

FY 2017-18 BUDGET REQUEST - HEALTH CARE POLICY AND FINANCING

RECONCILIATION REPORT

Department Summary

| Long Bill Section Totals | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|---|--------------------|------------|---------------------|-------------------|-----------------------------|----------------------|
| 01. Executive Director's Office | | | | | | |
| FY 2016-17 Initial Appropriation | \$273,643,063 | 400.3 | \$63,612,420 | \$31,970,000 | \$3,828,984 | \$174,231,659 |
| FY 2016-17 Total Revised Appropriation | \$276,324,747 | 400.3 | \$63,335,022 | \$30,654,315 | \$3,523,924 | \$178,811,486 |
| FY 2017-18 Base Request | \$243,291,302 | 400.6 | \$62,433,205 | \$30,995,992 | \$3,969,758 | \$145,892,347 |
| FY 2017-18 Governor's Budget Request | \$274,054,731 | 415.6 | \$64,624,461 | \$34,295,686 | \$3,699,800 | \$171,434,784 |
| FY 2017-18 Governor's Revised Request | \$278,364,712 | 415.6 | \$63,536,484 | \$34,219,670 | \$3,661,005 | \$176,947,553 |
| 02. Medical Services Premiums | | | | | | |
| FY 2016-17 Initial Appropriation | \$6,818,264,595 | 0.0 | \$1,942,439,768 | \$705,708,120 | \$5,240,893 | \$4,164,875,814 |
| FY 2016-17 Total Revised Appropriation | \$6,944,519,202 | 0.0 | \$1,966,937,613 | \$707,358,313 | \$9,102,709 | \$4,261,120,567 |
| FY 2017-18 Base Request | \$6,752,893,112 | 0.0 | \$1,945,000,281 | \$678,832,273 | \$5,240,893 | \$4,123,819,665 |
| FY 2017-18 Governor's Budget Request | \$7,144,917,275 | 0.0 | \$2,074,236,795 | \$690,213,730 | \$9,031,044 | \$4,371,435,706 |
| FY 2017-18 Governor's Revised Request | \$7,144,917,275 | 0.0 | \$2,074,236,795 | \$690,213,730 | \$9,031,044 | \$4,371,435,706 |
| 03. Behavioral Health Community Programs | | | | | | |
| FY 2016-17 Initial Appropriation | \$662,617,330 | 0.0 | \$183,627,684 | \$16,633,015 | \$0 | \$462,356,631 |
| FY 2016-17 Total Revised Appropriation | \$606,169,032 | 0.0 | \$177,247,938 | \$17,202,538 | \$0 | \$411,718,556 |
| FY 2017-18 Base Request | \$662,625,975 | 0.0 | \$183,599,168 | \$16,665,871 | \$0 | \$462,360,936 |
| FY 2017-18 Governor's Budget Request | \$656,871,450 | 0.0 | \$175,977,358 | \$26,995,493 | \$0 | \$453,898,599 |
| FY 2017-18 Governor's Revised Request | \$656,871,450 | 0.0 | \$175,977,358 | \$26,995,493 | \$0 | \$453,898,599 |
| 04. Office of Community Living | | | | | | |
| FY 2016-17 Initial Appropriation | \$506,758,485 | 35.5 | \$260,652,220 | \$1,876,332 | \$845,000 | \$243,384,933 |
| FY 2016-17 Total Revised Appropriation | \$486,722,836 | 35.5 | \$251,944,591 | \$1,312,497 | \$0 | \$233,465,748 |
| FY 2017-18 Base Request | \$506,422,710 | 35.5 | \$261,038,245 | \$474,374 | \$846,579 | \$244,063,512 |
| FY 2017-18 Governor's Budget Request | \$516,524,405 | 37.3 | \$259,128,946 | \$8,901,622 | \$846,579 | \$247,647,258 |
| FY 2017-18 Governor's Revised Request | \$516,978,270 | 39.1 | \$259,202,516 | \$10,053,348 | \$1,579 | \$247,720,827 |

| 05. Indigent Care Program | | | | | | |
|--|-----------------|-------|-----------------|-----------------|--------------|-----------------|
| FY 2016-17 Initial Appropriation | \$505,068,224 | 0.0 | \$12,248,677 | \$202,679,964 | \$0 | \$290,139,583 |
| FY 2016-17 Total Revised Appropriation | \$520,679,117 | 0.0 | \$12,250,192 | \$204,594,788 | \$0 | \$303,834,137 |
| FY 2017-18 Base Request | \$505,068,224 | 0.0 | \$12,248,677 | \$202,679,964 | \$0 | \$290,139,583 |
| FY 2017-18 Governor's Budget Request | \$523,578,226 | 0.0 | \$10,409,002 | \$204,920,065 | \$0 | \$308,249,159 |
| FY 2017-18 Governor's Revised Request | \$523,578,226 | 0.0 | \$10,409,002 | \$204,920,065 | \$0 | \$308,249,159 |
| 06. Other Medical Services | | | | | | |
| FY 2016-17 Initial Appropriation | \$241,059,813 | 0.0 | \$139,398,685 | \$51,751,948 | \$2,491,722 | \$47,417,458 |
| FY 2016-17 Total Revised Appropriation | \$251,822,466 | 0.0 | \$140,768,008 | \$56,506,639 | \$2,491,722 | \$52,056,097 |
| FY 2017-18 Base Request | \$242,993,391 | 0.0 | \$139,398,685 | \$52,945,941 | \$2,491,722 | \$48,157,043 |
| FY 2017-18 Governor's Budget Request | \$262,667,391 | 0.0 | \$159,095,851 | \$52,945,941 | \$2,491,722 | \$48,133,877 |
| FY 2017-18 Governor's Revised Request | \$271,152,158 | 0.0 | \$159,095,851 | \$57,255,586 | \$2,491,722 | \$52,308,999 |
| 07. Department of Human Services Medicaid-Funded Programs | | | | | | |
| FY 2016-17 Initial Appropriation | \$109,469,368 | 0.0 | \$52,414,760 | \$1,866,142 | \$0 | \$55,188,466 |
| FY 2016-17 Total Revised Appropriation | \$109,620,112 | 0.0 | \$52,489,857 | \$1,866,142 | \$0 | \$55,264,113 |
| FY 2017-18 Base Request | \$110,766,570 | 0.0 | \$53,063,364 | \$1,866,142 | \$0 | \$55,837,064 |
| FY 2017-18 Governor's Budget Request | \$111,773,457 | 0.0 | \$53,758,324 | \$1,866,142 | \$0 | \$56,148,991 |
| FY 2017-18 Governor's Revised Request | \$111,970,235 | 0.0 | \$53,856,713 | \$1,866,142 | \$0 | \$56,247,380 |
| Department Summary Total | | | | | | |
| FY 2016-17 Initial Appropriation | \$9,116,880,878 | 435.8 | \$2,654,394,214 | \$1,012,485,521 | \$12,406,599 | \$5,437,594,544 |
| FY 2016-17 Total Revised Appropriation | \$9,195,857,512 | 435.8 | \$2,664,973,221 | \$1,019,495,232 | \$15,118,355 | \$5,496,270,704 |
| FY 2017-18 Base Request | \$9,024,061,284 | 436.1 | \$2,656,781,625 | \$984,460,557 | \$12,548,952 | \$5,370,270,150 |
| FY 2017-18 Governor's Budget Request | \$9,490,386,935 | 452.9 | \$2,797,230,737 | \$1,020,138,679 | \$16,069,145 | \$5,656,948,374 |
| FY 2017-18 Governor's Revised Request | \$9,503,832,326 | 454.7 | \$2,796,314,719 | \$1,025,524,034 | \$15,185,350 | \$5,666,808,223 |

FY 2017-18 BUDGET REQUEST - HEALTH CARE POLICY AND FINANCING

RECONCILIATION REPORT

Line Item Detail

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|--|---------------------|--------------|---------------------|--------------------|-----------------------------|----------------------|
| 01. Executive Director's Office, (A) General Administration | | | | | | |
| Personal Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$29,515,964 | 397.5 | \$10,173,953 | \$2,936,203 | \$1,564,801 | \$14,841,007 |
| HB 16-1407 Extend Medicaid Payment Reform & Innovation Pilot | \$74,990 | 1.0 | \$37,495 | \$0 | \$0 | 37495 |
| SB 16-192 Assessment Tool Intellectual & Dev Disable | \$116,267 | 1.8 | \$0 | \$58,134 | \$0 | 58133 |
| FY 2016-17 Initial Appropriation | \$29,707,221 | 400.3 | \$10,211,448 | \$2,994,337 | \$1,564,801 | \$14,936,635 |
| FY 2016-17 Revised Appropriation Request | \$29,707,221 | 400.3 | \$10,211,448 | \$2,994,337 | \$1,564,801 | \$14,936,635 |
| FY 2016-17 Initial Appropriation | \$29,707,221 | 400.3 | \$10,211,448 | \$2,994,337 | \$1,564,801 | \$14,936,635 |
| TA-04 FY 2015-16 S-6, FY 2016-17 BA-6 Access to Medicaid | \$8,646 | 0.0 | \$4,323 | \$0 | \$0 | \$4,323 |
| TA-05 FY 2016-17 BA-7 Compliance with Proposed Federal Rules | \$21,904 | 0.0 | \$10,952 | \$0 | \$0 | \$10,952 |
| TA-15 Salary Survey | \$47,082 | 0.0 | \$15,396 | \$6,898 | \$898 | \$23,890 |
| TA-17 FY 2015-16 S-10, FY 2016-17 BA-10 ACC-MMP Grant | (\$47,133) | 0.0 | \$36,037 | \$0 | \$0 | (\$83,170) |
| TA-20 SB 16-120 Medicaid EOB | \$24,268 | 0.5 | \$9,228 | \$2,906 | \$0 | \$12,134 |
| TA-22 SB 16-192 Needs Assessment for Persons Eligible for LT | \$10,569 | 0.2 | \$63,418 | (\$58,134) | \$0 | \$5,285 |
| TA-32 SB 11-177 Sunset Teen Pregnancy & Dropout Program | (\$21,734) | (0.4) | (\$10,867) | \$0 | \$0 | (\$10,867) |
| TA-39 Total Compensation | \$47,082 | 0.0 | \$15,396 | \$6,898 | \$898 | \$23,890 |
| FY 2017-18 Base Request | \$29,797,905 | 400.6 | \$10,355,331 | \$2,952,905 | \$1,566,597 | \$14,923,072 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-07 Oversight of State Resources | \$832,311 | 13.2 | \$415,282 | \$31,170 | \$0 | \$385,859 |
| R-08 MMIS Operations | \$97,098 | 1.8 | \$24,275 | \$0 | \$0 | \$72,823 |
| R-11 Vendor Transitions | \$26,448 | 0.0 | \$13,224 | \$0 | \$0 | \$13,224 |
| FY 2017-18 Governor's Budget Request | \$30,753,762 | 415.6 | \$10,808,112 | \$2,984,075 | \$1,566,597 | \$15,394,978 |
| FY 2017-18 Governor's Revised Request | \$30,753,762 | 415.6 | \$10,808,112 | \$2,984,075 | \$1,566,597 | \$15,394,978 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------------|------------|--------------------|------------------|------------------|--------------------|
| | | | | | Funds | Federal Funds |
| Health, Life, and Dental | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$3,434,070 | 0.0 | \$1,230,952 | \$337,577 | \$104,755 | \$1,760,786 |
| FY 2016-17 Initial Appropriation | \$3,434,070 | 0.0 | \$1,230,952 | \$337,577 | \$104,755 | \$1,760,786 |
| FY 2016-17 Revised Appropriation Request | \$3,434,070 | 0.0 | \$1,230,952 | \$337,577 | \$104,755 | \$1,760,786 |
| FY 2016-17 Initial Appropriation | \$3,434,070 | 0.0 | \$1,230,952 | \$337,577 | \$104,755 | \$1,760,786 |
| TA-39 Total Compensation | \$239,388 | 0.0 | \$85,554 | \$12,201 | (\$120) | \$141,753 |
| FY 2017-18 Base Request | \$3,673,458 | 0.0 | \$1,316,506 | \$349,778 | \$104,635 | \$1,902,539 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-07 Oversight of State Resources | \$103,052 | 0.0 | \$46,079 | \$3,964 | \$0 | \$53,009 |
| R-08 MMIS Operations | \$15,854 | 0.0 | \$3,964 | \$0 | \$0 | \$11,890 |
| R-10 Regional Center Task Force | \$15,854 | 0.0 | \$7,927 | \$0 | \$0 | \$7,927 |
| FY 2017-18 Governor's Budget Request | \$3,808,218 | 0.0 | \$1,374,476 | \$353,742 | \$104,635 | \$1,975,365 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$15,854 | 0.0 | \$7,927 | \$0 | \$0 | \$7,927 |
| NPBA-04 HLD Adjustment | (\$36,332) | 0.0 | (\$10,730) | (\$5,646) | (\$780) | (\$19,176) |
| FY 2017-18 Governor's Revised Request | \$3,787,740 | 0.0 | \$1,371,673 | \$348,096 | \$103,855 | \$1,964,116 |
| Short-term Disability | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$55,072 | 0.0 | \$20,569 | \$4,588 | \$1,393 | \$28,522 |
| FY 2016-17 Initial Appropriation | \$55,072 | 0.0 | \$20,569 | \$4,588 | \$1,393 | \$28,522 |
| FY 2016-17 Revised Appropriation Request | \$55,072 | 0.0 | \$20,569 | \$4,588 | \$1,393 | \$28,522 |
| FY 2016-17 Initial Appropriation | \$55,072 | 0.0 | \$20,569 | \$4,588 | \$1,393 | \$28,522 |
| TA-39 Total Compensation | \$2,919 | 0.0 | \$991 | \$208 | (\$28) | \$1,748 |
| FY 2017-18 Base Request | \$57,991 | 0.0 | \$21,560 | \$4,796 | \$1,365 | \$30,270 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-07 Oversight of State Resources | \$1,278 | 0.0 | \$571 | \$53 | \$0 | \$654 |
| R-08 MMIS Operations | \$165 | 0.0 | \$42 | \$0 | \$0 | \$123 |
| R-10 Regional Center Task Force | \$234 | 0.0 | \$117 | \$0 | \$0 | \$117 |
| FY 2017-18 Governor's Budget Request | \$59,668 | 0.0 | \$22,290 | \$4,849 | \$1,365 | \$31,164 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$234 | 0.0 | \$117 | \$0 | \$0 | \$117 |
| FY 2017-18 Governor's Revised Request | \$59,902 | 0.0 | \$22,407 | \$4,849 | \$1,365 | \$31,281 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|------------------|------------------|-----------------|------------------|
| | | | | | Funds | Federal Funds |
| Amortization Equalization Disbursement | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,434,489 | 0.0 | \$535,695 | \$119,586 | \$36,269 | \$742,939 |
| FY 2016-17 Initial Appropriation | \$1,434,489 | 0.0 | \$535,695 | \$119,586 | \$36,269 | \$742,939 |
| FY 2016-17 Revised Appropriation Request | \$1,434,489 | 0.0 | \$535,695 | \$119,586 | \$36,269 | \$742,939 |
| FY 2016-17 Initial Appropriation | \$1,434,489 | 0.0 | \$535,695 | \$119,586 | \$36,269 | \$742,939 |
| TA-39 Total Compensation | \$179,198 | 0.0 | \$64,314 | \$13,873 | \$1,547 | \$99,464 |
| FY 2017-18 Base Request | \$1,613,687 | 0.0 | \$600,009 | \$133,459 | \$37,816 | \$842,403 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-07 Oversight of State Resources | \$33,679 | 0.0 | \$14,997 | \$1,397 | \$0 | \$17,285 |
| R-08 MMIS Operations | \$4,350 | 0.0 | \$1,088 | \$0 | \$0 | \$3,262 |
| R-10 Regional Center Task Force | \$6,144 | 0.0 | \$3,072 | \$0 | \$0 | \$3,072 |
| FY 2017-18 Governor's Budget Request | \$1,657,860 | 0.0 | \$619,166 | \$134,856 | \$37,816 | \$866,022 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$6,144 | 0.0 | \$3,072 | \$0 | \$0 | \$3,072 |
| FY 2017-18 Governor's Revised Request | \$1,664,004 | 0.0 | \$622,238 | \$134,856 | \$37,816 | \$869,094 |
| Supplemental Amortization Equalization Disbursement | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,419,546 | 0.0 | \$530,115 | \$118,340 | \$35,891 | \$735,200 |
| FY 2016-17 Initial Appropriation | \$1,419,546 | 0.0 | \$530,115 | \$118,340 | \$35,891 | \$735,200 |
| FY 2016-17 Revised Appropriation Request | \$1,419,546 | 0.0 | \$530,115 | \$118,340 | \$35,891 | \$735,200 |
| FY 2016-17 Initial Appropriation | \$1,419,546 | 0.0 | \$530,115 | \$118,340 | \$35,891 | \$735,200 |
| TA-39 Total Compensation | \$194,116 | 0.0 | \$69,894 | \$15,119 | \$1,900 | \$107,203 |
| FY 2017-18 Base Request | \$1,613,662 | 0.0 | \$600,009 | \$133,459 | \$37,791 | \$842,403 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-07 Oversight of State Resources | \$33,679 | 0.0 | \$14,997 | \$1,397 | \$0 | \$17,285 |
| R-08 MMIS Operations | \$4,350 | 0.0 | \$1,088 | \$0 | \$0 | \$3,262 |
| R-10 Regional Center Task Force | \$6,144 | 0.0 | \$3,072 | \$0 | \$0 | \$3,072 |
| FY 2017-18 Governor's Budget Request | \$1,657,835 | 0.0 | \$619,166 | \$134,856 | \$37,791 | \$866,022 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$6,144 | 0.0 | \$3,072 | \$0 | \$0 | \$3,072 |
| FY 2017-18 Governor's Revised Request | \$1,663,979 | 0.0 | \$622,238 | \$134,856 | \$37,791 | \$869,094 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|------------------|-----------------|-----------------|--------------------|
| | | | | | Funds | Federal Funds |
| Salary Survey | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$56,903 | 0.0 | \$19,245 | \$6,898 | \$898 | \$29,862 |
| FY 2016-17 Initial Appropriation | \$56,903 | 0.0 | \$19,245 | \$6,898 | \$898 | \$29,862 |
| FY 2016-17 Revised Appropriation Request | \$56,903 | 0.0 | \$19,245 | \$6,898 | \$898 | \$29,862 |
| FY 2016-17 Initial Appropriation | \$56,903 | 0.0 | \$19,245 | \$6,898 | \$898 | \$29,862 |
| TA-15 Salary Survey | (\$56,903) | 0.0 | (\$19,245) | (\$6,898) | (\$898) | (\$29,862) |
| TA-39 Total Compensation | \$820,283 | 0.0 | \$307,399 | \$65,724 | \$18,384 | \$428,776 |
| FY 2017-18 Base Request | \$820,283 | 0.0 | \$307,399 | \$65,724 | \$18,384 | \$428,776 |
| FY 2017-18 Governor's Budget Request | \$820,283 | 0.0 | \$307,399 | \$65,724 | \$18,384 | \$428,776 |
| FY 2017-18 Governor's Revised Request | \$820,283 | 0.0 | \$307,399 | \$65,724 | \$18,384 | \$428,776 |
| Worker's Compensation | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$54,318 | 0.0 | \$27,159 | \$0 | \$0 | \$27,159 |
| FY 2016-17 Initial Appropriation | \$54,318 | 0.0 | \$27,159 | \$0 | \$0 | \$27,159 |
| FY 2016-17 Revised Appropriation Request | \$54,318 | 0.0 | \$27,159 | \$0 | \$0 | \$27,159 |
| FY 2016-17 Initial Appropriation | \$54,318 | 0.0 | \$27,159 | \$0 | \$0 | \$27,159 |
| TA-27 FY 2017-18 Operating Common Policy Adjustments | \$13,273 | 0.0 | \$6,637 | \$0 | \$0 | \$6,636 |
| FY 2017-18 Base Request | \$67,591 | 0.0 | \$33,796 | \$0 | \$0 | \$33,795 |
| FY 2017-18 Governor's Budget Request | \$67,591 | 0.0 | \$33,796 | \$0 | \$0 | \$33,795 |
| FY 2017-18 Governor's Revised Request | \$67,591 | 0.0 | \$33,796 | \$0 | \$0 | \$33,795 |
| Operating Expenses | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$2,045,965 | 0.0 | \$930,064 | \$65,869 | \$10,449 | \$1,039,583 |
| HB 16-1407 Extend Medicaid Payment Reform & Innovation Pilot | \$1,267 | 0.0 | \$635 | \$0 | \$0 | 632 |
| SB 16-192 Assessment Tool Intellectual & Dev Disable | \$11,306 | 0.0 | \$0 | \$5,653 | \$0 | 5653 |
| FY 2016-17 Initial Appropriation | \$2,058,538 | 0.0 | \$930,699 | \$71,522 | \$10,449 | \$1,045,868 |
| FY 2016-17 Revised Appropriation Request | \$2,058,538 | 0.0 | \$930,699 | \$71,522 | \$10,449 | \$1,045,868 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|------------------|------------------|-----------------|--------------------|
| | | | | | Funds | Federal Funds |
| FY 2016-17 Initial Appropriation | \$2,058,538 | 0.0 | \$930,699 | \$71,522 | \$10,449 | \$1,045,868 |
| TA-04 FY 2015-16 S-6, FY 2016-17 BA-6 Access to Medicaid | (\$7,055) | 0.0 | (\$3,527) | \$0 | \$0 | (\$3,528) |
| TA-05 FY 2016-17 BA-7 Compliance with Proposed Federal Rules | (\$18,812) | 0.0 | (\$9,406) | \$0 | \$0 | (\$9,406) |
| TA-17 FY 2015-16 S-10, FY 2016-17 BA-10 ACC-MMP Grant | \$7,448 | 0.0 | \$3,437 | \$0 | \$0 | \$4,011 |
| TA-20 SB 16-120 Medicaid EOB | \$5,178 | 0.0 | \$1,969 | \$620 | \$0 | \$2,589 |
| TA-22 SB 16-192 Needs Assessment for Persons Eligible for LT | (\$9,406) | 0.0 | \$950 | (\$4,703) | \$0 | (\$5,653) |
| TA-32 SB 11-177 Sunset Teen Pregnancy & Dropout Program | (\$317) | 0.0 | (\$159) | \$0 | \$0 | (\$158) |
| FY 2017-18 Base Request | \$2,035,574 | 0.0 | \$923,963 | \$67,439 | \$10,449 | \$1,033,723 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-07 Oversight of State Resources | \$60,142 | 0.0 | \$27,020 | \$2,827 | \$0 | \$30,295 |
| R-08 MMIS Operations | \$11,306 | 0.0 | \$2,827 | \$0 | \$0 | \$8,479 |
| FY 2017-18 Governor's Budget Request | \$2,107,022 | 0.0 | \$953,810 | \$70,266 | \$10,449 | \$1,072,497 |
| FY 2017-18 Governor's Revised Request | \$2,107,022 | 0.0 | \$953,810 | \$70,266 | \$10,449 | \$1,072,497 |
| Legal Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,369,290 | 0.0 | \$443,055 | \$241,591 | \$0 | \$684,644 |
| FY 2016-17 Initial Appropriation | \$1,369,290 | 0.0 | \$443,055 | \$241,591 | \$0 | \$684,644 |
| FY 2016-17 Revised Appropriation Request | \$1,369,290 | 0.0 | \$443,055 | \$241,591 | \$0 | \$684,644 |
| FY 2016-17 Initial Appropriation | \$1,369,290 | 0.0 | \$443,055 | \$241,591 | \$0 | \$684,644 |
| TA-45 Legal Services Adjustment | \$60,650 | 0.0 | \$19,625 | \$10,701 | \$0 | \$30,324 |
| FY 2017-18 Base Request | \$1,429,940 | 0.0 | \$462,680 | \$252,292 | \$0 | \$714,968 |
| FY 2017-18 Governor's Budget Request | \$1,429,940 | 0.0 | \$462,680 | \$252,292 | \$0 | \$714,968 |
| FY 2017-18 Governor's Revised Request | \$1,429,940 | 0.0 | \$462,680 | \$252,292 | \$0 | \$714,968 |
| Administrative Law Judge Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$697,852 | 0.0 | \$271,159 | \$77,767 | \$0 | \$348,926 |
| FY 2016-17 Initial Appropriation | \$697,852 | 0.0 | \$271,159 | \$77,767 | \$0 | \$348,926 |
| FY 2016-17 Revised Appropriation Request | \$697,852 | 0.0 | \$271,159 | \$77,767 | \$0 | \$348,926 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| FY 2016-17 Initial Appropriation | \$697,852 | 0.0 | \$271,159 | \$77,767 | \$0 | \$348,926 |
| TA-27 FY 2017-18 Operating Common Policy Adjustments | (\$47,243) | 0.0 | (\$18,356) | (\$5,265) | \$0 | (\$23,622) |
| FY 2017-18 Base Request | \$650,609 | 0.0 | \$252,803 | \$72,502 | \$0 | \$325,304 |
| NPR-03 Resources for Administrative Courts | \$6,134 | 0.0 | \$2,384 | \$683 | \$0 | \$3,067 |
| FY 2017-18 Governor's Budget Request | \$656,743 | 0.0 | \$255,187 | \$73,185 | \$0 | \$328,371 |
| FY 2017-18 Governor's Revised Request | \$656,743 | 0.0 | \$255,187 | \$73,185 | \$0 | \$328,371 |
| Payment to Risk Management and Property Funds | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$176,936 | 0.0 | \$88,468 | \$0 | \$0 | \$88,468 |
| FY 2016-17 Initial Appropriation | \$176,936 | 0.0 | \$88,468 | \$0 | \$0 | \$88,468 |
| NPS-04 Property Fund Supplemental | \$840 | 0.0 | \$420 | \$0 | \$0 | \$420 |
| FY 2016-17 Revised Appropriation Request | \$177,776 | 0.0 | \$88,888 | \$0 | \$0 | \$88,888 |
| FY 2016-17 Initial Appropriation | \$176,936 | 0.0 | \$88,468 | \$0 | \$0 | \$88,468 |
| TA-27 FY 2017-18 Operating Common Policy Adjustments | (\$42,677) | 0.0 | (\$21,338) | \$0 | \$0 | (\$21,339) |
| FY 2017-18 Base Request | \$134,259 | 0.0 | \$67,130 | \$0 | \$0 | \$67,129 |
| FY 2017-18 Governor's Budget Request | \$134,259 | 0.0 | \$67,130 | \$0 | \$0 | \$67,129 |
| NPBA-05 Property Fund Supplemental | \$227 | 0.0 | \$114 | \$0 | \$0 | \$113 |
| FY 2017-18 Governor's Revised Request | \$134,486 | 0.0 | \$67,244 | \$0 | \$0 | \$67,242 |
| Leased Space | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$2,514,035 | 0.0 | \$1,009,653 | \$247,365 | \$0 | \$1,257,017 |
| FY 2016-17 Initial Appropriation | \$2,514,035 | 0.0 | \$1,009,653 | \$247,365 | \$0 | \$1,257,017 |
| FY 2016-17 Revised Appropriation Request | \$2,514,035 | 0.0 | \$1,009,653 | \$247,365 | \$0 | \$1,257,017 |
| FY 2016-17 Initial Appropriation | \$2,514,035 | 0.0 | \$1,009,653 | \$247,365 | \$0 | \$1,257,017 |
| FY 2017-18 Base Request | \$2,514,035 | 0.0 | \$1,009,653 | \$247,365 | \$0 | \$1,257,017 |
| FY 2017-18 Governor's Budget Request | \$2,514,035 | 0.0 | \$1,009,653 | \$247,365 | \$0 | \$1,257,017 |
| FY 2017-18 Governor's Revised Request | \$2,514,035 | 0.0 | \$1,009,653 | \$247,365 | \$0 | \$1,257,017 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| Capitol Complex Leased Space | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$572,466 | 0.0 | \$286,233 | \$0 | \$0 | \$286,233 |
| FY 2016-17 Initial Appropriation | \$572,466 | 0.0 | \$286,233 | \$0 | \$0 | \$286,233 |
| FY 2016-17 Revised Appropriation Request | \$572,466 | 0.0 | \$286,233 | \$0 | \$0 | \$286,233 |
| FY 2016-17 Initial Appropriation | \$572,466 | 0.0 | \$286,233 | \$0 | \$0 | \$286,233 |
| TA-27 FY 2017-18 Operating Common Policy Adjustments | \$92,436 | 0.0 | \$46,218 | \$0 | \$0 | \$46,218 |
| FY 2017-18 Base Request | \$664,902 | 0.0 | \$332,451 | \$0 | \$0 | \$332,451 |
| FY 2017-18 Governor's Budget Request | \$664,902 | 0.0 | \$332,451 | \$0 | \$0 | \$332,451 |
| FY 2017-18 Governor's Revised Request | \$664,902 | 0.0 | \$332,451 | \$0 | \$0 | \$332,451 |
| Payments to OIT | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$4,703,675 | 0.0 | \$1,974,295 | \$377,545 | \$0 | \$2,351,835 |
| FY 2016-17 Initial Appropriation | \$4,703,675 | 0.0 | \$1,974,295 | \$377,545 | \$0 | \$2,351,835 |
| FY 2016-17 Revised Appropriation Request | \$4,703,675 | 0.0 | \$1,974,295 | \$377,545 | \$0 | \$2,351,835 |
| FY 2016-17 Initial Appropriation | \$4,703,675 | 0.0 | \$1,974,295 | \$377,545 | \$0 | \$2,351,835 |
| TA-37 Payments to OIT | (\$221,016) | 0.0 | (\$92,760) | (\$17,748) | \$0 | (\$110,508) |
| FY 2017-18 Base Request | \$4,482,659 | 0.0 | \$1,881,535 | \$359,797 | \$0 | \$2,241,327 |
| NPR-07 OIT Secure Colorado | \$44,731 | 0.0 | \$18,774 | \$3,592 | \$0 | \$22,365 |
| NPR-08 OIT Deskside | \$126,669 | 0.0 | \$52,583 | \$10,252 | \$0 | \$63,834 |
| R-08 MMIS Operations | \$325,000 | 0.0 | \$162,500 | \$0 | \$0 | \$162,500 |
| FY 2017-18 Governor's Budget Request | \$4,979,059 | 0.0 | \$2,115,392 | \$373,641 | \$0 | \$2,490,026 |
| FY 2017-18 Governor's Revised Request | \$4,979,059 | 0.0 | \$2,115,392 | \$373,641 | \$0 | \$2,490,026 |
| CORE Operations | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,417,701 | 0.0 | \$465,081 | \$243,770 | \$0 | \$708,850 |
| FY 2016-17 Initial Appropriation | \$1,417,701 | 0.0 | \$465,081 | \$243,770 | \$0 | \$708,850 |
| FY 2016-17 Revised Appropriation Request | \$1,417,701 | 0.0 | \$465,081 | \$243,770 | \$0 | \$708,850 |
| FY 2016-17 Initial Appropriation | \$1,417,701 | 0.0 | \$465,081 | \$243,770 | \$0 | \$708,850 |
| TA-27 FY 2017-18 Operating Common Policy Adjustments | \$82,210 | 0.0 | \$28,845 | \$14,136 | \$0 | \$39,229 |
| FY 2017-18 Base Request | \$1,499,911 | 0.0 | \$493,926 | \$257,906 | \$0 | \$748,079 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|--------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| FY 2017-18 Governor's Budget Request | \$1,499,911 | 0.0 | \$493,926 | \$257,906 | \$0 | \$748,079 |
| FY 2017-18 Governor's Revised Request | \$1,499,911 | 0.0 | \$493,926 | \$257,906 | \$0 | \$748,079 |
| Research Scholarships Using the All-Payer Claims Database | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$500,000 | 0.0 | \$500,000 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$500,000 | 0.0 | \$500,000 | \$0 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$500,000 | 0.0 | \$500,000 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$500,000 | 0.0 | \$500,000 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$500,000 | 0.0 | \$500,000 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$500,000 | 0.0 | \$500,000 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$500,000 | 0.0 | \$500,000 | \$0 | \$0 | \$0 |
| General Professional Services and Special Projects | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$6,625,237 | 0.0 | \$1,947,261 | \$1,227,500 | \$0 | \$3,450,476 |
| HB 16-1407 Extend Medicaid Payment Reform & Innovation Pilot | \$150,000 | 0.0 | \$75,000 | \$0 | \$0 | 75000 |
| SB 16-120 Review By Medicaid Client For Billing Fraud | \$50,000 | 0.0 | \$25,000 | \$0 | \$0 | 25000 |
| SB 16-192 Assessment Tool Intellectual & Dev Disable | \$150,000 | 0.0 | \$0 | \$75,000 | \$0 | 75000 |
| SB 16-199 Program of All-inclusive Care for the Elderly | \$225,000 | 0.0 | \$0 | \$225,000 | \$0 | |
| FY 2016-17 Initial Appropriation | \$7,200,237 | 0.0 | \$2,047,261 | \$1,527,500 | \$0 | \$3,625,476 |
| S-07 Oversight of State Resources | \$200,000 | 0.0 | \$50,000 | \$50,000 | \$0 | \$100,000 |
| S-12 SB 16-199 PACE Rollforward | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$7,400,237 | 0.0 | \$2,097,261 | \$1,577,500 | \$0 | \$3,725,476 |
| FY 2016-17 Initial Appropriation | \$7,200,237 | 0.0 | \$2,047,261 | \$1,527,500 | \$0 | \$3,625,476 |
| TA-01 FY 2014-15 BA-10, Enhanced Federal Medical Assistance | (\$150,000) | 0.0 | (\$75,000) | \$0 | \$0 | (\$75,000) |
| TA-03 FY 2015-16 R-13 ACC Reprocurement | (\$100,000) | 0.0 | (\$50,000) | \$0 | \$0 | (\$50,000) |
| TA-12 SB 16-199 PACE Rate Methodology | (\$225,000) | 0.0 | \$0 | (\$225,000) | \$0 | \$0 |
| TA-20 SB 16-120 Medicaid EOB | (\$50,000) | 0.0 | (\$25,000) | \$0 | \$0 | (\$25,000) |
| TA-22 SB 16-192 Needs Assessment for Persons Eligible for LT | \$1,525,000 | 0.0 | \$837,500 | (\$75,000) | \$0 | \$762,500 |
| TA-42 FY 2015-16 R#7 Participant Directed Programs | (\$250,000) | 0.0 | (\$125,000) | \$0 | \$0 | (\$125,000) |
| TA-43 FY 2015-16 R-16 CPCI | (\$194,760) | 0.0 | (\$97,380) | \$0 | \$0 | (\$97,380) |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------------|------------|--------------------|--------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| FY 2017-18 Base Request | \$7,755,477 | 0.0 | \$2,512,381 | \$1,227,500 | \$0 | \$4,015,596 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-07 Oversight of State Resources | \$1,621,365 | 0.0 | \$510,683 | \$300,000 | \$0 | \$810,682 |
| R-08 MMIS Operations | (\$750,000) | 0.0 | (\$187,500) | \$0 | \$0 | (\$562,500) |
| R-09 Office of Community Living UR | (\$36,875) | 0.0 | \$0 | (\$18,438) | \$0 | (\$18,437) |
| R-13 Quality of Care and Performance Improvement Projects | \$708,339 | 0.0 | \$315,420 | \$0 | \$0 | \$392,919 |
| FY 2017-18 Governor's Budget Request | \$9,298,306 | 0.0 | \$3,150,984 | \$1,509,062 | \$0 | \$4,638,260 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$267,864 | 0.0 | \$133,932 | \$0 | \$0 | \$133,932 |
| FY 2017-18 Governor's Revised Request | \$9,566,170 | 0.0 | \$3,284,916 | \$1,509,062 | \$0 | \$4,772,192 |

| 01. Executive Director's Office, (A) General Administration | | | | | | |
|--|--------------|-------|--------------|-------------|-------------|--------------|
| Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$57,372,349 | 400.3 | \$20,591,087 | \$6,368,386 | \$1,754,456 | \$28,658,420 |
| FY 2016-17 Total Revised Appropriation | \$57,573,189 | 400.3 | \$20,641,507 | \$6,418,386 | \$1,754,456 | \$28,758,840 |
| FY 2017-18 Base Request | \$59,311,943 | 400.6 | \$21,671,132 | \$6,124,922 | \$1,777,037 | \$29,738,852 |
| FY 2017-18 Governor's Budget Request | \$62,609,394 | 415.6 | \$23,125,618 | \$6,461,819 | \$1,777,037 | \$31,244,920 |
| FY 2017-18 Governor's Revised Request | \$62,869,529 | 415.6 | \$23,263,122 | \$6,456,173 | \$1,776,257 | \$31,373,977 |

