Schedule 13
Change Request for FY 08-09 Budget Request Cycle

Decision Item FY 08-09 ☑ Base Reduction Item FY 08-09 ☐ Supplemental FY 07-08 ☐ Budget Request Amendment FY 08-09 ☐

Request Title: Division for Developmental Disabilites New Resources Request
Department: Human Services
Priority Number: 4

Dept. Approval by: [signature] **Date:** 10/17/07
OSPB Approval: [signature] **Date:** 10/25/07 for 11/1/07

	Fund	1 Prior-Year Actual FY 06-07	2 Appropriation FY 07-08	3 Supplemental Request FY 07-08	4 Total Revised Request FY 07-08	5 Base Request FY 08-09	6 Decision/ Base Reduction FY 08-09	November 1 Request FY 08-09	8 Budget Amendment FY 08-09	9 Total Revised Request FY 08-09	10 Change from Base (Column 5) FY 09-10
Total of All Line Items	Total	0	299,864,826	0	299,864,826	302,677,494	8,265,672	310,943,166	0	310,943,166	16,601,465
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	0	9,509,310	0	9,509,310	9,483,153	0	9,483,153	0	9,483,153	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE	0	290,355,516	0	290,355,516	293,194,341	8,265,672	301,460,013	0	301,460,013	16,601,465
	FF	0	0	0	0	0	0	0	0	0	0
	MCF	0	257,169,230	0	257,169,230	259,783,974	7,341,299	267,125,273	0	267,125,273	14,740,743
	MGF	0	128,551,131	0	128,551,131	129,858,504	3,670,651	133,529,155	0	133,529,155	7,370,371
	NGF	0	138,060,441	0	138,060,441	139,341,657	3,670,651	143,012,308	0	143,012,308	7,370,371
((9) Services for People with Disabilities (A) Developmental Disability Services (1) Community Services - (b) Program Costs - Adult Comprehensive Services for 66 General Fund and ~~3,806~~ 3,957 Medicaid resources	Total	0	247,005,842	0	247,005,842	249,601,798	8,006,126	257,607,924	0	257,607,924	16,082,373
	FTE	0.00	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	0	1,652,225	0	1,652,225	1,626,068	0	1,626,068	0	1,626,068	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE	0	245,353,617	0	245,353,617	247,975,730	8,006,126	255,981,856	0	255,981,856	16,082,373
	FF	0	0	0	0	0	0	0	0	0	0
	MCF	0	214,821,368	0	214,821,368	217,230,236	7,094,730	224,324,966	0	224,324,966	14,247,605
	MGF	0	107,377,201	0	107,377,201	108,581,636	3,547,366	112,129,002	0	112,129,002	7,123,802
	NGF	0	109,029,426	0	109,029,426	110,207,704	3,547,366	113,755,070	0	113,755,070	7,123,802
((9) Services for People with Disabilities (A) Developmental Disability Services (1) Community Services - (b) Program Costs - Adult Adult Supported Living Services for 692 General Fund and ~~2,892~~ 2,920 Medicaid resources	Total	0	52,858,984	0	52,858,984	53,075,696	259,546	53,335,242	0	53,335,242	519,092
	FTE	0.00	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	0	7,857,085	0	7,857,085	7,857,085	0	7,857,085	0	7,857,085	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE	0	45,001,899	0	45,001,899	45,218,611	259,546	45,478,157	0	45,478,157	519,092
	FF	0	0	0	0	0	0	0	0	0	0
	MCF	0	42,347,862	0	42,347,862	42,553,738	246,569	42,800,307	0	42,800,307	493,138
	MGF	0	21,173,930	0	21,173,930	21,276,868	123,285	21,400,153	0	21,400,153	246,569
	NGF	0	29,031,015	0	29,031,015	29,133,953	123,285	29,257,238	0	29,257,238	246,569

Schedule 13
Change Request for FY 08-09 Budget Request Cycle

Decision Item FY 08-09 ☑ **Base Reduction Item FY 08-09** ☐ **Supplemental FY 07-08** ☐ **Budget Request Amendment FY 08-09** ☐

