAK – Add Provider Locator in PEAK	5/26/2015	6/4/2015	6/4/2015	12/4/2015		HCPF	PEAK
I-3228	MA - CAHCO UI/UX Updates	5/27/2015	6/4/2015	6/4/2015	12/4/2015		HCPF	PEAK
I-3231	MA – CAHCO Policy Updates	5/27/2015	6/3/2015	6/4/2015	12/4/2015		HCPF	PEAK
I-2719	CBMS Worker Dashboard/Workflow	5/18/2015	6/1/2015	6/5/2015	12/4/2015		HCPF	DA
I-3333	CBMS Systematic Determination of Life Change Events Update	8/11/2015	8/19/2015	8/18/2015	12/4/2015		HCPF	EDBC
I-3314	CBMS Mobile App for CDHS	8/3/2015	9/21/2015	9/21/2015	12/4/2015		FA	UX
I-3367	CBMS Upgrade Performe from 2014.2 to 2015.1	9/21/2015	9/28/2015	9/28/2015	9/30/2015		OIT	AA
I-3393	CBMS Corticon Upgrade to 5.4.x	10/26/2015	11/2/2015	11/2/2015	11/5/2015		OIT	EDBC
I-3394	CBMS Performe Upgrade	10/26/2015	11/2/2015	11/2/2015	11/4/2015		OIT	AA
I-3424	Adding FA to MA Only Apps in PEAK	11/10/2015	11/18/2015	11/17/2015	11/20/2015		FA	PEAK
I-3441	CBMS FNS Federal Reporting and TOP HDT	11/16/2015	11/23/2015	11/19/2015	11/24/2015		FA	IN
I-3434	CBMS Update to CFMS Payroll and Recovery Files	11/12/2015	11/20/2015	11/19/2015	11/23/2015		OIT	IN
I-3428	FA Fixes to Client Correspondence	11/10/2015	11/20/2015	11/19/2015	11/24/2015		FA	CC
I-3426	FA Enhancements to COGNOS Reports	11/10/2015	11/20/2015	11/23/2015	11/30/2015		FA	DA
I-3425	FA Retain Eligibility for Qualified Non-Citizens	11/10/2015	11/24/2015	11/24/2015	11/20/2015		FA	EDBC
I-3447	CBMS JIRA Upgrade from version 5.2.7 to 6.4.11	11/24/2015	12/2/2015	12/2/2015	12/4/2015		OIT	AA
9629	CBMS MA Medical Card Daily Print File Updates	11/18/2015	11/25/2015	12/2/2015	12/4/2015		OIT	IN
I-3449	CBMS SOLR & PLAY Upgrade	11/30/2015	12/7/2015	12/4/2015	12/9/2015		OIT	AA
9628	CBMS CC Eliminate user override for mailing address	11/23/2015	12/4/2015	12/4/2015	12/9/2015	12/16/2015	OIT	IN
I-3452	CBMS Update to SDX File Process	12/1/2015	12/10/2015	12/8/2015	12/11/2015		OIT	IN
9626	CBMS TANF Federal Reporting Fixes to Increase WPR	12/4/2015	12/11/2015	12/9/2015	12/14/2015	12/16/2015	EBD	IN
I-3400	Update CC Trigger Documentation	11/2/2015	12/9/2015	12/9/2015	12/14/2015		OIT	CC
I-3459	MA Client Correspondence Update - Appeals	12/9/2015	12/16/2015	12/15/2015	12/18/2015		HCPF	CC
I-3460	FA Add Non-Discrimination Statement to CC	12/9/2015	12/16/2015	12/15/2015	12/18/2015		FA	CC
I-3461	PEAK MA Update for RCCO Information	12/10/2015	12/17/2015	12/16/2015	12/18/2015		HCPF	PEAK
I-3403	Create CMS SSP and Documents for MARS-E 2.0 Compliance	11/4/2015	12/4/2015	12/17/2015	12/21/2015		OIT	AERS
I-3391	MA Client Correspondence Updates	12/9/2015	12/16/2015		12/4/2015		HCPF	EDBC
I-3427	eDRS Generation IV Updates	12/17/2015	12/24/2015		11/23/2015		FA	IN

Impacted Tracks	Release Date	Notes
PEAK, UI	9/30/2016	OOM v1.0 sbmtd 6/4. In discussion for Sept 2016
PEAK, UI, CC, AA	9/30/2016	OOM v1.0 sbmtd 6/4. WPR sbmtd for Sept 2016 10/22.
PEAK, EDBC, UI, CC, AA	9/30/2016	OOM v1.0 sbmtd 6/4. WPR sbmtd for Sept 2016 10/22.
DA, AA, UI, PEAK	9/30/2016	
EDBC, PEAK, UI, IN, AA	9/30/2016	WPSC declined 1/17/16 release date. Per WPSC: "This will not move forward ESC for January. Funding is an issue as well as this going in during Open Enrollment" 8/26. WPR sbmtd for Sept 2016 10/22.
UX	9/30/2016	
AA		OOM v1.0 sbmtd 9/28. Requesting Feb 2016 release.
EDBC	5/22/2016	Requesting May 2016 Release.
AA		OOM v1.0 sbmtd 11/2. Requesting February 2016 release.
PEAK	9/30/2016	Project requested for June but not included in the Draft Big Picture June release that WPSC approved 12/16
IN, UI, DA, AA	9/30/2016	Project requested for June but not included in the Draft Big picture June release that WPSC approved 12/16
IN	5/22/2016	In discussion for May release. Requested June 2016
CC, EDBC, UI, AA, PEAK	6/26/2016	11/18: Rebaselined OOM submission from 11/18 to 11/20. OOM v1.0 sbmtd 11/19.
DA	6/26/2016	HLBR rcvd and OOM due date 11/18. Rebaselined OOM submission date from 11/18 to 11/20 Per DA request 11/19. OOM v1.0 sbmtd 11/23. OOM Submission overdue by two business days due to delay in Development updates 11/27.
EDBC, UI	9/30/2016	Project requested for June but not include din the Draft Big Picture release that WPSC approved 12/16
AA		HLBR rcvd and OOM due date 12/2. Requested for December 2015. OOM v1.0 sbmtd 12/2.
IN, CC		HLBR rcvd and OOM due date 11/25. Requested for February 2016. Emailed track for OOM submission delay. May need to rebaseline 11/27. OOM v1.0 sbmtd 12/2. Cnvrtd from 1-3440 12/17.
AA		HLBR rcvd and OOM due date 12/7. Requested for Feb 2016. OOM v1.0 sbmtd 12/4.
IN, UI, PEAK, EDBC, AA		Requesting February 2016 Release. HLBR v2.0 rcvd and OOM due date 11/30. 12/1: Rebaselined Oom submit from 11/30 to 12/4 because lead track changed and further analysis needed. OOM v1.0 sbmtd 12/7. Cnvrtd from 1-3398 12/17.
IN, UI, AA	6/26/2016	HLBR rcvd and OOM due date 12/8. Requested for June 2016. 12/7: Rebaseline request to move OOM submission from 12/8 to 12/10. OOM v1.0 sbmtd 12/8.
IN, UI, DA, AA	6/26/2016	HLBR rcvd and OOM due date 11/18. Requesting June 2016 release. OOM v1.0 sbmtd 11/17. OOM v2.0 sbmtd 11/19. HLBR v2.0 sbmtd and OOM v3.0 due date 12/11. OOM v2.0 aprvd 12/7. Title chngd from WPR Federal Reporting Fixes – Phase 3 to CBMS TANF Federal Reporting Fixes to increase WPR 12/7. OOM v3.0 sbmtd 12/9. OOM v3.0 aprvd 12/16. Cnvrtd from 1-3415 12/16.
CC, EDBC, UI		Requesting Feb 2016 Release OOM v1.0 sbmtd 11/16. OOM v2.0 sbmtd 12/9.
CC		OOM v1.0 sbmtd 12/15. HCPF requests a December 2015 Release.
CC		OOM v1.0 sbmtd 12/15. FA requests a Feb 2016 release.
PEAK, UI	9/30/2016	OOM v1.0 sbmtd 12/16. HCPF is requesting a Sep 2016 release.
AERS, AA	4/24/2016	Requesting April 2016 release. Delayed OOM submission due to approver needing to review before submission 12/18.
EDBC, CC, PEAK	6/26/2016	Requesting June 2016 release. HLBR v2.0 rcvd and OOM v2.0 due date 12/16.
IN, UI, AA	6/26/2016	HLBR rcvd and OOM due date 11/18. OOM v1.0 sbmtd 11/19. HLBR v2.0 rcvd and OOM v2.0 due date 12/24.



