

# **Department of Human Services Line Item Descriptions**

**Executive Director's Office** 

FY 2022-23 Budget Request

**NOVEMBER 1, 2021** 



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# (1) EXECUTIVE DIRECTOR'S OFFICE

# (A) GENERAL ADMINISTRATION

The Executive Director's Office (EDO) contains the staff and resources for overall direction of all departmental activities. The Executive Director accomplishes this task through the direct supervision of the Executive Management Team (EMT). Through the EMT, the Executive Director provides the direction and supervision of the program and administrative areas. The EDO includes Operations, Legislative Affairs and Communication, Community Partnerships, County Services, Chief Medical Officer, Chief Legal Officer, and Administrative Appeals.

The line items in this section denoted with an "\*" are funded through a mixture of General Fund and reappropriated funds. The reappropriated funds are collected from other fund sources through the Departments' application of the federally approved Public Assistance Cost Allocation Plan. The following details the funding splits for all of the line items in the Executive Director's Office:

The line items in this section are funded through a mixture of General Fund, cash funds, reappropriated funds, and federal funds. The following details the funding splits as it applies to all of the line item descriptions.

Cash fund sources include patient cash collected by the Mental Health Institutes, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2021), Records and Reports Fund created in Section 19-1-307 (2.5), C.R.S. (2021), and various sources of cash funds.

Reappropriated fund sources include Medicaid funds transferred from the Department of Health Care Policy and Financing, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S.(2021), and various sources of reappropriated funds.

Federal fund sources include Temporary Assistance for Needy Families Block Grant (TANF), Section 110 vocational rehabilitation funds, Child Care Development Funds, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2021), federal cost allocation recoveries, Substance Abuse Prevention and Treatment Block Grant and various sources of federal funds.

#### PERSONAL SERVICES\*

Personal Services provides funding for employees' salaries and wages, as well as the associated state contribution to the Public Employees Retirement Association (PERA) and the state share of federal Medicare taxes for staff within the Executive Director's Office. This line item also provides funding for contracted and temporary services.

# **HEALTH, LIFE, AND DENTAL\***

Health, Life, and Dental (HLD) provides funding to cover the State's contribution for the premium on each employee's HLD insurance policies. This insurance benefit is part of the POTS component paid jointly by the State and state employees on a predetermined rate based on employee benefit enrollment selections.

#### SHORT-TERM DISABILITY\*

Short-Term Disability (STD) is insurance that provides partial payment of an employee's salary in the event that an individual becomes disabled and cannot perform his or her work duties. All employees have this employer-paid payroll-based benefit. STD rates are calculated on a fiscal-year basis per the Common Policy instructions. The year-to-year estimated rate is set by the Department of Personnel and Administration.

# S.B. 04-257 AMORTIZATION EQUALIZATION DISBURSEMENT\*

The Amortization Equalization Disbursement increases the employer contribution to the Public Employees Retirement Association (PERA) Trust Fund to amortize the unfunded liability in the Trust Fund beginning in January 2006. The Budget Request for this line is calculated per the Office of State Planning and Budgeting's budget instructions. The rate is provided by the Department of Personnel and Administration and is calculated using the sum of base salaries, Salary Survey, Merit Pay and Shift Differential. During the 2005 legislative session, the General Assembly created a single Amortization Equalization Disbursement line item in all departments to fund these expenses.

# S.B. 06-235 SUPPLEMENTAL AMORTIZATION EQUALIZATION DISBURSEMENT\*

The Supplemental Amortization Equalization Disbursement increases the employee's contribution to the PERA Trust Fund to amortize the unfunded liability beginning January 2008. It is similar to the Amortization Equalization Disbursement. The request for this line is calculated per the Office of State Planning and Budgeting's budget instructions. The rate is

provided by the Department of Personnel and Administration and is calculated using the sum of base salaries, Salary Survey, Merit Pay and Shift Differential. During the 2006 legislative session, the General Assembly passed S.B. 06-235, which included creation of the Supplemental Amortization Equalization Disbursement.

#### SALARY SURVEY\*

The Salary Survey appropriation reflects the annual amount appropriated to the Department for the cost of salary increases based on the job and wage classification survey performed annually by the Department of Personnel and Administration. The appropriation incorporates the results of the "Annual Compensation Survey" recommendation provided by the Department of Personnel and Administration, which reflects percentage adjustments by occupational group. Applicable PERA and Medicare amounts are added into the Salary Survey calculations.

#### PERA DIRECT DISTRIBUTION\*

Pursuant to S.B. 18-200, beginning on July 1, 2018, and on July 1 each year thereafter until there are no unfunded actuarial accrued liabilities of any division of PERA that receives the direct distribution, the state treasurer is required to issue a warrant to PERA in an amount equal to \$225 million. Such amount will be paid to PERA from the general fund, or any other fund. The office of state planning and budgeting may include funding sources other than the general fund in the governor's annual budget request for the 2019-20 fiscal year and each fiscal year thereafter to satisfy the funding amounts of the direct distribution. The direct distribution will end when there are no unfunded actuarial accrued liabilities of any division of PERA that receives such distribution. PERA is required to allocate the direct distribution to the trust funds of each division of PERA as it would an employer contribution, in a manner that is proportionate to the annual payroll of each division; except that PERA shall not allocate any portion of the direct distribution amount to the local government division.

#### SHIFT DIFFERENTIAL\*

Shift Differential provides funding for enhancing the salary for individuals who staff evening and night shifts at 24-hour care facilities. The Department uses this funding for the Mental Health Institutes, Division of Youth Services, Regional Centers, and for the Division of Facilities Management.

#### WORKERS' COMPENSATION\*

Workers' Compensation provides funding for payments made to the Department of Personnel and Administration (DPA) to support the State's self-insured program. Workers' Compensation is a statewide allocation to each Department based upon historic usage. The cost basis is developed relative to estimated claim payouts, purchased professional services (actuarial and broker costs), and Common Policy Adjustments. DPA's actuaries determine departmental allocations.

#### **OPERATING EXPENSES\***

Operating Expenses provides funding for supplies and materials, as well as departmental capital outlay for the purchase or replacement of furniture and other items.

#### **LEGAL SERVICES\***

Legal Services provides funding for the cost of purchasing legal services from the Department of Law based on the number of legal services hours and the hourly rate per Common Policy.

#### ADMINISTRATIVE LAW JUDGE SERVICES\*

Administrative Law Judge Services provides funding for the Department to purchase services from the Department of Personnel and Administration, Administrative Hearings Division.

# PAYMENT TO RISK MANAGEMENT AND PROPERTY FUNDS\*

Payment to Risk Management and property funds provides funding for the Department's share of statewide costs for two programs operated by the Department of Personnel and Administration: (1) the liability program, and (2) the property program. The State's liability program is used to pay liability claims and expenses brought against the State. The property program provides insurance for state buildings and their contents.

#### INJURY PREVENTION PROGRAM\*

Injury prevention provides funding for employee injury prevention, loss control initiatives, and mandatory safety requirements.

# (B) SPECIAL PURPOSE

#### **EMPLOYMENT AND REGULATORY AFFAIRS\***

Employment and Regulatory Affairs provides funding related to the Divisions of Human Resources, Performance Management, Quality Assurance and Quality Improvement (QA/QI), Two-Generation Initiatives, and Audit.

This line item includes funding for personal services and operating expenses, supervision, and administrative support to the various units supported by this appropriation. The reappropriated funds are collected from other fund sources through the Department's application of its federally approved Public Assistance Cost Allocation Plan. The collected funds come from the following:

The line items in this section are funded through a mixture of General Fund, cash funds, reappropriated funds, and federal funds. The following details the funding splits as it applies to all of the line item descriptions.

Cash fund sources include patient cash collected by the Mental Health Institutes, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2021), Records and Reports Fund created in Section 19-1-307 (2.5), C.R.S., and various sources of cash funds.

Reappropriated fund sources include Medicaid funds transferred from the Department of Health Care Policy and Financing, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2021), and various sources of reappropriated funds.

Federal fund sources include Temporary Assistance for Needy Families Block Grant (TANF), Section 110 vocational rehabilitation funds, Child Care Development Funds, statewide indirect cost recoveries or the Indirect Costs Excess

Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2021), federal cost allocation recoveries, Substance Abuse Prevention and Treatment Block Grant and various sources of federal funds.

# **SNAP QUALITY ASSURANCE**

The Supplemental Nutrition Assistance Program Quality Assurance (SNAPQA) conducts the federally mandated quality control reviews and field investigations throughout the State of Colorado to determine if clients receiving food assistance benefits are eligible and receiving, the correct amount of benefits, as well as to determine if applicants are accurately denied benefits. All errors in process, eligibility, or payment error are reported to the county involved, Colorado Department of Human Service (CDHS) program staff, and Federal partners as required.

In addition, SNAPQA provides a systematic method of measuring the validity of the eligibility and payments for the CDHS SNAP program, a basis for determining accuracy rates, a timely, continuous flow of data to inform decisions regarding policy and processes and establishes State agency liability for excessive errors.

#### ADMINISTRATIVE REVIEW DIVISION

The Administrative Review Division (ARD) serves as an independent third-party review system under the auspices of the Colorado Department of Human Services. ARD manages quality assurance and quality improvement programs for Colorado's child welfare and adult protective services systems. Specifically, ARD is the mechanism responsible for the federally required Case Review System and a portion of the Quality Assurance System for both the Division of Child Welfare and the Division of Youth Services. Additionally, ARD conducts quality assurance reviews of Adult Protective Services cases.

Through the Case Review System and Quality Assurance Reviews, this unit provides an independent assessment of requirements and practice related to the key decision making steps (referral, assessment, case opening, service delivery, and case closure) within the child welfare and adult protective services systems.

In 2011, H.B. 11-1181 codified the Colorado Department of Human Services' Child Fatality Review Team (CFRT). This function was moved to the Administrative Review Division in January of 2013. S. B. 13-255 provided funding for two additional FTE for the CFRT process, and changed which incidents qualify for a full CFRT review.

In SFY 2018, the ARD was provided additional funding and staff to implement quality assurance processes for Colorado's Adult Protective Services systems.

This line item appropriation includes funding for personal services and operating expenses for 33.2 FTE that manage, supervise, implement, and provide administrative support to the programs within the ARD. This line item appropriation is General Fund and federal funds. Federal funds sources include Title IV-E of the Social Security Act and are related to expenses for the child welfare case review and quality assurance processes.

#### RECORDS AND REPORTS OF CHILD ABUSE OR NEGLECT

Records and Reports of Child Abuse or Neglect provides funding for the Department to maintain records of abuse and neglect and to perform related functions for the purposes of conducting background screening checks (generally requested by employers and agencies to screen potential child care employees, child care facility license applicants, and prospective adoptive parents). Fees paid for screening checks continue to be used to cover the direct and indirect costs of performing background checks and administering provisions related to the appeals process and the release of information contained in records and reports.

This organization includes two units that have specific functions:

- The Background Investigation Unit performs approximately 30,000 background screens annually using the Department's data system Trails. Individuals seeking employment that involves children, foster care placements, adoption, and volunteer activities are required to be screened against this data. This Unit also ensures proper handling of revenue received for fees that are charged for background screens.
- The Child Abuse/Neglect Dispute Review Unit (CANDRU) is the function within the Department that is responsible for processing appeals involving individuals found responsible for an incident of child abuse or neglect. CANDRU handles approximately 900 child welfare appeals annually. CANDRU staff are responsible for reviewing appeals submitted by individuals who were determined by a county child protection agency to be responsible for an incident of child abuse or neglect. This includes evaluating the legal and factual sufficiency of the record to support the county determination applying statutory, regulatory, and administrative standards to the facts evidenced in the record. CANDRU staff apply independent judgement based on expertise, established law, criteria, and guidelines to determine the most appropriate strategy and appeal resolution. The group consults with the Office of the Attorney General on legal strategy; researches, reviews and analyzes the appeals and the

county record that supports the action; determines the resolution strategy in cases; schedules and meets with the appellant and/or counsel; determines settlement offers; completes and drafts complex documents; and responds to calls from citizens, case-workers, lawyers, and other interested persons concerning the Trails appeals process.

This line item appropriation includes funding for personal services and operating expenses for FTE that manage, supervise, implement, and provide administrative support to Records and Reports of Child Abuse or Neglect. This line item appropriation is funded by the Records and Reports Fund created in Section 19-1-307 (2.5), C.R.S (2021).

#### RECORDS AND REPORTS OF AT-RISK ADULT ABUSE OR NEGLECT

Records and Reports of At-Risk Adult Abuse or Neglect provides funding for the Department to maintain records of substantiated mistreatment against at-risk adults and to perform related functions for the purposes of conducting background screening checks for certain employers named in statute, and beginning January 1, 2022 for the courts who hear petitions for guardianships and conservatorships of at-risk adults. Fees paid for screening checks continue to be used to cover the direct and indirect costs of performing background checks and administering provisions related to the appeals process and the release of information contained in records and reports.

This line item appropriation includes funding for personal services and operating expenses for 7.5 FTE that manage, supervise, or provide administrative support to Records and Reports of At-Risk Adult Abuse or Neglect.

# **JUVENILE PAROLE BOARD\***

Pursuant to Section 19-2-206 (6), C.R.S. (2021), the Department is responsible for providing support for the Juvenile Parole Board (JPB). The JPB is a type 1 transfer agency with independent authority to conduct parole hearings for youths committed by the Judicial Branch to the custody of the Department of Human Services' Division of Youth Services. The work unit consists of a statutorily mandated administrator and professional and support staff who provide high level technical and professional support to the nine-member appointed Board in the tracking, review and conduct of juvenile parole hearings, and coordination with case managers and administrators in the Division of Youth Services.

The JPB is a nine-member body responsible for reviewing and approving parole applications for adjudicated juveniles in the custody of the Division of Youth Services while ensuring the victims of crimes against persons, as defined by the Colorado Victim Rights Amendment, are provided their statutory and constitutional rights.

This line item appropriation includes funding for personal services and operating expenses for 3.2 FTE that provide administrative support to the Juvenile Parole Board. This line item appropriation includes General Funds and reappropriated funds. Reappropriated fund sources include Victims Assistance and Law Enforcement Fund created in Section 24-33.5-506 (1), C.R.S. (2021), transferred from the Department of Public Safety, Division of Criminal Justice.

#### **DEVELOPMENTAL DISABILITIES COUNCIL**

Developmental Disabilities Council line item provides funding for twenty-four appointed representatives responsible for providing coordination, planning, and advice on developmental disabilities services, including development of a state plan for developmental disability services. This line item appropriation includes funding for personal services and operating expenses for 6.0 FTE that provide administrative support to the Developmental Disabilities Council. This line item appropriation is federally funded through Title I of the Developmental Disabilities Assistance and Bill of Rights Act 2000.

# COLORADO COMMISSION FOR THE DEAF, HARD OF HEARING, AND DEAFBLIND\*

Created in FY 2000-01, the Colorado Commission for the Deaf and Hard of Hearing is codified at Section 26-21-101, etc. seq., C.R.S. (2021). The Commission is responsible for: (1) facilitating the provision of general government services to persons who are deaf and hard of hearing; (2) distribution of telecommunications equipment for persons who are deaf and hard of hearing (pursuant to H.B. 02- 1180); and, since FY 2006-07, (3) overseeing provision of legal sign language interpreters and Communication Access Real-time Translation (CART) for the state court system (pursuant to S.B. 06-061). During the 2006 legislative session, statutory changes were made to transfer authority for overseeing provisions of legal interpreters and CART for the deaf and hard of hearing from the Division of Vocation Rehabilitation to the Commission. The responsibility for the line was moved within the Department's Long Bill (S.B. 07-239) to the (1) Executive Director's Office: (B) Special Purpose section.

The Commission is charged with the establishment of rules for the grant program and administering a subcommittee to review and approve grant applications. The bill also specifies that the state court system does not include municipal courts, and revises the qualifications for commission members and the procedures for filling vacancies.

In 2018, H.B. 18-1108 expanded the Commission's duties to include establishing a community access program for one-on-one system navigation and changes the membership on the committee reviewing grant applications under the act. It also

renamed the Commission from the Colorado Commission for the Deaf and Hard of Hearing to the Colorado Commission for the Deaf, Hard of Hearing, and Deafblind.

This line item appropriation includes funding for personal services and operating expenses for 13.3 FTE that manage, supervise, or provide administrative support to the Commission for the Deaf and Hard Hearing. This line item appropriation includes General Fund and Telephone Users with Disabilities Fund and the Federal Communications Commission funding for Colorado's deafblind equipment distribution program. The fund sources include the Colorado Commission for the Deaf and Hard of Hearing Cash Fund created in Section 26-21-107 (1), C.R.S.(2021), and from the Commission for the Deaf and Hard of Hearing Cash Fund line item in the Department of Regulatory Agencies, Public Utilities Commission.

#### OFFICE OF THE OMBUDSMAN FOR BEHAVIORAL HEALTH ACCESS TO CARE

The Colorado Office of the Ombudsman for Behavioral Health Access to Care (OOBHAC) is within the Colorado Department of Human Services, but operates independent of the Department. The Office was established by HB 18-1357 to help consumers, including those who are uninsured or have public or private health benefit coverage, including coverage that is not subject to state regulation, navigate and resolve issues related to consumer access to behavioral health care.

#### HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996-SECURITY REMEDIATION\*

The Department is considered a covered entity under the Health Insurance Portability and Accountability Act of 1996, as it is responsible for the administration of numerous programs that handle health information. The security rule covers the following but is not limited to: (1) the Mental Health Institutes at Pueblo and Fort Logan; (2) Behavioral Health Services; (3) the Substance Use Treatment Division; (4) department-wide security; (5) the Department's accounting program; (6) the Office of Information Technology Services; (7) the Regional Centers at Wheat Ridge, Pueblo, and Grand Junction; and (8) the Veterans Community Living Centers at Fitzsimons, Florence, Homelake, Rifle and Walsenburg.

Responsibilities of this section include the development of a department-wide, system-based risk assessment and the integration of this assessment into the Department's operations. The staff also conducts periodic evaluations for all systems where technical, environmental, or operational changes have occurred. The section is responsible for the continuation of consolidation efforts associated with protected health information covered by the security rules, for an annual test that details the Department's security management processes, and for on-going privacy and security training.

This line item appropriation includes funding for personal services and operating expenses for that provide administrative support. This line item appropriation includes General Fund and reappropriated funds.

#### CBMS EMERGENCY PROCESSING UNIT

The initial deployment of the Colorado Benefits Management System (CBMS) was contested in court. The court allowed the deployment to go forward, but issued a temporary order that required the State to meet several conditions. One of those created an emergency processing unit (EPU) to support benefit applicants. Continued operation of the EPU was included in a subsequent agreement between plaintiffs and the State during negotiations toward a settlement of the lawsuit, and is part of the final order that was issued when the case was settled in December, 2007. The unit was initially staffed with contract workers, but those positions were converted to State employees when it became clear that the function would be ongoing.

This line item appropriation includes funding for personal services and operating expenses for 4.0 FTE that provide administrative support to CBMS. This line item appropriation includes General Fund, cash funds, and federal funds. Cash fund and federal funds sources are from various sources.

#### **COLORADO 2-1-1 COLLABORATIVE**

S.B. 21-239 requires the Colorado 2-1-1 Collaborative to provide referrals to behavioral health services and provide assistance to find other public resources for unemployed individuals. The State department must contract with the Colorado 2-1-1 Collaborative to ensure specialized personnel are hired that can assist in referring individuals to behavioral health services. In addition, the State department shall collaborate with the Colorado 2-1-1 to engage in targeted marketing and outreach to traditionally underserved communities.

# (C) INDIRECT COST ASSESMENT

Indirect Cost Assessment provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cashfunded, reappropriated funds, or federal-funded program.



# Department of Human Services Line Item Descriptions

# **Office of Information Technology Services**

FY 2022-23 Budget Request

**NOVEMBER 1, 2021** 



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# (2) OFFICE OF INFORMATION TECHNOLOGY SERVICES

The line items in this section denoted with an "\*" are funded through a mixture of General Fund and reappropriated funds. The reappropriated funds are collected from other fund sources through the Departments' application of the federally approved Public Assistance Cost Allocation Plan. The following details the funding splits for all of the line items in the Office of Information Technology Services.

Cash fund sources include patient cash collected by the Mental Health Institutes, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2020), Records and Reports Fund created in Section 19-1-307 (2.5), C.R.S. (2020), and various sources of cash funds.

Reappropriated fund sources include Medicaid funds transferred from the Department of Health Care Policy and Financing, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2020), and various sources of reappropriated funds.

Federal fund sources include Temporary Assistance for Needy Families Block Grant (TANF), Section 110 vocational rehabilitation funds, Child Care Development Funds, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2020), federal cost allocation recoveries, Substance Abuse Prevention and Treatment Block Grant and various sources of federal funds.

# (A) INFORMATION TECHNOLOGY

#### **OPERATING EXPENSES\***

This line item pays for the operating expenses associated with the FTE residing in the Governor's Office of Information Technology (OIT) but supporting the Department, plus the centralized hardware and software infrastructure used by the Department.

# **MICROCOMPUTER LEASE PAYMENTS\***

This line item is used for lease payments on personal computers and related equipment. The line item was originally recommended and approved in FY 1998-99 for the transition of old purchased (5 to 7 years) microcomputers to new

leased microcomputers for the Y2K (Year 2000) conversion. The original amount appropriated was \$839,914 which has been reduced to the current amount from savings due to the reduction in microcomputer costs and the reduction in leased interest rates over the next several fiscal years.

#### COUNTY FINANCIAL MANAGEMENT SYSTEM\*

This line item pays for contract and operating expenses associated with maintaining the County Financial Management System (CFMS). The system tracks expenditures by program, by funding source, by county; tracks and allocates administrative costs by program; and, tracks expenditures that are estimated to count toward federal maintenance of effort requirements. The system manages over \$1.0 billion in payments annually. Funding for CFMS is used for contractual services (IT programmers and database administrators) and hardware and software maintenance.

#### CLIENT INDEX PROJECT\*

The Client Index System assures that each recipient of state benefits has a unique identifier. Each program uploads the name, gender, date-of-birth, social security number, and other identifying information for any individual served, and the Client Index System looks for other duplicate entries and assigns a unique identifier. The Client Index System retains both this unique identifier and the identifiers assigned by each respective program's system. By maintaining a central, unduplicated listing of clients served, the Client Index System enhances interagency coordination and cooperation, reduces data entry requirements, reduces referrals for duplicated services, reduces fraud, and provides information for program evaluations.

#### **COLORADO TRAILS**

This line item pays personal services, operating, and contract costs associated with Colorado Trails. Colorado Trails is a statewide system, operational since 2002, that supports activities in the Division of Child Welfare and the Division of Youth Service. It provides case management, financial tools, and other resources to users of the system.

The Colorado Trails system was an initiative of these two Divisions, in coordination with the Office of Information Technology Services, and the Office of Operations to redesign and implement an information system for case management, case tracking, court reporting, case information sharing, automated desktop procedures, and facility and placement tracking. The goal was to compile client information used by the two divisions as care plans are often similar

and may involve the same client. The system was designed to assist caseworkers and client managers in performing their jobs, as well as to provide better reporting tools and management information for the Department.

This line item appropriation includes 54 percent General Funds and 46 percent federal funds. Federal fund sources include Child Care Development Funds, Temporary Assistance for Needy Families Block Grant (TANF), U.S. Department of Agriculture for the Supplemental Nutrition Assistance Program (SNAP), funds from Title IV-E of the Social Security Act, federal Substance Abuse Prevention and Treatment Block Grant, and Title III Older Americans Act funds.

#### NATIONAL AGING PROGRAM INFORMATION SYSTEM

This system helps the Department comply with federal reporting requirements regarding clients served through Older Americans Act programs. Funding is primarily used to purchase contract programmer services and to partially fund the cost of leasing/purchasing microcomputers for Area Agencies on Aging (AAA's) and service providers. Federal funds are from the State Unit on Aging from the Older Americans Act and this grant requires a 25 percent match of State funds.

# CHILD CARE AUTOMATED TRACKING (CHATS)

This line provides funds for the support of the eligibility and payment system for the Child Care Assistance Program, which provides child care subsidies for low-income families, Temporary Assistance for Needy Families (TANF) families, and families transitioning from the Colorado Works program. In FY 2015-16 the Legislature granted additional federal spending authority to modernize CHATS. The two year modernization project utilizes a hybrid approach which preserves the core integrity of the system design, but also explores larger modifications and potential replacement of entire subsystems. This line item appropriation is 100 percent federal funds. Federal fund sources include Child Care Development Funds, Temporary Assistance for Needy Families Block Grant (TANF), U.S. Department of Agriculture for the Supplemental Nutrition Assistance Program (SNAP), funds from Title IV-E of the Social Security Act, federal Substance Abuse Prevention and Treatment Block Grant, and Title III Older Americans Act funds.

#### HEALTH INFORMATION MANAGEMENT SYSTEM

This line item pays operating and contract costs associated with maintaining the Health Information Management System, also known as AVATAR. This automated system supports clinical and administrative business functions at the Mental Health Institutes, the Regional Centers for persons with intellectual and developmental disabilities, and the Division of

Youth Services detention and institutional facilities. The system was created in October 1995, in response to a requirement by the federal Health Care Financing Administration for providers to itemize all services and bill Medicare under a physician fee schedule. The system and/or sub-systems include medical records, census, billing and accounts receivable, client banking, nutrition, laboratory, pharmacy, clinical assessment and treatment information, campus connectivity. With the implementation of the Mental Health Institutes Electronic Health Record system in FY 2017-18, portions of the current system (AVATAR) will be phased out. This line item appropriation includes General Fund and reappropriated funds. Reapropriated funds sources include: Medicaid funds transferred from the Department of Health Care Policy and Financing, Mental Health Institutes, Department's Regional Centers, and the Division of Youth Service.