Request Title: Division for Developmental Disabilites New Resources Request

Department: Human Services

Priority Number: 4

Dept. Approval by: **Date:**

OSPB Approval: **Date:**

	Fund	1	2	3	4	5	6	7	8	9	10
		Prior-Year Actual FY 06-07	Appropriation FY 07-08	Supplemental Request FY 07-08	Total Revised Request FY 07-08	Base Request FY 08-09	Decision/ Base Reduction FY 08-09	November 1 Request FY 08-09	Budget Amendment FY 08-09	Total Revised Request FY 08-09	Change from Base (Column 5) FY 09-10

Letternote revised text: Of this amount **$291,777,507** shall be from Medicaid funds transferred from the Department of Health Care Policy and Financing, **$27,168,865** shall be from client cash sources, and **$9,579,513** (L) shall be from local matching funds, **$2,808,580 shall be from the Early Intervention Services Trust fund,** and $491,314 shall be transferred from the Division of Vocational Rehabilitation.

Cash Fund name/number, Federal Fund Grant name: Title XIX Medicaid

IT Request: ☐ Yes ☑ No

Request Affects Other Departments: ☑ Yes ☐ No **If Yes, List Other Departments Here:** Health Care Policy and Financing

DECISION ITEM CHANGE REQUEST for FY 2008-09 BUDGET REQUEST CYCLE

Department:	Human Services
Priority Number:	4
Change Request Title:	Division for Developmental Disabilities New Resources Request

SELECT ONE (click on box):

☒ Decision Item FY 2008-09
☐ Base Reduction Item FY 2008-09
☐ Supplemental Request FY 2007-08
☐ Budget Request Amendment FY 2008-09

SELECT ONE (click on box):

Supplemental or Budget Request Amendment Criterion:

☒ Not a Supplemental or Budget Request Amendment
☐ An emergency
☐ A technical error which has a substantial effect on the operation of the program
☐ New data resulting in substantial changes in funding needs
☐ Unforeseen contingency such as a significant workload change

Short Summary of Request:

Foster Care Transition – The Department is requesting 45 resources to serve young adults with developmental disabilities aging out of the Foster Care system who need 24 hour Comprehensive Services. The needs of youth with developmental disabilities over the age of eighteen years in the Foster Care system are reviewed each year. This process allows the State to plan for youth that age out of the Child Welfare system at age 21 and require continued comprehensive 24-hour care. This request would provide Foster Care Transition Comprehensive Services for approximately 45 individuals for an average of six months in FY 2008-09 at a cost to the State of $2,295,113 Medicaid Cash Funds. These resources are Medicaid funded and require a 50 percent General Fund match of $1,147,557.

Emergency Resources – The Department is requesting 62 resources to serve adults in emergency/crisis situations due to loss of their home, death or infirmity of caregivers, or abuse/neglect, and for whom no resource is available through CCB turnover. This request would provide Emergency Services for approximately 62 individuals for an average of six months in FY 2008-09 at a cost of $2,806,363 Medicaid Cash Funds.

These resources are Medicaid funded and require a 50 percent General Fund match of $1,403,182.

Transition resources from Children's Extensive Support Program to Supported Living Services – This request is also for 28 resources for youth with intensive disabilities who are aging out of the Children's Extensive Supports (CES) program and in need of adult Supported Living Services (SLS) and who are at risk for services if no other program is available. This request would provide Supported Living Services for approximately 28 individuals for an average of six months in FY 2008-09 at a cost of $246,569 Medicaid Cash Funds. These resources are Medicaid funded and require a 50 percent General Fund match of $123,285.

Wait List Resources – This request is for 44 Comprehensive resources that includes adults on the wait list for Comprehensive Services who live in the home of parents, siblings or other relatives and have been waiting for Comprehensive Services for an extended period of time. Many of these adults are considered a high risk for out-of-home placement because they live in precarious situations due to aging and/or ailing caregivers. This request would provide comprehensive services to 44 adults for an average of six months at a cost of $1,993,254 Medicaid Cash Funds in FY 2008-09. These resources are Medicaid funded and require a 50 percent General Fund match of $996,627.