COLORADO
Department of Human Services



FY 2016-17

Joint Budget Committee Hearing:

Information Technology Services, County Administration, Self-Sufficiency, Adult Assistance Programs, and Youth Corrections

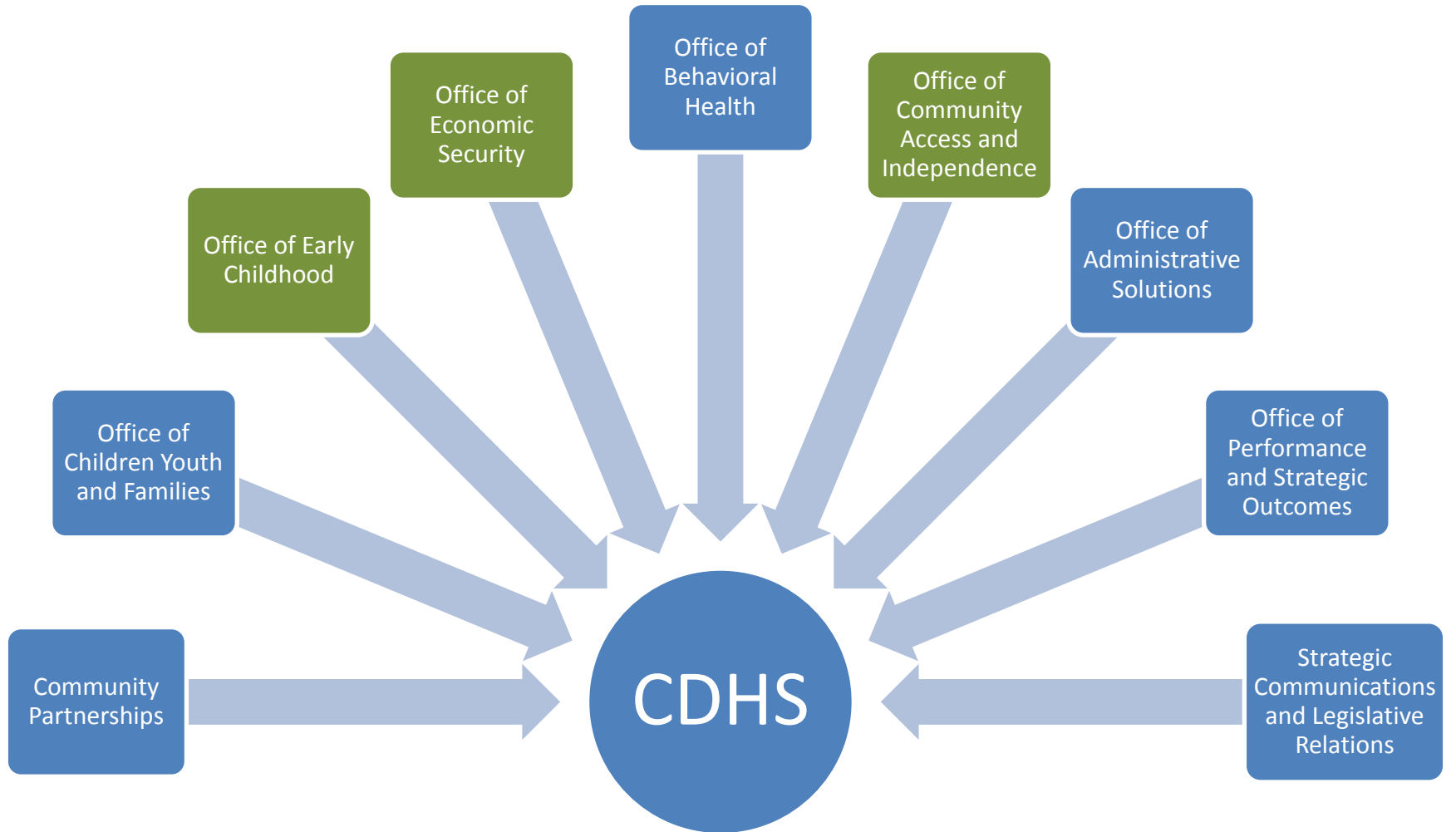
Colorado Department of Human Services
January 11, 2016



COLORADO
Department of Human Services



Introductions and Opening Comments



Colorado Department of Human Services FY 2016-17 Budget Requests

Office of Economic Security

- CBMS/PEAK Annual Base Adjustment Request: \$12.3 million

Office of Community Access and Independence

- State Adult Ombudsman Program Head Note and Letter Note Modifications

Office of Early Childhood

- Children's Savings Accounts: \$100,000

Other Items

- Provider Rate Decrease: Reduction of \$7.9 million



COLORADO
Department of Human Services



Colorado Benefits Management System (CBMS) Funding Request

JBC Hearing Questions: 1-13

Five years Ago

- CBMS
- Client Server architecture
- Physical server
- PowerBuilder, COBOL, Unix
- Users: CBMS- 3000, primarily in counties

- 735,000 active cases

- 80% of transactions in less than 4 seconds

- A backlog of thousands of tickets, many older than 12 months

- 20,000 hours of planned maintenance a year

- Limited user support and only program specific consumer support

Present

- CBMS, PEAK, SES, PEAK mobile, Health App
- Web and mobile
- Virtual servers
- JAVA, Linux
- Users: CBMS- 4900, counties and medical assistance sites, PEAK – approaching 1M accounts

- 1,000,000+ active cases

- Averaging nearly 95% of transactions processed in less than 4 seconds
- 84% reduction in the backlog and most tickets.