#### ADULT PROTECTIVE SERVICES DATA SYSTEM

The funds in this line item are used to maintain the data system to manage adult protective services for at-risk adults. This line item is currently funded through a combination of General Fund and Cash funds from Records and Reports Fund.

### **PAYMENTS TO OIT\***

Payments made to OIT represents costs incurred by the Governor's Office of Information Technology in support of the Department of Human Services that were consolidated to one line item in FY 2015-16 and all adjustments to this line are based on the Governor's Office of Information Technology as approved by the JBC.

Examples of costs incurred in this line include:

# Purchase of Services from Computer Center

The Department of Human Services' share of utilization of the General Government Computer Center (GGCC) services and equipment. The GGCC Common Policy supports the planning, management, operation and delivery of the computing infrastructure.

# Colorado State Network

The Colorado State Network (CSN) provides cost-effective, quality, high-speed broadband data communications and Internet access to Colorado's public sector: e.g., state agencies, schools, colleges, libraries, hospitals and local government. The goal of the CSN is to increase telecommunications services and economic development in the State's rural areas. This common policy appropriation provides funding for the Department of Human Services' allocation from

the Governor's Office of Information Technology for the statewide multi-use network. This appropriation represents the Department of Human Services' share of circuits and recoverable costs associated with the provision of and administration of CSN to its customers.

# Management and Administration of OIT

The Department of Human Services' share of the costs statewide services managed by the Governor's Office of Information Technology (OIT).

# **Communication Services Payments**

The Department of Human Services' share of the costs for the state's public safety communications infrastructure. The Governor's Office of Information Technology (OIT) is responsible for operations and maintenance of this program.

# Information Technology Security

The Department of Human Services' share of costs for OIT for services to help protect state agencies against cyberattacks that have the potential to expose the State's personally identifiable information.

#### **CORE OPERATIONS\***

The Colorado Operations Resource Engine (CORE) replaced COFRS in FY 2014-15. The accounting system integrates budget and purchasing functions, allowing a single source of fiscal data for the majority of the State's financial operations. CORE is maintained through a joint effort between the Colorado Department of Personnel & Administration and the Governor's Office of Information Technology.

#### DYS EDUCATION SUPPORT

The Division of Youth Services (DYS) educates committed youth and prepares them for a successful transition back into school or the workforce. This line item provides funding for employees' salaries and wages, as well as the associated State contribution to the Public Employees Retirement Association (PERA) and the State share of federal Medicare taxes that will create and manage expansion and improvement to the education technology infrastructure. The moneys are transferred to the Governor's Office of Information Technology. This line item is fully funded through the General Fund.

#### IT SYSTEMS INTEROPERABILITY

Interoperability is the ability of two or more systems or applications to exchange information and use the information. IT Systems Interoperability standardizes interfaces among Department IT systems and adds the necessary technology components, security and governance to allow the data contained within these systems to be made available without removing the data from the core systems. This line reflects funding for the systems administration and implementation of IT Systems Interoperability.

#### ENTERPRISE CONTENT MANAGEMENT\*

Enterprise content management is a strategy for managing electronic documents and files for an organization. The software supports both the system and the strategy of a data repository to house electronic files. The software provides a way to formally capture business rules and processes in a comprehensive strategy to manage documents and files across the agency. This line reflects funding for the systems administration, licensing, and professional services to build/modify.

#### ELECTRONIC HEALTH RECORD AND PHARMACY SYSTEM

This line item pays operating, enhancement and contract costs associated with the Electronic Health Record and Pharmacy System. used by the Mental Health Institutes (operated by the Office of Behavioral Health (OBH), and located at Pueblo and Fort Logan. The comprehensive, fully-integrated Electronic Health Record (EHR) system meets federal regulatory and reimbursement standards. Modules and functions meet the current and pending meaningful-use standards (e.g., physician order entry, robust clinical decision support, assessments, care plans, discharge planning, patient portal, Health Information Exchange (HIE) interface, full integration with lab, pharmacy and dietary components, billing, financial analysis and reporting, regulatory compliance, behavior interventions, diagnostic and medical history and treatments, document storage and retrieval, scheduling, medication reconciliation, clinical notes, electronic Medication Administration Record (eMAR), record-level audit capability, etc.);

- Point of care documentation for active treatment and implementation of an individualized care plan;
- A system for historical records retention (e.g. 10 years) archive systems that will comply with records management best practice; and
- A fully-hosted and web-based solution, wherein the EHR and the integrated systems reside securely off-site, without the need for OIT resources or support of application servers

This line item is fully funded through the General Fund.

#### REGIONAL CENTERS ELECTRONIC HEALTH RECORD SYSTEM

The Electronic Health Record System (EHR) is fully integrated with all necessary clinical, operation and financial modules and systems and be compliant with use requirements. This request is for the ongoing operating needs of this system. The EHR system at all Regional Centers would create uniform service delivery, documentation, data collection for the program record, health record, medication administration record, billing, personal finance, staff training and scheduling. It would allow the Regional Centers to operate more efficiently and effectively. This line item is fully funded through the reappropriated funds.

# (A) COLORADO BENEFITS MANAGEMENT SYSTEM

The Colorado Benefits Management System (CBMS) was launched in September 2004 and currently distributes more than \$2 billion in benefits to more than 500,000 households monthly. In addition to client-facing functions, the CBMS communicates with more than 100 external systems. These system-to-system interactions occur in a wide range of time scales: real-time online access; nightly batch jobs; and weekly, bi-weekly, monthly, and quarterly report generation and distribution. The external systems with which CBMS communicates include other State of Colorado systems, systems operated by other states, and federal systems.

The system supports interactive interviews with clients, assesses the eligibility of applicants, calculates benefits for clients, and provides ongoing case management and history tracking. The CBMS determines eligibility for many types of public assistance through a single application, including Temporary Assistance for Needy Families Block Grant (TANF), Supplemental Nutrition Assistance Program (SNAP), Aid to the Needy Disabled (AND), Old Age Pension (OAP), Medicaid, and children's health insurance.

# (1) ONGOING EXPENSES

The Ongoing Expenses subsection of the reorganization under SB 15-149 eliminated the reappropriated line items for the Department of Health Care Policy and Financing (HCPF), leaving three lines for appropriation of personal services, centrally appropriated items, and operating and contract expenses. These lines support the staffing, operation and

maintenance of the CBMS system. The funds are reappropriated by the Governor's Office of Information Technology (OIT) for the service provisions. Fund sources include General Fund, the Old Age Pension Fund, and federal funds (including the U.S. Department of Agriculture for the Supplemental Nutrition Assistance Program (SNAP) and the U.S. Department of Health and Human Services for the Temporary Assistance for Needy Families Block Grant (TANF)).

#### PERSONAL SERVICES

This line item provides funding for employees' salaries and wages, as well as the associated State contribution to the Public Employees Retirement Association (PERA) and the State share of federal Medicare taxes.

#### CENTRALLY APPROPRIATED ITEMS

This line item provides funding for employee benefits such as Health, Life, Dental, Short Term Disability, Amortization Equalization Disbursement, and Supplemental Amortization Disbursement. To isolate CBMS related expenditures, this line was created to show centrally appropriated monies transferred to OIT for CBMS related activities.

#### **OPERATING AND CONTRACT EXPENSES**

This line item provides funds for the operating and contract expenses associated with the operation of CBMS. Contracts are awarded to vendors for maintenance, operation, and enhancements to CBMS.

# (2) SPECIAL PROJECTS

The Special Projects section created under SB 15-149 provides funding for the operating expenses to support the additional staff to manage and implement special projects, training, and other related costs.

# HEALTH CARE AND ECONOMIC SECURITY STAFF DEVELOPMENT CENTER

This line item captures the costs associated with the training functions relating to CBMS, including developing and delivering training, outside of normal CBMS maintenance. This line reflects the Department's appropriations in support of the Health Care and Economic Security Staff Development Center (SDC) administration. Companion funds to operate the SDC are reflected in the Department of Health Care Policy and Financing's (HCPF) section of the Long Bill.

Funds support personal services such as employees' salaries and wages, State contributions to the Public Employees Retirement Association (PERA), and the State share of federal Medicare taxes associated with this project. In addition, this line item pays for centrally appropriated costs related to this project. To isolate CBMS related expenditures, this line was created to include centrally appropriated monies transferred to OIT for CBMS related activities.

Fund sources include General Fund, the Old Age Pension Fund, and federal funds (including the U.S. Department of Agriculture for the Supplemental Nutrition Assistance Program (SNAP) and the U.S. Department of Health and Human Services for the Temporary Assistance for Needy Families Block Grant (TANF)).



# **Department of Human Services Line Item Descriptions**

**Office of Operations** 

FY 2022-23 Budget Request

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# (3) OFFICE OF OPERATIONS

# (A) ADMINISTRATION

The Office of Administrative Solutions receives significant portions of its funding through the General Fund and reappropriated funds. The reappropriated funds are collected from other fund sources through the Departments' application of the federally approved Public Assistance Cost Allocation Plan, these lines are noted with an "\*". The collected funds come from the following:

The line items in this section are funded through a mixture of General Fund, cash funds, reappropriated funds, and federal funds. The following details the funding splits as it applies to all of the line item descriptions.

Cash fund sources include patient cash collected by the Mental Health Institutes, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2020), Records and Reports Fund created in Section 19-1-307 (2.5), C.R.S. (2020), and various sources of cash funds.

Reappropriated fund sources include Medicaid funds transferred from the Department of Health Care Policy and Financing, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2020), and various sources of reappropriated funds.

Federal fund sources include Temporary Assistance for Needy Families Block Grant (TANF), Section 110 vocational rehabilitation funds, Child Care Development Funds, statewide indirect cost recoveries or the Indirect Costs Excess Recovery Fund created in Section 24-75-1401 (2), C.R.S. (2020), federal cost allocation recoveries, Substance Abuse Prevention and Treatment Block Grant and various sources of federal funds.

#### PERSONAL SERVICES\*

Personal Services provides funding for employees' salaries and wages, as well as the associated state contribution to the Public Employees Retirement Association (PERA) and the state share of federal Medicare taxes for staff that provide general operations management, legal, facilities management, project management, the business innovation technology & security group, communications, emergency management, leadership & organizational development, accounting,

budget, procurement and contracts management. This line item also provides funding for certain professional and temporary services.

#### **OPERATING EXPENSES\***

Operating Expenses provides funding for most of the non-personal services costs with the exception of leased space, leased vehicles and utilities. This line item provides operating funds for the administrative, operations and management staff of the Office of Operations. Expenditures are for building, equipment, grounds maintenance, vehicle mileage charges, information technology communications charges, rental and maintenance, general office supplies, office equipment maintenance, miscellaneous purchases, repairs and travel expenses.

#### **VEHICLE LEASE PAYMENTS\***

Vehicle Lease Payments provides funding for annual payments to the Department of Personnel and Administration (DPA) for the cost of administration, loan repayment, and lease-purchase payments for new and replacement motor vehicles, pursuant to 24-30-1117, C.R.S. (2020). The vehicle lease payment line item provides for the fixed portion of the vehicle leases from fleet management. The appropriation is adjusted annually through a statewide vehicle supplemental change request.

#### LEASED SPACE\*

Leased Space provides funding for 10 commercial space leases throughout the State associated with major program areas (Office of Economic Security, Child Welfare, Disability Determination and Youth Services). The Department leases approximately 86,464 square feet. The appropriation is adjusted annually through a statewide leased space supplemental budget request.

#### CAPITOL COMPLEX LEASED SPACE\*

Capitol Complex Leased Space is appropriated based on usable square footage utilized by each State department. Currently, for the Department, this includes 89,429 square feet at 1575 Sherman Street in Denver. The appropriation is adjusted annually through a statewide capital complex leased space supplemental budget request.

### **UTILITIES\***

Utilities provides funding for expenditures including natural gas, electricity, water and wastewater expenses for the Department's residential facilities (Division of Youth Services, Mental Health Institutes, and Regional Centers for Persons with Developmental Disabilities and Office of Administrative Solutions). Other utility related expenses which include: permits, certifications, water rights fees, annual fees for testing inspections of water, tap and sewer required by multiple agencies, legal issues, diesel fuel for generators, recycling fees, and salt for water softeners. This appropriation also provides funding for the energy performance contracts, pursuant to 24-30-2001 C.R.S. (2020).

# (B) SPECIAL PURPOSE

#### BUILDINGS AND GROUNDS RENTAL

Buildings and Grounds Rental provides cash fund spending authority for personal services (FTE) and operating expenses for the maintenance, repair, and upkeep of the Department's facilities and grounds that are leased to public and private agencies. The Department leases space to other state agencies or non-profit organizations for offices or for the direct provision of services. Most of these rentals are at the Colorado Mental Health Institute at Fort Logan campus with agencies having missions compatible with the Department. The rates paid by agencies are based on the Department's calculated current and anticipated costs for maintenance, repair, and upkeep of the rented spaces. Spending authority for this line item is based on anticipated revenue from the leasing agencies. Pursuant to Section 26-1-1335.6 C.R.S. (2020), rents collected are deposited into the Buildings and Grounds cash fund to be used for operating, maintaining, remodeling or demolishing of the rental properties. H.B. 08-1268 expanded the Department's authority to rent property to other Department locations, which was previously restricted to the Fort Logan campus. This line is funded through cash fund revenues from leased space collected through the Department of Human Services Buildings and Grounds Cash Fund created in Section 26-1-133.5 (2), C.R.S. (2020)

#### STATE GARAGE FUND

The Department has an agreement with the Department of Personnel & Administration (DPA) to operate vehicle maintenance and fueling stations at three state facilities, the Mental Health Institutes at Fort Logan and Pueblo, and The Grand Junction Regional Center. The Office of Operations is reimbursed by divisions within the Department and by other state agencies (Department of Transportation and the Colorado State Patrol) for maintenance, repair, storage and fueling of state-owned passenger motor vehicles. Revenues are deposited into the State Garage Fund. This line item provides

the spending authority for the Department to receive and spend such reimbursement. This line is funded through moneys in the State Garage Fund collected from various Department of Human Services divisions and other state agencies pursuant to Section 24-30-1104 (2) (b), C.R.S. (2020)

# (C) INDIRECT COST ASSESSMENT

Indirect Cost Assessment provides funding for departmental overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cash-funded, reappropriated funds, or federal-funded program.



# Department of Human Services Line Item Descriptions

**County Administration** 

FY 2022-23 Budget Request

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## (4) COUNTY ADMINISTRATION

#### **COUNTY ADMINISTRATION**

County Administration provides funding for 64 county departments of human and social services to administer the following programs: Supplemental Nutrition Assistance Program (SNAP), Adult Cash Assistance Programs (except for Old Age Pension), and Child Support Enforcement. Section 26-1-122 (3) (C), C.R.S. (2021), generally defines county expenditures that qualify as administration. According to statute, administration costs include:

"Salaries of the county director and employees of the county department staff engaged in the performance of assistance payments, food stamps, and social services activities; the county's payments on behalf of such employees for old age and survivor's insurance or pursuant to a county officers' and employees' retirement plan and for any health insurance plan, if approved by the state department; the necessary travel expenses of the county board and administrative staff of the county department in the performance of their duties; necessary telephone and telegraph; necessary equipment and supplies; necessary payments for postage and printing; including the printing and preparation of county warrants required for the administration of the county department; and other such administrative costs as may be approved by the state department; but advancements for office space, utilities, and fixtures may be made from state funds only if federal matching funds are available."

County Administration expenditures submitted for federal matching funds must comply with 2 C.F.R. 200 - "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards" (Uniform Guidance).

## **COUNTY TAX BASE RELIEF**

In 2008, the County Tax Base Relief line item was changed from County Contingency Payments pursuant to Section 26-1-126, C.R.S. (2021) and was created to provide additional General Fund moneys to assist counties with low property tax values to meet their obligation to provide for human and social services. The amount available to counties shall be based upon a three-tiered system whereby a county may qualify for a distribution of moneys from one or more tiers.

These county obligations include responsibility for maintenance of effort expenditures for the Temporary Assistance for Needy Families (TANF) Block Grant, the county twenty percent share for food assistance and Medicaid reimbursements, the county share for child welfare services expenditures, and the county share for adult assistance programs.

#### **COUNTY SHARE OF OFFSETTING REVENUES**

Funding for the County Share of Offsetting Revenues is available to counties to compensate their cost of public assistance paid on behalf of individuals for whom revenue paid or owed is intercepted, per federal law.

Section 26-13-108, C.R.S. (2021), provides that when government authorities recover any support monies for public assistance recipients, such monies may be used to reimburse public assistance paid in accordance with federal law. This line reflects revenues earned by counties through child support collections, fraud refunds, state revenue intercepts, and other refunds. The largest component is related to child support services and related collections. Of total recoveries, the federal government receives fifty percent, the State receives thirty percent, and counties receive twenty percent. Counties may use their twenty percent of the revenues from recoveries in whatever manner they see fit. Moneys do not have to be reinvested in the Child Support Enforcement program.

#### COUNTY INCENTIVE PAYMENTS

The County Incentive Payments line item represents the portion of the State's revenues earned through child support collections, fraud refunds, State revenue intercepts, and other refunds that are redirected to counties as incentives for their performance regarding child support activities. County incentive payments are distributed to counties on a quarterly basis using the same formula that is applied for federal child support enforcement incentives. The formula takes into account the "collections base" for the county (an adjustment for collecting on TANF or past TANF cases) and each county's performance on five child support enforcement measures: the paternity establishment percentage, the percentage of caseload with child support enforcement orders, the percent of current support paid, the percent of arrears cases with a payment made, and the cost effectiveness ratio (CER). Counties may use the portion of the State recovery revenues that are redirected in whatever manner they see fit. Moneys do not have to be reinvested in the Child Support Enforcement program.



## Department of Human Services Line Item Descriptions

**Division of Child Welfare** 

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## (5) DIVISION OF CHILD WELFARE

#### **ADMINISTRATION**

The Administration line item was established in FY 2000-01 pursuant to S.B. 99-215. This line item appropriation includes funding for personal services and operating expenses for the management, supervision, and administrative support for child welfare programs in six of the Division's seven units. The units include Child Protection and Prevention; Permanency; Youth Services; Provider Services; Research, Data, and Analysis; and Finance. These units are responsible for the supervision, oversight, and monitoring of county administration of child welfare practice statewide. Child Welfare executive management and administrative support are also included in this line.

The line item appropriation includes 84 percent General Fund, 1.0 percent reappropriated funds (Medicaid), and 15.0 percent Title IV-E federal funds. Medicaid funds are transferred from the Department of Health Care Policy and Financing (HCPF) for administrative costs for programs such as Child Welfare Medicaid. There are 63.8 FTE appropriated in this line item.

## **CONTINUOUS QUALITY IMPROVEMENT**

The Continuous Quality Improvement line item was established in FY 2017-18 to provide increased technical assistance, monitoring, oversight, and supervision of counties' activities specific to child protective services, permanency services, and well-being outcome measures. The FTE and associated funding were transferred from the Administration line item to this line item and currently consist solely of FTE from the Department's Administrative Review Division (ARD). There are 6.0 FTE appropriated in this line item.

#### **TRAINING**

The training line item was established in 1994 in response to the Child Welfare Settlement Agreement that required minimum standards for the training of county staff. Training funds were initially included in the Family and Children's Program line item, and became a separate line item in the FY 2000-01 Long Bill (H.B. 00-1458).

The Child Welfare Training Academy was established in FY 2009-10 through S.B. 09-164 and R-7: "Child Welfare Training Academy". The majority of this line item provides funding to train new and ongoing county departments of human and social services child welfare staff, child placement and residential treatment service providers, supportive services providers (e.g., domestic abuse counselors, substance use disorder counselors, mental health practitioners, developmental disabilities counselors, law enforcement officers), first responders and mandatory reporters; and the Division of Child Welfare staff. Training is designed to meet competency and best practice standards and federal requirements that enable the State to claim federal Title IV-E reimbursement. Approximately 85 percent of the training and curriculum is developed and conducted by outside contractors, which includes departments of social work at several colleges and universities, as well as for-profit training providers. This funding also provides stipends to students pursuing a degree in social work.

The FTE appropriated in this line item develop and conduct training, support the Child Welfare Training Academy. S.B. 15-242 added an FTE to assist counties in training new county level child welfare staff. Contracted training services are also provided by the Training Academy. There is funding for 7.0 FTE appropriated to this line item.

## FOSTER AND ADOPTIVE PARENT RECRUITMENT, TRAINING, AND SUPPORT

This line item was included in the FY 2003-04 Long Bill through R-15: "Funding for Foster and Adoptive Parent Recruitment and Retention." The line item funds the consolidation of recruitment and retention activities for foster and adoptive families and includes funding for FTE that provides support and technical assistance to county departments to recruit and retain foster and adoptive families. Through S.B. 18-254, additional funding was appropriated to this line item.

The line item appropriation provides assistance to county departments to recruit, develop, and retain foster care and adoptive home resources to provide availability of sufficient, appropriate, and necessary placements.

Outcomes are being tracked on all recruitment and retention efforts through surveys, evaluations and website analytics. The data gathered is provided to county departments and child placement agencies to guide their recruitment efforts and emphasize retention. There is funding for 1.0 FTE appropriated to this line item.

#### ADOPTION AND RELATIVE GUARDIANSHIP ASSISTANCE

This line item was established in FY 2018-19 through S.B. 18-254 and provides funding to reimburse counties for amounts paid for adoption and relative guardianship assistance. The funding in this line item was removed from the Child Welfare Services line item and added to this new Long Bill line. Per S.B. 18-254, the reimbursement rate for adoption and relative guardianship assistance payments is 90 percent State funds with a 10 percent county match. This Long Bill line is excluded from the county closeout process and from the allocation model. There are 0.0 FTE appropriated to this line item.

#### CHILD WELFARE SERVICES

This line item, also referred to as the "Child Welfare Block," was established by S.B. 97-218 and provides the primary source of funding for counties to administer child welfare programs and deliver associated services to children and families. This line item appropriation provides funding for the following: (1) county administration for child welfare related activities; (2) out-of-home care; (3) subsidized adoption and relative guardianship agreements; and (4) other necessary and appropriate services for children and families. Under Section 26-5-104 (4)(a), C.R.S. (2020), county departments are authorized to use this allocation to provide child welfare services without categorical restriction. These funds are allocated to counties pursuant to a formula approved by the statutorily mandated Child Welfare Allocation Committee. Through the Child Welfare Services line item, county departments of human and social services are reimbursed for 80 percent of related expenses, up to the amount available for each county's allocation.

#### COUNTY LEVEL CHILD WELFARE STAFFING

S.B. 15-242 added a new section to 26-5-103.5, C.R.S. (2020) charging the Child Welfare Allocations Committee to develop a formula to allocate additional funding to counties in addition to the Child Welfare Block Grant for the specific purpose of hiring new child welfare staff. This legislation is in response to a workload study performed by the Office of the State Auditor. The study recommended that an additional 650 county staff were needed to address the increase in workload and insufficient staff. The appropriation in this line item includes funding for new county child welfare staff (salaries, benefits, and operating expenses). Additionally, one-time funding was appropriated in FY 2015-16 for training development and a caseload study.

#### PERMANENCY SERVICES

This line was established in FY 2018-19 to increase the timeliness of services and achievement rates of permanency for children and youth who are legally freed for adoption. The appropriation, provided on a time-limited basis through FY 2021-22, includes funding for Wendy's Wonderful Kids recruiters through the Dave Thomas Foundation for Adoption and an annual evaluation of the services provided through this line.

## RESIDENTIAL PLACEMENTS FOR CHILDREN WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

This line item was established in FY 2018-19 through S.B. 18-254 and provides funding to develop a program to serve children and youth with intellectual and developmental disabilities that are placed by counties in a licensed out-of-home setting and children or youth committed to or in the custody of the State. The program includes contracting with a licensed provider for the delivery of services for children and youth who placed in the program developed through this line. There is funding for 1.0 FTE appropriated to this line item.

#### FAMILY AND CHILDREN'S PROGRAMS

This line item, also referred to as the "Core Services Program," was established largely as a result of the Child Welfare Settlement Agreement (Settlement Agreement), which was finalized in February 1994. The Settlement Agreement required a number of improvements in the child welfare system, including the provision of core services to children and families.

The Core Services Program is a specific set of services that must be made available to prevent the out-of-home placement of children, promote the safe return of children to the home, and/or to promote care in the least restrictive setting. Counties must have the eight basic core services accessible to children and their families who meet the eligibility criteria for the program. These services include home-based intervention, intensive family therapy, life skills, day treatment, sexual abuse treatment, special economic assistance, mental health services, and substance abuse. Counties also have the option to provide county-designed services.

#### ADOPTION SAVINGS

This line item supplements the Adoption Assistance program which creates guidance including rules, practice standards, and auditing of the adoption practice in Colorado. This includes the practices around adoption assistance for families who qualify for assistance. The amount of Adoption Savings is calculated from an assessment of Title IV-E Adoption Assistance program claims made on behalf of those children who, absent the applicable child eligibility criteria, would not have been determined eligible for Title IV-E adoption assistance. The savings is generally equal to the federal share of these claims since, in most instances, that amount would otherwise have been paid from non-federal Title IV-E agency funds.