**01. Executive Director's Office, (B)
Transfers to/from Other Departments**

**Facility Survey and Certification, Transfer to
CDPHE**

| | | | | | | |
|---|--------------------|------------|--------------------|------------|------------|--------------------|
| HB 16-1405 FY 2016-17 General Appropriation Act | \$6,398,594 | 0.0 | \$2,469,927 | \$0 | \$0 | \$3,928,667 |
| FY 2016-17 Initial Appropriation | \$6,398,594 | 0.0 | \$2,469,927 | \$0 | \$0 | \$3,928,667 |
| FY 2016-17 Revised Appropriation Request | \$6,398,594 | 0.0 | \$2,469,927 | \$0 | \$0 | \$3,928,667 |
| FY 2016-17 Initial Appropriation | \$6,398,594 | 0.0 | \$2,469,927 | \$0 | \$0 | \$3,928,667 |
| TA-08 FY 2016-17 BA-8 HCBS Settings | (\$13,955) | 0.0 | (\$5,343) | \$0 | \$0 | (\$8,612) |
| TA-36 CDPHE Indirect Cost Assessment | \$325,000 | 0.0 | \$0 | \$0 | \$0 | \$325,000 |
| TA-44 CDPHE Total Compensation | \$507,997 | 0.0 | \$208,866 | \$0 | \$0 | \$299,131 |
| FY 2017-18 Base Request | \$7,217,636 | 0.0 | \$2,673,450 | \$0 | \$0 | \$4,544,186 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|------------|--------------------|--------------------|
| | | | | | Funds | Federal Funds |
| NPR-01 CDPHE IDD Staffing | \$417,435 | 0.0 | \$208,718 | \$0 | \$0 | \$208,717 |
| NPR-02 CDPHE Health Surveys | \$184,574 | 0.0 | \$92,287 | \$0 | \$0 | \$92,287 |
| FY 2017-18 Governor's Budget Request | \$7,819,645 | 0.0 | \$2,974,455 | \$0 | \$0 | \$4,845,190 |
| FY 2017-18 Governor's Revised Request | \$7,819,645 | 0.0 | \$2,974,455 | \$0 | \$0 | \$4,845,190 |
| Nurse Home Visitor Program, Transfer from CDHS | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$3,010,000 | 0.0 | \$0 | \$0 | \$1,498,980 | \$1,511,020 |
| FY 2016-17 Initial Appropriation | \$3,010,000 | 0.0 | \$0 | \$0 | \$1,498,980 | \$1,511,020 |
| FY 2016-17 Revised Appropriation Request | \$3,010,000 | 0.0 | \$0 | \$0 | \$1,498,980 | \$1,511,020 |
| FY 2016-17 Initial Appropriation | \$3,010,000 | 0.0 | \$0 | \$0 | \$1,498,980 | \$1,511,020 |
| FY 2017-18 Base Request | \$3,010,000 | 0.0 | \$0 | \$0 | \$1,498,980 | \$1,511,020 |
| R-14 FMAP | \$0 | 0.0 | \$0 | \$0 | \$6,020 | (\$6,020) |
| FY 2017-18 Governor's Budget Request | \$3,010,000 | 0.0 | \$0 | \$0 | \$1,505,000 | \$1,505,000 |
| FY 2017-18 Governor's Revised Request | \$3,010,000 | 0.0 | \$0 | \$0 | \$1,505,000 | \$1,505,000 |
| Prenatal Statistical Information, Transfer to CDPHE | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$5,887 | 0.0 | \$2,944 | \$0 | \$0 | \$2,943 |
| FY 2016-17 Initial Appropriation | \$5,887 | 0.0 | \$2,944 | \$0 | \$0 | \$2,943 |
| FY 2016-17 Revised Appropriation Request | \$5,887 | 0.0 | \$2,944 | \$0 | \$0 | \$2,943 |
| FY 2016-17 Initial Appropriation | \$5,887 | 0.0 | \$2,944 | \$0 | \$0 | \$2,943 |
| FY 2017-18 Base Request | \$5,887 | 0.0 | \$2,944 | \$0 | \$0 | \$2,943 |
| FY 2017-18 Governor's Budget Request | \$5,887 | 0.0 | \$2,944 | \$0 | \$0 | \$2,943 |
| FY 2017-18 Governor's Revised Request | \$5,887 | 0.0 | \$2,944 | \$0 | \$0 | \$2,943 |
| Transfer to CDPHE Local Public Health Agencies | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|------------------|------------|------------------|------------|------------------|------------------|
| | | | | | Funds | Federal Funds |
| R-12 LPHA Partnerships | \$711,000 | 0.0 | \$355,500 | \$0 | \$0 | \$355,500 |
| FY 2017-18 Governor's Budget Request | \$711,000 | 0.0 | \$355,500 | \$0 | \$0 | \$355,500 |
| FY 2017-18 Governor's Revised Request | \$711,000 | 0.0 | \$355,500 | \$0 | \$0 | \$355,500 |
| Nurse Aide Certification, Transfer to DORA | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$324,041 | 0.0 | \$147,369 | \$0 | \$14,652 | \$162,020 |
| FY 2016-17 Initial Appropriation | \$324,041 | 0.0 | \$147,369 | \$0 | \$14,652 | \$162,020 |
| FY 2016-17 Revised Appropriation Request | \$324,041 | 0.0 | \$147,369 | \$0 | \$14,652 | \$162,020 |
| FY 2016-17 Initial Appropriation | \$324,041 | 0.0 | \$147,369 | \$0 | \$14,652 | \$162,020 |
| FY 2017-18 Base Request | \$324,041 | 0.0 | \$147,369 | \$0 | \$14,652 | \$162,020 |
| FY 2017-18 Governor's Budget Request | \$324,041 | 0.0 | \$147,369 | \$0 | \$14,652 | \$162,020 |
| FY 2017-18 Governor's Revised Request | \$324,041 | 0.0 | \$147,369 | \$0 | \$14,652 | \$162,020 |
| Reviews, Transfer to DORA | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$10,000 | 0.0 | \$5,000 | \$0 | \$0 | \$5,000 |
| HB 16-1097 PUC Permit For Medicaid Transportation Providers | \$78,328 | 0.0 | \$59,578 | \$0 | \$0 | 18750 |
| FY 2016-17 Initial Appropriation | \$88,328 | 0.0 | \$64,578 | \$0 | \$0 | \$23,750 |
| FY 2016-17 Revised Appropriation Request | \$88,328 | 0.0 | \$64,578 | \$0 | \$0 | \$23,750 |
| FY 2016-17 Initial Appropriation | \$88,328 | 0.0 | \$64,578 | \$0 | \$0 | \$23,750 |
| TA-25 HB 16-1097 PUC Permit for Medicaid Transportation | \$25,175 | 0.0 | \$6,425 | \$0 | \$0 | \$18,750 |
| FY 2017-18 Base Request | \$113,503 | 0.0 | \$71,003 | \$0 | \$0 | \$42,500 |
| FY 2017-18 Governor's Budget Request | \$113,503 | 0.0 | \$71,003 | \$0 | \$0 | \$42,500 |
| FY 2017-18 Governor's Revised Request | \$113,503 | 0.0 | \$71,003 | \$0 | \$0 | \$42,500 |
| Public School Health Services Admin., Transfer to DOE | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$170,979 | 0.0 | \$0 | \$0 | \$170,979 | \$0 |
| FY 2016-17 Initial Appropriation | \$170,979 | 0.0 | \$0 | \$0 | \$170,979 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$170,979 | 0.0 | \$0 | \$0 | \$170,979 | \$0 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------|-----|--------------|-------------|----------------|---------------|
| | | | | | Funds | Federal Funds |
| FY 2016-17 Initial Appropriation | \$170,979 | 0.0 | \$0 | \$0 | \$170,979 | \$0 |
| FY 2017-18 Base Request | \$170,979 | 0.0 | \$0 | \$0 | \$170,979 | \$0 |
| FY 2017-18 Governor's Budget Request | \$170,979 | 0.0 | \$0 | \$0 | \$170,979 | \$0 |
| FY 2017-18 Governor's Revised Request | \$170,979 | 0.0 | \$0 | \$0 | \$170,979 | \$0 |
| Home Modifications Benefit Administration, Transfer to DOLA | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$219,356 | 0.0 | \$109,678 | \$0 | \$0 | \$109,678 |
| FY 2016-17 Initial Appropriation | \$219,356 | 0.0 | \$109,678 | \$0 | \$0 | \$109,678 |
| FY 2016-17 Revised Appropriation Request | \$219,356 | 0.0 | \$109,678 | \$0 | \$0 | \$109,678 |
| FY 2016-17 Initial Appropriation | \$219,356 | 0.0 | \$109,678 | \$0 | \$0 | \$109,678 |
| FY 2017-18 Base Request | \$219,356 | 0.0 | \$109,678 | \$0 | \$0 | \$109,678 |
| FY 2017-18 Governor's Budget Request | \$219,356 | 0.0 | \$109,678 | \$0 | \$0 | \$109,678 |
| FY 2017-18 Governor's Revised Request | \$219,356 | 0.0 | \$109,678 | \$0 | \$0 | \$109,678 |
| 01. Executive Director's Office, (B) Transfers to/from Other Departments Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$10,217,185 | 0.0 | \$2,794,496 | \$0 | \$1,684,611 | \$5,738,078 |
| FY 2016-17 Total Revised Appropriation | \$10,217,185 | 0.0 | \$2,794,496 | \$0 | \$1,684,611 | \$5,738,078 |
| FY 2017-18 Base Request | \$11,061,402 | 0.0 | \$3,004,444 | \$0 | \$1,684,611 | \$6,372,347 |
| FY 2017-18 Governor's Budget Request | \$12,374,411 | 0.0 | \$3,660,949 | \$0 | \$1,690,631 | \$7,022,831 |
| FY 2017-18 Governor's Revised Request | \$12,374,411 | 0.0 | \$3,660,949 | \$0 | \$1,690,631 | \$7,022,831 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects | | | | | | |
| MMIS Maintenance and Projects | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$35,263,793 | 0.0 | \$7,198,178 | \$2,209,009 | \$293,350 | \$25,563,256 |
| HB 16-1277 Appeal Process for Changes to Medicaid Benefits | \$25,000 | 0.0 | \$2,500 | \$0 | \$0 | 22500 |
| HB 16-1321 Medicaid Buy-in Certain Medicaid Waivers | \$138,027 | 0.0 | \$0 | \$13,803 | \$0 | 124224 |
| SB 16-120 Review By Medicaid Client For Billing Fraud | \$138,000 | 0.0 | \$10,350 | \$3,450 | \$0 | 124200 |
| FY 2016-17 Initial Appropriation | \$35,564,820 | 0.0 | \$7,211,028 | \$2,226,262 | \$293,350 | \$25,834,180 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|---------------------|------------|--------------------|--------------------|------------------|---------------------|
| | | | | | Funds | Federal Funds |
| S-08 MMIS Operations | \$1,716,274 | 0.0 | \$1,267,940 | (\$306,876) | (\$279,984) | \$1,035,194 |
| FY 2016-17 Revised Appropriation Request | \$37,281,094 | 0.0 | \$8,478,968 | \$1,919,386 | \$13,366 | \$26,869,374 |
| FY 2016-17 Initial Appropriation | \$35,564,820 | 0.0 | \$7,211,028 | \$2,226,262 | \$293,350 | \$25,834,180 |
| TA-06 FY 2015-16 S-9, FY 2016-17 BA-9 Provider Enrollment | \$2,663 | 0.0 | \$0 | \$2,663 | \$0 | \$0 |
| TA-10 HB 16-1277 Appeals Process | (\$25,000) | 0.0 | (\$2,500) | \$0 | \$0 | (\$22,500) |
| TA-16 FY 2014-15 S-7, BA-7 MMIS Adjustments Final Test | (\$1,340,716) | 0.0 | (\$238,916) | (\$100,286) | \$0 | (\$1,001,514) |
| TA-17 FY 2015-16 S-10, FY 2016-17 BA-10 ACC-MMP Grant | \$322,500 | 0.0 | \$132,500 | \$0 | \$0 | \$190,000 |
| TA-19 SB 16-077 Employment First for People | \$228,838 | 0.0 | \$23,298 | \$0 | \$0 | \$205,540 |
| TA-20 SB 16-120 Medicaid EOB | \$680,475 | 0.0 | \$245,022 | \$76,972 | \$0 | \$358,481 |
| TA-22 SB 16-192 Needs Assessment for Persons Eligible for LT | \$145,200 | 0.0 | \$14,520 | \$0 | \$0 | \$130,680 |
| TA-24 HB 16-1321 Waiver Buy-in | (\$138,027) | 0.0 | \$0 | (\$13,803) | \$0 | (\$124,224) |
| FY 2017-18 Base Request | \$35,440,753 | 0.0 | \$7,384,952 | \$2,191,808 | \$293,350 | \$25,570,643 |
| R-08 MMIS Operations | \$5,501,405 | 0.0 | (\$1,526,183) | \$2,078,236 | (\$281,542) | \$5,230,894 |
| R-10 Regional Center Task Force | \$593,300 | 0.0 | \$59,330 | \$0 | \$0 | \$533,970 |
| FY 2017-18 Governor's Budget Request | \$41,535,458 | 0.0 | \$5,918,099 | \$4,270,044 | \$11,808 | \$31,335,507 |
| FY 2017-18 Governor's Revised Request | \$41,535,458 | 0.0 | \$5,918,099 | \$4,270,044 | \$11,808 | \$31,335,507 |
| MMIS Reprocurement Contracted Staff | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$5,145,018 | 0.0 | \$431,304 | \$134,757 | \$0 | \$4,578,957 |
| FY 2016-17 Initial Appropriation | \$5,145,018 | 0.0 | \$431,304 | \$134,757 | \$0 | \$4,578,957 |
| S-08 MMIS Operations | (\$4,675,328) | 0.0 | (\$60,222) | (\$37,064) | \$915 | (\$4,578,957) |
| FY 2016-17 Revised Appropriation Request | \$469,690 | 0.0 | \$371,082 | \$97,693 | \$915 | \$0 |
| FY 2016-17 Initial Appropriation | \$5,145,018 | 0.0 | \$431,304 | \$134,757 | \$0 | \$4,578,957 |
| TA-16 FY 2014-15 S-7, BA-7 MMIS Adjustments Final Test | (\$2,147,771) | 0.0 | (\$158,997) | (\$79,864) | \$0 | (\$1,908,910) |
| TA-26 FY 2013-14 R-5 MMIS Reprocurement | (\$2,997,247) | 0.0 | (\$272,307) | (\$54,893) | \$0 | (\$2,670,047) |
| FY 2017-18 Base Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|---------------------|------------|--------------------|------------------|----------------|---------------------|
| | | | | | Funds | Federal Funds |
| MMIS Reprocurement Contracts | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$26,916,597 | 0.0 | \$2,615,317 | \$701,879 | \$0 | \$23,599,401 |
| FY 2016-17 Initial Appropriation | \$26,916,597 | 0.0 | \$2,615,317 | \$701,879 | \$0 | \$23,599,401 |
| S-08 MMIS Operations | \$1,463,574 | 0.0 | (\$1,240,267) | (\$193,865) | \$9,675 | \$2,888,031 |
| FY 2016-17 Revised Appropriation Request | \$28,380,171 | 0.0 | \$1,375,050 | \$508,014 | \$9,675 | \$26,487,432 |
| FY 2016-17 Initial Appropriation | \$26,916,597 | 0.0 | \$2,615,317 | \$701,879 | \$0 | \$23,599,401 |
| TA-16 FY 2014-15 S-7, BA-7 MMIS Adjustments Final Test | (\$5,921,972) | 0.0 | (\$707,354) | (\$317,327) | \$0 | (\$4,897,291) |
| TA-26 FY 2013-14 R-5 MMIS Reprocurement | (\$20,994,625) | 0.0 | (\$1,907,963) | (\$384,552) | \$0 | (\$18,702,110) |
| FY 2017-18 Base Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-08 MMIS Operations | \$18,546,779 | 0.0 | \$1,034,108 | \$875,342 | \$5,564 | \$16,631,765 |
| FY 2017-18 Governor's Budget Request | \$18,546,779 | 0.0 | \$1,034,108 | \$875,342 | \$5,564 | \$16,631,765 |
| FY 2017-18 Governor's Revised Request | \$18,546,779 | 0.0 | \$1,034,108 | \$875,342 | \$5,564 | \$16,631,765 |
| Fraud Detection Software Contract | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$250,000 | 0.0 | \$62,500 | \$0 | \$0 | \$187,500 |
| FY 2016-17 Initial Appropriation | \$250,000 | 0.0 | \$62,500 | \$0 | \$0 | \$187,500 |
| FY 2016-17 Revised Appropriation Request | \$250,000 | 0.0 | \$62,500 | \$0 | \$0 | \$187,500 |
| FY 2016-17 Initial Appropriation | \$250,000 | 0.0 | \$62,500 | \$0 | \$0 | \$187,500 |
| FY 2017-18 Base Request | \$250,000 | 0.0 | \$62,500 | \$0 | \$0 | \$187,500 |
| R-08 MMIS Operations | (\$135,000) | 0.0 | (\$34,155) | \$0 | \$0 | (\$100,845) |
| FY 2017-18 Governor's Budget Request | \$115,000 | 0.0 | \$28,345 | \$0 | \$0 | \$86,655 |
| FY 2017-18 Governor's Revised Request | \$115,000 | 0.0 | \$28,345 | \$0 | \$0 | \$86,655 |
| Health Information Exchange Maintenance and Projects | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$10,622,455 | 0.0 | \$2,046,246 | \$0 | \$0 | \$8,576,209 |
| FY 2016-17 Initial Appropriation | \$10,622,455 | 0.0 | \$2,046,246 | \$0 | \$0 | \$8,576,209 |
| FY 2016-17 Revised Appropriation Request | \$10,622,455 | 0.0 | \$2,046,246 | \$0 | \$0 | \$8,576,209 |
| FY 2016-17 Initial Appropriation | \$10,622,455 | 0.0 | \$2,046,246 | \$0 | \$0 | \$8,576,209 |
| TA-02 FY 2014-15 R#5 Medicaid HIT | (\$2,235,000) | 0.0 | (\$223,500) | \$0 | \$0 | (\$2,011,500) |
| TA-21 FY 2015-16 R-9 Personal Health Records | (\$315,000) | 0.0 | \$68,500 | \$0 | \$0 | (\$383,500) |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|---------------------|------------|--------------------|--------------------|-----------------|---------------------|
| | | | | | Funds | Federal Funds |
| FY 2017-18 Base Request | \$8,072,455 | 0.0 | \$1,891,246 | \$0 | \$0 | \$6,181,209 |
| FY 2017-18 Governor's Budget Request | \$8,072,455 | 0.0 | \$1,891,246 | \$0 | \$0 | \$6,181,209 |
| FY 2017-18 Governor's Revised Request | \$8,072,455 | 0.0 | \$1,891,246 | \$0 | \$0 | \$6,181,209 |
| Connect for Health Colorado Systems | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| S-13 Medicaid Funding for Connect for Health Colorado | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 |
| FY 2016-17 Revised Appropriation Request | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 |
| FY 2016-17 Initial Appropriation | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| BA-13 Medicaid Funding for Connect for Health Colorado | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 |
| FY 2017-18 Governor's Revised Request | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 |
| Colorado Benefits Management Systems, Operating & Contracts | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$23,132,658 | 0.0 | \$7,691,683 | \$3,319,100 | \$87,981 | \$12,033,894 |
| FY 2016-17 Initial Appropriation | \$23,132,658 | 0.0 | \$7,691,683 | \$3,319,100 | \$87,981 | \$12,033,894 |
| NPS-01 OIT CBMS | (\$1,276,246) | 0.0 | (\$2,135,711) | (\$832,685) | (\$34,760) | \$1,726,910 |
| FY 2016-17 Revised Appropriation Request | \$21,856,412 | 0.0 | \$5,555,972 | \$2,486,415 | \$53,221 | \$13,760,804 |
| FY 2016-17 Initial Appropriation | \$23,132,658 | 0.0 | \$7,691,683 | \$3,319,100 | \$87,981 | \$12,033,894 |
| TA-09 FY 2016-17 NPR-05 Cervical Cancer Eligibility | (\$38,771) | 0.0 | \$0 | (\$19,386) | \$0 | (\$19,385) |
| TA-13 FY 2016-17 NP S-1 BA-2 CBMS | \$59,843 | 0.0 | \$21,423 | \$8,339 | \$242 | \$29,839 |
| TA-14 FY 2016-17 NP R-2 CBMS-PEAK Annual Adjustment | \$1,601,147 | 0.0 | \$573,206 | \$221,852 | \$6,460 | \$799,629 |
| FY 2017-18 Base Request | \$24,754,877 | 0.0 | \$8,286,312 | \$3,529,905 | \$94,683 | \$12,843,977 |
| FY 2017-18 Governor's Budget Request | \$24,754,877 | 0.0 | \$8,286,312 | \$3,529,905 | \$94,683 | \$12,843,977 |
| NPBA-01 OIT CBMS | (\$1,205,737) | 0.0 | (\$3,066,628) | (\$75,970) | (\$37,117) | \$1,973,978 |
| FY 2017-18 Governor's Revised Request | \$23,549,140 | 0.0 | \$5,219,684 | \$3,453,935 | \$57,566 | \$14,817,955 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|------------------|------------|------------------|-----------------|----------------|------------------|
| | | | | | Funds | Federal Funds |
| Colorado Benefits Management Systems, Health Care and Econom | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$648,441 | 0.0 | \$232,139 | \$90,321 | \$2,617 | \$323,364 |
| FY 2016-17 Initial Appropriation | \$648,441 | 0.0 | \$232,139 | \$90,321 | \$2,617 | \$323,364 |
| NPS-01 OIT CBMS | \$33,362 | 0.0 | \$12,485 | \$4,805 | (\$906) | \$16,978 |
| FY 2016-17 Revised Appropriation Request | \$681,803 | 0.0 | \$244,624 | \$95,126 | \$1,711 | \$340,342 |
| FY 2016-17 Initial Appropriation | \$648,441 | 0.0 | \$232,139 | \$90,321 | \$2,617 | \$323,364 |
| FY 2017-18 Base Request | \$648,441 | 0.0 | \$232,139 | \$90,321 | \$2,617 | \$323,364 |
| FY 2017-18 Governor's Budget Request | \$648,441 | 0.0 | \$232,139 | \$90,321 | \$2,617 | \$323,364 |
| NPBA-01 OIT CBMS | \$36,375 | 0.0 | \$13,190 | \$5,600 | (\$898) | \$18,483 |
| FY 2017-18 Governor's Revised Request | \$684,816 | 0.0 | \$245,329 | \$95,921 | \$1,719 | \$341,847 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$102,279,989 | 0.0 | \$20,290,217 | \$6,472,319 | \$383,948 | \$75,133,505 |
| FY 2016-17 Total Revised Appropriation | \$100,211,382 | 0.0 | \$18,257,132 | \$5,106,634 | \$78,888 | \$76,768,728 |
| FY 2017-18 Base Request | \$69,166,526 | 0.0 | \$17,857,149 | \$5,812,034 | \$390,650 | \$45,106,693 |
| FY 2017-18 Governor's Budget Request | \$93,673,010 | 0.0 | \$17,390,249 | \$8,765,612 | \$114,672 | \$67,402,477 |
| FY 2017-18 Governor's Revised Request | \$93,173,405 | 0.0 | \$14,459,501 | \$8,695,242 | \$76,657 | \$69,942,005 |
| 01. Executive Director's Office, (D) Eligibility Determinations and Client Services | | | | | | |
| Medical Identification Cards | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$278,974 | 0.0 | \$90,988 | \$44,587 | \$28 | \$143,371 |
| FY 2016-17 Initial Appropriation | \$278,974 | 0.0 | \$90,988 | \$44,587 | \$28 | \$143,371 |
| FY 2016-17 Revised Appropriation Request | \$278,974 | 0.0 | \$90,988 | \$44,587 | \$28 | \$143,371 |
| FY 2016-17 Initial Appropriation | \$278,974 | 0.0 | \$90,988 | \$44,587 | \$28 | \$143,371 |
| FY 2017-18 Base Request | \$278,974 | 0.0 | \$90,988 | \$44,587 | \$28 | \$143,371 |
| FY 2017-18 Governor's Budget Request | \$278,974 | 0.0 | \$90,988 | \$44,587 | \$28 | \$143,371 |
| FY 2017-18 Governor's Revised Request | \$278,974 | 0.0 | \$90,988 | \$44,587 | \$28 | \$143,371 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------|-----|--------------|-------------|----------------|---------------|
| | | | | | Funds | Federal Funds |
| Contracts for Special Eligibility Determinations | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$11,402,297 | 0.0 | \$969,756 | \$4,343,468 | \$0 | \$6,089,073 |
| FY 2016-17 Initial Appropriation | \$11,402,297 | 0.0 | \$969,756 | \$4,343,468 | \$0 | \$6,089,073 |
| FY 2016-17 Revised Appropriation Request | \$11,402,297 | 0.0 | \$969,756 | \$4,343,468 | \$0 | \$6,089,073 |
| FY 2016-17 Initial Appropriation | \$11,402,297 | 0.0 | \$969,756 | \$4,343,468 | \$0 | \$6,089,073 |
| FY 2017-18 Base Request | \$11,402,297 | 0.0 | \$969,756 | \$4,343,468 | \$0 | \$6,089,073 |
| FY 2017-18 Governor's Budget Request | \$11,402,297 | 0.0 | \$969,756 | \$4,343,468 | \$0 | \$6,089,073 |
| FY 2017-18 Governor's Revised Request | \$11,402,297 | 0.0 | \$969,756 | \$4,343,468 | \$0 | \$6,089,073 |
| County Administration | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$45,998,063 | 0.0 | \$11,114,448 | \$5,859,623 | \$0 | \$29,023,992 |
| FY 2016-17 Initial Appropriation | \$45,998,063 | 0.0 | \$11,114,448 | \$5,859,623 | \$0 | \$29,023,992 |
| FY 2016-17 Revised Appropriation Request | \$45,998,063 | 0.0 | \$11,114,448 | \$5,859,623 | \$0 | \$29,023,992 |
| FY 2016-17 Initial Appropriation | \$45,998,063 | 0.0 | \$11,114,448 | \$5,859,623 | \$0 | \$29,023,992 |
| FY 2017-18 Base Request | \$45,998,063 | 0.0 | \$11,114,448 | \$5,859,623 | \$0 | \$29,023,992 |
| FY 2017-18 Governor's Budget Request | \$45,998,063 | 0.0 | \$11,114,448 | \$5,859,623 | \$0 | \$29,023,992 |
| FY 2017-18 Governor's Revised Request | \$45,998,063 | 0.0 | \$11,114,448 | \$5,859,623 | \$0 | \$29,023,992 |
| Hospital Provider Fee County Administration | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$15,748,868 | 0.0 | \$0 | \$4,945,446 | \$0 | \$10,803,422 |
| FY 2016-17 Initial Appropriation | \$15,748,868 | 0.0 | \$0 | \$4,945,446 | \$0 | \$10,803,422 |
| FY 2016-17 Revised Appropriation Request | \$15,748,868 | 0.0 | \$0 | \$4,945,446 | \$0 | \$10,803,422 |
| FY 2016-17 Initial Appropriation | \$15,748,868 | 0.0 | \$0 | \$4,945,446 | \$0 | \$10,803,422 |
| FY 2017-18 Base Request | \$15,748,868 | 0.0 | \$0 | \$4,945,446 | \$0 | \$10,803,422 |
| FY 2017-18 Governor's Budget Request | \$15,748,868 | 0.0 | \$0 | \$4,945,446 | \$0 | \$10,803,422 |
| FY 2017-18 Governor's Revised Request | \$15,748,868 | 0.0 | \$0 | \$4,945,446 | \$0 | \$10,803,422 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| Medical Assistance Sites | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,531,968 | 0.0 | \$0 | \$402,984 | \$0 | \$1,128,984 |
| FY 2016-17 Initial Appropriation | \$1,531,968 | 0.0 | \$0 | \$402,984 | \$0 | \$1,128,984 |
| FY 2016-17 Revised Appropriation Request | \$1,531,968 | 0.0 | \$0 | \$402,984 | \$0 | \$1,128,984 |
| FY 2016-17 Initial Appropriation | \$1,531,968 | 0.0 | \$0 | \$402,984 | \$0 | \$1,128,984 |
| FY 2017-18 Base Request | \$1,531,968 | 0.0 | \$0 | \$402,984 | \$0 | \$1,128,984 |
| FY 2017-18 Governor's Budget Request | \$1,531,968 | 0.0 | \$0 | \$402,984 | \$0 | \$1,128,984 |
| FY 2017-18 Governor's Revised Request | \$1,531,968 | 0.0 | \$0 | \$402,984 | \$0 | \$1,128,984 |
| Administrative Case Management | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$869,744 | 0.0 | \$434,872 | \$0 | \$0 | \$434,872 |
| FY 2016-17 Initial Appropriation | \$869,744 | 0.0 | \$434,872 | \$0 | \$0 | \$434,872 |
| FY 2016-17 Revised Appropriation Request | \$869,744 | 0.0 | \$434,872 | \$0 | \$0 | \$434,872 |
| FY 2016-17 Initial Appropriation | \$869,744 | 0.0 | \$434,872 | \$0 | \$0 | \$434,872 |
| FY 2017-18 Base Request | \$869,744 | 0.0 | \$434,872 | \$0 | \$0 | \$434,872 |
| FY 2017-18 Governor's Budget Request | \$869,744 | 0.0 | \$434,872 | \$0 | \$0 | \$434,872 |
| FY 2017-18 Governor's Revised Request | \$869,744 | 0.0 | \$434,872 | \$0 | \$0 | \$434,872 |
| Customer Outreach | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$5,741,256 | 0.0 | \$2,474,880 | \$336,621 | \$0 | \$2,929,755 |
| HB 16-1407 Extend Medicaid Payment Reform & Innovation Pilot | \$163,590 | 0.0 | \$81,795 | \$0 | \$0 | 81795 |
| FY 2016-17 Initial Appropriation | \$5,904,846 | 0.0 | \$2,556,675 | \$336,621 | \$0 | \$3,011,550 |
| FY 2016-17 Revised Appropriation Request | \$5,904,846 | 0.0 | \$2,556,675 | \$336,621 | \$0 | \$3,011,550 |
| FY 2016-17 Initial Appropriation | \$5,904,846 | 0.0 | \$2,556,675 | \$336,621 | \$0 | \$3,011,550 |
| TA-17 FY 2015-16 S-10, FY 2016-17 BA-10 ACC-MMP Grant | \$230,589 | 0.0 | \$80,985 | \$0 | \$0 | \$149,604 |
| FY 2017-18 Base Request | \$6,135,435 | 0.0 | \$2,637,660 | \$336,621 | \$0 | \$3,161,154 |
| R-06 Delivery System and Payment Reform | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| R-11 Vendor Transitions | \$472,010 | 0.0 | \$236,005 | \$0 | \$0 | \$236,005 |
| FY 2017-18 Governor's Budget Request | \$6,607,445 | 0.0 | \$2,873,665 | \$336,621 | \$0 | \$3,397,159 |
| FY 2017-18 Governor's Revised Request | \$6,607,445 | 0.0 | \$2,873,665 | \$336,621 | \$0 | \$3,397,159 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------------|------------|--------------------|--------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| Centralized Eligibility Vendor Contract Project | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$5,053,644 | 0.0 | \$0 | \$1,745,342 | \$0 | \$3,308,302 |
| FY 2016-17 Initial Appropriation | \$5,053,644 | 0.0 | \$0 | \$1,745,342 | \$0 | \$3,308,302 |
| FY 2016-17 Revised Appropriation Request | \$5,053,644 | 0.0 | \$0 | \$1,745,342 | \$0 | \$3,308,302 |
| FY 2016-17 Initial Appropriation | \$5,053,644 | 0.0 | \$0 | \$1,745,342 | \$0 | \$3,308,302 |
| FY 2017-18 Base Request | \$5,053,644 | 0.0 | \$0 | \$1,745,342 | \$0 | \$3,308,302 |
| FY 2017-18 Governor's Budget Request | \$5,053,644 | 0.0 | \$0 | \$1,745,342 | \$0 | \$3,308,302 |
| FY 2017-18 Governor's Revised Request | \$5,053,644 | 0.0 | \$0 | \$1,745,342 | \$0 | \$3,308,302 |
| Connect for Health Colorado Eligibility Determination | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| S-13 Medicaid Funding for Connect for Health Colorado | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 |
| FY 2016-17 Revised Appropriation Request | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 |
| FY 2016-17 Initial Appropriation | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| BA-13 Medicaid Funding for Connect for Health Colorado | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 |
| FY 2017-18 Governor's Revised Request | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 |
| 01. Executive Director's Office, (D) Eligibility Determinations and Client Services Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$86,788,404 | 0.0 | \$15,166,739 | \$17,678,071 | \$28 | \$53,943,566 |
| FY 2016-17 Total Revised Appropriation | \$91,262,855 | 0.0 | \$16,834,506 | \$17,678,071 | \$28 | \$56,750,250 |
| FY 2017-18 Base Request | \$87,018,993 | 0.0 | \$15,247,724 | \$17,678,071 | \$28 | \$54,093,170 |
| FY 2017-18 Governor's Budget Request | \$87,491,003 | 0.0 | \$15,483,729 | \$17,678,071 | \$28 | \$54,329,175 |
| FY 2017-18 Governor's Revised Request | \$91,965,454 | 0.0 | \$17,151,496 | \$17,678,071 | \$28 | \$57,135,859 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|---------------------|------------|--------------------|------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| 01. Executive Director's Office, (E) | | | | | | |
| Utilization and Quality Review Contracts | | | | | | |
| Professional Service Contracts | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$11,985,007 | 0.0 | \$3,452,759 | \$461,089 | \$0 | \$8,071,159 |
| HB 16-1407 Extend Medicaid Payment Reform & Innovation Pilot | \$202,856 | 0.0 | \$50,714 | \$0 | \$0 | 152142 |
| FY 2016-17 Initial Appropriation | \$12,187,863 | 0.0 | \$3,503,473 | \$461,089 | \$0 | \$8,223,301 |
| FY 2016-17 Revised Appropriation Request | \$12,187,863 | 0.0 | \$3,503,473 | \$461,089 | \$0 | \$8,223,301 |
| FY 2016-17 Initial Appropriation | \$12,187,863 | 0.0 | \$3,503,473 | \$461,089 | \$0 | \$8,223,301 |
| TA-17 FY 2015-16 S-10, FY 2016-17 BA-10 ACC-MMP Grant | \$119,999 | 0.0 | \$30,000 | \$0 | \$0 | \$89,999 |
| FY 2017-18 Base Request | \$12,307,862 | 0.0 | \$3,533,473 | \$461,089 | \$0 | \$8,313,300 |
| R-08 MMIS Operations | (\$96,968) | 0.0 | (\$48,484) | \$0 | \$0 | (\$48,484) |
| R-09 Office of Community Living UR | \$905,203 | 0.0 | \$217,084 | \$9,219 | \$0 | \$678,900 |
| FY 2017-18 Governor's Budget Request | \$13,116,097 | 0.0 | \$3,702,073 | \$470,308 | \$0 | \$8,943,716 |
| FY 2017-18 Governor's Revised Request | \$13,116,097 | 0.0 | \$3,702,073 | \$470,308 | \$0 | \$8,943,716 |
| 01. Executive Director's Office, (E) Utilization and Quality Review Contracts Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$12,187,863 | 0.0 | \$3,503,473 | \$461,089 | \$0 | \$8,223,301 |
| FY 2016-17 Total Revised Appropriation | \$12,187,863 | 0.0 | \$3,503,473 | \$461,089 | \$0 | \$8,223,301 |
| FY 2017-18 Base Request | \$12,307,862 | 0.0 | \$3,533,473 | \$461,089 | \$0 | \$8,313,300 |
| FY 2017-18 Governor's Budget Request | \$13,116,097 | 0.0 | \$3,702,073 | \$470,308 | \$0 | \$8,943,716 |
| FY 2017-18 Governor's Revised Request | \$13,116,097 | 0.0 | \$3,702,073 | \$470,308 | \$0 | \$8,943,716 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------------|------------|--------------------|------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| 01. Executive Director's Office, (F) Provider Audits and Services | | | | | | |
| Professional Audit Contracts | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$3,401,907 | 0.0 | \$1,266,408 | \$415,408 | \$0 | \$1,720,091 |
| FY 2016-17 Initial Appropriation | \$3,401,907 | 0.0 | \$1,266,408 | \$415,408 | \$0 | \$1,720,091 |
| S-10 Regional Center Cost Reporting | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 |
| FY 2016-17 Revised Appropriation Request | \$3,476,907 | 0.0 | \$1,303,908 | \$415,408 | \$0 | \$1,757,591 |
| FY 2016-17 Initial Appropriation | \$3,401,907 | 0.0 | \$1,266,408 | \$415,408 | \$0 | \$1,720,091 |
| TA-23 FY 2007-08 S-5 Revised Federal Rule for Payment Error | (\$588,501) | 0.0 | (\$147,125) | (\$102,988) | \$0 | (\$338,388) |
| FY 2017-18 Base Request | \$2,813,406 | 0.0 | \$1,119,283 | \$312,420 | \$0 | \$1,381,703 |
| R-07 Oversight of State Resources | \$204,000 | 0.0 | \$102,000 | \$0 | \$0 | \$102,000 |
| R-09 Office of Community Living UR | \$162,240 | 0.0 | \$40,560 | \$0 | \$0 | \$121,680 |
| FY 2017-18 Governor's Budget Request | \$3,179,646 | 0.0 | \$1,261,843 | \$312,420 | \$0 | \$1,605,383 |
| BA-10 Regional Center Cost Reporting | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 |
| FY 2017-18 Governor's Revised Request | \$3,254,646 | 0.0 | \$1,299,343 | \$312,420 | \$0 | \$1,642,883 |
| 01. Executive Director's Office, (F) Provider Audits and Services Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$3,401,907 | 0.0 | \$1,266,408 | \$415,408 | \$0 | \$1,720,091 |
| FY 2016-17 Total Revised Appropriation | \$3,476,907 | 0.0 | \$1,303,908 | \$415,408 | \$0 | \$1,757,591 |
| FY 2017-18 Base Request | \$2,813,406 | 0.0 | \$1,119,283 | \$312,420 | \$0 | \$1,381,703 |
| FY 2017-18 Governor's Budget Request | \$3,179,646 | 0.0 | \$1,261,843 | \$312,420 | \$0 | \$1,605,383 |
| FY 2017-18 Governor's Revised Request | \$3,254,646 | 0.0 | \$1,299,343 | \$312,420 | \$0 | \$1,642,883 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|---|------------------|------------|--------------|------------------|-------------------------|------------------|
| 01. Executive Director's Office, (G) Recoveries and Recoupment Contract Costs | | | | | | |
| Estate Recovery | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2016-17 Initial Appropriation | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2016-17 Revised Appropriation Request | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2016-17 Initial Appropriation | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2017-18 Base Request | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2017-18 Governor's Budget Request | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2017-18 Governor's Revised Request | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| 01. Executive Director's Office, (G) Recoveries and Recoupment Contract Costs Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2016-17 Total Revised Appropriation | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2017-18 Base Request | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2017-18 Governor's Budget Request | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |
| FY 2017-18 Governor's Revised Request | \$700,000 | 0.0 | \$0 | \$350,000 | \$0 | \$350,000 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|------------------|------------|--------------|------------------|------------------|------------------|
| | | | | | Funds | Federal Funds |
| 01. Executive Director's Office, (I) Indirect Cost Recoveries | | | | | | |
| Indirect Cost Assessment | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$695,366 | 0.0 | \$0 | \$224,727 | \$5,941 | \$464,698 |
| FY 2016-17 Initial Appropriation | \$695,366 | 0.0 | \$0 | \$224,727 | \$5,941 | \$464,698 |
| FY 2016-17 Revised Appropriation Request | \$695,366 | 0.0 | \$0 | \$224,727 | \$5,941 | \$464,698 |
| FY 2016-17 Initial Appropriation | \$695,366 | 0.0 | \$0 | \$224,727 | \$5,941 | \$464,698 |
| TA-34 Statewide Indirect Cost Recoveries Common Policy | \$215,804 | 0.0 | \$0 | \$32,729 | \$111,491 | \$71,584 |
| FY 2017-18 Base Request | \$911,170 | 0.0 | \$0 | \$257,456 | \$117,432 | \$536,282 |
| FY 2017-18 Governor's Budget Request | \$911,170 | 0.0 | \$0 | \$257,456 | \$117,432 | \$536,282 |
| FY 2017-18 Governor's Revised Request | \$911,170 | 0.0 | \$0 | \$257,456 | \$117,432 | \$536,282 |
| 01. Executive Director's Office, (I) Indirect Cost Recoveries Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$695,366 | 0.0 | \$0 | \$224,727 | \$5,941 | \$464,698 |
| FY 2016-17 Total Revised Appropriation | \$695,366 | 0.0 | \$0 | \$224,727 | \$5,941 | \$464,698 |
| FY 2017-18 Base Request | \$911,170 | 0.0 | \$0 | \$257,456 | \$117,432 | \$536,282 |
| FY 2017-18 Governor's Budget Request | \$911,170 | 0.0 | \$0 | \$257,456 | \$117,432 | \$536,282 |
| FY 2017-18 Governor's Revised Request | \$911,170 | 0.0 | \$0 | \$257,456 | \$117,432 | \$536,282 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|------------------------|------------|------------------------|----------------------|--------------------|------------------------|
| | | | | | Funds | Federal Funds |
| 02. Medical Services Premiums | | | | | | |
| Medical and LT Care Services for Medicaid Eligible Indvcls | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$6,762,815,547 | 0.0 | \$1,948,969,728 | \$678,702,748 | \$5,240,893 | \$4,129,902,178 |
| HB 16-1097 PUC Permit For Medicaid Transportation Providers | (\$215,271) | 0.0 | (\$69,405) | (\$2,549) | \$0 | -143317 |
| HB 16-1408 Cash Fund Allocations for Health-related Programs | \$55,694,236 | 0.0 | (\$6,451,471) | \$27,008,330 | \$0 | 35137377 |
| SB 16-027 Medicaid Option For Prescribed Drugs By Mail | (\$29,917) | 0.0 | (\$9,084) | (\$409) | \$0 | -20424 |
| FY 2016-17 Initial Appropriation | \$6,818,264,595 | 0.0 | \$1,942,439,768 | \$705,708,120 | \$5,240,893 | \$4,164,875,814 |
| S-01 Medical Services Premiums | \$141,694,902 | 0.0 | \$32,217,993 | \$1,650,193 | \$3,861,816 | \$103,964,900 |
| S-06 Delivery System and Payment Reform | (\$15,440,295) | 0.0 | (\$7,720,148) | \$0 | \$0 | (\$7,720,147) |
| FY 2016-17 Revised Appropriation Request | \$6,944,519,202 | 0.0 | \$1,966,937,613 | \$707,358,313 | \$9,102,709 | \$4,261,120,567 |
| FY 2016-17 Initial Appropriation | \$6,818,264,595 | 0.0 | \$1,942,439,768 | \$705,708,120 | \$5,240,893 | \$4,164,875,814 |
| TA-01 FY 2014-15 BA-10, Enhanced Federal Medical Assistance | (\$7,748,597) | 0.0 | (\$3,169,176) | \$0 | \$0 | (\$4,579,421) |
| TA-09 FY 2016-17 NPR-05 Cervical Cancer Eligibility | \$0 | 0.0 | \$0 | \$283 | \$0 | (\$283) |
| TA-18 SB 16-027 Mail Delivery Pharmacy | (\$1,737,180) | 0.0 | (\$528,579) | (\$43,239) | \$0 | (\$1,165,362) |
| TA-24 HB 16-1321 Waiver Buy-in | \$61,533 | 0.0 | (\$138,758) | \$184,000 | \$0 | \$16,291 |
| TA-25 HB 16-1097 PUC Permit for Medicaid Transportation | (\$234,492) | 0.0 | (\$67,441) | (\$8,561) | \$0 | (\$158,490) |
| TA-32 SB 11-177 Sunset Teen Pregnancy & Dropout Program | (\$18,511) | 0.0 | \$12,996 | \$0 | \$0 | (\$31,507) |
| TA-33 HB 16-1408 Cash Fund Allocations | (\$55,694,236) | 0.0 | \$6,451,471 | (\$27,008,330) | \$0 | (\$35,137,377) |
| FY 2017-18 Base Request | \$6,752,893,112 | 0.0 | \$1,945,000,281 | \$678,832,273 | \$5,240,893 | \$4,123,819,665 |
| R-01 Medical Services Premiums | \$361,396,284 | 0.0 | \$124,330,802 | \$10,348,553 | \$3,790,151 | \$222,926,778 |
| R-06 Delivery System and Payment Reform | \$29,930,444 | 0.0 | \$7,014,977 | \$903,427 | \$0 | \$22,012,040 |
| R-07 Oversight of State Resources | (\$1,402,565) | 0.0 | (\$2,789,665) | (\$240,123) | \$0 | \$1,627,223 |
| R-11 Vendor Transitions | \$2,100,000 | 0.0 | \$680,400 | \$369,600 | \$0 | \$1,050,000 |
| FY 2017-18 Governor's Budget Request | \$7,144,917,275 | 0.0 | \$2,074,236,795 | \$690,213,730 | \$9,031,044 | \$4,371,435,706 |
| FY 2017-18 Governor's Revised Request | \$7,144,917,275 | 0.0 | \$2,074,236,795 | \$690,213,730 | \$9,031,044 | \$4,371,435,706 |
| 02. Medical Services Premiums Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$6,818,264,595 | 0.0 | \$1,942,439,768 | \$705,708,120 | \$5,240,893 | \$4,164,875,814 |
| FY 2016-17 Total Revised Appropriation | \$6,944,519,202 | 0.0 | \$1,966,937,613 | \$707,358,313 | \$9,102,709 | \$4,261,120,567 |
| FY 2017-18 Base Request | \$6,752,893,112 | 0.0 | \$1,945,000,281 | \$678,832,273 | \$5,240,893 | \$4,123,819,665 |
| FY 2017-18 Governor's Budget Request | \$7,144,917,275 | 0.0 | \$2,074,236,795 | \$690,213,730 | \$9,031,044 | \$4,371,435,706 |
| FY 2017-18 Governor's Revised Request | \$7,144,917,275 | 0.0 | \$2,074,236,795 | \$690,213,730 | \$9,031,044 | \$4,371,435,706 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|----------------------|------------|----------------------|---------------------|----------------|----------------------|
| | | | | | Funds | Federal Funds |
| 03. Behavioral Health Community Programs | | | | | | |
| Behavioral Health Capitation Payments | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$653,650,029 | 0.0 | \$181,949,404 | \$16,383,180 | \$0 | \$455,317,445 |
| FY 2016-17 Initial Appropriation | \$653,650,029 | 0.0 | \$181,949,404 | \$16,383,180 | \$0 | \$455,317,445 |
| S-02 Behavioral Health | (\$56,302,390) | 0.0 | (\$6,672,399) | \$594,011 | \$0 | (\$50,224,002) |
| S-15 FY 2015-16 Overexpenditure | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$597,347,639 | 0.0 | \$175,277,005 | \$16,977,191 | \$0 | \$405,093,443 |
| FY 2016-17 Initial Appropriation | \$653,650,029 | 0.0 | \$181,949,404 | \$16,383,180 | \$0 | \$455,317,445 |
| TA-09 FY 2016-17 NPR-05 Cervical Cancer Eligibility | \$0 | 0.0 | \$0 | \$19 | \$0 | (\$19) |
| TA-24 HB 16-1321 Waiver Buy-in | \$8,645 | 0.0 | (\$28,516) | \$32,837 | \$0 | \$4,324 |
| FY 2017-18 Base Request | \$653,658,674 | 0.0 | \$181,920,888 | \$16,416,036 | \$0 | \$455,321,750 |
| R-02 Behavioral Health | \$20,688,700 | 0.0 | (\$738,391) | \$11,287,683 | \$0 | \$10,139,408 |
| R-06 Delivery System and Payment Reform | (\$26,717,069) | 0.0 | (\$7,215,319) | (\$1,090,836) | \$0 | (\$18,410,914) |
| FY 2017-18 Governor's Budget Request | \$647,630,305 | 0.0 | \$173,967,178 | \$26,612,883 | \$0 | \$447,050,244 |
| FY 2017-18 Governor's Revised Request | \$647,630,305 | 0.0 | \$173,967,178 | \$26,612,883 | \$0 | \$447,050,244 |
| Behavioral Health Fee-for-Service Payments | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$8,967,301 | 0.0 | \$1,678,280 | \$249,835 | \$0 | \$7,039,186 |
| FY 2016-17 Initial Appropriation | \$8,967,301 | 0.0 | \$1,678,280 | \$249,835 | \$0 | \$7,039,186 |
| S-02 Behavioral Health | (\$145,908) | 0.0 | \$292,653 | (\$24,488) | \$0 | (\$414,073) |
| FY 2016-17 Revised Appropriation Request | \$8,821,393 | 0.0 | \$1,970,933 | \$225,347 | \$0 | \$6,625,113 |
| FY 2016-17 Initial Appropriation | \$8,967,301 | 0.0 | \$1,678,280 | \$249,835 | \$0 | \$7,039,186 |
| FY 2017-18 Base Request | \$8,967,301 | 0.0 | \$1,678,280 | \$249,835 | \$0 | \$7,039,186 |
| R-02 Behavioral Health | \$273,844 | 0.0 | \$331,900 | \$132,775 | \$0 | (\$190,831) |
| FY 2017-18 Governor's Budget Request | \$9,241,145 | 0.0 | \$2,010,180 | \$382,610 | \$0 | \$6,848,355 |
| FY 2017-18 Governor's Revised Request | \$9,241,145 | 0.0 | \$2,010,180 | \$382,610 | \$0 | \$6,848,355 |
| 03. Behavioral Health Community Programs Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$662,617,330 | 0.0 | \$183,627,684 | \$16,633,015 | \$0 | \$462,356,631 |
| FY 2016-17 Total Revised Appropriation | \$606,169,032 | 0.0 | \$177,247,938 | \$17,202,538 | \$0 | \$411,718,556 |
| FY 2017-18 Base Request | \$662,625,975 | 0.0 | \$183,599,168 | \$16,665,871 | \$0 | \$462,360,936 |
| FY 2017-18 Governor's Budget Request | \$656,871,450 | 0.0 | \$175,977,358 | \$26,995,493 | \$0 | \$453,898,599 |
| FY 2017-18 Governor's Revised Request | \$656,871,450 | 0.0 | \$175,977,358 | \$26,995,493 | \$0 | \$453,898,599 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------------|-------------|--------------------|------------------|------------------|--------------------|
| | | | | | Funds | Federal Funds |
| 04. Office of Community Living, (A) | | | | | | |
| Division of Intellectual and Developmental | | | | | | |
| Disabilities, (1) Administrative Costs | | | | | | |
| Personal Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$3,009,219 | 34.5 | \$1,431,598 | \$154,698 | \$75,000 | \$1,347,923 |
| SB 16-038 Transparency Of Community-centered Boards | \$54,763 | 1.0 | \$0 | \$27,382 | \$0 | 27381 |
| FY 2016-17 Initial Appropriation | \$3,063,982 | 35.5 | \$1,431,598 | \$182,080 | \$75,000 | \$1,375,304 |
| S-11 HB 15-1368 Cross-System Response Pilot Spending | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 |
| FY 2016-17 Revised Appropriation Request | \$3,063,982 | 35.5 | \$1,431,598 | \$257,080 | \$0 | \$1,375,304 |
| FY 2016-17 Initial Appropriation | \$3,063,982 | 35.5 | \$1,431,598 | \$182,080 | \$75,000 | \$1,375,304 |
| TA-11 SB 16-038 CCB Transparency | \$10,952 | 0.0 | \$0 | \$5,476 | \$0 | \$5,476 |
| TA-15 Salary Survey | \$9,821 | 0.0 | \$3,849 | \$0 | \$0 | \$5,972 |
| TA-39 Total Compensation | \$11,400 | 0.0 | \$3,849 | \$0 | \$1,579 | \$5,972 |
| FY 2017-18 Base Request | \$3,096,155 | 35.5 | \$1,439,296 | \$187,556 | \$76,579 | \$1,392,724 |
| R-10 Regional Center Task Force | \$137,128 | 1.8 | \$68,564 | \$0 | \$0 | \$68,564 |
| FY 2017-18 Governor's Budget Request | \$3,233,283 | 37.3 | \$1,507,860 | \$187,556 | \$76,579 | \$1,461,288 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$137,113 | 1.8 | \$68,557 | \$0 | \$0 | \$68,556 |
| BA-11 HB 15-1368 Cross-System Response Pilot Spending | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 |
| FY 2017-18 Governor's Revised Request | \$3,370,396 | 39.1 | \$1,576,417 | \$262,556 | \$1,579 | \$1,529,844 |
| Operating Expenses | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,064,886 | 0.0 | \$144,899 | \$1,425 | \$770,000 | \$148,562 |
| SB 16-038 Transparency Of Community-centered Boards | \$5,653 | 0.0 | \$0 | \$2,826 | \$0 | 2827 |
| FY 2016-17 Initial Appropriation | \$1,070,539 | 0.0 | \$144,899 | \$4,251 | \$770,000 | \$151,389 |
| S-11 HB 15-1368 Cross-System Response Pilot Spending | (\$769,050) | 0.0 | \$0 | \$950 | (\$770,000) | \$0 |
| FY 2016-17 Revised Appropriation Request | \$301,489 | 0.0 | \$144,899 | \$5,201 | \$0 | \$151,389 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|--------------------|------------|------------------|----------------|------------------|------------------|
| | | | | | Funds | Federal Funds |
| FY 2016-17 Initial Appropriation | \$1,070,539 | 0.0 | \$144,899 | \$4,251 | \$770,000 | \$151,389 |
| TA-11 SB 16-038 CCB Transparency | (\$4,703) | 0.0 | \$0 | (\$2,351) | \$0 | (\$2,352) |
| FY 2017-18 Base Request | \$1,065,836 | 0.0 | \$144,899 | \$1,900 | \$770,000 | \$149,037 |
| R-10 Regional Center Task Force | \$11,148 | 0.0 | \$5,574 | \$0 | \$0 | \$5,574 |
| R-13 Quality of Care and Performance Improvement Projects | (\$69,102) | 0.0 | (\$34,551) | \$0 | \$0 | (\$34,551) |
| FY 2017-18 Governor's Budget Request | \$1,007,882 | 0.0 | \$115,922 | \$1,900 | \$770,000 | \$120,060 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$10,026 | 0.0 | \$5,013 | \$0 | \$0 | \$5,013 |
| BA-11 HB 15-1368 Cross-System Response Pilot Spending | (\$769,050) | 0.0 | \$0 | \$950 | (\$770,000) | \$0 |
| FY 2017-18 Governor's Revised Request | \$248,858 | 0.0 | \$120,935 | \$2,850 | \$0 | \$125,073 |
| Community and Contract Management System | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$137,480 | 0.0 | \$89,362 | \$0 | \$0 | \$48,118 |
| FY 2016-17 Initial Appropriation | \$137,480 | 0.0 | \$89,362 | \$0 | \$0 | \$48,118 |
| FY 2016-17 Revised Appropriation Request | \$137,480 | 0.0 | \$89,362 | \$0 | \$0 | \$48,118 |
| FY 2016-17 Initial Appropriation | \$137,480 | 0.0 | \$89,362 | \$0 | \$0 | \$48,118 |
| FY 2017-18 Base Request | \$137,480 | 0.0 | \$89,362 | \$0 | \$0 | \$48,118 |
| FY 2017-18 Governor's Budget Request | \$137,480 | 0.0 | \$89,362 | \$0 | \$0 | \$48,118 |
| FY 2017-18 Governor's Revised Request | \$137,480 | 0.0 | \$89,362 | \$0 | \$0 | \$48,118 |
| Support Level Administration | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$57,368 | 0.0 | \$28,684 | \$0 | \$0 | \$28,684 |
| FY 2016-17 Initial Appropriation | \$57,368 | 0.0 | \$28,684 | \$0 | \$0 | \$28,684 |
| FY 2016-17 Revised Appropriation Request | \$57,368 | 0.0 | \$28,684 | \$0 | \$0 | \$28,684 |
| FY 2016-17 Initial Appropriation | \$57,368 | 0.0 | \$28,684 | \$0 | \$0 | \$28,684 |
| TA-24 HB 16-1321 Waiver Buy-in | \$50 | 0.0 | (\$196) | \$221 | \$0 | \$25 |
| TA-42 FY 2015-16 R#7 Participant Directed Programs | \$1,261,619 | 0.0 | \$630,683 | \$0 | \$0 | \$630,936 |
| FY 2017-18 Base Request | \$1,319,037 | 0.0 | \$659,171 | \$221 | \$0 | \$659,645 |
| FY 2017-18 Governor's Budget Request | \$1,319,037 | 0.0 | \$659,171 | \$221 | \$0 | \$659,645 |
| FY 2017-18 Governor's Revised Request | \$1,319,037 | 0.0 | \$659,171 | \$221 | \$0 | \$659,645 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|-------------|------|--------------|------------|----------------|---------------|
| | | | | | Funds | Federal Funds |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Administrative Costs Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$4,329,369 | 35.5 | \$1,694,543 | \$186,331 | \$845,000 | \$1,603,495 |
| FY 2016-17 Total Revised Appropriation | \$3,560,319 | 35.5 | \$1,694,543 | \$262,281 | \$0 | \$1,603,495 |
| FY 2017-18 Base Request | \$5,618,508 | 35.5 | \$2,332,728 | \$189,677 | \$846,579 | \$2,249,524 |
| FY 2017-18 Governor's Budget Request | \$5,697,682 | 37.3 | \$2,372,315 | \$189,677 | \$846,579 | \$2,289,111 |
| FY 2017-18 Governor's Revised Request | \$5,075,771 | 39.1 | \$2,445,885 | \$265,627 | \$1,579 | \$2,362,680 |

**04. Office of Community Living, (A)
Division of Intellectual and Developmental
Disabilities, (1) Program Costs**

Adult Comprehensive Services

| | | | | | | |
|---|----------------------|------------|----------------------|--------------------|------------|----------------------|
| HB 16-1405 FY 2016-17 General Appropriation Act | \$362,346,433 | 0.0 | \$180,448,523 | \$1 | \$0 | \$181,897,909 |
| FY 2016-17 Initial Appropriation | \$362,346,433 | 0.0 | \$180,448,523 | \$1 | \$0 | \$181,897,909 |
| S-05 Office of Community Living | (\$12,664,521) | 0.0 | (\$6,306,932) | \$0 | \$0 | (\$6,357,589) |
| FY 2016-17 Revised Appropriation Request | \$349,681,912 | 0.0 | \$174,141,591 | \$1 | \$0 | \$175,540,320 |
| FY 2016-17 Initial Appropriation | \$362,346,433 | 0.0 | \$180,448,523 | \$1 | \$0 | \$181,897,909 |
| FY 2017-18 Base Request | \$362,346,433 | 0.0 | \$180,448,523 | \$1 | \$0 | \$181,897,909 |
| R-05 Office of Community Living | \$7,469,531 | 0.0 | (\$4,001,748) | \$8,461,206 | \$0 | \$3,010,073 |
| FY 2017-18 Governor's Budget Request | \$369,815,964 | 0.0 | \$176,446,775 | \$8,461,207 | \$0 | \$184,907,982 |
| FY 2017-18 Governor's Revised Request | \$369,815,964 | 0.0 | \$176,446,775 | \$8,461,207 | \$0 | \$184,907,982 |