Background and Appropriation History:

Comprehensive and Supported Living Services for Adults – These Services for adults are provided primarily through the Community Centered Board (CCB) system.

Community Centered Board system - Comprehensive Services for adults in the CCB system are intended to meet the needs of individuals with developmental disabilities who require extensive supports to live safely in the community, and who do not have the resources available to meet their needs. Comprehensive Services include group and individualized residential services in a variety of community-based settings, employment or other day services, and transportation. These services include access to 24-hour

supervision. The day services component offers support, habilitation, education, and training on work habits and work-related skills, so that adults receiving services can acquire and maintain paid employment, and can attain maximum functioning in the community.

The following table provides a general overview of Comprehensive Services for adults served by the CCB system. Information* is from DDD Quarterly Management Reports.

Comprehensive Services for Adults by the CCB system	FY 2001-02	FY 2002-03	FY 2003-04	FY2004-05	FY 2005-06
Number in Services during June*	3,371	3,496	3,582	3,607	3,652

Foster Care -Since 1987, the Division for Developmental Disabilities (DDD) has worked with the Child Welfare system to assure funding and services for youth with developmental disabilities who need to transition at age 21 from one system to the other. The Division for Developmental Disabilities, which is the state office that manages services for persons with developmental disabilities, is responsible for developing and submitting budget requests to the legislature so that new funding needed for services for youth transitioning from foster care to the Community Centered Board (CCB) system may be appropriated. The Division for Developmental Disabilities has made a long standing commitment to request Comprehensive resources (funding for 24-hour residential and day program services) for youth who have been placed in out-of-home foster care and are transitioning into long-term services in the adult CCB system.

The County Departments of Human Services review all youths from the age of 14 through age 20 who are placed in foster care that are suspected of having a developmental disability. The purpose of this review is to assure that all persons potentially eligible for DD services are identified and referred to the appropriate CCB.

CCBs notified DDD in January 2007 of all youths they were aware of who will turn 21 in FY 2008-09 (i.e. at least 18 months prior to their 21st birthday, possibly up to 29 months prior). This includes youth in foster care. In addition, CCBs must also review by early

January of each year, information submitted to DDD previously regarding all youths who will need a resource in the coming fiscal year (i.e. youths who will turn 21 in the fiscal year starting July 1st).

Emergency Resources - Historical data indicates that a significant number of adults with developmental disabilities will require Comprehensive Services due to emergency situations. Prior to FY 2006-07, when CCBs had the ability to provide over-service, DDD received 20 to 25 requests for resources for individuals that needed Comprehensive Services, as they are a danger to themselves or others, in abusive or neglectful situations, or at risk of homelessness. At the time of the emergency request to DDD, Comprehensive Services are not available at the local level to meet these individual crises. Included in this number are individuals previously not identified in the developmental disabilities data system and therefore not on the current Comprehensive Services waiting list. These individuals are in crisis at the time of presentation to the DD system and require immediate attention. In addition, individuals can go into crisis due to the inability of a caregiver to continue to provide the supervision and support necessary.

Supported Living Services – These services are aimed at adults who can either live independently with limited to moderate supports or who, if they need more extensive support, are provided this support by other persons such as their family. Supported Living Services for adults offers a variety of individualized and flexible supports to enable individuals to live in their own or their family's home and avoid or delay more costly Comprehensive Services. DDD must plan for 28 youth identified as aging out of the Children's Extensive Support (CES) program in FY 2008-09. As the CES program serves children under the age of 18 years, who are at high risk for out-of-home placement (i.e. Comprehensive Services) and require near constant line-of-sight supervision, youth aging out of this program are considered a high priority for continued support and services. This request will provide services for approximately 28 youth for six months whose needs are critical and urgent, as they will be transitioning from the CES program at age 18.

Comprehensive Community Waiting List - Colorado has long had a waiting list for Comprehensive Services. Persons on the waiting list are adults who primarily live in the

home of parents, siblings or other relatives and have been waiting for Comprehensive Services for an extended period of time. Many of these adults are considered a high risk for out-of-home placement because they are in precarious situations due to aging and/or ailing caregivers or other factors.