- 160,000 hours of development a year capacity, plus 20,000 hours of maintenance

- Integrated training, on-line help and model developed for integrated call center/service desk consumer support

CBMS

2014

- # of Active CBMS Cases
 - Food 221,413
 - Cash 46,792
 - Med 643,541
- Lines of Code 13 Million
- Cobol Legacy Programs 350
- Batch Programs 200
- Interfaces 80
- Online Services 1580
- Database size 5.2 TB
- Database Growth (Month) 80 GB
- Database Tables 1500
- Reference Tables 1100
- # of Screens 820
- # of Reports 1300
- Total Registered Users 4600
- Annual Correspondence 5m Pieces

2015

- # of Active CBMS Cases
 - Food 220,297 -.5%
 - Cash 46,322 -1%
 - Med 769,676 10%
- Lines of Code 8.5 Million -34%
- Cobol Legacy Programs 35 90%
- Batch Programs 210 5%
- Interfaces 85 6%
- Online Services 1580 ----
- Database size 5.5 TB 5.7%
- Database Growth (Month) 85 GB 6%
- Database Tables 1560 4%
- Reference Tables 1300 18%
- # of Screens 700 14.6%
- # of Reports 1250 -4%
- Total Registered Users 4600 ----
- Annual Correspondence 12m Pieces 140%

PEAK

2014

- # of Applications Submitted 646,348
- # of Change Reports Submitted 334,519
- # of Self Assessments completed 320,382
- Lines of Code 180,000
- Batch Programs 2
- Interfaces 20
- Database Size 116 Gb
- Average Database Growth (Month) 25 Gb
- Database Reference Objects 130
- PEAK Screens 306
- Number of Reports 14
- Total Registered Accounts 610,426
- RTE Percentage 75% - 80%

2015

- # of Applications Submitted 942,659 45%
- # of Change Reports Submitted 634,528 89%
- # of Self Assessments completed 385,063 20%
- Lines of Code 201,107 11.7%
- Batch Programs 16 700%
- Interfaces 20 ----
- Database Size 359.6 Gb 210%
- Average Database Growth (Month) 20 Gb 20%
- Database Reference Objects 170 30.7%
- PEAK Screens 482 57.5%
- Number of Reports 15
- Total Registered Accounts 928,230 52%
- RTE Percentage 75% - 80%

PEAK Universal Applications

2014

- Benefit Programs in “Apply for Benefits”
 - Medical Assistance
 - Food Assistance
 - Colorado Works / TANF
 - Adult Financial
 - Nurse Family Partnership
- Additional Benefit Programs in “Am I eligible”
 - WIC - Women, Infants, Children
 - Hippy - Home instruction for Parents of Preschool Youngsters
 - PAT - Parents as Teachers
 - Healthy Steps

2015

- Benefit Programs in “Apply for Benefits (AFB)”
 - Medical Assistance
 - Food Assistance
 - Colorado Works / TANF
 - Adult Financial
 - Nurse Family Partnership (NFP)
 - Child Care Assistance (CCCAP)
 - Head Start
- Additional Benefit Programs in “Am I Eligible (AIE)”
 - Supplemental Nutrition Program for Women, Infants, and Children (WIC)
 - Home Instruction for Parents of Preschool Youngsters (HIPPY)
 - Parents as Teachers (PAT)
 - Healthy Steps
 - School Nutrition Programs
 - Preschool Special Education
 - Early Intervention Colorado for Infants, Toddlers, and families (EI Colorado)
 - Low Income Energy Assistance Program (LEAP)

Governance

2014

- Scheduled builds = 12
- Emergency & off schedule builds = 57
- Projects implemented = 238
- Valued at \$17.25 million
- Vendor hours = 138,271

Highlights:

- Open Enrollment II
- Mobile Health Application
- Online Help Improvements
- Presented the ISM Innovation Award for Real Time Eligibility

2015

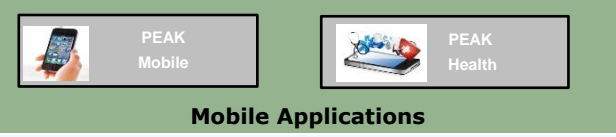
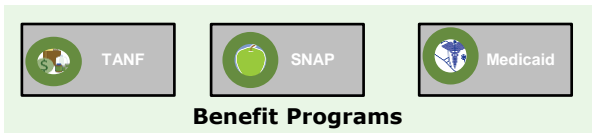
- Scheduled builds (including the 1/10/2016 Winter build) = 13
- Emergency and off schedule builds = 50
- Projects implemented = 273
- Valued at \$19.6 million
- Vendor hours = 150,769

Highlights:

- Open Enrollment III
- Food Assistance Federal Compliance Issues
- IRS 1095 Reporting
- Added 6 new programs through the Universal Applications in PEAK
- Presented the IAC/ACT “Incubator Award” for Real Time Eligibility

2015 Additional Highlights

- Service Delivery Enhancements
 - CBMS / PEAK dedicated support team - Tier II
 - Significant reduction of tickets
 - 12/31/2014 - 4178
 - 12/31/2015 - 777
 - Service desk ticket prioritization
 - Established trending and BI process
- Implemented HP Quality Center
 - Testing automation
 - Test Script Library
 - Defect management
 - Requirement tracking
- Co-located testing with C4 to support Shared Eligibility and Open Enrollment
- Implemented CA Service virtualization
 - Supports Interface emulation testing
- RFP creation for new vendor
- Established Dedicated Agency Customer Liaisons to enhance communication
- Security Enhancements
- Daily Operational review
- Online Help availability for all CBMS screens
- Release Command Center Enhancements
- Training
 - Scrum master certification for Business analysts
 - SQL training to support report writing
- County Relationship Enhancements:
 - Monthly County visits
 - Option 2 & 3 County Technical meetings
 - County Release testing support



Colorado Benefits Management System

Core Eligibility Services

- Account Management
- Registration
- Intake
- Caseload Management
- Eligibility Determination
- Authorization
- Benefit Issuance
- Benefit Recovery

Business Support Services

- Security
- Alerts
- Online Help
- Statewide Client Index
- Screen Flow Management
- Correspondence
- Document Management
- Rules Engine
- Workload Management

Interfaces

- Federal Data Exchanges
 - SSA
 - Federal Hub
 - CMS
 - PARIS
 - TANF
- State Data Exchanges
 - C4HCO
 - IEVS
 - MMIS
 - Trails
 - CHATS
 - ACSES

Reports

- Federal & State Reports
 - Federal FNS reports
 - Federal DRS reports
 - Federal Interface reports
 - State Issuance reports
 - State repayment reports
 - State Medical Benefit report
- Big Data
 - MA Exec Dashboards
 - IRIS

Batch Processing

- Periodic Cycles
 - Issuance Cycle
 - Mass Update
 - Client Correspondence Generation
 - COLA
 - Generate Report & Interface Extracts



COLORADO
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County Administration

JBC Hearing Questions: 14-17

County Administration Costs

FY 2014-15 DHS County Administration Appropriation and Expenditures

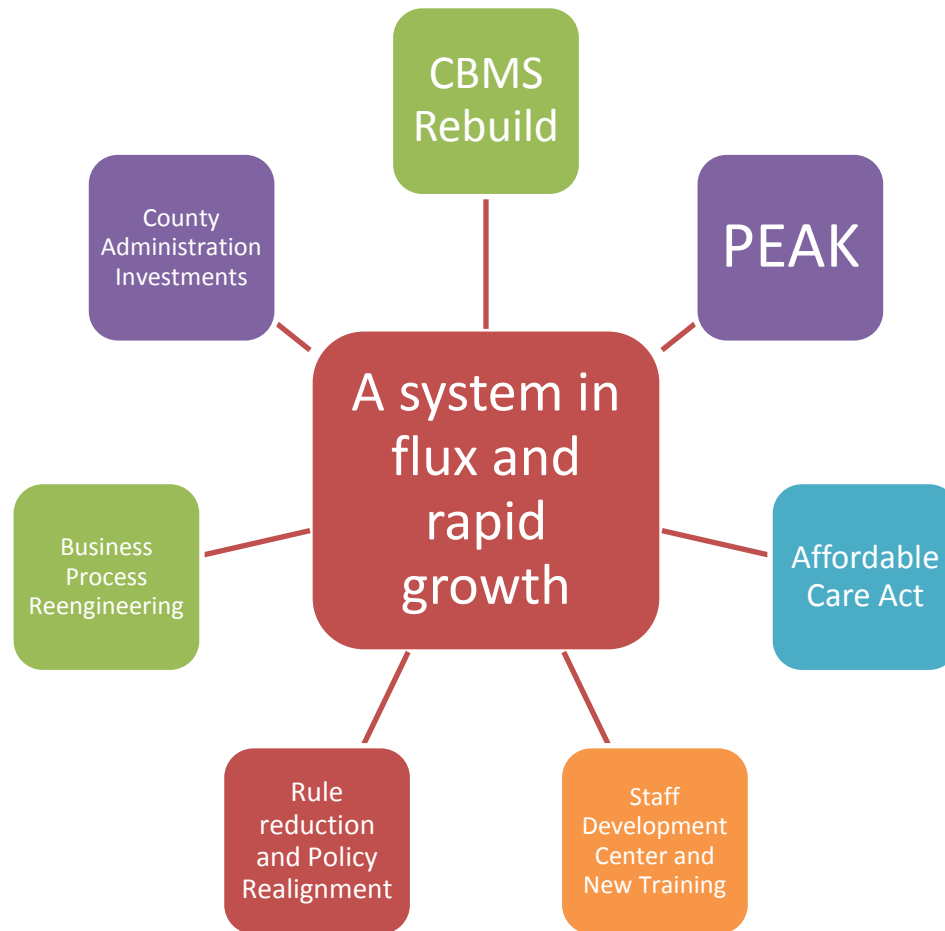
Appropriation	\$57.4 M
Total Expenditures	\$67.2 M
Total Overexpenditure	\$9.8 M
Additional federal funds and surplus distribution	\$4.0 M
Adjusted Overexpenditure (County Only)	\$5.8 M