Adult Supported Living Services

| | | | | | | |
|---|---------------------|------------|---------------------|------------|------------|---------------------|
| HB 16-1405 FY 2016-17 General Appropriation Act | \$69,681,391 | 0.0 | \$38,677,034 | \$0 | \$0 | \$31,004,357 |
| FY 2016-17 Initial Appropriation | \$69,681,391 | 0.0 | \$38,677,034 | \$0 | \$0 | \$31,004,357 |
| S-05 Office of Community Living | (\$4,109,215) | 0.0 | (\$2,046,389) | \$0 | \$0 | (\$2,062,826) |
| FY 2016-17 Revised Appropriation Request | \$65,572,176 | 0.0 | \$36,630,645 | \$0 | \$0 | \$28,941,531 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|---------------------|------------|---------------------|------------------|----------------|---------------------|
| | | | | | Funds | Federal Funds |
| FY 2016-17 Initial Appropriation | \$69,681,391 | 0.0 | \$38,677,034 | \$0 | \$0 | \$31,004,357 |
| TA-24 HB 16-1321 Waiver Buy-in | \$53,589 | 0.0 | (\$207,616) | \$234,405 | \$0 | \$26,800 |
| FY 2017-18 Base Request | \$69,734,980 | 0.0 | \$38,469,418 | \$234,405 | \$0 | \$31,031,157 |
| R-05 Office of Community Living | \$1,561,123 | 0.0 | \$928,806 | (\$24,590) | \$0 | \$656,907 |
| FY 2017-18 Governor's Budget Request | \$71,296,103 | 0.0 | \$39,398,224 | \$209,815 | \$0 | \$31,688,064 |
| FY 2017-18 Governor's Revised Request | \$71,296,103 | 0.0 | \$39,398,224 | \$209,815 | \$0 | \$31,688,064 |
| Children's Extensive Support Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$26,310,826 | 0.0 | \$13,102,791 | \$0 | \$0 | \$13,208,035 |
| FY 2016-17 Initial Appropriation | \$26,310,826 | 0.0 | \$13,102,791 | \$0 | \$0 | \$13,208,035 |
| S-05 Office of Community Living | (\$594,807) | 0.0 | (\$296,214) | \$0 | \$0 | (\$298,593) |
| FY 2016-17 Revised Appropriation Request | \$25,716,019 | 0.0 | \$12,806,577 | \$0 | \$0 | \$12,909,442 |
| FY 2016-17 Initial Appropriation | \$26,310,826 | 0.0 | \$13,102,791 | \$0 | \$0 | \$13,208,035 |
| FY 2017-18 Base Request | \$26,310,826 | 0.0 | \$13,102,791 | \$0 | \$0 | \$13,208,035 |
| R-05 Office of Community Living | \$463,632 | 0.0 | \$284,438 | \$0 | \$0 | \$179,194 |
| FY 2017-18 Governor's Budget Request | \$26,774,458 | 0.0 | \$13,387,229 | \$0 | \$0 | \$13,387,229 |
| FY 2017-18 Governor's Revised Request | \$26,774,458 | 0.0 | \$13,387,229 | \$0 | \$0 | \$13,387,229 |
| Case Management | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$32,255,501 | 0.0 | \$16,605,002 | \$0 | \$0 | \$15,650,499 |
| FY 2016-17 Initial Appropriation | \$32,255,501 | 0.0 | \$16,605,002 | \$0 | \$0 | \$15,650,499 |
| S-05 Office of Community Living | (\$1,258,271) | 0.0 | (\$58,094) | \$0 | \$0 | (\$1,200,177) |
| FY 2016-17 Revised Appropriation Request | \$30,997,230 | 0.0 | \$16,546,908 | \$0 | \$0 | \$14,450,322 |
| FY 2016-17 Initial Appropriation | \$32,255,501 | 0.0 | \$16,605,002 | \$0 | \$0 | \$15,650,499 |
| TA-24 HB 16-1321 Waiver Buy-in | \$11,497 | 0.0 | (\$44,544) | \$50,291 | \$0 | \$5,750 |
| FY 2017-18 Base Request | \$32,266,998 | 0.0 | \$16,560,458 | \$50,291 | \$0 | \$15,656,249 |
| R-05 Office of Community Living | \$375,386 | 0.0 | \$763,208 | (\$9,368) | \$0 | (\$378,454) |
| R-10 Regional Center Task Force | \$152,849 | 0.0 | \$76,410 | \$0 | \$0 | \$76,439 |
| FY 2017-18 Governor's Budget Request | \$32,795,233 | 0.0 | \$17,400,076 | \$40,923 | \$0 | \$15,354,234 |
| FY 2017-18 Governor's Revised Request | \$32,795,233 | 0.0 | \$17,400,076 | \$40,923 | \$0 | \$15,354,234 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|------------|----------------|-----------------|
| | | | | | Funds | Federal Funds |
| Family Support Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$6,960,460 | 0.0 | \$6,960,460 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$6,960,460 | 0.0 | \$6,960,460 | \$0 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$6,960,460 | 0.0 | \$6,960,460 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$6,960,460 | 0.0 | \$6,960,460 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$6,960,460 | 0.0 | \$6,960,460 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$6,960,460 | 0.0 | \$6,960,460 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$6,960,460 | 0.0 | \$6,960,460 | \$0 | \$0 | \$0 |
| Preventive Dental Hygiene | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$63,311 | 0.0 | \$63,311 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$63,311 | 0.0 | \$63,311 | \$0 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$63,311 | 0.0 | \$63,311 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$63,311 | 0.0 | \$63,311 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$63,311 | 0.0 | \$63,311 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$63,311 | 0.0 | \$63,311 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$63,311 | 0.0 | \$63,311 | \$0 | \$0 | \$0 |
| Eligibility Determination and Waiting List Management | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$3,121,194 | 0.0 | \$3,100,556 | \$0 | \$0 | \$20,638 |
| FY 2016-17 Initial Appropriation | \$3,121,194 | 0.0 | \$3,100,556 | \$0 | \$0 | \$20,638 |
| FY 2016-17 Revised Appropriation Request | \$3,121,194 | 0.0 | \$3,100,556 | \$0 | \$0 | \$20,638 |
| FY 2016-17 Initial Appropriation | \$3,121,194 | 0.0 | \$3,100,556 | \$0 | \$0 | \$20,638 |
| FY 2017-18 Base Request | \$3,121,194 | 0.0 | \$3,100,556 | \$0 | \$0 | \$20,638 |
| FY 2017-18 Governor's Budget Request | \$3,121,194 | 0.0 | \$3,100,556 | \$0 | \$0 | \$20,638 |
| FY 2017-18 Governor's Revised Request | \$3,121,194 | 0.0 | \$3,100,556 | \$0 | \$0 | \$20,638 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|---------------|--------------------|----------------|---------------|
| | | | | | Funds | Federal Funds |
| Appropriation to the BH Crisis Pilot Program Fund | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,690,000 | 0.0 | \$0 | \$1,690,000 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$1,690,000 | 0.0 | \$0 | \$1,690,000 | \$0 | \$0 |
| S-11 HB 15-1368 Cross-System Response Pilot Spending | (\$639,785) | 0.0 | \$0 | (\$639,785) | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$1,050,215 | 0.0 | \$0 | \$1,050,215 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$1,690,000 | 0.0 | \$0 | \$1,690,000 | \$0 | \$0 |
| TA-40 HB15-1368 Transfer to Cross-System Response | (\$1,690,000) | 0.0 | \$0 | (\$1,690,000) | \$0 | \$0 |
| FY 2017-18 Base Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| BA-11 HB 15-1368 Cross-System Response Pilot Spending | \$1,075,776 | 0.0 | \$0 | \$1,075,776 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$1,075,776 | 0.0 | \$0 | \$1,075,776 | \$0 | \$0 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Program Costs Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$502,429,116 | 0.0 | \$258,957,677 | \$1,690,001 | \$0 | \$241,781,438 |
| FY 2016-17 Total Revised Appropriation | \$483,162,517 | 0.0 | \$250,250,048 | \$1,050,216 | \$0 | \$231,862,253 |
| FY 2017-18 Base Request | \$500,804,202 | 0.0 | \$258,705,517 | \$284,697 | \$0 | \$241,813,988 |
| FY 2017-18 Governor's Budget Request | \$510,826,723 | 0.0 | \$256,756,631 | \$8,711,945 | \$0 | \$245,358,147 |
| FY 2017-18 Governor's Revised Request | \$511,902,499 | 0.0 | \$256,756,631 | \$9,787,721 | \$0 | \$245,358,147 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|----------------------|------------|--------------------|----------------------|----------------|----------------------|
| | | | | | Funds | Federal Funds |
| 05. Indigent Care Program | | | | | | |
| Safety Net Provider Payments | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$311,296,186 | 0.0 | \$0 | \$155,073,238 | \$0 | \$156,222,948 |
| FY 2016-17 Initial Appropriation | \$311,296,186 | 0.0 | \$0 | \$155,073,238 | \$0 | \$156,222,948 |
| FY 2016-17 Revised Appropriation Request | \$311,296,186 | 0.0 | \$0 | \$155,073,238 | \$0 | \$156,222,948 |
| FY 2016-17 Initial Appropriation | \$311,296,186 | 0.0 | \$0 | \$155,073,238 | \$0 | \$156,222,948 |
| FY 2017-18 Base Request | \$311,296,186 | 0.0 | \$0 | \$155,073,238 | \$0 | \$156,222,948 |
| R-14 FMAP | \$0 | 0.0 | \$0 | \$574,855 | \$0 | (\$574,855) |
| FY 2017-18 Governor's Budget Request | \$311,296,186 | 0.0 | \$0 | \$155,648,093 | \$0 | \$155,648,093 |
| FY 2017-18 Governor's Revised Request | \$311,296,186 | 0.0 | \$0 | \$155,648,093 | \$0 | \$155,648,093 |
| Clinic Based Indigent Care | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$6,119,760 | 0.0 | \$3,047,640 | \$0 | \$0 | \$3,072,120 |
| FY 2016-17 Initial Appropriation | \$6,119,760 | 0.0 | \$3,047,640 | \$0 | \$0 | \$3,072,120 |
| FY 2016-17 Revised Appropriation Request | \$6,119,760 | 0.0 | \$3,047,640 | \$0 | \$0 | \$3,072,120 |
| FY 2016-17 Initial Appropriation | \$6,119,760 | 0.0 | \$3,047,640 | \$0 | \$0 | \$3,072,120 |
| FY 2017-18 Base Request | \$6,119,760 | 0.0 | \$3,047,640 | \$0 | \$0 | \$3,072,120 |
| R-14 FMAP | \$0 | 0.0 | \$12,240 | \$0 | \$0 | (\$12,240) |
| FY 2017-18 Governor's Budget Request | \$6,119,760 | 0.0 | \$3,059,880 | \$0 | \$0 | \$3,059,880 |
| FY 2017-18 Governor's Revised Request | \$6,119,760 | 0.0 | \$3,059,880 | \$0 | \$0 | \$3,059,880 |
| Pediatric Specialty Hospital | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$13,455,012 | 0.0 | \$6,700,596 | \$0 | \$0 | \$6,754,416 |
| FY 2016-17 Initial Appropriation | \$13,455,012 | 0.0 | \$6,700,596 | \$0 | \$0 | \$6,754,416 |
| FY 2016-17 Revised Appropriation Request | \$13,455,012 | 0.0 | \$6,700,596 | \$0 | \$0 | \$6,754,416 |
| FY 2016-17 Initial Appropriation | \$13,455,012 | 0.0 | \$6,700,596 | \$0 | \$0 | \$6,754,416 |
| FY 2017-18 Base Request | \$13,455,012 | 0.0 | \$6,700,596 | \$0 | \$0 | \$6,754,416 |
| R-14 FMAP | \$0 | 0.0 | \$26,910 | \$0 | \$0 | (\$26,910) |
| FY 2017-18 Governor's Budget Request | \$13,455,012 | 0.0 | \$6,727,506 | \$0 | \$0 | \$6,727,506 |
| FY 2017-18 Governor's Revised Request | \$13,455,012 | 0.0 | \$6,727,506 | \$0 | \$0 | \$6,727,506 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|---------------------|------------|--------------|---------------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| Appropriation from Tobacco Tax Fund to the General Fund | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$432,590 | 0.0 | \$0 | \$432,590 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$432,590 | 0.0 | \$0 | \$432,590 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$432,590 | 0.0 | \$0 | \$432,590 | \$0 | \$0 |
| | | | | | | |
| FY 2016-17 Initial Appropriation | \$432,590 | 0.0 | \$0 | \$432,590 | \$0 | \$0 |
| FY 2017-18 Base Request | \$432,590 | 0.0 | \$0 | \$432,590 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$432,590 | 0.0 | \$0 | \$432,590 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$432,590 | 0.0 | \$0 | \$432,590 | \$0 | \$0 |
| Primary Care Fund Program | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$27,276,358 | 0.0 | \$0 | \$27,276,358 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$27,276,358 | 0.0 | \$0 | \$27,276,358 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$27,276,358 | 0.0 | \$0 | \$27,276,358 | \$0 | \$0 |
| | | | | | | |
| FY 2016-17 Initial Appropriation | \$27,276,358 | 0.0 | \$0 | \$27,276,358 | \$0 | \$0 |
| FY 2017-18 Base Request | \$27,276,358 | 0.0 | \$0 | \$27,276,358 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$27,276,358 | 0.0 | \$0 | \$27,276,358 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$27,276,358 | 0.0 | \$0 | \$27,276,358 | \$0 | \$0 |
| Children's Basic Health Plan Administration | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$5,033,274 | 0.0 | \$0 | \$2,363,824 | \$0 | \$2,669,450 |
| FY 2016-17 Initial Appropriation | \$5,033,274 | 0.0 | \$0 | \$2,363,824 | \$0 | \$2,669,450 |
| S-03 CHP+ | \$0 | 0.0 | \$0 | (\$1,766,374) | \$0 | \$1,766,374 |
| FY 2016-17 Revised Appropriation Request | \$5,033,274 | 0.0 | \$0 | \$597,450 | \$0 | \$4,435,824 |
| | | | | | | |
| FY 2016-17 Initial Appropriation | \$5,033,274 | 0.0 | \$0 | \$2,363,824 | \$0 | \$2,669,450 |
| FY 2017-18 Base Request | \$5,033,274 | 0.0 | \$0 | \$2,363,824 | \$0 | \$2,669,450 |
| R-03 CHP+ | \$0 | 0.0 | \$0 | (\$1,759,831) | \$0 | \$1,759,831 |
| FY 2017-18 Governor's Budget Request | \$5,033,274 | 0.0 | \$0 | \$603,993 | \$0 | \$4,429,281 |
| FY 2017-18 Governor's Revised Request | \$5,033,274 | 0.0 | \$0 | \$603,993 | \$0 | \$4,429,281 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|----------------------|------------|--------------------|---------------------|----------------|----------------------|
| | | | | | Funds | Federal Funds |
| Children's Basic Health Plan Medical and Dental Costs | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$141,455,044 | 0.0 | \$2,500,441 | \$17,533,954 | \$0 | \$121,420,649 |
| FY 2016-17 Initial Appropriation | \$141,455,044 | 0.0 | \$2,500,441 | \$17,533,954 | \$0 | \$121,420,649 |
| S-03 CHP+ | \$15,610,893 | 0.0 | \$1,515 | \$3,681,198 | \$0 | \$11,928,180 |
| FY 2016-17 Revised Appropriation Request | \$157,065,937 | 0.0 | \$2,501,956 | \$21,215,152 | \$0 | \$133,348,829 |
| FY 2016-17 Initial Appropriation | \$141,455,044 | 0.0 | \$2,500,441 | \$17,533,954 | \$0 | \$121,420,649 |
| TA-35 Amendment 35 Adjustment | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$141,455,044 | 0.0 | \$2,500,441 | \$17,533,954 | \$0 | \$121,420,649 |
| R-03 CHP+ | \$18,510,002 | 0.0 | (\$1,878,825) | \$3,425,077 | \$0 | \$16,963,750 |
| FY 2017-18 Governor's Budget Request | \$159,965,046 | 0.0 | \$621,616 | \$20,959,031 | \$0 | \$138,384,399 |
| NPBA-03 December Amendment 35 Forecast Adjustment | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$159,965,046 | 0.0 | \$621,616 | \$20,959,031 | \$0 | \$138,384,399 |
| 05. Indigent Care Program Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$505,068,224 | 0.0 | \$12,248,677 | \$202,679,964 | \$0 | \$290,139,583 |
| FY 2016-17 Total Revised Appropriation | \$520,679,117 | 0.0 | \$12,250,192 | \$204,594,788 | \$0 | \$303,834,137 |
| FY 2017-18 Base Request | \$505,068,224 | 0.0 | \$12,248,677 | \$202,679,964 | \$0 | \$290,139,583 |
| FY 2017-18 Governor's Budget Request | \$523,578,226 | 0.0 | \$10,409,002 | \$204,920,065 | \$0 | \$308,249,159 |
| FY 2017-18 Governor's Revised Request | \$523,578,226 | 0.0 | \$10,409,002 | \$204,920,065 | \$0 | \$308,249,159 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------|-----|--------------|--------------|----------------|---------------|
| | | | | | Funds | Federal Funds |
| 06. Other Medical Services | | | | | | |
| Old Age Pension State Medical | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$12,962,510 | 0.0 | \$2,962,510 | \$10,000,000 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$12,962,510 | 0.0 | \$2,962,510 | \$10,000,000 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$12,962,510 | 0.0 | \$2,962,510 | \$10,000,000 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$12,962,510 | 0.0 | \$2,962,510 | \$10,000,000 | \$0 | \$0 |
| FY 2017-18 Base Request | \$12,962,510 | 0.0 | \$2,962,510 | \$10,000,000 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$12,962,510 | 0.0 | \$2,962,510 | \$10,000,000 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$12,962,510 | 0.0 | \$2,962,510 | \$10,000,000 | \$0 | \$0 |
| Commission on Family Medicine Residency Training Programs | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$7,597,298 | 0.0 | \$3,786,304 | \$0 | \$0 | \$3,810,994 |
| FY 2016-17 Initial Appropriation | \$7,597,298 | 0.0 | \$3,786,304 | \$0 | \$0 | \$3,810,994 |
| FY 2016-17 Revised Appropriation Request | \$7,597,298 | 0.0 | \$3,786,304 | \$0 | \$0 | \$3,810,994 |
| FY 2016-17 Initial Appropriation | \$7,597,298 | 0.0 | \$3,786,304 | \$0 | \$0 | \$3,810,994 |
| FY 2017-18 Base Request | \$7,597,298 | 0.0 | \$3,786,304 | \$0 | \$0 | \$3,810,994 |
| R-14 FMAP | \$0 | 0.0 | \$12,345 | \$0 | \$0 | (\$12,345) |
| FY 2017-18 Governor's Budget Request | \$7,597,298 | 0.0 | \$3,798,649 | \$0 | \$0 | \$3,798,649 |
| FY 2017-18 Governor's Revised Request | \$7,597,298 | 0.0 | \$3,798,649 | \$0 | \$0 | \$3,798,649 |
| Teaching Hospital -- Denver Health and Hospital Authority | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$2,804,714 | 0.0 | \$1,396,748 | \$0 | \$0 | \$1,407,966 |
| FY 2016-17 Initial Appropriation | \$2,804,714 | 0.0 | \$1,396,748 | \$0 | \$0 | \$1,407,966 |
| FY 2016-17 Revised Appropriation Request | \$2,804,714 | 0.0 | \$1,396,748 | \$0 | \$0 | \$1,407,966 |
| FY 2016-17 Initial Appropriation | \$2,804,714 | 0.0 | \$1,396,748 | \$0 | \$0 | \$1,407,966 |
| FY 2017-18 Base Request | \$2,804,714 | 0.0 | \$1,396,748 | \$0 | \$0 | \$1,407,966 |
| R-14 FMAP | \$0 | 0.0 | \$5,609 | \$0 | \$0 | (\$5,609) |
| FY 2017-18 Governor's Budget Request | \$2,804,714 | 0.0 | \$1,402,357 | \$0 | \$0 | \$1,402,357 |
| FY 2017-18 Governor's Revised Request | \$2,804,714 | 0.0 | \$1,402,357 | \$0 | \$0 | \$1,402,357 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|----------------------|------------|----------------------|------------|--------------------|------------------|
| | | | | | Funds | Federal Funds |
| Teaching Hospital -- University of Colorado Hospital | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,181,204 | 0.0 | \$585,390 | \$0 | \$0 | \$595,814 |
| FY 2016-17 Initial Appropriation | \$1,181,204 | 0.0 | \$585,390 | \$0 | \$0 | \$595,814 |
| FY 2016-17 Revised Appropriation Request | \$1,181,204 | 0.0 | \$585,390 | \$0 | \$0 | \$595,814 |
| FY 2016-17 Initial Appropriation | \$1,181,204 | 0.0 | \$585,390 | \$0 | \$0 | \$595,814 |
| FY 2017-18 Base Request | \$1,181,204 | 0.0 | \$585,390 | \$0 | \$0 | \$595,814 |
| R-14 FMAP | \$0 | 0.0 | \$5,212 | \$0 | \$0 | (\$5,212) |
| FY 2017-18 Governor's Budget Request | \$1,181,204 | 0.0 | \$590,602 | \$0 | \$0 | \$590,602 |
| FY 2017-18 Governor's Revised Request | \$1,181,204 | 0.0 | \$590,602 | \$0 | \$0 | \$590,602 |
| Medicare Modernization Act State Contribution Payment | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$130,667,733 | 0.0 | \$130,667,733 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$130,667,733 | 0.0 | \$130,667,733 | \$0 | \$0 | \$0 |
| S-04 Medicare Modernization Act | \$1,369,323 | 0.0 | \$1,369,323 | \$0 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$132,037,056 | 0.0 | \$132,037,056 | \$0 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$130,667,733 | 0.0 | \$130,667,733 | \$0 | \$0 | \$0 |
| FY 2017-18 Base Request | \$130,667,733 | 0.0 | \$130,667,733 | \$0 | \$0 | \$0 |
| R-04 Medicare Modernization Act | \$19,674,000 | 0.0 | \$19,674,000 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$150,341,733 | 0.0 | \$150,341,733 | \$0 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$150,341,733 | 0.0 | \$150,341,733 | \$0 | \$0 | \$0 |
| Public School Health Services Contract Administration | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$2,491,722 | 0.0 | \$0 | \$0 | \$2,491,722 | \$0 |
| FY 2016-17 Initial Appropriation | \$2,491,722 | 0.0 | \$0 | \$0 | \$2,491,722 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$2,491,722 | 0.0 | \$0 | \$0 | \$2,491,722 | \$0 |
| FY 2016-17 Initial Appropriation | \$2,491,722 | 0.0 | \$0 | \$0 | \$2,491,722 | \$0 |
| FY 2017-18 Base Request | \$2,491,722 | 0.0 | \$0 | \$0 | \$2,491,722 | \$0 |
| FY 2017-18 Governor's Budget Request | \$2,491,722 | 0.0 | \$0 | \$0 | \$2,491,722 | \$0 |
| FY 2017-18 Governor's Revised Request | \$2,491,722 | 0.0 | \$0 | \$0 | \$2,491,722 | \$0 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|---------------------|------------|---------------|---------------------|----------------|---------------------|
| | | | | | Funds | Federal Funds |
| Public School Health Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$82,604,632 | 0.0 | \$0 | \$41,001,948 | \$0 | \$41,602,684 |
| FY 2016-17 Initial Appropriation | \$82,604,632 | 0.0 | \$0 | \$41,001,948 | \$0 | \$41,602,684 |
| S-14 Public School Health Services Funding Adjustment | \$9,393,330 | 0.0 | \$0 | \$4,754,691 | \$0 | \$4,638,639 |
| FY 2016-17 Revised Appropriation Request | \$91,997,962 | 0.0 | \$0 | \$45,756,639 | \$0 | \$46,241,323 |
| FY 2016-17 Initial Appropriation | \$82,604,632 | 0.0 | \$0 | \$41,001,948 | \$0 | \$41,602,684 |
| TA-07 FY 2015-16 S-14, FY 2016-17 BA-14 Public School Health | \$1,933,578 | 0.0 | \$0 | \$1,193,993 | \$0 | \$739,585 |
| FY 2017-18 Base Request | \$84,538,210 | 0.0 | \$0 | \$42,195,941 | \$0 | \$42,342,269 |
| FY 2017-18 Governor's Budget Request | \$84,538,210 | 0.0 | \$0 | \$42,195,941 | \$0 | \$42,342,269 |
| BA-14 Public School Health Services Funding Adjustment | \$8,484,767 | 0.0 | \$0 | \$4,309,645 | \$0 | \$4,175,122 |
| FY 2017-18 Governor's Revised Request | \$93,022,977 | 0.0 | \$0 | \$46,505,586 | \$0 | \$46,517,391 |
| SBIRT Training Grant Program | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$750,000 | 0.0 | \$0 | \$750,000 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$750,000 | 0.0 | \$0 | \$750,000 | \$0 | \$0 |
| FY 2016-17 Revised Appropriation Request | \$750,000 | 0.0 | \$0 | \$750,000 | \$0 | \$0 |
| FY 2016-17 Initial Appropriation | \$750,000 | 0.0 | \$0 | \$750,000 | \$0 | \$0 |
| FY 2017-18 Base Request | \$750,000 | 0.0 | \$0 | \$750,000 | \$0 | \$0 |
| FY 2017-18 Governor's Budget Request | \$750,000 | 0.0 | \$0 | \$750,000 | \$0 | \$0 |
| FY 2017-18 Governor's Revised Request | \$750,000 | 0.0 | \$0 | \$750,000 | \$0 | \$0 |
| 06. Other Medical Services Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$241,059,813 | 0.0 | \$139,398,685 | \$51,751,948 | \$2,491,722 | \$47,417,458 |
| FY 2016-17 Total Revised Appropriation | \$251,822,466 | 0.0 | \$140,768,008 | \$56,506,639 | \$2,491,722 | \$52,056,097 |
| FY 2017-18 Base Request | \$242,993,391 | 0.0 | \$139,398,685 | \$52,945,941 | \$2,491,722 | \$48,157,043 |
| FY 2017-18 Governor's Budget Request | \$262,667,391 | 0.0 | \$159,095,851 | \$52,945,941 | \$2,491,722 | \$48,133,877 |
| FY 2017-18 Governor's Revised Request | \$271,152,158 | 0.0 | \$159,095,851 | \$57,255,586 | \$2,491,722 | \$52,308,999 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|---------------------|------------|--------------------|------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| 07. Department of Human Services | | | | | | |
| Medicaid-Funded Programs, (A) Executive | | | | | | |
| Director's Office - Medicaid Funding | | | | | | |
| Executive Director's Office - Medicaid Funding | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$16,109,873 | 0.0 | \$8,054,937 | \$0 | \$0 | \$8,054,936 |
| FY 2016-17 Initial Appropriation | \$16,109,873 | 0.0 | \$8,054,937 | \$0 | \$0 | \$8,054,936 |
| NPS-06 DHS Property Fund | \$41,631 | 0.0 | \$20,816 | \$0 | \$0 | \$20,815 |
| FY 2016-17 Revised Appropriation Request | \$16,151,504 | 0.0 | \$8,075,753 | \$0 | \$0 | \$8,075,751 |
| FY 2016-17 Initial Appropriation | \$16,109,873 | 0.0 | \$8,054,937 | \$0 | \$0 | \$8,054,936 |
| TA-29 DHS Salary Survey Allocation | (\$138,946) | 0.0 | (\$69,472) | \$0 | \$0 | (\$69,474) |
| TA-30 DHS Worker's Compensation | (\$148,666) | 0.0 | (\$74,333) | \$0 | \$0 | (\$74,333) |
| TA-31 DHS Risk Management | (\$32,604) | 0.0 | (\$16,302) | \$0 | \$0 | (\$16,302) |
| TA-38 DHS Total Compensation | \$1,378,928 | 0.0 | \$689,464 | \$0 | \$0 | \$689,464 |
| FY 2017-18 Base Request | \$17,168,585 | 0.0 | \$8,584,294 | \$0 | \$0 | \$8,584,291 |
| FY 2017-18 Governor's Budget Request | \$17,168,585 | 0.0 | \$8,584,294 | \$0 | \$0 | \$8,584,291 |
| NPBA-06 DHS HLD | (\$37,316) | 0.0 | (\$18,658) | \$0 | \$0 | (\$18,658) |
| NPBA-08 DHS Property Fund | (\$4,098) | 0.0 | (\$2,049) | \$0 | \$0 | (\$2,049) |
| FY 2017-18 Governor's Revised Request | \$17,127,171 | 0.0 | \$8,563,587 | \$0 | \$0 | \$8,563,584 |
| 07. Department of Human Services Medicaid-Funded | | | | | | |
| Programs, (A) Executive Director's Office - Medicaid | | | | | | |
| Funding Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$16,109,873 | 0.0 | \$8,054,937 | \$0 | \$0 | \$8,054,936 |
| FY 2016-17 Total Revised Appropriation | \$16,151,504 | 0.0 | \$8,075,753 | \$0 | \$0 | \$8,075,751 |
| FY 2017-18 Base Request | \$17,168,585 | 0.0 | \$8,584,294 | \$0 | \$0 | \$8,584,291 |
| FY 2017-18 Governor's Budget Request | \$17,168,585 | 0.0 | \$8,584,294 | \$0 | \$0 | \$8,584,291 |
| FY 2017-18 Governor's Revised Request | \$17,127,171 | 0.0 | \$8,563,587 | \$0 | \$0 | \$8,563,584 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|------------------|------------|------------------|------------|----------------|------------------|
| | | | | | Funds | Federal Funds |
| 07. Department of Human Services | | | | | | |
| Medicaid-Funded Programs, (B) Office of | | | | | | |
| Information Technology Services - | | | | | | |
| Medicaid | | | | | | |
| Other Office Of Information Technology | | | | | | |
| Services Line Items | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$647,220 | 0.0 | \$322,316 | \$0 | \$0 | \$324,904 |
| FY 2016-17 Initial Appropriation | \$647,220 | 0.0 | \$322,316 | \$0 | \$0 | \$324,904 |
| FY 2016-17 Revised Appropriation Request | \$647,220 | 0.0 | \$322,316 | \$0 | \$0 | \$324,904 |
| FY 2016-17 Initial Appropriation | \$647,220 | 0.0 | \$322,316 | \$0 | \$0 | \$324,904 |
| TA-41 DHS OIT Common Policy | \$82,176 | 0.0 | \$41,088 | \$0 | \$0 | \$41,088 |
| FY 2017-18 Base Request | \$729,396 | 0.0 | \$363,404 | \$0 | \$0 | \$365,992 |
| NPR-05 DHS OIT Deskside | \$1,967 | 0.0 | \$984 | \$0 | \$0 | \$983 |
| NPR-06 DHS OIT Secure Colorado | \$4,920 | 0.0 | \$2,460 | \$0 | \$0 | \$2,460 |
| R-14 FMAP | \$0 | 0.0 | \$1,294 | \$0 | \$0 | (\$1,294) |
| FY 2017-18 Governor's Budget Request | \$736,283 | 0.0 | \$368,142 | \$0 | \$0 | \$368,141 |
| FY 2017-18 Governor's Revised Request | \$736,283 | 0.0 | \$368,142 | \$0 | \$0 | \$368,141 |
| 07. Department of Human Services Medicaid-Funded | | | | | | |
| Programs, (B) Office of Information Technology Services - | | | | | | |
| Medicaid Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$647,220 | 0.0 | \$322,316 | \$0 | \$0 | \$324,904 |
| FY 2016-17 Total Revised Appropriation | \$647,220 | 0.0 | \$322,316 | \$0 | \$0 | \$324,904 |
| FY 2017-18 Base Request | \$729,396 | 0.0 | \$363,404 | \$0 | \$0 | \$365,992 |
| FY 2017-18 Governor's Budget Request | \$736,283 | 0.0 | \$368,142 | \$0 | \$0 | \$368,141 |
| FY 2017-18 Governor's Revised Request | \$736,283 | 0.0 | \$368,142 | \$0 | \$0 | \$368,141 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| 07. Department of Human Services Medicaid-Funded Programs, (C) Office of Operations - Medicaid Funding | | | | | | |
| Office Of Operations - Medicaid Funding | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$5,656,943 | 0.0 | \$2,817,321 | \$0 | \$0 | \$2,839,622 |
| FY 2016-17 Initial Appropriation | \$5,656,943 | 0.0 | \$2,817,321 | \$0 | \$0 | \$2,839,622 |
| NPS-03 DHS DPA Fleet | (\$29,500) | 0.0 | (\$14,750) | \$0 | \$0 | (\$14,750) |
| FY 2016-17 Revised Appropriation Request | \$5,627,443 | 0.0 | \$2,802,571 | \$0 | \$0 | \$2,824,872 |
| FY 2016-17 Initial Appropriation | \$5,656,943 | 0.0 | \$2,817,321 | \$0 | \$0 | \$2,839,622 |
| TA-29 DHS Salary Survey Allocation | \$69,544 | 0.0 | \$34,772 | \$0 | \$0 | \$34,772 |
| FY 2017-18 Base Request | \$5,726,487 | 0.0 | \$2,852,093 | \$0 | \$0 | \$2,874,394 |
| R-14 FMAP | \$0 | 0.0 | \$11,151 | \$0 | \$0 | (\$11,151) |
| FY 2017-18 Governor's Budget Request | \$5,726,487 | 0.0 | \$2,863,244 | \$0 | \$0 | \$2,863,243 |
| FY 2017-18 Governor's Revised Request | \$5,726,487 | 0.0 | \$2,863,244 | \$0 | \$0 | \$2,863,243 |
| 07. Department of Human Services Medicaid-Funded Programs, (C) Office of Operations - Medicaid Funding Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$5,656,943 | 0.0 | \$2,817,321 | \$0 | \$0 | \$2,839,622 |
| FY 2016-17 Total Revised Appropriation | \$5,627,443 | 0.0 | \$2,802,571 | \$0 | \$0 | \$2,824,872 |
| FY 2017-18 Base Request | \$5,726,487 | 0.0 | \$2,852,093 | \$0 | \$0 | \$2,874,394 |
| FY 2017-18 Governor's Budget Request | \$5,726,487 | 0.0 | \$2,863,244 | \$0 | \$0 | \$2,863,243 |
| FY 2017-18 Governor's Revised Request | \$5,726,487 | 0.0 | \$2,863,244 | \$0 | \$0 | \$2,863,243 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | | |
|---|---------------------|------------|--------------------|------------|----------------|--------------------|--|
| | | | | | Funds | Federal Funds | |
| 07. Department of Human Services | | | | | | | |
| Medicaid-Funded Programs, (D) Division of | | | | | | | |
| Child Welfare - Medicaid Funding | | | | | | | |
| Administration | | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$142,640 | 0.0 | \$71,320 | \$0 | \$0 | \$71,320 | |
| FY 2016-17 Initial Appropriation | \$142,640 | 0.0 | \$71,320 | \$0 | \$0 | \$71,320 | |
| FY 2016-17 Revised Appropriation Request | \$142,640 | 0.0 | \$71,320 | \$0 | \$0 | \$71,320 | |
| FY 2016-17 Initial Appropriation | \$142,640 | 0.0 | \$71,320 | \$0 | \$0 | \$71,320 | |
| TA-29 DHS Salary Survey Allocation | \$368 | 0.0 | \$184 | \$0 | \$0 | \$184 | |
| FY 2017-18 Base Request | \$143,008 | 0.0 | \$71,504 | \$0 | \$0 | \$71,504 | |
| FY 2017-18 Governor's Budget Request | \$143,008 | 0.0 | \$71,504 | \$0 | \$0 | \$71,504 | |
| FY 2017-18 Governor's Revised Request | \$143,008 | 0.0 | \$71,504 | \$0 | \$0 | \$71,504 | |
| Child Welfare Services | | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$15,197,702 | 0.0 | \$7,568,456 | \$0 | \$0 | \$7,629,246 | |
| FY 2016-17 Initial Appropriation | \$15,197,702 | 0.0 | \$7,568,456 | \$0 | \$0 | \$7,629,246 | |
| FY 2016-17 Revised Appropriation Request | \$15,197,702 | 0.0 | \$7,568,456 | \$0 | \$0 | \$7,629,246 | |
| FY 2016-17 Initial Appropriation | \$15,197,702 | 0.0 | \$7,568,456 | \$0 | \$0 | \$7,629,246 | |
| FY 2017-18 Base Request | \$15,197,702 | 0.0 | \$7,568,456 | \$0 | \$0 | \$7,629,246 | |
| R-14 FMAP | \$0 | 0.0 | \$30,395 | \$0 | \$0 | (\$30,395) | |
| FY 2017-18 Governor's Budget Request | \$15,197,702 | 0.0 | \$7,598,851 | \$0 | \$0 | \$7,598,851 | |
| FY 2017-18 Governor's Revised Request | \$15,197,702 | 0.0 | \$7,598,851 | \$0 | \$0 | \$7,598,851 | |
| 07. Department of Human Services Medicaid-Funded Programs, (D) Division of Child Welfare - Medicaid Funding Subtotal | | | | | | | |
| FY 2016-17 Initial Appropriation | \$15,340,342 | 0.0 | \$7,639,776 | \$0 | \$0 | \$7,700,566 | |
| FY 2016-17 Total Revised Appropriation | \$15,340,342 | 0.0 | \$7,639,776 | \$0 | \$0 | \$7,700,566 | |
| FY 2017-18 Base Request | \$15,340,710 | 0.0 | \$7,639,960 | \$0 | \$0 | \$7,700,750 | |
| FY 2017-18 Governor's Budget Request | \$15,340,710 | 0.0 | \$7,670,355 | \$0 | \$0 | \$7,670,355 | |
| FY 2017-18 Governor's Revised Request | \$15,340,710 | 0.0 | \$7,670,355 | \$0 | \$0 | \$7,670,355 | |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|---|--------------------|------------|--------------------|------------|-------------------------|--------------------|
| 07. Department of Human Services Medicaid-Funded Programs, (E) Office of Early Childhood - Medicaid Funding | | | | | | |
| Div of Comm. and Family Support, Early Intervention Services | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| FY 2016-17 Initial Appropriation | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| FY 2016-17 Revised Appropriation Request | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| FY 2016-17 Initial Appropriation | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| FY 2017-18 Base Request | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| R-14 FMAP | \$0 | 0.0 | \$13,758 | \$0 | \$0 | (\$13,758) |
| FY 2017-18 Governor's Budget Request | \$6,563,353 | 0.0 | \$3,282,308 | \$0 | \$0 | \$3,281,045 |
| FY 2017-18 Governor's Revised Request | \$6,563,353 | 0.0 | \$3,282,308 | \$0 | \$0 | \$3,281,045 |
| 07. Department of Human Services Medicaid-Funded Programs, (E) Office of Early Childhood - Medicaid Funding Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| FY 2016-17 Total Revised Appropriation | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| FY 2017-18 Base Request | \$6,563,353 | 0.0 | \$3,268,550 | \$0 | \$0 | \$3,294,803 |
| FY 2017-18 Governor's Budget Request | \$6,563,353 | 0.0 | \$3,282,308 | \$0 | \$0 | \$3,281,045 |
| FY 2017-18 Governor's Revised Request | \$6,563,353 | 0.0 | \$3,282,308 | \$0 | \$0 | \$3,281,045 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|--|-----------------|------------|--------------|------------|-------------------------|-----------------|
| 07. Department of Human Services Medicaid-Funded Programs, (F) Office of Self Sufficiency - Medicaid Funding | | | | | | |
| Systematic Alien Verification For Eligibility | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2016-17 Initial Appropriation | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2016-17 Revised Appropriation Request | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2016-17 Initial Appropriation | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2017-18 Base Request | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2017-18 Governor's Budget Request | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2017-18 Governor's Revised Request | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| 07. Department of Human Services Medicaid-Funded Programs, (F) Office of Self Sufficiency - Medicaid Funding Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2016-17 Total Revised Appropriation | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2017-18 Base Request | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2017-18 Governor's Budget Request | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |
| FY 2017-18 Governor's Revised Request | \$25,799 | 0.0 | \$0 | \$0 | \$0 | \$25,799 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|------------------|------------|----------------|------------------|
| | | | | | Funds | Federal Funds |
| 07. Department of Human Services | | | | | | |
| Medicaid-Funded Programs, (G) Behavioral Health Services - Medicaid Funding | | | | | | |
| Community Behavioral Health Administration | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$416,056 | 0.0 | \$208,028 | \$0 | \$0 | \$208,028 |
| FY 2016-17 Initial Appropriation | \$416,056 | 0.0 | \$208,028 | \$0 | \$0 | \$208,028 |
| FY 2016-17 Revised Appropriation Request | \$416,056 | 0.0 | \$208,028 | \$0 | \$0 | \$208,028 |
| FY 2016-17 Initial Appropriation | \$416,056 | 0.0 | \$208,028 | \$0 | \$0 | \$208,028 |
| TA-29 DHS Salary Survey Allocation | \$2,296 | 0.0 | \$1,148 | \$0 | \$0 | \$1,148 |
| FY 2017-18 Base Request | \$418,352 | 0.0 | \$209,176 | \$0 | \$0 | \$209,176 |
| FY 2017-18 Governor's Budget Request | \$418,352 | 0.0 | \$209,176 | \$0 | \$0 | \$209,176 |
| FY 2017-18 Governor's Revised Request | \$418,352 | 0.0 | \$209,176 | \$0 | \$0 | \$209,176 |
| Mental Health Treatment Services for Youth (H.B. 99-1116) | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$123,624 | 0.0 | \$61,565 | \$0 | \$0 | \$62,059 |
| FY 2016-17 Initial Appropriation | \$123,624 | 0.0 | \$61,565 | \$0 | \$0 | \$62,059 |
| FY 2016-17 Revised Appropriation Request | \$123,624 | 0.0 | \$61,565 | \$0 | \$0 | \$62,059 |
| FY 2016-17 Initial Appropriation | \$123,624 | 0.0 | \$61,565 | \$0 | \$0 | \$62,059 |
| FY 2017-18 Base Request | \$123,624 | 0.0 | \$61,565 | \$0 | \$0 | \$62,059 |
| R-14 FMAP | \$0 | 0.0 | \$247 | \$0 | \$0 | (\$247) |
| FY 2017-18 Governor's Budget Request | \$123,624 | 0.0 | \$61,812 | \$0 | \$0 | \$61,812 |
| FY 2017-18 Governor's Revised Request | \$123,624 | 0.0 | \$61,812 | \$0 | \$0 | \$61,812 |
| High Risk Pregnant Women Program | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,600,000 | 0.0 | \$796,800 | \$0 | \$0 | \$803,200 |
| FY 2016-17 Initial Appropriation | \$1,600,000 | 0.0 | \$796,800 | \$0 | \$0 | \$803,200 |
| FY 2016-17 Revised Appropriation Request | \$1,600,000 | 0.0 | \$796,800 | \$0 | \$0 | \$803,200 |
| FY 2016-17 Initial Appropriation | \$1,600,000 | 0.0 | \$796,800 | \$0 | \$0 | \$803,200 |
| FY 2017-18 Base Request | \$1,600,000 | 0.0 | \$796,800 | \$0 | \$0 | \$803,200 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|--------------------|------------|----------------|--------------------|
| | | | | | Funds | Federal Funds |
| R-14 FMAP | \$0 | 0.0 | \$3,200 | \$0 | \$0 | (\$3,200) |
| FY 2017-18 Governor's Budget Request | \$1,600,000 | 0.0 | \$800,000 | \$0 | \$0 | \$800,000 |
| FY 2017-18 Governor's Revised Request | \$1,600,000 | 0.0 | \$800,000 | \$0 | \$0 | \$800,000 |
| Mental Health Institutes | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$6,693,980 | 0.0 | \$3,333,602 | \$0 | \$0 | \$3,360,378 |
| FY 2016-17 Initial Appropriation | \$6,693,980 | 0.0 | \$3,333,602 | \$0 | \$0 | \$3,360,378 |
| NPS-02 DHS Mental Health Institutes | \$138,192 | 0.0 | \$68,820 | \$0 | \$0 | \$69,372 |
| FY 2016-17 Revised Appropriation Request | \$6,832,172 | 0.0 | \$3,402,422 | \$0 | \$0 | \$3,429,750 |
| FY 2016-17 Initial Appropriation | \$6,693,980 | 0.0 | \$3,333,602 | \$0 | \$0 | \$3,360,378 |
| FY 2017-18 Base Request | \$6,693,980 | 0.0 | \$3,333,602 | \$0 | \$0 | \$3,360,378 |
| R-14 FMAP | \$0 | 0.0 | \$13,388 | \$0 | \$0 | (\$13,388) |
| FY 2017-18 Governor's Budget Request | \$6,693,980 | 0.0 | \$3,346,990 | \$0 | \$0 | \$3,346,990 |
| NPBA-02 DHS Mental Health Institutes | \$138,192 | 0.0 | \$69,096 | \$0 | \$0 | \$69,096 |
| FY 2017-18 Governor's Revised Request | \$6,832,172 | 0.0 | \$3,416,086 | \$0 | \$0 | \$3,416,086 |
| 07. Department of Human Services Medicaid-Funded Programs, (G) Behavioral Health Services - Medicaid Funding Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$8,833,660 | 0.0 | \$4,399,995 | \$0 | \$0 | \$4,433,665 |
| FY 2016-17 Total Revised Appropriation | \$8,971,852 | 0.0 | \$4,468,815 | \$0 | \$0 | \$4,503,037 |
| FY 2017-18 Base Request | \$8,835,956 | 0.0 | \$4,401,143 | \$0 | \$0 | \$4,434,813 |
| FY 2017-18 Governor's Budget Request | \$8,835,956 | 0.0 | \$4,417,978 | \$0 | \$0 | \$4,417,978 |
| FY 2017-18 Governor's Revised Request | \$8,974,148 | 0.0 | \$4,487,074 | \$0 | \$0 | \$4,487,074 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|---|---------------------|------------|---------------------|--------------------|----------------|---------------------|
| | | | | | Funds | Federal Funds |
| 07. Department of Human Services | | | | | | |
| Medicaid-Funded Programs, (H) Services | | | | | | |
| for People with Disabilities - Medicaid | | | | | | |
| Funding | | | | | | |
| Regional Centers | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$53,235,691 | 0.0 | \$24,645,233 | \$1,866,142 | \$0 | \$26,724,316 |
| FY 2016-17 Initial Appropriation | \$53,235,691 | 0.0 | \$24,645,233 | \$1,866,142 | \$0 | \$26,724,316 |
| FY 2016-17 Revised Appropriation Request | \$53,235,691 | 0.0 | \$24,645,233 | \$1,866,142 | \$0 | \$26,724,316 |
| FY 2016-17 Initial Appropriation | \$53,235,691 | 0.0 | \$24,645,233 | \$1,866,142 | \$0 | \$26,724,316 |
| TA-28 DHS Personal Needs Allowance | \$2,001 | 0.0 | \$1,001 | \$0 | \$0 | \$1,000 |
| TA-29 DHS Salary Survey Allocation | \$82,105 | 0.0 | \$41,054 | \$0 | \$0 | \$41,051 |
| FY 2017-18 Base Request | \$53,319,797 | 0.0 | \$24,687,288 | \$1,866,142 | \$0 | \$26,766,367 |
| R-14 FMAP | \$0 | 0.0 | \$106,471 | \$0 | \$0 | (\$106,471) |
| FY 2017-18 Governor's Budget Request | \$53,319,797 | 0.0 | \$24,793,759 | \$1,866,142 | \$0 | \$26,659,896 |
| BA-09 Pueblo Regional Center Corrective Action Plan | \$100,000 | 0.0 | \$50,000 | \$0 | \$0 | \$50,000 |
| FY 2017-18 Governor's Revised Request | \$53,419,797 | 0.0 | \$24,843,759 | \$1,866,142 | \$0 | \$26,709,896 |
| Regional Center Depreciation and Annual Adjustments | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,102,033 | 0.0 | \$542,310 | \$0 | \$0 | \$559,723 |
| FY 2016-17 Initial Appropriation | \$1,102,033 | 0.0 | \$542,310 | \$0 | \$0 | \$559,723 |
| FY 2016-17 Revised Appropriation Request | \$1,102,033 | 0.0 | \$542,310 | \$0 | \$0 | \$559,723 |
| FY 2016-17 Initial Appropriation | \$1,102,033 | 0.0 | \$542,310 | \$0 | \$0 | \$559,723 |
| FY 2017-18 Base Request | \$1,102,033 | 0.0 | \$542,310 | \$0 | \$0 | \$559,723 |
| R-14 FMAP | \$0 | 0.0 | \$8,707 | \$0 | \$0 | (\$8,707) |
| FY 2017-18 Governor's Budget Request | \$1,102,033 | 0.0 | \$551,017 | \$0 | \$0 | \$551,016 |
| FY 2017-18 Governor's Revised Request | \$1,102,033 | 0.0 | \$551,017 | \$0 | \$0 | \$551,016 |
| 07. Department of Human Services Medicaid-Funded Programs, (H) Services for People with Disabilities - Medicaid Funding Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$54,337,724 | 0.0 | \$25,187,543 | \$1,866,142 | \$0 | \$27,284,039 |
| FY 2016-17 Total Revised Appropriation | \$54,337,724 | 0.0 | \$25,187,543 | \$1,866,142 | \$0 | \$27,284,039 |
| FY 2017-18 Base Request | \$54,421,830 | 0.0 | \$25,229,598 | \$1,866,142 | \$0 | \$27,326,090 |
| FY 2017-18 Governor's Budget Request | \$54,421,830 | 0.0 | \$25,344,776 | \$1,866,142 | \$0 | \$27,210,912 |
| FY 2017-18 Governor's Revised Request | \$54,521,830 | 0.0 | \$25,394,776 | \$1,866,142 | \$0 | \$27,260,912 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|--|--------------------|------------|------------------|------------|-------------------------|------------------|
| 07. Department of Human Services | | | | | | |
| Medicaid-Funded Programs, (I) Adult | | | | | | |
| Assistance and Services for Elderly - | | | | | | |
| Medicaid | | | | | | |
| Adult Assst. Medicaid Programs - Community | | | | | | |
| Srvcs for Elderly | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| FY 2016-17 Initial Appropriation | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| FY 2016-17 Revised Appropriation Request | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| FY 2016-17 Initial Appropriation | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| FY 2017-18 Base Request | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| NPR-04 DHS ADRC Claiming | \$1,000,000 | 0.0 | \$500,000 | \$0 | \$0 | \$500,000 |
| FY 2017-18 Governor's Budget Request | \$1,001,800 | 0.0 | \$500,900 | \$0 | \$0 | \$500,900 |
| FY 2017-18 Governor's Revised Request | \$1,001,800 | 0.0 | \$500,900 | \$0 | \$0 | \$500,900 |
| 07. Department of Human Services Medicaid-Funded | | | | | | |
| Programs, (I) Adult Assistance and Services for Elderly - | | | | | | |
| Medicaid Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| FY 2016-17 Total Revised Appropriation | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| FY 2017-18 Base Request | \$1,800 | 0.0 | \$900 | \$0 | \$0 | \$900 |
| FY 2017-18 Governor's Budget Request | \$1,001,800 | 0.0 | \$500,900 | \$0 | \$0 | \$500,900 |
| FY 2017-18 Governor's Revised Request | \$1,001,800 | 0.0 | \$500,900 | \$0 | \$0 | \$500,900 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|--------------------|------------|------------------|------------|----------------|------------------|
| | | | | | Funds | Federal Funds |
| 07. Department of Human Services Medicaid-Funded Programs, (J) Division of Youth Corrections - Medicaid Funding | | | | | | |
| Division Of Youth Corrections - Medicaid Funding | | | | | | |
| HB 16-1405 FY 2016-17 General Appropriation Act | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| FY 2016-17 Initial Appropriation | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| FY 2016-17 Revised Appropriation Request | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| | | | | | | |
| FY 2016-17 Initial Appropriation | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| FY 2017-18 Base Request | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| R-14 FMAP | \$0 | 0.0 | \$2,905 | \$0 | \$0 | (\$2,905) |
| FY 2017-18 Governor's Budget Request | \$1,452,654 | 0.0 | \$726,327 | \$0 | \$0 | \$726,327 |
| FY 2017-18 Governor's Revised Request | \$1,452,654 | 0.0 | \$726,327 | \$0 | \$0 | \$726,327 |

| | | | | | | |
|---|-------------|-----|-----------|-----|-----|-----------|
| 07. Department of Human Services Medicaid-Funded Programs, (J) Division of Youth Corrections - Medicaid Funding Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| FY 2016-17 Total Revised Appropriation | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| FY 2017-18 Base Request | \$1,452,654 | 0.0 | \$723,422 | \$0 | \$0 | \$729,232 |
| FY 2017-18 Governor's Budget Request | \$1,452,654 | 0.0 | \$726,327 | \$0 | \$0 | \$726,327 |
| FY 2017-18 Governor's Revised Request | \$1,452,654 | 0.0 | \$726,327 | \$0 | \$0 | \$726,327 |

**07. Department of Human Services
Medicaid-Funded Programs, (K) Other
Fed Medicaid Indirect Cost Reimbursement For
CDHS Programs**

| | | | | | | |
|---|------------------|------------|------------|------------|------------|------------------|
| HB 16-1405 FY 2016-17 General Appropriation Act | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2016-17 Initial Appropriation | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2016-17 Revised Appropriation Request | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |

| Long Bill Line Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated | |
|--|-------------|-----|--------------|------------|----------------|---------------|
| | | | | | Funds | Federal Funds |
| FY 2016-17 Initial Appropriation | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2017-18 Base Request | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2017-18 Governor's Budget Request | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2017-18 Governor's Revised Request | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| 07. Department of Human Services Medicaid-Funded Programs, (K) Other Subtotal | | | | | | |
| FY 2016-17 Initial Appropriation | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2016-17 Total Revised Appropriation | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2017-18 Base Request | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2017-18 Governor's Budget Request | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |
| FY 2017-18 Governor's Revised Request | \$500,000 | 0.0 | \$0 | \$0 | \$0 | \$500,000 |

**FY 2016-17 SUPPLEMENTAL REQUESTS - HEALTH CARE
POLICY AND FINANCING**

Schedule 11

| Request Date | Request Type | Interagency Review | Requires Legislation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|------------------------------|---|----------------------------------|----------------------|----------------|-----|---------------|-------------|----------------------|----------------|
| Prioritized Requests | | | | | | | | | |
| January 2 | S-01 Medical Services Premiums | None | No | \$141,694,902 | 0.0 | \$32,217,993 | \$1,650,193 | \$3,861,816 | \$103,964,900 |
| January 2 | S-02 Behavioral Health | None | No | (\$56,448,298) | 0.0 | (\$6,379,746) | \$569,523 | \$0 | (\$50,638,075) |
| January 2 | S-03 CHP+ | None | No | \$15,610,893 | 0.0 | \$1,515 | \$1,914,824 | \$0 | \$13,694,554 |
| January 2 | S-04 Medicare Modernization Act | None | No | \$1,369,323 | 0.0 | \$1,369,323 | \$0 | \$0 | \$0 |
| January 2 | S-05 Office of Community Living | None | No | (\$18,626,814) | 0.0 | (\$8,707,629) | \$0 | \$0 | (\$9,919,185) |
| January 2 | S-06 Delivery System and Payment Reform | None | No | (\$15,440,295) | 0.0 | (\$7,720,148) | \$0 | \$0 | (\$7,720,147) |
| January 2 | S-07 Oversight of State Resources | None | No | \$200,000 | 0.0 | \$50,000 | \$50,000 | \$0 | \$100,000 |
| January 2 | S-08 MMIS Operations | Office of Information Technology | No | (\$1,495,480) | 0.0 | (\$32,549) | (\$537,805) | (\$269,394) | (\$655,732) |
| January 2 | S-10 Regional Center Cost Reporting | None | No | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 |
| January 2 | S-11 HB 15-1368 Cross-System Response Pilot Spending | None | No | (\$1,408,835) | 0.0 | \$0 | (\$563,835) | (\$845,000) | \$0 |
| January 2 | S-12 SB 16-199 PACE Rollforward | None | No | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| January 2 | S-13 Medicaid Funding for Connect for Health Colorado | None | No | \$5,144,208 | 0.0 | \$1,790,457 | \$0 | \$0 | \$3,353,751 |
| January 2 | S-14 Public School Health Services Funding Adjustment | None | No | \$9,393,330 | 0.0 | \$0 | \$4,754,691 | \$0 | \$4,638,639 |
| January 2 | S-15 FY 2015-16 Overexpenditure | None | No | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| Prioritized Request Subtotal | | | | \$80,067,934 | 0.0 | \$12,626,716 | \$7,837,591 | \$2,747,422 | \$56,856,205 |

| Request Date | Request Type | Interagency Review | Requires Legislation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|----------------------------------|-------------------------------------|--|----------------------|---------------|-----|---------------|-------------|----------------------|---------------|
| Non-Prioritized Requests | | | | | | | | | |
| January 2 | NPS-01 OIT CBMS | Office of Information Technology | No | (\$1,242,884) | 0.0 | (\$2,123,226) | (\$827,880) | (\$35,666) | \$1,743,888 |
| January 2 | NPS-02 DHS Mental Health Institutes | Other | No | \$138,192 | 0.0 | \$68,820 | \$0 | \$0 | \$69,372 |
| January 2 | NPS-03 DHS DPA Fleet | Department of Personnel and Administration | No | (\$29,500) | 0.0 | (\$14,750) | \$0 | \$0 | (\$14,750) |
| January 2 | NPS-04 Property Fund Supplemental | Department of Personnel and Administration | No | \$840 | 0.0 | \$420 | \$0 | \$0 | \$420 |
| January 2 | NPS-06 DHS Property Fund | Other | No | \$41,631 | 0.0 | \$20,816 | \$0 | \$0 | \$20,815 |
| Non-Prioritized Request Subtotal | | | | (\$1,091,721) | 0.0 | (\$2,047,920) | (\$827,880) | (\$35,666) | \$1,819,745 |

| | | | | | | |
|--|---------------------|------------|---------------------|--------------------|--------------------|---------------------|
| Total Department of Health Care Policy and Financing FY 2016-17 Supplemental Requests | \$78,976,213 | 0.0 | \$10,578,796 | \$7,009,711 | \$2,711,756 | \$58,675,950 |
|--|---------------------|------------|---------------------|--------------------|--------------------|---------------------|

FY 2017-18 BUDGET AMENDMENT REQUESTS - HEALTH CARE POLICY AND FINANCING

Schedule 12

| Request Date | Request Type | Interagency Review | Requires Legislation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds |
|--|--|--|----------------------|---------------------|------------|--------------------|--------------------|----------------------|--------------------|
| Prioritized Requests | | | | | | | | | |
| January 2 | BA-09 Pueblo Regional Center Corrective Action Plan | None | No | \$543,379 | 1.8 | \$271,690 | \$0 | \$0 | \$271,689 |
| January 2 | BA-10 Regional Center Cost Reporting | None | No | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 |
| January 2 | BA-11 HB 15-1368 Cross-System Response Pilot Spending | None | No | \$306,726 | 0.0 | \$0 | \$1,151,726 | (\$845,000) | \$0 |
| January 2 | BA-13 Medicaid Funding for Connect for Health Colorado | None | No | \$5,144,208 | 0.0 | \$1,790,457 | \$0 | \$0 | \$3,353,751 |
| January 2 | BA-14 Public School Health Services Funding Adjustment | None | No | \$8,484,767 | 0.0 | \$0 | \$4,309,645 | \$0 | \$4,175,122 |
| Prioritized Request Subtotal | | | | \$14,554,080 | 1.8 | \$2,099,647 | \$5,461,371 | (\$845,000) | \$7,838,062 |
| Non-Prioritized Requests | | | | | | | | | |
| January 2 | NPBA-01 OIT CBMS | Office of Information Technology | No | (\$1,169,362) | 0.0 | (\$3,053,438) | (\$70,370) | (\$38,015) | \$1,992,461 |
| January 2 | NPBA-02 DHS Mental Health Institutes | Other | No | \$138,192 | 0.0 | \$69,096 | \$0 | \$0 | \$69,096 |
| January 2 | NPBA-03 December Amendment 35 Forecast Adjustment | None | No | \$0 | 0.0 | \$0 | \$0 | \$0 | \$0 |
| January 2 | NPBA-04 HLD Adjustment | Department of Personnel and Administration | No | (\$36,332) | 0.0 | (\$10,730) | (\$5,646) | (\$780) | (\$19,176) |
| January 2 | NPBA-05 Property Fund Supplemental | Department of Personnel and Administration | No | \$227 | 0.0 | \$114 | \$0 | \$0 | \$113 |
| January 2 | NPBA-06 DHS HLD | Other | No | (\$37,316) | 0.0 | (\$18,658) | \$0 | \$0 | (\$18,658) |
| January 2 | NPBA-08 DHS Property Fund | Other | No | (\$4,098) | 0.0 | (\$2,049) | \$0 | \$0 | (\$2,049) |
| Non-Prioritized Request Subtotal | | | | (\$1,108,689) | 0.0 | (\$3,015,665) | (\$76,016) | (\$38,795) | \$2,021,787 |
| Total Department of Health Care Policy and Financing FY 2017-18 Supplemental Requests | | | | \$13,445,391 | 1.8 | (\$916,018) | \$5,385,355 | (\$883,795) | \$9,859,849 |


Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

BA-09 Pueblo Regional Center Corrective Action Plan

Dept. Approval By: Josh Block  1/5/17 Supplemental FY 2016-17

OSPB Approval By: Grant M. Smith 12/29/16 X
Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|-------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$70,913,628 | \$0 | \$72,198,083 | \$543,379 | \$458,992 |
| | FTE | 35.5 | 0.0 | 35.5 | 1.8 | 2.0 |
| Total of All Line Items Impacted by Change Request | GF | \$30,586,322 | \$0 | \$31,321,948 | \$271,690 | \$228,496 |
| | CF | \$4,160,064 | \$0 | \$3,904,590 | \$0 | \$0 |
| | RF | \$1,023,308 | \$0 | \$1,028,186 | \$0 | \$0 |
| | FF | \$35,143,932 | \$0 | \$35,941,339 | \$271,689 | \$228,496 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|-------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$3,434,070 | \$0 | \$3,673,458 | \$15,854 | \$15,854 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (A) General Administration - Health, Life, and Dental | GF | \$1,230,952 | \$0 | \$1,316,506 | \$7,927 | \$7,927 |
| | CF | \$337,577 | \$0 | \$349,778 | \$0 | \$0 |
| | RF | \$104,755 | \$0 | \$104,835 | \$0 | \$0 |
| | FF | \$1,760,786 | \$0 | \$1,902,539 | \$7,927 | \$7,927 |

| | | | | | | |
|---|-------|----------|-----|----------|-------|-------|
| | Total | \$55,072 | \$0 | \$57,991 | \$234 | \$254 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (A) General Administration - Short-term Disability | GF | \$20,569 | \$0 | \$21,560 | \$117 | \$127 |
| | CF | \$4,588 | \$0 | \$4,786 | \$0 | \$0 |
| | RF | \$1,393 | \$0 | \$1,365 | \$0 | \$0 |
| | FF | \$28,522 | \$0 | \$30,270 | \$117 | \$127 |

| | | | | | | |
|--|--------------|--------------------|------------|--------------------|----------------|----------------|
| | Total | \$1,434,489 | \$0 | \$1,613,687 | \$6,144 | \$6,702 |
| 01. Executive Director's Office, (A) General Administration - Amortization | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Equalization | GF | \$535,695 | \$0 | \$600,009 | \$3,072 | \$3,351 |
| Disbursement | CF | \$119,586 | \$0 | \$133,459 | \$0 | \$0 |
| | RF | \$36,269 | \$0 | \$37,816 | \$0 | \$0 |
| | FF | \$742,939 | \$0 | \$842,403 | \$3,072 | \$3,351 |

| | | | | | | |
|---|--------------|--------------------|------------|--------------------|----------------|----------------|
| | Total | \$1,419,546 | \$0 | \$1,613,662 | \$6,144 | \$6,702 |
| 01. Executive Director's Office, (A) General Administration - Supplemental Amortization | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Equalization | GF | \$530,115 | \$0 | \$600,009 | \$3,072 | \$3,351 |
| Disbursement | CF | \$118,340 | \$0 | \$133,459 | \$0 | \$0 |
| | RF | \$35,891 | \$0 | \$37,791 | \$0 | \$0 |
| | FF | \$735,200 | \$0 | \$842,403 | \$3,072 | \$3,351 |

| | | | | | | |
|--|--------------|--------------------|------------|--------------------|------------------|------------------|
| | Total | \$7,200,237 | \$0 | \$7,755,477 | \$267,884 | \$267,884 |
| 01. Executive Director's Office, (A) General Administration - General Professional Services and Special Projects | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$2,047,261 | \$0 | \$2,512,381 | \$133,932 | \$133,932 |
| | CF | \$1,527,500 | \$0 | \$1,227,500 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$3,625,476 | \$0 | \$4,015,596 | \$133,932 | \$133,932 |

| | | | | | | |
|---|--------------|--------------------|------------|--------------------|------------------|------------------|
| | Total | \$3,063,882 | \$0 | \$3,096,155 | \$137,113 | \$149,590 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Administrative Costs - Personal Services | FTE | 35.5 | 0.0 | 35.5 | 1.8 | 2.0 |
| | GF | \$1,431,598 | \$0 | \$1,439,296 | \$68,557 | \$74,795 |
| | CF | \$182,080 | \$0 | \$187,556 | \$0 | \$0 |
| | RF | \$75,000 | \$0 | \$76,579 | \$0 | \$0 |
| | FF | \$1,375,304 | \$0 | \$1,392,724 | \$68,556 | \$74,795 |

| | | | | | | |
|--|--------------|--------------------|------------|--------------------|-----------------|-----------------|
| | Total | \$1,070,539 | \$0 | \$1,065,836 | \$10,026 | \$10,026 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Administrative Costs - Operating Expenses | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$144,899 | \$0 | \$144,899 | \$5,013 | \$5,013 |
| | CF | \$4,251 | \$0 | \$1,900 | \$0 | \$0 |
| | RF | \$770,000 | \$0 | \$770,000 | \$0 | \$0 |
| | FF | \$151,389 | \$0 | \$149,037 | \$5,013 | \$5,013 |

| | | | | | | |
|---|--------------|---------------------|------------|---------------------|------------------|------------|
| | Total | \$53,235,891 | \$0 | \$53,319,797 | \$100,000 | \$0 |
| 07. Department of Human Services | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Medicaid-Funded Programs, (H) Services for People with Disabilities - Medicaid Funding - Regional Centers | GF | \$24,845,233 | \$0 | \$24,687,288 | \$50,000 | \$0 |
| | CF | \$1,866,142 | \$0 | \$1,866,142 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$26,724,316 | \$0 | \$26,766,367 | \$50,000 | \$0 |

| | | | | | |
|--|--|--------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Department of Human Services | | | | | |



Cost and FTE

- The Department requests \$543,379 total funds including \$271,690 General Fund for contracted services and 1.8 FTE in FY 2017-18 and \$456,992 total funds including \$228,496 General Fund for contracted services and 2.0 FTE in FY 2018-19 ongoing.