Colorado has experienced limited growth in resources for Comprehensive Services for many years. Resources have typically been directed to youth with developmental disabilities transitioning from foster care, adults in extreme emergency situations and persons moving from state-operated Regional Centers. This request would provide comprehensive services to 44 adults on the waiting list for an average of six months in FY 2007-08.

The following table shows the resources requested and approved for the period FY 2004-05 through FY 2007-08.

	Request FY 2004-05	Approved FY 2004-05	Request FY 2005-06	Approved FY 2005-06	Request FY 2006-07	Approved FY 2006-07	Request FY 2007-08	Approved FY 2007-08
Comprehensive: Foster Care Transition	49	36	48	48	64	60	39	39
Comprehensive: Emergencies	15	0	14	14	15	19	30	30
Comprehensive: Waiting List	7	0	0	0	0	90	10	9
CES to SLS Transition	0	0	22	22	9	13	24	24

The Foster Care, Emergency, Wait List and SLS resources are appropriated in the Adult Community Program line in FY 2006-07. The following table shows the Adult Community Program line changes in appropriation for FY 2006-07 to FY 2007-08. The Supplemental Bill was SB 07-165 and the Long Bills are for 2006 HB 06-1385 and for 2007 SB 07-239.

Adult Program Costs	Total	General Fund	Cash Funds Exempt	Medicaid Cash Fund	Medicaid General Fund	Net General Fund
HB 06-1385 FY 2006-07 Long Bill	$294,358,936	$12,438,159	$281,920,777	$247,952,288	$123,913,507	$136,351,666
FY 2006-07 S01-C Medicaid Waiver Adj.	($3,741,725)	$3,741,725	($7,483,450)	($7,483,450)	($3,741,725)	$0
FY 2006-07 S04 one time non-Medicaid Case Mgt	$823,283	$823,283	$0	$0	$0	$823,283
Add 07 S#2 Local Funds transfer	$15,215,890	$0	$15,215,890	$15,215,890	$7,607,945	$7,607,945
SB 07-165 Supplemental Bill for FY 2006-07	$306,656,384	$17,003,167	$289,653,217	$255,684,728	$127,779,727	$144,782,894
GF for FY 2006-07 Medicaid Cash Accounting Add-On to SB 07-239 Long Bill	($6,390,063)	$7,738,019	($14,128,082)	($14,128,082)	($7,064,041)	$673,978
Total Appropriation FY 2006-07	$300,266,321	$24,741,186	$275,525,135	$241,556,646	$120,715,686	$145,456,872
Supplemental 6-20-07	($9,700,759)	($1,309,129)	($8,391,630)	($8,391,630)	($4,195,815)	($5,504,944)
Revised Adult Program Appropriation FY 2006-07	$290,565,562	$23,432,057	$267,133,505	$233,165,016	$116,519,871	$139,951,928

The appropriation for Adult Community Programs and Children's Programs were consolidated in FY 2007-08. The following table shows the two programs added together for FY 2006-07 for comparison purposes.

Total DDD Program Costs	Total	General Fund	Cash Funds Exempt	Medicaid Cash Fund	Medicaid General Fund	Net General Fund
Revised Adult Program Appropriation FY 2006-07	$290,565,562	$23,432,057	$267,133,505	$233,165,016	$116,519,871	$139,951,928
Children's Program Appropriation FY 2006-07	$23,463,571	$16,882,166	$6,581,405	$5,346,267	$2,673,134	$19,555,300
Supplemental 6-20-07	($403,517)	$0	($403,517)	($403,517)	($201,759)	($201,759)
Total Community Program Appropriation FY 2006-07	$313,625,616	$40,314,223	$273,311,393	$238,107,766	$118,991,246	$159,305,469

The following table shows the computations for the FY 2007-08 Adult Community Program and Children's Program appropriations as consolidated in the Long Bill (SB07-239) as Program Costs.