#### CHILD WELFARE PREVENTION AND INTERVENTION SERVICES

This line item was established as spending authority for the Child Welfare Prevention and Interventions Services Cash Fund created in SB 18-254. Monies are transferred to cash fund during fiscal year close out for unspent General Fund money included in the initial allocation to each Balance of State (BOS) county, up to five percent of the total General Fund money allocated to BOS counties, as described in C.R.S. 26-5-104 (4)(b) and referred in (7)(a) as "small and Medium-sized counties." Funding is to be used by the BOS counties for the delivery of child welfare prevention and intervention services that have been approved by the Department.

#### CHILD WELFARE LEGAL REPRESENTATION

This line item was established to provide reimbursement of administrative costs for attorneys to provide legal representation for the title IV-E agency, a candidate for Title IV-E foster care or a Title IV-E eligible child in foster care, and the child's parents to prepare for and participate in all stages of foster care related legal proceedings. The reimbursements are deposited into the Title IV-E Administrative Costs Cash Fund, which was created in SB 19-258. The cash funds are then then disbursed to the Office of Child's Representative (OCR) and the Office of Respondent Parents' Counsel (ORPC) pursuant to a Memorandum of Understanding between the agencies and the Department.

## PERFORMANCE-BASED COLLABORATIVE MANAGEMENT INCENTIVES

This line item originated in H.B. 04-1451 to provide the Department with spending authority for incentives to counties. This bill authorizes county departments of human and social services to enter into a memorandum of understanding (MOU) with local representatives of various agencies. These MOUs are designed to promote a collaborative system of services to multi-system involved children and families or those at risk for multi-system involvement. If a county department elects to enter into an MOU for the program, participation by local representatives is required.

Parties to each MOU are required to establish collaborative management processes that are designed to reduce duplication and eliminate fragmentation of services; increase the quality, appropriateness, and effectiveness of services; integrate services for multi-system involved children and families; and encourage cost sharing among service providers. Parties to an MOU agree to meet certain performance measures specified by the Department.

The line item is funded by cash funds from the Performance-based Collaborative Management Incentive Cash Fund, created in Section 24-1.9-104 (1) C.R.S. (2020), and through S.B. 15-241. Also, additional General Fund is appropriated. Cash funds are derived from docket fees in civil actions (petitioner and respondent fees for dissolution of marriage or civil union, legal separation of marriage or civil union, declaration of invalidity of marriage or civil union, and declaratory judgment concerning the status of marriage or civil union), as specified in Section 13-32-101 (1)(a), C.R.S. (2020). The appropriation established through S.B. 15-241 provides funding for additional incentives to counties. Under the program, local interagency groups are eligible to receive incentive moneys, after meeting locally selected outcomes, to be reinvested in services for multi-system children and families.

## COLLABORATIVE MANAGEMENT PROGRAM ADMINISTRATION AND EVALUATION

This line item was created through S.B. 15-241 and appropriates General Fund to the Collaborative Management Program for FTE to administer the program, and for an outside organization to perform an annual evaluation of the program pursuant to Section 24-1.9-102.5, C.R.S. (2020). There is funding for 1.5 FTE appropriated to this line item.

## INDEPENDENT LIVING PROGRAMS

This line item, supporting the federal Chafee Foster Care Independence Program (Foster Care Independence Act of 1999), provides the primary source of funding for independent living services in Colorado. Two federal formula grants, Chafee

Foster Care Independence Program and the Chafee Educational Training and Voucher (ETV) Program, under Title IV-E of the Social Security Act, fund this line item. The programs require a 20 percent non-federal match, which can be made through in-kind matching. The line item funds FTE who administer and provide support to the program. Both programs provide independent living resources to youth who are at-risk of aging out of foster care and are ages 15 to 18, youth ages 16 to 21 that entered adoption or Relative Guardianship Assistance Program on or after their 16th birthday, and young adults ages 18 to 21 who were in foster care on their 18th birthday.

Colorado operates the Chafee Foster Care Independence Program through the counties. The county program provides direct services to eligible youth, as well as technical assistance, program and policy development, monitoring, and program administration. The eligible youth and young adults in the program learn skills management which assists them in developing permanent connections, maintaining social and emotional well-being, securing safe and stable housing, and pursuing educational opportunities and employment.

Colorado's ETV Program was established after the passage of the federal Promoting Safe and Stable Families Amendments (PSSF Amendments) of 2001, Public Law 107-133. The ETV targets additional resources to meet the educational and training needs of youth aging out of foster care. Eligible youth may receive vouchers for up to \$5,000 per year to attend college, a university, or an accredited career or technical training program. The funds can be used for tuition, books, or qualified cost-of-attendance expenses. These funds are available on a first-come, first-serve basis to Chafee eligible students in Colorado's foster care system and foster care alumni. Youth who receive an ETV prior to age 21 may continue utilizing the vouchers until age 23. The Division contracts for the administration and tracking of the ETV funds and match is provided by the contracted vendor. There is funding for 4.0 FTE appropriated to this line item.

#### FEDERAL CHILD ABUSE PREVENTION AND TREATMENT ACT GRANT

This line item originated following the passage of the federal Child Abuse Prevention and Treatment Act (CAPTA) of 1974 (P.L. 93-247) and reauthorized by the CAPTA Reauthorization Act of 2010 (P.L. 111-320). Grant funding is allotted to states annually on a formula basis according to each state's ratio of children under the age of 18 to the national total. The line item consists of one hundred percent federal funds. Funds are maintained at the State level and are used for FTE who administer and provide support to the program and for services and resources to county staff to develop and implement procedures for collaboration among child protective and domestic violence services, public health, public education, mental health, juvenile justice, and other agencies in the delivery of services and treatment. There is funding for 3.0 FTE appropriated to this line item.

#### HOTLINE FOR CHILD ABUSE AND NEGLECT

H.B. 13-1271 authorized the Department to create, based on the recommendations of a steering committee, a statewide reporting hotline system to serve as a direct, immediate, and efficient route to applicable entities responsible for accepting and responding to reports of abuse and neglect. As of January 1, 2015, Colorado's Child Abuse and Neglect Hotline, a statewide toll-free number 1-844-264-5437 (844-CO4KIDS) available 24 hours a day, 365 days per year was established to make it easier to report child abuse and neglect.

Calls made directly to local county dedicated numbers go through the statewide phone system. Through telecommunications technology, calls are routed seamlessly through the statewide system unbeknownst to the caller. This enables the system to collect data on calls made directly to the counties.

The Hotline Implementation Fund ended in FY 2015-16. The majority of the line item appropriation in this line item is General Fund with a small amount of federal Title IV-E reimbursement. There is funding for 6.0 FTE appropriated to this line item.

#### PUBLIC AWARENESS CAMPAIGN FOR CHILD WELFARE

This line item was established in FY 2014-15 to create, produce and implement a child abuse and neglect public awareness campaign. The legislation included a provision to make the public aware of the phone number to call. The Department commissioned public opinion research to create an evidenced-based public awareness campaign to promote the new Statewide hotline, working with a marketing consultant to outline a marketing strategy to inform all Coloradans of the new hotline.

Funding is all General Fund and includes FTE to manage and coordinate campaign efforts. There is funding for 1.0 FTE appropriated to this line item.

## INTERAGENCY PREVENTION PROGRAMS COORDINATION

The Interagency Prevention Systems Coordination line item was appropriated to the Department of Public Health and Environment through H.B. 00-1342. The program moved to the Department of Human Services in FY 2013-14 through H.B. 13-1239. The program oversees the development and implementation of the Colorado Statewide Youth Development Plan

and addresses the coordination of youth development programs across multiple state and local agencies. The goal of the plan is to quantify existing and needed services for youth ages 9-21 and to align existing limited resources to help promote positive youth development. The program receives General Fund to support FTE and other costs associated with implementation of the plan and coordinating with stakeholders. There is funding for 1.0 FTE appropriated to this line item.

#### TONY GRAMPSAS YOUTH SERVICES PROGRAM

The Tony Grampsas Youth Services (TGYS) Program line item was appropriated to the Department of Public Health and Environment through H.B. 00-1342. The program moved to the Department of Human Services in FY 2013-14 through H.B. 13-1117. TGYS provides funding for FTE to coordinate the program and to community-based programs that target youth and their families for prevention and intervention services in an effort to reduce incidents of youth crime and violence, to prevent youth marijuana use, and to prevent child abuse and neglect. The program funds a wide range of community programs for children and youth, but has a particular focus on positive youth development programs including youth mentoring, restorative justice, before- and after-school programs, school dropout prevention, violence prevention services, and early childhood services. Funding is a mix of General Fund, Tobacco Master Settlement Agreement cash funds, and Marijuana Tax cash funds. The Department distributes moneys to service providers on a three-year grant cycle through a competitive application process. There is funding for 3.0 FTE appropriated to this line item.

## APPROPRIATION TO YOUTH MENTORING SERVICES CASH FUND

This line item was created in FY 2016-17 to reflect the Marijuana Tax Cash Fund appropriation to the Youth Services Mentoring Cash Fund that resulted from the passage of Proposition BB in November 2015. This appropriation is for the Tony Grampsas Youth Services Program for the provision of youth mentoring services in accordance with 26-6.8-104, C.R.S. (2020).

#### INDIRECT COST ASSESSMENT

Indirect Cost Assessment provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cashfunded, reappropriated funds, or federal-funded program



# **Department of Human Services Line Item Descriptions**

Office of Early Childhood

FY 2022-23 Budget Request

**NOVEMBER 1, 2021** 



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## (6) OFFICE OF EARLY CHILDHOOD

## (A) DIVISION OF EARLY CARE AND LEARNING

#### EARLY CHILDHOOD COUNCILS

The passage of H.B. 07-1062, codified at 26-6.5-101 et. seq., C.R.S. (2021), renamed, improved, and expanded the Consolidated Child Care Pilot program. Effective FY 2008-09, this line item was renamed to "Early Childhood Councils" to match the program name.

The Early Childhood Council system covers 63 of 64 Colorado counties and is charged with building the foundations of a locally based early childhood system so that more high quality services are available to more children and families. Funding in this line item is from federal Child Care Development Fund grant funding that is distributed to Early Childhood Councils through a grant process on a three-year cycle by the Department. Funding is also used by the Department for staff to administer the grant process, and to provide program oversight, contract and budget management, and technical assistance and support to the Councils.

### CHILD CARE LICENSING AND ADMINISTRATION

Child Care Licensing and Administration is codified at Section 26-6-101 et. seq., C.R.S (2021). The Child Care Licensing and Administration line item appropriation funds the personnel and operating costs associated with child care licensing and administrative activities. The line item appropriation includes General Fund, cash funds from licensing fee revenues, and federal funds (primarily Child Care Development Fund). Expenditures are incurred for the following activities:

• Licensing. The Division of Early Care and Learning (DECL) is responsible for inspecting, licensing, and monitoring child care facilities throughout the State. The licensing program is responsible for enforcement of applicable federal and State rules and regulations for child care facilities. The Division provides technical assistance to child care providers and establishes educational and experience requirements for child care providers in all facilities. The licensing program is federally required to conduct annual licensing inspections for all facilities.

- Colorado Child Care Assistance Program Administration. This line item provides funds to administer the Colorado Child Care Assistance Program (CCCAP). Departmental administrative activities include providing technical support and training for all 64 counties, compliance tracking and monitoring of the usage of CCCAP funds, processing background checks, and other related administrative and supervisory support.
- Child Care Licensing Appeal Panel. The panel reviews provider requests for waivers to licensing regulations. Applicants or licensed providers may appeal regulations that they believe cause them undue hardship or have been too stringently applied. The Child Care Licensing Appeal Panel of the Division hears an average of 600 appeals a year. To facilitate parents' involvement in monitoring and making decisions about licensed facilities, the Division makes licensing histories of child care facilities available to the public.
- Other Administrative Activities. This line item funds the general administrative functions related to financial analysis and reporting, information technology, data management and analysis, support staff, and management.

The line item appropriation includes revenue earned from licensing fees deposited into the Child Care Licensing Cash Fund. The Department, through rules established by the State Board of Human Services and pursuant to Section 26-6-105, C.R.S. (2021), establishes licensing fees not to exceed the direct and indirect costs incurred.

#### FINES ASSESSED AGAINST LICENSEES

S.B. 99-152 created the Child Care Cash Fund, which consists of fines collected from licensees by the Department (Section 26-6-114 (5), C.R.S. [2021]). Monies in the fund are continuously appropriated to the Department "to fund activities related to the improvement of the quality of child care in the state of Colorado." Fines are assessed against unlicensed child care providers for operating illegally and are assessed against licensed child care providers for repeated violations of regulations.

#### CHILD CARE ASSISTANCE PROGRAM

The Colorado Child Care Assistance Program is codified at 26-2-801 et seq., C.R.S. (2021). The Colorado Child Care Assistance Program (CCCAP) provides financial assistance to low-income families who are working, searching for employment, pursuing training or higher education, or are enrolled in the Colorado Works Program and need child care services to support their efforts toward self-sufficiency. The Division of Early Care and Learning is the lead agency for CCCAP, as established in S.B. 97-120 in 26-2-801 through 809, C.R.S. (2021). The Department supervises CCCAP services administered by county departments of human or social services.

The State allocates CCCAP monies to counties annually based on an allocation formula. Funding for the program is comprised of General Fund, local funds, and federal funding from the Child Care and Development Fund, and a small amount of Title XX funds. CCCAP monies are used for both county administration of the program and to reimburse child care providers for child care services provided for CCCAP children. Overall, CCCAP expenditures are tied to the number of families receiving care, the amount of care provided, and the provider reimbursement rates.

#### INTRASTATE CHILD CARE ASSISTANCE PROGRAM REDISTRIBUTION

This line item was created in FY 2018-19, and is funded through federal funds from the Child Care and Development Fund grant. The line item is dedicated to child care activities allowable under the Child Care and Development Fund grant to allow the State to address the specific challenges related to equal access to high-quality early child care and education, including child care deserts, workforce development, and provider retention as well as to ensure adherence to regulations and improve effective delivery of Colorado's Child Care Assistance Program (CCCAP), including enhancements to the CCCAP IT system, the Child Care Automated Tracking System (CHATS).

### COLORADO CHILD CARE ASSISTANCE PROGRAM RATE SETTING STUDY

The Colorado Child Care Assistance Program Rate Setting Study was created by H.B. 14-1317 and is funded by federal funds from the Child Care and Development Fund (CCDF) grant. This rate setting study is used to help establish reimbursement rates for child care providers within Colorado's Child Care Assistance Program (CCCAP) that provide equal access to children and families. In Colorado, the State provides rates for each county and each child care market. Per S.B. 21-217, the State will complete the rate setting study once every three years.

## CHILD CARE GRANTS FOR QUALITY AND AVAILABILITY AND FEDERAL TARGETED FUNDS REQUIREMENTS

This line item was created in FY 2007-08 and combined the former "Grants to Improve the Quality and Availability of Child Care" and "Federal Discretionary Child Care Funds Earmarked for Certain Purposes" line items. The components of the line item appropriation are as follows:

• Quality Improvement. The federal government currently requires that 9 percent of expenditures for Child Care and Development Fund (CCDF) be used to improve the quality of child care. The 9 percent calculation is based

- on total CCDF expenditures, including state expenditures required to match a portion of the federal CCDF grant and expenditures of county transfers of Temporary Assistance for Needy Families funds to CCDF. Funding for quality activities supports Colorado's Early Childhood Councils (ECCs) and the School-Readiness Quality Improvement Program pursuant to Section 26-6.5-106, C.R.S. (2021).
- Targeted Funds. Beginning in FFY 2016-17, federal law required 3 percent of the total CCDF expenditures to be targeted for infant/toddler care to provide specialized training, technical assistance, or expansion of the supply of child care programs serving infants and toddlers. This funding includes, but is not limited to, the Infant and Toddler Quality and Availability (ITQA) program, codified in Section 26-6.7-101 through 105, C.R.S. (2021).

Line item funding, which is comprised of General Fund and federal CCDF, also supports state staff charged with managing the grant program, associated contracts, and budgets.

## SCHOOL-READINESS QUALITY IMPROVEMENT PROGRAM

The School-Readiness Child Care Subsidization Program was created by H.B. 02-1297 (Section 26-6.5-106, C.R.S. (2021)) to improve the quality of licensed child care facilities whose enrolled children ultimately attend elementary schools. The legislation was reauthorized in H.B. 05-1238, and the program was renamed the School-Readiness Quality Improvement Program (SRQIP). S.B. 18-099 amended the application and eligibility requirements for the program and clarified that SRQIP is administered as part of the Colorado Shines Quality Rating and Improvement System. SRQIP funding is intended to support children five years of age or younger who have risk factors associated with not being school-ready.

Statute requires the Department to award SRQIP funding to eligible Early Childhood Councils (ECCs) to develop plans to engage young children, providers, schools, families, and communities. SRQIP grantees also distribute funding to eligible early childhood education programs within their communities.

Line item funding, which is entirely composed of federal CCDF, also supports state staff charged with managing the grant program, associated contracts, and budgets.

## CHILD CARE SERVICES AND SUBSTANCE USE DISORDER TREATMENT PILOT PROGRAM

The Child Care Services and Substance Use Disorder Treatment Pilot Program was created by HB19-1193 (Section 26-6.9-102, C.R.S (2021)) to provide grants to enhance the existing child care resource and referral programs to provide increased child care navigation capacity in one rural pilot program site and one urban pilot program site to serve pregnant and parenting women seeking or participating in substance use disorder treatment, provide a grant to enhance the capacity of the existing child care resource and referral program's centralized call center to serve pregnant and parenting women seeking or participating in substance use disorder treatments, and provide implementation grants to pilot a regional mobile child care model that is licensed in compliance with Article 6 of Title 26 or as defined in section 26-6-102 and that serves children under five years of age in at least three facilities that provide substance use disorder treatment to parents. Due to the COVID-19 pandemic, funding for this pilot program was eliminated for FY 2020-21 but was restored for the final year of the pilot (FY 2021-22).

## **CONTINUATION OF CHILD CARE QUALITY INITIATIVES**

Continuation of Child Care Quality Initiatives was funded through a budget request in FY 2016-17, which authorized federal Child Care and Development Fund (CCDF) spending authority to support the ongoing sustainability of child care quality initiatives. These initiatives include the Quality Rating and Improvement System (QRIS), Colorado Shines, which the Department launched in 2014. Colorado Shines is embedded in the state child care licensing regulatory system, requiring the assignment of a quality rating level for all licensed child care programs enrolling children prior to kindergarten to inform parents about the quality of early learning programs and drive improvements to the quality of those programs. The initiatives also include the Colorado Shines Professional Development Information System (PDIS), which is the statewide workforce registry and learning management system supporting professional development for Colorado's early childhood workforce. Effective December 2021, all staff in licensed programs are required to be registered in the PDIS. Additionally, required annual training is offered to all child care professionals for free through the learning management system in English and Spanish, ensuring access to required health and safety training as well as ongoing professional development for all professionals in the state.

The funds support the costs of the FTE and resources for the ongoing oversight and development of the Colorado Shines framework, including coaching, rating administration, inter-rater reliability for assessor staff, ongoing training, and professional development opportunities for early childhood educators, and operating and maintenance costs for the technology systems (Colorado Shines Technology System and PDIS).

#### CHILD CARE ASSISTANCE PROGRAM SUPPORT

During the FY 2017-18 budget cycle, JBC Staff initiated a transfer of \$1,200,000 from the Colorado Child Care Assistance Program (CCCAP) line item to a new line item, Child Care Assistance Program Support. Codified in Section 26-2-801 et. seq., C.R.S. (2021), this program is funded by the Child Care and Development Fund (CCDF) grant for costs associated with software licenses and contracted maintenance and support for the Child Care Automated Tracking System (CHATS).

#### CHILD CARE SUSTAINABILITY GRANT PROGRAM

The Child Care Sustainability Grant Program was established by H.B. 20b-1002 and revised by S.B. 21-236. The program is codified at Section 26-6-802, C.R.S. (2021). For FY 2021-22, this line item is funded by federal funds from the Child Care and Development Fund (CCDF) grant for costs associated with issuing sustainability grants to eligible child care providers. Line item funding supports grant payments to providers, contractual costs related to the distribution of funds, and state staff charged with managing the grant program, associated contracts, and budgets.

#### EMERGING AND EXPANDING CHILD CARE GRANT PROGRAM

The Emerging and Expanding Child Care Grant Program was established by H.B. 20b-1002 and revised by S.B. 21-236. The program is codified at Section 26-6-803, C.R.S. (2021). For FY 2020-21 and FY 2021-22, this line item is funded by General Fund to expand access and availability of licensed child care throughout the state. Grants may be used for costs associated with expanding an open and operating child care center or family child care home or to assist an eligible entity with start-up of a new child care center or family child care home. Funding also supports local Early Childhood Councils (ECCs) and community education and outreach.

#### EMPLOYER-BASED CHILD CARE FACILITY GRANT PROGRAM

The Employer-Based Child Care Facility Grant Program was established by S.B. 21-236. Funded by General Fund for FY 2020-21 and FY 2021-22, the program is codified at Section 26-6-804, C.R.S. (2021) to provide eligible entities with money to construct, remodel, renovate, or retrofit a child care center on the site or near to the site of the eligible entity's property to provide licensed child care services. Line item funding also supports contractual costs related to the distribution of funds, and state staff charged with managing the grant program, associated contracts, and budgets.

#### EARLY CARE AND EDUCATION RECRUITMENT AND RETENTION GRANT PROGRAM

The Early Care and Education Recruitment and Retention Grant Program was established by S.B. 21-236. Funded by the Child Care and Development Fund (CCDF) grant for FY 2021-22, the program is codified at Section 26-6-805, C.R.S. (2021) to increase the number of qualified early childhood educators in the State and retain the early childhood educator workforce. Line item funding supports contracts with eligible entities to implement the various scholarship and grant programs, as well as the state staff charged with managing the grant program, associated contracts, and budgets.

#### CHILD CARE TEACHER SALARY GRANT PROGRAM

The Child Care Teacher Salary Grant Program was established by S.B. 21-236. Funded by the Child Care and Development Fund (CCDF) grant for FY 2021-22, the program is codified at Section 26-6-806, C.R.S. (2021) with the purpose of allowing eligible entities to apply for a grant to increase the salaries of its early childhood educators. Line item funding also supports contractual costs related to the distribution of funds, and state staff charged with managing the grant program, associated contracts, and budgets.

## COMMUNITY INNOVATION AND RESILIENCE FOR CARE AND LEARNING EQUITY GRANT PROGRAM

The Community Innovation and Resilience for Care and Learning Equity (CIRCLE) Grant Program was established by S.B. 21-236. Funded by the Child Care and Development Fund (CCDF) grant for FY 2021-22 and FY 2022-23, the program is codified at Section 26-6-807, C.R.S. (2021) with the purpose of systemic challenges for early care and learning providers that have worsened as a result of the economic, social, and health impacts of the COVID-19 public health emergency and to promote innovation to improve outcomes for children and families. Line item funding also supports contractual costs related to the distribution of funds, and state staff charged with managing the grant program, associated contracts, and budgets.

(B) DIVISION OF COMMUNITY AND FAMILY SUPPORT

PROMOTING SAFE AND STABLE FAMILIES

Promoting Safe and Stable Families was originally authorized in 1993 under Subpart 2 of Title IV-B of the federal Social Security Act, and was established in name by the 1997 federal Adoption and Safe Families Act. The program is codified at Section 26-5-101 et. seq., C.R.S. (2021). The line supports costs associated with state staff responsible for administering the program, and managing the associated contracts and budgets.

The Promoting Safe and Stable Families (PSSF) program provides funding and technical assistance to selected counties in Colorado to create, enhance, and coordinate four service areas including family support programs to increase family well-being, family preservation services for families with children at risk of maltreatment or those with disabilities, reunification services for families with children in out-of-home placement, and adoption promotion and support services.

PSSF is funded by a formula grant and requires a 25 percent non-federal match to draw down the federal funds. The General Fund appropriation provides the match for the portion of the funds that are used to support state-level staff and data collection activities, and the cash funds represent the in-kind and non-federal funds that the local counties provide as a match for the funds they receive.

#### EARLY CHILDHOOD MENTAL HEALTH CONSULTATION SERVICES

The Early Childhood Mental Health Consultation program is codified at 26-6.5-401 through 407, C.R.S. (2021). The purpose of the Early Childhood Mental Health Consultation (ECMHC) program is to increase the availability of mental health consultation services to young children, birth through age five, and provide coaching and training to families and early care and learning environments that will help adults support children's social-emotional development and to identify early in a child's life any concerns that could lead to greater challenges in the future. Benefits of the ECMHC program include fewer incidents of challenging behaviors, reduced stress for parents, increased resiliency for children, stronger relationships between children and parents, and improved school readiness meaning that children are ready for school, families are ready to support their children's learning, and early care and learning programs are ready for children.

In FY 2015-16, the Department submitted a supplemental budget request to use CCDF to implement new federal program requirements. Specifically, the funding addresses the requirement to provide enhanced resources to address the social and emotional needs of young children in Colorado that will reduce suspensions and expulsions. The Legislature approved the request, and the State was able to expand the number of FTE community-based ECMH

Consultants. The line supports costs associated with state staff responsible for administering the program, and managing the associated contracts and budgets.