Current Program

- The Home and Community Based Services – Adult Comprehensive (HCBS-DD) Waiver provides services and supports to individuals with intellectual and developmental disabilities in order to allow them to continue to live in the community.
- Regional Centers provide 24-hour residential services, medical care, and behavioral services to adults who have complex and severe medical and behavioral needs, including adults on the HCBS-DD Waiver. Pueblo Regional Center (PRC) can serve up to 88 individuals with developmental disabilities until individuals are able and ready to transition to a less restrictive setting in the community.
- The services authorized by the waiver affords individuals with intellectual and developmental disabilities the opportunity to live in their own home and community rather than in institutions such as Skilled Nursing Facilities or Intermediate Care Facilities.

Problem or Opportunity

- The Centers for Medicare and Medicaid Services (CMS) issued a Corrective Action to the Department on August 17, 2016 and requires that the Department come into compliance with the Corrective Action Plan (CAP) within a twelve month period. The CAP includes the Department's responses to 15 objectives that were developed after CMS visited PRC. The 15 objectives include topics such as response to critical events, oversight responsibility, safeguards concerning restraints and restrictive interventions, and waiver administration and operations.
- The goal of the CAP is to compare the observed operation of the waiver to how the waiver should be operating, based on statutory and regulatory requirements.
- In order for the Department to come into compliance with the CAP, the Department must obtain funding, procure contractors, and have contractors in the field no later than August 16, 2017.
- The Department does not have the resources to procure the necessary contractors and come into compliance with the CAP under its current FY 2017-18 appropriation.

Consequences of Problem

- CMS has alerted the Department that they will impose a period of disallowance for Federal Financial Participation (FFP) from November 2014 through November 2015. Without successful completion of the CAP, the Department risks additional Medicaid funding disallowances for the HCBS-DD waiver and risks losing federal Medicaid matching funds in 2019 when the waiver renews.

Proposed Solution

- The Department requests funding to hire four contractors to assist with the implementation of the CAP, including a state-wide review of the HCBS-DD waiver, an independent monitor of the PRC, an internal review and data collection contractor, and a management support contractor for PRC.
- The Department also requests funding for two permanent FTE to oversee the four contractors, the execution of the CAP, and the continued monitoring of waiver compliance at Regional Centers.



COLORADO
 Department of Health Care
 Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
 Governor

Susan E. Birch
 Executive Director

Department Priority: BA-9

Request Detail: Pueblo Regional Center Corrective Action Plan

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| Pueblo Regional Center Corrective Action Plan | \$0 | \$0 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|---|-------------|--------------|
| Pueblo Regional Center Corrective Action Plan | \$543,379 | \$271,690 |

Problem or Opportunity:

The Centers for Medicare & Medicaid Services’ (CMS) issued a Corrective Action to the Department on August 17, 2016 based on a CMS site visit to Pueblo Regional Center (PRC) in April 2015. The Corrective Action requires the Department to conduct a state-wide review of the Department’s oversight of the Home and Community Based Settings – Adult Comprehensive Waiver (HCBS-DD), to procure an independent monitor responsible for ensuring the PRC is taking the necessary actions to protect the health and welfare of individuals residing at the center and contract with a management support contractor to support staff at PRC. The Department submitted a Corrective Action Plan (CAP) to CMS on September 26, 2016 and is requesting funding to allow for the completion of the tasks required by CMS and outlined in the CAP. Under the current appropriation, the Department has funding available for some of the required actions but not all of the actions necessary to successfully complete the CAP.

The Corrective Action issued by CMS outlined the ways in which waiver operation was out of compliance and failed to ensure the health, safety, and welfare of members receiving services at the facility. CMS cited deficiencies in the Department's compliance with waiver requirements for critical incidents including reporting, monitoring and investigation. Additionally CMS cited how the Department failed to identify and correct the administrative deficiencies of Colorado Bluesky, the Community Centered Board in the region. These actions are meant to improve business processes and bring the Department into compliance with the rules and regulations of the HCBS-DD waiver as well as ensure the safety and welfare of members receiving services at PRC. If the Department does not successfully execute the CAP, CMS could extend the period of disallowance for Federal Financial Participation (FFP).

The Corrective Action from CMS outlined seven required elements to be included in the Department’s CAP. The Department has secured funding for some of the required elements and is requesting funding for the remaining required elements. In addition, some of the required tasks have been completed and some are in progress. The table below lists the required elements and status.

| Table 1 Required Elements of the Corrective Action and Each Element’s Status | |
|---|---|
| Required Element | Status |
| 1. Address the findings specific to PRC and the systemic issues of non-compliance with the waiver | Complete; no additional funds needed |
| 2. Procure an independent monitor of PRC that will report to HCPF and CMS that PRC is taking the necessary actions to protect the health and welfare of individuals residing at PRC and bring PRC into compliance with the approved waiver a. The state must secure PRC management support by utilizing independent consultation from an expert in providing services and supports to people with high needs | Independent monitor – FY 2016-17 funding absorbed within existing resources, requesting funding for FY 2017-18 and FY 2018-19 Management Support – FY 2016-17 funding could be absorbed within existing resources if CMS requires immediate action, requesting funding for FY 2017-18. |
| 3. Effectively separate Quality Assurance from PRC and CDHS to eliminate the risk of conflict of interest when an entity oversees itself. | Complete; no additional funds needed |
| 4. Provide complete incident and investigation reports to the applicable Human Rights Committee, case management agency and guardians(s). | Complete; no additional funds needed |
| 5. Create a PRC staffing plan which addresses staff turnover, staff working double shifts, staff supervision and training. | In progress; no additional funds needed |
| 6. Conduct a thorough review of the waiver statewide to determine if similar issues are occurring elsewhere and developing a plan to address and remediate any state findings prior to the renewal of the waiver. | Requesting funding |
| 7. Provide a plan to implement the Regional Center Task Force Report with milestones and timelines. | In progress; funding requested through the Department’s FY 2017-18 R-10 “Regional Center Task Force Recommendation Implementation” change request. |

CMS has alerted the Department that the current period of disallowance will be November 2014 through November 2015. However, CMS has not issued a formal disallowance to the Department and there are several opportunities for the Department to appeal or ask for reconsideration if and when a formal disallowance is issued. There is no way to predict the timeline of when the issuing might occur or exactly when the funds would need to be repaid. Therefore, the Department is not requesting funds at this time in anticipation of a formal disallowance. Instead, if and when a formal disallowance is issued, the Department will address the necessary funds through the budget process.

Proposed Solution:

The Department requests \$543,379 total funds including \$271,690 General Fund for contracted services and 1.8 FTE in FY 2017-18 and \$456,992 total funds including \$228,496 General Fund for contracted services and 2.0 FTE in FY 2018-19 and ongoing. The requested funding would be used to hire an independent contractor to complete a state-wide review of the Department's oversight of the HCBS-DD Waiver, an independent monitor of the PRC, an internal review and data collection contractor to support the independent monitor, a management support contractor, and two permanent FTE to oversee the state-wide review and monitoring of PRC.

The following description of work for the four contractors and two FTE was developed in line with the CAP submitted by the Department in September 2016 based off the findings, objectives, and compliance directions from CMS's "On-Site Review of Colorado Pueblo Regional Center" report. Since CMS is able to make comments or further requirements in response to the CAP, the work descriptions for the contractors must be flexible in order to accommodate any additional direction from CMS. This is the Department's estimate for the necessary resources to execute the CAP and ensure the health and safety of its most vulnerable population. Should CMS require additional work not included in this request, the Department would utilize the budget process to request necessary funding.

State-wide Review of Home and Community Based Services Adult Comprehensive Waiver (HCBS-DD)

The Department requests funding for a contractor to conduct a state-wide review of the HCBS-DD waiver that would focus on regulations, businesses processes, and compliance. The review would include analysis of the waiver's regulations and guidelines that the Department has committed to through the HCBS-DD waiver. Evaluations of the Department's performance would involve conceptual measures as well as concrete measures. The review and subsequent changes to the waiver must be completed prior to the July 1, 2019 renewal date for the HCBS-DD Waiver, per the compliance directions in CMS's "Onsite Review of Colorado Pueblo Regional Center" report.

As described in HB 15-1318: "Consolidate Intellectual and Developmental Disabilities Waivers" the Department is working toward a consolidated HCBS waivers for adults with intellectual and developmental disabilities. The Department assumes that the existing waivers, including the HCBS-DD waiver will continue through June 30, 2019. The required statewide review of the HCBS-DD waiver, as directed by CMS in its "Onsite Review of Colorado Pueblo Regional Center" report, has a narrow scope and is on an expedited timeline and therefore the work cannot be absorbed into waiver consolidation activities.

Activities the state-wide analysis of the HCBS-DD Waiver would need to accomplish include to:

- Review and compare the application of waiver regulations regarding participant safeguards.
- Perform a state-wide analysis to assess compliance with critical incident reporting, participant training and education, and review of and response to critical incidents or events.
- Conduct on-site visits, interviews, and desk reviews of Community Centered Boards (CCBs) and service provider agencies.
- Conduct interviews and desk reviews to evaluate Department's operation of the HCBS-DD waiver, Department oversight of Targeted Case Management (TCM) and Quality Improvement Strategy (QIS), and the oversight responsibilities of the Colorado Department of Public Health and Environment (CDPHE).
- Complete monthly status reports to the Department and compile a report identifying any and all gaps between the waiver requirements and practices.

Independent Monitor

The Department also seeks funding to procure an independent monitor for PRC, per CMS's direction. This independent monitor would be responsible for bringing PRC into compliance with HCBS-DD rules and procedures which include ensuring the health, safety, and welfare of its residents. The Department anticipates this work would begin in FY 2016-17 using current departmental resources. However, the Department does not have enough funding in the FY 2017-18 budget to absorb the work and requests those funds through this request.

Activities the independent monitor would need to accomplish include to:

- Direct and coordinate with the internal review and data collection contractor to complete a review of the Colorado Department of Human Services Pueblo Regional Center (CDHS-PRC) operations.
- Analyze and validate data provided by the internal review and data collection contractor to determine the efficacy of the CDHS-PRC implementation of the CAP.
- Identify and prioritize the existing and potential risks for non-compliance through a Failure Modes and Effects Analysis (FMEA).
- Identify the infrastructure, policies, and procedures that may not support best practices for assuring the health, safety, and welfare of individuals receiving services at CDHS-PRC.
- Develop a detailed Compliance Report which shall summarize the contractor's findings including areas where the monitor deems that implementation of the CAP is complete and sufficient.
 - Where implementation is either incomplete or insufficient, the Contractor shall make concrete recommendations for further implementation and mitigation activities

Internal Review and Data Collection Contractor

As part of the independent monitoring activities the Department requests funding to procure an internal review and data collection contractor to support the CMS required independent monitor of the PRC. This individual would gather information, conduct review, and provide analysis at the direction of the independent monitor. This contract would be primarily responsible for collecting data and information at PRC in order to provide information to the independent monitor.

Activities the internal review and data collection contractor would need to accomplish include to:

- Coordinate with the independent monitor to complete activities necessary to review the CDHS-PRC operations and determine compliance with the Medicaid HCBS waiver assurances regarding health, safety, and welfare.
- Under direction of the independent monitor, the contractor should conduct a review of the completeness and efficacy of the CDHS-PRC implementation of the CAP.
- The contractor shall conduct the reviews on-site, via desk audit, and from interviews of individuals, their families, guardians, advocates, case managers, and staff of the CDHS-PRC. These reviews would be subject to validation by the internal monitor.

Management Support

The Department is requesting a management support contractor for PRC to support the execution of a staff plan developed by CDHS that addresses staffing practices at PRC. Per the direction from CMS, this management support contractor will be an expert in providing services and supports to people with high needs, improving HCBS entities in crisis, addressing and decreasing critical incidents, and decreasing the use of physical restraints. The Department anticipates this work could begin in FY 2016-17 using current departmental resources if required to hire a contractor immediately by CMS. However, the Department does not have enough funding in the FY 2017-18 budget to absorb the work and requests those funds through this request.

FTE

In addition to the four contractors, the Department is requesting two permanent FTE to oversee the implementation of the CAP and continued compliance. In order to ensure successful implementation of the corrective actions, the Department believes it is important to have two staff members solely dedicated to this area. One position would be responsible for monitoring implementation of the CAP, overseeing actions of the PRC in regards to its own Plan of Corrections, reviewing incident and critical reports from the Regional Centers, and managing the independent monitor contract. This position's work is complementary to the critical incident reporting contractor funding requested in the Department's R-9 "Long Term Care Utilization Management" request in that the position would provide direct oversight of critical incidents at the PRC to ensure compliance with the HCBS-DD waiver requirements and the Department's commitment to CMS in the CAP.

The other requested FTE would be responsible for overseeing CAP actions associated with the state-wide review of the HCBS-DD waiver and would conduct on-site monitoring of the Grand Junction Regional Center (GJRC) in order to ensure the safety of members living and/or receiving services at the facility. The position would act as the contract manager for the state-wide review of the HCBS-DD waiver as part of the implementation of the CAP. Specifically, this position would identify the multiple complex cross system issues in order to develop a plan to align critical incident reporting to occurrence reporting.

Beyond managing their respective contracts, the requested FTE would complete daily reviews of incident and critical reports from the regional centers as well as monthly reports of monitoring, technical assistance, training, trend analysis, and follow up or remediation actions taken. The position would conduct monthly on-site monitoring of the regional centers, provide remote technical assistance to PRC and GJRC, conduct group home and day program visits, and ensure ongoing compliance with statutory and regulatory requirements of

the waiver. The positions would begin July 2017 and are requested to be permanent in order to ensure sufficient resources are dedicated to ongoing compliance in the regional centers.

Anticipated Outcomes:

The requested funding would allow the Department to garner the necessary resources to ensure successful completion of the CAP submitted to CMS. A successful completion means the Department's oversight processes ensure compliance with the rules and regulations outlined in the HCBS-DD waiver.

Completing assessments on the Department's oversight of PRC, GJRC and the HCBS-DD waiver would identify gaps in the Department's operations as well as recommendations on how to address and correct the gaps. Successful completion of the CAP would ensure that the Department has created the proper guidelines to ensure the health, safety, and welfare of each member of the HCBS-DD waiver across the state. Identifying gaps in oversight would give the Department the opportunity to improve the quality of each member's experience in the HCBS-DD waiver, which aligns with the Department's core values of person centeredness, accountability, and continuous improvement. By taking the actions outlined in this request, the Department will be working toward its long-range goals of enhancing the quality of life and community experience of individuals and families and improving the health of low-income and vulnerable Coloradans.

Assumptions and Calculations:

The Department has included a description of contractor duties to be completed in the first two years; the Department would reassess contractor roles at the end of the two-year period. Contractor work would continue if needed to ensure the health and safety of this vulnerable population. Once the Department has fully satisfied the terms of the Corrective Action and these resources are no longer needed, the Department would use the regular budget process to request an end to the appropriation for this purpose.

Independent Monitor

The Department assumes that the independent monitor of the PRC would require a minimum two-year analysis involving an initial observation period, implementation of recommendations, and a follow-up period. The Department assumes that the position would be filled by a physician working part time beginning in FY 2016-17 with funding absorbed within the current appropriation. The Department believes estimating at least two years of work is necessary to ensure adequate time to conduct a review, make recommendations, change any necessary practices, and confirm compliant outcomes from the changes.

Internal and Data Collection Contractor

The independent monitor would be supported by an internal review and data collection contractor and the Department assumes this position would be held by a registered nurse at three-quarters time beginning in FY 2017-18. The Department estimates two years for the internal review contract starting two months after the independent monitor to allow additional time for the monitor to start-up and complete final analysis and clearance of report.

State-wide Review of Home and Community Based Services Adult Comprehensive Waiver

The Department assumes that the state-wide review of Department's oversight of the HCBS-DD waiver would include an analysis of regulations and businesses processes as well as visits to all 20 CCBs and at least one service provider agency delivering direct services in each CCB service area. The Department assumes

there would be 40 on-site visit locations. The Department utilized its estimate on state wide review of the HCBS settings rule from FY 2016-17 Budget Amendment 8 “HCBS Waiver Settings Rule Implementation” to determine the estimated hours needed to complete this project and assumed an hourly rate of \$225, based on a contract with similar scope of work. For further detail on the breakdown of contractor hours and expenses, please see table 3.3 in the appendix.

PRC Management Support

The contractor for PRC Management Support would be procured by CDHS and could begin in FY 2016-17 if required to do so by CMS and would be paid within existing resources. This work would continue through FY 2017-18. Because CDHS would procure the PRC Management Support contractor, it is necessary for the Department of Human Services to have spending authority in FY 2017-18.

FTE

The Department assumes the two FTE positions would be at the Administrator IV level. The estimates for these positions include additional travel costs since they would require monthly visits to PRC and GJRC. For further detail on the additional travel cost estimates, please see table 6.1 in the appendix.

More detailed calculations for this request are provided in the attached appendix.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The Department received the Corrective Action from CMS on August 17, 2016, requiring that the contractors procured for the CAP be implemented before August 16, 2017. The required actions represent an emergency, new information, and an unforeseen contingency that increases workload.

BA-9 Pueblo Regional Center Corrective Action Plan
Appendix A: Calculations and Assumptions

| Table 1.1 Summary by Line Item FY 2017-18 | | | | | | | | | |
|---|---|-------------|-----|--------------|------------|----------------------|---------------|--------|--------------------------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | FMAP | Notes/Calculations |
| A | Total Request | \$543,379 | 1.8 | \$271,690 | \$0 | \$0 | \$271,689 | | Sum of Row B through Row I |
| B | (1) Executive Director's Office; (A) General Administration, Health, Life, and Dental | \$15,854 | 0.0 | \$7,927 | \$0 | \$0 | \$7,927 | 50.00% | Table 7.1 FTE Calculations |
| C | (1) Executive Director's Office; (A) General Administration, Short-term Disability | \$234 | 0.0 | \$117 | \$0 | \$0 | \$117 | 50.00% | Table 7.1 FTE Calculations |
| D | (1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement | \$6,144 | 0.0 | \$3,072 | \$0 | \$0 | \$3,072 | 50.00% | Table 7.1 FTE Calculations |
| E | (1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement | \$6,144 | 0.0 | \$3,072 | \$0 | \$0 | \$3,072 | 50.00% | Table 7.1 FTE Calculations |
| F | (1) Executive Director's Office; (A) General Administration, General Professional Services and Special Projects | \$267,864 | 0.0 | \$133,932 | \$0 | \$0 | \$133,932 | 50.00% | Table 2.1 Sum of Row C through Row F |
| G | (7) Department of Human Services Medicaid-Funded Programs; (H) Services for People with Disabilities - Medicaid Funding, Regional Centers | \$100,000 | 0.0 | \$50,000 | \$0 | \$0 | \$50,000 | 50.00% | Table 2.1 Row E |
| H | (4) Office of Community Living; (1) Division of Intellectual and Developmental Disabilities; Personal Services | \$137,113 | 1.8 | \$68,557 | \$0 | \$0 | \$68,556 | 50.00% | Table 7.1 FTE Calculations |
| I | (4) Office of Community Living; (A); (1) Administrative Costs; Operating Expenses | \$10,026 | 0.0 | \$5,013 | \$0 | \$0 | \$5,013 | 50.00% | Table 7.1 FTE Calculations |

| Table 1.2 Summary by Line Item FY 2018-19 | | | | | | | | | |
|---|--|-------------|-----|--------------|------------|----------------------|---------------|--------|--------------------------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | FMAP | Notes/Calculations |
| A | Total Request | \$456,992 | 2.0 | \$228,496 | \$0 | \$0 | \$228,496 | | Sum of Row B through Row H |
| B | (1) Executive Director's Office; (A) General Administration, Health, Life, and Dental | \$15,854 | 0.0 | \$7,927 | \$0 | \$0 | \$7,927 | 50.00% | Table 7.1 FTE Calculations |
| C | (1) Executive Director's Office; (A) General Administration, Short-term Disability | \$254 | 0.0 | \$127 | \$0 | \$0 | \$127 | 50.00% | Table 7.1 FTE Calculations |
| D | (1) Executive Director's Office; (A) General Administration, S.B. 04-257 Amortization Equalization Disbursement | \$6,702 | 0.0 | \$3,351 | \$0 | \$0 | \$3,351 | 50.00% | Table 7.1 FTE Calculations |
| E | (1) Executive Director's Office; (A) General Administration, S.B. 06-235 Supplemental Amortization Equalization Disbursement | \$6,702 | 0.0 | \$3,351 | \$0 | \$0 | \$3,351 | 50.00% | Table 7.1 FTE Calculations |
| F | (1) Executive Director's Office; (A) General Administration, General Professional Services and Special Projects | \$267,864 | 0.0 | \$133,932 | \$0 | \$0 | \$133,932 | 50.00% | Table 2.1 Sum of Row C through Row F |
| G | (4) Office of Community Living; (1) Division of Intellectual and Developmental Disabilities; Personal Services | \$149,590 | 2.0 | \$74,795 | \$0 | \$0 | \$74,795 | 50.00% | Table 7.1 FTE Calculations |
| H | (4) Office of Community Living; (A); (1) Administrative Costs; Operating Expenses | \$10,026 | 0.0 | \$5,013 | \$0 | \$0 | \$5,013 | 50.00% | Table 7.1 FTE Calculations |

BA-9 Pueblo Regional Center Corrective Action Plan
Appendix A: Calculations and Assumptions

| Table 2.1 Summary by Initiative | | | | | |
|--|--|-------------------|-------------------|--------------------|---|
| Row | Item | FY 2017-18 | FY 2018-19 | Total | Notes |
| A | FTE | \$167,389 | \$181,002 | \$348,391 | Table 7.1 FTE Calculations |
| B | Travel Costs | \$8,126 | \$8,126 | \$16,252 | Table 6.1 Travel Costs |
| C | State Wide Waiver Review Contractor | \$105,750 | \$105,750 | \$211,500 | Table 3.1 Row C |
| D | Independent Monitor | \$97,476 | \$97,476 | \$194,952 | Table 4.1 Row D |
| E | PRC Management Support | \$100,000 | \$0 | \$100,000 | Estimate from contract with similar scope |
| F | Internal Review and Data Collection Contractor | \$64,638 | \$64,638 | \$129,276 | Table 5.1 Row D |
| G | Total Cost | \$543,379 | \$456,992 | \$1,000,371 | Sum of Rows A through Row F |

BA-9 Pueblo Regional Center Corrective Action Plan
Appendix A: Calculations and Assumptions

| Table 3.1 Total Estimated Contract Cost for HCBS-DD Waiver Review | | | | |
|--|-----------------------------|-------------------|-------------------|--|
| Row | Item | FY 2017-18 | FY 2018-19 | Notes/Calculations |
| A | Total Estimated Hours | 470 | 470 | Table 3.2 Row E |
| B | Hourly Rate | \$225.00 | \$225.00 | Hourly rate based on existing contracts of similar scope |
| C | Total Estimated Cost | \$105,750 | \$105,750 | Row A * Row B |

| Table 3.2 Total Estimated Contractor Hours Needed for HCBS-DD Waiver Review | | | | |
|--|---|-------------------|-------------------|------------------------------|
| Row | Item | FY 2017-18 | FY 2018-19 | Notes/Calculations |
| A | Regulatory and Business Processes Analysis | 150 | 150 | 50% of HCBS Settings Hours |
| B | Participant Training and Technical Assistance | 200 | 200 | Based on HCBS Settings Hours |
| C | Stakeholder Communication and Workshops | 20 | 20 | 10 Two Hour Meetings |
| D | On-Site Monitoring and Surveys | 100 | 100 | Table 3.3 Row E |
| E | Total Estimated Contractor Hours | 470 | 470 | Sum Row A through D |

| Table 3.3 Total Estimated Contractor Hours Needed for On-Site Surveys in HCBS-DD Waiver Review | | | | |
|---|---|-------------------|-------------------|---|
| Row | Item | FY 2017-18 | FY 2018-19 | Notes |
| A | Estimated Number of Eligible Sites | 40 | 40 | From draft contractor scope of work |
| B | Proportion of site that will be reviewed in fiscal year | 0.50 | 0.50 | Review begins by August 1, 2017 and is to be completed by September 2018 |
| C | Number of Reviewed Sites | 20 | 20 | Row A * Row B |
| D | Estimated Average Hours per Site for Surveying and Remedial Action Plan Development | 5 | 5 | Average site visit time of Community Centered Boards (CCBs) and service delivery agencies |
| E | Total Number of Hours Reviewing Sites | 100 | 100 | Row C * Row D |

BA-9 Pueblo Regional Center Corrective Action Plan
Appendix A: Calculations and Assumptions

| Table 4.1 Total Estimated Expenditure for Independent Monitor | | | | |
|--|---------------------------------------|-------------------|-------------------|---|
| Row | Item | FY 2017-18 | FY 2018-19 | Notes/Calculations |
| A | Full Time Physician II Monthly Salary | \$16,246 | \$16,246 | Physician Salary from FY 2016-17 Pay Scale |
| B | Number of Months Employed | 12 | 12 | Beginning in July 2017 with a 12 month duration |
| C | Portion of Full-Time Equivalent | 0.5 | 0.5 | Based on contractor scope of work |
| D | Total Cost of Independent Monitor | \$97,476 | \$97,476 | Row A * Row B * Row C |

BA-9 Pueblo Regional Center Corrective Action Plan
Appendix A: Calculations and Assumptions

| Table 5.1 Total Estimated Expenditure for Internal Review and Data Collection Contractor | | | | |
|---|------------------------------------|-------------------|-------------------|--|
| Row | Item | FY 2017-18 | FY 2018-19 | Notes/Calculations |
| A | Full Time Nurse III Monthly Salary | \$7,182 | \$7,182 | Nurse III Salary from FY 2016-17 Pay Scale |
| B | Number of Months Employed | 12 | 12 | Beginning in July 2017 |
| C | Portion of Full-Time Equivalent | 0.75 | 0.75 | Based on contractor scope of work |
| D | Total Cost of Contractor | \$64,638 | \$64,638 | Row A * Row B * Row C |

BA-9 Pueblo Regional Center Corrective Action Plan
Appendix A: Calculations and Assumptions

| Table 6.1 Travel Costs | | | | |
|-------------------------------|-------------------------------------|-------------------|-------------------|---|
| Row | Item | FY 2017-18 | FY 2018-19 | Notes/Calculations |
| A | Round Trip Mileage | 362 | 362 | Average Mapquest distance from HCPF to Grand Junction and Pueblo Regional Centers |
| B | 4 Wheel Drive Vehicle Reimbursement | \$184.62 | \$184.62 | Established Rate |
| C | Active Months in Year | 12 | 12 | Permanent requested FTE positions |
| D | Annual Roundtrip Mileage Costs | \$2,215.44 | \$2,215.44 | Row B * Row C |
| E | Per Night Hotel Rate | \$80.00 | \$80.00 | Standard hotel cost in Pueblo, CO |
| F | Annual Hotel Costs | \$960.00 | \$960.00 | Assumes 12 overnight visits a year |
| G | Daily Per Diem Rate | \$74.00 | \$74.00 | Established Per Diem Rate |
| H | Annual Per Diem | \$888.00 | \$888.00 | Assumes 12 overnight visits a year |
| I | Cost per FTE | \$4,063 | \$4,063 | Row D + Row F + Row H |
| J | Total Cost | \$8,126 | \$8,126 | Row I *2 |

BA-9 Pueblo Regional Center Corrective Action Plan
Appendix A: Calculations and Assumptions

| Table 7.1 FTE Calculations | | | | | | |
|---|-------------------|-------------------|-------------------|------------|------------------|----------------|
| FTE Calculation Assumptions: | | | | | | |
| Operating Expenses -- Base operating expenses are included per FTE for \$500 per year. In addition, for regular FTE, annual telephone costs assume base charges of \$450 per year. | | | | | | |
| Standard Capital Purchases -- Each additional employee necessitates the purchase of a Personal Computer (\$900), Office Suite Software (\$330), and office furniture (\$3,473). | | | | | | |
| General Fund FTE -- New full-time General Fund positions are reflected in Year 1 as 0.9166 FTE to account for the pay-date shift. This applies to personal services costs only; operating costs are not subject to the pay-date shift. | | | | | | |
| Expenditure Detail | FY 2016-17 | FY 2017-18 | FY 2018-19 | | | |
| Personal Services: | | | | | | |
| Classification Title | Monthly | FTE | FTE | | FTE | |
| Administrator IV | \$5,585 | - | \$0 | 0.9 | \$61,431 | 1.0 |
| PERA | | | \$0 | | \$6,235 | |
| AED | | | \$0 | | \$3,072 | |
| SAED | | | \$0 | | \$3,072 | |
| Medicare | | | \$0 | | \$891 | |
| STD | | | \$0 | | \$117 | |
| Health-Life-Dental | | | \$0 | | \$7,927 | |
| Subtotal Position 1, ## FTE | | - | \$0 | 0.9 | \$82,745 | 1.0 |
| Classification Title | Monthly | FTE | FTE | | | |
| Administrator IV | \$5,585 | - | \$0 | 0.9 | \$61,431 | 1.0 |
| PERA | | | \$0 | | \$6,235 | |
| AED | | | \$0 | | \$3,072 | |
| SAED | | | \$0 | | \$3,072 | |
| Medicare | | | \$0 | | \$891 | |
| STD | | | \$0 | | \$117 | |
| Health-Life-Dental | | | \$0 | | \$7,927 | |
| Subtotal Position 2, ## FTE | | - | \$0 | 0.9 | \$82,745 | 1.0 |
| Subtotal Personal Services | | - | \$0 | 1.8 | \$165,489 | 2.0 |
| Operating Expenses: | | | | | | |
| | | FTE | FTE | | | |
| Regular FTE Operating | \$500 | 0.0 | \$0 | 2.0 | \$1,000 | 2.0 |
| Telephone Expenses | \$450 | 0.0 | \$0 | 2.0 | \$900 | 2.0 |
| PC, One-Time | \$1,230 | 0.0 | \$0 | | | |
| Office Furniture, One-Time | \$3,473 | 0.0 | \$0 | | | |
| Other | | | | | | |
| Other | | | | | | |
| Other | | | | | | |
| Other | | | | | | |
| Subtotal Operating Expenses | | | \$0 | | \$1,900 | \$1,900 |
| TOTAL REQUEST | | - | \$0 | 1.8 | \$167,389 | 2.0 |
| General Fund: | | | \$0 | | \$83,678 | \$90,483 |
| Cash funds: | | | | | | |
| Reappropriated Funds: | | | | | | |
| Federal Funds: | | | \$0 | | \$83,711 | \$90,519 |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPBA-03 December Amendment 35 Forecast Adjustment

Dept. Approval By: Josh Block *JBL 1/3/17* Supplemental FY 2016-17
 OSPB Approval By: *[Signature]* *12/29/16* Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|--------------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$141,455,044 | \$0 | \$141,455,044 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$2,500,441 | \$0 | \$2,500,441 | \$0 | \$0 |
| | CF | \$17,533,954 | \$0 | \$17,533,954 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$121,420,649 | \$0 | \$121,420,649 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$141,455,044 | \$0 | \$141,455,044 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 05. Indigent Care Program - Children's Basic Health Plan Medical and Dental Costs | GF | \$2,500,441 | \$0 | \$2,500,441 | \$0 | \$0 |
| | CF | \$17,533,954 | \$0 | \$17,533,954 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$121,420,649 | \$0 | \$121,420,649 | \$0 | \$0 |

| | | | |
|---|--|--|---|
| CF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | |
| Interagency Approval or Related Schedule 13s: | None | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPBA-04 HLD Adjustment

Dept. Approval By: Josh Block *[Signature]* 1/3/17 Supplemental FY 2016-17

OSPB Approval By: [Signature] 12/29/16 X
Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|-----------|---------------|--------------|--------------|------------|----------------------|
| | | Initial | Supplemental | Base Request | Budget | |
| | | Appropriation | Request | | Amendment | Continuation Request |
| Total | | \$3,434,070 | \$0 | \$3,673,458 | (\$36,332) | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$1,230,952 | \$0 | \$1,316,506 | (\$10,730) | \$0 |
| | CF | \$337,577 | \$0 | \$349,778 | (\$5,646) | \$0 |
| | RF | \$104,755 | \$0 | \$104,635 | (\$780) | \$0 |
| | FF | \$1,760,786 | \$0 | \$1,902,539 | (\$19,176) | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|-----------|---------------|--------------|--------------|------------|----------------------|
| | | Initial | Supplemental | Base Request | Budget | |
| | | Appropriation | Request | | Amendment | Continuation Request |
| Total | | \$3,434,070 | \$0 | \$3,673,458 | (\$36,332) | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (A) General Administration - Health, Life, and Dental | GF | \$1,230,952 | \$0 | \$1,316,506 | (\$10,730) | \$0 |
| | CF | \$337,577 | \$0 | \$349,778 | (\$5,646) | \$0 |
| | RF | \$104,755 | \$0 | \$104,635 | (\$780) | \$0 |
| | FF | \$1,760,786 | \$0 | \$1,902,539 | (\$19,176) | \$0 |

| | | | | | |
|---|--|-------------------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | Department of Personnel and Administration | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPBA-06 DHS HLD

Dept. Approval By:

Josh Block

[Signature] 1/3/17

Supplemental FY 2016-17

OSPB Approval By:

[Signature] 12/29/16

X

Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$16,109,873 | \$0 | \$17,168,585 | (\$37,316) | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$8,054,937 | \$0 | \$8,584,294 | (\$18,658) | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$8,054,936 | \$0 | \$8,584,291 | (\$18,658) | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$16,109,873 | \$0 | \$17,168,585 | (\$37,316) | \$0 |
| 07. Department of Human Services | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Medicaid-Funded Programs, (A) Executive Director's Office - Medicaid Funding - Executive Director's Office - Medicaid Funding | GF | \$8,054,937 | \$0 | \$8,584,294 | (\$18,658) | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$8,054,936 | \$0 | \$8,584,291 | (\$18,658) | \$0 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Other | | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPS-01 OIT CBMS
NPBA-01 OIT CBMS

Dept. Approval By: Josh Block *[Signature]* 1/3/17 X Supplemental FY 2016-17
 OSPB Approval By: [Signature] 12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$23,781,099 | (\$1,242,884) | \$25,403,318 | (\$1,169,362) | (\$1,169,362) |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$7,923,822 | (\$2,123,226) | \$8,518,451 | (\$3,053,438) | (\$3,089,407) |
| | CF | \$3,409,421 | (\$827,880) | \$3,620,226 | (\$70,370) | (\$34,401) |
| | RF | \$90,598 | (\$35,666) | \$97,300 | (\$38,015) | (\$38,015) |
| | FF | \$12,357,258 | \$1,743,888 | \$13,167,341 | \$1,992,461 | \$1,992,461 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$23,132,658 | (\$1,276,245) | \$24,754,877 | (\$1,205,737) | (\$1,205,738) |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - Colorado | GF | \$7,691,683 | (\$2,135,711) | \$8,286,312 | (\$3,066,628) | (\$3,102,597) |
| Benefits Management | CF | \$3,319,100 | (\$832,685) | \$3,529,905 | (\$75,970) | (\$40,001) |
| Systems, Operating & Contracts | RF | \$97,981 | (\$34,760) | \$94,683 | (\$37,117) | (\$37,117) |
| | FF | \$12,033,894 | \$1,726,910 | \$12,843,977 | \$1,973,978 | \$1,973,978 |

| | | | | | | |
|---|--------------|------------------|-----------------|------------------|-----------------|-----------------|
| | Total | \$648,441 | \$33,362 | \$648,441 | \$36,375 | \$36,375 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - Colorado | GF | \$232,139 | \$12,485 | \$232,139 | \$13,190 | \$13,190 |
| Benefits Management | CF | \$90,321 | \$4,805 | \$90,321 | \$5,600 | \$5,600 |
| Systems, Health Care and Econom | RF | \$2,617 | (\$906) | \$2,617 | (\$898) | (\$898) |
| | FF | \$323,364 | \$16,978 | \$323,364 | \$18,483 | \$18,483 |

| | | | | | |
|--|--|-------------------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Office of Information Technology | | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPS-01 OIT CBMS
NPBA-01 OIT CBMS

Dept. Approval By: Josh Block *[Signature]* 1/3/17 X Supplemental FY 2016-17
 OSPB Approval By: [Signature] 12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$23,781,099 | (\$1,242,884) | \$25,403,318 | (\$1,169,362) | (\$1,169,362) |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$7,923,822 | (\$2,123,226) | \$8,518,451 | (\$3,053,438) | (\$3,089,407) |
| | CF | \$3,409,421 | (\$827,880) | \$3,620,226 | (\$70,370) | (\$34,401) |
| | RF | \$90,598 | (\$35,666) | \$97,300 | (\$38,015) | (\$38,015) |
| | FF | \$12,357,258 | \$1,743,888 | \$13,167,341 | \$1,992,461 | \$1,992,461 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$23,132,658 | (\$1,276,245) | \$24,754,877 | (\$1,205,737) | (\$1,205,738) |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - Colorado | GF | \$7,691,683 | (\$2,135,711) | \$8,286,312 | (\$3,066,628) | (\$3,102,597) |
| Benefits Management | CF | \$3,319,100 | (\$832,685) | \$3,529,905 | (\$75,970) | (\$40,001) |
| Systems, Operating & Contracts | RF | \$97,981 | (\$34,760) | \$94,683 | (\$37,117) | (\$37,117) |
| | FF | \$12,033,894 | \$1,726,910 | \$12,843,977 | \$1,973,978 | \$1,973,978 |

| | | | | | | |
|---|--------------|------------------|-----------------|------------------|-----------------|-----------------|
| | Total | \$648,441 | \$33,362 | \$648,441 | \$36,375 | \$36,375 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - Colorado | GF | \$232,139 | \$12,485 | \$232,139 | \$13,190 | \$13,190 |
| Benefits Management | CF | \$90,321 | \$4,805 | \$90,321 | \$5,600 | \$5,600 |
| Systems, Health Care and Econom | RF | \$2,617 | (\$906) | \$2,617 | (\$898) | (\$898) |
| | FF | \$323,364 | \$16,978 | \$323,364 | \$18,483 | \$18,483 |

| | | | | | |
|--|--|-------------------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Office of Information Technology | | | | | |

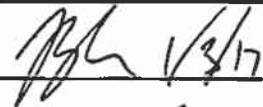
Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPS-02 DHS Mental Health Institutes
 NPBA-02 DHS Mental Health Institutes

Dept. Approval By: Josh Block  1/3/17 Supplemental FY 2016-17

OSPB Approval By:  12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,693,980 | \$138,192 | \$6,693,980 | \$138,192 | \$138,192 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$3,333,602 | \$68,820 | \$3,333,602 | \$69,096 | \$69,096 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$3,360,378 | \$69,372 | \$3,360,378 | \$69,096 | \$69,096 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|-----------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,693,980 | \$138,192 | \$6,693,980 | \$138,192 | \$138,192 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$3,333,602 | \$68,820 | \$3,333,602 | \$69,096 | \$69,096 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$3,360,378 | \$69,372 | \$3,360,378 | \$69,096 | \$69,096 |

| | | | |
|---|--|--|--|
| CF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Requires Legislation? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | |
| Interagency Approval or Related Schedule 13s: | Other | | |

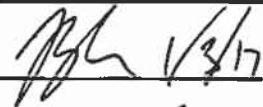
Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPS-02 DHS Mental Health Institutes
 NPBA-02 DHS Mental Health Institutes

Dept. Approval By: Josh Block  1/3/17 Supplemental FY 2016-17

OSPB Approval By:  12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,693,980 | \$138,192 | \$6,693,980 | \$138,192 | \$138,192 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$3,333,602 | \$68,820 | \$3,333,602 | \$69,096 | \$69,096 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$3,360,378 | \$69,372 | \$3,360,378 | \$69,096 | \$69,096 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|-----------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,693,980 | \$138,192 | \$6,693,980 | \$138,192 | \$138,192 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$3,333,602 | \$68,820 | \$3,333,602 | \$69,096 | \$69,096 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$3,360,378 | \$69,372 | \$3,360,378 | \$69,096 | \$69,096 |

| | | | |
|---|--|--|--|
| CF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Requires Legislation? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | |
| Interagency Approval or Related Schedule 13s: | Other | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

NPS-03 DHS DPA Fleet

Dept. Approval By: Josh Block *[Signature]* 1/3/17 X **Supplemental FY 2016-17**
 OSPB Approval By: *[Signature]* 12/29/16 **Budget Amendment FY 2017-18**

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$5,656,943 | (\$29,500) | \$5,726,487 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$2,817,321 | (\$14,750) | \$2,852,093 | \$0 | \$0 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$2,839,622 | (\$14,750) | \$2,874,394 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|-----------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$5,656,943 | (\$29,500) | \$5,726,487 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$2,817,321 | (\$14,750) | \$2,852,093 | \$0 | \$0 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$2,839,622 | (\$14,750) | \$2,874,394 | \$0 | \$0 |

| | | | | | |
|--|--|-----------------|----|----------|---|
| CF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| FF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| Requires Legislation? | Yes | <u> </u> | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Department of Personnel and Administration | | | | | |

Schedule 13


Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**NPS-04 Property Fund Supplemental
NPBA-05 Property Fund Supplemental**

Dept. Approval By: Josh Block  1/8/17 X Supplemental FY 2016-17

OSPB Approval By:  12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$176,936 | \$840 | \$134,259 | \$227 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$88,468 | \$420 | \$67,130 | \$114 | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$88,468 | \$420 | \$67,129 | \$113 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$176,936 | \$840 | \$134,259 | \$227 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (A) General Administration - Payment to Risk Management and Property Funds | GF | \$88,468 | \$420 | \$67,130 | \$114 | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$88,468 | \$420 | \$67,129 | \$113 | \$0 |

| | | | | | |
|--|--|--------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Department of Personnel and Administration | | | | | |

Schedule 13


Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**NPS-04 Property Fund Supplemental
NPBA-05 Property Fund Supplemental**

Dept. Approval By: Josh Block  1/8/17 X Supplemental FY 2016-17

OSPB Approval By:  12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$176,936 | \$840 | \$134,259 | \$227 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$88,468 | \$420 | \$67,130 | \$114 | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$88,468 | \$420 | \$67,129 | \$113 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$176,936 | \$840 | \$134,259 | \$227 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (A) General Administration - Payment to Risk Management and Property Funds | GF | \$88,468 | \$420 | \$67,130 | \$114 | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$88,468 | \$420 | \$67,129 | \$113 | \$0 |

| | | | | | |
|--|--|--------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Department of Personnel and Administration | | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**NPS-06 DHS Property Fund
NPBA-08 DHS Property Fund**

Dept. Approval By: Josh Block *[Signature]* 1/3/17 X Supplemental FY 2016-17
 OSPB Approval By: [Signature] 12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$16,109,873 | \$41,631 | \$17,168,585 | (\$4,098) | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$8,054,937 | \$20,816 | \$8,584,294 | (\$2,049) | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$8,054,936 | \$20,815 | \$8,584,291 | (\$2,049) | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$16,109,873 | \$41,631 | \$17,168,585 | (\$4,098) | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 07. Department of Human Services Medicaid-Funded Programs, (A) Executive Director's Office - Medicaid Funding - Executive Director's Office - Medicaid Funding | GF | \$8,054,937 | \$20,816 | \$8,584,294 | (\$2,049) | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$8,054,936 | \$20,815 | \$8,584,291 | (\$2,049) | \$0 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | Other | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**NPS-06 DHS Property Fund
NPBA-08 DHS Property Fund**

Dept. Approval By: Josh Block *[Signature]* 1/3/17 X Supplemental FY 2016-17
 OSPB Approval By: [Signature] 12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$16,109,873 | \$41,631 | \$17,168,585 | (\$4,098) | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$8,054,937 | \$20,816 | \$8,584,294 | (\$2,049) | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$8,054,936 | \$20,815 | \$8,584,291 | (\$2,049) | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$16,109,873 | \$41,631 | \$17,168,585 | (\$4,098) | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 07. Department of Human Services Medicaid-Funded Programs, (A) Executive Director's Office - Medicaid Funding - Executive Director's Office - Medicaid Funding | GF | \$8,054,937 | \$20,816 | \$8,584,294 | (\$2,049) | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$8,054,936 | \$20,815 | \$8,584,291 | (\$2,049) | \$0 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Non-Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | Other | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-01 Medical Services Premiums

Dept. Approval By: Josh Block *[Signature]* 1/4/17 X Supplemental FY 2016-17
 OSPB Approval By: *[Signature]* 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|-----------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,818,264,595 | \$141,694,902 | \$6,752,893,112 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$1,942,439,768 | \$32,217,993 | \$1,945,000,281 | \$0 | \$0 |
| | CF | \$705,708,120 | \$1,650,193 | \$678,832,273 | \$0 | \$0 |
| | RF | \$5,240,893 | \$3,861,816 | \$5,240,893 | \$0 | \$0 |
| | FF | \$4,164,875,814 | \$103,964,900 | \$4,123,819,665 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|------|-----------------------|----------------------|-----------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,818,264,595 | \$141,694,902 | \$6,752,893,112 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 02. Medical Services Premiums - Medical and LT Care Services for Medicaid Eligible Indvls | GF | \$1,942,439,768 | \$32,217,993 | \$1,945,000,281 | \$0 | \$0 |
| | CF | \$705,708,120 | \$1,650,193 | \$678,832,273 | \$0 | \$0 |
| | RF | \$5,240,893 | \$3,861,816 | \$5,240,893 | \$0 | \$0 |
| | FF | \$4,164,875,814 | \$103,964,900 | \$4,123,819,665 | \$0 | \$0 |

| | | | | | |
|---|--|-------------|----|-------------|--|
| CF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | |
| FF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| Requires Legislation? | Yes | <u> </u> | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-02 Behavioral Health

Dept. Approval By: Josh Block  1/3/17 X Supplemental FY 2016-17

OSPB Approval By:  12/29/16 _____ Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$662,617,330 | (\$56,448,298) | \$662,625,975 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$183,627,684 | (\$6,379,746) | \$183,599,168 | \$0 | \$0 |
| | CF | \$16,633,015 | \$569,523 | \$16,665,871 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$462,356,631 | (\$50,638,075) | \$462,360,936 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$653,650,029 | (\$56,302,390) | \$653,658,674 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 03. Behavioral Health Community Programs - Behavioral Health Capitation Payments | GF | \$181,949,404 | (\$6,672,399) | \$181,920,888 | \$0 | \$0 |
| | CF | \$16,383,180 | \$594,011 | \$16,416,036 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$455,317,445 | (\$50,224,002) | \$455,321,750 | \$0 | \$0 |

| | | | | | | |
|---|--------------|-------------|-------------|-------------|-----|-----|
| | Total | \$8,967,301 | (\$145,908) | \$8,967,301 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 03. Behavioral Health Community Programs - Behavioral Health Fee-for-Service Payments | GF | \$1,678,280 | \$292,653 | \$1,678,280 | \$0 | \$0 |
| | CF | \$249,835 | (\$24,488) | \$249,835 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$7,039,186 | (\$414,073) | \$7,039,186 | \$0 | \$0 |

| | | | | | |
|---|--|-------------------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-03 CHP+