FY 2014-15 County Administration Overexpenditure

\$5.8 overexpenditures in FY 2014-15 by county:

County	Total Final County Share of Over Expenditures	County	Total Final County Share of Over Expenditures
Denver	\$3,378,457	San Miguel	\$10,513
Boulder	\$1,723,160	Routt	\$9,595
Weld	\$398,247	Costilla	\$7,731
Garfield	\$142,663	Ouray	\$5,090
Rio Blanco	\$66,469	Phillips	\$2,196
Broomfield	\$56,928	Grand	\$1,619
Baca	\$25,053	Lincoln	\$863
Counties in Bold overspent in FY 2013-14			

Workload Study – What will it tell us?





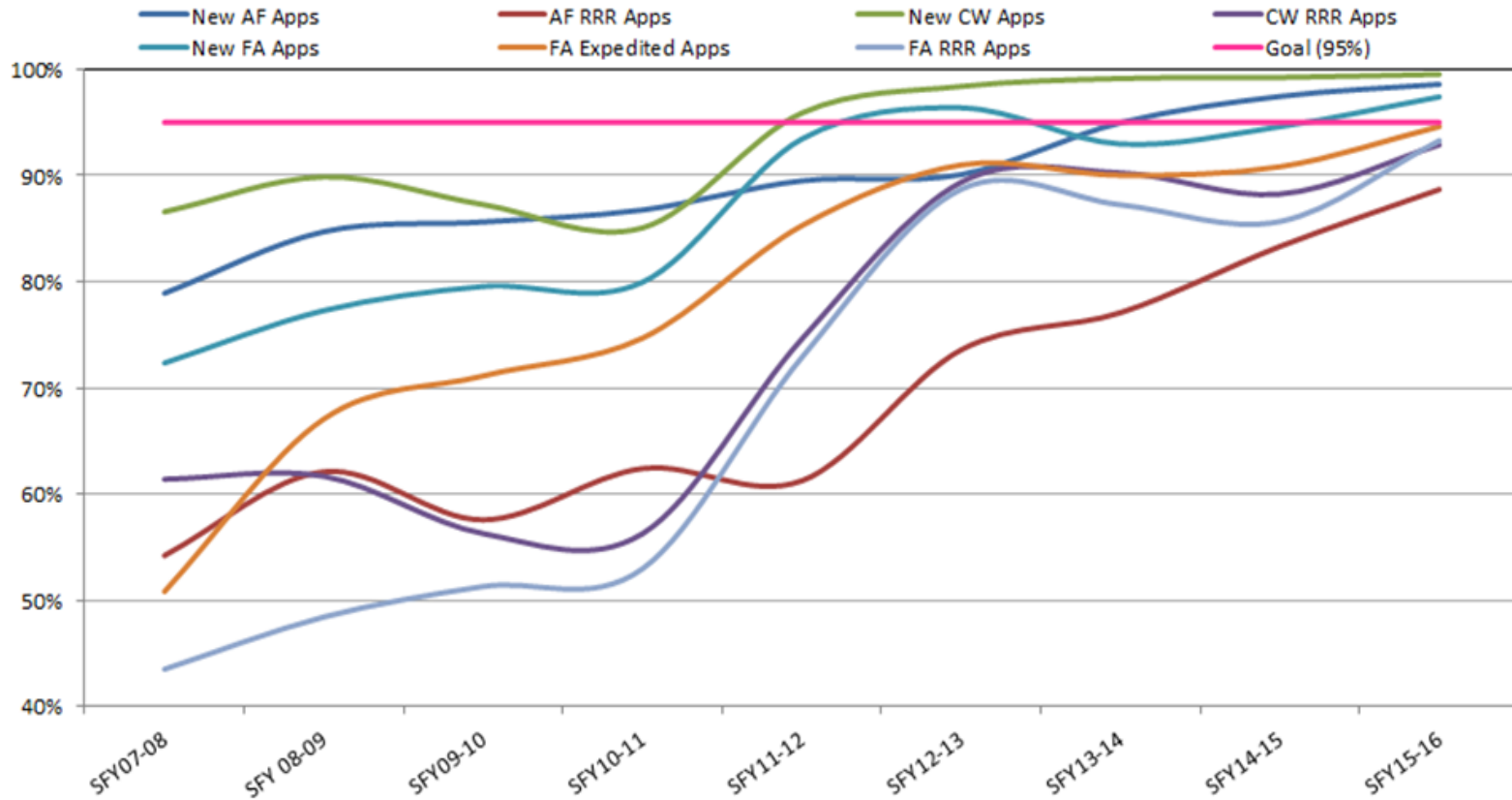
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Supplemental Nutrition Assistance Program (SNAP)