DDD Programs	Total	General Fund	Cash Funds Exempt	Medicaid	Medicaid General Fund	Net General Fund
FY 2007-08 Adult Program Costs						
Base Calculation						
HB 06-1385 FY 2006-07 Long Bill	$294,358,936	$12,438,159	$281,920,777	$247,952,288	$123,913,507	$136,351,666
Supplemental 1-C Convert 6 months funds for new 90 comp 60 SLS from Med to GF	($1,902,791)	$1,902,791	($3,805,582)	($3,805,582)	($1,902,791)	$0
Supplemental 1-C Convert 6 months funds for COLA	($1,838,934)	$1,838,934	($3,677,868)	($3,677,868)	($1,838,934)	$0
Supplemental #2 - Local Funds Match	$15,215,890	$0	$15,215,890	$15,215,890	$7,607,945	$7,607,945

DDD Programs	Total	General Fund	Cash Funds Exempt	Medicaid	Medicaid General Fund	Net General Fund
DD non-Medicaid case management functions	$823,283	$823,283	$0	$0	$0	$823,283
Medicaid cash accounting adjustment	($6,390,063)	$7,738,019	($14,128,082)	($14,128,082)	($7,064,041)	$673,978
Subtotal - base FY 2006-07	$300,266,321	$24,741,186	$275,525,135	$241,556,646	$120,715,686	$145,456,872
Annualize one-time 1331 Supplemental 1-C (60/90 resources)	$1,902,791	($1,902,791)	$3,805,582	$3,805,582	$1,902,791	$0
Annualize one-time 1331 Supplemental 1-C (COLA)	$1,838,934	($1,838,934)	$3,677,868	$3,677,868	$1,838,934	$0
Annualize FY 2006-07 DI #1	$3,429,729	$0	$3,429,729	$3,119,463	$1,559,733	$1,559,733
Annualize FY 2006-07 CES Resources	$0	($18,736)	$18,736	$18,736	$6,183	($12,553)
Annualize CCMS adjustments	$301,675	$59,058	$242,617	$242,617	$121,309	$180,367
Annualize FY 2006-07 Med cash accounting shift	$6,390,063	($7,738,019)	$14,128,082	$14,128,082	$7,064,041	($673,978)
Subtotal - Annualization	$13,863,192	($11,439,422)	$25,302,614	$24,992,348	$12,492,991	$1,053,569
Total base FY 2007-08	**$314,129,513**	**$13,301,764**	**$300,827,749**	**$266,548,994**	**$133,208,677**	**$146,510,441**
Leap Year Adjustment	$822,865	$26,157	$796,708	$705,941	$352,971	$379,128
Decision Item #3 (Including COLA and SSI increases)						
New Foster Care resources	$1,701,424	$0	$1,701,424	$1,549,661	$774,831	$774,831
New Emergency resources	$1,337,338	$0	$1,337,338	$1,220,109	$610,055	$610,055
New Wait List Resources	$380,059	$0	$380,059	$345,039	$172,520	$172,520
New Supported Living Resources	$216,712	$0	$216,712	$205,876	$102,938	$102,938
Case Mgt for new CES Resources	$0	$0	$0	$0	$0	$0
Case Mgt for new EI Resources	$113,993	$78,539	$35,454	$29,754	$14,877	$93,416
Total Decision Item	**$3,749,526**	**$78,539**	**$3,670,987**	**$3,350,439**	**$1,675,221**	**$1,753,760**
Total COLA (base)	$4,312,692	$199,526	$4,113,166	$3,998,235	$1,998,130	$2,197,656