Dept. Approval By:

Josh Block

[Signature] 1/3/17

X

Supplemental FY 2016-17

OSPB Approval By:

[Signature] 12/29/16

 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|---------------|--------------|---------------|-----------|--------------|
| | | Initial | Supplemental | Base | Budget | Continuation |
| | | Appropriation | Request | Request | Amendment | Request |
| | Total | \$146,488,318 | \$15,610,893 | \$146,488,318 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$2,500,441 | \$1,515 | \$2,500,441 | \$0 | \$0 |
| | CF | \$19,897,778 | \$1,914,824 | \$19,897,778 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$124,090,099 | \$13,694,554 | \$124,090,099 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|--------------|---------------|---------------|---------------|-----------|--------------|
| | | Initial | Supplemental | Base | Budget | Continuation |
| | | Appropriation | Request | Request | Amendment | Request |
| | Total | \$5,033,274 | \$0 | \$5,033,274 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 05. Indigent Care Program - Children's Basic Health Plan Administration | GF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | CF | \$2,363,824 | (\$1,766,374) | \$2,363,824 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$2,669,450 | \$1,766,374 | \$2,669,450 | \$0 | \$0 |
| | Total | \$141,455,044 | \$15,610,893 | \$141,455,044 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 05. Indigent Care Program - Children's Basic Health Plan Medical and Dental Costs | GF | \$2,500,441 | \$1,515 | \$2,500,441 | \$0 | \$0 |
| | CF | \$17,533,954 | \$3,681,198 | \$17,533,954 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$121,420,649 | \$11,928,180 | \$121,420,649 | \$0 | \$0 |

| | | | | | |
|---|--|-------------------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-04 Medicare Modernization Act

Dept. Approval By: Josh Block *JB 1/3/17* **X** **Supplemental FY 2016-17**
 OSPB Approval By: *Erin [Signature] 12/29/16* **Budget Amendment FY 2017-18**

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 | |
|---------------------|------|-----------------------|----------------------|---------------|------------------|----------------------|-----|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request | |
| Total | | \$130,667,733 | \$1,369,323 | \$130,667,733 | \$0 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$130,667,733 | \$1,369,323 | \$130,667,733 | \$0 | \$0 | \$0 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 | |
|-----------------------|------|-----------------------|----------------------|---------------|------------------|----------------------|-----|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request | |
| Total | | \$130,667,733 | \$1,369,323 | \$130,667,733 | \$0 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$130,667,733 | \$1,369,323 | \$130,667,733 | \$0 | \$0 | \$0 |
| CF | | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |

| | | | | | |
|---|--|-------------|----|----------|--|
| CF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| FF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| Requires Legislation? | Yes | <u> </u> | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |

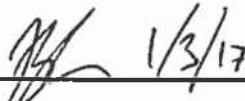
Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-05 Office of Community Living

Dept. Approval By: Josh Block  1/3/17 X Supplemental FY 2016-17

OSPB Approval By: Erin N. Schell 12/29/16 _____ Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|--|--------------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$490,594,151 | (\$18,626,814) | \$490,659,237 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$248,833,350 | (\$8,707,629) | \$248,581,190 | \$0 | \$0 |
| | CF | \$1 | \$0 | \$284,697 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$241,760,800 | (\$9,919,185) | \$241,793,350 | \$0 | \$0 |
| | | | | | | |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|--|--------------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$362,346,433 | (\$12,664,521) | \$362,346,433 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Program Costs - Adult Comprehensive Services | GF | \$180,448,523 | (\$6,306,932) | \$180,448,523 | \$0 | \$0 |
| | CF | \$1 | \$0 | \$1 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$181,897,909 | (\$6,357,589) | \$181,897,909 | \$0 | \$0 |
| | | | | | | |
| | Total | \$69,681,391 | (\$4,109,215) | \$69,734,980 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Program Costs - Adult Supported Living Services | GF | \$38,677,034 | (\$2,046,389) | \$38,469,418 | \$0 | \$0 |
| | CF | \$0 | \$0 | \$234,405 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$31,004,357 | (\$2,062,826) | \$31,031,157 | \$0 | \$0 |
| | | | | | | |

| | | | | | | |
|--|--------------|---------------------|--------------------|---------------------|------------|------------|
| | Total | \$26,310,826 | (\$594,807) | \$26,310,826 | \$0 | \$0 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Program Costs - Children's Extensive Support Services | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$13,102,791 | (\$296,214) | \$13,102,791 | \$0 | \$0 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$13,208,035 | (\$298,593) | \$13,208,035 | \$0 | \$0 |

| | | | | | | |
|--|--------------|---------------------|----------------------|---------------------|------------|------------|
| | Total | \$32,255,501 | (\$1,258,271) | \$32,266,998 | \$0 | \$0 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Program Costs - Case Management | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$16,605,002 | (\$58,094) | \$16,560,458 | \$0 | \$0 |
| | CF | \$0 | \$0 | \$50,291 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$15,650,499 | (\$1,200,177) | \$15,656,249 | \$0 | \$0 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-06 Delivery System and Payment Reform

Dept. Approval By: Josh Block *[Signature]* 1/3/17 X Supplemental FY 2016-17
 OSPB Approval By: *[Signature]* 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|-----------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,818,264,595 | (\$15,440,295) | \$6,752,893,112 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$1,942,439,768 | (\$7,720,148) | \$1,945,000,281 | \$0 | \$0 |
| | CF | \$705,708,120 | \$0 | \$678,832,273 | \$0 | \$0 |
| | RF | \$5,240,893 | \$0 | \$5,240,893 | \$0 | \$0 |
| | FF | \$4,164,875,814 | (\$7,720,147) | \$4,123,819,665 | \$0 | \$0 |

| Line item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|------|-----------------------|----------------------|-----------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$6,818,264,595 | (\$15,440,295) | \$6,752,893,112 | \$0 | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 02. Medical Services Premiums - Medical and LT Care Services for Medicaid Eligible Indvls | GF | \$1,942,439,768 | (\$7,720,148) | \$1,945,000,281 | \$0 | \$0 |
| | CF | \$705,708,120 | \$0 | \$678,832,273 | \$0 | \$0 |
| | RF | \$5,240,893 | \$0 | \$5,240,893 | \$0 | \$0 |
| | FF | \$4,164,875,814 | (\$7,720,147) | \$4,123,819,665 | \$0 | \$0 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-07 Oversight of State Resources

Dept. Approval By: Josh Block *[Signature]* 1/3/17 X Supplemental FY 2016-17

OSPB Approval By: *[Signature]* 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 | |
|---------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|-----|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request | |
| Total | | \$7,200,237 | \$200,000 | \$7,755,477 | \$0 | | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 |
| GF | | \$2,047,261 | \$50,000 | \$2,512,381 | \$0 | | \$0 |
| CF | | \$1,527,500 | \$50,000 | \$1,227,500 | \$0 | | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 | | \$0 |
| FF | | \$3,625,476 | \$100,000 | \$4,015,596 | \$0 | | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 | |
|---|-----------|-----------------------|----------------------|--------------|------------------|----------------------|-----|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request | |
| Total | | \$7,200,237 | \$200,000 | \$7,755,477 | -\$0 | | \$0 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | | 0.0 |
| 01. Executive Director's Office, (A) General Administration - General Professional Services and Special Projects | GF | \$2,047,261 | \$50,000 | \$2,512,381 | \$0 | | \$0 |
| | CF | \$1,527,500 | \$50,000 | \$1,227,500 | \$0 | | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | | \$0 |
| | FF | \$3,625,476 | \$100,000 | \$4,015,596 | \$0 | | \$0 |

| | | | | | |
|---|--|---------------|----|---------------|--|
| CF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| FF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| Requires Legislation? | Yes | <u> </u> | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-08 MMIS Operations

Dept. Approval By:

Josh Block



X

Supplemental FY 2016-17

OSPB Approval By:



 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|---------------|---------------|--------------|------------------|----------------------|
| | | Initial | Supplemental | Base Request | Budget Amendment | Continuation Request |
| | | Appropriation | Request | | | |
| | Total | \$67,626,435 | (\$1,495,480) | \$35,440,753 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$10,257,649 | (\$32,549) | \$7,384,952 | \$0 | \$0 |
| | CF | \$3,062,898 | (\$537,805) | \$2,191,808 | \$0 | \$0 |
| | RF | \$293,350 | (\$269,394) | \$293,350 | \$0 | \$0 |
| | FF | \$54,012,538 | (\$655,732) | \$25,570,643 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|---------------|---------------|--------------|------------------|----------------------|
| | | Initial | Supplemental | Base Request | Budget Amendment | Continuation Request |
| | | Appropriation | Request | | | |
| | Total | \$35,564,820 | \$1,716,274 | \$35,440,753 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - MMIS Maintenance and Projects | GF | \$7,211,028 | \$1,267,940 | \$7,384,952 | \$0 | \$0 |
| | CF | \$2,226,262 | (\$306,876) | \$2,191,808 | \$0 | \$0 |
| | RF | \$293,350 | (\$279,984) | \$293,350 | \$0 | \$0 |
| | FF | \$25,834,180 | \$1,035,194 | \$25,570,643 | \$0 | \$0 |
| | Total | \$5,145,018 | (\$4,675,328) | \$0 | \$0 | \$0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - MMIS Reprocurement Contracted Staff | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$431,304 | (\$60,222) | \$0 | \$0 | \$0 |
| | CF | \$134,757 | (\$37,064) | \$0 | \$0 | \$0 |
| | RF | \$0 | \$915 | \$0 | \$0 | \$0 |
| | FF | \$4,578,957 | (\$4,578,957) | \$0 | \$0 | \$0 |

| | | | | | | |
|---|--------------|---------------------|--------------------|------------|------------|------------|
| | Total | \$26,916,597 | \$1,463,574 | \$0 | \$0 | \$0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - MMIS | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$2,615,317 | (\$1,240,267) | \$0 | \$0 | \$0 |
| | CF | \$701,879 | (\$193,865) | \$0 | \$0 | \$0 |
| Reprocurement Contracts | RF | \$0 | \$9,675 | \$0 | \$0 | \$0 |
| | FF | \$23,599,401 | \$2,888,031 | \$0 | \$0 | \$0 |

| | | | | | |
|--|--|---------------|----|---------------|---|
| CF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | |
| FF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| Requires Legislation? | Yes | <u> </u> | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: Office of Information Technology | | | | | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-10 Regional Center Cost Reporting
BA-10 Regional Center Cost Reporting**

Dept. Approval By: Josh Block *[Signature]* 1/3/17 Supplemental FY 2016-17

OSPB Approval By: [Signature] 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 |
|---------------------|------|-----------------------|----------------------|--------------------|---------------------------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment Continuation Request |
| Total | | \$3,401,907 | \$75,000 | \$2,813,406 | \$75,000 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$1,266,408 | \$37,500 | \$1,119,283 | \$37,500 |
| CF | | \$415,408 | \$0 | \$312,420 | \$0 |
| RF | | \$0 | \$0 | \$0 | \$0 |
| FF | | \$1,720,091 | \$37,500 | \$1,381,703 | \$37,500 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 |
|---|-----------|-----------------------|----------------------|--------------------|---------------------------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment Continuation Request |
| Total | | \$3,401,907 | \$75,000 | \$2,813,406 | \$75,000 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (F) Provider Audits and Services - Professional Audit Contracts | GF | \$1,266,408 | \$37,500 | \$1,119,283 | \$37,500 |
| | CF | \$415,408 | \$0 | \$312,420 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 |
| | FF | \$1,720,091 | \$37,500 | \$1,381,703 | \$37,500 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- The Department requests \$75,000 total funds, \$37,500 General Fund, and \$37,500 federal funds in FY 2016-17, \$75,000 total funds, \$37,500 General Fund, and \$37,500 federal funds in FY 2017-18 and ongoing to hire a contractor to audit Colorado's regional centers and calculate their rates to ensure the regional centers are being properly compensated for the services they provide to some of the Department's most acute and vulnerable clients.

Current Program

- State owned regional centers provide 24-hour residential services, medical care, and behavioral services to adults who have complex and severe medical and behavioral needs. The Centers for Medicare and Medicaid Services (CMS) approved Home and Community Based Services Adult Comprehensive waiver (HCBS-DD) defines reimbursement for state-owned or operated facilities as being equal to the actual allowable and necessary cost of providing these services.
- Currently, state owned regional centers receive reimbursement for services on the HCBS-DD waiver at an interim rate based on cost reports from the regional centers.

Problem or Opportunity

- Based on a 2013 report from the State Auditor, regional centers were not accurately reporting their facility, capital or labor costs to align with approved waiver language for reimbursement. Initially incorrect compensation of the regional centers was fixed by implementing more accurate interim rates to pay the regional centers at, but with inaccurate cost reports the rates still lead to inaccurate compensation, requiring significant reconciliations at the end of each year. This occurs due to a lack of uniformity and unclear requirements of the regional center cost reporting process.

Consequences of Problem

- The Department is required to, but cannot assure, that reimbursements to regional centers match the regional centers' costs and could be cited for deficiencies by CMS in a federal audit. If this problem continues, CMS could withdraw matching federal funds for the program.

Proposed Solution

- The Department requests funding to contract with a third party accounting firm to annually perform cost reporting and auditing of regional centers, which would allow the Department to implement a cost based reimbursement methodology. By allowing the contractor to manage and audit cost reports as well as calculate interim and final rates for the state owned regional centers, the current rate setting process would be improved and costs would be reported in a more accurate and consistent manner. This would ensure the Department would continue to be in compliance with CMS regulations moving forward by ensuring the facilities are paid more accurately.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-10, BA-10

Request Detail: Regional Center Cost Reporting and Auditing

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| Regional Center Cost Reporting and Auditing | \$75,000 | \$37,500 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|---|-------------|--------------|
| Regional Center Cost Reporting and Auditing | \$75,000 | \$37,500 |

Problem or Opportunity:

The Pueblo and Grand Junction regional centers currently receive reimbursement for the services they provide based on cost reports that the regional centers send to the Department. These cost reports are not consistent across regional centers and as a result costs are often inaccurately reported. This sometimes leads to large reconciliations at the end of each year to ensure that the regional centers receive the appropriate funding for the costs incurred providing services for the year. It also puts the Department at risk to fall out of compliance with its approved Home and Community Based Services Adult Comprehensive waiver (HCBS-DD).

In order to obtain accurate cost reports to assist in setting correct interim rates, the Department has been working with a contractor to develop a detailed cost reporting document to disseminate to the regional centers. This cost reporting document incorporates all elements of direct and indirect care and all costs associated with the state-owned facility in a consistent manner. This document could be used to calculate the regional centers' final rate of reimbursement pending approval from the Department and any subsequent appeals from the regional centers, however, the Department does not have the necessary funding to pay the vendor to make the calculation and manage the collection and review of the cost reports.

State owned regional centers provide 24-hour residential services, medical care and behavioral services to adults who have complex and severe medical and behavioral needs. These services include: assistance with activities of daily living, continual supervision of client health and safety, behavioral therapy and counseling, vocational and day programming, transportation and nursing services. Regional centers are critical to the

State as they provide these services to adults who may not be able to be served by private providers or live in the community.

State owned regional centers used to be reimbursed for HCBS-DD services at the fee schedule rate for privately owned providers, but this rate was not an accurate reflection of actual costs incurred by the regional centers providing these services. A 2013 audit conducted by the Office of the State Auditor (OSA) found that the State owned regional centers were often incorrectly compensated, which then required a reconciliation at year end. For example, in FY 2011-12, the total combined HCBS-DD reimbursements that the two regional centers received exceeded their combined costs to provide these services by \$1,301,852¹. To help correct this issue, after the 2013 OSA audit, the Department began to pay the regional centers an interim rate which is based on costs reported by the regional centers. However, errors in the cost reporting process for regional centers have resulted in interim rates that are still not an accurate reflection of actual costs the regional centers incur. This current methodology is based on the last fiscal year's cost of providing the HCBS-DD waiver services. However, the Department does not have the resources necessary to develop a cost report that properly breaks down the regional centers' costs by waiver services to align the regional centers' interim rate with their final rate of reimbursement.

Though an improvement from the previous payment methodology, the Department's new methodology could be improved upon further to increase the accuracy with which costs are reported and thus, how the regional centers are compensated. The Department must be able to assure that it is in compliance with the CMS-approved waiver language for reimbursement moving forward, to avoid losing federal funding for the Regional Centers and possible termination of these services from the waiver altogether. If the cost reports were not made to be as accurate as possible, it could lead to the Department becoming out of compliance with CMS due to the reimbursement for the regional centers not meeting the costs incurred by the regional centers. CMS could then demand repayment of the federal financial participation (FFP) that was paid through the HCBS-DD waiver service for the portion of expense that was not in compliance with the approved waiver, and refuse further FFP until such time the state enters into a formal Corrective Action Plan (CAP) with CMS, if it were found that the Department were to be out of compliance with the CMS-approved waiver language.

Proposed Solution:

The Department requests \$75,000 total funds, including \$37,500 General Fund in FY 2016-17 and \$75,000 total funds, including \$37,500 General Fund in FY 2017-18 and ongoing in order to contract with an accounting firm to audit the regional centers records and costs to determine the appropriate rates to pay for the services they render. Although the Department has been actively making improvements to the rate assessments and reimbursement methodology for regional centers, regional centers have continued to receive inaccurate compensation for the services they provide, resulting in the need for significant reconciliations at fiscal year-end. More detailed cost reporting for the regional centers would help to ensure the Department reimburses the regional centers correctly and is in compliance with CMS moving forward. As a result, the Department requests funding to contract with this vendor, or a similar one, to manage and audit cost reports as well as calculate interim and final rates for the State owned regional centers.

¹ <http://leg.colorado.gov/audits/regional-centers-people-developmental-disabilities>

The Department believes an independent contractor would be the optimal solution, as it would create an unbiased yearly report that would be performed by professionals who specialize in accounting and cost reporting on a larger scale. Annual reviews of the regional center cost reports would ensure that regional centers would maintain accountability and consistency in their future cost reporting. In addition, this process would eliminate future over or under payment that is associated with misreporting of costs by the regional centers.

This annual review would consist of:

- An Agreed Upon Procedure (AUP) review for the Grand Junction regional center and the Pueblo regional center.
- A two level supervisory review process.
- A formal Exit Conference process.
- The issuance of the Final AUP report to the state of Colorado.
- Assistance with any informal/formal appeals.

In FY 2017-18 and onward, the Department estimates there would be additional work consisting of cost report maintenance and filing support. In order to achieve consistency in the regional centers' reimbursement rates from the Department, it is important to maintain regional center cost reports past the initial process of cost reporting. Since the cost reporting and rate setting process would change dramatically, it is important for the Department's contractor to provide any support necessary to the regional centers to ensure uniformity past the initial cost reporting period.

This cost report maintenance and filing support would consist of six different items:

- The annual collection of regional waiver center cost reports.
- The performance of initial acceptance procedure.
- The provision of as-needed training and filing support to regional centers.
- Soliciting feedback from both the state and regional centers and submission of a final listing of proposed changes to the state for approval.
- Collecting feedback from state and regional centers and submitting a final listing of proposed changes to the state for approval.
- Revise cost reporting template based on feedback and changes in regional center service delivery

These tasks are crucial as they would allow the Department to ensure that the rates for HCBS-DD waiver services being administered in the regional centers are accurate. By utilizing a contractor, the Department would be able to ensure that a thorough audit is carried out and all of the supporting documentation is collected and distributed in a way that would allow the Department to reimburse the regional centers with much more accuracy than is currently possible.

In addition the activities described above, the Department estimates that there would be additional ad hoc work required in each fiscal year moving forward beginning in FY 2016-17. This would consist of a variety of miscellaneous activities that would help to ensure that things go smoothly without the need for further

intervention. These ad hoc hours could be used for a variety of different tasks that may need to be completed, for example, training providers in the proper use of the updated cost reports.

Anticipated Outcomes:

This request would allow the Department to ensure that regional centers that rely on funding from the Department receive proper compensation for the services they provide to some of the Department's most acute and vulnerable clients. Additionally, this would help to ensure that the Department would remain in compliance with CMS, as the cost reports would ensure regional centers are properly compensated according to their actual costs. This would help to meet one of the Department's Performance Plan's primary goals of "ensuring sound stewardship of financial resources" by ensuring the regional centers are accurately compensated.

Eventually, audits of regional center expenses would result in changed rates for regional centers, and would have an impact on both the HCPF and Colorado Department of Human Services (CDHS) budgets. However, because the Department cannot yet predict the results of the auditing, the Department has not included a request to change the appropriations for services. If necessary, the Department would request adjustments to the appropriations after the auditing is complete and changes to the rates are known.

Assumptions and Calculations:

The Department assumes that the annual cost reporting process would consist of five pieces and would take approximately 120 hours, at \$200 per hour, costing \$24,000, based on an estimate provided by a current contractor.

For FY 2016-17, the Department assumes that there are approximately 60 hours of additional work that would need to be completed to get the program and auditing process up and running. This would cost \$12,000 and would consist of the development and approval of the AUP review program and the development of standardized cost reporting documents and a letter template.

Finally, in FY 2017-18 and onward, the Department assumes there would be an additional 30 hours of work consisting of cost report maintenance and filing support, which would cost \$6,000.

In addition to the previously mentioned costs, the Department assumes there are 195 hours of miscellaneous Ad Hoc work that would need to be completed in FY 2016-17, and 225 hours in FY 2017-18 and ongoing. This would cost \$39,000 in FY 2016-17 and \$45,000 in FY 2017-18 and ongoing.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

This supplemental request meets the necessary criteria because the incorrect compensating of the regional centers is a technical error which has a substantive effect on the operation of the program. The Department can improve the compensation process, which would ensure that the waiver language previously approved by CMS is met going forward. As a result, this issue needs to be corrected as soon as possible to ensure the regional centers continue to operate as expected.

S-10, BA-10 Regional Center Cost Reporting and Auditing
Appendix A: Calculations and Assumptions

| Table 1.1 FY 2016-17 Regional Center Cost Reporting and Auditing Summary by Line Item | | | | | | | | |
|---|---|-------------|-----|--------------|------------|----------------------|---------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Row B |
| B | (1) Executive Director's Office, (F) Provider Audits and Services, Professional Audit Contracts | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Table 2.1 Row D |

| Table 1.2 FY 2017-18 Regional Center Cost Reporting and Auditing Summary by Line Item | | | | | | | | |
|---|---|-------------|-----|--------------|------------|----------------------|---------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Row B |
| B | (1) Executive Director's Office, (F) Provider Audits and Services, Professional Audit Contracts | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Table 2.2 Row D |

S-10, BA-10 Regional Center Cost Reporting and Auditing
Appendix A: Calculations and Assumptions

| Table 2.1- FY 2016-17 Regional Center Cost Reporting and Auditing Estimated Contract Costs | | | | | |
|--|--|-------------|------------------------------|-----------------------|--|
| Row | Activity Name | Hourly Rate | Estimated Annual Units/Hours | Estimated Annual Cost | Notes |
| A | Annual Cost Reporting | \$200.00 | 120 | \$24,000 | Rate and hours estimates from contractor |
| B | Initial Cost Reporting and Auditing Program Set Up | \$200.00 | 60 | \$12,000 | Rate and hours estimates from contractor |
| C | Ad Hoc Hours | \$200.00 | 195 | \$39,000 | Rate and hours estimates from contractor |
| D | Total | N/A | 375 | \$75,000 | |

| Table 2.2- FY 2017-18 Regional Center Cost Reporting and Auditing Estimated Contract Costs | | | | | |
|--|--|-------------|------------------------------|-----------------------|--|
| Row | Activity Name | Hourly Rate | Estimated Annual Units/Hours | Estimated Annual Cost | Notes |
| A | Annual Cost Reporting | \$200.00 | 120 | \$24,000 | Rate and hours estimates from contractor |
| B | Cost Report Maintenance and Filing Support | \$200.00 | 30 | \$6,000 | Rate and hours estimates from contractor |
| C | Ad Hoc Hours | \$200.00 | 225 | \$45,000 | Rate and hours estimates from contractor |
| D | Total | N/A | 375 | \$75,000 | |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-10 Regional Center Cost Reporting
BA-10 Regional Center Cost Reporting**

Dept. Approval By: Josh Block *[Signature]* 1/3/17 Supplemental FY 2016-17

OSPB Approval By: [Signature] 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 |
|---|-----------|-----------------------|----------------------|--------------------|---------------------------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment Continuation Request |
| Total | | \$3,401,907 | \$75,000 | \$2,813,406 | \$75,000 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$1,266,408 | \$37,500 | \$1,119,283 | \$37,500 |
| | CF | \$415,408 | \$0 | \$312,420 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 |
| | FF | \$1,720,091 | \$37,500 | \$1,381,703 | \$37,500 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 |
|---|-----------|-----------------------|----------------------|--------------------|---------------------------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment Continuation Request |
| Total | | \$3,401,907 | \$75,000 | \$2,813,406 | \$75,000 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (F) Provider Audits and Services - Professional Audit Contracts | GF | \$1,266,408 | \$37,500 | \$1,119,283 | \$37,500 |
| | CF | \$415,408 | \$0 | \$312,420 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 |
| | FF | \$1,720,091 | \$37,500 | \$1,381,703 | \$37,500 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- The Department requests \$75,000 total funds, \$37,500 General Fund, and \$37,500 federal funds in FY 2016-17, \$75,000 total funds, \$37,500 General Fund, and \$37,500 federal funds in FY 2017-18 and ongoing to hire a contractor to audit Colorado's regional centers and calculate their rates to ensure the regional centers are being properly compensated for the services they provide to some of the Department's most acute and vulnerable clients.

Current Program

- State owned regional centers provide 24-hour residential services, medical care, and behavioral services to adults who have complex and severe medical and behavioral needs. The Centers for Medicare and Medicaid Services (CMS) approved Home and Community Based Services Adult Comprehensive waiver (HCBS-DD) defines reimbursement for state-owned or operated facilities as being equal to the actual allowable and necessary cost of providing these services.
- Currently, state owned regional centers receive reimbursement for services on the HCBS-DD waiver at an interim rate based on cost reports from the regional centers.

Problem or Opportunity

- Based on a 2013 report from the State Auditor, regional centers were not accurately reporting their facility, capital or labor costs to align with approved waiver language for reimbursement. Initially incorrect compensation of the regional centers was fixed by implementing more accurate interim rates to pay the regional centers at, but with inaccurate cost reports the rates still lead to inaccurate compensation, requiring significant reconciliations at the end of each year. This occurs due to a lack of uniformity and unclear requirements of the regional center cost reporting process.

Consequences of Problem

- The Department is required to, but cannot assure, that reimbursements to regional centers match the regional centers' costs and could be cited for deficiencies by CMS in a federal audit. If this problem continues, CMS could withdraw matching federal funds for the program.

Proposed Solution

- The Department requests funding to contract with a third party accounting firm to annually perform cost reporting and auditing of regional centers, which would allow the Department to implement a cost based reimbursement methodology. By allowing the contractor to manage and audit cost reports as well as calculate interim and final rates for the state owned regional centers, the current rate setting process would be improved and costs would be reported in a more accurate and consistent manner. This would ensure the Department would continue to be in compliance with CMS regulations moving forward by ensuring the facilities are paid more accurately.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-10, BA-10

Request Detail: Regional Center Cost Reporting and Auditing

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| Regional Center Cost Reporting and Auditing | \$75,000 | \$37,500 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|---|-------------|--------------|
| Regional Center Cost Reporting and Auditing | \$75,000 | \$37,500 |

Problem or Opportunity:

The Pueblo and Grand Junction regional centers currently receive reimbursement for the services they provide based on cost reports that the regional centers send to the Department. These cost reports are not consistent across regional centers and as a result costs are often inaccurately reported. This sometimes leads to large reconciliations at the end of each year to ensure that the regional centers receive the appropriate funding for the costs incurred providing services for the year. It also puts the Department at risk to fall out of compliance with its approved Home and Community Based Services Adult Comprehensive waiver (HCBS-DD).

In order to obtain accurate cost reports to assist in setting correct interim rates, the Department has been working with a contractor to develop a detailed cost reporting document to disseminate to the regional centers. This cost reporting document incorporates all elements of direct and indirect care and all costs associated with the state-owned facility in a consistent manner. This document could be used to calculate the regional centers' final rate of reimbursement pending approval from the Department and any subsequent appeals from the regional centers, however, the Department does not have the necessary funding to pay the vendor to make the calculation and manage the collection and review of the cost reports.

State owned regional centers provide 24-hour residential services, medical care and behavioral services to adults who have complex and severe medical and behavioral needs. These services include: assistance with activities of daily living, continual supervision of client health and safety, behavioral therapy and counseling, vocational and day programming, transportation and nursing services. Regional centers are critical to the

State as they provide these services to adults who may not be able to be served by private providers or live in the community.

State owned regional centers used to be reimbursed for HCBS-DD services at the fee schedule rate for privately owned providers, but this rate was not an accurate reflection of actual costs incurred by the regional centers providing these services. A 2013 audit conducted by the Office of the State Auditor (OSA) found that the State owned regional centers were often incorrectly compensated, which then required a reconciliation at year end. For example, in FY 2011-12, the total combined HCBS-DD reimbursements that the two regional centers received exceeded their combined costs to provide these services by \$1,301,852¹. To help correct this issue, after the 2013 OSA audit, the Department began to pay the regional centers an interim rate which is based on costs reported by the regional centers. However, errors in the cost reporting process for regional centers have resulted in interim rates that are still not an accurate reflection of actual costs the regional centers incur. This current methodology is based on the last fiscal year's cost of providing the HCBS-DD waiver services. However, the Department does not have the resources necessary to develop a cost report that properly breaks down the regional centers' costs by waiver services to align the regional centers' interim rate with their final rate of reimbursement.

Though an improvement from the previous payment methodology, the Department's new methodology could be improved upon further to increase the accuracy with which costs are reported and thus, how the regional centers are compensated. The Department must be able to assure that it is in compliance with the CMS-approved waiver language for reimbursement moving forward, to avoid losing federal funding for the Regional Centers and possible termination of these services from the waiver altogether. If the cost reports were not made to be as accurate as possible, it could lead to the Department becoming out of compliance with CMS due to the reimbursement for the regional centers not meeting the costs incurred by the regional centers. CMS could then demand repayment of the federal financial participation (FFP) that was paid through the HCBS-DD waiver service for the portion of expense that was not in compliance with the approved waiver, and refuse further FFP until such time the state enters into a formal Corrective Action Plan (CAP) with CMS, if it were found that the Department were to be out of compliance with the CMS-approved waiver language.

Proposed Solution:

The Department requests \$75,000 total funds, including \$37,500 General Fund in FY 2016-17 and \$75,000 total funds, including \$37,500 General Fund in FY 2017-18 and ongoing in order to contract with an accounting firm to audit the regional centers records and costs to determine the appropriate rates to pay for the services they render. Although the Department has been actively making improvements to the rate assessments and reimbursement methodology for regional centers, regional centers have continued to receive inaccurate compensation for the services they provide, resulting in the need for significant reconciliations at fiscal year-end. More detailed cost reporting for the regional centers would help to ensure the Department reimburses the regional centers correctly and is in compliance with CMS moving forward. As a result, the Department requests funding to contract with this vendor, or a similar one, to manage and audit cost reports as well as calculate interim and final rates for the State owned regional centers.

¹ <http://leg.colorado.gov/audits/regional-centers-people-developmental-disabilities>

The Department believes an independent contractor would be the optimal solution, as it would create an unbiased yearly report that would be performed by professionals who specialize in accounting and cost reporting on a larger scale. Annual reviews of the regional center cost reports would ensure that regional centers would maintain accountability and consistency in their future cost reporting. In addition, this process would eliminate future over or under payment that is associated with misreporting of costs by the regional centers.

This annual review would consist of:

- An Agreed Upon Procedure (AUP) review for the Grand Junction regional center and the Pueblo regional center.
- A two level supervisory review process.
- A formal Exit Conference process.
- The issuance of the Final AUP report to the state of Colorado.
- Assistance with any informal/formal appeals.

In FY 2017-18 and onward, the Department estimates there would be additional work consisting of cost report maintenance and filing support. In order to achieve consistency in the regional centers' reimbursement rates from the Department, it is important to maintain regional center cost reports past the initial process of cost reporting. Since the cost reporting and rate setting process would change dramatically, it is important for the Department's contractor to provide any support necessary to the regional centers to ensure uniformity past the initial cost reporting period.

This cost report maintenance and filing support would consist of six different items:

- The annual collection of regional waiver center cost reports.
- The performance of initial acceptance procedure.
- The provision of as-needed training and filing support to regional centers.
- Soliciting feedback from both the state and regional centers and submission of a final listing of proposed changes to the state for approval.
- Collecting feedback from state and regional centers and submitting a final listing of proposed changes to the state for approval.
- Revise cost reporting template based on feedback and changes in regional center service delivery

These tasks are crucial as they would allow the Department to ensure that the rates for HCBS-DD waiver services being administered in the regional centers are accurate. By utilizing a contractor, the Department would be able to ensure that a thorough audit is carried out and all of the supporting documentation is collected and distributed in a way that would allow the Department to reimburse the regional centers with much more accuracy than is currently possible.

In addition the activities described above, the Department estimates that there would be additional ad hoc work required in each fiscal year moving forward beginning in FY 2016-17. This would consist of a variety of miscellaneous activities that would help to ensure that things go smoothly without the need for further

intervention. These ad hoc hours could be used for a variety of different tasks that may need to be completed, for example, training providers in the proper use of the updated cost reports.

Anticipated Outcomes:

This request would allow the Department to ensure that regional centers that rely on funding from the Department receive proper compensation for the services they provide to some of the Department's most acute and vulnerable clients. Additionally, this would help to ensure that the Department would remain in compliance with CMS, as the cost reports would ensure regional centers are properly compensated according to their actual costs. This would help to meet one of the Department's Performance Plan's primary goals of "ensuring sound stewardship of financial resources" by ensuring the regional centers are accurately compensated.

Eventually, audits of regional center expenses would result in changed rates for regional centers, and would have an impact on both the HCPF and Colorado Department of Human Services (CDHS) budgets. However, because the Department cannot yet predict the results of the auditing, the Department has not included a request to change the appropriations for services. If necessary, the Department would request adjustments to the appropriations after the auditing is complete and changes to the rates are known.

Assumptions and Calculations:

The Department assumes that the annual cost reporting process would consist of five pieces and would take approximately 120 hours, at \$200 per hour, costing \$24,000, based on an estimate provided by a current contractor.

For FY 2016-17, the Department assumes that there are approximately 60 hours of additional work that would need to be completed to get the program and auditing process up and running. This would cost \$12,000 and would consist of the development and approval of the AUP review program and the development of standardized cost reporting documents and a letter template.

Finally, in FY 2017-18 and onward, the Department assumes there would be an additional 30 hours of work consisting of cost report maintenance and filing support, which would cost \$6,000.

In addition to the previously mentioned costs, the Department assumes there are 195 hours of miscellaneous Ad Hoc work that would need to be completed in FY 2016-17, and 225 hours in FY 2017-18 and ongoing. This would cost \$39,000 in FY 2016-17 and \$45,000 in FY 2017-18 and ongoing.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

This supplemental request meets the necessary criteria because the incorrect compensating of the regional centers is a technical error which has a substantive effect on the operation of the program. The Department can improve the compensation process, which would ensure that the waiver language previously approved by CMS is met going forward. As a result, this issue needs to be corrected as soon as possible to ensure the regional centers continue to operate as expected.

S-10, BA-10 Regional Center Cost Reporting and Auditing
Appendix A: Calculations and Assumptions

| Table 1.1 FY 2016-17 Regional Center Cost Reporting and Auditing Summary by Line Item | | | | | | | | |
|---|---|-------------|-----|--------------|------------|----------------------|---------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Row B |
| B | (1) Executive Director's Office, (F) Provider Audits and Services, Professional Audit Contracts | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Table 2.1 Row D |

| Table 1.2 FY 2017-18 Regional Center Cost Reporting and Auditing Summary by Line Item | | | | | | | | |
|---|---|-------------|-----|--------------|------------|----------------------|---------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Row B |
| B | (1) Executive Director's Office, (F) Provider Audits and Services, Professional Audit Contracts | \$75,000 | 0.0 | \$37,500 | \$0 | \$0 | \$37,500 | Table 2.2 Row D |

S-10, BA-10 Regional Center Cost Reporting and Auditing
Appendix A: Calculations and Assumptions

| Table 2.1- FY 2016-17 Regional Center Cost Reporting and Auditing Estimated Contract Costs | | | | | |
|--|--|-------------|------------------------------|-----------------------|--|
| Row | Activity Name | Hourly Rate | Estimated Annual Units/Hours | Estimated Annual Cost | Notes |
| A | Annual Cost Reporting | \$200.00 | 120 | \$24,000 | Rate and hours estimates from contractor |
| B | Initial Cost Reporting and Auditing Program Set Up | \$200.00 | 60 | \$12,000 | Rate and hours estimates from contractor |
| C | Ad Hoc Hours | \$200.00 | 195 | \$39,000 | Rate and hours estimates from contractor |
| D | Total | N/A | 375 | \$75,000 | |

| Table 2.2- FY 2017-18 Regional Center Cost Reporting and Auditing Estimated Contract Costs | | | | | |
|--|--|-------------|------------------------------|-----------------------|--|
| Row | Activity Name | Hourly Rate | Estimated Annual Units/Hours | Estimated Annual Cost | Notes |
| A | Annual Cost Reporting | \$200.00 | 120 | \$24,000 | Rate and hours estimates from contractor |
| B | Cost Report Maintenance and Filing Support | \$200.00 | 30 | \$6,000 | Rate and hours estimates from contractor |
| C | Ad Hoc Hours | \$200.00 | 225 | \$45,000 | Rate and hours estimates from contractor |
| D | Total | N/A | 375 | \$75,000 | |


Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-11 HB 15-1368 Cross-System Response Pilot Spending
BA-11 HB 15-1368 Cross System Response Pilot Spending**

Dept. Approval By: Josh Block  1/3/17 X Supplemental FY 2016-17

OSPB Approval By: Erin A. Smith 12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|-----------|-----------------------|----------------------|--------------------|--------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$5,824,521 | (\$1,408,835) | \$4,161,991 | \$306,726 | \$230,045 |
| FTE | | 35.5 | 0.0 | 35.5 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$1,576,497 | \$0 | \$1,584,195 | \$0 | \$0 |
| | CF | \$1,876,331 | (\$563,835) | \$189,456 | \$1,151,726 | \$913,795 |
| | RF | \$845,000 | (\$845,000) | \$846,579 | (\$845,000) | (\$683,750) |
| | FF | \$1,526,693 | \$0 | \$1,541,761 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|-----------|-----------------------|----------------------|--------------------|-------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$3,063,982 | \$0 | \$3,096,155 | \$0 | \$0 |
| FTE | | 35.5 | 0.0 | 35.5 | 0.0 | 0.0 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Administrative Costs - Personal Services | GF | \$1,431,598 | \$0 | \$1,439,296 | \$0 | \$0 |
| | CF | \$182,080 | \$75,000 | \$187,556 | \$75,000 | \$75,000 |
| | RF | \$75,000 | (\$75,000) | \$76,579 | (\$75,000) | (\$75,000) |
| | FF | \$1,375,304 | \$0 | \$1,392,724 | \$0 | \$0 |

| | | | | | | |
|--|--------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| | Total | \$1,070,539 | (\$769,050) | \$1,065,836 | (\$769,050) | (\$607,800) |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Administrative Costs - Operating Expenses | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$144,899 | \$0 | \$144,899 | \$0 | \$0 |
| | CF | \$4,251 | \$950 | \$1,900 | \$950 | \$950 |
| | RF | \$770,000 | (\$770,000) | \$770,000 | (\$770,000) | (\$608,750) |
| | FF | \$151,389 | \$0 | \$149,037 | \$0 | \$0 |

| | | | | | | |
|--|--------------|--------------------|--------------------|------------|--------------------|------------------|
| | Total | \$1,690,000 | (\$639,785) | \$0 | \$1,075,776 | \$837,845 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Program Costs - Appropriation to the BH Crisis Pilot Program Fund | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | CF | \$1,690,000 | (\$639,785) | \$0 | \$1,075,776 | \$837,845 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$0 | \$0 | \$0 | \$0 |

| | | | | | |
|---|--|---------------|----|---------------|---|
| CF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | |
| FF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| Requires Legislation? | Yes | <u> </u> | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- The Department requests (\$1,408,835) total funds, including \$0 General Fund, (\$563,835) cash funds, and (\$845,000) reappropriated funds in FY 2016-17, \$306,726 total funds, including \$0 General Fund, \$1,151,726 cash funds, and (\$845,000) reappropriated funds in FY 2017-18, and \$230,045 total funds, including \$0 General Fund, \$913,795 cash funds, and (\$683,750) reappropriated funds in FY 2018-19 to support the operation of the Cross-System Response for Behavioral Health Crises Pilot Program (pilot program) created by HB 15-1368 “Cross-System Response for Behavioral Health Crises Pilot Program”.

Current Program

- The pilot program serves to assist individuals with an intellectual and developmental disability and co-occurring behavioral disorder by providing crisis intervention and stabilization services as well as facilitating enrollment, locating, coordinating and monitoring needed Home and Community-Based Services (HCBS) waiver services. Additionally, the pilot program is designed to assist with coordinating other non-waiver resources including, but not limited to, psychiatric, medical, social, educational care and other resources to ensure an individual served through the pilot program receives the supports necessary to mitigate future behavioral health crises.
- The Department is currently contracted with Rocky Mountain Health Plans to implement the pilot program with locations in the Grand Junction and Fort Collins areas.

Problem or Opportunity

- The Department has identified a problem in the language surrounding the current appropriation for the pilot program that exist in the Department’s section of HB 16-1405 “Long Appropriations Bill” (Long Bill). The language does not explicitly appropriate funding to the pilot program.
- Services paid for through the pilot program are being paid through an operating line in the Long Bill, which is inconsistent with other service payments made by the Department.
- Funds exist that were allocated in FY 2015-16 for the purpose of implementing the pilot program that have reverted to the Cross-System Response for Behavioral Health Crises Pilot Program Fund (pilot program fund). There is an opportunity to re-allocate these funds to the pilot program in FY 2016-17 through FY 2018-19.

Consequences of Problem

- Due to the current language in the Long Bill, the Department does not have the proper spending authority to administer the program and make payments to contractors.
- Without action, the Department may be required to terminate the program due to a lack of available funding.

Proposed Solution

- The Department requests a modification to the language of the Long Bill to explicitly allocate funds to the pilot program.
- The Department requests an appropriation for the funds that reverted to the pilot program fund in FY 2015-16 for operation of the pilot program in FY 2016-17 through FY 2018-19. These funds would be used expand the availability and quality of crises mitigation services for individuals with an intellectual disabilities and behavioral health issues currently offered by the pilot program.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-11, BA-11

Request Detail: HB 15-1368 Cross-System Response for Behavioral Health Crises Pilot Program Spending Authority

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|--|---------------|--------------|
| HB 15-1368 Cross-System Response for Behavioral Health Crises Pilot Program Spending Authority | \$(1,408,835) | \$0 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|--|-------------|--------------|
| HB 15-1368 Cross-System Response for Behavioral Health Crises Pilot Program Spending Authority | \$306,726 | \$0 |

Problem or Opportunity:

The Department has identified a problem in the language surrounding the current appropriation for the Cross-System Response for Behavioral Health Crises Pilot Program (pilot program) that exists in the Department’s section of HB 16-1405 “Long Appropriations Bill” (Long Bill). The language does not explicitly appropriate funding to the pilot program. Additionally, services paid for through the pilot program are being paid through an operating line in the Long Bill, which is inconsistent with other service payments made by the Department. Finally, there is an opportunity to reallocate funds that reverted to the Cross-System Response for Behavioral Health Crises Pilot Program Fund (pilot program fund) in FY 2015-16 for the purpose of providing services to clients seeking assistance through the pilot program in FY 2016-17 through FY 2018-19.

Long Bill Technical Error

The Department has identified an issue with the language surrounding the current appropriation for the program that exist in the Department’s section of the Long Bill in group (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; footnote b. Footnote b states: “These amounts shall be from the Cross-system Response for Behavioral Health Crises Pilot Program line item appropriation within this subsection.” The Department believes this footnote does not create spending authority for the Department from the pilot program fund.

Currently, funds from the Intellectual and Developmental Disabilities Services Cash Fund (IDD Cash Fund) are appropriated to the Cross-system Response for Behavioral Health Crises Pilot Program *line item* in the

Long Bill and then re-appropriated to the (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs line item of the Long Bill for use in the pilot program. With this language, IDD Cash Funds are used to pay for the pilot program without being transferred to the pilot program fund. Section 25.5-10-207(3) C.R.S. states that IDD Cash Funds may be used for either “program costs for adult comprehensive services, adult supported living services, children’s extensive supports services, and family support services for persons with intellectual and developmental disabilities”, “administrative expenses for renewal and redesign of Medicaid home- and community based service waivers relating to intellectual and developmental disabilities”, or “increasing system capacity for home- and community-based intellectual and developmental disabilities, services, and supports”. The Department believes that the implementation of the pilot program does not qualify as an allowable use of IDD Cash Funds under this statute.

Reorganization of Pilot Program Appropriation

Funds for the pilot program are currently appropriated to Long Bill line (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses. Typically, the Department does not pay for client services out of an operating line. This inconsistency in the appropriation for the pilot program makes service payment tracking more difficult and time consuming.

Allocation of Reverted FY 2015-16 Funds to Pilot Program

Funds exist that were allocated in FY 2015-16 for the purpose of implementing the pilot program that have reverted to the pilot program fund. These funds are specifically intended for the “direct and indirect costs associated with implementing the pilot program” per section 25.5-6-412(7), C.R.S. The Department does not currently have spending authority for these funds and without action the funds would likely remain unspent until the pilot program is repealed on July 1, 2019 and funds in the pilot program fund revert to the General Fund. There is an opportunity to use these funds to ensure that the pilot program has the resources needed to provide the highest quality service to all clients who come to the pilot program during a crisis, and to ensure that as much data as possible is able to be collected in order to inform the Department on what would be needed to create a statewide program.

In FY 2015-16 the Department received \$1,695,000 total funds to implement the pilot program. The Department was unable to utilize the entirety of the FY 2015-16 appropriation because implementation was delayed due to the amount of time necessary to complete the Request for Proposal (RFP) process and secure a contractor for the pilot program. As a result, \$817,936 reverted to the pilot program fund at the end of FY 2015-16. summary of the FY 2015-16 appropriation, expenditure, and cash fund reversion is shown in Table 1.1 in the appendix.

Client demand for the Cross-System Response for Behavioral Health Crises Pilot Program (pilot program) has been higher than anticipated. The Department initially expected to serve approximately four clients per month at each of the pilot program sites in Larimer and Mesa counties. However, caseload in both locations has been significantly higher than anticipated in both August and September, showing that the program is meeting a previously unmet service need. The Department and the contractor overseeing the pilot program believe that the program will continue to experience similarly elevated caseload levels in future months as clients continue to seek services through the program. The higher than anticipated volume of clients also

creates a need for additional funding for the pilot program to have the capacity to adequately serve all clients seeking services.

FY 2018-19 Program Budget

Although the program has a statutory end date of March 1, 2019, the Legislative Council fiscal note for HB 15-1368 did not identify expected appropriations for FY 2018-19. Because the program is cash funded, and is not part of an entitlement program, adequate appropriations are needed in FY 2018-19 to ensure that the program can continue to operate without modifications through the statutory end date of the program. To the extent possible, the Department and its contractors needs to know how much money is expected to be appropriated in FY 2018-19 to allow for adequate planning for the last year of the pilot program.

Proposed Solution:

The Department requests modifications to the Long Bill and to allocate reverted pilot program funds to the pilot program. The Department requests (\$1,408,835) total funds, including \$0 General Fund, (\$563,835) cash funds, and (\$845,000) reappropriated funds in FY 2016-17, \$306,726 total funds, including \$0 General Fund, \$1,151,726 cash funds, and (\$845,000) reappropriated funds in FY 2017-18, and \$230,045 total funds, including \$0 General Fund, \$913,795 cash funds, and (\$683,750) reappropriated funds in FY 2018-19 to support the operation of the pilot program created by HB 15-1368 “Cross-System Response for Behavioral Health Crises Pilot Program”. These funds would consist of pilot program cash funds that reverted to the pilot program cash fund in FY 2015-16. Funds would be used to provide continued crises mitigation services to clients with an intellectual and developmental disability (IDD) and a behavioral health issue.

Long Bill Technical Error

In order to explicitly appropriate pilot program fund dollars to the pilot program, the Department requests to make the following modification to footnote b in section (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs of the Long Bill:

b These amounts shall be from the Cross-system Response for Behavioral Health Crises Pilot Program ~~line item appropriation within this subsection.~~ FUND CREATED IN SECTION 25.5-6-412 (7) C.R.S.

Reorganization of Pilot Program Appropriation

In order to avoid paying for services from an operating line, the Department requests to move all funds appropriated for the pilot program for client services when no other payer can be found. Funds would also be used for facility upkeep, furnishings, travel, and other business necessities required to maintain the pilot program. In order to provide services, the pilot program currently has sub-contracts with a team of direct support professionals, case managers, behavioral counselors, program managers, and maintenance staff. Continued funding for these professionals would ensure that all clients who come to the pilot program continue to be served by a complete and well qualified team that has the capacity to give each client the best possible experience and outcome in their time of crisis. While continued funding for business necessities would ensure that the program has the capacity to cope with higher than expected caseload, that clients are receiving services in the best possible conditions, and that staff have the tools that they need to successfully provide services.

The Department also requests roll forward authority for the FY 2016-17 appropriation. Because the pilot program is statutorily required to serve eligible clients regardless of payer¹, the program is constantly adapting its service delivery systems to account for anticipated caseload in an effort to stay within its budget. The Department believes that it is most likely that funds requested for FY 2016-17 are needed and would be utilized in FY 2016-17, but recognizes the potentiality that these funds are underutilized and reverted due to variability in caseload or cost-reducing process improvement. Roll forward authority would address both contingencies and ensure that funds are available when needed in the face of uncertain caseload and expenditure in the final months of FY 2016-17.

Anticipated Outcomes:

Approving the requested modifications to the Long Bill would ensure that the pilot program maintains access to appropriated funding. Without the technical corrections to the Long Bill, the Department may be required to terminate the program due to a lack of spending authority. Further, moving the appropriation to a specific program line item from an operating line item would allow for easier tracking and reporting of expenditure for the pilot program versus expenditure on Department resources needed to operate the pilot program.

By appropriating the reverted funding from FY 2015-16 to FY 2016-17 through FY 2018-19, the Department would be able to ensure that the program serves the largest number of clients possible. Although existing data is preliminary, because the program has just started, demand for these services appears high, and there is already a potential for clients to be turned away from the program due to lack of funding. If the reverted funding is appropriated to the program, the pilot program would have a greater chance of successfully meeting the Department's long-range goal of improving health for low-income and vulnerable Coloradans through delivery systems innovation. Without additional funding the pilot program would continue to operate within existing funding, limiting the resources available to serve each client and reducing service quality.

Assumptions and Calculations:

The Department is requesting only the amount of funding that was appropriated to the pilot program in FY 2015-16, was unspent, and reverted to the pilot program fund. Under this constraint the Department assumes that expenditure will be consistent for each month of the pilot program, and funding would be allocated based on the number of operational months in each fiscal year.

For informational purposes only, the Department has broken out expected expenditure in to the following sub-categories: personnel, operating, occupancy, indirect costs, revenue offsets. The amount of expected expenditure in each of these categories is based on the categories fraction of total expenditure in the first three months of FY 2016-17.