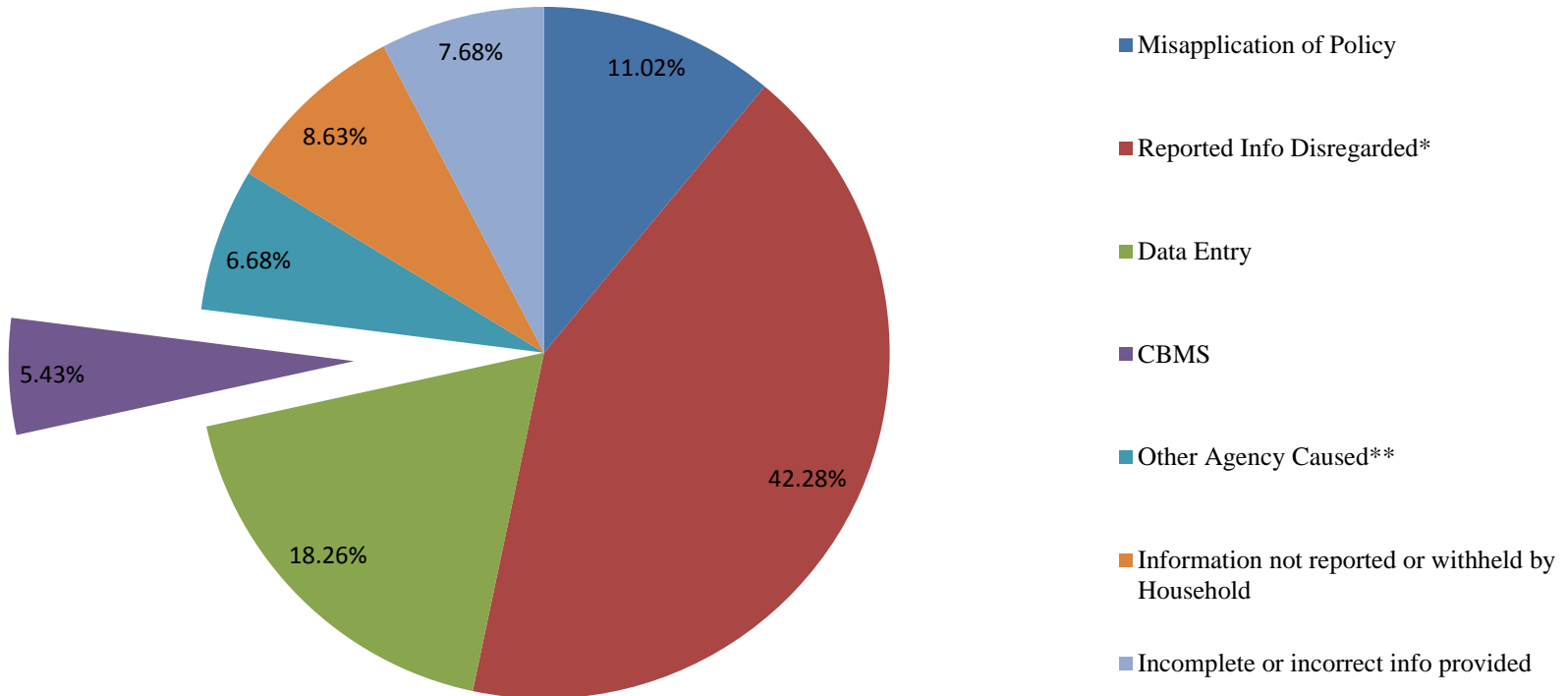
JBC Hearing Questions: 18-30

Public Assistance Application Timeliness and Accuracy



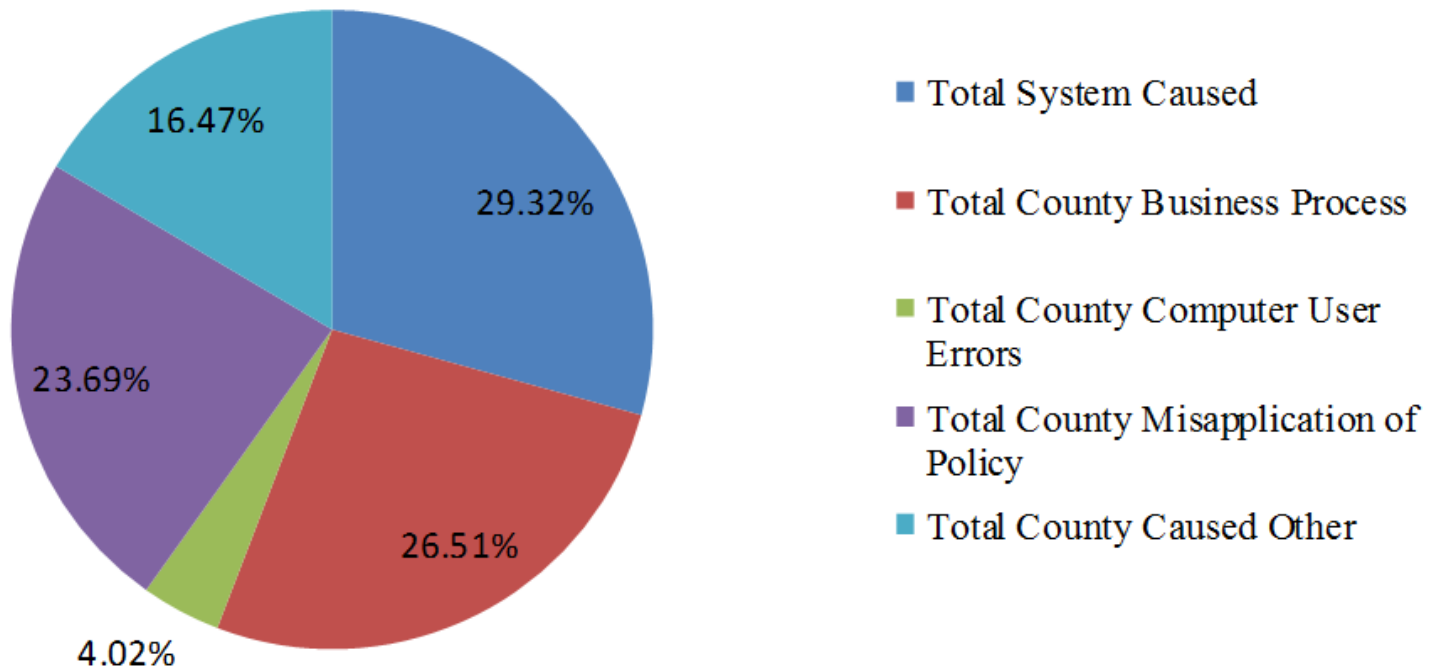
Public Assistance Application Timeliness and Accuracy

Causes of Payment Error Rate (PER)



Public Assistance Application Timeliness and Accuracy

Causes of Case and Procedural Error Rate (CAPER)



Public Assistance Application Timeliness and Accuracy

State Program
Administration
Evaluation
2015

Business Process
Redesign Post
Implementation
Reviews
2016

CDHS Quality
Control Study
2016

County
Processes and
Tools
Assessments
2016



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Temporary Assistance For Needy Families

JBC Hearing Questions: 31

Colorado Works Work Participation Rates

- May 2015 Colorado received notification that we had not met the federal work participation rate (WPR) for FFY 2012
- January 11, 2015: Received notice that Colorado had not met the federal work participation rate (WPR) for FFY 2013
- The Department submitted a dispute letter to the Administration for Children and Families (ACF) July 28, 2015- no response to date
- To improve our federal compliance, CDHS developed a detailed work plan to improve the work participation rate with an emphasis on:
 - Statewide Policy
 - CBMS Changes
 - County practices
 - County support, technical assistance, and support