DDD Programs	Total	General Fund	Cash Funds Exempt	Medicaid	Medicaid General Fund	Net General Fund
SBA 3 Community Contract and Management System	($148,400)	($44,520)	($103,880)	($103,880)	($51,940)	($96,460)
PASARR Adjustment	$0	$0	$0	$0	($386)	($386)
TOTAL - Adult Funding	**$322,866,196**	**$13,561,466**	**$309,304,730**	**$274,499,729**	**$137,182,673**	**$150,744,139**
Children's Program's Costs						
FY 2006-07 Long Bill	$24,848,720	$16,699,924	$8,148,796	$6,913,658	$2,971,054	$19,670,978
Supplemental 1-E	$182,242	$182,242	$0	$0	$0	$182,242
Supplemental 2 B requested	($1,567,391)	$0	($1,567,391)	($1,567,391)	($673,978)	($673,978)
Subtotal - base FY 2006-07	$23,463,571	$16,882,166	$6,581,405	$5,346,267	$2,297,076	$19,179,242
Annualize June 2006 1331 Supplemental B	($182,242)	($182,242)	$0	$0	$0	($182,242)
Annualize Supplemental 2B	$1,567,391	$0	$1,567,391	$1,567,391	$673,978	$673,978
Annualize 30 new CES slots (1/2 year trade GF/Medicaid)	$0	($270,560)	$270,560	$270,560	$89,285	($181,275)
Subtotal - Annualization FY 2007-08	$1,385,149	($452,802)	$1,837,951	$1,837,951	$763,263	$310,461
FY 2007-08 Base	**$24,848,720**	**$16,429,364**	**$8,419,356**	**$7,184,218**	**$3,060,339**	**$19,489,703**
DI #3 -Early Intervention Resources	$537,432	$510,560	$26,872	$0	$0	$510,560
FY 2007-08 1.5% COLA	$372,730	$246,440	$126,290	$107,763	$45,905	$292,346
Subtotal - Decision Items	**$910,162**	**$757,000**	**$153,162**	**$107,763**	**$45,905**	**$802,906**
SB07-004 Early Intervention	**$2,808,580**	$0	**$2,808,580**	$0	$0	$0
TOTAL - Children's Funding	**$28,567,462**	**$17,186,364**	**$11,381,098**	**$7,291,981**	**$3,106,244**	**$20,292,609**
Total Adult and Children's Program Lines FY 2007-08 Combined -Program Costs	**$351,433,658**	**$30,747,830**	**$320,685,828**	**$281,791,710**	**$140,288,917**	**$171,036,748**

General Description of Request:

Foster Care - Some children with developmental disabilities receive services in out-of-home placements through the Child Welfare System. The Child Welfare System must terminate these services when the individual reaches the age of 21. Most of these individuals have been in out-of-home placements for several years. For a variety of reasons, typically abuse and neglect issues or the inability of the natural family to provide for the complex needs of the child, returning to the natural family home is not an option for these young adults. In addition, due to their developmental disability and ongoing need for supervision and care, these individuals cannot be emancipated at age 21. DDD and Child Welfare Services, in conjunction with the County Departments of Social Services, have identified 45 youths with developmental disabilities currently in the Child Welfare System who will reach the age of 21 during FY 2008-09. Since 1987, DDD and Child Welfare have worked together to assure each youth in Foster Care is provided with appropriate adult DD services and supports by age 21. These individuals have been identified by name by the County Departments of Social Services and reviewed by the Community Centered Boards (CCBs). The dates of birth of these individuals are the basis for the transition dates.

Emergency - Of the 1,368 individuals identified as waiting for Comprehensive Services in the next two years, an estimated 10 percent of these individuals are age 40 or older and are living with their parents. At any time, these caregivers may be unable to continue to provide supervision and care for their "adult children". DDD anticipates more on-going emergency resource requests than in prior years since CCBs, under the new Medicaid fee for service system, can no longer meet emergency needs through over-service, thereby placing the onus directly on the State to provide an appropriate number of Comprehensive resources targeted for adults in emergency/crisis situations. DDD received 61 requests for Emergency resources in FY 2006-07.

CES to SLS – Youth who meet all the high-risk criteria, and are aging out of the CES program at age 18 but who can remain in the family home with on-going services through Living will require new SLS resources. Supported Living Resources will help maintain the youth in the family home and postpone the need for higher cost Comprehensive Services.