#### EARLY INTERVENTION SERVICES

The Early Intervention Services program is codified at 27-10.5-701 through 710, C.R.S. (2021) and the Individuals with Disabilities Education Act (2004), 34 C.F.R. Section 303.101 (a)(1). Early Intervention services provide services and supports to children from birth through age two and their families who are determined eligible based on a developmental delay or disability. These services and supports enhance child development in the areas of adaptive skills, cognitive skills, communication, motor development including vision and hearing and social and emotional development. The Early Intervention program also includes early identification, screening, and assessment services, and procedural safeguards. The program is funded by a combination of General Fund, local funds, Medicaid, the Early Intervention Services Trust (EIST), and federal funding from Part C of the Individuals with Disabilities Education Act (IDEA).

Line item funding supports contracts with community agencies to provide service coordination and direct services to eligible children and families, and other costs necessary to implement the Early Intervention program, including public awareness, training, information technology, and the state staff responsible for oversight and implementation of the program.

#### EARLY INTERVENTION EVALUATIONS

The Early Intervention Evaluations line was created during the FY 2018-19 figure setting process with an appropriation of General Fund and federal funding from Part C of the Individuals with Disabilities Education Act (IDEA). The funding assists the State with the administration and completion of Early Intervention Evaluations for children birth through age two. With the passage of S.B. 21-275, the full authority for conducting all Early Intervention evaluations was transferred from the Colorado Department of Education (CDE) to the Colorado Department of Human Services (CDHS) to align with CDHS' responsibility as the state lead agency for purposes of federal Part C funding and law. Line item funding supports

costs associated with conducting evaluations and implementing the evaluation program, including public awareness, training, information technology, and the state staff responsible for oversight and implementation of the program.

#### COLORADO CHILD ABUSE PREVENTION TRUST FUND

Funds derived from the Colorado Child Abuse Prevention Trust Fund created in 19-3.5-106(1), C.R.S. (2021) are allocated with advisement from the Governor-appointed seventeen-member Colorado Child Abuse Prevention Trust Fund Board to local organizations to prevent the abuse and neglect of Colorado's children. Line item funding also supports the costs of state staff responsible for oversight and administration of the trust fund.

Cash funds from divorce docket fees will be expended toward primary child abuse prevention strategies with two priorities identified in the statute: child sexual abuse prevention and the prevention of drug-exposed newborns. H.B. 18-1064 added a requirement to utilize additional state funds for a training program to prevent child sexual abuse. Due to the COVID-19 pandemic, General Fund for this purpose was removed starting in FY 2020-21 though the mandate to provide the training remains in statute.

H.B. 21-1248 added a new sub-account to the Trust Fund starting FY 2021-22 that will receive and pool federal Title IV-E claiming reimbursement for state investment in prevention services named on the Family First Prevention Services Act Clearinghouse. The Colorado Child Abuse Prevention Trust Fund Board will establish priorities to build capacity for more prevention services across the state that will guide the Department in releasing solicitations to local organizations implmenting programs on the same Clearinghouse.

Federal Community Based Child Abuse Prevention (CBCAP) grant funds, from the Child Abuse Prevention and Treatment Act Part II, support the creation and implementation of county child maltreatment prevention plans, implementation of some of those local strategies, and to investments in capacity building across the family strengthening system. Many of these grants go directly to Family Resource Centers that are implementing programs and strategies to strengthen families and prevent child abuse and neglect from occuring in the first place. This funding also supports the cost of state staff responsible for oversight and administration of the federal grant program.

### NURSE HOME VISITOR PROGRAM

The Nurse Home Visitor Program (NHVP) is funded by the Nurse Home Visitor Program (NHVP) Fund created in 26-6.4-107 (2) (b), C.R.S. (2021), federal funding from the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grant, and Medicaid reimbursements. The program receives an annual distribution of funding from the Tobacco Master Settlement Agreement, which is deposited into the NHVP fund. 95% of the funding must go to contracts with community agencies to implement the direct services, and the remaining 5% supports the cost of oversight and implementation of the program.

This program is based on the proven national Nurse Family Partnership program (NFP), which has more than 40 years' worth of clinical trials demonstrating long-term outcomes such as reduced childhood injuries. Compared with a similar reference group of low-income women nationally, NFP participants had 18 percent fewer preterm births, 21 percent more mothers were breastfeeding, and 19 percent more infants were immunized at six months. The state program provides funding for home visiting nurse services to low-income (up to 200 percent of the Federal Poverty Level), first-time mothers during their pregnancies and through their children's second birthday. This is a voluntary program designed to provide trained visiting nurses to help educate mothers on the importance of nutrition, healthy decision making, and to assist and educate mothers in providing general infant care to improve outcomes for their children. Each year the program sees over 4,000 first-time mothers with services in all 64 Colorado counties through its 22 sites across the state.

#### FAMILY SUPPORT SERVICES

The Family Support Services line item was created through legislative action in FY 2015-16 to support and make grants to Family Resource Centers (FRCs) to create stronger Colorado families by providing support to vulnerable families. By visiting an FRC, families participate in voluntary comprehensive coordinated case management services to navigate the pathways to economic, educational, social and health success for all generations, thus moving families from crisis to self-reliance. For many families, FRCs are the gateway to accessing the early childhood system, including home visitation programs and early intervention supports. These brick-and-mortar Centers provide a single point of entry for families to receive comprehensive, integrated services in their community. FRCs provide families with a broad range of supports, which may include early child care and education, adult education, wellness programming, Medicaid enrollment, connections to local food banks and housing supports, utility assistance, and other services. Established in 1993, the FRC system is one of the longest-standing family supports in the state. The family resource center network, through the Family Resource Center Association, has grown to 33 FRCs across Colorado, and together they served more than 13,000 families in 2018-19, although residents in 16 counties still do not have access to a center. FRCs are

supported by a mix of local, state, and federal funding; foundations; faith-based organizations; individual donations; special events; earned income; and program fees. This line item is funded with General Fund, and supports costs of state staff charged with managing the program, contracts with program sites, and other contractual costs necessary for the implementation and evaluation of the program.

#### COMMUNITY-BASED CHILD ABUSE PREVENTION SERVICES

As a result of the FY 2016-17 R-20 Realignment of Office of Early Childhood Programs from the Division of Child Welfare, this line item for Early Childhood is codified at 26-5-101 et. seq., C.R.S. (2020). This line item appropriation includes the funding for two programs created during the FY 2012-13 budget cycle: SafeCare Colorado and Colorado Community Response. This line item is funded with General Fund, and supports costs of state staff charged with managing the programs, contracts with program sites, and other contractual costs necessary for the implementation and evaluation of the programs.

- SafeCare Colorado. SafeCare Colorado is a voluntary in-home prevention service for parents to assist them with the challenges of parenting and inter-family relationships. Services offered include child behavior management, planned activities training, home safety training, and child health care skills, all designed to stabilize families and prevent child maltreatment. Program resources include home visits, family coaches, and access to other services that may be of need to a family, including but not limited to food assistance, work assistance, and child care assistance. SafeCare is used in other communities across the country and has demonstrated strong success in eliminating child maltreatment. Funding is used to support sites across the State that provide services under the SafeCare Colorado model. The program commenced in FY 2013-14 with the establishment of 6 sites, followed by 3 more. Currently there are 13 sites and one tribe that provide SafeCare services in 39 counties. Evaluation activities are administered by the Colorado State University School of Social Work.
- Colorado Community Response Program. The Colorado Community Response Program draws on public, private, and community supports to keep children safe by increasing a family's protective capacities to prevent child neglect among low-income families. The Colorado Community Response Program is a voluntary program serving families that have been reported to a county child protective agency for alleged child abuse or neglect but are screened out without an offer of services. The family receives needed referrals, financial literacy coaching, and access to flex funding in order to increase economic self-reliance. The program is organizationally located and

managed by the Office of Early Childhood. Similar to SafeCare Colorado, funding for the Colorado Community Response Program established sites across Colorado that were selected through a competitive application process. As of FY 2019-20, CCR services are being delivered at 24 sites in 34 counties. A randomized control trial study of the promising practice is being completed by the Colorado Evaluation and Action Lab at the University of Denver.

#### HOME VISITING FOR SCHOOL READINESS

Previously known as Healthy Steps for Young Children, this line item was originally created during the FY 2017-18 Figure Setting process and funded through General Fund. Funding supports contracts with agencies to implement the national HealthySteps model. HealthySteps is a voluntary, evidence-based two-generation program that is delivered through the pediatric care system to provide parent support and education, developmental screening, instruction in safe sleep practices, family protective and risk factor screening, and connections to needed services.

# **INCREDIBLE YEARS PROGRAM**

Incredible Years is an evidence-based, two-generation program that fosters social and emotional well-being in young children and works to prevent behavior issues that could lead to suspension or expulsion from preschool. The program consists of three components: classroom management support for teachers, a curriculum delivered in Pre-K and kindergarten classrooms, and a parenting program. The program is funded through Marijuana Tax Cash Funds. Funding also supports the cost of state staff responsible for oversight and administration of the federal grant program.

# (C) INDIRECT COST ASSESSMENT

Indirect Cost Assessment provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cash-funded (including reappropriated funds) or federal-funded program.



# **Department of Human Services Line Item Descriptions**

**Office of Self-Sufficiency** 

FY 2022-23 Budget Request

**NOVEMBER 1, 2021** 



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# (7) OFFICE OF SELF SUFFICIENCY

# (A) ADMINISTRATION

#### PERSONAL SERVICES

The Personal Services line appropriation includes funding for salaries for 15.0 FTE responsible for the supervision, management, oversight, and administrative support of the Colorado Works Program, the Special Purpose Welfare Programs (Low Income Energy Assistance Program, Supplemental Nutrition Assistance Program (SNAP), Food Stamp Job Search, Food Distribution, Income Tax Offset, Electronic Benefits Transfer Service, Refugee Assistance, and Systematic Alien Verification for Eligibility), and Child Support Enforcement.

#### **OPERATING EXPENSES**

The Operating Expenses line item includes funding for supplies and materials including, but not limited to, rental of personal computers, telecommunication services, printing and reproduction services, registration fees, and postage for the Office of Self Sufficiency.

# (B) COLORADO WORKS PROGRAMS

#### ADMINISTRATION

The Colorado Works Program implements the federal Temporary Assistance for Needy Families (TANF) block grant program created in the 1996 welfare reform law (P.L. 104-193). The program provides financial and other assistance to families to enable children to be cared for in their own homes and to assist needy parents in achieving self-sufficiency. Per the 1996 federal law, the State receives a fixed amount of \$136.1 million per year in TANF block grant funds. The majority of the TANF funds received each year are appropriated as block allocations to counties to operate the Colorado Works program. Federal TANF funds are also used by the State and counties to support related programs that assist needy families, including child welfare and child care subsidy programs.

This line item appropriates Temporary Assistance for Needy Families (TANF) Block Grant spending authority for personal services (19.8 FTE) and operating expenses associated with the State's supervision and oversight of the county-administered Colorado Works Program.

# **COUNTY BLOCK GRANTS**

This line item was created in 1997 by the Colorado Works Program Act (S.B. 97-120). The appropriation provides funding to county departments of human and social services to administer the Colorado Works Program, including providing g public assistance, employment services, and supportive services for eligible families.

Counties have the flexibility to use TANF funds for local programming that meet the following federal criteria:

1) provide assistance to needy families so that children can be cared for in their own homes or in the homes of relatives; 2) end the dependence of needy families on government benefits by promoting job preparation, work, and marriage; 3) prevent and reduce the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of pregnancies; and 4) encourage the formation and maintenance of two-parent families.

The allocation of funds among the counties is based on demographic and economic factors and is determined by the Department based on input from the Colorado Works Allocation Committee.

The line item is funded with federal Temporary Assistance for Needy Families (TANF) funds, local cash funds, and an amount from the State's share of recoveries.

# SHORT-TERM NON-RECURRANT BENEFITS

This line appropriated federal Pandemic Emergency Assistance Funds allocated to Colorado. Funds are being used to provide a one-time supplemental payment to all households receiving Colorado Works assistance. \$13,502,982 was appropriated for these supplemental payments in FY 2021-22.

# **COUNTY TRAINING**

This line item was created in 1997 by S.B. 97-120, the Colorado Works Program Act. Pursuant to Section 26-2-712 (7), C.R.S. (2021), the Department is mandated to develop training for county caseworkers so that they are knowledgeable and can assist individuals who receive assistance through the Colorado Works Program in identifying goals, obtaining supportive services, utilizing the family's existing strengths, and providing ongoing support and assistance to the family in overcoming barriers; understanding and properly utilizing data reporting systems to report participation data and outcomes required by the State department; and providing opportunities to access professional-level curriculum.

The TANF Block Grant provides funding for administrative costs including personal services (2.0 FTE) and operating expenses associated with developing and conducting the necessary training.

#### DOMESTIC ABUSE PROGRAM

The Domestic Abuse Program line item was established by HB 83-1050. Pursuant to Section 26-7.5-105, C.R.S. (2019), moneys are appropriated to the Department's Domestic Violence Program (DVP) to encourage local governments and non-governmental agencies to develop domestic abuse programs. The DVP uses cash funds from the Colorado Domestic Abuse Program Fund, the Temporary Assistance for Needy Families (TANF) Block Grant, and non-appropriated federal funding from the Family Violence Services and Prevention Act to provide grant funding to community-based programs that offer emergency shelter, counseling, and advocacy to victims and their families. The cash fund is established pursuant to Section 39-22-802, C.R.S. (2019), and consists of taxpayer contributions through a check-off box on Colorado individual income tax returns, and moneys collected from marriage license fees and filing fees for petitions and responses related to dissolutions of marriage. In July 2012, the DVP Colorado Domestic Abuse Program Fund moved organizationally from the Office of Behavioral Health and is now managed by the Office of Children, Youth, and Families. There are 2.7 FTE associated with this line item.

# WORKS PROGRAM EVALUATION

A FY 2009-10 Decision Item #23 titled "Colorado Works Program Evaluation" funded an annual, ongoing evaluation of the Colorado Works program. The line item provides federal funds spending authority (TANF Block Grant) for contractor services and related administrative expenses associated with conducting the evaluations.

# WORKFORCE DEVELOPMENT COUNCIL

This line item was established by FY 2004-05 Budget Amendment #16 and includes TANF Block Grant spending authority for the Department's share of the operation of the Workforce Development Council in the Department of Labor and Employment. Pursuant to Section 24-46.3-101 (8), C.R.S. (2021), the Office of Workforce Development establishes an annual budget for Council functions, activities, and staff. The Council is funded by administrative moneys from several federal programs delineated in federal law.

The Council serves as the State's workforce investment board and is responsible for statewide planning and coordination of federal workforce development programs and associated federal block grant moneys received.

# TRANSITIONAL JOBS PROGRAM

This line item was created by H.B. 13-1004, the Colorado Careers Act of 2013. Pursuant to section 26-2-1101, C.R.S. (2021), the Department is operating a transitional jobs program, ReHire Colorado, to provide low-income unemployed and underemployed adults with opportunities to address barriers to work. The General Fund appropriation supports the Department's administrative costs, including personal services (2.0 FTE), and operating expenses including wage reimbursements and program moneys awarded to local entities. H.B. 18-1116 extended the ReHire program through June 30, 2024 with the exception that no new transitional jobs shall be offered after December 31, 2023.

#### EMPLOYMENT OPPORTUNITIES WITH WAGES PROGRAM

This line was created in FY 2021-22, appropriating federal Temporary Assistance for Needy Families (TANF) funds to provide subsidized employment and training opportunities for Colorado Works recipients. The appropriation provides wage subsidies for participants, supportive services, employer engagement, and administrative costs for local program operators. Additionally, a program evaluation is funded through the appropriation. The program will operate from FY 2021-22 through FY 2023-24.

# CHILD SUPPORT SERVICES EMPLOYMENT PROGRAM

This line was created in FY 2018-19, appropriating federal Temporary Assistance for Needy Families (TANF) funds to provide employment and supportive services to eligible non-custodial parents struggling to pay child support. A total of \$1,819,966 is appropriated to this program annually through June 30, 2023. The funds will pay for the Department's administrative costs (including 1.0 FTE), an evaluation, and program operation via moneys awarded to contracted service providers across the State. To deliver services, the Department will contract with organizations across the State to provide a menu of employment and supportive services, including classes/workshops tailored to strengthening family relationships and stability. The program will operate from FY 2019-20 through FY 2022-23.

# (C) SPECIAL PURPOSE WELFARE PROGRAMS

#### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM

The Low Income Home Energy Assistance Program (LIHEAP), referenced as LEAP in Colorado, is a federally funded program that provides heating assistance, furnace repair and replacement, and weatherization assistance to households at or below 60% of the State Median Income (SMI). This line item provides funding for the benefit payments and program administration (5.2 FTE).

Most of the funding derives from the federal LEAP block grant. This block grant is considered a federal custodial funding source and related amounts are shown in the Long Bill for informational purposes only. Energy Outreach Colorado (EOC), a non-profit organization, also provides funding to the LEAP program from unclaimed utility bill overpayments and unclaimed utility security deposits. Finally, Severance Tax funds have been used to support the LEAP program.

# SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM ADMINISTRATION

This line item was created in FY 2016-17 for the Supplemental Nutrition Assistance Program (SNAP) spending authority for State personal services (15.0 FTE) and operating expenses associated with the State's supervision and oversight of the county-administered SNAP.

This line item captures all appropriations for the programmatic functions exclusively associated with the administration of the SNAP in Colorado. It also includes funds appropriated for SNAP Outreach.

# SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM STATE STAFF TRAINING

This line item was created in FY 2016-17 for State personnel to receive training on methodologies to improve understanding of the rules, regulations, and options available in the administration of the Supplemental Nutrition Assistance Program (SNAP).

# FOOD STAMPS JOB SEARCH UNITS - PROGRAM COSTS

Food Stamps Job Search (FSJ) Units, nationally known as the Supplemental Nutrition Assistance Program (SNAP) Job Search, and referred to as Employment First in Colorado, provide or facilitate employment and training services for all food assistance applicants and recipients determined to be able-bodied, ready to work, and not eligible for services

under Colorado Works. The Employment First Program has operated in Colorado since 1983, when it was initiated as a pilot project under a contract with the U.S. Department of Agriculture (USDA). The current public law authorizing the program is the Agriculture Act of 2018, as amended through Public Law 115-334.

This line item provides funding for employment, job search, and training services to food assistance recipients in addition to providing funding to support the personal services and operating expenses of 6.2 FTE who administer the program and provide guidance, monitoring, and oversight.

The appropriation is comprised of several funding sources. Federal funds are Supplemental Nutrition Assistance Program (SNAP) moneys. Some program expenditures earn a fifty percent federal match based on State administrative activities while expenditures in other areas can earn one hundred percent federal money. Local funds include a twenty percent share for eligible activities. HB 21-1270 appropriated funding to expand the program to serve more Coloradans in FY 2021-22.

# FOOD STAMP JOB SEARCH UNITS - SUPPORTIVE SERVICES

This line item includes funding for supportive services that are provided to eligible Employment First participants to reimburse them for expenditures incurred while participating in the program. Such services may include transportation assistance, clothing, grooming allowances, and child care services.

# FOOD DISTRIBUTION PROGRAM

The Colorado Food Distribution Program (FDP) administers the logistics of the United States Department of Agriculture (USDA) Food Programs and is responsible for getting USDA foods from the ranchers and farmers of America to school children, needy families, and the homeless. The program's authority is mandated in the U.S. Department of Agriculture, Food and Nutrition Services 7 CFR Part 210 - 251, and also in 26-1-121 C.R.S. (2021). Currently, the Food Distribution Program provides foods through the National School Lunch Program (NSLP), Child and Adult Care Food Program (CACFP), Summer Food Service Program (SFSP), Commodity Supplemental Food Program (CSFP), The Emergency Food Assistance Program (TEFAP), and Food Assistance for Disaster Situations (Disaster Assistance).

The appropriation for this line item provides funding to support the administrative expenses associated with Food Distribution Programs. There are 6.5 FTE appropriated to provide State oversight of the various food distribution programs. In FY 2021-22, the General Assembly approved funds to refurbish a State-owned warehouse to operate the

National School Lunch Program Commodities Food Program internally, in lieu of a third-party contract, beginning in FY 2022-23.

#### INCOME TAX OFFSET

The Income Tax Offset line item is mandated by Section 26-2-133, C.R.S. (2019) and directs the Department of Human Services to submit information regarding individuals who are obligated to the State for overpayments of assistance payments. This appropriation covers the operational costs associated with matching Food Assistance, Temporary Assistance for Needy Families (TANF), and Adult Financial program lists of overpaid recipients with Department of Revenue data in order to intercept corresponding income tax refunds.

# **ELECTRONIC BENEFITS TRANSFER SERVICE**

In 1995, H.B. 95-1144 authorized the Department to implement an Electronic Benefits Transfer System (EBTS) to deliver Supplemental Nutritional Assistance Program (SNAP), Colorado Works, Old Age Pension, Aid to the Needy Disabled, Aid to the Blind, Home Care Allowance, Child Welfare, Child Care, and Low-Income Energy Assistance benefits via a debit-type card to access cash benefits through an Automated Teller Machine (ATM) or SNAP and cash benefits through Point-of-Sale terminals at food retailers. This line item provides funding for the 7.0 FTE that administer the EBTS and expenses associated with contracting out operation of the service. The services administered by the Department include contract monitoring and compliance; transmission of payment files; coordination with federal, state, and local government agencies, retailers, bankers, clients and providers; and State and local training.

# REFUGEE ASSISTANCE

The Colorado Refugee Services Program (CRSP) provides short-term, intensive assistance to legally admitted refugees in order to help refugees become self-sufficient and adjust to living in the United States. Pursuant to federal Title 8, U.S. Code, Chapter 14, Subchapter I, Sections 1612 and 1613 and 26-2-703, 17.7, C.R.S. (2021) refugees are qualified aliens exempt from the five-year bar on the receipt of federally funded benefits and services. Consequently, refugees are eligible for Temporary Assistance for Needy Families (TANF), Food Assistance, Medicaid, and other federally funded programs based on their immigration status. These services provided through the CRSP are funded by federal funds from the Office of Refugee Resettlement and the TANF Block Grant.

The TANF component of this line item provides for refugee social services (cash assistance benefits for TANF-eligible refugees are provided through counties) analogous to the refugee social services funded by the Office of Refugee

Resettlement. The appropriation for this line item also includes funding for the State administrative staff (10.0 FTE) who oversee the program.

# SYSTEMATIC ALIEN VERIFICATION FOR ELIGIBILITY

This line item was added by a supplemental action in FY 2003-04 (H.B. 04-1322) to separate the funding and staffing (1.0 FTE) for the Systematic Alien Verification for Eligibility (SAVE) program from the Refugee Assistance Program.

The SAVE line item appropriation supports the State's interface with the federal Systematic Alien Verification for Eligibility database, which serves all programs for which citizenship or legal residence is a requirement. Both the Departments of Human Services and Health Care Policy and Financing verify the names and legal status of applicants for public assistance through use of the federal SAVE system.

# (D) CHILD SUPPORT ENFORCEMENT

# **AUTOMATED CHILD SUPPORT ENFORCEMENT SYSTEM**

The Child Support Enforcement (CSE) Program is mandated by Title IV-D of the Social Security Act of 1975 and 26-13-101, C.R.S. (2021) et seq. The Automated Child Support Enforcement System (ACSES) is the automated system that supports the CSE Program in Colorado. This line item includes funding for the ACSES as well as the Family Support Registry (FSR) and the State Directory of New Hires (SDNH) to implement the CSE Program statewide in 64 county CSE units. The FSR is the entity responsible for the receipt and disbursement of child support in the State. Annually, the FSR processes more than \$488 million in child support obligations. As part of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), all employers in the State are required to submit new hire reports to the State Directory of New Hires (SDNH) where they are collected and transmitted to the National Directory of New Hires. The data is used to initiate the withholding of employee wages to meet child support obligations. Typically, more than 2.1 million new hire reports are processed by the SDNH each year.

This line item appropriates expenditures for 34.0 FTE

# CHILD SUPPORT ENFORCEMENT

The Child Support Enforcement (CSE) program is mandated by Title IV-D of the Social Security Act of 1975, which provides federal funding through grants for state-run child support enforcement programs. Additionally, C.R.S. 26-13-101, C.R.S.

(2021) et seq. enacted the "Colorado Child Support Enforcement Act" to enforce the support obligations owed by obligors.

The line item provides funding for the staff and operating expenses for the Child Support Enforcement Division (24.5 FTE). The Division provides operational oversight, training, policy development, and monitoring to the 64 county child support units. It also operates several centralized enforcement remedies and a unit that processes cases where one of the parties lives in a different state or country.

# (E) DISABILITY DETERMINATION SERVICES

# **PROGRAM COSTS**

Disability Determination Services (DDS) is a 100% federally funded program (Titles II and XVI of the Social Security Act) that provides the Social Security Administration (SSA) with medical disability decisions for Colorado residents who apply for benefits under the Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI) programs. Utilizing standards provided by the SSA, State Disability Determination Specialists and Independent Medical Consultants located in the DDS office in Aurora provide adjudication services for initial, reconsideration and continuing disability review (CDR) cases for SSDI and SSI claimants for the federal government. DDS is the agency sanctioned by the SSA to determine medical eligibility for these benefits. The SSDI is an insurance program providing benefits to disabled workers. The purpose of SSI is to ensure a minimum level of income to people who are aged, blind or disabled, and who have limited income and resources. There is no minimum age requirement in establishing eligibility on the basis of blindness or disability for the SSI program. This line item funds the administrative costs including personal services for 121.7 FTE, and operating expenses associated with determining medical eligibility for disability benefits. Actual benefit payments are issued by the SSA.