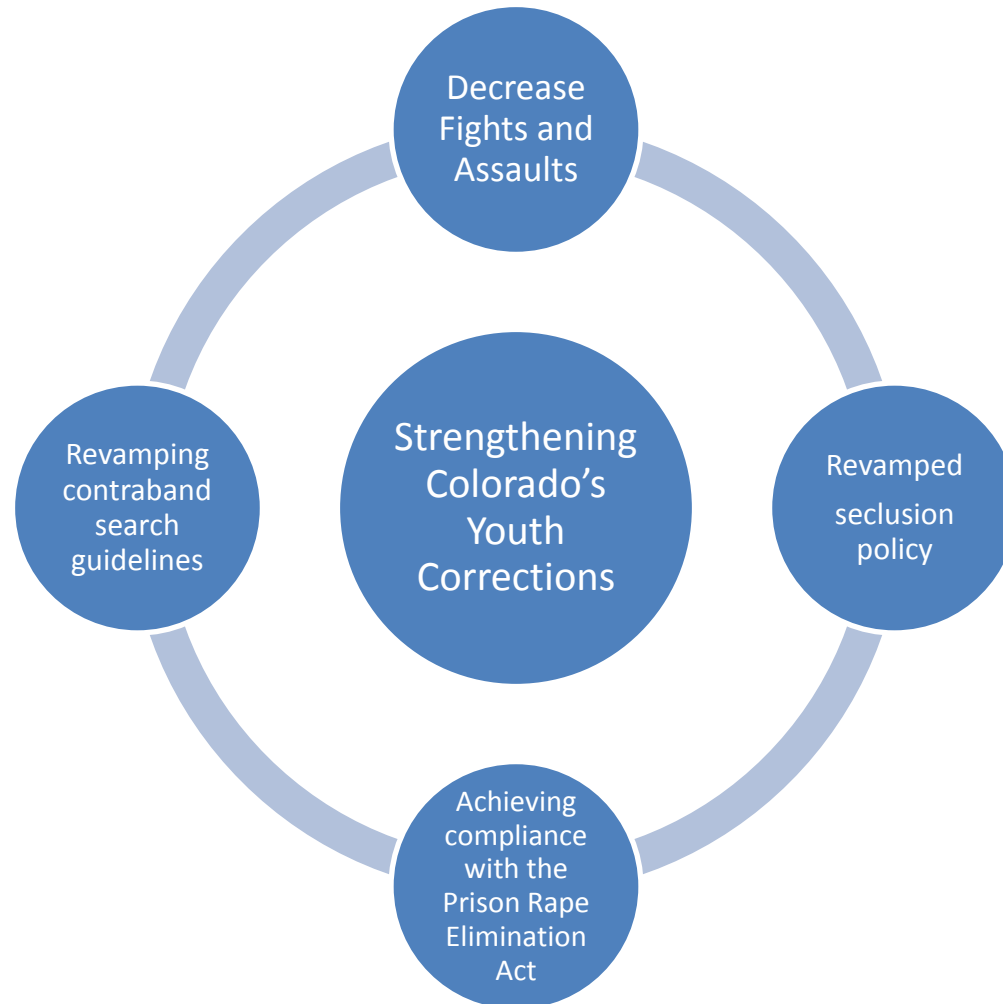
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Division of Youth Corrections Staffing Request

JBC Hearing Questions: 32-62

Division of Youth Corrections



Facility Distinctions

State-owned and operated Facility

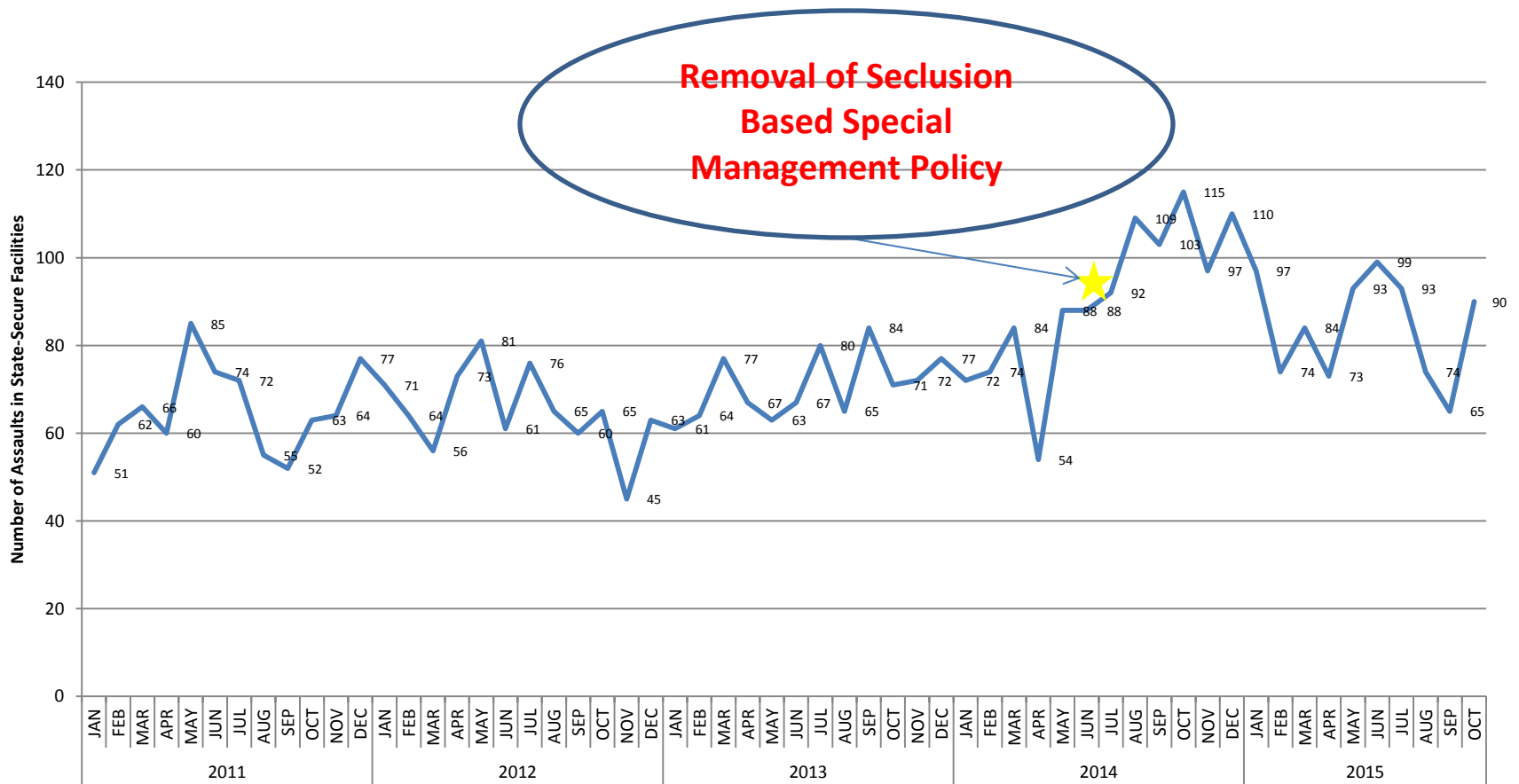
- Newly committed youth
- Youth who require a secure setting
- Youth with security and treatment needs which community placement cannot provide
- Youth who escaped from community placement or is pending court proceedings for new charges

Privately Operated Facility

- Youth determined appropriate for lower level supervision and increased community access
- Treatment needs without other risk concerns
- “Step down” from State-operated secure facility to prepare for parole
- Private providers may decline admissions

