

## Schedule 13

### Funding Request for the 2014-15 Budget Cycle

**Department:** Department of Human Services  
**Request Title:** DPA's Annual Fleet Vehicle Request  
**Priority Number:** NP-2

**Dept. Approval by:** *Will Bl* 10-18-13  
 Date

**OSPB Approval by:** *Guil N. Sch* 10/22/13  
 Date

- Decision Item FY 2014-15
- Base Reduction Item FY 2014-15
- Supplemental FY 2013-14
- Budget Amendment FY 2014-15

Line Item Information		FY 2013-14		FY 2014-15		FY 2015-16
		1	2	3	4	5
Fund		Appropriation FY 2013-14	Supplemental Request FY 2013-14	Base Request FY 2014-15	Funding Change Request FY 2014-15	Continuation Amount FY 2015-16
<b>Total of All Line Items</b>	<b>Total</b>	1,180,354	0	1,177,063	37,355	37,355
	<b>FTE</b>	0.0	0.0	0.0	0.0	0.0
	<b>GF</b>	615,289	0	611,998	12,024	12,024
	<b>CF</b>	85,227	0	85,227	1,406	1,406
	<b>RF</b>	292,844	0	292,844	18,711	18,711
	<b>FF</b>	186,994	0	186,994	5,214	5,214
	<b>MCF</b>	256,791	0	256,791	18,580	18,580
	<b>MGF</b>	128,395	0	128,395	9,290	9,290
	<b>NGF</b>	743,684	0	740,393	21,314	21,314
<b>(3) Office of Operations, (A) Administration, Vehicle Lease Payments</b>	<b>Total</b>	1,180,354	0	1,177,063	37,355	37,355
	<b>FTE</b>	0.0	0.0	0.0	0.0	0.0
	<b>GF</b>	615,289	0	611,998	12,024	12,024
	<b>CF</b>	85,227	0	85,227	1,406	1,406
	<b>RF</b>	292,844	0	292,844	18,711	18,711
	<b>FF</b>	186,994	0	186,994	5,214	5,214
	<b>MCF</b>	256,791	0	256,791	18,580	18,580
	<b>MGF</b>	128,395	0	128,395	9,290	9,290
	<b>NGF</b>	743,684	0	740,393	21,314	21,314

**Letternote Text Revision Required?** Yes:  No:  **If yes, describe the Letternote Text Revision:**

a Of this amount, it is estimated that \$1,366,218 [AAIB] shall be from patient cash collected by the Mental Health Institutes, \$49,415 [EAI] shall be from the Early Intervention Services Trust Fund created in Section 27-10.5-709 (2) (a), C.R.S., and ~~\$870,293~~ \$871,699 [8300] shall be from various sources of cash funds, including from the Old Age Pension Fund created in Section 1 of Article XXIV of the State Constitution.

b Of this amount, it is estimated that ~~\$4,786,843~~ \$4,805,422 [ABIU, 7621] shall be from Medicaid funds transferred from the Department of Health Care Policy and Financing, \$1,236,747 [7603] shall be transferred from the Department of Corrections, \$811,278 [ABIW] shall be from patient fees collected by the Mental Health Institutes that represent Medicaid revenue earned from the behavioral health organizations through Mental Health Community Capitation, \$800,000 [EZIB] shall be from nursing home indirect cost subsidies appropriated to the Homelake Domiciliary and the State and Veterans Nursing Homes, \$340,000 [ABUP] shall be from federal Medicaid indirect costs transferred from the Department of Health Care Policy and Financing, and ~~\$617,203~~ \$617,335 [8301] shall be from various sources of reappropriated funds.

c Of this amount, it is estimated that \$994,120 shall be from Section 110 vocational rehabilitation funds, \$720,802 shall be from the Social Security Administration for disability determination services, \$400,000 shall be from Child Care Development Funds, \$233,214 [7407] shall be from the Substance Abuse Prevention and Treatment Block Grant, \$65,900 shall be from the U.S. Department of Health and Human Services, Office of Refugee Resettlement, \$4,000 shall be from the Temporary Assistance for Needy Families Block Grant, and ~~\$2,099,807~~ \$2,105,021 shall be from various sources of federal funds [ALL OTHERS 7400].

Line Item Information		FY 2013-14		FY 2014-15		FY 2015-16
		1	2	3	4	5
	Fund	Appropriation FY 2013-14	Supplemental Request FY 2013-14	Base Request FY 2014-15	Funding Change Request FY 2014-15	Continuation Amount FY 2015-16
<b>Cash or Federal Fund Name and COFRS Fund Number:</b>		Various Sources of Cash Funds and Federal Funds				
<b>Reappropriated Funds Source, by Department and Line Item Name:</b>		Medicaid is transferred from the Department of Health Care Policy and Financing				
<b>Approval by OIT?</b>		Yes: <input type="checkbox"/> No: <input type="checkbox"/>		<b>Not Required:</b> <input checked="" type="checkbox"/>		
<b>Schedule 13s from Affected Departments:</b>		Department of Personnel and Administration Department of Health Care Policy and Financing				
<b>Other Information:</b>		N/A				

## Schedule 13 Funding Request for the 2014-15 Budget Cycle

**Department:** Heath Care Policy and Financing  
**Request Title:** DHS DPA's Annual Fleet Vehicle Request  
**Priority Number:** NP R-7

**Dept. Approval by:** Josh Block *[Signature]* 11/1/13  
 Date  
**OSPB Approval by:** *[Signature]* 10/29/13  
 Date

- Decision Item FY 2014-15
- Base Reduction Item FY 2014-15
- Supplemental FY 2013-14
- Budget Amendment FY 2014-15

Line Item Information		FY 2013-14		FY 2014-15		FY 2015-16
		1	2	3	4	5
Fund	Fund	Appropriation FY 2013-14	Supplemental Request FY 2013-14	Base Request FY 2014-15	Funding Change Request FY 2014-15	Continuation Amount FY 2015-16
<b>Total of All Line Items</b>		4,786,843	-	4,786,271	18,580	18,580
	<b>Total</b>	4,786,843	-	4,786,271	18,580	18,580
	<b>FTE</b>	-	-	-	-	-
	<b>GF</b>	2,393,422	-	2,393,136	9,290	9,290
	<b>GFE</b>	-	-	-	-	-
	<b>CF</b>	-	-	-	-	-
	<b>RF</b>	-	-	-	-	-
	<b>FF</b>	2,393,421	-	2,393,135	9,290	9,290
<b>(6) Department of Human Services Medicaid-Funded Programs; (C) Office of Operations - Medicaid Funding</b>		4,786,843	-	4,786,271	18,580	18,580
	<b>Total</b>	4,786,843	-	4,786,271	18,580	18,580
	<b>FTE</b>	-	-	-	-	-
	<b>GF</b>	2,393,422	-	2,393,136	9,290	9,290
	<b>GFE</b>	-	-	-	-	-
	<b>CF</b>	-	-	-	-	-
	<b>RF</b>	-	-	-	-	-
	<b>FF</b>	2,393,421	-	2,393,135	9,290	9,290

Letternote Text Revision Required?    Yes:     No:     If yes, describe the Letternote Text Revision:

**Cash or Federal Fund Name and COFRS Fund Number:**    FF: Title XIX  
**Reappropriated Funds Source, by Department and Line Item Name:**    N/A  
**Approval by OIT?**    Yes:     No:     **Not Required:**   
**Schedule 13s from Affected Departments:**    Colorado Department of Human Services  
**Other Information:**    N/A

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