# (F) INDIRECT COST ASSESSMENT

Indirect Cost Assessment provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cashfunded (including reappropriated funds) or federal-funded program.



# **Department of Human Services Line Item Descriptions**

Office of Behavioral Health

FY 2022-23 Budget Request

**NOVEMBER 1, 2021** 



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- (8) OFFICE OF BEHAVIORAL HEALTH
- (A) COMMUNITY BEHAVIORAL HEALTH ADMINISTRATION

#### PERSONAL SERVICES

The Personal Services line item provides funding for salaries, benefits, professional and temporary services for the direct and indirect administration of the Office of Behavioral Health (OBH) Community Programs. OBH Community Programs administer mental health community programs, substance use and treatment programs and the integrated behavioral health services programs. For the purposes of federal grant budgeting, oversight and administration activities are categorized as "direct" program costs." S.B. 11-209 (FY 2011-12 Long Bill) consolidated the Alcohol and Drug Abuse personal services line item and Mental Health personal services line item into one line item.

#### **OPERATING EXPENSES**

The Operating Expenses line item provides the primary source of funding for the operating expenditures to support the administration of the community behavioral health programs. The appropriation funds general operating, travel, capital outlay and transfer expenditures. Operating expenditures include office supplies, communication services, information technology hardware and software, and registration fees (training). S.B. 11-209 (FY 2011-12 Long Bill) consolidated the Alcohol and Drug Abuse operating expenses and Mental Health operating expenses into one line item.

#### FEDERAL PROGRAMS AND GRANTS

The Office of Behavioral Health applies for a variety of federal discretionary grants to enhance behavioral health services in Colorado. The Federal Programs and Grants line item includes a historical limited appropriation of \$21,000 that may be eliminated. The Division federal grant funds for special purpose demonstration projects and research program grants funded by the federal government. The majority of federal funding from discretionary grants/sub-contracts awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA) are non-appropriated federal funds administered by the Executive branch of government.

# (B) COMMUNITY-BASED MENTAL HEALTH SERVICES

# MENTAL HEALTH COMMUNITY PROGRAMS

The Mental Health Community Programs line item provides funding for the services delivered in the public mental health system. Colorado's public mental health system comprises seventeen Community Mental Health Centers (CMHCs), community mental health clinics, and other community partners contracted by the Office of Behavioral Health. The contracts that the Department enters into with the CMHCs require the provision of emergency, inpatient, partial hospitalization, outpatient, along with consultative and educational services across age categories. As part of this service array, the CMHCs provide a variety of services, which are primarily outpatient services to uninsured/underinsured individuals in each of their designated geographic service areas. As part of the State's Behavioral Health "safety net" Community Mental Health Centers also utilize funding from other State funding sources, such as Medicaid payments, made on behalf of individuals enrolled in Regional Accountable Entities (RAEs).

This line item funds vital mental health center services that are not covered by Medicaid, private insurance, Vocational Rehabilitation or other funding sources that includes employment related services and costs, housing supports, treatment facility infrastructure, workforce development (staff training, recruitment/retention initiatives), wrap around services/costs, peer services and other needed services. This line item also includes costs that are funded by the SAMHSA Mental Health Services Grant and the SAMHSA Homeless PATH Grant. Services include Behavioral Health Planning Council expenses, mental health advocacy contracts, mental health engagement and outreach services for the homeless or at risk of homelessness population and other community mental health initiatives and services. This line item supports funding for a school-based mental health specialist in Park County and in sixteen community mental health centers along with psychiatric services for children with serious emotional disturbance. The monies build a network of professionals with knowledge and capacity to support school districts in identifying and providing services for school based mental health programming. This year S.B. 21-137 added the following new Mental Health Community programs: mental health services to school-aged children and parents by Community Mental Health Centers, school-based clinicians and prevention specialists; additionally S.B. 21-137 provided funding for Community Mental Health Centers for unanticipated services and expenses related to COVID-19, including capacity building and strategies to address the Direct Care Workforce for the purpose of increasing access to meet the growing demand for services.

S.B. 17-254 (FY 2017-18 Long Bill) consolidated the Medications for Indigent Mentally Ill Clients and School-Based Mental Health Services line item into the existing Services for Indigent Mentally Ill Clients line item and named it Mental Health Community Programs.

# ASSERTIVE COMMUNITY TREATMENT PROGRAMS AND OTHER ALTERNATIVES TO THE MENTAL HEALTH INSTITUTES

The Assertive Community Treatment Programs and Other Alternatives to the Mental Health Institutes line item supports intensive outpatient case management services for severely mental ill adults. S.B. 17-254 (FY 2017-18 Long Bill) consolidated the Alternatives to Inpatient Hospitalization at a Mental Health Institute and Assertive Community Treatment Programs line items along with inpatient facility funding from the Services for Indigent Mentally Ill Clients line item into this new line and expanded the name. Assertive Community Treatment (ACT) is an evidence-based service delivery model for providing comprehensive community-based treatment to adults with serious and persistent mental illness through CMHCs. The ACT model includes a community based multidisciplinary team that conducts outreach and engagement with clients with risk factors such as criminal justice involvement, homelessness and serious mental illness. These teams provide the treatment, rehabilitation, and support services that adults with serious mental illnesses need to live successfully in the community.

This line item also supports alternative placements for people who would otherwise require hospitalization at one of the State's two mental health institutes. Services include, but are not limited to inpatient hospitalization capacity, Acute Treatment Unit capacity, residential treatment capacity, medication, medication administration, intensive therapy/case management, mentoring services, and other services to improve the patient's level of functioning to enhance his or her success in the community.

Funding covers services for clients who are not eligible for Medicaid and services that are not covered by Medicaid for Medicaid-eligible clients (e.g., residential room and board expenses).

# MENTAL HEALTH SERVICES FOR JUVENILE AND ADULT OFFENDERS

The Mental Health Services for Juvenile and Adult Offenders line item was originally funded with tobacco litigation settlement moneys and was created by S.B. 07-097/H.B. 07-1359 to provide funding for Centers to provide co-responder, case management services, wrap-around services, medications, and treatment services for juvenile and adult offenders

with mental health and substance use disorders who are involved in the criminal justice system. H.B. 16-1408 refinanced the Mental Health Services for Juvenile and Adult Offenders with Marijuana Tax Cash Fund dollars. In FY 2017-18 the appropriations were increased to expand services Statewide to all CMHC's.

#### CHILDREN AND YOUTH MENTAL HEALTH TREATMENT ACT

The Mental Health Treatment Services for Youth line item was established through H.B. 99-1116, the Child and Youth Mental Health Treatment Act (CYMHTA), which allows families to access community residential, intensive community based services that are an alternative to residential treatment, and post residential transitional treatment services for their child without requiring a dependency and neglect action, when there is no child abuse or neglect. H.B. 04-1421 allocated tobacco settlement money for the implementation of the Child Mental Health Treatment Act. Special Bill H.B. 16-1408 refinanced the program from tobacco litigation settlement money to Marijuana Tax Cash Fund dollars. Finally, H.B. 18-1094 increased appropriations and expanded eligibility to individuals up to 21 years of age, created an advisory board, improved screening for program eligibility, and broadened the use of family advocacy services in assisting families with selecting services along with appealing and navigating the denial of services.

Children may access residential treatment through a Residential Child Care Facility (RCCF) or Psychiatric Residential Treatment Facility (PRTF). The funding covers the cost of treatment that is not paid by private insurance, Medicaid, Supplemental Security Income (SSI) benefits, and a sliding scale parental fee based on the Child Support Guidelines. For community based treatment services, costs are covered by the Act and a parental fee not to exceed 50% of the residential parental fee.

#### FAMILY FIRST PREVENTION SERVICES ACT

The Family First Prevention Services Act line item was established through S.B. 20-162, Changes Related To Federal Family First Policy, which requires an independent assessment from a qualified individual within 30 days for any child placed in a Qualified Residential Treatment Program (QRTP). The Department's Office of Behavioral Health (OBH) has received federal approval to procure and oversee the assessment process for the Office of Children, Youth, and Families as it relates to assessment requirements pursuant to the Family First. To meet federal mandates, a state-wide network of qualified individuals must be developed and maintained who are able to complete all assessments within 14 days of a referral, which will include a face-to-face meeting with the child or youth, obtaining information from the family,

school(s), child welfare agencies, Division of Youth Services, guardian ad litem, as well as other important people in the child's life, and meet with key stakeholders to develop consensus on level of need. The qualified individual will then complete a report and send it to OBH for final quality assurance review. Once this is completed, the qualified individual will submit the report to the court official who makes the final determination of QRTP placement.

#### BEHAVIORAL HEALTH VOUCHERS

Behavioral Health Vouchers were established through S.B. 21-137 and will award a contract to a non-profit licensed behavioral health-care provider that has completed training on cultural competencies specific to Colorado agriculture and rural community lifestyle to provide direct behavioral health-care services to farmers, ranchers, farm and their families and underserved populations in rural and agricultural communities. At least sixty percent of the money received pursuant to the contract must be used for direct behavioral health-care services. In addition to providing health-care services, the provider will develop training materials and train behavioral health-care providers on cultural competencies specific to the Colorado agriculture and rural community lifestyle.

# (C) SUBSTANCE USE TREATMENT AND PREVENTION SERVICES

# TREATMENT AND DETOXIFICATION PROGRAMS

S.B. 17-254 (FY 2017-18 Long Bill) consolidated the Case Management for clients that may have frequent admissions to withdrawal management services known as the Detoxification Clients line item and was combined into this line item named Treatment and Detoxification Programs. Treatment and detoxification are two different levels of care that are funded separately and have separate and distinct contract admission requirements even though appropriated in a single line item. The Office of Behavioral Health (OBH) provides detoxification and treatment services utilizing one contract for each sub-state planning regions known as Managed Service Organizations.

The OBH contracts with four Managed Service Organizations (MSO) that subcontract with local community providers to provide non-hospital withdrawal management services necessary to protect the client and public health and safety until the blood level of the intoxicating substance(s) is zero. Withdrawal Management/shelter services serve a dual purpose by protecting individual and public health and safety, and is often an entry point for treatment.

The intent of the OBH treatment contracts is to purchase coordinated and comprehensive services for specific low-income populations of highest priority to the State and federal governments, as well as for clients outside the specific priority populations. The required basic treatment services in the Treatment Contracts are withdrawal management, outpatient opioid replacement treatment, individual, group and family outpatient therapy, intensive outpatient therapy, transitional residential treatment, therapeutic community and intensive residential treatment.

This line is funded with federal funds from the Substance Abuse Prevention and Treatment Block Grant and with cash funds from the Persistent Drunk Driver Cash Fund, the Marijuana Tax Cash Fund and the Adolescent Substance Abuse Prevention and Treatment Fund.

# INCREASING ACCESS TO EFFECTIVE SUBSTANCE USE DISORDER SERVICES (S.B. 16-202)

The passage of S.B. 16-202 provided the funding for substance use disorder services and S.B. 17-254 (FY 2017-18 Long Bill) created this line item to differentiate it from the appropriation that is distributed to managed service organizations on July 1 each fiscal year (per statutory direction) rather than on a cost reimbursement basis.

This bill requires each of the State's designated regional Managed Service Organizations (MSOs) provide treatment services for substance use disorders. It also requires MSOs to assess the sufficiency of substance use disorder services in its geographic region, and to prepare a community action plan to address the most critical service gaps. The act provides for an annual appropriation from the Marijuana Tax Cash Fund (MTCF) to support the implementation of these plans and this line item serves that purpose.

In FY 2021-22, S.B. 21-137 increased this line item by \$10,000,000.

# PREVENTION PROGRAMS

The Prevention Programs line item provides young people, families and communities with the resources and skills to increase protective factors and decrease risk factors linked to substance abuse, and prevent the illegal and inappropriate use of alcohol, tobacco and other drugs. Types of services include mentoring, tutoring, life skills training, parenting training, creative arts, education/resource centers, DUI prevention programs and employee assistance programs.

# COMMUNITY PREVENTION AND TREATMENT PROGRAMS

The Community Prevention and Treatment Programs line item was established through S.B. 07-097 and H.B. 07-1359, which reallocated tobacco litigation settlement funds to the Department to purchase additional community prevention and treatment services. The law requires 25% of the funds to be targeted for prevention services and 75% for treatment services. H.B. 16-1408 refinanced the program from tobacco litigation settlement money to Marijuana Tax Cash Fund dollars. S.B. 17-254 (FY 2017-18 Long Bill) consolidated federal and state funds that support prevention and treatment services, including: Persistent Drunk Driver Programs; Law Enforcement Assistance Fund Contracts, Federal Grants, Balance of Substance Abuse Block Grant Programs, and Rural Substance Abuse Prevention and Treatment.

Persistent Drunk Driver (PDD) Programs are funded by the Persistent Drunk Driver Cash Fund (created by H.B. 98-1334) consisting of fees assessed against convicted drunk drivers. The fund is managed by representatives of the Departments of Revenue, Transportation and Human Services. Funding priorities as defined by statute are designed to support programs intended to deter persistent drunk driving, and to educate the public, with emphasis on young drivers.

The Colorado General Assembly created the Law Enforcement Assistance Fund (LEAF) [(Section 43-4-402 (2), C.R.S. (2020)] in 1982 to promote the prevention of drunk driving. The fund collects a surcharge on drunk and drugged driving convictions to help pay for enforcement, laboratory charges and prevention programs. The LEAF funding supports local efforts to prevent persons from driving when using alcohol or other drugs. The statutes require the Department to use these funds for a statewide program of public education on driving under the influence, including teacher training and the dissemination of educational materials.

The Balance of Substance Abuse Block Grant Programs includes federal Substance Abuse Prevention and Treatment Block Grant allocations. The OBH has the flexibility to allocate funds in this line item to the Community Programs Treatment Contracts and the Prevention Contracts Lines. The Block Grant requires funds to be used for substance use prevention services and alcohol and drug abuse programs. The appropriation is combined with funds appropriated for treatment and prevention contracts to provide services to meet the needs of specific populations. This flexibility is essential in meeting the five earmarked requirements of each Block Grant award (administration, drug/alcohol treatment, prevention, women's services, and HIV early intervention).

H.B. 09-1119 "Concerning Creation of a Program to Assist Entities Providing Programs to Address Substance Abuse Problems in Rural Areas of Colorado" established the Rural Alcohol and Substance Abuse Prevention and Treatment

Program that consists of the Rural Youth Alcohol and Substance Abuse Prevention and Treatment Project and the Rural Detoxification Project. The latter provides treatment services to persons in rural areas that may be struggling with alcohol use or other substance use disorders. Program funding is from penalty surcharges on convictions of driving under the influence (DUI), driving while ability impaired (DWAI), habitual user of controlled substances, and underage drinking and driving (UDD) and other related offenses.

#### OFFENDER SERVICES

Offender Services are intended to reduce recidivism among adult offenders, age eighteen years or older, who have been unsuccessful in community treatment for drug and alcohol abuse and continue to commit offenses. Short-Term Intensive Residential Remediation and Treatment (STIRRT) includes two weeks of intensive residential treatment followed up by nine months of outpatient continuing care. The evidence-based practice is often implemented as a diversion to incarceration.

S.B. 17-254 (FY 2017-18 Long Bill) created this consolidated line item that includes funding from the former Treatment and Detoxification Contracts Long Bill line item and the STIRRT Long Bill line item that is used to provide substance use services for offenders.

#### HIGH RISK PREGNANT WOMEN PROGRAM

The High Risk Pregnant Women Program line item was created through S.B. 91-056 to create a health care and treatment program for women and their children who are at risk of poor birth outcomes due to maternal substance use disorders. The program is funded by Medicaid and administered by the OBH. The High Risk Pregnant Women Program line item is an entitlement program funded by Medicaid to serve pregnant women in need of substance use disorder treatment. This program was developed to improve health outcomes for infants, provide access to treatment for pregnant women during and after the pregnancy, promote a safe environment for the newborn and other children, and to support the mother, infant, and other family members in recovery. Low-income pregnant women, regardless of Medicaid eligibility, may receive these services from designated treatment providers throughout the State.

#### HOUSING ASSISTANCE

S.B. 21-137 will fund the Housing Assistance Program. This program will provide temporary financial housing assistance to individuals with a substance use disorder (SUD) who have no supportive housing options when the individual is: transitioning out of a residential treatment setting and into recovery or receiving treatment for an individual's SUD.

# RECOVERY RESIDENCE CERTIFICATION

S.B. 21-137 will be used to assist Recovery Residences obtain the required certification to operate in Colorado and receive referrals from health-care providers or health-care facilities for individuals in need of recovery support services.

# (D) INTEGRATED BEHAVIORAL HEALTH SERVICES

# BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM SERVICES

This line funds an array of services that provide the foundation for the statewide behavioral health crisis response system pursuant to 27-60-103 C.R.S. (2020). The services are available to individuals regardless of their ability to pay. S.B. 13-266 "Concerning a Request for Proposals to Create a Coordinated Behavioral Health Crisis Response System for Communities throughout the State" directed the Department to issue an RFP for crisis services. The specific components of the crisis response system include: walk-in services and crisis stabilization units; mobile crisis services and units that have the ability to initiate a response in a timely fashion; and residential and respite crisis services.

# BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM SECURE TRANSPORTATION PILOT PROGRAM

On June 9, 2016, the Governor directed the Department to create the Mental Health Hold Task Force following the veto of S.B. 16-169, citing concerns about the due process rights of individuals experiencing mental health crisis. The Task Force was directed to make recommendations to improve Colorado's mental health hold practices in coordination with the Crisis Response System. Subsequently, Senate Bill 17-207 was passed and eliminated, effective May 1, 2018, the use of the criminal justice system to hold individuals who are experiencing a mental health crisis, and allows a person experiencing a mental health crisis to be taken to an emergency medical services facility if a facility that has

been approved by the Department of Human Services (DHS) is not available. This act made a number of changes regarding the State's coordinated Behavioral Health Crisis Response System including the following requirements:

- all crisis system walk-in centers, acute treatment units, and crisis stabilization units must be able to adequately care for individuals brought to the facility through the emergency mental health hold procedure or a voluntary application for mental health services as authorized by the act;
- Crisis System mobile response units must be available to respond to a behavioral health crisis anywhere in the state within two hours; and
- Crisis System contractors are responsible for community engagement, coordination, and system navigation for key partners including criminal justice agencies, emergency departments, hospitals, primary care facilities, and walk-in centers.

The act also requires the Department to "explore solutions for addressing secure transportation of individuals placed on a seventy-two-hour treatment and evaluation hold pursuant to article 65 of this title 27" [Section 27-60-104 (7), C.R.S.]. There is no statutory specificity about the number of pilots, or how long the pilots should continue.

As a companion to SB 17-207 appropriations, in FY 2017-18 the General Assembly approved budget amendment BA-06.

In FY 2019-20's Joint Budget Committee Figures Setting, the Committee approved moving the appropriations from the Behavioral Health Crisis Response System Services line to this new line item.

The pilot study consists of two rural pilot programs administered by San Luis Valley Community Mental Health Center in the San Luis Valley, and includes the counties of Saguache, Mineral, Rio Grande, Alamosa, Conejos and Costilla Counties. The second pilot is provided by Midwestern Colorado Mental Health (The Center) and includes the counties of Delta, Gunnison, Montrose, San Miguel, Ouray and Hinsdale. Additionally, this line item includes appropriations for evaluation services.

The purpose of the pilot is to assess the feasibility of alternative transportation options for individuals on mental health holds and quantify the ability of secure transportation to offset the use of law enforcement and ambulances. In addition, the pilot study will document the experience of individuals transported, the needs of law enforcement including the volume of law enforcement transports, alternatives to law enforcement transports, and statutory or regulatory areas that could be changed to improve transportation in a crisis situation.

In FY 2022-23 the Department is requesting a technical decision item for the pilot program subject to approval by the General Assembly.

# BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM TELEPHONE HOTLINES

The Behavioral Health Crisis Response System Telephone Hotlines line item funds a twenty-four hour telephone crisis service hotline for the Statewide behavioral health crisis response system pursuant to 27-60-103 (1)(b)(I) C.R.S. (2020). The telephone hotline provides a contact point where people across the State can dial a single toll free number and be connected to locally available crisis services. The line is staffed by mental health professionals that provide immediate support and connections to further resources.

#### BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM PUBLIC INFORMATION CAMPAIGN

The Behavioral Health Crisis Response System Public Information Campaign line item funds a public information campaign to increase awareness of the statewide behavioral health crisis response system.

S.B. 13-266 appropriated \$600,000 to conduct marketing to increase awareness of crisis response services and the telephone hotline. The marketing funds were appropriated as part of the Crisis Response System -Walk-in, Stabilization, Mobile, Residential and Respite Services line item. H.B. 14-1336 (FY 2014-15 Long Bill) separated the Crisis Marketing line item from the Crisis Response System -Walk-in, Stabilization, Mobile, Residential and Respite Services line item to create a line item specifically for crisis response system marketing functions.

# **COMMUNITY TRANSITION SERVICES**

The Community Transition Services line funds an array of intensive behavioral health and wrap-around services that support individuals who are either transitioning from the Mental Health Institutes back to the community or require more intensive services in the community to help avoid institutional placement. In FY 2013-14, the Department submitted Decision Item R-3B "Strengthen Behavioral Health - Improved Community Capacity" to address the state's ability to provide intensive behavioral health services. S.B. 12-230 (FY 2013-14 Long Bill) created a new line item titled Community Transition Services and appropriated \$4,444,176 to fund: Assertive Community Treatment (ACT); Alternative Living Residences (ALR); Intensive Case Management; and other Wraparound Services.

Prior to implementing the residential services, the Department researched national best practices and determined that a client and community centered approach would be more effective to provide a client-centered continuum of services that includes residential services, intensive case/transition management, community linkages, and wraparound services. S.B. 15-149 (FY 2014-15 Supplemental Bill) reduced the FY 2014-15 appropriations to \$7,722,398 to account for the delay in services due to the change in approach.

In FY 2018-19 Senate Bill 18-270 established an additional component to this line item. The bill established the community transition specialist program which coordinates referrals of high-risk individuals to transition specialists by certain behavioral health facilities and programs. High-risk individuals are under an emergency or involuntary hold, have a significant mental health or substance use disorder, and are not in consistent behavioral health treatment. Transition specialists provide services related to housing, program placement, access to behavioral health treatment or benefits, advocacy, and other supportive services. The department is required to adopt rules to implement the program. The bill requires the office to collect data and make recommendations to the department, and the department is required to include program information in the Department's annual SMART act report. In FY 2018-19 \$1,588,250 was appropriated from the General Fund to the Department of Human Services for use by the Office of Behavioral Health to implement the Senate Bill 18-270 Community Transition Specialist Program.

# **CRIMINAL JUSTICE DIVERSION PROGRAMS**

The Criminal Justice Diversion Programs line item was funded through S.B. 17-254 (FY 2017-18 Long Bill). This line item supports Department personnel and operating costs along with contractual dollars to support multiple local partnerships between law enforcement and behavioral health service providers to expand pre-booking criminal justice diversion, increase access to co-responder models, and implement harm reduction training for law enforcement agencies. Additionally, this line item provides funding for an evaluation contractor to measure the effectiveness of the co-responder pilot programs.

#### JAIL-BASED BEHAVIORAL HEALTH SERVICES

The Jail-based Behavioral Health Services line funds screening and treatment of substance abuse or co-occurring disorders of adult offenders who are: on diversion; on probation; on parole; in community corrections; or in jail. Sheriff

Departments have partnered with community providers to provide services within the jail, and have the capacity to provide free or low cost services in the community to inmates upon release. Most programs have at a minimum a clinician position to screen, assess and treat clients in the jail and a case manager position dedicated to transitional care and seamless re-entry in treatment services in the community. Additional services may include telehealth capacity, medication purchasing costs and support with health information exchange. This line item received additional funding for "Jail-Based Behavioral Health" through SB18-250 and "Actions Related to Competency to Proceed" provided through SB 19-223. In FY 2021-22, SB 21-137 provided \$5,000,000 to fund additional jail-based behavioral health services. HB 21-1211 modified how jail-based behavioral health program funding is used including additional staffing, training, robust behavioral health services, supports and facility changes. This bill also required county jails

#### CIRCLE PROGRAM AND OTHER RURAL TREATMENT PROGRAMS FOR PEOPLE WITH CO-OCCURRING DISORDERS

The Circle Program and Other Rural Treatment Programs for People With Co-occurring Disorders line item provides funding for the Circle program, an intensive treatment program, located in a private facility in Pueblo that serves adults who suffer from co-occurring disorders (mental illness and substance abuse). This separate line item was established during the FY 2015-16 figure setting process. The Joint Budget Committee funded the FY 2015-16 decision item R-13 titled "Circle Program Business Plan Analysis" that proposed to conduct a business model analysis for the Circle Program. The FY 2015-16 Long Bill (S.B. 15-234) consolidated the funding for the Circle program into a new line in order to facilitate the Department's plan to evaluate the potential for the Circle program to operate as an autonomous program separate from CMHIP. The existing funding for the privatized Circle Program was transferred from the CMHIP Personal Services, Operating Expenses and Pharmaceutical line items. Additionally, the centrally appropriated costs that support the Circle Program were transferred to the Circle program line item from the corresponding line items within the Executive Director's Office section of the Long Bill. Additionally, this line funds a full continuum of co-occurring behavioral health services in southern Colorado and the Arkansas Valley for the adolescent and adult indigent population. S.B. 15-234 (FY 2015-16 Long Bill) appropriated an additional \$500,000 in funding for a total of \$1,071,466 in FY 2019-20.