Fights in DYC Facilities

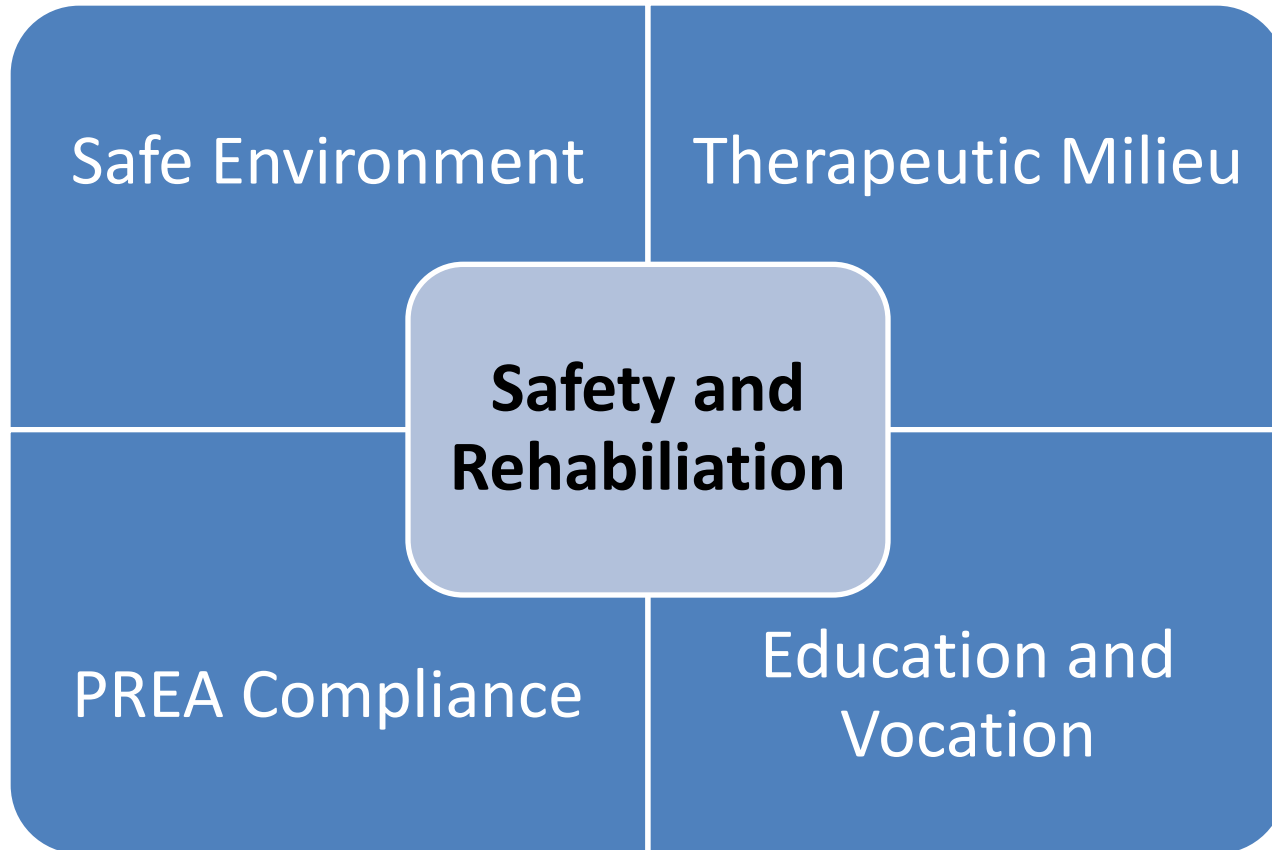
(January 2011-October 2015)



FY 2016-16 DYC Security Staffing in Facilities – Phase 2

- FY 2016-17 Request: \$4.7million General Fund
 - 78.8 FTE – direct care staff
 - Needs assessment for special education resources
- Builds on new staff appropriated in FY 2014-15 and FY 2015-16 to address safety and security of DYC facilities

Need for Additional FTE





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Senate Bill 15-109 Task Force Findings And Recommendations

JBC Hearing Questions: 63-64



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Adult Assistance Program Funding

JBC Hearing Questions: 65



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Colorado Refugee Services Program

JBC Hearing Questions: 66-68

Refugee Resettlement

- CDHS manages the state refugee resettlement program which assists refugees with:
 - Employment assistance
 - English as a Second Language (ESL) training
 - Cultural Orientation classes
 - Case management
 - And other needs
- The program is entirely federally funded and services are provided through contracts with nonprofit agencies
- Assist with employment services, English as a Second Language (ESL) training, and
- Colorado leads the nation in refugee employment



COLORADO
Department of Human Services



Children's Savings Accounts

JBC Hearing Questions: 69-75

Children's Savings Account Pilot Outcomes

A Colorado Children's Savings Account program for low-income preschool-age children, supported by a public-private partnership, that:

- Increases low-income children's college aspirations and enrollment
- Creates a more educated, competitive workforce for the state
- Builds economic opportunities for low-income families

WHY A SAVINGS SOLUTION?



A LMI student with an account dedicated to saving for college is:

- More likely to get **better grades** and to **graduate from high school**
- **3X** more likely to attend college and **4X** more likely to graduate from college, even with only \$1-\$499 in the account.

Sources: Zhan, M., & Sherraden, M. (2003). Assets, expectations, and children's educational achievement in female-headed households. *Social Service Review*, 77 (2), 191-211. *Building Expectations, Delivering Results: Asset-Based Financial Aid and the Future of Higher Education* (2013). The University of Kansas School of Social Welfare, Assets & Education Initiative.

Colorado's Children's Savings Account Pilot

- CSAs for approximately **6,000 HeadStart enrolled children** over 3-year pilot
- Partners with the state 529 college savings program, **CollegInvest**
- \$50 state-funded **initial deposit** in each account
- \$100/year in **savings matches** for up to five years + a bonus to encourage regular saving
- **Financial education** for children and parents
- **Evaluation** of program's impact on children and families

Children's Savings Account Pilot Outcomes

Short-Term (Years 1-3)

- Families begin saving for college
 - Increased math & reading scores
 - Improved kindergarten readiness
- Parents & their children receive financial education
- Parents have increased expectations for their children's future

Intermediate-term (Years 4-10)

- Children form a college-bound identity, i.e., they see themselves as someone who will go to college
- Increased third grade reading scores
- Improved high school readiness
- Parents and children build financial capability

Long-term (Years 11+)

- Increased high school graduation rates
- Increased enrollment in postsecondary education
- Increased completion of postsecondary education
- Improved financial stability and asset building for participants as young adults



COLORADO
Department of Human Services



Federal Supplemental Security Income Application Assistance Pilot Program

JBC Hearing Questions: 76-78

Reggie Bicha
Executive Director
Reggie.Bicha@state.co.us
303-866-3475

DEPARTMENT OF HUMAN SERVICES

Office of Information Technology Services, County Administration, Office of Self Sufficiency,
Adult Assistance Programs, and the Division of Youth Corrections

FY 2016-17 JOINT BUDGET COMMITTEE HEARING AGENDA

Monday, January 11, 2016

1:30 pm – 4:30 pm

1:30-1:40 INTRODUCTIONS AND OPENING COMMENTS

1:40-2:00 COLORADO BENEFITS MANAGEMENT SYSTEM (CBMS) FUNDING REQUEST

1. Has CBMS, as the single, integrated system for all public assistance programs, solved the issues it was intended to fix at the onset of its development?
2. Please describe the components, including estimated costs, which make up the base need (“keeping the lights on”) of the system.
3. What specific needs of the system and the system’s users are resulting in this funding request?
4. If the amount of funding requested is appropriated by the legislature, what specific system improvements will be implemented?
5. Has the CBMS team enlisted the support of a third party to assist in determining the appropriate level of base funding needed to “keep the lights on” and the appropriate amount of additional vendor support hours needed for ad-hoc compliance issues that arise?
6. With the funding requested, what is the overall strategy for addressing both technology and people issues that are contributing to error rates in the administration of programs, including SNAP and TANF?
7. Explain how the CBMS team performs quality control functions for the technology components of the system and the human interactions with system.
8. The CBMS team often cites “federal compliance” as the justification for requesting additional funds to improve the system. Please describe the processes used by the Departments of Health Care Policy and Financing and Human Services to monitor and report on specific federal compliance issues.

9. What is the anticipated life-span of the next CBMS support contract and what services will be included in this contract?
10. What performance standards will be included in the procurement process for the next CBMS contract and how will the standards and milestones be enforced?
11. Why was this funding request submitted as an operating request rather than a capital construction request?
12. Please describe the interactions the CBMS team has (and will have in the future) with the Joint Technology Committee.
13. Please explain any lessons learned from the implementation of the CBMS modernization project that have been applied to the CORE project (and vice versa).