The Legislative Council fiscal note for HB 15-1368 "Cross-System Response for Behavioral Health Crises Pilot Program" does not include an appropriation for FY 2018-19, while the bill states that the program ends on March 1, 2019. The Department assumes that it has an appropriation in FY 2018-19 equivalent to three-fourths of the operational appropriation in FY 2017-18, and a full year of funding for the FTE, program

¹ See 25.5-6-412(5)(a) C.R.S. which states: "The pilot program will provide support to eligible individuals to obtain the additional necessary services, regardless of the appropriate payer."

evaluation, and actuarial analysis to perform data collection and analysis. This assumption can be seen in Table 2.1 Row A. Table 5.1 provides a complete budget for the program through FY 2018-19.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

A technical error exists in the language of the Long Bill as it does not explicitly allocate funding to the pilot from the specific cash fund created for the pilot program. This request corrects for this technical error.

| Table 1.1 Request Components by Line Item FY 2016-17 | | | | | | | | |
|--|--|----------------------|------------|--------------|--------------------|----------------------|---------------|--|
| Row | Appropriation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes |
| A | Total Request | (\$1,408,835) | 0.0 | \$0 | (\$563,835) | (\$845,000) | \$0 | Row B + Row C + Row D |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 | Table 4.1 Row B |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | (\$769,050) | 0.0 | \$0 | \$950 | (\$770,000) | \$0 | Table 4.2 Row A |
| D | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | (\$639,785) | 0.0 | \$0 | (\$639,785) | \$0 | \$0 | Table 2.1 Row B - Current \$1,690,000 Appropriation from Intellectual and Developmental Disabilities Services Fund |

| Table 1.2 Request Components by Line Item FY 2017-18 | | | | | | | | |
|--|--|------------------|------------|--------------|--------------------|----------------------|---------------|------------------------------|
| Row | Appropriation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes |
| A | Total Request | \$306,726 | 0.0 | \$0 | \$1,151,726 | (\$845,000) | \$0 | Row B + Row C + Row D |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 | Table 4.1 Row B |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | (\$769,050) | 0.0 | \$0 | \$950 | (\$770,000) | \$0 | Table 4.2 Row A |
| D | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | \$1,075,776 | 0.0 | \$0 | \$1,075,776 | \$0 | \$0 | Table 2.1 Row B |

| Table 1.3 Request Components by Line Item FY 2018-19 | | | | | | | | |
|--|--|------------------|------------|--------------|------------------|----------------------|---------------|------------------------------|
| Row | Appropriation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes |
| A | Total Request | \$230,045 | 0.0 | \$0 | \$913,795 | (\$683,750) | \$0 | Row B + Row C + Row D |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 | Table 4.1 Row B |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | (\$607,800) | 0.0 | \$0 | \$950 | (\$608,750) | \$0 | Table 4.2 Row A |
| D | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | \$837,845 | 0.0 | \$0 | \$837,845 | \$0 | \$0 | Table 2.1 Row B |

| Table 2.1 - Summary of Projected Expenditure and Requested Funding | | | | | |
|---|---------------------------------------|-------------------|-------------------|---------------------------------|--|
| Row | Item | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Notes |
| A | Current Appropriation | \$845,000 | \$845,000 | \$683,750 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| B | Total Expected Pilot Program Expenses | \$1,126,165 | \$1,151,726 | \$913,795 | Table 2.2 Row D |
| C | Funding Requested | \$281,165 | \$306,726 | \$230,045 | Row B - Row A |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 2.2 - Summary of Projected Expenditure and Requested Funding | | | | | | | |
|---|--------------------------------------|-------------------|--------------------|--------------------|---------------------------------|--------------------|---|
| Row | Item | FY 2015-16 | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Total | Notes |
| A | Current Appropriation | \$1,695,000 | \$845,000 | \$845,000 | \$683,750 | \$4,068,750 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| B | Anticipated Operational Months | | 11 | 12 | 9 | 32 | Table 2.3 Row D |
| C | Requested Additional Funding | | \$281,165 | \$306,726 | \$230,045 | \$817,936 | Row B * Table 2.3 Row F |
| D | Total Anticipated Expenditure | \$877,064 | \$1,126,165 | \$1,151,726 | \$913,795 | \$4,068,750 | Row A + Row C |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 2.3 Requested Funding Per-Operational Program Month | | | |
|--|---|--------------------|---|
| Row | Item | Value | Notes |
| A | Operational Months in FY 2016-17 | 11 | Program Became Operational in August, 2016 |
| B | Operational Months in FY 2017-18 | 12 | Program Expected to Operate through March 1, 2019 |
| C | Operational Months in FY 2018-19 | 9 | Program Expected to Operate through March 1, 2019 |
| D | Total Operational Months from FY 2016-17 Through FY 2018-19 | 32 | Sum of Row A through C |
| E | FY 2015-16 Reversion | \$817,936 | Table 3.1 Row G |
| F | Total Available Funding Per-Operational Month | \$25,560.50 | Row E / Row D |

| Table 3.1 - FY 2015-16 Expenditure and Cash Fund Reversion | | | |
|---|---|-------------------|---|
| Row | Item | FY 2015-16 | Notes |
| A | FY 2015-16 Appropriation | \$1,695,000 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| <i>FY 2015-16 Expenditure by Activity</i> | | | |
| B | Project Manager - FTE | \$22,109 | Actuals |
| C | Capital Improvements | \$384,149 | Actuals |
| D | Operating Expenses | \$432,236 | Actuals |
| E | Actuarial Analysis | \$38,570 | Actuals |
| F | Total Expenses in FY 2015-16 | \$877,064 | Sum of Row B Through Row E |
| G | FY 2015-16 Reversion to Cross-System Response for Behavioral Health Crises Cash Fund | \$817,936 | Row A - Row F |

| Table 4.1 - Breakout of Program Operation and FTE Expenses | | | | | |
|---|---|-------------------|-------------------|---------------------------------|---|
| Row | Item | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Notes |
| A | Current Appropriation | \$845,000 | \$845,000 | \$683,750 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| B | Existing Appropriation for Project Manager FTE | \$75,000 | \$75,000 | \$75,000 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| C | Existing Appropriation Project Manager FTE Operating and Phone Expenses | \$950 | \$950 | \$950 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| D | Existing Appropriation for Program Operation | \$769,050 | \$769,050 | \$607,800 | Row A - Row B - Row C |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 4.2 - Request Summary and Breakout of FTE Expenses | | | | | |
|---|--|--------------------|--------------------|---------------------------------|----------------------|
| Row | Item | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Notes |
| A | Existing Appropriation for Program Operation | \$769,050 | \$769,050 | \$607,800 | Table 4.1 Row D |
| B | Funding Requested | \$281,165 | \$306,726 | \$230,045 | Table 2.1 Row C |
| C | Requested Appropriation Excluding FTE Costs | \$1,050,215 | \$1,075,776 | \$837,845 | Row A + Row B |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 5.1 - Pilot Program Expenditure and Actuals by Initiative | | | | | | | |
|--|--|---------------------------------|--------------------|--------------------|---------------------------------|--------------------|---|
| Row | Item | FY 2015-16⁽¹⁾ | FY 2016-17 | FY 2017-18 | FY 2018-19⁽²⁾ | Total | Notes |
| A | Projected Expenses for Oversight and Evaluation | \$60,679 | \$200,000 | \$200,000 | \$200,000 | \$660,679 | Sum of Rows B through D |
| B | FTE for Project Oversight | \$22,109 | \$75,000 | \$75,000 | \$75,000 | \$247,109 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| C | Program Evaluation | \$0 | \$50,000 | \$50,000 | \$50,000 | \$150,000 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| D | Actuarial Analysis | \$38,570 | \$75,000 | \$75,000 | \$75,000 | \$263,570 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| E | Projected Expenses for Pilot Operation | \$432,236 | \$926,165 | \$951,726 | \$713,795 | \$3,023,922 | Sum of Rows F through J |
| F | Personnel | \$0 | \$860,442 | \$884,189 | \$663,142 | \$2,407,773 | Based on FY 2016-17 Expenditure data through September 2016 |
| G | Operating | \$0 | \$22,790 | \$23,419 | \$17,564 | \$63,773 | Based on FY 2016-17 Expenditure data through September 2016 |
| H | Occupancy | \$0 | \$89,132 | \$91,592 | \$68,694 | \$249,418 | Based on FY 2016-17 Expenditure data through September 2016 |
| I | Indirect Costs | \$0 | \$3,564 | \$3,662 | \$2,747 | \$9,973 | Based on FY 2016-17 Expenditure data through September 2016 |
| J | Revenue Offsets | \$0 | (\$49,762) | (\$51,136) | (\$38,352) | (\$139,250) | Based on FY 2016-17 Expenditure data through September 2016 |
| K | Expenses for Capital Improvements | \$384,149 | \$0 | \$0 | \$0 | \$384,149 | Actuals |
| L | Total Expected Pilot Program Expenses | \$877,064 | \$1,126,165 | \$1,151,726 | \$913,795 | \$4,068,750 | Row A + Row E + Row K |

(1) All expenses for FY 2015-16 are actuals. Sub-category data for pilot operation are not available for FY 2015-16.

(2) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 5.2 Request Components by Line Item FY 2016-17 | | | | | | | |
|---|--|-------------------|--------------------|--------------------|-------------------|--------------------|---|
| Row | Item | FY 2015-16 | FY 2016-17 | FY 2017-18 | FY 2018-19 | Total | Notes |
| A | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$22,109 | \$75,000 | \$75,000 | \$75,000 | \$247,109 | Table 5.1 Row B |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | \$854,955 | \$950 | \$950 | \$950 | \$857,805 | FY 2015-16: Table 5.1 Row D + Row E + Row K FY 2016-17 - FY 2018-19: Table 4.1 Row C |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | \$0 | \$1,050,215 | \$1,075,776 | \$837,845 | \$2,963,836 | Table 4.2 Row C |
| D | Total | \$877,064 | \$1,126,165 | \$1,151,726 | \$913,795 | \$4,068,750 | Row A + Row B + Row C |


Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-11 HB 15-1368 Cross-System Response Pilot Spending
BA-11 HB 15-1368 Cross System Response Pilot Spending**

Dept. Approval By: Josh Block  1/3/17 X Supplemental FY 2016-17

OSPB Approval By: Erin A. Smith 12/29/16 X Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$5,824,521 | (\$1,408,835) | \$4,161,991 | \$306,726 | \$230,045 |
| FTE | | 35.5 | 0.0 | 35.5 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$1,576,497 | \$0 | \$1,584,195 | \$0 | \$0 |
| | CF | \$1,876,331 | (\$563,835) | \$189,456 | \$1,151,726 | \$913,795 |
| | RF | \$845,000 | (\$845,000) | \$846,579 | (\$845,000) | (\$683,750) |
| | FF | \$1,526,693 | \$0 | \$1,541,761 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$3,063,982 | \$0 | \$3,096,155 | \$0 | \$0 |
| FTE | | 35.5 | 0.0 | 35.5 | 0.0 | 0.0 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Administrative Costs - Personal Services | GF | \$1,431,598 | \$0 | \$1,439,296 | \$0 | \$0 |
| | CF | \$182,080 | \$75,000 | \$187,556 | \$75,000 | \$75,000 |
| | RF | \$75,000 | (\$75,000) | \$76,579 | (\$75,000) | (\$75,000) |
| | FF | \$1,375,304 | \$0 | \$1,392,724 | \$0 | \$0 |

| | | | | | | |
|--|--------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| | Total | \$1,070,539 | (\$769,050) | \$1,065,836 | (\$769,050) | (\$607,800) |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Administrative Costs - Operating Expenses | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$144,899 | \$0 | \$144,899 | \$0 | \$0 |
| | CF | \$4,251 | \$950 | \$1,900 | \$950 | \$950 |
| | RF | \$770,000 | (\$770,000) | \$770,000 | (\$770,000) | (\$608,750) |
| | FF | \$151,389 | \$0 | \$149,037 | \$0 | \$0 |

| | | | | | | |
|--|--------------|--------------------|--------------------|------------|--------------------|------------------|
| | Total | \$1,690,000 | (\$639,785) | \$0 | \$1,075,776 | \$837,845 |
| 04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (1) Program Costs - Appropriation to the BH Crisis Pilot Program Fund | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | CF | \$1,690,000 | (\$639,785) | \$0 | \$1,075,776 | \$837,845 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$0 | \$0 | \$0 | \$0 |

| | | | | | |
|---|--|---------------|----|---------------|---|
| CF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <u>X</u> | No | <u> </u> | |
| FF Letternote Text Revision Required? | Yes | <u> </u> | No | <u>X</u> | |
| Requires Legislation? | Yes | <u> </u> | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- The Department requests (\$1,408,835) total funds, including \$0 General Fund, (\$563,835) cash funds, and (\$845,000) reappropriated funds in FY 2016-17, \$306,726 total funds, including \$0 General Fund, \$1,151,726 cash funds, and (\$845,000) reappropriated funds in FY 2017-18, and \$230,045 total funds, including \$0 General Fund, \$913,795 cash funds, and (\$683,750) reappropriated funds in FY 2018-19 to support the operation of the Cross-System Response for Behavioral Health Crises Pilot Program (pilot program) created by HB 15-1368 “Cross-System Response for Behavioral Health Crises Pilot Program”.

Current Program

- The pilot program serves to assist individuals with an intellectual and developmental disability and co-occurring behavioral disorder by providing crisis intervention and stabilization services as well as facilitating enrollment, locating, coordinating and monitoring needed Home and Community-Based Services (HCBS) waiver services. Additionally, the pilot program is designed to assist with coordinating other non-waiver resources including, but not limited to, psychiatric, medical, social, educational care and other resources to ensure an individual served through the pilot program receives the supports necessary to mitigate future behavioral health crises.
- The Department is currently contracted with Rocky Mountain Health Plans to implement the pilot program with locations in the Grand Junction and Fort Collins areas.

Problem or Opportunity

- The Department has identified a problem in the language surrounding the current appropriation for the pilot program that exist in the Department’s section of HB 16-1405 “Long Appropriations Bill” (Long Bill). The language does not explicitly appropriate funding to the pilot program.
- Services paid for through the pilot program are being paid through an operating line in the Long Bill, which is inconsistent with other service payments made by the Department.
- Funds exist that were allocated in FY 2015-16 for the purpose of implementing the pilot program that have reverted to the Cross-System Response for Behavioral Health Crises Pilot Program Fund (pilot program fund). There is an opportunity to re-allocate these funds to the pilot program in FY 2016-17 through FY 2018-19.

Consequences of Problem

- Due to the current language in the Long Bill, the Department does not have the proper spending authority to administer the program and make payments to contractors.
- Without action, the Department may be required to terminate the program due to a lack of available funding.

Proposed Solution

- The Department requests a modification to the language of the Long Bill to explicitly allocate funds to the pilot program.
- The Department requests an appropriation for the funds that reverted to the pilot program fund in FY 2015-16 for operation of the pilot program in FY 2016-17 through FY 2018-19. These funds would be used expand the availability and quality of crises mitigation services for individuals with an intellectual disabilities and behavioral health issues currently offered by the pilot program.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-11, BA-11

Request Detail: HB 15-1368 Cross-System Response for Behavioral Health Crises Pilot Program Spending Authority

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|--|---------------|--------------|
| HB 15-1368 Cross-System Response for Behavioral Health Crises Pilot Program Spending Authority | \$(1,408,835) | \$0 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|--|-------------|--------------|
| HB 15-1368 Cross-System Response for Behavioral Health Crises Pilot Program Spending Authority | \$306,726 | \$0 |

Problem or Opportunity:

The Department has identified a problem in the language surrounding the current appropriation for the Cross-System Response for Behavioral Health Crises Pilot Program (pilot program) that exists in the Department’s section of HB 16-1405 “Long Appropriations Bill” (Long Bill). The language does not explicitly appropriate funding to the pilot program. Additionally, services paid for through the pilot program are being paid through an operating line in the Long Bill, which is inconsistent with other service payments made by the Department. Finally, there is an opportunity to reallocate funds that reverted to the Cross-System Response for Behavioral Health Crises Pilot Program Fund (pilot program fund) in FY 2015-16 for the purpose of providing services to clients seeking assistance through the pilot program in FY 2016-17 through FY 2018-19.

Long Bill Technical Error

The Department has identified an issue with the language surrounding the current appropriation for the program that exist in the Department’s section of the Long Bill in group (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; footnote b. Footnote b states: “These amounts shall be from the Cross-system Response for Behavioral Health Crises Pilot Program line item appropriation within this subsection.” The Department believes this footnote does not create spending authority for the Department from the pilot program fund.

Currently, funds from the Intellectual and Developmental Disabilities Services Cash Fund (IDD Cash Fund) are appropriated to the Cross-system Response for Behavioral Health Crises Pilot Program *line item* in the

Long Bill and then re-appropriated to the (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs line item of the Long Bill for use in the pilot program. With this language, IDD Cash Funds are used to pay for the pilot program without being transferred to the pilot program fund. Section 25.5-10-207(3) C.R.S. states that IDD Cash Funds may be used for either “program costs for adult comprehensive services, adult supported living services, children’s extensive supports services, and family support services for persons with intellectual and developmental disabilities”, “administrative expenses for renewal and redesign of Medicaid home- and community based service waivers relating to intellectual and developmental disabilities”, or “increasing system capacity for home- and community-based intellectual and developmental disabilities, services, and supports”. The Department believes that the implementation of the pilot program does not qualify as an allowable use of IDD Cash Funds under this statute.

Reorganization of Pilot Program Appropriation

Funds for the pilot program are currently appropriated to Long Bill line (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses. Typically, the Department does not pay for client services out of an operating line. This inconsistency in the appropriation for the pilot program makes service payment tracking more difficult and time consuming.

Allocation of Reverted FY 2015-16 Funds to Pilot Program

Funds exist that were allocated in FY 2015-16 for the purpose of implementing the pilot program that have reverted to the pilot program fund. These funds are specifically intended for the “direct and indirect costs associated with implementing the pilot program” per section 25.5-6-412(7), C.R.S. The Department does not currently have spending authority for these funds and without action the funds would likely remain unspent until the pilot program is repealed on July 1, 2019 and funds in the pilot program fund revert to the General Fund. There is an opportunity to use these funds to ensure that the pilot program has the resources needed to provide the highest quality service to all clients who come to the pilot program during a crisis, and to ensure that as much data as possible is able to be collected in order to inform the Department on what would be needed to create a statewide program.

In FY 2015-16 the Department received \$1,695,000 total funds to implement the pilot program. The Department was unable to utilize the entirety of the FY 2015-16 appropriation because implementation was delayed due to the amount of time necessary to complete the Request for Proposal (RFP) process and secure a contractor for the pilot program. As a result, \$817,936 reverted to the pilot program fund at the end of FY 2015-16. summary of the FY 2015-16 appropriation, expenditure, and cash fund reversion is shown in Table 1.1 in the appendix.

Client demand for the Cross-System Response for Behavioral Health Crises Pilot Program (pilot program) has been higher than anticipated. The Department initially expected to serve approximately four clients per month at each of the pilot program sites in Larimer and Mesa counties. However, caseload in both locations has been significantly higher than anticipated in both August and September, showing that the program is meeting a previously unmet service need. The Department and the contractor overseeing the pilot program believe that the program will continue to experience similarly elevated caseload levels in future months as clients continue to seek services through the program. The higher than anticipated volume of clients also

creates a need for additional funding for the pilot program to have the capacity to adequately serve all clients seeking services.

FY 2018-19 Program Budget

Although the program has a statutory end date of March 1, 2019, the Legislative Council fiscal note for HB 15-1368 did not identify expected appropriations for FY 2018-19. Because the program is cash funded, and is not part of an entitlement program, adequate appropriations are needed in FY 2018-19 to ensure that the program can continue to operate without modifications through the statutory end date of the program. To the extent possible, the Department and its contractors needs to know how much money is expected to be appropriated in FY 2018-19 to allow for adequate planning for the last year of the pilot program.

Proposed Solution:

The Department requests modifications to the Long Bill and to allocate reverted pilot program funds to the pilot program. The Department requests (\$1,408,835) total funds, including \$0 General Fund, (\$563,835) cash funds, and (\$845,000) reappropriated funds in FY 2016-17, \$306,726 total funds, including \$0 General Fund, \$1,151,726 cash funds, and (\$845,000) reappropriated funds in FY 2017-18, and \$230,045 total funds, including \$0 General Fund, \$913,795 cash funds, and (\$683,750) reappropriated funds in FY 2018-19 to support the operation of the pilot program created by HB 15-1368 “Cross-System Response for Behavioral Health Crises Pilot Program”. These funds would consist of pilot program cash funds that reverted to the pilot program cash fund in FY 2015-16. Funds would be used to provide continued crises mitigation services to clients with an intellectual and developmental disability (IDD) and a behavioral health issue.

Long Bill Technical Error

In order to explicitly appropriate pilot program fund dollars to the pilot program, the Department requests to make the following modification to footnote b in section (4) Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs of the Long Bill:

b These amounts shall be from the Cross-system Response for Behavioral Health Crises Pilot Program ~~line item appropriation within this subsection.~~ FUND CREATED IN SECTION 25.5-6-412 (7) C.R.S.

Reorganization of Pilot Program Appropriation

In order to avoid paying for services from an operating line, the Department requests to move all funds appropriated for the pilot program for client services when no other payer can be found. Funds would also be used for facility upkeep, furnishings, travel, and other business necessities required to maintain the pilot program. In order to provide services, the pilot program currently has sub-contracts with a team of direct support professionals, case managers, behavioral counselors, program managers, and maintenance staff. Continued funding for these professionals would ensure that all clients who come to the pilot program continue to be served by a complete and well qualified team that has the capacity to give each client the best possible experience and outcome in their time of crisis. While continued funding for business necessities would ensure that the program has the capacity to cope with higher than expected caseload, that clients are receiving services in the best possible conditions, and that staff have the tools that they need to successfully provide services.

The Department also requests roll forward authority for the FY 2016-17 appropriation. Because the pilot program is statutorily required to serve eligible clients regardless of payer¹, the program is constantly adapting its service delivery systems to account for anticipated caseload in an effort to stay within its budget. The Department believes that it is most likely that funds requested for FY 2016-17 are needed and would be utilized in FY 2016-17, but recognizes the potentiality that these funds are underutilized and reverted due to variability in caseload or cost-reducing process improvement. Roll forward authority would address both contingencies and ensure that funds are available when needed in the face of uncertain caseload and expenditure in the final months of FY 2016-17.

Anticipated Outcomes:

Approving the requested modifications to the Long Bill would ensure that the pilot program maintains access to appropriated funding. Without the technical corrections to the Long Bill, the Department may be required to terminate the program due to a lack of spending authority. Further, moving the appropriation to a specific program line item from an operating line item would allow for easier tracking and reporting of expenditure for the pilot program versus expenditure on Department resources needed to operate the pilot program.

By appropriating the reverted funding from FY 2015-16 to FY 2016-17 through FY 2018-19, the Department would be able to ensure that the program serves the largest number of clients possible. Although existing data is preliminary, because the program has just started, demand for these services appears high, and there is already a potential for clients to be turned away from the program due to lack of funding. If the reverted funding is appropriated to the program, the pilot program would have a greater chance of successfully meeting the Department's long-range goal of improving health for low-income and vulnerable Coloradans through delivery systems innovation. Without additional funding the pilot program would continue to operate within existing funding, limiting the resources available to serve each client and reducing service quality.

Assumptions and Calculations:

The Department is requesting only the amount of funding that was appropriated to the pilot program in FY 2015-16, was unspent, and reverted to the pilot program fund. Under this constraint the Department assumes that expenditure will be consistent for each month of the pilot program, and funding would be allocated based on the number of operational months in each fiscal year.

For informational purposes only, the Department has broken out expected expenditure in to the following sub-categories: personnel, operating, occupancy, indirect costs, revenue offsets. The amount of expected expenditure in each of these categories is based on the categories fraction of total expenditure in the first three months of FY 2016-17.

The Legislative Council fiscal note for HB 15-1368 "Cross-System Response for Behavioral Health Crises Pilot Program" does not include an appropriation for FY 2018-19, while the bill states that the program ends on March 1, 2019. The Department assumes that it has an appropriation in FY 2018-19 equivalent to three-fourths of the operational appropriation in FY 2017-18, and a full year of funding for the FTE, program

¹ See 25.5-6-412(5)(a) C.R.S. which states: "The pilot program will provide support to eligible individuals to obtain the additional necessary services, regardless of the appropriate payer."

evaluation, and actuarial analysis to perform data collection and analysis. This assumption can be seen in Table 2.1 Row A. Table 5.1 provides a complete budget for the program through FY 2018-19.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

A technical error exists in the language of the Long Bill as it does not explicitly allocate funding to the pilot from the specific cash fund created for the pilot program. This request corrects for this technical error.

| Table 1.1 Request Components by Line Item FY 2016-17 | | | | | | | | |
|--|--|----------------------|------------|--------------|--------------------|----------------------|---------------|--|
| Row | Appropriation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes |
| A | Total Request | (\$1,408,835) | 0.0 | \$0 | (\$563,835) | (\$845,000) | \$0 | Row B + Row C + Row D |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 | Table 4.1 Row B |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | (\$769,050) | 0.0 | \$0 | \$950 | (\$770,000) | \$0 | Table 4.2 Row A |
| D | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | (\$639,785) | 0.0 | \$0 | (\$639,785) | \$0 | \$0 | Table 2.1 Row B - Current \$1,690,000 Appropriation from Intellectual and Developmental Disabilities Services Fund |

| Table 1.2 Request Components by Line Item FY 2017-18 | | | | | | | | |
|--|--|------------------|------------|--------------|--------------------|----------------------|---------------|------------------------------|
| Row | Appropriation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes |
| A | Total Request | \$306,726 | 0.0 | \$0 | \$1,151,726 | (\$845,000) | \$0 | Row B + Row C + Row D |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 | Table 4.1 Row B |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | (\$769,050) | 0.0 | \$0 | \$950 | (\$770,000) | \$0 | Table 4.2 Row A |
| D | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | \$1,075,776 | 0.0 | \$0 | \$1,075,776 | \$0 | \$0 | Table 2.1 Row B |

| Table 1.3 Request Components by Line Item FY 2018-19 | | | | | | | | |
|--|--|------------------|------------|--------------|------------------|----------------------|---------------|------------------------------|
| Row | Appropriation | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes |
| A | Total Request | \$230,045 | 0.0 | \$0 | \$913,795 | (\$683,750) | \$0 | Row B + Row C + Row D |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$0 | 0.0 | \$0 | \$75,000 | (\$75,000) | \$0 | Table 4.1 Row B |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | (\$607,800) | 0.0 | \$0 | \$950 | (\$608,750) | \$0 | Table 4.2 Row A |
| D | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | \$837,845 | 0.0 | \$0 | \$837,845 | \$0 | \$0 | Table 2.1 Row B |

| Table 2.1 - Summary of Projected Expenditure and Requested Funding | | | | | |
|---|---------------------------------------|-------------------|-------------------|---------------------------------|--|
| Row | Item | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Notes |
| A | Current Appropriation | \$845,000 | \$845,000 | \$683,750 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| B | Total Expected Pilot Program Expenses | \$1,126,165 | \$1,151,726 | \$913,795 | Table 2.2 Row D |
| C | Funding Requested | \$281,165 | \$306,726 | \$230,045 | Row B - Row A |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 2.2 - Summary of Projected Expenditure and Requested Funding | | | | | | | |
|---|--------------------------------------|-------------------|--------------------|--------------------|---------------------------------|--------------------|---|
| Row | Item | FY 2015-16 | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Total | Notes |
| A | Current Appropriation | \$1,695,000 | \$845,000 | \$845,000 | \$683,750 | \$4,068,750 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| B | Anticipated Operational Months | | 11 | 12 | 9 | 32 | Table 2.3 Row D |
| C | Requested Additional Funding | | \$281,165 | \$306,726 | \$230,045 | \$817,936 | Row B * Table 2.3 Row F |
| D | Total Anticipated Expenditure | \$877,064 | \$1,126,165 | \$1,151,726 | \$913,795 | \$4,068,750 | Row A + Row C |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 2.3 Requested Funding Per-Operational Program Month | | | |
|--|---|--------------------|---|
| Row | Item | Value | Notes |
| A | Operational Months in FY 2016-17 | 11 | Program Became Operational in August, 2016 |
| B | Operational Months in FY 2017-18 | 12 | Program Expected to Operate through March 1, 2019 |
| C | Operational Months in FY 2018-19 | 9 | Program Expected to Operate through March 1, 2019 |
| D | Total Operational Months from FY 2016-17 Through FY 2018-19 | 32 | Sum of Row A through C |
| E | FY 2015-16 Reversion | \$817,936 | Table 3.1 Row G |
| F | Total Available Funding Per-Operational Month | \$25,560.50 | Row E / Row D |

| Table 3.1 - FY 2015-16 Expenditure and Cash Fund Reversion | | | |
|---|---|-------------------|---|
| Row | Item | FY 2015-16 | Notes |
| A | FY 2015-16 Appropriation | \$1,695,000 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| <i>FY 2015-16 Expenditure by Activity</i> | | | |
| B | Project Manager - FTE | \$22,109 | Actuals |
| C | Capital Improvements | \$384,149 | Actuals |
| D | Operating Expenses | \$432,236 | Actuals |
| E | Actuarial Analysis | \$38,570 | Actuals |
| F | Total Expenses in FY 2015-16 | \$877,064 | Sum of Row B Through Row E |
| G | FY 2015-16 Reversion to Cross-System Response for Behavioral Health Crises Cash Fund | \$817,936 | Row A - Row F |

| Table 4.1 - Breakout of Program Operation and FTE Expenses | | | | | |
|---|---|-------------------|-------------------|---------------------------------|---|
| Row | Item | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Notes |
| A | Current Appropriation | \$845,000 | \$845,000 | \$683,750 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| B | Existing Appropriation for Project Manager FTE | \$75,000 | \$75,000 | \$75,000 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| C | Existing Appropriation Project Manager FTE Operating and Phone Expenses | \$950 | \$950 | \$950 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| D | Existing Appropriation for Program Operation | \$769,050 | \$769,050 | \$607,800 | Row A - Row B - Row C |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 4.2 - Request Summary and Breakout of FTE Expenses | | | | | |
|---|--|--------------------|--------------------|---------------------------------|----------------------|
| Row | Item | FY 2016-17 | FY 2017-18 | FY 2018-19⁽¹⁾ | Notes |
| A | Existing Appropriation for Program Operation | \$769,050 | \$769,050 | \$607,800 | Table 4.1 Row D |
| B | Funding Requested | \$281,165 | \$306,726 | \$230,045 | Table 2.1 Row C |
| C | Requested Appropriation Excluding FTE Costs | \$1,050,215 | \$1,075,776 | \$837,845 | Row A + Row B |

(1) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 5.1 - Pilot Program Expenditure and Actuals by Initiative | | | | | | | |
|--|--|---------------------------------|--------------------|--------------------|---------------------------------|--------------------|---|
| Row | Item | FY 2015-16⁽¹⁾ | FY 2016-17 | FY 2017-18 | FY 2018-19⁽²⁾ | Total | Notes |
| A | Projected Expenses for Oversight and Evaluation | \$60,679 | \$200,000 | \$200,000 | \$200,000 | \$660,679 | Sum of Rows B through D |
| B | FTE for Project Oversight | \$22,109 | \$75,000 | \$75,000 | \$75,000 | \$247,109 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| C | Program Evaluation | \$0 | \$50,000 | \$50,000 | \$50,000 | \$150,000 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| D | Actuarial Analysis | \$38,570 | \$75,000 | \$75,000 | \$75,000 | \$263,570 | Colorado Legislative Council Staff Fiscal Note for HB 15-1368 Cross-System Response Pilot Intellectual Developmental Disability |
| E | Projected Expenses for Pilot Operation | \$432,236 | \$926,165 | \$951,726 | \$713,795 | \$3,023,922 | Sum of Rows F through J |
| F | Personnel | \$0 | \$860,442 | \$884,189 | \$663,142 | \$2,407,773 | Based on FY 2016-17 Expenditure data through September 2016 |
| G | Operating | \$0 | \$22,790 | \$23,419 | \$17,564 | \$63,773 | Based on FY 2016-17 Expenditure data through September 2016 |
| H | Occupancy | \$0 | \$89,132 | \$91,592 | \$68,694 | \$249,418 | Based on FY 2016-17 Expenditure data through September 2016 |
| I | Indirect Costs | \$0 | \$3,564 | \$3,662 | \$2,747 | \$9,973 | Based on FY 2016-17 Expenditure data through September 2016 |
| J | Revenue Offsets | \$0 | (\$49,762) | (\$51,136) | (\$38,352) | (\$139,250) | Based on FY 2016-17 Expenditure data through September 2016 |
| K | Expenses for Capital Improvements | \$384,149 | \$0 | \$0 | \$0 | \$384,149 | Actuals |
| L | Total Expected Pilot Program Expenses | \$877,064 | \$1,126,165 | \$1,151,726 | \$913,795 | \$4,068,750 | Row A + Row E + Row K |

(1) All expenses for FY 2015-16 are actuals. Sub-category data for pilot operation are not available for FY 2015-16.

(2) Expenditure adjusted for March 1, 2019 expected end date for the Pilot Program.

| Table 5.2 Request Components by Line Item FY 2016-17 | | | | | | | |
|---|--|-------------------|--------------------|--------------------|-------------------|--------------------|---|
| Row | Item | FY 2015-16 | FY 2016-17 | FY 2017-18 | FY 2018-19 | Total | Notes |
| A | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Personal Services | \$22,109 | \$75,000 | \$75,000 | \$75,000 | \$247,109 | Table 5.1 Row B |
| B | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Operating Expenses | \$854,955 | \$950 | \$950 | \$950 | \$857,805 | FY 2015-16: Table 5.1 Row D + Row E + Row K FY 2016-17 - FY 2018-19: Table 4.1 Row C |
| C | (4)Office of Community Living; (A) Division of Intellectual and Developmental Disabilities; (1) Administrative Costs; Cross-System Response for Behavioral Health Crises Pilot Program | \$0 | \$1,050,215 | \$1,075,776 | \$837,845 | \$2,963,836 | Table 4.2 Row C |
| D | Total | \$877,064 | \$1,126,165 | \$1,151,726 | \$913,795 | \$4,068,750 | Row A + Row B + Row C |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-12 SB 16-199 PACE Rollforward

Dept. Approval By: Josh Block *[Signature]* 1/13/17 X **Supplemental FY 2016-17**

OSPB Approval By: *[Signature]* 12/29/16 **Budget Amendment FY 2017-18**

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$7,200,237 | \$0 | \$7,755,477 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$2,047,261 | \$0 | \$2,512,381 | \$0 | \$0 |
| | CF | \$1,527,500 | \$0 | \$1,227,500 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$3,625,476 | \$0 | \$4,015,596 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$7,200,237 | \$0 | \$7,755,477 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (A) General Administration - General Professional Services and Special Projects | GF | \$2,047,261 | \$0 | \$2,512,381 | \$0 | \$0 |
| | CF | \$1,527,500 | \$0 | \$1,227,500 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$3,625,476 | \$0 | \$4,015,596 | \$0 | \$0 |

| | | | | |
|---|--|----|----------|---|
| CF Letternote Text Revision Required? | Yes | No | <u>X</u> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | No | <u>X</u> | |
| FF Letternote Text Revision Required? | Yes | No | <u>X</u> | |
| Requires Legislation? | Yes | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | |
| Interagency Approval or Related Schedule 13s: | None | | | |



Cost and FTE

- The Department requests rollforward authority for up to \$225,000 total funds, all comprised of existing donations deposited in the Department of Health Care Policy and Financing Cash Fund (HCPF Cash Fund). These funds would be used to pay the actuarial contractor hired to fulfill the provisions of SB 16-199 “Program of All-inclusive Care for the Elderly” in FY 2017-18.

Current Program

- The Program of All-inclusive Care for the Elderly (PACE) provides long-term services and supports to qualified individuals over the age of 55 in place of nursing facility and Home and Community-Based Services (HCBS) care. Approximately 3,000 Medicaid members are currently enrolled in PACE.
- SB 16-199 requires the Department to develop, with an experienced contractor and the participation of Colorado PACE organizations, an actuarially sound upper-payment limit (UPL) payment methodology that complies with federal PACE law and addresses a PACE-comparable population. The UPL methodology must use grade of membership methods, as well as functional, diagnostic, and other information on the PACE population and its service use and cost characteristics.
- The Department was appropriated \$225,000 in one-time funding from the HCPF Cash Fund for FY 2016-17 for the purpose of developing the new UPL payment methodology.

Problem or Opportunity

- Based on an updated timeline that includes the contract procurement process, the Department estimates that the project will be completed in FY 2017-18. This completion timeline is later than previously anticipated, necessitating rollforward authority of up to \$225,000 from the HCPF cash fund. No new funding is needed.

Consequences of Problem

- The Department would be in violation of statute as it would be unable to fully implement SB 16-199.
- A rollforward on these funds is preferable to the alternative of adjusting appropriations in FY 2016-17 and FY 2017-18. Rollforward authority would give the Department flexibility in paying the contracted actuary over the two fiscal years, even when the project timeline changes.

Proposed Solution

- Approval of rollforward authority would mean the Department could pay the actuarial contractor to complete work on the new UPL payment methodology in FY 2017-18.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-12

Request Detail: SB 16-199 PACE Rollforward

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| SB 16-199 PACE Rollforward | \$0 | \$0 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|---|-------------|--------------|
| SB 16-199 PACE Rollforward | \$0 | \$0 |

Problem or Opportunity:

The Department was appropriated \$225,000 in one-time funding from the Department of Health Care Policy and Financing Cash Fund (HCPF Cash Fund) to implement SB 16-199 “Program of All-inclusive Care for the Elderly” in FY 2016-17. The fiscal note for the bill did not account for the timeline of the competitive procurement process, which has delayed implementation of the bill. The hired contractor will not be able to start work on the development of the new upper payment limit (UPL) payment methodology until spring of FY 2016-17 and the project will not be completed until FY 2017-18, based on a project timeline of eight months. The Department does not have spending authority in FY 2017-18 and therefore needs rollforward authority to reimburse the contracted actuary for its work on SB 16-199 in FY 2017-18.

SB 16-199 requires the Department to develop, with an experienced contractor and the participation of Colorado Program of All-inclusive Care for the Elderly (PACE) organizations, an actuarially sound UPL payment methodology that complies with federal PACE law and addresses a PACE-comparable population. The UPL methodology must use grade of membership methods, as well as functional, diagnostic, and other information on the PACE population and its service use and cost characteristics.

The estimated impact in the fiscal note for SB 16-199 was calculated with the assumption that the actuarial work could be finished by the end of FY 2016-17. Procuring a new contractor through the State’s competitive procurement process has added several months that were not previously factored into the fiscal note. This procurement time, as well as the estimated eight months required to complete the analysis means it is unlikely that the new contractor will begin work on this project until spring of FY 2016-17 and the project will not be

done until sometime in FY 2017-18. The Department does not have the spending authority to reimburse the contractor for work completed in FY 2017-18

Proposed Solution:

The Department requests that the General Assembly add a footnote to the Department's General Professional Services appropriation to allow any unexpended funding for the project in FY 2016-17 to be rolled forward into FY 2017-18. This would enable the Department to pay the contracted actuary for any work that needs to be completed in FY 2017-18 in order to implement SB 16-199.

A rollforward on funds is preferable to the alternative of adjusting appropriations in FY 2016-17 and FY 2017-18. Rollforward authority would give the Department flexibility in paying the contracted actuary over the two fiscal years, even when the project timeline changes. Developing this grade of membership UPL methodology is an involved process that entails comparing metrics of the PACE population to those of a PACE-comparable population that uses nursing facilities and Home and Community-Based Service (HCBS) waivers. The complexity of the actuarial work could lead to unforeseen delays of project deliverables, making rollforward authority a more adaptable solution for a tentative deliverables timeline.

Anticipated Outcomes:

Approval of this request would allow the Department to pay the contracted actuary to complete work related to SB 16-199 in FY 2017-18. If this request is not approved, the Department would not be able to pay the actuary for tasks completed in FY 2017-18. As a result, a new UPL payment methodology could not be developed and the Department would be in violation of statute. One of the Department's Performance Plan goals is to promote rigorous compliance with federal and state laws and regulations, fiscal rules, and internal operating procedures; this request is an example of the Department's commitment to rigorously complying with state laws and state fiscal rules.

PACE is a uniquely integrated program that represents the Department's efforts to use delivery systems innovation to reduce the cost of health care, particularly long-term care for the elderly. PACE represents an alternative to nursing facility care and enables participants to live at home in a more independent manner. The Department is committed to reimbursing PACE providers in a manner that is consistent with efficiency, economy, and the quality of care rendered by providers.

Assumptions and Calculations:

Based on procurement time requirements and the eight-month project timeline provided by an actuary experienced in the grade of membership methodology, the Department assumes that development of the new UPL payment methodology would be completed in FY 2017-18.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

This rollforward supplemental request is being made as a result of an unforeseen contingency. The fiscal note did not account for the additional procurement time needed to hire a new contractor.


Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-13 Medicaid Funding for Connect for Health Colorado
BA-13 Medicaid Funding for Connect for Health Colorado**

Dept. Approval By: Josh Block  1/3/17 Supplemental FY 2016-17

OSPB Approval By: Erick A. Smith 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|--|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$0 | \$5,144,208 | \$0 | \$5,144,208 | \$5,144,208 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$0 | \$1,790,457 | \$0 | \$1,790,457 | \$1,790,457 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$3,353,751 | \$0 | \$3,353,751 | \$3,353,751 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$0 | \$669,757 | \$0 | \$669,757 | \$669,757 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - Connect for Health Colorado Systems | GF | \$0 | \$122,690 | \$0 | \$122,690 | \$122,690 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$547,067 | \$0 | \$547,067 | \$547,067 |
| | Total | \$0 | \$4,474,451 | \$0 | \$4,474,451 | \$4,474,451 |
| 01. Executive Director's Office, (D) Eligibility Determinations and Client Services - Connect for Health Colorado Eligibility Determination | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | GF | \$0 | \$1,667,767 | \$0 | \$1,667,767 | \$1,667,767 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$2,806,684 | \$0 | \$2,806,684 | \$2,806,684 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- The Department requests funding of \$5,144,208 total funds, \$1,790,457 General Fund and \$3,353,751 federal funds in FY 2016-17 and ongoing to reimburse Connect for Health Colorado (C4HCO) for expected costs related to customer service, eligibility determination functions and systems for applicants and clients eligible for Medicaid and the Children’s Health Insurance Program (referred to in Colorado as the Child Health Plan Plus, or “CHP+”).

Current Program

- C4HCO assists individuals, families and small employers across Colorado apply for health insurance and enroll in Qualified Health Plans.
- The Medicaid and CHP+ eligibility determination process is a fundamental component to C4HCO’s operations and services provided to Coloradans because in order to be eligible for financial assistance through C4HCO, including Advanced Premium Tax Credits (APTC) or cost sharing reductions, federal law requires that a person be determined not eligible for Medicaid or CHP+.

Problem or Opportunity

- C4HCO is not currently receiving reimbursement for the costs related to Medicaid eligibility determination. The Department and C4HCO do not currently have an established federally approved cost allocation methodology for shared eligibility determination services as set forth in Office of Management and Budget (OMB) Circular A-87 uniform guidance 2 CFR § 200. As a result, costs have not been adequately allocated to Medicaid and CHP+ for eligibility determination operations and exchange systems' costs for these programs.

Consequences of Problem

- Without an appropriation, the Department is unable to draw federal funds for the Medicaid and CHP+ eligibility determination work that is currently being done by C4HCO. As a result, C4HCO is inappropriately absorbing these costs within its existing revenue.

Proposed Solution

- The Department requests ongoing funding to support a proper cost allocation plan between the Department and C4HCO for Medicaid and CHP+ eligibility determination functions and systems supported by C4HCO.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-13, BA-13

Request Detail: Medicaid Funding for Connect for Health Colorado

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| Medicaid Funding for Connect for Health Colorado | \$5,144,208 | \$1,790,457 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|---|-------------|--------------|
| Medicaid Funding for Connect for Health Colorado | \$5,144,208 | \$1,790,457 |

Problem or Opportunity:

Connect for Health Colorado (C4HCO) is currently performing eligibility determinations for Medicaid and the Child Health Plan *Plus* (CHP+) as part of C4HCO’s obligation to determine eligibility for federal financial assistance through the Advanced Premium Tax Credit (APTC) or cost sharing reductions. Federal funds are available for the work of performing these eligibility determinations and associated systems costs; however, a state match is required before federal funds can be drawn. The Department does not currently have an appropriation to pay C4HCO for its’ eligibility determination work related to Medicaid and CHP+, and therefore cannot draw federal funds to which the State would be entitled.

The Medicaid eligibility determination process is a fundamental step in C4HCO’s operations and services provided to Coloradans. As outlined in 42 CFR § 155.302, in order for an individual or family to be eligible for federal financial assistance through the APTC or cost sharing reductions, an assessment of Medicaid or CHP+ eligibility must be conducted. The cost of these eligibility determinations, and the associated administrative and system costs, are allowable costs under the federal Medicaid and Children’s Health Insurance Programs, although a state match is required before the State can draw federal funding.

Cost Allocation Requirements

Consistent with federal requirements on cost allocation in 2 CFR § 200, in cases where health insurance marketplaces share services and functionalities with Medicaid and CHP+, costs should be properly allocated to allow each program to pay its fair share. C4HCO and the Department partnered to build the Shared Eligibility System (SES) which is maintained by the Governor’s Office of Information Technology (OIT). The SES is a component of Colorado’s eligibility determination system, Colorado Benefits Management System (CBMS). The SES interfaces with C4HCO’s Marketplace consumer website so applicant data can be

seamlessly transferred from Colorado's eligibility determination system to C4HCO system to purchase qualified health plans through C4HCO in order to comply with federal requirements. Certain SES costs associated with the Marketplace have been paid by C4HCO but could be allocated between the Medicaid program and C4HCO through a federally approved cost allocation plan.

The Department, in collaboration with C4HCO and a nationally recognized expert in cost allocation planning drafted a cost allocation methodology and are seeking approval from the Centers for Medicare and Medicare Services (CMS) to implement it. The Department is negotiating with CMS to and has submitted a cost allocation plan, and the Department anticipates that CMS will approve a cost allocation methodology by March 31, 2017 if State funding is available. In addition to seeking approval for ongoing costs, the cost allocation proposal to CMS includes costs for expected expenses to be incurred in FY 2016-17 for Medicaid related activities. Once federal approval is obtained, the established cost allocation methodology would ensure costs are allocated properly.

Allowable Costs

As part of the proposed cost allocation methodology, the Department and C4HCO have identified several major areas of cost that are reimbursable under titles XIX and XXI of the Social Security Act. To create a cost allocation plan, the Department contracted with a nationally recognized expert in cost allocation who held regular meetings with Department and C4HCO staff, completed site visits and interviews with C4HCO staff and identified several cost centers which are included in this request. These cost centers include the customer service center, exchange assistance network non-county partners sites, medical assistance site, and systems, including the shared eligibility system (SES) and marketplace system. Additionally, federal rules allow for a portion of general and administrative costs to be allocated proportionally to Medicaid and CHP+ which have also been included in this request.

Procedures have been implemented at C4HCO to support proper Medicaid reimbursement for worker activities for those portions of C4HCO's efforts that support the Medicaid and CHP+ programs. The Department works in conjunction with C4HCO to operate a Random Moment Time Study (RMTS) for C4HCO Customer Service Center staff. An RMTS is a federally approved statistical sampling technique and is used to calculate quarterly statistics needed to determine the appropriate amount of C4HCO costs per cost center that are attributable to Medicaid and CHP+ administration.

Customer Service Center

Customer service staff at C4HCO assist clients with online or paper applications, gather information needed for eligibility determination, and perform case maintenance for certain Medicaid and CHP+ members. Medicaid and C4HCO eligibility is based upon a household size per federal regulations. In some cases, a member or members of a household are enrolled in Medicaid or CHP+ when other members of that household are enrolled in a qualified health plan through C4HCO. In these combination cases, the case maintenance is the responsibility of C4HCO because they must have access to the case for all members, those enrolled in Medicaid or CHP+ and those who are not. The portion of the work related to Medicaid or CHP+ could be eligible for federal financial participation.

Exchange Assistance Network Non-County Partners

C4HCO offers a state-wide network of certified Health Coverage Guides to help applicants complete their application in person at no cost. Applicants can schedule an appointment or visit a number of walk-in enrollment centers across the state. When a Health Coverage Guide begins working with an applicant it is unknown whether they will be APTC, Medicaid or CHP+ eligible. Health Coverage Guides track enrollments and report the enrollments to C4HCO. The portion of work related to Medicaid or CHP+ should be eligible for FFP and reduce costs absorbed by C4HCO.

Medical Assistance Site (MA Site)

On July 1, 2016 C4HCO became an MA site and contracted with the Department directly and no longer contracts the MA site work out to a vendor. Eligibility determination activities provided at the MA site could be eligible for cost allocation.

General Administration

A portion of C4HCO's general administration costs including business process and back office operations, executive leadership, human resources, finance and audit, information technology service management, project management and quality assurance, privacy and security team, data quality and governance, training and performance management, facility and fringe benefits can be allocated to the Medicaid and CHP+ program and have been included in this request.

State Funding for Connect For Health Colorado

The Colorado Health Benefit Exchange Act, SB 11-200, places specific limitations on funding for C4HCO and states that moneys from the General Fund shall not be used for the implementation of the Colorado Health Benefit Exchange (the legal name for C4HCO). However, under federal law the Department is the single state agency charged with the responsibility for completing eligibility determinations and the General Assembly has determined that it will appropriate from the General Fund "moneys for the cost of administering medical assistance programs and the state's share of costs of administering such functions."¹ Additionally, the General Assembly has determined that the Department is "responsible for administering the delivery of medical assistance by county departments of social services or any other public or private entities participating in the delivery of medical assistance²." Therefore, the Department has the authority to pay for the administration of that function as a cost of administrating the medical assistance programs.

Proposed Solution:

The Department requests \$5,144,209 total funds, \$1,790,457 General Fund, and \$3,353,751 federal funds in FY 2016-17 and ongoing years to support an established cost allocation methodology to reimburse C4HCO for costs associated with Medicaid and CHP+ administration. This funding would be contingent upon federal approval of a cost allocation plan.

¹ Section 25.5-1-120(2), C.R.S.

² Section 25.5-4-106, C.R.S.

Anticipated Outcomes:

If funded, C4HCO's operational costs would be properly allocated according to the work and populations served. This request links to the Department's FY 2016-17 Performance Plan; by instilling a person- and family-centered approach to strengthen client experience by ensuring that the no wrong door approach to eligibility determination can be sustained by providing funding to C4HCO for their administrative work related to Department programs. The Department would also be in compliance with requirements regarding proper cost allocation and the use of enhanced federal funds.

If this request is not approved, the Department would be unable to draw federal funds for the Medicaid and CHP+ eligibility determination work that is currently being done by C4HCO. As a result, C4HCO would continue to inappropriately absorb these costs within its existing revenue.

Assumptions and Calculations:

Detailed calculations can be found in Tables 1 through 3.

The Department assumes that all funding requested would be eligible for Medicaid or CHP+ Federal Financial Participation (FFP). The Department intends to request 75% or 90% enhanced FFP on certain allowable costs related to the eligibility determination process and SES. However, there is uncertainty whether the enhanced match would be approved by CMS. For any match rate the Department would need federal approval of either the Cost Allocation Plan and Maintenance and Operations Advanced Planning Document (MOAPD) in order to draw down enhanced federal funds to support this request. The Department submitted a cost allocation plan to CMS in May 2016 and has received approval of the MOAPD for enhanced federal funding. The Department expects the CAP would be approved by March 31, 2017.

In the event that this request is not approved by the General Assembly, the Department would notify CMS the state is not able to implement the Cost Allocation Plan and would adjust the federally required documents accordingly. If the enhanced funding or the cost allocation plan is not approved by CMS, the Department would utilize the budget process to request the change in funding.

To estimate costs that could be attributed to Medicaid and CHP+ the Department obtained an estimate of all C4HCO costs regardless of whether or not they are eligible for cost allocation with Department programs. This information can be found on Table 3.1 and shows a full picture of C4HCO costs as provided by the Department's contractor. This table also shows the cost allocation methodology applied to each cost center, the portion of the estimated costs that would be allocable to the Medicaid 50% Federal Financial Participation (FFP), Medicaid 75% FFP, Medicaid 90% FFP and CHP+. These total costs are based upon quarterly costs provided by C4HCO from October through December 2015 and annualized. Then, April 2016 RMTS data was applied to the costs and the amount attributable to the Department was calculated by the Department's contractor. Utilizing a parametric estimating methodology comparing a similar duration of time from last year in addition to the recent RMTS data, the Department estimated annual costs.

Based upon the total cost data in Table 3.1, the Department estimates that of total C4HCO costs, 87.14% of costs should be allocated to C4HCO, 5.61% of costs should be allocated to Medicaid 50% FFP, 6.28% of costs should be allocated to Medicaid 75% FFP, 0.72% of costs should be allocated to Medicaid 90% FFP

and that 0.24% of costs should be allocated to CHP+. The RMTS data available which was used to calculate the percentages for this request is based on a point in time, and notably, the study was not performed during a C4HCO open enrollment period. Open enrollment is the busiest time of year for C4HCO when Coloradans are able to make changes to their qualified health plans outside of a qualifying life event. The RMTS data during open enrollment could show a higher percentage of Medicaid and CHP+ administrative work in some cost centers and/or could show a lower percentage of Medicaid and CHP+ work in some cost centers. The Department would utilize the regular budget process to make adjustments to the requested amount if necessary.