This line item also includes additional \$3,000,000 in funding provided by the General Assembly in FY 2018-19 and \$2,000,000 in FY 2020-21 transferred from the Judicial Department, Probation and Related Services, from the Correctional Treatment Cash Fund. The Department is contracting with the MSO for the Western Slope (West Slope Casa, LLC) for the renovation of a sixteen-bed residential substance use facility in Clifton (east of Grand Junction). Additionally, the Department is contracting for the development of a sixteen-bed residential substance use facility in Larimer County with Signal Behavioral Health Network.

As part of the General Assembly's FY 2020-21 COVID-19 budget balancing actions, it reduced the General Fund portion of this line by \$3,090,842. Additionally, in FY 2020-21 the General Assembly appropriated \$2,500,000 additional Marijuana Tax Cash Fund to this line item.

#### MEDICATION CONSISTENCY AND HEALTH INFORMATION EXCHANGE

The Medication Consistency and Health Information Exchange is a line item requested by the Department related to the implementation of S.B. 17-019. The bill implements recommendations from the task force concerning the treatment of persons with mental health disorders in the criminal and juvenile justice systems and the medication consistency work group of the Behavioral Health Transformation Council to promote increased medication consistency for persons with mental health disorders in the criminal and juvenile justice systems. This pilot includes working with the State's Health Information Exchanges (HIE) to allow jail clinical staff access historical medical information in the longitudinal health records for inmates as they are booked into jail in an effort to improve effective access to medication history that will positively impact health outcomes by reducing unnecessary changes in medications and reducing likelihood of missed medications by relying solely on patient report of medications and dosages. Also, the HIE access allows for "real-time" access to improve workflow efficiencies in the jail setting allowing staff to save time of calling and faxing health information from prior treatment providers, enabling jails to provide the appropriate medications and care. Additionally, this program works with Health Care Policy and Financing to develop, maintain and promote a standardized psychotropic medication formulary that serves to provide a statewide approach to ensure individuals have the standardized protocols and medications to support their recovery to ensure a safe and successful return into the community. This formulary also helps in maintaining consistency across providers, which saves costs related to urgent and emergency mental health needs, crisis care, transportation and staff time. Lastly, the program encourages participation in a cooperative purchasing agreement that qualifies jails to receive medications at a reduced cost as they buy in bulk.

# BH AND SUD TREATMENT FOR CHILDREN, YOUTH AND THEIR FAMILIES

S.B. 21-137 requires the state department to implement behavioral health and substance use disorder treatment for children, youth, and their families.

#### MENTAL HEALTH AWARENESS CAMPAIGN

S.B. 21-137 requires a mental health awareness campaign.

## BEHAVIORAL HEALTH-CARE WORKFORCE DEVELOPMENT PROGRAM

The purpose of the program is to increase the behavioral health-care workforce's ability to treat individuals, including youth, with severe behavioral health disorders. (2) to implement the program, the office shall: (a) develop an online training system that allows for accessible statewide training opportunities; (b) develop an online training curriculum for providers in rural and metro areas to increase competencies in mental health and substance use disorders that will support a high-quality, trained, culturally responsive, and diverse behavioral health-care workforce; (c) provide fiscal incentives for lower income individuals to obtain a degree in behavioral health, with funding specifically targeted for rural areas of the state; (d) provide training to the existing behavioral health-care workforce to be certified in federally reimbursed services; and (e) provide capacity-building grants to diversify the safety-net provider workforce and meet the requirements of section 27-63-103.

#### STATEWIDE CARE COORDINATOR INFRASTRUCTURE

According to S.B. 21-137, the state department, in collaboration with the department of health care policy and financing, shall develop a statewide care coordination infrastructure to drive accountability and more effective behavioral health navigation to care that builds upon and collaborates with existing care coordination services. The infrastructure must include a website and mobile application that serves as a centralized gateway for information for patients, providers, and care coordination and that facilitates access and navigation of behavioral health-care services and support. (b) the state department shall convene a working group of geographically and demographically diverse partners and stakeholders, including those with lived and professional experience, to provide feedback and recommendations that inform and guide the development of the statewide care coordination infrastructure developed pursuant to subsection (1)(a) of this section. The state department shall implement, directly or through a contractor, a comprehensive and robust marketing and outreach plan to make coloradans aware of the website and mobile application and associated care coordination services developed pursuant to subsection (1)(a) of this section. On or before July 1, 2022, the statewide care coordination infrastructure developed pursuant to subsection (1)(a) of this section is the responsibility of the behavioral health administration established in section 27-60-203.

#### COUNTY-BASED BEHAVIORAL HEALTH GRANT PROGRAM

The "grant program", provides matching grants to county departments of human or social services for the expansion or improvement of local or regional behavioral health disorder treatment programs. grant recipients may use the money received through the grant program for the following purposes: (a) peer training; (b) augmentation of direct therapy; (c) acute treatment units; (d) inpatient treatment programs; (e) outreach and education; (f) navigation or care coordination; (g) capital investments in behavioral health center infrastructure; (h) services for non-english-speaking individuals; (i) culturally responsive and attuned services; (j) suicide prevention and intervention; (k) crisis response; (1) withdrawal management; (m) workforce development; (n) supporting regional service delivery; or(o) any other purpose the office identifies that will expand or improve local or regional behavioral health disorder treatment programs. Each grant applicant shall demonstrate: (i) a dedication of local funding to support the expansion or improvement of local behavioral health disorder treatment programs, which may be from the county's local share of the federal "american rescue plan act of 2021", pub.l. 117-2, as the act may be subsequently amended, or other local revenue sources; or (ii) a plan for regional collaboration between no fewer than three counties to support the expansion or improvement of regional behavioral health disorder treatment programs. page 12-senate bill 21-137 (b) no single grant awarded may exceed one million dollars, unless a grant is awarded for a regional effort involving two or more counties.

## 9-8-8 NATIONAL SUICIDE PREVENTION LIFELINE NETWORK

On July 16, 2020, the FCC adopted rules to establish a three-digit phone number (988) for Americans in crisis to connect with suicide prevention and mental health resources. The rules require phone service providers by July 16, 2022, to direct 988 calls to the existing National Suicide Prevention Lifeline (1-800-273-8255). The bill creates the 988 Crisis Hotline Enterprise (the enterprise) in the Department of Human Services (DHS). The enterprise will be governed by a board of directors appointed by the governor. The enterprise must: impose a 988 surcharge and a prepaid wireless 988 charge; fund the 988 crisis hotline; work with third parties to provide crisis outreach, stabilization, and acute care; authorize and issue revenue bonds payable from the newly created 988 Crisis Hotline Cash Fund; and adopt, amend, or repeal policies to regulate its affairs. 988 Crisis Hotline. By July 1, 2022, the enterprise must fund a nonprofit to provide intervention services and crisis care coordination for individuals calling 988. The nonprofit must: have an active agreement with the national 988 hotline; meet national suicide lifeline requirement guidelines; deploy mobile response units and co-responder programs; and coordinate access to walk-in centers; and provide follow up services.

## VETERAN SUICIDE PREVENTION PILOT PROGRAM

S.B. 21-129 creates a suicide prevention pilot program for post 9/11 veterans in El Paso County to reduce the suicide rate by providing free behavioral health services. The department must develop an individualized treatment plan for each veteran accessing services. The pilot program is established initially in El Paso County and may serve up to 700 veterans. Subject to available appropriations, DHS (Department of Human Services) may expand the program to other areas of the state or to serve more than 700 veterans.

# RECOVERY SUPPORT SERVICES GRANT PROGRAM (RSS)

Through S.B. 21-137 funding, The RSS grant program will provide grants to recovery community organizations for the purpose of providing recovery-oriented services to individuals with a substance use disorder or co-occurring substance use and mental health disorder.

#### RESIDENTIAL PLACEMENT OF CHILDREN AND YOUTH PILOT PROGRAM

S.B. 21-137 funds this pilot program that will be initiated by the State's Child Welfare System, within the Department of Human Resources. This program will provide residential placement of children and youth with high acuity physical, mental, or behavioral health needs.

## APPROPRIATION TO HIGH-RISK FAMILIES CASH FUND

S.B. 21-137 funds services to high-risk parents, including pregnant and parenting women, with substance use disorders; For services for high-risk children and youth.

#### RAPID MENTAL HEALTH RESPONSE FOR COLORADO YOUTH

H.B. 21-1258 The act establishes a temporary youth mental health services program to facilitate access to mental health services, including substance use disorder services, for youth to respond to identified mental health needs, including those needs that may have resulted from the COVID-19 pandemic. The program reimburses providers for up to 3 mental health sessions with a youth and may provide additional reimbursement subject to available money.

## **COLORADO 2-1-1 COLLABORATIVE GRANT**

S.B. 21-239 requires the Colorado 2-1-1 Collaborative to provide referrals to behavioral health services and provide assistance to find other public resources for unemployed individuals. The State department must contract with the Colorado 2-1-1 Collaborative to ensure specialized personnel are hired that can assist in referring individuals to behavioral health services. In addition, the State department shall collaborate with the Colorado 2-1-1 to engage in targeted marketing and outreach to traditionally underserved communities.

## (E) MENTAL HEALTH INSTITUTES

# (1) MENTAL HEALTH INSTITUTE AT FT. LOGAN

#### PERSONAL SERVICES

The Personal Services line item was established during the FY 2011-12 supplemental budget process as a result of a Joint Budget Committee staff recommendation to set up three separate line items (personal services, operating expenses, and pharmaceuticals) in the FY 2012-13 Long Bill (H.B. 12-1335).

This line item provides funding for the Colorado Mental Health Institute at Ft. Logan employee salaries and benefits, as well as the associated State contribution to the Public Employees Retirement Association (PERA) and the state share of federal Medicare taxes. The line item also provides funding for contracted medical services and the medical staff employed through an interagency agreement with the University of Colorado - Denver School of Medicine and contract trauma-informed care peer support.

#### CONTRACT MEDICAL SERVICES

The Contract Medical Services line item provides funding for the purchase of outside medical care provided for patients at the Colorado Mental Health Institute at Ft. Logan. This includes arranging medical treatment for physical ailments or injuries occurring during the patient's stay that the Institutes are not equipped or licensed to provide. The Institute contracts with local hospitals and medical providers for these services. Prior to FY 2014-15, the contract medical services were paid from the Personal Service line item. This line item was established through FY 2014-15 November 1, 2013 decision item R-10 titled "Outside Medical Services."

## **OPERATING EXPENSES**

The Operating Expenses line item was established during the FY 2011-12 supplemental budget process when the Joint Budget Committee approved three separate line items (personal services, operating expenses, and pharmaceuticals) in the FY 2012-13 Long Bill (H.B. 12-1335). The line item provides funding for the general operating expenditures for the Mental Health Institute at Ft. Logan including food, medical/laboratory supplies, custodial and laundry supplies, telephone and IT expenses, office equipment, maintenance, etc. This line item funds the major functions and cost centers involved in operating the Institute and the programs that serve the patients

#### CAPITAL OUTLAY

The Capital Outlay line item was created through the FY 2015-16 Long Bill (S.B. 15-234), which appropriated the funding to a new line titled Capital Outlay and was approved as on-going funding beginning in FY 2016-17.

This line item provides funding for the replacement of equipment and furnishings and minor renovations at the Mental Health Institute at Ft. Logan. The Joint Budget Committee approved the FY 2015-16 decision item R-14 "Institute Equipment Replacement and Minor Renovations" that requested one-time funding for equipment replacement and minor renovations at both Institutes.

## **PHARMACEUTICALS**

The Pharmaceuticals line item was established during the FY 2011-12 supplemental budget process when the Joint Budget Committee approved splitting the Ft. Logan Mental Health Institute line item into three separate line items (personal services, operating expenses, and pharmaceuticals) in the FY 2012-13 Long Bill (H.B. 12-1335).

This line item provides funding for the purchase of medication prescribed to patients at the Mental Health Institute at Ft. Logan. The pharmacy at the Mental Health Institute at Ft. Logan is responsible for dispensing general over-the-counter medications, such as pain relievers; general health prescriptions for conditions such as diabetes, hypertension and high cholesterol; and psychiatric medications, including mood stabilizers, antidepressants and antipsychotics.

# (2) MENTAL HEALTH INSTITUTE AT PUEBLO

## PERSONAL SERVICES

The Personal Services line item was established by Joint Budget Committee staff action during the FY 2011-12 supplemental budget process. The Joint Budget Committee approved three separate line items in the FY 2012-13 Long Bill (H.B. 12-1335) for the Colorado Mental Health Institute at Pueblo personal services, operating expenses, and pharmaceuticals.

The line item provides funding for the Mental Health Institute at Pueblo employees' salaries, wages and benefits, as well as the associated State contribution to the Public Employees Retirement Association (PERA) and the state share of federal Medicare taxes. This line item also provides funding for contracted medical services and the medical staff employed through an interagency agreement with the University of Colorado - Denver School of Medicine and contract trauma-informed care peer support specialists.

During the FY 2014-15 supplemental process, the Department submitted S-2: "Mental Health Institutes Treatment Unit for Patients Previously Transferred per 17-23-101 C.R.S. (2016)." The supplemental requested funding for a Treatment Unit in order to safely treat patients that had returned from the Department of Corrections. The JBC approved the supplemental request and the FY 2015-16 decision item (R-1 Mental Health Institute Treatment Unit) which annualized the funding for 12 months. The supplemental (S-2) and the decision item (R-1) increased the Pueblo Personal Services line item by \$1,993,152 General Fund and 36.7 FTE. During the 2016 legislative session, H.B. 16-1410 reduced \$368,000 reappropriated funds from the Judicial Branch and appropriated \$459,972 General Fund to the line item to allow CMHIP to cover the costs associated with competency evaluation court costs, jury costs, and court appointed counsel costs.

## **CONTRACT MEDICAL SERVICES**

The Contract Medical Services line item provides funding for the purchase of outside medical care provided for patients at the Colorado Mental Health Institute at Pueblo. This includes arranging medical treatment for physical ailments or injuries occurring during the patient's stay that the Institutes are not equipped or licensed to provide. The Institute contracts with local hospitals and medical providers for the services. Prior to FY 2014-15, the contract medical services were paid from the Personal Service line item. This line was established through FY 2014-15 November 1, 2013 decision item R-10 titled "Outside Medical Services."

## **OPERATING EXPENSES**

The Operating Expenses was established by Joint Budget Committee Staff action during the FY 2011-12 supplemental budget process.

This line item provides funding for the general operating expenditures at the Mental Health Institute at Pueblo including but not limited to food, medical/laboratory supplies, custodial and laundry supplies, telephone and IT expenses, office equipment, and maintenance. This line item funds the major function and cost centers involved in operating the Institute and the programs that serve the patients.

In FY 2014-15, S-2: "Mental Health Institutes Treatment Unit for Patients Previously Transferred per 17-23-101 C.R.S. (2016)," the Department requested funding for a Treatment Unit in order to safely treat patients that had returned from the Department of Corrections. The JBC approved the supplemental request and the FY 2015-16 decision item (R-1 Mental Health Institute Treatment unit) which annualized the funding for 12 months. The supplemental (S-2) and the decision item (R-1) increased the Mental Health Institute at Pueblo's Operating Expenses line item by \$33,880.

## **CAPITAL OUTLAY**

The Capital Outlay line item provides funding for the replacement of equipment and furnishings and to perform minor renovations at the Mental Health Institute at Pueblo. The Joint Budget Committee approved FY 2014-15 Decision Item R-14 "Institute Equipment Replacement and Minor Renovations" that provided one-time funding for equipment replacement and minor renovations at both Institutes. FY 2015-16 Long Bill (S.B. 15-234) appropriated the funding to a new line titled Capital Outlay and was approved as on-going funding beginning in FY 2016-17.

## **PHARMACEUTICALS**

The Pharmaceuticals line item was established during the FY 2011-12 supplemental budget process by Joint Budget Committee staff action. The Joint Budget Committee approved establishing three separate line items in the FY 2012-13 Long Bill (H.B. 12-1335) for personal services, operating expenses, and pharmaceuticals at the Mental Health Institute at Pueblo.

This line item provides funding for the purchase of medication prescribed to the patients at the Mental Health Institute at Pueblo. The pharmacy at the Mental Health Institute at Pueblo is responsible for dispensing general over-the-counter

medications, such as pain relievers; general health prescriptions for conditions such as diabetes, hypertension and high cholesterol; and psychiatric medications, including mood stabilizers, antidepressants and antipsychotics.

## **EDUCATIONAL PROGRAMS**

The Educational Programs line item provides funding for the personal services and operating expenses associated with the educational programs at the Mental Health Institute at Pueblo. Male and female patients, ages 12 years to adult, receive educational services while they are patients at the Institute. Educational services include a variety of components including educational testing and assessments, treatment planning, special education, GED training and testing, and career education. This line item is supported primarily by per pupil revenue (PPR) and special education funds transferred from the Colorado Department of Education.

## (3) FORENSIC SERVICES

## FORENSIC SERVICES ADMINISTRATION

The Forensic Services Administration line item supports management and support staff. Some of these positions are specific to forensic services, and others are staff who support both institutes; the latter staff would be allocated across all three subsections rather than remaining allocated across the two institutes.

## **COURT SERVICES**

The Court Services line item supports staff who administer and deliver services related to court-ordered evaluations of competency, sanity, and other mental conditions, as well as competency restoration services.

This line also includes the Forensic Support Team's program management team and Navigators to ensure proper care and coordination of pretrial defendants, involves working with the courts, court liaisons, and service providers. This service was established through SB 19-223.

# FORENSIC COMMUNITY-BASED SERVICES

The Forensic Community-based Services line item supports staff who provide treatment case management and support for patients who are transitioning from the mental health institutes or living in the community.

## JAIL-BASED COMPETENCY RESTORATION PROGRAM

The Jail-based Competency Restoration Program line item provides funding for a jail-based restoration program for defendants who have been determined by the court to be incompetent to proceed (ITP) in criminal cases. The Department contracts with a vendor to provide the services, as well as utilizes state FTE to manage and support the program. This line item was established through FY 2013-14 November 1, 2012 decision item R-3A titled "Strengthen Behavioral Health - Increase Access to Mental Health Institute Civil Beds."

#### PURCHASED PSYCHIATRIC BED CAPACITY

The Purchased Psychiatric Bed Capacity line item was added by H.B. 18-1322 (FY 2018-19 Long Bill) and reflects the funding that supports the contract for psychiatric hospital beds and the staff that administer the program.

#### **OUTPATIENT COMPETENCY RESTORATION PROGRAM**

The Outpatient Restoration Services line item was added by H.B. 18-1322 (FY 2018-19 Long Bill) and reflects the funding that supports the contracts for community-based competency restoration education and related case management services, along with the staff that administer this program.

# (4) Consent Decree

The Consent Decree line item was added as a result of an agreement with a federal lawsuit concerning the length of time that pre-trial detainees wait for court-ordered competency services. The parties filed the agreement in federal court in the form of a consent decree replacing an existing Settlement Agreement. The consent decree is legally binding and judicially enforceable through December 1, 2025. The consent decree establishes a new set of timeframes for competency evaluation and restoration services, and it establishes fines for each day a pretrial detainee waits more than the prescribed timeframes. The fines range from \$100 to \$500 per detainee per day, and the consent decree caps the total amount at \$10.0 million for the period June 1, 2019, to May 31, 2020. This \$10.0 million limit increases for each subsequent 12-month period based on the CPI-U.

# **INDIRECT COST ASSESSMENT**

The Indirect Cost Assessment line item provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cash-funded (including reappropriated funds) or federal-funded program.

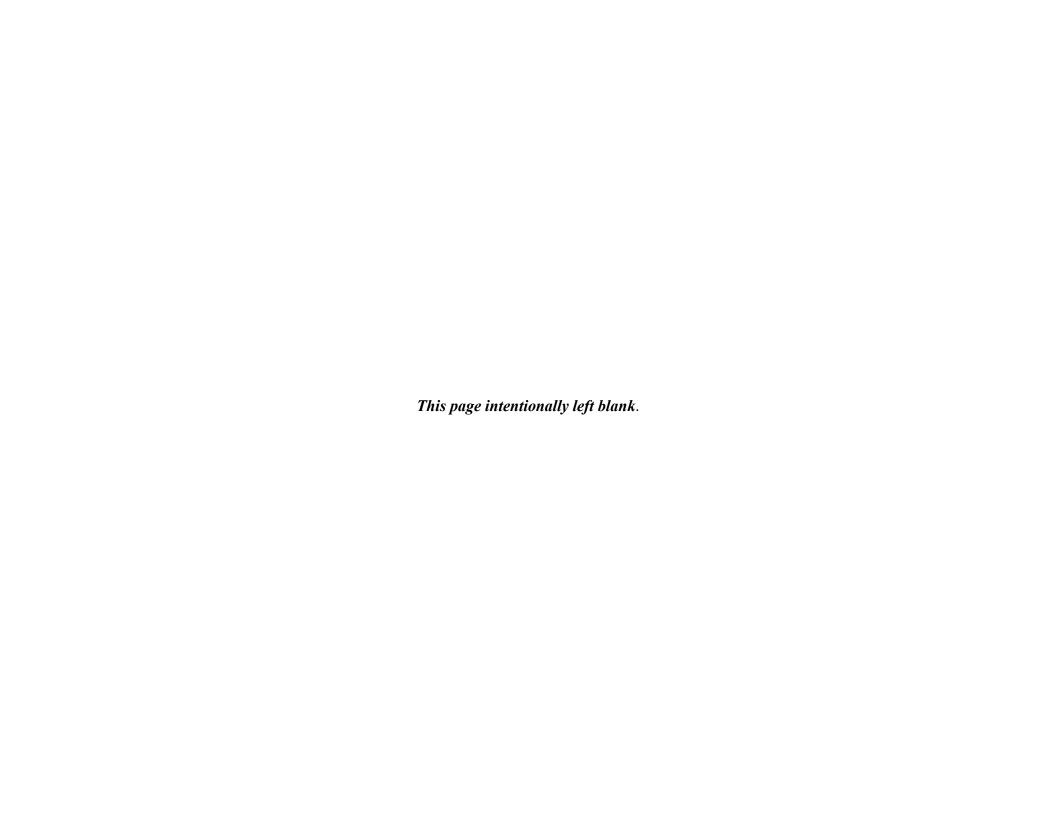


# Department of Human Services Line Item Descriptions

# **Services for People with Disabilities**

FY 2022-23 Budget Request

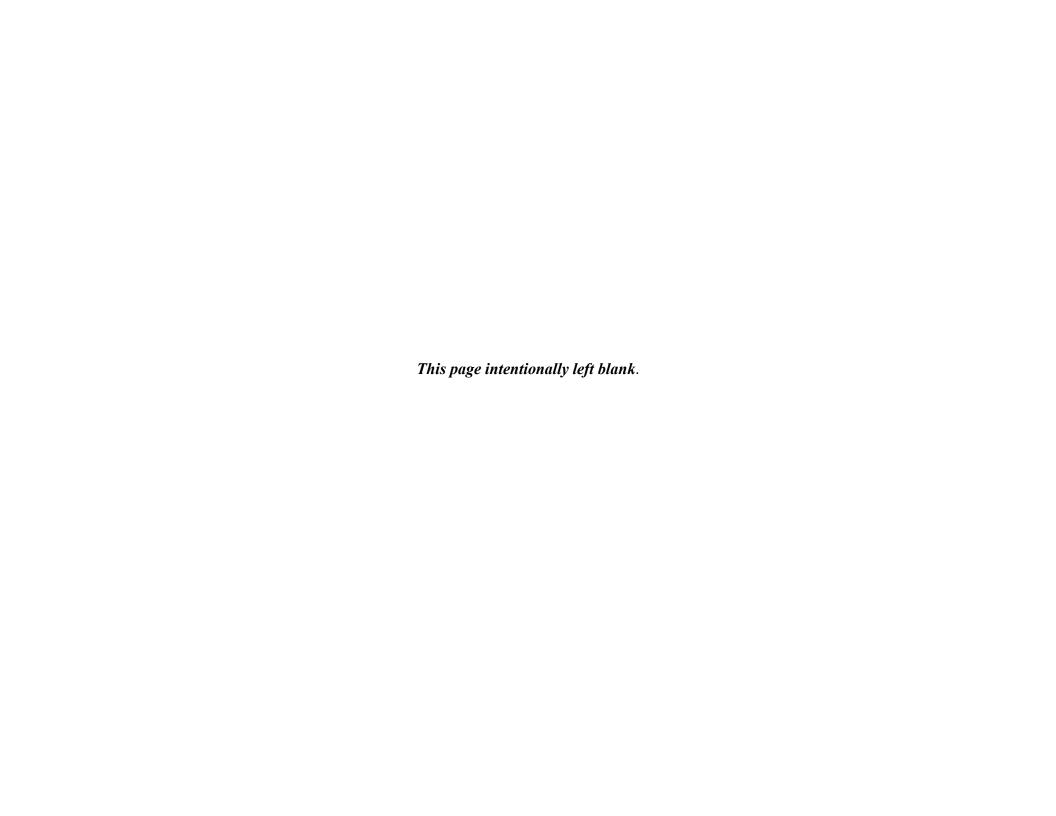
**NOVEMBER 1, 2021** 



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## (9) SERVICES FOR PEOPLE WITH DISABILITIES

## (A) REGIONAL CENTERS FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

The role of the State operated Regional Centers (RCs) is to provide direct support for adults with intellectual and developmental disabilities (IID) that have very significant needs. Under the supervision of the Division for Regional Center Operations (DRCO), the State operates three Regional Centers for adults with intellectual disabilities: in Grand Junction (GJRC), Pueblo (PRC), and Wheat Ridge (WRRC). Regional Centers serve adults in community group homes funded through the Home and Community-Based Services (HCBS-DD) Medicaid Waiver and in Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID). The combined Regional Center average daily resident census during FY 2020-21 was 229 residents.