2:00-2:15 COUNTY ADMINISTRATION

14. Why was a county workload study not included in the Department's FY 2016-17 budget request?
15. If a county workload study was funded for FY 2016-17, what benefits would it provide the Department, as well as the Department of Health Care Policy and Financing, in supervising county-administrated social services programs?
16. What guidance would the Department offer to counties in administering social services programs within the existing appropriation of moneys to the County Administration line item given that counties consistently over-expend the dollar amount provided? Has the Department considered relaxing performance standards (e.g. timeliness and accuracy)?
17. With counties seeking additional funding for a workload study and for additional staff to administer State-supervised social services programs, why did the Department choose to apply a provider rate decrease to cut funding to counties?

2:15-2:45 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

18. Please explain the distinct roles of the federal government, the State, and counties in providing food assistance to citizens.

19. Please explain the process used to determine if a county is compliant with federal performance standards? Is the process the same across all counties?
20. Please provide data by county on Colorado's performance compared to federal performance standards.
21. What percentage of failures to meet federal performance standards are a result of CBMS issues and what percentage are due to human and/or process errors?
22. How does the CBMS funding request relate to fixing issues that result in counties failing to meet federal performance standards?
23. What actions does the Department take when a county fails to meet federal performance standards? Are other tools available to the Department that are not currently being used?
24. If Colorado receives a financial penalty for failure to meet federal performance standards, who would pay the penalty? Would the State pay? Would the counties failing to comply with the standards pay?
25. What internal solutions is the Department putting in place to correct issues that are contributing to counties failing to meet federal performance standards?
26. What is the Department's opinion on the six solutions put forth by Committee staff to begin addressing issues contributing to Colorado's inability to meet federal performance standards?
27. If the Department is tasked with developing a pay for performance model for providing funding to counties for administering SNAP, what would this look like? How would base funding be calculated for each county? Would financial incentives be included? Would financial penalties be included?
28. If SNAP is no longer part of the Department's rules making process, will this impair the State's ability to implement strategies at the county level for improving performance against federal standards?
29. Please describe how the Department is using moneys appropriated for the current fiscal year to contract with a third party to review SNAP processes and procedures.
30. Do county and State employees need more training to properly implement SNAP? If so, what entity should provide the training?

2:45-2:50 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

31. Please provide an update on the current status of the potential financial penalty for Colorado's failure to meet federal work participation standards for 2012.

2:50-3:20 DIVISION OF YOUTH CORRECTIONS STAFFING REQUEST

32. Please describe the goals of the youth corrections system and how the State-owned and -operated detention and commitment facilities meet the goals.

33. What is the average length of stay for youth in State-owned and -operated detention and commitment facilities?

34. Please describe the difference between youth served in State-owned and -operated commitment facilities and youth served by privately-operated commitment facilities.

35. Are State-owned and -operated commitment facilities considered facilities of last resort for the most difficult to manage youth?

36. Do private facilities for committed youth have the option of refusing a youth for admission?

37. Please discuss the Department's performance against the metrics captured as part of the C-Stat process for the Division of Youth Corrections.

38. Please describe how recommitments occur and how the number of recommitments in the State-owned commitment facilities compares to the overall number of youth in the facilities.

39. Is there a relationship between the success (or lack thereof) of the Department and its partners in serving youth in the justice system and the increased number of recommitments?

40. How did the average daily population in State-owned and -operated facilities compare to the number of assaults and fights from January 2014 through September 2015?

41. Are there seasonal factors that contribute to a higher or lower occurrence of assaults and fights in State-owned and -operated facilities? Are there other factors that cause the variability in the monthly level of assaults and fights? Does the Department see the same trends occurring each year?

42. Across the State facilities, do more assaults and fights occur with youth in detention or commitment?
43. Why aren't level one assault incidents declining across the State-owned and -operated facilities as much as level two and level three incidents?
44. Is there a relationship between the lack of a State-owned and -operated facility for youth with severe behavioral health needs and the high number of fights and assaults?
45. How do the number of fights in State-owned and -operated commitment facilities compare to privately-operated commitment facilities?
46. What is the target number for assaults and fights in State-owned and -operated detention and commitment facilities?
47. What is the relationship between staff-to-youth ratios and the number of assaults and fights over the last ten years?
48. What are the correct staff-to-youth ratios at each of the State-owned and -operated facilities? How many additional positions at each facility are required to get to the correct level?
49. Are staff-to-youth ratios different between State-owned and -operated detention and commitment facilities?
50. Are penalties associated with failing to meet PREA-prescribed staff-to-youth ratios one-time or ongoing?
51. Why does the Gilliam facility have an identical staff-to-youth ratio during the waking hours and during the sleeping hours?
52. Why does the Gilliam facility have a better staff-to-youth ratio than any of the other State-owned and -operated detention and commitment facilities?
53. Since 75 new FTE were added last year, why is the Department experiencing an increase in overtime work hours in the State-owned and -operated detention and commitment facilities? Why do temporary hours continue to increase?
54. How much would the staffing increase sought for FY 2016-17 lower the hours of overtime and temporary help worked in each facility?

55. Does the Department consider the number of unplanned absences throughout the State-owned and -operated detention and commitment facilities to be a management issue that must be addressed?
56. Does the Department hire and train on a continuous basis in an effort to decrease the number of vacancies?
57. Are pay levels for staff at State-owned and -operated commitment facilities comparable to pay levels for staff at privately-operated commitment facilities?
58. What data are collected regarding job satisfaction for staff in State-owned and -operated facilities? What does the data show? Is the Department implementing strategies to improve employee satisfaction and, if so, what are the strategies?
59. How is the State able to meet its educational obligations if the Department is requesting a 1.0 percent provider rate decrease for teachers?
60. How would the proposed 1.0 percent reduction in rates paid to community providers impact behavioral health services offered to youth?
61. How would additional staff lead to reductions in the use of seclusion and isolation?
62. Please provide a status update on the Department's efforts to reduce the occurrences of medication misuse.

3:20-3:30 SENATE BILL 15-109 TASK FORCE FINDINGS AND RECOMMENDATIONS

63. Please provide an update on the Department's intentions to implement the Task Force's recommendations.
64. Why did the Department not request funding in the FY 2016-17 budget request to implement the recommendations from the Task Force?

3:30-3:35 ADULT ASSISTANCE PROGRAM FUNDING

65. Does the Department project that it will receive a transfer into the Older Coloradoans Cash Fund due to under-expenditures in the Senior Citizen and Disabled Veteran Property Tax

Exemption? If so, should the Joint Budget Committee anticipate a supplemental request for the Department to expend the moneys? How would these moneys be used?

3:35-3:45 COLORADO REFUGEE SERVICES PROGRAM

66. Please provide an overview of the services the Department provides to refugees entering and residing in Colorado.

67. How many Syrian refugees are anticipated to arrive in Colorado? When will they arrive?

68. What documentation will be provided to Syrian refugees arriving in Colorado?

3:45-3:55 CHILDREN'S SAVINGS ACCOUNTS

69. What need would this proposed program address?

70. What is the anticipated outcome of the proposed program?

71. Is legislation required to create this new program?

72. Is the proposed program an evidence-based solution to an existing issue?

73. Is the proposed program modeled after one that was successful in another state?

74. Does evidence exist that additional moneys will ever be deposited in the accounts?

75. How does this funding request align with requested decreases in the Department of Higher Education's FY 2016-17 budget request?

3:55-4:00 FEDERAL SUPPLEMENTAL SECURITY INCOME APPLICATION ASSISTANCE PILOT PROGRAM

76. Was the Department able to adhere to the proposed timeline submitted in the request for proposals (RFP)?

77. Should the pilot program be extended based on factors related to unspent moneys, a late program start-date, and/or unmet data needs?

78. Were there any barriers to getting referrals from counties into the pilot program? If barriers existed, do they warrant an extension of the pilot program to make sure that sufficient data is collected?