Wait List - DDD has identified additional needs in the areas of Comprehensive Services (both Emergencies and Wait List), Supported Living Services and Family Support Services programs. The current Wait List numbers show 1,368 individuals waiting for Comprehensive Services, 2,324 individuals waiting for Supported Living Services and 4,178 individuals waiting for Family Support Services Program. In addition, in prior years, DDD has requested and been approved for additional resources in each of these service categories. (See table page 6) Those appropriated resources have provided for the following:

- Youth with developmental disabilities transitioning from out-of-home foster care placement have continuity of services by receiving adult Comprehensive Services.
- Adults in emergency/crisis situations due to loss of their home, death, or infirmity of caregivers and/or abuse/neglect for whom no resource is available through CCB turnover are served.
- Comprehensive Community Waiting List - Persons on the waiting list are adults who primarily live in the home of parents, siblings or other relatives and have been waiting for Comprehensive Services for an extended period of time. Many of these adults are considered a high risk for out-of-home placement because they are in precarious situations due to aging and/or ailing caregivers or other factors. Funding for persons on the Comprehensive Services waiting list is a significant need.
- Youth, who meet all the high-risk criteria, and are aging out of the CES program at age 18 but who can remain in the family home with on-going services through Supported Living.

DDD has few actions to take without being able to request additional resources in the categories described above. Due to significant waiting lists, the high demand for services, and the inability of local CCBs to address emergency and high risk situation other than through limited turnover of resources, vulnerable Colorado citizens will not have access to needed services.

SB 07-239 (the FY 2006-07 Long Bill) combined Children and Adult Program costs into a single appropriated line Program Costs, which incorporates each of the individual types of service including Adult Comprehensive Services and Supported Living Services. According to Footnote 76 "It is the intent of the General Assembly that expenditures for these services be recorded only against the Long Bill Group total for Program Costs." The following table details how the base request affects the total line (9) Services for People with Disabilities (A) Developmental Disability Services (1) Community Services – (b) Program Costs:

	Base Request FY 2008-09	Decision/ Base Reduction FY 2008-09	November 1 Request FY 2008-09	Full Year Change from Base FY 2009-10
Total	$354,360,319	$6,010,745	$360,371,064	$12,021,490
FTE	0.0	0.0	0.0	0.0
GF	$30,800,212	$0	$30,800,212	$0
GFE	$0	$0	$0	$0
CF	$0	$0	$0	$0
CFE	$323,560,107	$6,010,745	$329,570,852	$12,021,490
FF	$0	$0	$0	$0
MCF	$284,436,208	$5,348,045	$289,784,253	$10,696,090
MGF	$141,611,168	$2,674,024	$144,285,192	$5,348,045
NGF	$172,411,380	$2,674,024	$175,085,404	$5,348,045

Consequences if Not Funded:

Not funding this request could place persons in inappropriate and high cost settings such as state-operated Regional Centers or other intermediate care facilities (if space is available), Mental Health Institutes (MHI) or nursing facilities. Vacancies as a result of normal attrition in CCB or Regional Center programs would need to be filled by youth from the Child Welfare System leaving little ability for the CCB or Regional Center system to address emergencies or people on the Waiting List. Additionally, the

inappropriate placement of youth and persons experiencing crisis situations into nursing facilities is in violation of Federal Pre-Admission Screening and Annual Resident Review (PASARR) requirements and similarly results in noncompliance with the Olmstead ruling and could place DD Medicaid funding at risk. The key issue relating to youth needing to leave the Foster Care system is that the State of Colorado has already assumed responsibility for these individuals. Due to their developmental disability, these individuals will continue to need a place to live, supervision, care and habilitation.

Calculations for Request:

Summary of Request FY 2008-09	Total Funds	Cash Funds Exempt	Medicaid Cash Funds	Medicaid General Funds	Net General Fund
Total Request FY 2008-09	$8,265,672	$8,265,672	$7,341,299	$3,670,651	$3,670,651
Community Program Foster Care Resources (1/2 year)	$2,576,237	$2,576,237	$2,295,113	$1,147,557	$1,147,557
Emergency Resources (1/2 Year)	$3,174,962	$3,174,962	$2,806,363	$1,403,182	$1,403,182
Wait List (1/2 Year)	$2,254,927	$2,254,927	$1,993,254	$996,627	$996,627
CES to SLS (1/2 Year)	$259,546	$259,546	$246,569	$123,285	$123,285