RCs provide active treatment through a number of services including 24-hour supervision, residential services, day programming, habilitation, medical services, training and behavioral intervention, and short-term emergency/crisis support to the community system. Services are based on needs outlined in a resident's Individualized Plan (IP). A resident is referred to the Regional Centers through Community Centered Boards (CCB). Requests for Regional Center services come from the Mental Health Institutes (MHI), Department of Corrections (DOC), skilled nursing facilities, hospitals and the CCB community system.

Costs associated with the Regional Centers are appropriated in several line items and allocated in the Long Bill by Regional Center as described in the following paragraphs. Additionally, costs associated with Regional Center physical plant maintenance and housekeeping, among other components, are centrally appropriated in the Office of Operations, and other indirect costs are charged to the Executive Director's Office and the Office of Information Technology Services.

# (1) WHEAT RIDGE REGIONAL CENTER

The Wheat Ridge Regional Center consists of nineteen (19) homes licensed individually as ICFs/IID. Fourteen (14) homes are located throughout the West Metro area from Lakewood to Westminster (1 home offline as of July 1, 2019). The remaining five (5) homes, known as Kipling Village, serve individuals with a history of problematic sexual behavior. The average daily resident census at WRRC during FY 2019-20 was 98.

# WHEAT RIDGE REGIONAL CENTER INTERMEDIATE CARE FACILITY

This line item was created for the FY 2015-16 Long Bill. It combines appropriations from the line items that were previously listed in the Long Bill as Personal Services, Operating Expenses, and Resident Incentive Allowance. This line item funds the personal services expenses for 373.0 FTE at the Wheat Ridge Regional Center. This line item also funds the operating costs associated with the staff and client services of the Regional Centers, including equipment maintenance, capital outlay, travel, advertising, telecommunications, postage, supplies and registration fees. Lastly, this line item provides funding for the resident incentive allowance that is paid to Regional Center clients for their work services such as washing vehicles, food preparation and janitorial services.

The funding for Wheat Ridge Regional Center Intermediate Care Facility is comprised of cash fund from client cash revenues and reappropriated Medicaid funds from the Department of Health Care Policy and Financing. Cash funds appropriated in this line item are from two sources of client cash revenues: room and board paid by clients, and patient pay from ICF/IID clients who receive benefits and/or earn wages. Room and board rates reflect the Supplemental Security Income allocation less the monthly allowable amount for personal spending.

#### WHEAT RIDGE REGIONAL CENTER PROVIDER FEE

The Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) provider fee is a fee charged to Regional Centers and private care facilities not to exceed 5% of operational costs, pursuant to SB 13-167. The purpose of the fee is to maintain the quality and continuity of services provided by intermediate care facilities. The bill requires that revenue from the fee be collected by the Department of Health Care Policy and Financing (HCPF), and transmitted to the State Treasurer to be credited to the Service Fee Fund. The moneys in the fund are used by the Department of Health Care Policy and Financing toward the State's match for federal funding under Medicaid. The fee reduces the need for General Fund because the federal government allows ICFs/IID to include the cost of the fee in the calculation of Medicaid-reimbursable expenditures.

## WHEAT RIDGE REGIONAL CENTER DEPRECIATION

This line item was created for the FY 2015-16 Long Bill. It is funded through Medicaid reimbursement of Wheat Ridge Regional Center depreciation costs. Appropriations in this line are transferred to the Regional Center Depreciation account in the Capital Construction Long Bill at the end of the fiscal year, pursuant to HB 15-1333. Funds transferred into the capital construction account may be used for maintenance and facility repair of the Regional Centers. This includes day-to-day maintenance and repair needs and capital outlay to ensure residents are in a safe environment. The Department of Health Care Policy and Financing has a corresponding line item in its budget titled Regional Center Depreciation and Annual Adjustments.

# (2) GRAND JUNCTION REGIONAL CENTER

The Grand Junction Regional Center dates back to 1919. The Grand Junction Regional Center has both Intermediate Care Facilities/Intellectual Developmental Disabilities (ICF/IDD) homes, and Home and Community Based Services Waiver (HCBS Waiver) homes throughout the community. At the Grand Junction Regional Center (GJRC), there are four (4) ICF/IID settings. Two are homes in the community, 2 remain on campus, and seven (7) Home and Community Based Waiver settings in the community (1 home offline as of June 30, 2020). The average daily resident census at GJRC during FY 2020-21 was 20 ICF/IID residents and 46 waiver residents.

### GRAND JUNCTION REGIONAL CENTER INTERMEDIATE CARE FACILITY

This line item was created for the FY 2015-16 Long Bill. It combines appropriations from the line items that were previously listed in the Long Bill as Personal Services, Operating Expenses, and Resident Incentive Allowance. This line item funds the personal services expenses for 98.8 FTE at the ICF/IID Grand Junction Regional Center campus. This line item also funds the operating costs associated with the staff and client services of the ICF/IID Grand Junction Regional Center, including equipment maintenance, capital outlay, travel, advertising, telecommunications, postage, supplies and registration fees. Lastly, this line item provides funding for the resident incentive allowance that is paid to

Regional Center clients for their work services such as washing vehicles, food preparation and janitorial services.

Funding for GJRC-ICF is comprised of cash funds from client cash revenues and reappropriated Medicaid funds from the Department of Health Care Policy and Financing. Cash funds appropriated in this line item are from two sources of client cash revenues: room and board paid by clients, and patient pay from ICF/IID residents who receive benefits and/or earn

wages. Room and board rates reflect the Supplemental Security Income allocation less the monthly allowable amount for personal spending.

## GRAND JUNCTION REGIONAL CENTER PROVIDER FEE

The Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) provider fee is a fee charged to Regional Centers and private care facilities not to exceed 5% of operational costs pursuant to SB 13-167. The purpose of the fee is to maintain the quality and continuity of services provided by intermediate care facilities. The bill requires that revenue from the fee be collected by the Department of Health Care Policy and Financing, and transmitted to the State Treasurer to be credited to the Service Fee Fund. The moneys in the fund are used by the Department of Health Care Policy and Financing toward the State's match for federal funding under Medicaid. The fee reduces the need for General Fund because the federal government allows ICFs/IID to include the cost of the fee in the calculation of Medicaid-reimbursable expenditures.

#### GRAND JUNCTION REGIONAL CENTER WAIVER SERVICES

This line item was created for the FY 2015-16 Long Bill. It combines appropriations from the line items that were previously listed in the Long Bill as Personal Services, Operating Expenses, and Resident Incentive Allowance.

This line item funds the personal services expenses for 174.2 FTE throughout the Home and Community Based Services waiver group homes for individuals with developmental disabilities (HCBS-DD) at the Grand Junction Regional Center. This line item also funds the operating costs associated with the staff and client services of the HCBS-DD group homes, including equipment maintenance, capital outlay, travel, advertising, telecommunications, postage, supplies and registration fees. Lastly, this line item provides funding for the resident incentive allowance that is paid to Regional Center clients for their work services such as washing vehicles, food preparation and janitorial services.

Funding for GJRC-Waiver is comprised of cash funds from client cash revenues, general funds and reappropriated Medicaid funds from the Department of Health Care Policy and Financing. Cash funds appropriated in this line item are from two sources of client cash revenues: room and board paid by clients, and patient pay from HBCS-DD residents who receive benefits and/or earn wages. Room and board rates reflect the Supplemental Security Income allocation less the monthly

allowable amount for personal spending. General funds appropriated in this line item is to cover the shortfall of the room and board paid by client.

#### GRAND JUNCTION REGIONAL CENTER DEPRECIATION

This line item was created for the FY 2015-16 Long Bill. It is funded through Medicaid reimbursement of Grand Junction Regional Center depreciation costs. Appropriations in this line are transferred to the Regional Center Depreciation account in the Capital Construction Long Bill at the end of the fiscal year, pursuant to HB 15-1333. Funds transferred into the capital construction account may be used for maintenance and facility repair of the Regional Centers. This includes day-to-day maintenance and repair needs and capital outlay to ensure residents are in a safe environment. The Department of Health Care Policy and Financing has a corresponding line item in its budget titled Regional Center Depreciation and Annual Adjustments.

## (3) PUEBLO REGIONAL CENTER

At the Pueblo Regional Center (PRC), there are eleven (11) Home and Community Based Waiver settings in the community (3 homes offline as of June 30, 2020). The average daily resident census at PRC during FY 2020-21 was 47.

## PUEBLO REGIONAL CENTER WAIVER SERVICES

This line item was created for the FY 2015-16 Long Bill. It combines appropriations from the line items that were previously listed in the Long Bill as Personal Services, Operating Expenses, and Resident Incentive Allowance.

This line item funds the personal services expenses for 181.8 FTE throughout the Home and Community Based Services waiver group homes for individuals with developmental disabilities (HCBS-DD) at the Pueblo Regional Center. This line item also funds the operating costs associated with the staff and client services of the HCBS-DD group homes, including equipment maintenance, capital outlay, travel, advertising, telecommunications, postage, supplies and registration fees. Lastly, this line item provides funding for the resident incentive allowance that is paid to Regional Center clients for their work services such as washing vehicles, food preparation and janitorial services.

Funding for PRC is comprised of cash funds from client cash revenues, general funds, and reappropriated Medicaid funds from the Department of health Care Policy and Financing. Cash funds appropriated in this line item are from two sources of client cash revenues: room and board paid by clients, and patient pay from HBCS-DD residents who receive benefits and/or earn wages. Room and board rates reflect the Supplemental Security Income allocation less the monthly allowable amount month for personal spending. General funds appropriated in this line item is to cover the shortfall of the room and board paid by client.

#### PUEBLO REGIONAL CENTER DEPRECIATION

This line item was created for the FY 2015-16 Long Bill. It is funded through Medicaid reimbursement of Pueblo Regional Center depreciation costs. Appropriations in this line are transferred to the Regional Center Depreciation account in the Capital Construction Long Bill at the end of the fiscal year, pursuant to HB 15-1333. Funds transferred into the capital construction account may be used for maintenance and facility repair of the Regional Centers. This includes day-to-day maintenance and repair needs and capital outlay to ensure residents are in a safe environment. The Department of Health Care Policy and Financing has a corresponding line item in its budget titled Regional Center Depreciation and Annual Adjustments.

# (B) WORK THERAPY PROGRAM

HB 12-1342 recreated the Work Therapy Program Cash Fund to support the training and employment of persons receiving services at the Colorado Mental Health Institute at Pueblo and Fort Logan and the Regional Centers located in Grand Junction, Pueblo and Wheat Ridge. The program, which includes 1.5 FTE, serves residents through revenue derived from contracts with area businesses and organizations for custodial services, printing, packaging, mailing, and other types of manual processing, which may be performed by persons receiving services from these programs. Individuals are paid from funds received in proportion to the work performed.

# (C) TRAUMATIC BRAIN INJURY TRUST FUND

## TRAUMATIC BRAIN INJURY TRUST FUND

The Colorado Traumatic Brain Injury (TBI) Trust Fund was established in 2002 by the Colorado legislature to provide statewide care coordination and services to children and adults with traumatic brain injury, sponsor educational programs about TBI, and fund TBI research.

The Traumatic Brain Injury Trust Fund is supported by surcharges levied on people convicted of driving under the influence, driving while ability impaired, speeding, and helmet violations for minors. Pursuant to Section 26-1-301, C.R.S. (2020), the funds are directed to the Department, which administers the funds.

There is 1.5 FTE appropriated in the line item. The purpose of the Trust Fund is to provide statewide case management to children/youth and adults with Traumatic Brain Injury (TBI), sponsor educational programs about TBI, and fund TBI research. The TBI Program is guided by a Governor's appointed volunteer community Board of Directors and contracts with a number of different government and private agencies to accomplish its goals.

## (D) VETERANS COMMUNITY LIVING CENTERS

The Veterans Community Living Centers are State owned nursing facilities that provide skilled nursing care primarily to honorably discharged veterans and their spouses, widows and, in some instances, parents of deceased veterans (Gold Star parents). The five Centers are located throughout the State: Aurora (Fitzsimons), Florence (McCandless), Monte Vista (Homelake), Rifle, and Walsenburg (Spanish Peaks). Each facility is Medicare and Medicaid-certified and licensed by the Department of Public Health and Environment. Additionally, the Centers are certified by the U.S. Department of Veterans Affairs to receive federal funds in support of the care of veterans.

## **ADMINISTRATION**

This line item funds 5.0 appropriated FTE for the Veterans Community Living Centers' administrative staff at the Department level. Funding for this line item is comprised of cash funds from resident payments for care and other revenues that are designated to the Central Fund for Veterans Community Living Centers.

## **VETERANS COMMUNITY LIVING CENTER AT FITZSIMONS**

This line item was created in FY 2012-13 and shows, for informational purposes, the estimated costs of operating the Veterans Community Living Center at Fitzsimons, including 236.4 appropriated FTE.

Veterans Community Living Center at Fitzsimons, located in Aurora, was built in 2002. It is a 180-bed facility providing skilled nursing care and a specialized 21-bed short-term rehabilitation unit. Fitzsimons provides long-term medical and non-medical care, including skilled nursing services; restorative physical, occupational and speech therapy; social activities; and assistance with bathing, dressing and other activities of daily living to honorably discharged veterans, veteran spouses or widows, and Gold Star parents (non-veterans whose child(ren) died while serving in the armed forces). The Center has a secure neighborhood designed for individuals with Alzheimer's-type dementia. Fitzsimons also provides end of life/hospice care and short-term rehabilitation services. The rehabilitation services provide physical, occupational, and speech therapies for individuals seeking to return home following a qualifying hospital stay. Therapy specialists work with each individual to regain skills and improve physical strength, endurance, and aerobic capacity with the use of modern facilities and equipment. Funding for this line item is comprised of cash funds from resident payments for care, federal per diem payments for veteran residents and general funds for compensation for direct care staff

### BRUCE McCANDLESS VETERANS COMMUNITY LIVING CENTER AT FLORENCE

This line item was created in FY 2012-13 and reflects, for informational purposes only, the estimated costs of operating the Bruce McCandless Veterans Community Living Center at Florence, including 135.0 appropriated FTE.

The Bruce McCandless Veterans Community Living Center at Florence is a 105-bed skilled nursing facility. Residents of the Center are honorably discharged veterans, veteran spouses or widows, and Gold Star parents. Florence provides short-term rehabilitative services along with long-term medical and non-medical care, including skilled nursing services; physical, occupational and speech therapy; social activities; and assistance with bathing, dressing and other activities of daily living. The Center has developed programs for memory care, end of life/hospice and short-term respite care. Activities at the Center include intergenerational activities, pet welfare, spa bathing, etc. Funding for this line item is comprised of cash funds from resident payments for care, federal per diem payments for veteran residents and general funds for compensation for direct care staff.

## VETERANS COMMUNITY LIVING CENTER AT HOMELAKE

This line item was created in FY 2012-13 and shows, for informational purposes only, the estimated costs of operating the Veterans Community Living Center at Homelake, including 95.3 appropriated FTE.

The Veterans Community Living Center at Homelake was established in 1889 as the Soldiers' and Sailors' Home, providing a peaceful home for aging and disabled Civil War veterans.

The Veterans Community Living Center at Homelake outside Monte Vista includes a 50-bed Domiciliary and a 60-bed skilled nursing facility. The Domiciliary provides residential rehabilitation and health maintenance services for veterans, their spouses, or widows of veterans who do not require hospital or nursing home care but are unable to live independently because of medical or psychiatric disabilities. Residents receive necessary medical and psychiatric care, rehabilitative assistance, and other therapeutic interventions while residing in a homelike environment.

The Domiciliary operates in conjunction with the Federal Department of Veterans Affairs (VA) Domiciliary Home Care program. The VA provides financial assistance to states that operate domiciliary programs to offset the operating costs of care for eligible veterans. The line item includes the State subsidy, which provides General Fund to subsidize resident fees at the Homelake Domiciliary. Funding for this line item is comprised of cash funds from resident payments for care, federal per diem payments for veteran residents and general fund for the compensation for direct care staff.

### HOMELAKE MILITARY VETERANS CEMETERY

This line item was created in FY 2018-19 to pay for the operations of the Homelake Military Veterans Cemetery. Any veteran who served honorably in any branch of the armed forces of the United States and who, at the time of his or her death, was a Colorado resident is eligible for burial and internment at the cemetery, as authorized by 26-12-205, C.R.S. (2018). The line item is appropriated 0.5 FTE.

## VETERANS COMMUNITY LIVING CENTER AT RIFLE

This line item was created in FY 2012-13 and shows, for informational purposes only, the estimated costs of operating the Veterans Community Living Center at Rifle, including 110.6 appropriated FTE.

The Colorado Veterans Community Living Center at Rifle is a 89-bed skilled nursing facility including a 12-bed secure memory care unit. The all-male secure memory care unit specializes in caring for residents with Alzheimer's disease and other forms of dementia. Rifle also provides long-term care, short-term rehabilitation, and end of life/hospice services. The Center also provides short-term respite care when home care providers or family members are unavailable to provide care for a short period of time. The Center serves honorably discharged veterans, veteran spouses or widows, and Gold Star parents. Funding for this line item is comprised of cash funds from resident payments for care, federal per diem payments for veteran residents and general fund for compensation for direct care staff.

#### SPANISH PEAKS VETERANS COMMUNITY LIVING CENTER AT WALSENBURG

This line item was created in FY 2012-13 and shows, for informational purposes only, the estimated costs of operating the Spanish Peaks Veterans Community Living Center at Walsenburg, including 1.0 appropriated FTE.

The Spanish Peaks Veterans Community Living Center at Walsenburg is a 120-bed long-term care facility serving honorably discharged veterans, veteran spouses or widows, and Gold Star parents. The center was built in 1993 and is attached to the Spanish Peaks Hospital. Both the Community Living Center and hospital are operated by the Huerfano County Hospital District doing business as Spanish Peaks Regional Health Center. In addition to providing long-term care, Walsenburg has a special care unit for residents with Alzheimer's, Huntington's, Parkinson's and dementia. Funding for this line item is comprised of cash funds from resident payments for care and federal per diem payments for veteran residents.

# TRANSFER TO THE CENTRAL FUND PURSUANT TO SECTION 26-12-108 (1) (a.5), C.R.S.

This line item was added in the FY 2007-08 Long Bill to reflect the General Fund subsidy for the Veterans Community Living Centers indirect costs. The amount is based on the estimated indirect costs associated with Department services to the Community Living Centers. The total is shown as General Fund and reappropriated to the Department's Office of Operations. During FY 2014-15 the line item name was changed from Veterans Community Living Center Indirect Cost Subsidy to Transfer to the Central Fund pursuant to Section 26-12-108 (1) (a.5), C.R.S. (2020).

# (E) INDIRECT COST ASSESSMENT

The Indirect Cost Assessment provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cashfunded (including reappropriated funds) or federal-funded program.

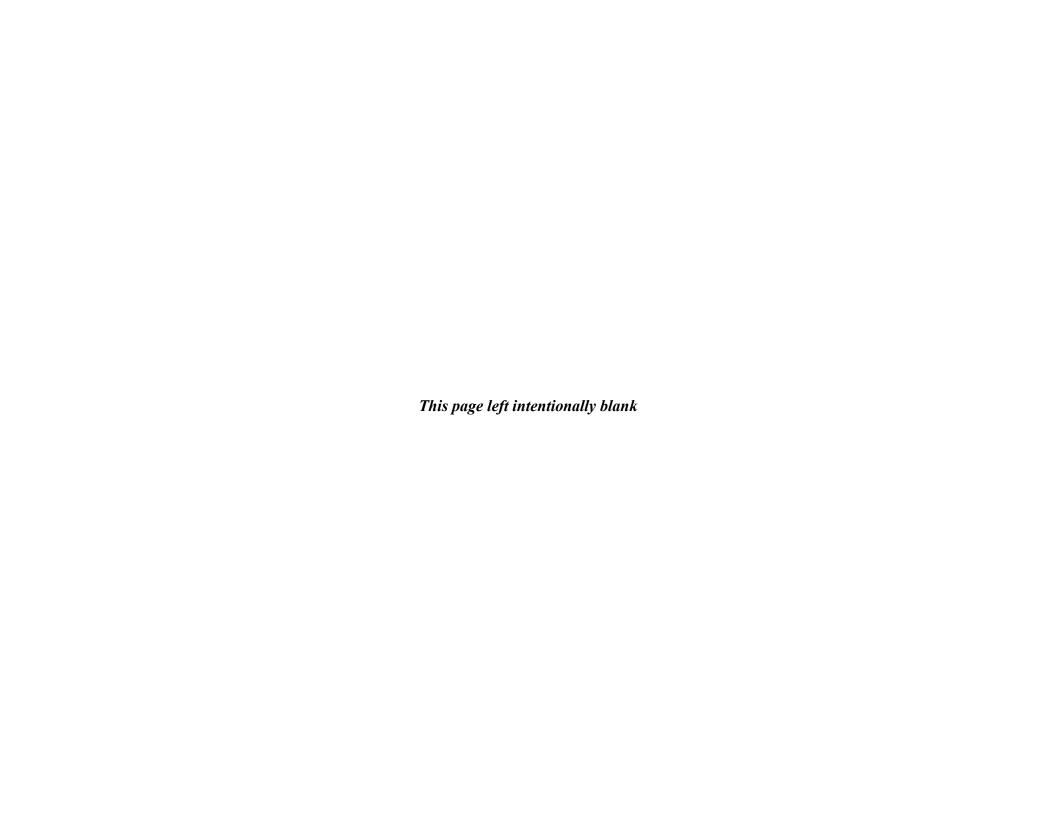


# Department of Human Services Line Item Descriptions

# **Adult Assistance Programs**

FY 2022-23 Budget Request

**NOVEMBER 1, 2021** 



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# (10) ADULT ASSISTANCE PROGRAMS

# (A) ADMINISTRATION

This line item funds centralized general administrative services and support for many Aging and Adult programs within the Division of Aging and Adult Services and the Employment and Benefits Division with staffing of 11.8 FTE. This includes personal services and operating expenses such as equipment rental, supplies, and postage for the administration of Aging and Adult Programs. In FY 2013-14, 5.5 FTE were moved from the Old Age Pension Program (OAP), State Administration line item to this Administration line item so that all Adult Financial programs, other than OAP, are administered through this line.

# (B) OLD AGE PENSION PROGRAM

The Old Age Pension program (OAP) was authorized through an amendment to the Colorado Constitution passed in 1936. The OAP program is intended to supplement the income of qualified, low-income persons 60 and older with no disability requirement for eligibility via cash assistance.

The State Constitution (Article XXIV, Old Age Pensions, Section 2) dedicates several major State revenue sources for financing the OAP program. The OAP program receives its funding from revenues based on 85 percent of the State sales, use, and liquor taxes; license fees; and inheritance and incorporation tax revenues. The State Board of Human Services has constitutional authority to administer the Old Age Pension program. The Board can adjust the basic minimum grant award if living costs have changed sufficiently to justify such action, such as when a cost of living adjustment (COLA) is passed by the federal Supplemental Security Income (SSI) programs or the Federal Poverty Level is adjusted.

The Old Age Pension Program is funded primarily with OAP Cash Funds. OAP Refunds from collections are a secondary source of funding. The OAP program has administrative costs for personal services and operating costs of the State staff administering the program and county administration for county staff that determine eligibility.

## CASH ASSISTANCE PROGRAMS

This line item reflects estimated state expenditures for OAP cash assistance payments to older adults who meet financial eligibility criteria pursuant to Section 1, Article XXIV, of the State Constitution. The maximum grant as of January 1, 2021 is \$832 per month, which is approximately 77.5% of the 2021 Federal Poverty Guideline (\$1,073 per month for an individual). As administered, the program provides funding to qualified individuals to increase their income up to the minimum award level.

#### REFUNDS

Refunds are obtained from collections of overpayments to eligible clients or payments to ineligible clients pursuant to Section 1, Article XXIV, of the State Constitution. These collections are used to offset OAP Cash Assistance expenditures.

#### **BURIAL REIMBURSEMENTS**

Funding for this appropriation is provided from the Old Age Pension Fund pursuant to Section 1, Article XXIV, of the State Constitution. This line item reflects estimated State expenditures for burial reimbursements provided for eligible OAP or OAP Home Care Allowance (HCA) recipients, or persons who are age sixty or older and are receiving Medicaid, pursuant to Section 1, Article XXIV, of the State Constitution. The maximum burial payment is \$1,500.

## STATE ADMINISTRATION

Funding for this appropriation is provided from the Old Age Pension Fund pursuant to Section 1, Article XXIV, of the State Constitution. This line item reflects estimated State expenditures for personal services (3.5 FTE) and operating expenses associated with the State's supervision and oversight of the county-administered Old Age Pension Program pursuant to Section 1, Article XXIV, of the State Constitution.