While the Department is requesting ongoing funding for these activities in FY 2016-17 and beyond, it is unknown how costs may change as the system matures and less people are seeking health insurance for the first time. However, ongoing eligibility activities will continue to be required as part of annual enrollment for clients; therefore the Department assumes the amount of work to support this work will remain similar to the provided estimate on an annual basis. If needed, the Department would request adjustments through the regular budget process in future years.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

In the fall of 2016, the Department received information from CMS indicating that the general framework of the cost allocation plan was acceptable and that a full cost allocation plan is expected to be approved by March 31, 2017. Prior to this communication from CMS, the Department was uncertain that the proposed cost allocation methodology would be acceptable.

S-13,BA-13 Medicaid Funding for Connect for Health Colorado
Appendix A: Calculations and Assumptions

| Table 1.1 FY 2016-17 Medicaid Funding for Connect for Health Colorado | | | | | | | | |
|---|---|--------------------|------------|--------------------|------------|----------------------|--------------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$5,144,208 | 0.0 | \$1,790,457 | \$0 | \$0 | \$3,353,751 | Row B + Row C |
| B | NEW LINE (1) Executive Director's Office, (C) Information Technology and Special Projects, Connect for Health Colorado Systems | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 | Table 2.2 Row A |
| C | NEW LINE (1) Executive Director's Office, (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determination | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 | Table 2.1 Row A |

| Table 1.2 FY 2017-18 Medicaid Funding for Connect for Health Colorado ⁽¹⁾ | | | | | | | | |
|--|--|--------------------|------------|--------------------|------------|----------------------|--------------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$5,144,208 | 0.0 | \$1,790,457 | \$0 | \$0 | \$3,353,751 | Row B + Row C |
| B | (1) Executive Director's Office, (C) Information Technology and Special Projects, Connect for Health Colorado Systems | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 | Table 2.2 Row A |
| C | (1) Executive Director's Office, (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determination | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 | Table 2.1 Row A |

(1) This funding is intended to be ongoing

S-13,BA-13 Medicaid Funding for Connect for Health Colorado
Appendix A: Calculations and Assumptions

| Table 2.1 Summary by Initiative, Customer Service and Eligibility Determination Costs | | | | | | | | | |
|---|--|--------------------|------------|--------------------|------------|----------------------|--------------------|-------|-------------------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | FFP | Notes/Calculations |
| A | Total Customer Service and Eligibility Determination | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 | | Row B + Row F + Row I + Row L |
| B | Total Customer Service Center | \$3,406,859 | 0.0 | \$1,148,821 | \$0 | \$0 | \$2,258,038 | | Row C + Row D + Row E |
| C | Medicaid 75% | \$2,143,199 | 0.0 | \$535,800 | \$0 | \$0 | \$1,607,399 | 75.0% | Table 3.1: Row E |
| D | Medicaid 50% | \$1,214,806 | 0.0 | \$607,403 | \$0 | \$0 | \$607,403 | 50.0% | Table 3.1 Row E + Row Z |
| E | CHP+ | \$48,854 | 0.0 | \$5,618 | \$0 | \$0 | \$43,236 | 88.5% | Table 3.1 Row E + Row Z |
| F | Total Medical Assistance Site | \$300,053 | 0.0 | \$140,657 | \$0 | \$0 | \$159,396 | | Row G + Row H |
| G | Medicaid 50% | \$275,716 | 0.0 | \$137,858 | \$0 | \$0 | \$137,858 | 50.0% | Table 3.1 Row C |
| H | CHP+ | \$24,337 | 0.0 | \$2,799 | \$0 | \$0 | \$21,538 | 88.5% | Table 3.1 Row C |
| I | Total Exchange Assistance Network-Non County Partners | \$596,551 | 0.0 | \$293,971 | \$0 | \$0 | \$302,580 | | Row J + Row K |
| J | Medicaid 50% | \$585,370 | 0.0 | \$292,685 | \$0 | \$0 | \$292,685 | 50.0% | Table 3.1 Row B |
| K | CHP+ | \$11,181 | 0.0 | \$1,286 | \$0 | \$0 | \$9,895 | 88.5% | Table 3.1 Row B |
| L | Total General and Administrative Costs | \$170,988 | 0.0 | \$84,318 | \$0 | \$0 | \$86,670 | | Row M + Row N |
| M | Medicaid 50% | \$167,933 | 0.0 | \$83,967 | \$0 | \$0 | \$83,967 | 50.0% | Table 3.1 Row P through Row Y |
| N | CHP+ | \$3,055 | 0.0 | \$351 | \$0 | \$0 | \$2,704 | 88.5% | Table 3.1 Row P through Row Y |

| Table 2.2 Summary by Initiative, Systems Costs | | | | | | | | | |
|--|--------------|------------------|------------|------------------|------------|----------------------|------------------|-------|--------------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | FFP | Notes/Calculations |
| A | Total | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 | | Row B + Row C + Row D |
| B | Medicaid 90% | \$288,932 | 0.0 | \$28,893 | \$0 | \$0 | \$260,039 | 90% | Table 3.1 Row AA |
| C | Medicaid 75% | \$370,388 | 0.0 | \$92,597 | \$0 | \$0 | \$277,791 | 75% | Table 3.1 Row D |
| D | CHP+ | \$10,437 | 0.0 | \$1,200 | \$0 | \$0 | \$9,237 | 88.5% | Table 3.1 Row D + Row AA |

S-13,BA-13 Medicaid Funding for Connect for Health Colorado
Appendix A: Calculations and Assumptions

| Table 3.1 FY 2016-17 Connect for Health Colorado Total Annual Estimated Cost | | | | | | | | |
|--|--|---|--------------------|--------------|--------------------|--------------------|------------------|-----------------|
| Row | Cost Center | Cost Allocation Methodology | Total Cost | C4HCO | Medicaid 50% FFP | Medicaid 75% FFP | Medicaid 90% FFP | CHP+ |
| A | Marketplace System | Direct to C4HCO | \$1,336,084 | \$1,336,084 | \$0 | \$0 | \$0 | \$0 |
| B | Exchange Assistance Network Non-County Partners | Appointment Outcome Data (Connector Tool) | \$1,796,154 | \$1,199,603 | \$585,370 | \$0 | \$0 | \$11,181 |
| C | Medical Assistance Site | Approved Individuals Count by Program MA Site | \$1,950,409 | \$1,650,356 | \$275,716 | \$0 | \$0 | \$24,337 |
| D | Shared Eligibility System | Approved Individuals Count by Program Statewide | \$640,960 | \$264,709 | \$0 | \$370,388 | \$0 | \$5,863 |
| E | Exchange Customer Service Center | CSC RMTS Results | \$14,891,722 | \$11,698,707 | \$1,004,782 | \$2,143,199 | \$0 | \$45,034 |
| F | Exchange Assistance Network County Partners | Direct to C4HCO | \$886,988 | \$886,988 | \$0 | \$0 | \$0 | \$0 |
| G | Community Based Assistance Programs | Direct to C4HCO | \$541,674 | \$541,674 | \$0 | \$0 | \$0 | \$0 |
| H | Business Intelligence Team | Direct to C4HCO | \$340,593 | \$340,593 | \$0 | \$0 | \$0 | \$0 |
| I | Broker Team | Direct to C4HCO | \$348,866 | \$348,866 | \$0 | \$0 | \$0 | \$0 |
| J | Enterprise Architect | Direct to C4HCO | \$95,700 | \$95,700 | \$0 | \$0 | \$0 | \$0 |
| K | Eligibility & Enrollment | Direct to C4HCO | \$503,860 | \$503,860 | \$0 | \$0 | \$0 | \$0 |
| L | Health Plan Account Team | Direct to C4HCO | \$185,423 | \$185,423 | \$0 | \$0 | \$0 | \$0 |
| M | Legal Services Compliance | Direct to C4HCO | \$617,537 | \$617,537 | \$0 | \$0 | \$0 | \$0 |
| N | Marketing, Policy and Communications | Direct to C4HCO | \$3,553,905 | \$3,553,905 | \$0 | \$0 | \$0 | \$0 |
| O | Health Plan IT Operations Manager | Direct to C4HCO | \$188,496 | \$188,496 | \$0 | \$0 | \$0 | \$0 |
| P | Business Process and Back Office Operations | Head Count Across C4HCO | \$73,650 | \$72,462 | \$1,167 | \$0 | \$0 | \$21 |
| Q | Executive Leadership | Head Count Across C4HCO | \$1,029,881 | \$1,013,261 | \$16,323 | \$0 | \$0 | \$297 |
| R | Human Resources, Finance and Audit | Head Count Across C4HCO | \$931,749 | \$916,713 | \$14,767 | \$0 | \$0 | \$269 |
| S | IT Service Management | Head Count Across C4HCO | \$3,955,912 | \$3,892,075 | \$62,697 | \$0 | \$0 | \$1,140 |
| T | Project Management & Quality Assurance | Head Count Across C4HCO | \$1,153,898 | \$1,135,277 | \$18,288 | \$0 | \$0 | \$333 |
| U | Privacy/Security Team | Head Count Across C4HCO | \$451,604 | \$444,317 | \$7,157 | \$0 | \$0 | \$130 |
| V | Data Quality and Governance | Head Count Across C4HCO | \$110,000 | \$108,225 | \$1,743 | \$0 | \$0 | \$32 |
| W | Training and Performance Management | Head Count Across C4HCO | \$539,733 | \$531,023 | \$8,554 | \$0 | \$0 | \$156 |
| X | Shared Costs - Facility | Head Count Across C4HCO | \$576,460 | \$567,158 | \$9,136 | \$0 | \$0 | \$166 |
| Y | Shared Costs - Fringe Benefits | Head Count Across C4HCO | \$1,773,046 | \$1,744,434 | \$28,101 | \$0 | \$0 | \$511 |
| Z | Customer Service Center | Head Count across CSC RMTS and MA Site | \$1,019,356 | \$805,512 | \$210,024 | \$0 | \$0 | \$3,820 |
| AA | SES Development costs for C4HCO system | Allocated to Medicaid based on CMS Approval (approval requests submitted as needed) | \$500,000 | \$206,494 | \$0 | \$0 | \$288,932 | \$4,574 |
| BB | Total Estimated Annual Cost | | \$39,993,660 | \$34,849,452 | \$2,243,825 | \$2,513,587 | \$288,932 | \$97,864 |
| CC | Percentage Allocated To C4HCO and Department | | 100.00% | 87.14% | 5.61% | 6.28% | 0.72% | 0.24% |
| DD | Total Estimated Annual Cost Allocated to Department | | \$5,144,208 | \$0 | \$2,243,825 | \$2,513,587 | \$288,932 | \$97,864 |

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-13 Medicaid Funding for Connect for Health Colorado
BA-13 Medicaid Funding for Connect for Health Colorado**

Dept. Approval By: Josh Block *[Signature]* 1/3/17 Supplemental FY 2016-17

OSPB Approval By: *[Signature]* 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$0 | \$5,144,208 | \$0 | \$5,144,208 | \$5,144,208 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$0 | \$1,790,457 | \$0 | \$1,790,457 | \$1,790,457 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$3,353,751 | \$0 | \$3,353,751 | \$3,353,751 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | FY 2018-19 | |
|---|--------------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$0 | \$669,757 | \$0 | \$669,757 | \$669,757 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (C) Information Technology Contracts and Projects - Connect for Health Colorado Systems | GF | \$0 | \$122,690 | \$0 | \$122,690 | \$122,690 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$547,067 | \$0 | \$547,067 | \$547,067 |
| | Total | \$0 | \$4,474,451 | \$0 | \$4,474,451 | \$4,474,451 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 01. Executive Director's Office, (D) Eligibility Determinations and Client Services - Connect for Health Colorado Eligibility Determination | GF | \$0 | \$1,667,767 | \$0 | \$1,667,767 | \$1,667,767 |
| | CF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$0 | \$2,806,684 | \$0 | \$2,806,684 | \$2,806,684 |

| | | | | | |
|---|--|--------------------------|----|-------------------------------------|---|
| CF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- The Department requests funding of \$5,144,208 total funds, \$1,790,457 General Fund and \$3,353,751 federal funds in FY 2016-17 and ongoing to reimburse Connect for Health Colorado (C4HCO) for expected costs related to customer service, eligibility determination functions and systems for applicants and clients eligible for Medicaid and the Children's Health Insurance Program (referred to in Colorado as the Child Health Plan Plus, or "CHP+").

Current Program

- C4HCO assists individuals, families and small employers across Colorado apply for health insurance and enroll in Qualified Health Plans.
- The Medicaid and CHP+ eligibility determination process is a fundamental component to C4HCO's operations and services provided to Coloradans because in order to be eligible for financial assistance through C4HCO, including Advanced Premium Tax Credits (APTC) or cost sharing reductions, federal law requires that a person be determined not eligible for Medicaid or CHP+.

Problem or Opportunity

- C4HCO is not currently receiving reimbursement for the costs related to Medicaid eligibility determination. The Department and C4HCO do not currently have an established federally approved cost allocation methodology for shared eligibility determination services as set forth in Office of Management and Budget (OMB) Circular A-87 uniform guidance 2 CFR § 200. As a result, costs have not been adequately allocated to Medicaid and CHP+ for eligibility determination operations and exchange systems' costs for these programs.

Consequences of Problem

- Without an appropriation, the Department is unable to draw federal funds for the Medicaid and CHP+ eligibility determination work that is currently being done by C4HCO. As a result, C4HCO is inappropriately absorbing these costs within its existing revenue.

Proposed Solution

- The Department requests ongoing funding to support a proper cost allocation plan between the Department and C4HCO for Medicaid and CHP+ eligibility determination functions and systems supported by C4HCO.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-13, BA-13

Request Detail: Medicaid Funding for Connect for Health Colorado

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
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The Medicaid eligibility determination process is a fundamental step in C4HCO’s operations and services provided to Coloradans. As outlined in 42 CFR § 155.302, in order for an individual or family to be eligible for federal financial assistance through the APTC or cost sharing reductions, an assessment of Medicaid or CHP+ eligibility must be conducted. The cost of these eligibility determinations, and the associated administrative and system costs, are allowable costs under the federal Medicaid and Children’s Health Insurance Programs, although a state match is required before the State can draw federal funding.

Cost Allocation Requirements

Consistent with federal requirements on cost allocation in 2 CFR § 200, in cases where health insurance marketplaces share services and functionalities with Medicaid and CHP+, costs should be properly allocated to allow each program to pay its fair share. C4HCO and the Department partnered to build the Shared Eligibility System (SES) which is maintained by the Governor’s Office of Information Technology (OIT). The SES is a component of Colorado’s eligibility determination system, Colorado Benefits Management System (CBMS). The SES interfaces with C4HCO’s Marketplace consumer website so applicant data can be

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The Department, in collaboration with C4HCO and a nationally recognized expert in cost allocation planning drafted a cost allocation methodology and are seeking approval from the Centers for Medicare and Medicare Services (CMS) to implement it. The Department is negotiating with CMS to and has submitted a cost allocation plan, and the Department anticipates that CMS will approve a cost allocation methodology by March 31, 2017 if State funding is available. In addition to seeking approval for ongoing costs, the cost allocation proposal to CMS includes costs for expected expenses to be incurred in FY 2016-17 for Medicaid related activities. Once federal approval is obtained, the established cost allocation methodology would ensure costs are allocated properly.

Allowable Costs

As part of the proposed cost allocation methodology, the Department and C4HCO have identified several major areas of cost that are reimbursable under titles XIX and XXI of the Social Security Act. To create a cost allocation plan, the Department contracted with a nationally recognized expert in cost allocation who held regular meetings with Department and C4HCO staff, completed site visits and interviews with C4HCO staff and identified several cost centers which are included in this request. These cost centers include the customer service center, exchange assistance network non-county partners sites, medical assistance site, and systems, including the shared eligibility system (SES) and marketplace system. Additionally, federal rules allow for a portion of general and administrative costs to be allocated proportionally to Medicaid and CHP+ which have also been included in this request.

Procedures have been implemented at C4HCO to support proper Medicaid reimbursement for worker activities for those portions of C4HCO's efforts that support the Medicaid and CHP+ programs. The Department works in conjunction with C4HCO to operate a Random Moment Time Study (RMTS) for C4HCO Customer Service Center staff. An RMTS is a federally approved statistical sampling technique and is used to calculate quarterly statistics needed to determine the appropriate amount of C4HCO costs per cost center that are attributable to Medicaid and CHP+ administration.

Customer Service Center

Customer service staff at C4HCO assist clients with online or paper applications, gather information needed for eligibility determination, and perform case maintenance for certain Medicaid and CHP+ members. Medicaid and C4HCO eligibility is based upon a household size per federal regulations. In some cases, a member or members of a household are enrolled in Medicaid or CHP+ when other members of that household are enrolled in a qualified health plan through C4HCO. In these combination cases, the case maintenance is the responsibility of C4HCO because they must have access to the case for all members, those enrolled in Medicaid or CHP+ and those who are not. The portion of the work related to Medicaid or CHP+ could be eligible for federal financial participation.

Exchange Assistance Network Non-County Partners

C4HCO offers a state-wide network of certified Health Coverage Guides to help applicants complete their application in person at no cost. Applicants can schedule an appointment or visit a number of walk-in enrollment centers across the state. When a Health Coverage Guide begins working with an applicant it is unknown whether they will be APTC, Medicaid or CHP+ eligible. Health Coverage Guides track enrollments and report the enrollments to C4HCO. The portion of work related to Medicaid or CHP+ should be eligible for FFP and reduce costs absorbed by C4HCO.

Medical Assistance Site (MA Site)

On July 1, 2016 C4HCO became an MA site and contracted with the Department directly and no longer contracts the MA site work out to a vendor. Eligibility determination activities provided at the MA site could be eligible for cost allocation.

General Administration

A portion of C4HCO's general administration costs including business process and back office operations, executive leadership, human resources, finance and audit, information technology service management, project management and quality assurance, privacy and security team, data quality and governance, training and performance management, facility and fringe benefits can be allocated to the Medicaid and CHP+ program and have been included in this request.

State Funding for Connect For Health Colorado

The Colorado Health Benefit Exchange Act, SB 11-200, places specific limitations on funding for C4HCO and states that moneys from the General Fund shall not be used for the implementation of the Colorado Health Benefit Exchange (the legal name for C4HCO). However, under federal law the Department is the single state agency charged with the responsibility for completing eligibility determinations and the General Assembly has determined that it will appropriate from the General Fund "moneys for the cost of administering medical assistance programs and the state's share of costs of administering such functions."¹ Additionally, the General Assembly has determined that the Department is "responsible for administering the delivery of medical assistance by county departments of social services or any other public or private entities participating in the delivery of medical assistance²." Therefore, the Department has the authority to pay for the administration of that function as a cost of administrating the medical assistance programs.

Proposed Solution:

The Department requests \$5,144,209 total funds, \$1,790,457 General Fund, and \$3,353,751 federal funds in FY 2016-17 and ongoing years to support an established cost allocation methodology to reimburse C4HCO for costs associated with Medicaid and CHP+ administration. This funding would be contingent upon federal approval of a cost allocation plan.

¹ Section 25.5-1-120(2), C.R.S.

² Section 25.5-4-106, C.R.S.

Anticipated Outcomes:

If funded, C4HCO's operational costs would be properly allocated according to the work and populations served. This request links to the Department's FY 2016-17 Performance Plan; by instilling a person- and family-centered approach to strengthen client experience by ensuring that the no wrong door approach to eligibility determination can be sustained by providing funding to C4HCO for their administrative work related to Department programs. The Department would also be in compliance with requirements regarding proper cost allocation and the use of enhanced federal funds.

If this request is not approved, the Department would be unable to draw federal funds for the Medicaid and CHP+ eligibility determination work that is currently being done by C4HCO. As a result, C4HCO would continue to inappropriately absorb these costs within its existing revenue.

Assumptions and Calculations:

Detailed calculations can be found in Tables 1 through 3.

The Department assumes that all funding requested would be eligible for Medicaid or CHP+ Federal Financial Participation (FFP). The Department intends to request 75% or 90% enhanced FFP on certain allowable costs related to the eligibility determination process and SES. However, there is uncertainty whether the enhanced match would be approved by CMS. For any match rate the Department would need federal approval of either the Cost Allocation Plan and Maintenance and Operations Advanced Planning Document (MOAPD) in order to draw down enhanced federal funds to support this request. The Department submitted a cost allocation plan to CMS in May 2016 and has received approval of the MOAPD for enhanced federal funding. The Department expects the CAP would be approved by March 31, 2017.

In the event that this request is not approved by the General Assembly, the Department would notify CMS the state is not able to implement the Cost Allocation Plan and would adjust the federally required documents accordingly. If the enhanced funding or the cost allocation plan is not approved by CMS, the Department would utilize the budget process to request the change in funding.

To estimate costs that could be attributed to Medicaid and CHP+ the Department obtained an estimate of all C4HCO costs regardless of whether or not they are eligible for cost allocation with Department programs. This information can be found on Table 3.1 and shows a full picture of C4HCO costs as provided by the Department's contractor. This table also shows the cost allocation methodology applied to each cost center, the portion of the estimated costs that would be allocable to the Medicaid 50% Federal Financial Participation (FFP), Medicaid 75% FFP, Medicaid 90% FFP and CHP+. These total costs are based upon quarterly costs provided by C4HCO from October through December 2015 and annualized. Then, April 2016 RMTS data was applied to the costs and the amount attributable to the Department was calculated by the Department's contractor. Utilizing a parametric estimating methodology comparing a similar duration of time from last year in addition to the recent RMTS data, the Department estimated annual costs.

Based upon the total cost data in Table 3.1, the Department estimates that of total C4HCO costs, 87.14% of costs should be allocated to C4HCO, 5.61% of costs should be allocated to Medicaid 50% FFP, 6.28% of costs should be allocated to Medicaid 75% FFP, 0.72% of costs should be allocated to Medicaid 90% FFP

and that 0.24% of costs should be allocated to CHP+. The RMTS data available which was used to calculate the percentages for this request is based on a point in time, and notably, the study was not performed during a C4HCO open enrollment period. Open enrollment is the busiest time of year for C4HCO when Coloradans are able to make changes to their qualified health plans outside of a qualifying life event. The RMTS data during open enrollment could show a higher percentage of Medicaid and CHP+ administrative work in some cost centers and/or could show a lower percentage of Medicaid and CHP+ work in some cost centers. The Department would utilize the regular budget process to make adjustments to the requested amount if necessary.

While the Department is requesting ongoing funding for these activities in FY 2016-17 and beyond, it is unknown how costs may change as the system matures and less people are seeking health insurance for the first time. However, ongoing eligibility activities will continue to be required as part of annual enrollment for clients; therefore the Department assumes the amount of work to support this work will remain similar to the provided estimate on an annual basis. If needed, the Department would request adjustments through the regular budget process in future years.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

In the fall of 2016, the Department received information from CMS indicating that the general framework of the cost allocation plan was acceptable and that a full cost allocation plan is expected to be approved by March 31, 2017. Prior to this communication from CMS, the Department was uncertain that the proposed cost allocation methodology would be acceptable.

S-13,BA-13 Medicaid Funding for Connect for Health Colorado
Appendix A: Calculations and Assumptions

| Table 1.1 FY 2016-17 Medicaid Funding for Connect for Health Colorado | | | | | | | | |
|---|---|--------------------|------------|--------------------|------------|----------------------|--------------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$5,144,208 | 0.0 | \$1,790,457 | \$0 | \$0 | \$3,353,751 | Row B + Row C |
| B | NEW LINE (1) Executive Director's Office, (C) Information Technology and Special Projects, Connect for Health Colorado Systems | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 | Table 2.2 Row A |
| C | NEW LINE (1) Executive Director's Office, (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determination | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 | Table 2.1 Row A |

| Table 1.2 FY 2017-18 Medicaid Funding for Connect for Health Colorado ⁽¹⁾ | | | | | | | | |
|--|--|--------------------|------------|--------------------|------------|----------------------|--------------------|--------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | Notes/Calculations |
| A | Total Request | \$5,144,208 | 0.0 | \$1,790,457 | \$0 | \$0 | \$3,353,751 | Row B + Row C |
| B | (1) Executive Director's Office, (C) Information Technology and Special Projects, Connect for Health Colorado Systems | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 | Table 2.2 Row A |
| C | (1) Executive Director's Office, (D) Eligibility Determinations and Client Services, Connect for Health Colorado Eligibility Determination | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 | Table 2.1 Row A |

(1) This funding is intended to be ongoing

S-13,BA-13 Medicaid Funding for Connect for Health Colorado
Appendix A: Calculations and Assumptions

| Table 2.1 Summary by Initiative, Customer Service and Eligibility Determination Costs | | | | | | | | | |
|---|--|--------------------|------------|--------------------|------------|----------------------|--------------------|-------|-------------------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | FFP | Notes/Calculations |
| A | Total Customer Service and Eligibility Determination | \$4,474,451 | 0.0 | \$1,667,767 | \$0 | \$0 | \$2,806,684 | | Row B + Row F + Row I + Row L |
| B | Total Customer Service Center | \$3,406,859 | 0.0 | \$1,148,821 | \$0 | \$0 | \$2,258,038 | | Row C + Row D + Row E |
| C | Medicaid 75% | \$2,143,199 | 0.0 | \$535,800 | \$0 | \$0 | \$1,607,399 | 75.0% | Table 3.1: Row E |
| D | Medicaid 50% | \$1,214,806 | 0.0 | \$607,403 | \$0 | \$0 | \$607,403 | 50.0% | Table 3.1 Row E + Row Z |
| E | CHP+ | \$48,854 | 0.0 | \$5,618 | \$0 | \$0 | \$43,236 | 88.5% | Table 3.1 Row E + Row Z |
| F | Total Medical Assistance Site | \$300,053 | 0.0 | \$140,657 | \$0 | \$0 | \$159,396 | | Row G + Row H |
| G | Medicaid 50% | \$275,716 | 0.0 | \$137,858 | \$0 | \$0 | \$137,858 | 50.0% | Table 3.1 Row C |
| H | CHP+ | \$24,337 | 0.0 | \$2,799 | \$0 | \$0 | \$21,538 | 88.5% | Table 3.1 Row C |
| I | Total Exchange Assistance Network-Non County Partners | \$596,551 | 0.0 | \$293,971 | \$0 | \$0 | \$302,580 | | Row J + Row K |
| J | Medicaid 50% | \$585,370 | 0.0 | \$292,685 | \$0 | \$0 | \$292,685 | 50.0% | Table 3.1 Row B |
| K | CHP+ | \$11,181 | 0.0 | \$1,286 | \$0 | \$0 | \$9,895 | 88.5% | Table 3.1 Row B |
| L | Total General and Administrative Costs | \$170,988 | 0.0 | \$84,318 | \$0 | \$0 | \$86,670 | | Row M + Row N |
| M | Medicaid 50% | \$167,933 | 0.0 | \$83,967 | \$0 | \$0 | \$83,967 | 50.0% | Table 3.1 Row P through Row Y |
| N | CHP+ | \$3,055 | 0.0 | \$351 | \$0 | \$0 | \$2,704 | 88.5% | Table 3.1 Row P through Row Y |

| Table 2.2 Summary by Initiative, Systems Costs | | | | | | | | | |
|--|--------------|------------------|------------|------------------|------------|----------------------|------------------|-------|--------------------------|
| Row | Item | Total Funds | FTE | General Fund | Cash Funds | Reappropriated Funds | Federal Funds | FFP | Notes/Calculations |
| A | Total | \$669,757 | 0.0 | \$122,690 | \$0 | \$0 | \$547,067 | | Row B + Row C + Row D |
| B | Medicaid 90% | \$288,932 | 0.0 | \$28,893 | \$0 | \$0 | \$260,039 | 90% | Table 3.1 Row AA |
| C | Medicaid 75% | \$370,388 | 0.0 | \$92,597 | \$0 | \$0 | \$277,791 | 75% | Table 3.1 Row D |
| D | CHP+ | \$10,437 | 0.0 | \$1,200 | \$0 | \$0 | \$9,237 | 88.5% | Table 3.1 Row D + Row AA |

S-13,BA-13 Medicaid Funding for Connect for Health Colorado
Appendix A: Calculations and Assumptions

| Table 3.1 FY 2016-17 Connect for Health Colorado Total Annual Estimated Cost | | | | | | | | |
|--|--|---|--------------------|--------------|--------------------|--------------------|------------------|-----------------|
| Row | Cost Center | Cost Allocation Methodology | Total Cost | C4HCO | Medicaid 50% FFP | Medicaid 75% FFP | Medicaid 90% FFP | CHP+ |
| A | Marketplace System | Direct to C4HCO | \$1,336,084 | \$1,336,084 | \$0 | \$0 | \$0 | \$0 |
| B | Exchange Assistance Network Non-County Partners | Appointment Outcome Data (Connector Tool) | \$1,796,154 | \$1,199,603 | \$585,370 | \$0 | \$0 | \$11,181 |
| C | Medical Assistance Site | Approved Individuals Count by Program MA Site | \$1,950,409 | \$1,650,356 | \$275,716 | \$0 | \$0 | \$24,337 |
| D | Shared Eligibility System | Approved Individuals Count by Program Statewide | \$640,960 | \$264,709 | \$0 | \$370,388 | \$0 | \$5,863 |
| E | Exchange Customer Service Center | CSC RMTS Results | \$14,891,722 | \$11,698,707 | \$1,004,782 | \$2,143,199 | \$0 | \$45,034 |
| F | Exchange Assistance Network County Partners | Direct to C4HCO | \$886,988 | \$886,988 | \$0 | \$0 | \$0 | \$0 |
| G | Community Based Assistance Programs | Direct to C4HCO | \$541,674 | \$541,674 | \$0 | \$0 | \$0 | \$0 |
| H | Business Intelligence Team | Direct to C4HCO | \$340,593 | \$340,593 | \$0 | \$0 | \$0 | \$0 |
| I | Broker Team | Direct to C4HCO | \$348,866 | \$348,866 | \$0 | \$0 | \$0 | \$0 |
| J | Enterprise Architect | Direct to C4HCO | \$95,700 | \$95,700 | \$0 | \$0 | \$0 | \$0 |
| K | Eligibility & Enrollment | Direct to C4HCO | \$503,860 | \$503,860 | \$0 | \$0 | \$0 | \$0 |
| L | Health Plan Account Team | Direct to C4HCO | \$185,423 | \$185,423 | \$0 | \$0 | \$0 | \$0 |
| M | Legal Services Compliance | Direct to C4HCO | \$617,537 | \$617,537 | \$0 | \$0 | \$0 | \$0 |
| N | Marketing, Policy and Communications | Direct to C4HCO | \$3,553,905 | \$3,553,905 | \$0 | \$0 | \$0 | \$0 |
| O | Health Plan IT Operations Manager | Direct to C4HCO | \$188,496 | \$188,496 | \$0 | \$0 | \$0 | \$0 |
| P | Business Process and Back Office Operations | Head Count Across C4HCO | \$73,650 | \$72,462 | \$1,167 | \$0 | \$0 | \$21 |
| Q | Executive Leadership | Head Count Across C4HCO | \$1,029,881 | \$1,013,261 | \$16,323 | \$0 | \$0 | \$297 |
| R | Human Resources, Finance and Audit | Head Count Across C4HCO | \$931,749 | \$916,713 | \$14,767 | \$0 | \$0 | \$269 |
| S | IT Service Management | Head Count Across C4HCO | \$3,955,912 | \$3,892,075 | \$62,697 | \$0 | \$0 | \$1,140 |
| T | Project Management & Quality Assurance | Head Count Across C4HCO | \$1,153,898 | \$1,135,277 | \$18,288 | \$0 | \$0 | \$333 |
| U | Privacy/Security Team | Head Count Across C4HCO | \$451,604 | \$444,317 | \$7,157 | \$0 | \$0 | \$130 |
| V | Data Quality and Governance | Head Count Across C4HCO | \$110,000 | \$108,225 | \$1,743 | \$0 | \$0 | \$32 |
| W | Training and Performance Management | Head Count Across C4HCO | \$539,733 | \$531,023 | \$8,554 | \$0 | \$0 | \$156 |
| X | Shared Costs - Facility | Head Count Across C4HCO | \$576,460 | \$567,158 | \$9,136 | \$0 | \$0 | \$166 |
| Y | Shared Costs - Fringe Benefits | Head Count Across C4HCO | \$1,773,046 | \$1,744,434 | \$28,101 | \$0 | \$0 | \$511 |
| Z | Customer Service Center | Head Count across CSC RMTS and MA Site | \$1,019,356 | \$805,512 | \$210,024 | \$0 | \$0 | \$3,820 |
| AA | SES Development costs for C4HCO system | Allocated to Medicaid based on CMS Approval (approval requests submitted as needed) | \$500,000 | \$206,494 | \$0 | \$0 | \$288,932 | \$4,574 |
| BB | Total Estimated Annual Cost | | \$39,993,660 | \$34,849,452 | \$2,243,825 | \$2,513,587 | \$288,932 | \$97,864 |
| CC | Percentage Allocated To C4HCO and Department | | 100.00% | 87.14% | 5.61% | 6.28% | 0.72% | 0.24% |
| DD | Total Estimated Annual Cost Allocated to Department | | \$5,144,208 | \$0 | \$2,243,825 | \$2,513,587 | \$288,932 | \$97,864 |


Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-14 Public School Health Services Funding Adjustment
BA-14 Public School Health Services Funding Adjustment**

Dept. Approval By: Josh Block  1/3/17 Supplemental FY 2016-17

OSPB Approval By: Grant A. Schubert 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$82,604,632 | \$9,393,330 | \$84,538,210 | \$8,484,767 | \$15,061,492 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| CF | | \$41,001,948 | \$4,754,691 | \$42,195,941 | \$4,309,645 | \$7,597,571 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$41,602,684 | \$4,638,639 | \$42,342,269 | \$4,175,122 | \$7,463,921 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|-----------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$82,604,632 | \$9,393,330 | \$84,538,210 | \$8,484,767 | \$15,061,492 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| CF | | \$41,001,948 | \$4,754,691 | \$42,195,941 | \$4,309,645 | \$7,597,571 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$41,602,684 | \$4,638,639 | \$42,342,269 | \$4,175,122 | \$7,463,921 |

| | | | | | |
|---|--|-------------------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- FY 2016-17: \$9,393,330 total funds, including \$4,754,691 cash funds and \$4,638,639 federal funds.
- FY 2017-18: \$8,484,767 total funds, including \$4,309,645 cash funds and \$4,175,122 federal funds.
- FY 2018-19: \$15,061,492 total funds, including \$7,597,571 cash funds and \$7,463,921 federal funds.

Current Program

- The Public School Health Services (SHS) program allows Colorado's public schools and state-operated educational institutions access to federal Medicaid funds for the partial reimbursement of their costs of providing health services to eligible students from kindergarten through twelfth grade.
- Participants in the SHS program can be school districts, Board of Cooperative Education Services (BOCES) or K-12 educational institutions, hereafter referred to as providers. The Department, as the single state agency for the Medicaid program, administers the program and provides training and oversight to assure compliance with the federally-approved reimbursement methodology.
- SHS program providers are required to use the federal funding received through the program to fund the unmet health needs of all students served by participating providers, as identified in the providers' Local Services Plan (LSP). This has allowed providers to address some of the health care needs unique to their local communities.

Problem or Opportunity

- The aggregate total of SHS program providers' allowable costs is projected to exceed the Department's spending authority in FY 2016-17 and future years.
- The Department's SHS program forecast has been updated to reflect new data received in November 2016 from the Department's contracted vendor.

Consequences of Problem

- Without sufficient spending authority, reimbursement to program participants may be delayed.
- Delays in reimbursement may discourage provider participation in the program, resulting in fewer health services to students.

Proposed Solution

- The increase in spending authority would allow program providers to submit their Medicaid allowable costs as certified public expenditures (CPE) and receive the federal matching dollars allowed under the Department's federally-approved reimbursement methodology.
- SHS providers use the reimbursements to fund the unmet health needs of all students served by participating providers as identified in the providers' Local Services Plan (LSP).
- The cash funds portion of this line item is comprised entirely of certified public expenditures and does not impact any State cash funds. This request has no General Fund impact.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-14, BA-14

Request Detail: Public School Health Services Funding Adjustment

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| Public School Health Services Funding Adjustment | \$9,393,330 | \$0 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|---|-------------|--------------|
| Public School Health Services Funding Adjustment | \$8,484,767 | \$0 |

| Summary of Incremental Funding Change for FY 2018-19 | Total Funds | General Fund |
|---|--------------|--------------|
| Public School Health Services Funding Adjustment | \$15,061,492 | \$0 |

Problem or Opportunity:

Public School Health Services (SHS) program participating providers' allowable costs for FY 2016-17, and in the foreseeable future, are projected to exceed the Department's current spending authority¹.

The Department anticipates increases in allowable expenditures of SHS program providers. The program allows Colorado's public school districts and state-operated educational institutions access to federal Medicaid funds for the partial reimbursement of their costs of providing health services to eligible students from kindergarten through twelfth grade. The State share of this reimbursement comes from certified public expenditures (CPE) by participating providers; no other State funds are required. Without sufficient spending authority, however, reimbursement of the federal share to the providers may be delayed, and delays in reimbursement may discourage provider participation in the program and potentially lead to the reduction of health services offered to children.

The SHS program facilitates provider reimbursements through a federally-approved, cost-based methodology. The Department uses a contractor to determine the amount of certified public expenditures

¹Background information on the SHS program, including requirements for program participation, can be found on the Department's website: <https://www.colorado.gov/pacific/hcpf/school-health-services>

federally claimable to assure compliance with federal requirements. The methodology used to determine the amount of allowable certified public expenditure is described below:

- For each participating provider, the vendor first compiles cost pool information, including salary, benefits and contracted costs for all random moment time study² (RMTS) participants, and indirect costs.
- The costs are then converted to allowable Medicaid costs by applying the statewide RMTS percentages against the direct service (DS) and targeted case management (TCM) cost pools, respectively.
- The allowable costs are then adjusted to reflect the program's qualifying clients by applying the Individual Education Program³ (IEP) student utilization ratio⁴.
- Costs of supplies, materials, transportation and other costs are added.

Program reimbursements are made to providers via interim payments and, upon final reconciliation of annual cost report data, a cost settlement payment. Additionally, a separate but similar calculation is used for determining the Medicaid administrative claiming⁵ (MAC) component of the program which is reimbursed on a quarterly basis.

The total allowable expenditures of the SHS program are projected to increase. The increase in expenditure is driven by improvements in identifying the number of students who are Medicaid eligible with an IEP, and improved understanding of RMTS reporting requirements by providers.

Proposed Solution:

The Department requests the following increases to the Public School Health Services line item to support local school health services:

- FY 2016-17: \$9,393,330 total funds, including \$4,754,691 cash funds and \$4,638,639 federal funds;
- FY 2017-18: \$8,484,767 total funds, including \$4,309,645 cash funds and \$4,175,122 federal funds.
- FY 2018-19: \$15,061,492 total funds, including \$7,597,571 cash funds and \$7,463,921 federal funds.

The cash funds portion of this line item is comprised entirely of certified public expenditures and does not impact any State cash funds. This request has no General Fund impact.

²The Random Moment Time Study (RMTS) is a federally-approved statistical sampling technique used to determine Medicaid reimbursement at school districts and BOCES. Participants are randomly selected to complete the survey regarding a 1-minute moment in time. The time study, conducted on a quarterly basis, gathers information on how staff members spend their time on certain health-related activities.

³An Individualized Education Program (IEP) is a document developed for each public school child who needs special education. The document, created by key school staff and the child's parents, lists reasonable learning goals for the child and the services that the school district will provide the child.

⁴The IEP Student Utilization Ratio is a program participant-specific ratio where the numerator is the total Medicaid IEP students on December 1st, as identified through the eligibility verification match from MMIS, and the denominator is the total number of IEP students on December 1st.

⁵Medicaid administrative claiming (MAC) refer to activities related to the administration of the state's Medicaid plan including costs associated with identifying and enrolling populations in need of Medicaid services, linking individuals and families to service providers, and coordinating and monitoring health related services.

Anticipated Outcomes:

The Medicaid funds received through the SHS program increase access to primary and preventive care programs for low-income, under or uninsured children and improve the coordination of care between schools and health care providers. SHS providers are required to use the federal funding received to either offset costs incurred for the provision of student health services or to fund other student health services as identified in the providers' Local Services Plan, including health care needs unique to their local communities.

Types of services that can be funded include, but are not limited to, the following:

- Enhanced clinic aid or nurse services;
- Dental, vision and pharmacy vouchers to uninsured or under-insured students;
- Outreach and enrollment assistance toward access of medical assistance benefits for uninsured families;
- Health supplies and equipment; and
- Enhanced physical or mental health services.

By allowing the Department to reimburse SHS providers on a timely basis for their incurred Medicaid costs, the approval of this request would ensure the retention of current participating providers and help attract new providers to the program, thus furthering the Department's mission of improving health care access and outcomes.

Assumptions and Calculations:

This request is based on the Department's expected amount of aggregate certified public expenditures calculated in accordance with the methodology previously described. Detailed calculations for this request are provided in the attached appendix.

Table 1 shows a summary of the total incremental funding request by fiscal year and fund source. The federal medical assistance percentage (FMAP) used for the calculation of federal funds varies according to applicable period and component of program. Tables 2.1 through 2.3 show the calculations to determine the incremental requests. The MAC component receives the standard 50% while the interim payments and cost settlement components receive the applicable FMAP at the time the cost was incurred.

Tables 3.1 and 3.2 illustrate the crosswalk between the program's cost report year totals and the corresponding state fiscal year in which the reimbursement payments are made. These tables are necessary because the program's interim payments are made in one state fiscal year and the cost settlement payments occur in following state fiscal year. The four quarterly MAC payments of each cost report year also span the same two fiscal years with two payments occurring in each state fiscal year. MAC payments within a cost report year have historically shown little variance. The Department assumes for cost projection purposes that each quarterly MAC payment is equal to one-fourth of the allowable MAC reimbursement attributable to each cost report year.

Tables 4.1 and 4.2 show historical and projection data for interim payments and cost settlement payments respectively. The Department's contracted vendor determined the allocation percentage for Cost Report Year 2016-17, shown in Table 4.2 Row B, using three years of historical data and modifications based on provider

input. The Department assumes the Cost Report Year 2016-17 allocation percentage for interim payments will remain constant in subsequent cost report years.

Tables 5.1 and 5.2 show the historical and projected calculations of direct services, target case management and specialized transportation allowable reimbursements. The reimbursements are calculated for each cost report year by applying the formula components to the direct services & targeted case management cost pools in accordance with the program's federally-approved methodology. Growth is expected for both cost pools, along with indirect costs, consistent with the program's 5-year historical trends. Additionally, formula components are expected to follow their upward trend as the SHS program continues to mature amid the increased training and outreach efforts of the Department and participating providers.

Tables 6.1 and 6.2 show the historical and projected calculations of Medicaid administrative claiming allowable reimbursements. These reimbursements are derived from three cost pools as MAC services are performed by those within the direct services & targeted case management cost pools (Row A) and the MAC-specific cost pool (Row D). Growth is expected in all cost pools, along with indirect costs, consistent with the program's 5-year historical trends.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The supplemental criteria applicable to this request is the existence of new data received in November 2016 that resulted in substantive changes in funding needs. Critical data and calculations for determining current fiscal year expenditures of the SHS program are not available to the Department until November of each state year. The provider data is derived from prior state fiscal year annual cost reports. This data is provided to the Department's vendor by October 1st. The data is then compiled, reviewed and submitted by the vendor to the Department in early November as preliminary cost settlement figures.

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 1 | | | | | | |
|--|---|--------------|--------------|-------------|---------------|-----------------|
| Summary of Incremental Request by Line Item | | | | | | |
| Row | Line Item | Total Funds | General Fund | Cash Funds | Federal Funds | Source |
| FY 2016-17 | | | | | | |
| A | (6) Other Medical Services; Public School Health Services | \$9,393,330 | \$0 | \$4,754,691 | \$4,638,639 | Table 2.1 Row C |
| FY 2017-18 | | | | | | |
| B | (6) Other Medical Services; Public School Health Services | \$8,484,767 | \$0 | \$4,309,645 | \$4,175,122 | Table 2.2 Row E |
| FY 2018-19 | | | | | | |
| C | (6) Other Medical Services; Public School Health Services | \$15,061,492 | \$0 | \$7,597,571 | \$7,463,921 | Table 2.3 Row C |

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 2.1 FY 2016-17 Public School Health Services Incremental Request | | | | | | |
|---|--|---------------------|---------------------|----------------------|--------------|---|
| Row | Description | Total Funds | Cash Funds | Federal Funds | FMAP | Source |
| A | FY 2016-17 Appropriation | \$82,604,632 | \$41,001,948 | \$41,602,684 | blend | Long Bill Appropriation (HB 16-1405) |
| B | Medicaid Administrative Claiming (MAC) | \$9,962,228 | \$4,981,114 | \$4,981,114 | 50.00% | Table 3.1, Row A [SFY 2016-17 projected] |
| C | Cost Settlement | \$32,276,421 | \$15,905,820 | \$16,370,601 | 50.72% | Table 3.1, Row B [SFY 2016-17 projected] |
| D | Interim Payment | \$49,759,313 | \$24,869,705 | \$24,889,608 | 50.02% | Table 3.1, Row C [SFY 2016-17 projected] |
| E | FY 2016-17 Estimated Expenditures | \$91,997,962 | \$45,756,639 | \$46,241,323 | blend | Row B + Row C + Row D |
| F | Incremental Request | \$9,393,330 | \$4,754,691 | \$4,638,639 | blend | Row E - Row A |

| Table 2.2 FY 2017-18 Public School Health Services Incremental Request | | | | | | |
|---|--|---------------------|---------------------|----------------------|--------------|---|
| Row | Description | Total Funds | Cash Funds | Federal Funds | FMAP | Source |
| A | FY 2016-17 Spending Authority | \$82,604,632 | \$41,001,948 | \$41,602,684 | blend | Long Bill Appropriation (HB 16-1405) |
| B | Annualization of FY 2015-16 BA-14 "Public School Health Services Funding Adjustment" | \$1,933,578 | \$1,193,993 | \$739,585 | blend | FY 2015-16 BA-14 "Public School Health Services Funding Adjustment" |
| C | FY 2017-18 Base Request | \$84,538,210 | \$42,195,941 | \$42,342,269 | blend | Row A + Row B |
| D | Medicaid Administrative Claiming (MAC) | \$10,069,720 | \$5,034,860 | \$5,034,860 | 50.00% | Table 3.1, Row A [SFY 2017-18 projected] |
| E | Cost Settlement | \$29,513,131 | \$14,750,663 | \$14,762,468 | 50.02% | Table 3.1, Row B [SFY 2017-18 projected] |
| F | Interim Payment | \$53,440,126 | \$26,720,063 | \$26,720,063 | 50.00% | Table 3.1, Row C [SFY 2017-18 projected] |
| G | Estimated Expenditures | \$93,022,977 | \$46,505,586 | \$46,517,391 | blend | Row D + Row E + Row F |
| H | Incremental Request | \$8,484,767 | \$4,309,645 | \$4,175,122 | blend | Row G - Row D |

| Table 2.3 FY 2018-19 Public School Health Services Incremental Request | | | | | | |
|---|---|---------------------|---------------------|----------------------|--------------|--|
| Row | Description | Total Funds | Cash Funds | Federal Funds | FMAP | Source |
| A | FY 2018-19 Continuation Spending Authority | \$84,538,210 | \$42,195,941 | \$42,342,269 | blend | Table 2.2, Row C |
| B | Medicaid Administrative Claiming (MAC) | \$10,476,340 | \$5,238,170 | \$5,238,170 | 50.00% | Table 3.1, Row A [SFY 2018-19 projected] |
| C | Cost Settlement | \$31,696,286 | \$15,841,804 | \$15,854,482 | 50.02% | Table 3.1, Row B [SFY 2018-19 projected] |
| D | Interim Payment | \$57,427,076 | \$28,713,538 | \$28,713,538 | 50.00% | Table 3.1, Row C [SFY 2018-19 projected] |
| E | Estimated Expenditures | \$99,599,702 | \$49,793,512 | \$49,806,190 | blend | Row B + Row C + Row D |
| F | Incremental Request | \$15,061,492 | \$7,597,571 | \$7,463,921 | blend | Row E - Row A |

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 3.1 - Aggregate Certified Public Expenditure (CPE) by State Fiscal Year | | | | | | | | | |
|---|--|---------------------|---------------------|---------------------|---------------------|---------------------|----------------------|----------------------|----------------------|
| Row | Reimbursement Component | FY 2011-12 | FY 2012-13 | FY 2013-14 | FY 2014-15 | FY 2015-16 | FY 2016-17 projected | FY 2017-18 projected | FY 2018-19 projected |
| A | Medicaid Administrative Claiming (MAC) | \$3,769,661 | \$3,881,499 | \$5,188,256 | \$7,009,451 | \$7,918,290 | \$9,962,228 | \$10,069,720 | \$10,476,340 |
| B | Cost Settlement | \$20,625,852 | \$18,881,603 | \$13,743,728 | \$24,915,714 | \$28,945,428 | \$32,276,421 | \$29,513,131 | \$31,696,286 |
| C | Interim Payment | \$18,008,746 | \$27,046,004 | \$29,765,430 | \$30,412,077 | \$41,430,687 | \$49,759,313 | \$53,440,126 | \$57,427,076 |
| D | Total Aggregate CPE | \$42,404,259 | \$49,809,106 | \$48,697,414 | \$62,337,242 | \$78,294,405 | \$91,997,962 | \$93,022,977 | \$99,599,702 |

| Table 3.2 - Aggregate Certified Public Expenditure (CPE) by Cost Report Year & State Fiscal Year | | | | | | | | | | | |
|--|----------------------------|-------------------------|---------------------|---------------------|---------------------|---------------------|---------------------|----------------------|----------------------|----------------------|----------------------|
| Row | Cost Report Year | Reimbursement Component | FY 2011-12 | FY 2012-13 | FY 2013-14 | FY 2014-15 | FY 2015-16 | FY 2016-17 projected | FY 2017-18 projected | FY 2018-19 projected | Total |
| A | CRY 2010-11 ⁽¹⁾ | MAC | \$2,065,673 | - | - | - | - | - | - | - | \$22,691,525 |
| | | Interim Payment | \$0 | - | - | - | - | - | - | - | |
| | | Cost Settlement | \$20,625,852 | - | - | - | - | - | - | - | |
| B | CRY 2011-12 | MAC | \$1,703,989 | \$1,786,526 | - | - | - | - | - | - | \$40,380,864 |
| | | Interim Payment | \$18,008,746 | \$0 | - | - | - | - | - | - | |
| | | Cost Settlement | \$0 | \$18,881,603 | - | - | - | - | - | - | |
| C | CRY 2012-13 | MAC | - | \$2,094,973 | \$2,079,795 | - | - | - | - | - | \$44,964,500 |
| | | Interim Payment | - | \$27,046,004 | \$0 | - | - | - | - | - | |
| | | Cost Settlement | - | \$0 | \$13,743,728 | - | - | - | - | - | |
| D | CRY 2013-14 | MAC | - | - | \$3,108,461 | \$3,334,954 | - | - | - | - | \$61,124,559 |
| | | Interim Payment | - | - | \$29,765,430 | \$0 | - | - | - | - | |
| | | Cost Settlement | - | - | \$0 | \$24,915,714 | - | - | - | - | |
| E | CRY 2014-15 | MAC | - | - | - | \$3,674,497 | \$3,459,398 | - | - | - | \$66,491,400 |
| | | Interim Payment | - | - | - | \$30,412,077 | \$0 | - | - | - | |
| | | Cost Settlement | - | - | - | \$0 | \$28,945,428 | - | - | - | |
| F | CRY 2015-16 | MAC | - | - | - | - | \$4,458,892 | \$5,026,828 | - | - | \$83,192,828 |
| | | Interim Payment | - | - | - | - | \$41,430,687 | \$0 | - | - | |
| | | Cost Settlement | - | - | - | - | \$0 | \$32,276,421 | - | - | |
| G | CRY 2016-17 | MAC | - | - | - | - | - | \$4,935,400 | \$4,935,400 | - | \$89,143,244 |
| | | Interim Payment | - | - | - | - | - | \$49,759,313 | \$0 | - | |
| | | Cost Settlement | - | - | - | - | - | \$0 | \$29,513,131 | - | |
| H | CRY 2017-18 | MAC | - | - | - | - | - | - | \$5,134,320 | \$5,134,320 | \$95,405,052 |
| | | Interim Payment | - | - | - | - | - | - | \$53,440,126 | \$0 | |
| | | Cost Settlement | - | - | - | - | - | - | \$0 | \$31,696,286 | |
| I | CRY 2018-19 | MAC | - | - | - | - | - | - | - | \$5,342,020 | \$102,172,133 |
| | | Interim Payment | - | - | - | - | - | - | - | \$57,427,076 | |
| | | Cost Settlement | - | - | - | - | - | - | - | \$0 | |
| J | Total Aggregate CPE | | \$42,404,259 | \$49,809,106 | \$48,697,414 | \$62,337,242 | \$78,294,405 | \$91,997,962 | \$93,022,977 | \$99,599,702 | \$566,163,067 |

⁽¹⁾Only cost settlement and partial MAC reimbursements in CRY 2010-11 apply to the fiscal years represented in table.