## **COUNTY ADMINISTRATION**

Funding for this appropriation is provided from the Old Age Pension Fund pursuant to Section 1, Article XXIV, of the State Constitution. This line item reflects estimated county expenditures for costs associated with administering the OAP program pursuant to Section 1, Article XXIV, of the State Constitution. Counties determine eligibility for the OAP

program. This appropriation funds the portion of county administration related to the Old Age Pension Program and is included for informational purposes since the funds are continuously appropriated.

# (C) OTHER GRANT PROGRAMS

#### ADMINISTRATION - HOME CARE ALLOWANCE SEP CONTRACT

In 2010, this line item was established by H.B. 10-1146 that transferred the administration of Single Entry Point (SEP) contracting for the Adult Foster Care and Home Care Allowance programs from the Department of Health Care Policy and Financing to the Department of Human Services along with commensurate funding. The SEP contract provides payments to agencies that determine eligibility for community-based long-term care programs, provide case management for clients in these programs, and make referrals to other resources. Funding for this appropriation is provided through the General Fund.

#### AID TO THE NEEDY DISABLED PROGRAMS

In FY 2007-08, S.B. 07-237 consolidated three programs into the expenditure line Aid to the Needy Disabled (AND) Programs. These three programs are Aid to the Needy Disabled-Colorado Supplement, Aid to the Needy Disabled-State-Only, and Aid to the Blind Supplemental. In general, these programs are allocated a fixed level of funding and operate within the overall budget by modifying the grant standard amount, i.e., if the number of participants increases, funding provided per person declines. Total funding is comprised of General Fund, a twenty percent local share, and federal reimbursements for individuals who receive Aid to the Needy Disabled-State-Only who are ultimately deemed eligible for the federal Supplemental Security Income (SSI) program, and other recoveries.

# Aid to the Needy Disabled - Colorado Supplement

This program provides financial and Medicaid assistance for disabled Supplemental Security Income (SSI) recipients. The Social Security Administration makes the SSI payment directly to clients with 100% federal funds. Only individuals who meet specific eligibility criteria and who receive less than the maximum SSI grant qualify for this Colorado Supplement program.

Aid to the Blind - Colorado Supplement

This program provides financial and Medicaid assistance for blind Supplemental Security Income recipients. The Social Security Administration makes the SSI payment directly to clients with 100% federal funds. Only individuals who meet specific eligibility criteria and who receive less than the maximum SSI grants qualify for this Colorado Supplement program.

# Aid to the Needy Disabled State Only (AND-SO)

This program was established in 1953 and provides basic financial assistance to qualifying low-income, disabled persons aged 18 to 59. If an individual is found to be eligible for SSI, the Social Security Administration will reimburse the State for all AND-SO payments made to the person while awaiting SSI eligibility determination. These reimbursements are referred to as Interim Assistance Reimbursements (IARs) and are used to offset the State and county costs of this program.

Interim Assistance Reimbursements (IARs) are a significant source of cash revenues for the Aid to the Needy Disabled programs. When an AND recipient is approved for SSI, his/her initial SSI benefit payment covers the entire period from the time of application. Out of that payment, the State is reimbursed for the assistance provided during the waiting period. IARs are considered a volatile source of program funding as they are influenced by the workflow of the Social Security Administration.

The AND-SO maximum grant amount as of October 1, 2021 is \$217 per month.

## **BURIAL REIMBURSEMENTS**

Burial Reimbursement is provided for eligible individuals receiving benefits from AND-SO, Aid to the Needy Disabled/Aid to the Blind-Colorado Supplement, AND-SO Home Care Allowance (HCA), Aid to the Needy Disabled/Aid to the Blind-Colorado Supplement Home Care Allowance, or who are between the ages of 18 and 59 and receiving Medicaid. The maximum burial payment for clients in these programs is \$1,000. The State pays 80% of the cost and the county pays 20%.

#### HOME CARE ALLOWANCE

The Home Care Allowance (HCA) program provides a cash benefit to individuals who need minimal help in daily living to prevent nursing home placement. The cash benefit must be used to pay a homecare provider and cannot be used for

other expenses. S.B. 06-219 transferred responsibility for funding of this program from the Department of Health Care Policy and Financing to the Department of Human Services. Depending on the individual's needs assessment, the client receives between \$330 and \$605 per month. The program typically has a caseload of approximately 1,600 individuals per month.

#### SSI STABILIZATION FUND PROGRAMS

H.B. 09-1215 created a stabilization fund to assist the Department in meeting the SSI maintenance of effort (SSI MOE) requirement. Pursuant to 26-2-210, C.R.S. (2018), excess Interim Assistance Reimbursements and other moneys recovered due to overpayment of recipients (plus any appropriations to the Fund) are continuously appropriated to the Department to be expended on programs that count toward the SSI MOE in a year when the Department determines the State is at risk of not meeting the MOE. At the end of the fiscal year, any amounts in excess of twenty percent of the total Aid to the Needy Disabled appropriation in the Fund revert to the General Fund.

#### DISABILITY BENEFITS APPLICATION ASSISTANCE PROGRAM

Pursuant to 26-2-119.7 C.R.S. (2021), funds assist recipients of Aid to the Needy Disabled (AND) benefits to navigate the federal Social Security Income (SSI) application process. Appropriated funds are contracted to county departments to provide services to AND program participants in the county or region.

## (D) COMMUNITY SERVICES FOR THE ELDERLY

This section encompasses programs funded by the federal Older Americans Act and State Funding for Senior Services. Responsibilities include developing a state plan for aging services, overseeing federal grants and providing assistance and funding to 16 local Area Agencies on Aging and local service providers to provide community based services to seniors age 60 years and older.

## **ADMINISTRATION**

This line item funds personal services costs, operational costs such as travel, postage, equipment rentals, overhead and supplies, and contractual services related to the state administration of the Older Americans Act and State Funding for Senior Services. There are 7.0 FTE, which administer these programs for the State.

#### COLORADO COMMISSION ON AGING

The Colorado Commission on Aging was created on July 1, 1976 to promulgate rules and regulations pursuant to Public Law 93-29, known as the "Older Americans Comprehensive Services Amendments of 1973". This line item funds an administrative position and expenses such as meeting costs, travel, printing, postage and supplies for the Commission. The Colorado Commission on Aging consists of seventeen members appointed by the Governor, with the consent of the Senate to: (a) Conduct, and encourage other organizations to conduct, studies of the problems of the State's older people; (b) Assist governmental and private agencies to coordinate their efforts on behalf of the aging and aged in order that such efforts be effective and that duplication and waste of effort be eliminated; (c) Promote and aid in the establishment of local programs and services for the aging and aged; (d) Conduct promotional activities and programs of public education on problems of the aging; (e) Review existing programs for the aging and make recommendations to the Governor and the General Assembly for improvements in such programs; and (f) Advise and make recommendations to the State department and the State office on aging, on the problems of and programs and services for the aging and aged. Funding is for staff support of 1.0 FTE to the Commission, who assists the Commission with special projects in addition to administrative duties.

#### SENIOR COMMUNITY SERVICES EMPLOYMENT

The Senior Community Service Employment Program (SCSEP) promotes useful, employment training opportunities in community service organizations for persons with low incomes, who are 55 years of age or older, pursuant to a grant received under Title V of the federal Older Americans Act. This program is entirely federally funded. Eligible participants are provided subsidized wages, training for skill enhancement or acquisition of skills, personal and employment counseling, and assistance in obtaining un-subsidized employment. The State enters into contracts with a local community-based organization to implement this program in parts of the metro area and southern Colorado. Additionally, the U.S. Department of Labor contracts directly with community-based organizations to provide services to the balance of the State. A small portion of an FTE is supported by SCSEP to administer the program.

#### **OLDER AMERICANS ACT PROGRAMS**

This line item provides funding for Area Agencies on Aging to contract with provider agencies to deliver a variety of services to older persons. Services provided include:

- Supportive services and senior centers, with functions that include case management, client representation, shopping assistance, transportation, chore services, personal care services, homemaker, adult day care, health screenings, legal services, and an ombudsman; and
- Nutrition services such as congregate and home delivered meals, nutrition screening, and nutrition education.

In general, services are available to individuals age 60 and over regardless of income or assets. While the federal government does not allow a means test, it does require that priority be given to those with the greatest social and economic need, with particular attention to low-income minority individuals and those who are frail, homebound, or otherwise isolated. Provider agencies request voluntary contributions from consumers for services.

#### NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM

The National Family Caregiver Support Program provides services to caregivers, so they may continue to provide care to family and loved ones who are age 60 and over. Beginning with H.B. 02-1420 in FY 2002-03, services have been provided to caregivers of individuals who are frail. Caregiver services include information, access assistance, respite care, counseling and training, and supplemental services. Additionally, the National Family Caregiver Support Program offers services to older individuals providing assistance for adult children with disabilities, and grandparents or other relative caregivers caring for children eighteen or younger.

## STATE OMBUDSMAN PROGRAM

The State Ombudsman Program is managed through a contract with a local community provider on behalf of individuals residing in long-term care facilities. Ombudsman provide advocacy and conflict resolution for residents of long-term care facilities. The contract includes both administrative funding to support the State Long Term Care Ombudsman, the State Program of All-Inclusive Care of the Elderly (PACE) Ombudsman and the State's Legal Assistance Developer. The

contracted agency provides training and technical support to the Area Agencies on Aging and local ombudsman staff as well as Legal Assistance providers.

#### STATE FUNDING FOR SENIOR SERVICES

This line item was created to provide services above and beyond the state match required for Older Americans Act (OAA) programs. The cash funds portion of the appropriation is from the Older Coloradans Cash Fund. That fund receives revenue from a diversion of funds that would otherwise go to the General Fund. Section 26-11-205.5 (2), C.R.S. (2020) requires that moneys appropriated from this fund are administered through the sixteen statewide Area Agencies on Aging, but the funds can be used with more flexibility than is afforded under OAA programs. The State Funding for Senior Services, along with the Older Americans Act funding, allows more than 57,000 older Coloradans to receive services including: personal care, assisted transportation, congregate meals, home-delivered meals, homemaker services, adult day care, transportation, and legal assistance. These services will help seniors to age-in-place in their communities and postpone or avoid more costly placements such as assisted living facilities or nursing homes.

## AREA AGENCIES ON AGING ADMINISTRATION

This line item identifies the federal funding for administration of each Area Agency on Aging (AAA). The AAAs develop and administer an area plan, to complement the state plan, for a comprehensive and coordinated system of programs in the planning and service area. The AAAs also assist older persons in obtaining their rights, benefits, and entitlements currently available under the law; identify special needs or barriers to maintaining personal independence. The AAAs involve individuals receiving services in the development and planning of services delivered within the area; assess the need for services within the planning and service area to determine the effectiveness of existing services available; and conduct public hearings on the needs and problems of older persons and on the area plan.

## **RESPITE SERVICES**

This line item was renamed from the Crimes Against At-Risk Persons Surcharge Fund to Respite Services during FY 2013-14 Figure Setting for the FY 2014-15 Long Bill. The majority of the line item consists of General Fund to support respite services for caregivers of older adults and children. A lesser portion of the line item is from cash funds from surcharges collected from the district courts and transferred from by the State Treasurer to the Department H.B. 12-1226

established surcharges on persons who are convicted of crimes against at-risk adults and at-risk juveniles. The surcharges vary and range from \$75 for a class 3 misdemeanor to \$1,500 for a class 2 felony and may be waived by the court. Once collected, the surcharge is transferred to the Crimes Against At-Risk Persons Surcharge Fund and appropriated to the Department of Human Services, State Unit on Aging for disbursement to the Fiscal Agent to provide respite services.

# (E) ADULT PROTECTIVE SERVICES

The Adult Protective Services (APS) program intervenes on behalf of at-risk adults to correct or alleviate situations in which actual or imminent danger of abuse, neglect, or exploitation (termed "mistreatment"), or self-neglect exists.

HB21-118 allows CDHS to establish a pilot practice for an alternative response to low-risk reports of mistreatment against at-risk adults. The two year pilot begins in FY 2021-22 and includes a robust evaluation and reporting requirement, with reports due to the legislature in 2025 and 2026 regarding pilot outcomes and feasibility of expansion of the pilot. The bill authorized funding to support the pilot evaluation and 1.0 FTE for the APS team to implement and oversee the new practice.

## STATE ADMINISTRATION

This line item was established for FY 2013-14 during FY 2012-13 Figure Setting to separate the APS funding from the previous funding source of Old Age Pension (OAP). This line is used to support personal services and operating expenses of the state APS program including travel, training, equipment, overhead and supplies. 8.5 FTE administer this program for the State.

#### ADULT PROTECTIVE SERVICES

This line item was established in FY 2013-14 during FY 2012-13 Figure Setting to separate the County Administration funds for APS functions from other program funds in the County Administration line.

APS administration funds are used to support personal services and operating expenses of the county APS programs, including APS staff, county attorney costs, travel, overhead, equipment, and supplies. Client services funds, which constitute \$814,000 of the total APS administrative allocation, are designated for the purchase of emergency, one-time, or short-term services needed to alleviate safety and risk concerns for APS clients.

# (F) INDIRECT COST ASSESSMENT

Indirect Cost Assessment provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cashfunded, reappropriated funded, or federal-funded program.



# **Department of Human Services Line Item Descriptions**

**Division of Youth Services** 

FY 2022-23 Budget Request

**NOVEMBER 1, 2021** 



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# (11) DIVISION OF YOUTH SERVICES

# (A) ADMINISTRATION

The line item appropriations in this section of the Division's Long Bill support administrative staff who establish program policies and procedures for the treatment of juveniles in the custody of the Department, monitor compliance, collect and report data, and provide strategic planning. Other duties include contract management, division staffing and operating forecasting and reconciliation activities and victim notification.

## PERSONAL SERVICES

This line item appropriation funds salaries, Public Employee's Retirement Association (PERA), and Medicare for administrative and management FTE in the Division. The personal services workload is largely driven by the number of programs that require supervision and strategic guidance as well as forecasting and reporting requirements, statistical data, and requests for information.

#### **OPERATING EXPENSES**

This line item appropriation provides operating funds for the administrative and management staff of the Division. Expenditures are for general office supplies, office equipment maintenance, miscellaneous purchases, repairs, and travel expenses.

## **VICTIM ASSISTANCE**

This line item appropriation provides funding for staff and operating expenses for the Victim Assistance Program to fulfill the Division's obligation to uphold a victim's constitutional right to be informed of certain offenders' movement through the youth corrections system.

The program is funded by a Victim Assistance and Law Enforcement (VALE) grant from the Division of Criminal Justice in the Department of Public Safety pursuant to Section 24-33.5-506 (1), C.R.S. (2017). Revenue for the State VALE fund is generated from a percentage of surcharges on criminal offenders levied at the judicial district level, with a small amount

coming from the Department of Corrections' Prison Industry Enhancement Program of which a certain amount must be used to provide direct services to crime victims.

## (B) INSTITUTIONAL PROGRAMS

This section of the Division's Long Bill line items supports thirteen State-operated detention and commitment facilities including assessment, treatment, education, medical, psychiatric, dental, nutrition and program services for juveniles while they are in an institution. Facilities include: Gilliam Youth Services Center in Denver, Pueblo Youth Services Center in Pueblo, Marvin W. Foote Youth Services Center in Englewood, Spring Creek Youth Services Center in Colorado Springs, Platte Valley Youth Services Center in Greeley, Grand Mesa Youth Services Center in Grand Junction, Mount View Youth Services Center in Denver, Aspire, Summit and Clear Creek Youth Services Centers at the Campus at Lookout Mountain in Golden, Zebulon Pike Youth Services Center in Colorado Springs, and Prairie Vista Youth Services Center in Brighton.

## PERSONAL SERVICES

This line item appropriation funds salaries for the majority of program, supervisory, and support staff at the Division's institutions. The majority of staffing costs are for 24-hour youth direct care staff who directly supervise and interact with youth. This line item supports FTE to appropriately staff secure State facilities based on national standards, reduce violence and injuries, increase safety and security, and enhance staff and youth engagement. Direct facility staffing includes behavioral health and other staff providing behavioral health support and treatment, critical food services, staff Development, Quality Assurance, Monitoring, and finance personnel as well as Department Administrative personnel.

## **OPERATING EXPENSES**

This line item appropriation funds the operation of the Division's facilities including such expenses as clothing for juveniles, custodial and laundry supplies, communication expenses including digital-trunked radios, office equipment, and facility maintenance items such as mattresses, carpeting, and furniture. Food and food service supplies account for between 40-50% of the total line item. The federal Child Nutrition Program funds the majority of food costs for youth in State institutions. The line item includes reappropriated funds from the Department of Education for the federal Child Nutrition Program.

## **MEDICAL SERVICES**

Medical Services was historically an integrated component of Institutional Personal Services and Operating Expenses lines. In FY 1997-98, it became a separate program line to help identify escalating medical costs and provide information to better manage medical expenses. This line item appropriation funds the personnel, contractual, and operating costs associated with medical services provided to youth who are in a State facility. The following details the three components of the funding:

- (1) Personal Services This portion of the line item funding pays for staff in State-operated facilities that provide routine primary medical care and administer medications. Other personnel include FTE engaged in substance use services, psychological and neuropsychological evaluation, sex offense specific treatment and mental health needs, as well as management and finance support.
- (2) Contract Services The Division maintains a single contract with a third-party medical management entity that manages the relationships, rates, and billings for hospitals, emergency rooms, ambulances, psychiatry and other specialty care which is provided offsite from a facility. These services are for committed youth in a State facility. Youth in contract facilities are eligible for Medicaid; thus, the billings for specialty care do not run through the Division. The Division spends smaller amounts on contracts for infrequently used on-site medical services, such as some diagnostic services and hazardous waste removal, and for contracts for medical services in areas where it is difficult to recruit State FTE.
- (3) Operating Expenses This portion of the line item funding pays for medical operating expenses in State-owned facilities. These are generally operating supplies for medical clinics for general first aid needs and treatment of minor illness or injury and include supplies to comply with hazardous waste disposal requirements. This line item also includes general operating expenses for both direct care personnel and personnel who administer the medical services function. General operating expenses include office supplies, office equipment maintenance, miscellaneous purchases, furniture, personal computers, repairs, and travel expenses.

## **EDUCATIONAL PROGRAMS**

This line item funds personal services and operating expenses associated with education in State-operated commitment facilities. In detention facilities, education is the responsibility of local school districts and is paid for through State per pupil revenue (PPR) generated by the local school district. The Division provides education in commitment facilities by using State FTE or contracting with school districts or private contractors. In State facilities, educational programs serve

youth with a wide range of educational needs, achievement levels and grade levels including both secondary, post-secondary, and vocational education. There are two sources of federal funds that are reappropriated from the Department of Education: (1) Title I of the Elementary and Secondary Education Act for Neglected, Delinquent or At Risk Youth; and (2) the Individuals with Disabilities Education Act for special education. Recent changes in staffing include the addition of funding for 7.0 FTE plus contracted FTE to provide more in-depth special education services. This appropriation also includes general operating expenses for both direct care personnel and personnel who administer educational programs function. General operating expenses include educational and office supplies, equipment maintenance, furniture, personal computers, repairs, travel expenses and miscellaneous purchases.

#### PREVENTION/INTERVENTION SERVICES

This line item appropriation provides spending authority for an intra-agency agreement between the Division and the Department's Office of Behavioral Health (OBH). These funds support substance use treatment services, as well as training for certified addictions counselors in the Division's facilities. The federal funds are transferred to the Division from OBH and are reflected as reappropriated funds in the Long Bill.

# (C) COMMUNITY PROGRAMS

This section of the Division's Long Bill line items funds a number of community programs: (1) Senate Bill 91-094 Programs for juveniles referred to the detention continuum, (2) Contract placements of juveniles with lower risk levels into community settings, (3) Client management transition and parole services, and (4) the Managed Care Pilot Project operated in Boulder County.

#### PERSONAL SERVICES

This line item appropriation supports personal services for regional administrators, client managers, and support staff who are responsible for overseeing contract placements and the overall operation of services in the Division's four management regions. Case management includes oversight of a committed juvenile's case from the point of commitment through the end of parole. The source of cash funds in this appropriation is a reimbursement by the operator of the Ridge View Youth Services Center (Ridge View) facility to offset the cost of monitoring the facility pursuant to Section 19-2-411.5 (2)(e), C.R.S. (2018). The source of federal funds in this appropriation is a result of the revenue realized from

billing for Federal Title IV-E administration. This appropriation may also fund management for the oversight of the Senate Bill 91-094 Programs.

#### **OPERATING EXPENSES**

This line item appropriation provides operating funds to support the administration of community programs. General operating expenses include office supplies, office equipment maintenance, furniture, personal computers, repairs, and travel expenses and miscellaneous purchases. The single largest expenditure category from this line item is for fuel costs, due to the mobile nature of case management work. The source of cash funds is fees collected from the Ridge View contractor to offset the cost of monitoring the Ridge View facility, which is required pursuant to Section 19-2-411.5 (2)(e), C.R.S. (2018). The source of federal funds in this appropriation is a result of the revenue from billing for Federal Title IV-E administration.

#### PURCHASE OF CONTRACT PLACEMENTS

This line item appropriation provides funding for the Division to contract with private for-profit and non-profit organizations who provide residential services to house and treat lower risk youth who do not require placement in the divisions 24/7 secure facilities. The source of federal funds is Title IV-E funding which provides assistance to States by subsidizing a portion of the cost associated with maintaining foster care youth in out-of-home placements. Youth must meet eligibility criteria based on family income and committing circumstances (i.e., findings by the court that the best interests of the child and reasonable efforts to avoid out-of-home placement have been attempted). The placement must be in a non-institutional, non-secure, community-based setting. A small percent of the Division's youth and placements meet the Title IV-E eligibility criteria.

The source of reappropriated funds is Medicaid funds appropriated to the Department of Health Care Policy and Financing (HCPF). These funds are for fee-for-service mental health services, which are billed directly to Medicaid from treatment providers. Expenditures are transferred to the Division to accurately reflect a majority of costs of committed youth.

#### MANAGED CARE PROJECT

This line item appropriation began in FY 1992-93 as an initiative to explore the viability of a managed care approach to control population growth in the committed population in Boulder County. It is used to fund the Boulder County Integrated Managed Partnership for Adolescent Community Treatment (IMPACT), which is a managed care agreement between the

Division and Boulder County for administering services to delinquent youth. The agreement caps the State funding that can be used for committed youth in Boulder County, as well as caps the number of youth from Boulder County who can be served in the commitment system. The IMPACT program is a community-based effort to integrate formerly categorical funding streams (Boulder County Department of Housing and Human Services, Boulder County Mental Health, and the Division of Youth Services) and programs with a focus on accountability and positive outcomes for youth. IMPACT's mission is to perform gate keeping, assessment, concurrent utilization review and quality assurance reviews for delinquent youth who are in or at risk of institutional placement.

## **COLORADO YOUTH DETENTION CONTINUUM (SB91-94)**

Senate Bill 91-094 authorized the creation of local, judicial district-based programming designed to provide community-based detention services for pre-adjudicated and adjudicated youth. These programs are tasked with reducing the overall incarcerated youth population by providing programmed specifically aimed at reducing the number of admissions into the Division of Youth Services facilities or reducing the length of stay for youth placed in Division facilities. Senate Bill 91-094 programs serve youth through non-secure, community-based services such as day reporting, electronic home monitoring, and/or enhanced community supervision, as well as providing detention case management for youth who do remain in secure Division of Youth Services facilities. Senate Bill 91-094 funds are also used by each judicial district to implement uniform intake screenings and assessments of all youth taken into custody to determine the most appropriate placement for each youth.

The Colorado General Assembly appropriates funds for Senate Bill 91-094 programs and the Statewide Advisory Board is responsible for developing an allocation formula and allocating the funds. The line item consists of General Fund and cash funds from the Marijuana Tax Cash Fund. The appropriation is allocated by formula to each of the State's 22 judicial districts, with the exception of a small portion of the line item that is retained by the Division for training, technical assistance, research, evaluation and audits.

#### PAROLE PROGRAM SERVICES

This line item funds activities that are designed to assist youth with successful transition from commitment status to through completion of parole. Client Manager/Parole Officers are responsible for the supervision, development, implementation, and monitoring of a parole plan of all DYS committed youth released to parole. Services purchased to support transition and parole services are almost wholly spent with private providers managed through a Provider

Managed Network contracted by the Division. Services may be provided to youth while still in a State facility or contracted placement in advance of parole.

## JUVENILE SEX OFFENDER STAFF TRAINING

This line item was added through a supplemental appropriation in FY 2002-03 for the purpose of funding training costs for the Division and Division of Child Welfare staff. Pursuant to the provisions of HB 00-1317, the Sex Offender Management Board (SOMB) was required to develop standards for the identification and evaluation of juvenile sex offenders. The standards developed by the SOMB are founded on best practices which include an emphasis on informed supervision. Implementing this concept involves a list of supervisory roles and duties for all individuals who have a direct care or custodial relationship with a juvenile sex offender, which includes facility staff, client managers, parents, teachers, and coaches. This line item is funded by cash funds which are from the Sex Offender Surcharge Fund created in Section 18-21-103(3), C.R.S. (2017).

HB 07-1093, "Concerning sexual conduct occurring in penal institutions," created the General Fund portion of this line item. Funds are expended in this program to address Prison Rape Elimination Act (PREA) concerns.

## (D) INDIRECT COST ASSESSMENT

Indirect Cost Assessment provides funding for departmental or statewide overhead costs by the programs in this Long Bill group. The assessment represents the expected collection of statewide and departmental indirect costs from a cashfunded, including reappropriated funds, or federal-funded program.