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 4.1 - Historical Amounts of Interim Payments and Cost Settlement Payments by Cost Report Year | | | | | | | |
|---|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|-------------------------------|
| Row | Item | Cost Report Year 2011-12 | Cost Report Year 2012-13 | Cost Report Year 2013-14 | Cost Report Year 2014-15 | Cost Report Year 2015-16 ⁽¹⁾ | Source |
| A | Interim Payments for Direct Services, Targeted Case Management & Specialized Transportation | \$18,008,746 | \$27,046,004 | \$29,765,430 | \$30,412,077 | \$41,430,687 | Annual Cost Settlement Report |
| B | Cost Settlement for Direct Services, Targeted Case Management & Specialized Transportation | \$18,881,603 | \$13,743,728 | \$24,915,714 | \$28,945,428 | \$32,276,421 | |
| C | Total Allowable Reimbursement for Direct Services, Targeted Case Management & Specialized Transportation | \$36,890,349 | \$40,789,732 | \$54,681,144 | \$59,357,505 | \$73,707,108 | Row A + Row B |

⁽¹⁾Preliminary data for Cost Report Year 2015-16 provided by email to Department by contracted vendor in November 2016. Final cost report data will be available in March 2017.

| Table 4.2 - Projection Amounts of Interim Payments and Cost Settlement Payments by Cost Report Year | | | | | |
|---|---|-----------------------------|-----------------------------|-----------------------------|--|
| Row | Item | Cost Report Year 2016-17 | Cost Report Year 2017-18 | Cost Report Year 2018-19 | Source |
| A | Total Allowable Reimbursement for Direct Services, Targeted Case Management & Specialized Transportation | \$79,272,444 | \$85,136,412 | \$91,488,093 | Table 5.2, Row K |
| B | Interim Payment Allocation Percentage | 62.77% | 62.77% | 62.77% | Provided by Department's contracted vendor via email, 11/08/2016 |
| C | Interim Payments for Direct Services, Targeted Case Management & Specialized Transportation | \$49,759,313 | \$53,440,126 | \$57,427,076 | Row A * Row B |
| D | Cost Settlement for Direct Services, Targeted Case Management & Specialized Transportation | \$29,513,131 | \$31,696,286 | \$34,061,017 | Row A - Row C |

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 5.1 - Historical Calculations of Direct Services (DS), Targeted Case Management (TCM) & Specialized Transportation Costs by Cost Report Year | | | | | | | |
|--|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------------------|
| Row | Item | Cost Report Year 2011-12 | Cost Report Year 2012-13 | Cost Report Year 2013-14 | Cost Report Year 2014-15 | Cost Report Year 2015-16 | Source |
| A | Salaries, Benefits & Contracted Staff Costs | \$258,840,956 | \$275,626,557 | \$251,176,932 | \$260,507,631 | \$292,904,805 | Annual Program Expenditures Report |
| B | Indirect Costs % | 16.96% | 16.08% | 18.20% | 18.97% | 19.23% | |
| C | Subtotal | \$302,742,254 | \$319,959,015 | \$296,881,038 | \$309,930,743 | \$349,226,647 | Row A * (1 + Row B) |
| D | RMTS ⁽¹⁾ % | 31.15% | 27.76% | 35.28% | 34.38% | 36.77% | Annual Program Expenditures Report |
| E | Subtotal | \$94,305,888 | \$88,825,602 | \$104,753,611 | \$106,554,190 | \$128,410,638 | Row C * Row D |
| F | Supplies & Materials Costs | \$9,147,944 | \$2,886,713 | \$2,279,520 | \$2,734,031 | \$2,468,955 | Annual Program Expenditures Report |
| G | Subtotal | \$103,453,832 | \$91,712,315 | \$107,033,131 | \$109,288,221 | \$130,879,594 | Row E + Row F |
| H | IEP ⁽²⁾ % | 31.82% | 39.31% | 45.00% | 49.15% | 52.40% | Annual Program Expenditures Report |
| I | Total DS, TCM CPE Amounts | \$32,914,492 | \$36,051,441 | \$48,170,029 | \$53,714,867 | \$68,580,906 | Row G * Row H |
| J | Specialized Transportation CPE Amount ⁽³⁾ | \$3,975,856 | \$4,738,291 | \$6,511,115 | \$5,642,639 | \$5,126,202 | Annual Program Expenditures Report |
| K | Total Allowable Reimbursement - DS, TCM & Specialized Transportation | \$36,890,349 | \$40,789,732 | \$54,681,144 | \$59,357,505 | \$73,707,108 | Row I + Row J |

⁽¹⁾ Random Moment Time Study weighted percentage based on annual average statewide allowable DS & TCM

⁽²⁾ Individualized Education Program (IEP) student utilization ratio which is applied on a district-specific basis

⁽³⁾ Specialized Transportation CPE amount determined by subset of above formula including separate IEP% and a One-Way Transportation ratio

Table 5.2 - Projected Calculations of Direct Services (DS), Targeted Case Management (TCM) & Specialized Transportation by Cost Report Year

| Row | Item | Cost Report Year 2016-17 | Cost Report Year 2017-18 | Cost Report Year 2018-19 | Source |
|----------|---|-----------------------------|-----------------------------|-----------------------------|--|
| A | Salaries, Benefits & Contracted Staff Costs | \$302,102,016 | \$311,588,019 | \$321,371,883 | Growth rate of 3.14%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| B | Indirect Costs % | 19.84% | 20.47% | 21.12% | Growth rate of 3.19%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| C | Subtotal | \$362,039,056 | \$375,370,086 | \$389,245,625 | Row A * (1 + Row B) |
| D | RMTS ⁽¹⁾ % | 38.33% | 39.95% | 41.64% | Growth rate of 4.23%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| E | Subtotal | \$138,769,570 | \$149,960,349 | \$162,081,878 | Row C * Row D |
| F | Supplies & Materials Costs | \$2,592,305 | \$2,592,305 | \$2,592,305 | Average of Supplies & Materials costs from CRY 2012-13 to CRY 2015-16 |
| G | Subtotal | \$141,361,875 | \$152,552,654 | \$164,674,183 | Row E + Row F |
| H | IEP ⁽²⁾ % | 52.40% | 52.40% | 52.40% | IEP% from CRY 2015-16 |
| I | Total DS, TCM CPE Amounts | \$74,073,623 | \$79,937,591 | \$86,289,272 | Row G + Row H |
| J | Specialized Transportation CPE Amount ⁽³⁾ | \$5,198,821 | \$5,198,821 | \$5,198,821 | Average of Specialized Transportation costs from CRY 2011-12 to CRY 2015-16 |
| K | Total Allowable Reimbursement - DS, TCM & Specialized Transportation | \$79,272,444 | \$85,136,412 | \$91,488,093 | Row I + Row J |

⁽¹⁾ Random Moment Time Study percentage based on annual average statewide allowable DS & TCM

⁽²⁾ Individualized Education Program student utilization ratio which applied on a district-specific basis

⁽³⁾ Specialized Transportation CPE amount determined by subset of above formula including separate IEP% and a One-Way Transportation ratio

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 6.1 - Historical Calculations of Medicaid Administrative Claiming by Cost Report Year | | | | | | | |
|---|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------------------|
| Row | Item | Cost Report Year 2011-12 | Cost Report Year 2012-13 | Cost Report Year 2013-14 | Cost Report Year 2014-15 | Cost Report Year 2015-16 | Source |
| A | Salaries, Benefits & Contracted Staff Costs - DS & TCM | \$258,840,956 | \$275,626,557 | \$251,176,932 | \$260,507,631 | \$292,904,805 | Medicaid Administrative Claims Report |
| B | RMTS% for MAC - DS & TCM ⁽¹⁾ | 1.70% | 1.39% | 2.07% | 1.70% | 2.22% | RMTS Calculation Report |
| C | Subtotal | \$4,409,160 | \$3,842,367 | \$5,187,510 | \$4,437,070 | \$6,493,826 | Row A * Row B |
| D | Salaries, Benefits & Contracted Staff Costs - MAC | \$78,192,236 | \$74,826,803 | \$76,378,713 | \$79,988,348 | \$90,220,924 | Medicaid Administrative Claims Report |
| E | RMTS% - MAC Administrative | 11.17% | 11.19% | 13.33% | 13.05% | 15.97% | RMTS Calculation Report |
| F | Subtotal | \$8,731,678 | \$8,372,475 | \$10,179,253 | \$10,440,829 | \$14,408,282 | Row D * Row E |
| G | Total | \$13,140,837 | \$12,214,842 | \$15,366,764 | \$14,877,898 | \$20,902,108 | Row C + Row F |
| H | Medicaid Eligibility Rate | 22.71% | 29.44% | 35.48% | 40.30% | 38.06% | Medicaid Administrative Claims Report |
| I | Adjusted Total | \$2,984,348 | \$3,596,326 | \$5,451,467 | \$5,996,288 | \$7,955,902 | Row G * Row H |
| J | Indirect Cost Rate | 16.96% | 16.08% | 18.20% | 18.97% | 19.23% | Medicaid Administrative Claims Report |
| K | Total Allowable Reimbursement - MAC | \$3,490,515 | \$4,174,768 | \$6,443,415 | \$7,133,895 | \$9,485,720 | Row I * (1 + Row J) |

⁽¹⁾ Random Moment Time Study weighted percentage based on annual average statewide allowable DS & TCM

| Table 6.2 - Medicaid Administrative Claiming Projections by Cost Report Year | | | | | |
|--|--|-----------------------------|-----------------------------|-----------------------------|--|
| Row | Item | Cost Report Year 2016-17 | Cost Report Year 2017-18 | Cost Report Year 2018-19 | Source |
| A | Salaries, Benefits & Contracted Staff Costs - DS & TCM | \$302,102,016 | \$311,588,019 | \$321,371,883 | Growth rate of 3.14%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| B | RMTS% for MAC - DS & TCM ⁽¹⁾ | 2.22% | 2.22% | 2.22% | Percentage from CRY 2015-16 |
| C | Subtotal | \$6,706,665 | \$6,917,254 | \$7,134,456 | Row A * Row B |
| D | Salaries, Benefits & Contracted Staff Costs - MAC | \$93,506,797 | \$96,912,342 | \$100,441,918 | Growth rate of 3.64%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| E | RMTS% - MAC Administrative | 15.97% | 15.97% | 15.97% | Percentage from CRY 2015-16 |
| F | Subtotal | \$14,933,035 | \$15,476,901 | \$16,040,574 | Row D * Row E |
| G | Total | \$21,639,700 | \$22,394,155 | \$23,175,030 | Row C + Row F |
| H | Medicaid Eligibility Rate | 38.06% | 38.06% | 38.06% | Percentage from CRY 2015-16 |
| I | Adjusted Total | \$8,236,649.00 | \$8,523,815.00 | \$8,821,037.00 | Row G * Row H |
| J | Indirect Cost Rate | 19.84% | 20.47% | 21.12% | Growth rate of 3.19%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| K | Total Allowable Reimbursement - MAC | \$9,870,800 | \$10,268,640 | \$10,684,040 | Row I * (1 + Row J) |

⁽¹⁾ Random Moment Time Study weighted percentage based on annual average statewide allowable DS & TCM


Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

**S-14 Public School Health Services Funding Adjustment
BA-14 Public School Health Services Funding Adjustment**

Dept. Approval By: Josh Block  1/3/17 Supplemental FY 2016-17

OSPB Approval By: Grant A. Schubert 12/29/16 Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|---------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$82,604,632 | \$9,393,330 | \$84,538,210 | \$8,484,767 | \$15,061,492 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| CF | | \$41,001,948 | \$4,754,691 | \$42,195,941 | \$4,309,645 | \$7,597,571 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$41,602,684 | \$4,638,639 | \$42,342,269 | \$4,175,122 | \$7,463,921 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|-----------------------|------|-----------------------|----------------------|--------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| Total | | \$82,604,632 | \$9,393,330 | \$84,538,210 | \$8,484,767 | \$15,061,492 |
| FTE | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| GF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| CF | | \$41,001,948 | \$4,754,691 | \$42,195,941 | \$4,309,645 | \$7,597,571 |
| RF | | \$0 | \$0 | \$0 | \$0 | \$0 |
| FF | | \$41,602,684 | \$4,638,639 | \$42,342,269 | \$4,175,122 | \$7,463,921 |

| | | | | | |
|---|--|-------------------------------------|----|-------------------------------------|--|
| CF Letternote Text Revision Required? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | If Yes, see attached fund source detail for Schedule 11 or 12. |
| RF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| FF Letternote Text Revision Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Requires Legislation? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- FY 2016-17: \$9,393,330 total funds, including \$4,754,691 cash funds and \$4,638,639 federal funds.
- FY 2017-18: \$8,484,767 total funds, including \$4,309,645 cash funds and \$4,175,122 federal funds.
- FY 2018-19: \$15,061,492 total funds, including \$7,597,571 cash funds and \$7,463,921 federal funds.

Current Program

- The Public School Health Services (SHS) program allows Colorado's public schools and state-operated educational institutions access to federal Medicaid funds for the partial reimbursement of their costs of providing health services to eligible students from kindergarten through twelfth grade.
- Participants in the SHS program can be school districts, Board of Cooperative Education Services (BOCES) or K-12 educational institutions, hereafter referred to as providers. The Department, as the single state agency for the Medicaid program, administers the program and provides training and oversight to assure compliance with the federally-approved reimbursement methodology.
- SHS program providers are required to use the federal funding received through the program to fund the unmet health needs of all students served by participating providers, as identified in the providers' Local Services Plan (LSP). This has allowed providers to address some of the health care needs unique to their local communities.

Problem or Opportunity

- The aggregate total of SHS program providers' allowable costs is projected to exceed the Department's spending authority in FY 2016-17 and future years.
- The Department's SHS program forecast has been updated to reflect new data received in November 2016 from the Department's contracted vendor.

Consequences of Problem

- Without sufficient spending authority, reimbursement to program participants may be delayed.
- Delays in reimbursement may discourage provider participation in the program, resulting in fewer health services to students.

Proposed Solution

- The increase in spending authority would allow program providers to submit their Medicaid allowable costs as certified public expenditures (CPE) and receive the federal matching dollars allowed under the Department's federally-approved reimbursement methodology.
- SHS providers use the reimbursements to fund the unmet health needs of all students served by participating providers as identified in the providers' Local Services Plan (LSP).
- The cash funds portion of this line item is comprised entirely of certified public expenditures and does not impact any State cash funds. This request has no General Fund impact.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-14, BA-14

Request Detail: Public School Health Services Funding Adjustment

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| Public School Health Services Funding Adjustment | \$9,393,330 | \$0 |

| Summary of Incremental Funding Change for FY 2017-18 | Total Funds | General Fund |
|---|-------------|--------------|
| Public School Health Services Funding Adjustment | \$8,484,767 | \$0 |

| Summary of Incremental Funding Change for FY 2018-19 | Total Funds | General Fund |
|---|--------------|--------------|
| Public School Health Services Funding Adjustment | \$15,061,492 | \$0 |

Problem or Opportunity:

Public School Health Services (SHS) program participating providers' allowable costs for FY 2016-17, and in the foreseeable future, are projected to exceed the Department's current spending authority¹.

The Department anticipates increases in allowable expenditures of SHS program providers. The program allows Colorado's public school districts and state-operated educational institutions access to federal Medicaid funds for the partial reimbursement of their costs of providing health services to eligible students from kindergarten through twelfth grade. The State share of this reimbursement comes from certified public expenditures (CPE) by participating providers; no other State funds are required. Without sufficient spending authority, however, reimbursement of the federal share to the providers may be delayed, and delays in reimbursement may discourage provider participation in the program and potentially lead to the reduction of health services offered to children.

The SHS program facilitates provider reimbursements through a federally-approved, cost-based methodology. The Department uses a contractor to determine the amount of certified public expenditures

¹Background information on the SHS program, including requirements for program participation, can be found on the Department's website: <https://www.colorado.gov/pacific/hcpf/school-health-services>

federally claimable to assure compliance with federal requirements. The methodology used to determine the amount of allowable certified public expenditure is described below:

- For each participating provider, the vendor first compiles cost pool information, including salary, benefits and contracted costs for all random moment time study² (RMTS) participants, and indirect costs.
- The costs are then converted to allowable Medicaid costs by applying the statewide RMTS percentages against the direct service (DS) and targeted case management (TCM) cost pools, respectively.
- The allowable costs are then adjusted to reflect the program's qualifying clients by applying the Individual Education Program³ (IEP) student utilization ratio⁴.
- Costs of supplies, materials, transportation and other costs are added.

Program reimbursements are made to providers via interim payments and, upon final reconciliation of annual cost report data, a cost settlement payment. Additionally, a separate but similar calculation is used for determining the Medicaid administrative claiming⁵ (MAC) component of the program which is reimbursed on a quarterly basis.

The total allowable expenditures of the SHS program are projected to increase. The increase in expenditure is driven by improvements in identifying the number of students who are Medicaid eligible with an IEP, and improved understanding of RMTS reporting requirements by providers.

Proposed Solution:

The Department requests the following increases to the Public School Health Services line item to support local school health services:

- FY 2016-17: \$9,393,330 total funds, including \$4,754,691 cash funds and \$4,638,639 federal funds;
- FY 2017-18: \$8,484,767 total funds, including \$4,309,645 cash funds and \$4,175,122 federal funds.
- FY 2018-19: \$15,061,492 total funds, including \$7,597,571 cash funds and \$7,463,921 federal funds.

The cash funds portion of this line item is comprised entirely of certified public expenditures and does not impact any State cash funds. This request has no General Fund impact.

²The Random Moment Time Study (RMTS) is a federally-approved statistical sampling technique used to determine Medicaid reimbursement at school districts and BOCES. Participants are randomly selected to complete the survey regarding a 1-minute moment in time. The time study, conducted on a quarterly basis, gathers information on how staff members spend their time on certain health-related activities.

³An Individualized Education Program (IEP) is a document developed for each public school child who needs special education. The document, created by key school staff and the child's parents, lists reasonable learning goals for the child and the services that the school district will provide the child.

⁴The IEP Student Utilization Ratio is a program participant-specific ratio where the numerator is the total Medicaid IEP students on December 1st, as identified through the eligibility verification match from MMIS, and the denominator is the total number of IEP students on December 1st.

⁵Medicaid administrative claiming (MAC) refer to activities related to the administration of the state's Medicaid plan including costs associated with identifying and enrolling populations in need of Medicaid services, linking individuals and families to service providers, and coordinating and monitoring health related services.

Anticipated Outcomes:

The Medicaid funds received through the SHS program increase access to primary and preventive care programs for low-income, under or uninsured children and improve the coordination of care between schools and health care providers. SHS providers are required to use the federal funding received to either offset costs incurred for the provision of student health services or to fund other student health services as identified in the providers' Local Services Plan, including health care needs unique to their local communities.

Types of services that can be funded include, but are not limited to, the following:

- Enhanced clinic aid or nurse services;
- Dental, vision and pharmacy vouchers to uninsured or under-insured students;
- Outreach and enrollment assistance toward access of medical assistance benefits for uninsured families;
- Health supplies and equipment; and
- Enhanced physical or mental health services.

By allowing the Department to reimburse SHS providers on a timely basis for their incurred Medicaid costs, the approval of this request would ensure the retention of current participating providers and help attract new providers to the program, thus furthering the Department's mission of improving health care access and outcomes.

Assumptions and Calculations:

This request is based on the Department's expected amount of aggregate certified public expenditures calculated in accordance with the methodology previously described. Detailed calculations for this request are provided in the attached appendix.

Table 1 shows a summary of the total incremental funding request by fiscal year and fund source. The federal medical assistance percentage (FMAP) used for the calculation of federal funds varies according to applicable period and component of program. Tables 2.1 through 2.3 show the calculations to determine the incremental requests. The MAC component receives the standard 50% while the interim payments and cost settlement components receive the applicable FMAP at the time the cost was incurred.

Tables 3.1 and 3.2 illustrate the crosswalk between the program's cost report year totals and the corresponding state fiscal year in which the reimbursement payments are made. These tables are necessary because the program's interim payments are made in one state fiscal year and the cost settlement payments occur in following state fiscal year. The four quarterly MAC payments of each cost report year also span the same two fiscal years with two payments occurring in each state fiscal year. MAC payments within a cost report year have historically shown little variance. The Department assumes for cost projection purposes that each quarterly MAC payment is equal to one-fourth of the allowable MAC reimbursement attributable to each cost report year.

Tables 4.1 and 4.2 show historical and projection data for interim payments and cost settlement payments respectively. The Department's contracted vendor determined the allocation percentage for Cost Report Year 2016-17, shown in Table 4.2 Row B, using three years of historical data and modifications based on provider

input. The Department assumes the Cost Report Year 2016-17 allocation percentage for interim payments will remain constant in subsequent cost report years.

Tables 5.1 and 5.2 show the historical and projected calculations of direct services, target case management and specialized transportation allowable reimbursements. The reimbursements are calculated for each cost report year by applying the formula components to the direct services & targeted case management cost pools in accordance with the program's federally-approved methodology. Growth is expected for both cost pools, along with indirect costs, consistent with the program's 5-year historical trends. Additionally, formula components are expected to follow their upward trend as the SHS program continues to mature amid the increased training and outreach efforts of the Department and participating providers.

Tables 6.1 and 6.2 show the historical and projected calculations of Medicaid administrative claiming allowable reimbursements. These reimbursements are derived from three cost pools as MAC services are performed by those within the direct services & targeted case management cost pools (Row A) and the MAC-specific cost pool (Row D). Growth is expected in all cost pools, along with indirect costs, consistent with the program's 5-year historical trends.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

The supplemental criteria applicable to this request is the existence of new data received in November 2016 that resulted in substantive changes in funding needs. Critical data and calculations for determining current fiscal year expenditures of the SHS program are not available to the Department until November of each state year. The provider data is derived from prior state fiscal year annual cost reports. This data is provided to the Department's vendor by October 1st. The data is then compiled, reviewed and submitted by the vendor to the Department in early November as preliminary cost settlement figures.

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 1 | | | | | | |
|--|---|--------------------|---------------------|-------------------|----------------------|-----------------|
| Summary of Incremental Request by Line Item | | | | | | |
| Row | Line Item | Total Funds | General Fund | Cash Funds | Federal Funds | Source |
| FY 2016-17 | | | | | | |
| A | (6) Other Medical Services; Public School Health Services | \$9,393,330 | \$0 | \$4,754,691 | \$4,638,639 | Table 2.1 Row C |
| FY 2017-18 | | | | | | |
| B | (6) Other Medical Services; Public School Health Services | \$8,484,767 | \$0 | \$4,309,645 | \$4,175,122 | Table 2.2 Row E |
| FY 2018-19 | | | | | | |
| C | (6) Other Medical Services; Public School Health Services | \$15,061,492 | \$0 | \$7,597,571 | \$7,463,921 | Table 2.3 Row C |

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 2.1 FY 2016-17 Public School Health Services Incremental Request | | | | | | |
|---|--|---------------------|---------------------|----------------------|--------------|---|
| Row | Description | Total Funds | Cash Funds | Federal Funds | FMAP | Source |
| A | FY 2016-17 Appropriation | \$82,604,632 | \$41,001,948 | \$41,602,684 | blend | Long Bill Appropriation (HB 16-1405) |
| B | Medicaid Administrative Claiming (MAC) | \$9,962,228 | \$4,981,114 | \$4,981,114 | 50.00% | Table 3.1, Row A [SFY 2016-17 projected] |
| C | Cost Settlement | \$32,276,421 | \$15,905,820 | \$16,370,601 | 50.72% | Table 3.1, Row B [SFY 2016-17 projected] |
| D | Interim Payment | \$49,759,313 | \$24,869,705 | \$24,889,608 | 50.02% | Table 3.1, Row C [SFY 2016-17 projected] |
| E | FY 2016-17 Estimated Expenditures | \$91,997,962 | \$45,756,639 | \$46,241,323 | blend | Row B + Row C + Row D |
| F | Incremental Request | \$9,393,330 | \$4,754,691 | \$4,638,639 | blend | Row E - Row A |

| Table 2.2 FY 2017-18 Public School Health Services Incremental Request | | | | | | |
|---|--|---------------------|---------------------|----------------------|--------------|---|
| Row | Description | Total Funds | Cash Funds | Federal Funds | FMAP | Source |
| A | FY 2016-17 Spending Authority | \$82,604,632 | \$41,001,948 | \$41,602,684 | blend | Long Bill Appropriation (HB 16-1405) |
| B | Annualization of FY 2015-16 BA-14 "Public School Health Services Funding Adjustment" | \$1,933,578 | \$1,193,993 | \$739,585 | blend | FY 2015-16 BA-14 "Public School Health Services Funding Adjustment" |
| C | FY 2017-18 Base Request | \$84,538,210 | \$42,195,941 | \$42,342,269 | blend | Row A + Row B |
| D | Medicaid Administrative Claiming (MAC) | \$10,069,720 | \$5,034,860 | \$5,034,860 | 50.00% | Table 3.1, Row A [SFY 2017-18 projected] |
| E | Cost Settlement | \$29,513,131 | \$14,750,663 | \$14,762,468 | 50.02% | Table 3.1, Row B [SFY 2017-18 projected] |
| F | Interim Payment | \$53,440,126 | \$26,720,063 | \$26,720,063 | 50.00% | Table 3.1, Row C [SFY 2017-18 projected] |
| G | Estimated Expenditures | \$93,022,977 | \$46,505,586 | \$46,517,391 | blend | Row D + Row E + Row F |
| H | Incremental Request | \$8,484,767 | \$4,309,645 | \$4,175,122 | blend | Row G - Row D |

| Table 2.3 FY 2018-19 Public School Health Services Incremental Request | | | | | | |
|---|---|---------------------|---------------------|----------------------|--------------|--|
| Row | Description | Total Funds | Cash Funds | Federal Funds | FMAP | Source |
| A | FY 2018-19 Continuation Spending Authority | \$84,538,210 | \$42,195,941 | \$42,342,269 | blend | Table 2.2, Row C |
| B | Medicaid Administrative Claiming (MAC) | \$10,476,340 | \$5,238,170 | \$5,238,170 | 50.00% | Table 3.1, Row A [SFY 2018-19 projected] |
| C | Cost Settlement | \$31,696,286 | \$15,841,804 | \$15,854,482 | 50.02% | Table 3.1, Row B [SFY 2018-19 projected] |
| D | Interim Payment | \$57,427,076 | \$28,713,538 | \$28,713,538 | 50.00% | Table 3.1, Row C [SFY 2018-19 projected] |
| E | Estimated Expenditures | \$99,599,702 | \$49,793,512 | \$49,806,190 | blend | Row B + Row C + Row D |
| F | Incremental Request | \$15,061,492 | \$7,597,571 | \$7,463,921 | blend | Row E - Row A |

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 3.1 - Aggregate Certified Public Expenditure (CPE) by State Fiscal Year | | | | | | | | | |
|---|--|---------------------|---------------------|---------------------|---------------------|---------------------|----------------------|----------------------|----------------------|
| Row | Reimbursement Component | FY 2011-12 | FY 2012-13 | FY 2013-14 | FY 2014-15 | FY 2015-16 | FY 2016-17 projected | FY 2017-18 projected | FY 2018-19 projected |
| A | Medicaid Administrative Claiming (MAC) | \$3,769,661 | \$3,881,499 | \$5,188,256 | \$7,009,451 | \$7,918,290 | \$9,962,228 | \$10,069,720 | \$10,476,340 |
| B | Cost Settlement | \$20,625,852 | \$18,881,603 | \$13,743,728 | \$24,915,714 | \$28,945,428 | \$32,276,421 | \$29,513,131 | \$31,696,286 |
| C | Interim Payment | \$18,008,746 | \$27,046,004 | \$29,765,430 | \$30,412,077 | \$41,430,687 | \$49,759,313 | \$53,440,126 | \$57,427,076 |
| D | Total Aggregate CPE | \$42,404,259 | \$49,809,106 | \$48,697,414 | \$62,337,242 | \$78,294,405 | \$91,997,962 | \$93,022,977 | \$99,599,702 |

| Table 3.2 - Aggregate Certified Public Expenditure (CPE) by Cost Report Year & State Fiscal Year | | | | | | | | | | | |
|--|----------------------------|-------------------------|---------------------|---------------------|---------------------|---------------------|---------------------|----------------------|----------------------|----------------------|----------------------|
| Row | Cost Report Year | Reimbursement Component | FY 2011-12 | FY 2012-13 | FY 2013-14 | FY 2014-15 | FY 2015-16 | FY 2016-17 projected | FY 2017-18 projected | FY 2018-19 projected | Total |
| A | CRY 2010-11 ⁽¹⁾ | MAC | \$2,065,673 | - | - | - | - | - | - | - | \$22,691,525 |
| | | Interim Payment | \$0 | - | - | - | - | - | - | - | |
| | | Cost Settlement | \$20,625,852 | - | - | - | - | - | - | - | |
| B | CRY 2011-12 | MAC | \$1,703,989 | \$1,786,526 | - | - | - | - | - | - | \$40,380,864 |
| | | Interim Payment | \$18,008,746 | \$0 | - | - | - | - | - | - | |
| | | Cost Settlement | \$0 | \$18,881,603 | - | - | - | - | - | - | |
| C | CRY 2012-13 | MAC | - | \$2,094,973 | \$2,079,795 | - | - | - | - | - | \$44,964,500 |
| | | Interim Payment | - | \$27,046,004 | \$0 | - | - | - | - | - | |
| | | Cost Settlement | - | \$0 | \$13,743,728 | - | - | - | - | - | |
| D | CRY 2013-14 | MAC | - | - | \$3,108,461 | \$3,334,954 | - | - | - | - | \$61,124,559 |
| | | Interim Payment | - | - | \$29,765,430 | \$0 | - | - | - | - | |
| | | Cost Settlement | - | - | \$0 | \$24,915,714 | - | - | - | - | |
| E | CRY 2014-15 | MAC | - | - | - | \$3,674,497 | \$3,459,398 | - | - | - | \$66,491,400 |
| | | Interim Payment | - | - | - | \$30,412,077 | \$0 | - | - | - | |
| | | Cost Settlement | - | - | - | \$0 | \$28,945,428 | - | - | - | |
| F | CRY 2015-16 | MAC | - | - | - | - | \$4,458,892 | \$5,026,828 | - | - | \$83,192,828 |
| | | Interim Payment | - | - | - | - | \$41,430,687 | \$0 | - | - | |
| | | Cost Settlement | - | - | - | - | \$0 | \$32,276,421 | - | - | |
| G | CRY 2016-17 | MAC | - | - | - | - | - | \$4,935,400 | \$4,935,400 | - | \$89,143,244 |
| | | Interim Payment | - | - | - | - | - | \$49,759,313 | \$0 | - | |
| | | Cost Settlement | - | - | - | - | - | \$0 | \$29,513,131 | - | |
| H | CRY 2017-18 | MAC | - | - | - | - | - | - | \$5,134,320 | \$5,134,320 | \$95,405,052 |
| | | Interim Payment | - | - | - | - | - | - | \$53,440,126 | \$0 | |
| | | Cost Settlement | - | - | - | - | - | - | \$0 | \$31,696,286 | |
| I | CRY 2018-19 | MAC | - | - | - | - | - | - | - | \$5,342,020 | \$102,172,133 |
| | | Interim Payment | - | - | - | - | - | - | - | \$57,427,076 | |
| | | Cost Settlement | - | - | - | - | - | - | - | \$0 | |
| J | Total Aggregate CPE | | \$42,404,259 | \$49,809,106 | \$48,697,414 | \$62,337,242 | \$78,294,405 | \$91,997,962 | \$93,022,977 | \$99,599,702 | \$566,163,067 |

⁽¹⁾Only cost settlement and partial MAC reimbursements in CRY 2010-11 apply to the fiscal years represented in table.

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 4.1 - Historical Amounts of Interim Payments and Cost Settlement Payments by Cost Report Year | | | | | | | |
|---|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|-------------------------------|
| Row | Item | Cost Report Year 2011-12 | Cost Report Year 2012-13 | Cost Report Year 2013-14 | Cost Report Year 2014-15 | Cost Report Year 2015-16 ⁽¹⁾ | Source |
| A | Interim Payments for Direct Services, Targeted Case Management & Specialized Transportation | \$18,008,746 | \$27,046,004 | \$29,765,430 | \$30,412,077 | \$41,430,687 | Annual Cost Settlement Report |
| B | Cost Settlement for Direct Services, Targeted Case Management & Specialized Transportation | \$18,881,603 | \$13,743,728 | \$24,915,714 | \$28,945,428 | \$32,276,421 | |
| C | Total Allowable Reimbursement for Direct Services, Targeted Case Management & Specialized Transportation | \$36,890,349 | \$40,789,732 | \$54,681,144 | \$59,357,505 | \$73,707,108 | Row A + Row B |

⁽¹⁾Preliminary data for Cost Report Year 2015-16 provided by email to Department by contracted vendor in November 2016. Final cost report data will be available in March 2017.

| Table 4.2 - Projection Amounts of Interim Payments and Cost Settlement Payments by Cost Report Year | | | | | |
|---|---|-----------------------------|-----------------------------|-----------------------------|--|
| Row | Item | Cost Report Year 2016-17 | Cost Report Year 2017-18 | Cost Report Year 2018-19 | Source |
| A | Total Allowable Reimbursement for Direct Services, Targeted Case Management & Specialized Transportation | \$79,272,444 | \$85,136,412 | \$91,488,093 | Table 5.2, Row K |
| B | Interim Payment Allocation Percentage | 62.77% | 62.77% | 62.77% | Provided by Department's contracted vendor via email, 11/08/2016 |
| C | Interim Payments for Direct Services, Targeted Case Management & Specialized Transportation | \$49,759,313 | \$53,440,126 | \$57,427,076 | Row A * Row B |
| D | Cost Settlement for Direct Services, Targeted Case Management & Specialized Transportation | \$29,513,131 | \$31,696,286 | \$34,061,017 | Row A - Row C |

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 5.1 - Historical Calculations of Direct Services (DS), Targeted Case Management (TCM) & Specialized Transportation Costs by Cost Report Year | | | | | | | |
|--|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------------------|
| Row | Item | Cost Report Year 2011-12 | Cost Report Year 2012-13 | Cost Report Year 2013-14 | Cost Report Year 2014-15 | Cost Report Year 2015-16 | Source |
| A | Salaries, Benefits & Contracted Staff Costs | \$258,840,956 | \$275,626,557 | \$251,176,932 | \$260,507,631 | \$292,904,805 | Annual Program Expenditures Report |
| B | Indirect Costs % | 16.96% | 16.08% | 18.20% | 18.97% | 19.23% | |
| C | Subtotal | \$302,742,254 | \$319,959,015 | \$296,881,038 | \$309,930,743 | \$349,226,647 | Row A * (1 + Row B) |
| D | RMTS ⁽¹⁾ % | 31.15% | 27.76% | 35.28% | 34.38% | 36.77% | Annual Program Expenditures Report |
| E | Subtotal | \$94,305,888 | \$88,825,602 | \$104,753,611 | \$106,554,190 | \$128,410,638 | Row C * Row D |
| F | Supplies & Materials Costs | \$9,147,944 | \$2,886,713 | \$2,279,520 | \$2,734,031 | \$2,468,955 | Annual Program Expenditures Report |
| G | Subtotal | \$103,453,832 | \$91,712,315 | \$107,033,131 | \$109,288,221 | \$130,879,594 | Row E + Row F |
| H | IEP ⁽²⁾ % | 31.82% | 39.31% | 45.00% | 49.15% | 52.40% | Annual Program Expenditures Report |
| I | Total DS, TCM CPE Amounts | \$32,914,492 | \$36,051,441 | \$48,170,029 | \$53,714,867 | \$68,580,906 | Row G * Row H |
| J | Specialized Transportation CPE Amount ⁽³⁾ | \$3,975,856 | \$4,738,291 | \$6,511,115 | \$5,642,639 | \$5,126,202 | Annual Program Expenditures Report |
| K | Total Allowable Reimbursement - DS, TCM & Specialized Transportation | \$36,890,349 | \$40,789,732 | \$54,681,144 | \$59,357,505 | \$73,707,108 | Row I + Row J |

⁽¹⁾ Random Moment Time Study weighted percentage based on annual average statewide allowable DS & TCM

⁽²⁾ Individualized Education Program (IEP) student utilization ratio which is applied on a district-specific basis

⁽³⁾ Specialized Transportation CPE amount determined by subset of above formula including separate IEP% and a One-Way Transportation ratio

Table 5.2 - Projected Calculations of Direct Services (DS), Targeted Case Management (TCM) & Specialized Transportation by Cost Report Year

| Row | Item | Cost Report Year 2016-17 | Cost Report Year 2017-18 | Cost Report Year 2018-19 | Source |
|----------|---|-----------------------------|-----------------------------|-----------------------------|--|
| A | Salaries, Benefits & Contracted Staff Costs | \$302,102,016 | \$311,588,019 | \$321,371,883 | Growth rate of 3.14%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| B | Indirect Costs % | 19.84% | 20.47% | 21.12% | Growth rate of 3.19%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| C | Subtotal | \$362,039,056 | \$375,370,086 | \$389,245,625 | Row A * (1 + Row B) |
| D | RMTS ⁽¹⁾ % | 38.33% | 39.95% | 41.64% | Growth rate of 4.23%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| E | Subtotal | \$138,769,570 | \$149,960,349 | \$162,081,878 | Row C * Row D |
| F | Supplies & Materials Costs | \$2,592,305 | \$2,592,305 | \$2,592,305 | Average of Supplies & Materials costs from CRY 2012-13 to CRY 2015-16 |
| G | Subtotal | \$141,361,875 | \$152,552,654 | \$164,674,183 | Row E + Row F |
| H | IEP ⁽²⁾ % | 52.40% | 52.40% | 52.40% | IEP% from CRY 2015-16 |
| I | Total DS, TCM CPE Amounts | \$74,073,623 | \$79,937,591 | \$86,289,272 | Row G + Row H |
| J | Specialized Transportation CPE Amount ⁽³⁾ | \$5,198,821 | \$5,198,821 | \$5,198,821 | Average of Specialized Transportation costs from CRY 2011-12 to CRY 2015-16 |
| K | Total Allowable Reimbursement - DS, TCM & Specialized Transportation | \$79,272,444 | \$85,136,412 | \$91,488,093 | Row I + Row J |

⁽¹⁾ Random Moment Time Study percentage based on annual average statewide allowable DS & TCM

⁽²⁾ Individualized Education Program student utilization ratio which applied on a district-specific basis

⁽³⁾ Specialized Transportation CPE amount determined by subset of above formula including separate IEP% and a One-Way Transportation ratio

S-14, BA-14 Public School Health Funding Adjustment
Appendix A: Assumptions and Calculations

| Table 6.1 - Historical Calculations of Medicaid Administrative Claiming by Cost Report Year | | | | | | | |
|---|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------------------|
| Row | Item | Cost Report Year 2011-12 | Cost Report Year 2012-13 | Cost Report Year 2013-14 | Cost Report Year 2014-15 | Cost Report Year 2015-16 | Source |
| A | Salaries, Benefits & Contracted Staff Costs - DS & TCM | \$258,840,956 | \$275,626,557 | \$251,176,932 | \$260,507,631 | \$292,904,805 | Medicaid Administrative Claims Report |
| B | RMTS% for MAC - DS & TCM ⁽¹⁾ | 1.70% | 1.39% | 2.07% | 1.70% | 2.22% | RMTS Calculation Report |
| C | Subtotal | \$4,409,160 | \$3,842,367 | \$5,187,510 | \$4,437,070 | \$6,493,826 | Row A * Row B |
| D | Salaries, Benefits & Contracted Staff Costs - MAC | \$78,192,236 | \$74,826,803 | \$76,378,713 | \$79,988,348 | \$90,220,924 | Medicaid Administrative Claims Report |
| E | RMTS% - MAC Administrative | 11.17% | 11.19% | 13.33% | 13.05% | 15.97% | RMTS Calculation Report |
| F | Subtotal | \$8,731,678 | \$8,372,475 | \$10,179,253 | \$10,440,829 | \$14,408,282 | Row D * Row E |
| G | Total | \$13,140,837 | \$12,214,842 | \$15,366,764 | \$14,877,898 | \$20,902,108 | Row C + Row F |
| H | Medicaid Eligibility Rate | 22.71% | 29.44% | 35.48% | 40.30% | 38.06% | Medicaid Administrative Claims Report |
| I | Adjusted Total | \$2,984,348 | \$3,596,326 | \$5,451,467 | \$5,996,288 | \$7,955,902 | Row G * Row H |
| J | Indirect Cost Rate | 16.96% | 16.08% | 18.20% | 18.97% | 19.23% | Medicaid Administrative Claims Report |
| K | Total Allowable Reimbursement - MAC | \$3,490,515 | \$4,174,768 | \$6,443,415 | \$7,133,895 | \$9,485,720 | Row I * (1 + Row J) |

⁽¹⁾ Random Moment Time Study weighted percentage based on annual average statewide allowable DS & TCM

| Table 6.2 - Medicaid Administrative Claiming Projections by Cost Report Year | | | | | |
|--|--|-----------------------------|-----------------------------|-----------------------------|--|
| Row | Item | Cost Report Year 2016-17 | Cost Report Year 2017-18 | Cost Report Year 2018-19 | Source |
| A | Salaries, Benefits & Contracted Staff Costs - DS & TCM | \$302,102,016 | \$311,588,019 | \$321,371,883 | Growth rate of 3.14%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| B | RMTS% for MAC - DS & TCM ⁽¹⁾ | 2.22% | 2.22% | 2.22% | Percentage from CRY 2015-16 |
| C | Subtotal | \$6,706,665 | \$6,917,254 | \$7,134,456 | Row A * Row B |
| D | Salaries, Benefits & Contracted Staff Costs - MAC | \$93,506,797 | \$96,912,342 | \$100,441,918 | Growth rate of 3.64%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| E | RMTS% - MAC Administrative | 15.97% | 15.97% | 15.97% | Percentage from CRY 2015-16 |
| F | Subtotal | \$14,933,035 | \$15,476,901 | \$16,040,574 | Row D * Row E |
| G | Total | \$21,639,700 | \$22,394,155 | \$23,175,030 | Row C + Row F |
| H | Medicaid Eligibility Rate | 38.06% | 38.06% | 38.06% | Percentage from CRY 2015-16 |
| I | Adjusted Total | \$8,236,649.00 | \$8,523,815.00 | \$8,821,037.00 | Row G * Row H |
| J | Indirect Cost Rate | 19.84% | 20.47% | 21.12% | Growth rate of 3.19%; consistent with growth from CRY 2011-12 to CRY 2015-16 |
| K | Total Allowable Reimbursement - MAC | \$9,870,800 | \$10,268,640 | \$10,684,040 | Row I * (1 + Row J) |

⁽¹⁾ Random Moment Time Study weighted percentage based on annual average statewide allowable DS & TCM

Schedule 13

Funding Request for the FY 2017-18 Budget Cycle

Department of Health Care Policy and Financing

Request Title

S-15 Overexpenditure

Dept. Approval By: Josh Block *[Signature]* 1/9/17 X Supplemental FY 2016-17
 OSPB Approval By: *[Signature]* 12/29/16 _____ Budget Amendment FY 2017-18

| Summary Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|-------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$662,617,330 | \$0 | \$662,625,975 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Total of All Line Items Impacted by Change Request | GF | \$183,627,684 | \$0 | \$183,599,168 | \$0 | \$0 |
| | CF | \$16,633,015 | \$0 | \$16,665,871 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$462,356,631 | \$0 | \$462,360,936 | \$0 | \$0 |

| Line Item Information | Fund | FY 2016-17 | | FY 2017-18 | | FY 2018-19 |
|--|-------|-----------------------|----------------------|---------------|------------------|----------------------|
| | | Initial Appropriation | Supplemental Request | Base Request | Budget Amendment | Continuation Request |
| | Total | \$653,650,029 | \$0 | \$653,658,674 | \$0 | \$0 |
| | FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 03. Behavioral Health Community Programs - Behavioral Health Capitation Payments | GF | \$181,949,404 | \$0 | \$181,920,888 | \$0 | \$0 |
| | CF | \$16,383,180 | \$0 | \$16,416,036 | \$0 | \$0 |
| | RF | \$0 | \$0 | \$0 | \$0 | \$0 |
| | FF | \$455,317,445 | \$0 | \$455,321,750 | \$0 | \$0 |

| | | | | | |
|---|--|-------|----|----------|--|
| CF Letternote Text Revision Required? | Yes | _____ | No | <u>X</u> | If Yes, see attached fund source detail for Schedule 11. |
| RF Letternote Text Revision Required? | Yes | _____ | No | <u>X</u> | |
| FF Letternote Text Revision Required? | Yes | _____ | No | <u>X</u> | |
| Requires Legislation? | Yes | _____ | No | <u>X</u> | |
| Type of Request? | Department of Health Care Policy and Financing Prioritized Request | | | | |
| Interagency Approval or Related Schedule 13s: | None | | | | |



Cost and FTE

- The Department requests an increase of \$405,525 General Fund, \$4,759,008 cash funds, and \$68,674 reappropriated funds to its FY 2015-16 appropriations and seeks release of the accompanying restriction in FY 2016-17.
- The Department exceeded its General Fund appropriation for its Behavioral Health Community Programs Long Bill group by a total of \$251,317 and the Medicare Modernization Act State Contribution Payment in the Other Medical Services Long Bill group by a total of \$154,208 General Fund in FY 2015-16. The Department also exceeded its cash funds appropriation in the Medical Services Premiums long bill group and Indigent Care Program long bill group, as well as its reappropriated funds appropriation in the Medical Services Premiums long bill group.

Current Program

- The Department uses a combination of state and federal funds to provide services to clients enrolled in Colorado's Medicaid, Child Health Plan Plus (CHP+) and other medical programs.
- Pursuant to 24-75-109(1) and (4), C.R.S. (2016), the Department has overexpenditure authority and is allowed to request a supplemental appropriation for overexpenditures in a fiscal year.

Problem or Opportunity

- In FY 2015-16, the Department exceeded its General Fund appropriation for its Behavioral Health Community Programs Long Bill group and the Medicare Modernization Act State Contribution Payment in the Other Medical Services Long Bill group and exceeded its cash and reappropriated fund appropriation in the Medical Services Premiums Long Bill group. While there was an underexpenditure in total funds, including an underexpenditure in federal funds, General Fund overexpenditures amounted to \$405,525, cash funds amounted to \$4,759,008, and reappropriated funds amounted to \$68,674. As a result, the Department's budget has been restricted by those amounts.

Consequences of Problem

- If not funded, the Department's FY 2016-17 appropriation for these programs would continue to be restricted. The Department would not have enough funding to provide services to Medicaid clients. Because the State Controller is permitted to allow overexpenditure for Medicaid programs, the Department would likely have an overexpenditure again in FY 2016-17 and the FY 2017-18 appropriations would similarly be restricted.

Proposed Solution

- In order for the State Controller to release the restriction, two actions would need to occur. First, funding pursuant to 24-75-109(4), C.R.S. (2016), which requires that the Department receive a supplemental appropriation in the amount of the overexpenditure for the fiscal year in which the overexpenditure occurred, would need to be provided. Second, the General Assembly would need to direct the State Controller to release the restriction on the amounts.



COLORADO

Department of Health Care
Policy & Financing

FY 2016-17 and FY 2017-18 Funding Request | January 3, 2017

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: S-15

Request Detail: FY 2015-16 Overexpenditure

| Summary of Incremental Funding Change for FY 2016-17 | Total Funds | General Fund |
|---|-------------|--------------|
| FY 2015-16 Overexpenditure | \$0 | \$0 |

Problem or Opportunity:

In FY 2015-16, the Department exceeded its appropriations for the Medical Services Premiums Long Bill group, the Behavioral Health Community Programs Long Bill group, the Children’s Basic Health Plan Medical and Dental Costs in the Indigent Care Program Long Bill group, and the Medicare Modernization Act State Contribution Payment in the Other Medical Services Long Bill group by \$405,526 General Fund, \$4,759,008 cash funds, and \$68,674 reappropriated funds. As a result of the overexpenditure, the Department’s FY 2016-17 budget has been restricted by those amounts.

| Table 1: Summary of Incremental Funding Change for FY 2015-16 | Total Funds | General Fund | Cash Funds ² | Reappropriated Funds | Federal Funds |
|--|--------------------|------------------|-------------------------|----------------------|---------------|
| Total Request¹ | \$5,233,207 | \$405,525 | \$4,759,008 | \$68,674 | \$0 |
| (2) Medical Services Premiums | \$3,694,205 | \$0 | \$3,625,531 | \$68,674 | \$0 |
| (3) Behavioral Health Community Programs, Behavioral Health Fee-for-service Payments | \$251,317 | \$251,317 | \$0 | \$0 | \$0 |
| (5) Children's Basic Health Plan Medical and Dental Costs | \$1,133,477 | \$0 | \$1,133,477 | \$0 | \$0 |
| (6) Medicare Modernization Act State Contribution Payment | \$154,208 | \$154,208 | \$0 | \$0 | \$0 |

¹ Total request only includes fund sources with overexpenditures. Total overexpenditure by line does not match schedules submitted by the Department if underexpenditures occurred in other fund sources.

² There is sufficient revenue in these cash fund sources to pay for the overexpenditures. Total overexpenditure does not match schedules submitted by the Department if underexpenditures occurred in other cash fund sources. Please see Table 2 for the breakdown of overexpenditure by cash fund.

| Table 2: FY 2015-16 Cash Fund Overexpenditures | Cash Fund Source | Cash Fund Over/(Under) Amount |
|--|--|--------------------------------------|
| Total Request | | \$4,759,008 |
| (2) Medical Services Premiums | Adult Dental Fund | (\$3,631,337) |
| (2) Medical Services Premiums | Breast and Cervical Cancer Treatment and Prevention Fund | \$105,237 |
| (2) Medical Services Premiums | Colorado Autism Treatment Fund | (\$64,273) |
| (2) Medical Services Premiums | Hospital Provider Fee Cash Fund | \$1,758,407 |
| (2) Medical Services Premiums | Medicaid Buy-in Cash Fund | (\$1,352,466) |
| (2) Medical Services Premiums | Nursing Facility Cash Fund | \$2,608,457 |
| (2) Medical Services Premiums | Recoveries and Certified Public Expenditure | \$4,263,177 |
| (2) Medical Services Premiums | Tobacco Tax Cash Fund | (\$61,671) |
| (5) Children's Basic Health Plan Medical and Dental Costs | Recoveries ¹ | \$1,133,477 |
| ¹ Per guidance from the Office of the State Controller, the restriction on recoveries for the Children's Basic Health Plan Medical and Dental Costs line will be applied to recoveries in Medical Services Premiums, as there is currently no appropriation for recoveries in the Children's Basic Health Plan Medical and Dental Costs line. | | |

Proposed Solution:

The Department requests an increase of \$405,525 General Fund, \$4,759,008 cash funds, and \$68,674 reappropriated funds in FY 2015-16 so that the State Controller may lift the accompanying restrictions in FY 2016-17. The requested funding would resolve overexpenditures in its Medical Services Premiums Long Bill group, the Behavioral Health Community Programs Long Bill group, the Children's Basic Health Plan Medical and Dental Costs in the Indigent Care Program Long Bill group and the Medicare Modernization Act State Contribution Payment in the Other Medical Services Long Bill group for FY 2015-16, and remove the restrictions on FY 2016-17 funding.

Anticipated Outcomes:

Additional appropriations are required for the Department to continue providing services to Medicaid clients.

Assumptions and Calculations:

Actual expenditure data presented in this request is the most up-to-date as of submission. Additionally, the Department's overexpenditures in a fiscal year are allowed by 24-75-109(1), C.R.S. (2016) to continue funding Medicaid programs, and for the purpose of closing the state's books.

Supplemental, 1331 Supplemental or Budget Amendment Criteria:

This supplemental funding request is being made as a result of new information on the amount of funding that the Department overexpended by in FY 2015-16.