Summary of Request FY 2009-10	Total Funds	Cash Funds Exempt	Medicaid Cash Funds	Medicaid General Funds	Net General Fund
Total Request FY 2009-10	$16,601,465	$16,601,465	$14,740,743	$7,370,371	$5,348,045
Community Program Foster Care Resources (Full Year)	$5,175,135	$5,175,135	$4,609,231	$2,304,615	$2,304,615
Emergency Resources (Full Year)	$6,377,729	$6,377,729	$5,635,662	$2,817,831	$2,817,831
Wait List (Full Year)	$4,529,509	$4,529,509	$4,002,712	$2,001,356	$2,001,356
CES to SLS (Full Year)	$519,092	$519,092	$493,138	$246,569	$246,569

The following table shows the level of care requested for each category of service for 45 Foster Care Resources.

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
Foster Care Request				**45**		
Residential Habilitation = Number of days						
Tier 1	52.36	1.50	53.15	0	181	0
Tier 2	75.55	1.50	76.68	2	181	27,758
Tier 3	109.22	1.50	110.86	6	181	120,394
Tier 4	136.16	1.50	138.20	6	181	150,085
Tier 5	164.51	1.50	166.98	11	181	332,457
Tier 6	193.24	1.50	196.14	19	181	674,525
Tier 7	244.96	1.50	248.63	1	181	45,002
Day Habilitation = Number of units in six months						
Tier 1	2.05	1.50	2.08	0	3,000	0
Tier 2	3.06	1.50	3.11	2	3,000	18,660
Tier 3	4.00	1.50	4.06	6	3,000	73,080
Tier 4	4.76	1.50	4.83	6	3,000	86,940
Tier 5	5.73	1.50	5.82	11	3,000	192,060
Tier 6	7.37	1.50	7.48	19	3,000	426,360
Tier 7	8.92	1.50	9.05	1	3,000	27,150
Transportation = Annual Cost						
FY07 Cost	1,572.64	1.50	1,596.23	45		35,915
Skilled Nursing = Annual Cost						
FY07 Cost	690.04	1.50	700.39	45		15,759
Behavioral Services = Annual Cost						
FY07 Cost	258.76	1.50	262.64	45		5,909
Specialized Medical Equipment = Annual Cost						
FY07 Cost	13.04	1.50	13.24	45		298
Supplies – Disposable = Annual Cost						

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
FY07 Cost	15.62	1.50	15.85	45		357
Dental – Treatment = Annual Cost						
FY07 Cost	211.05	1.50	214.22	45		4,820
Dental Diagnostic = Annual Cost						
FY07 Cost	66.11	1.50	67.10	45		1,510
Vision = Annual Cost						
FY07 Cost	21.74	1.50	22.07	45		497
				Based on units in 6 months		
Targeted Case Mgt.= Monthly	167.30	1.50	169.81	45	6	45,849
Utilization Review = Every six months	75.00		75.00	45	1	3,375
Quality Assurance = Monthly	23.18	1.50	23.53	45	6	6,353
Room & Board=Daily	18.70	0		45	181	152,312
Local Match						128,812
					Total	**$2,576,237**
					General Fund	**$0**
					Cash Funds Exempt	**$2,576,237**
					Medicaid Cash Fund	**$2,295,113**
					Client Cash Fund	**$152,312**
					Local Cash Fund	**$128,812**
					Medicaid General Fund	**$1,147,557**
					Net General Fund	**$1,147,557**

The following table shows the level of care requested for each category of service for 62 Emergency Resources.

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
Emergency Request				**62**		
Residential Habilitation = Number of days						
Tier 1	52.36	1.50	53.15	0	181	0
Tier 2	75.55	1.50	76.68	0	181	0
Tier 3	109.22	1.50	110.86	14	181	280,919
Tier 4	136.16	1.50	138.20	16	181	400,227
Tier 5	164.51	1.50	166.98	29	181	876,478
Tier 6	193.24	1.50	196.14	3	181	106,504
Tier 7	244.96	1.50	248.63	0	181	0
Day Habilitation = Number of units in six months						
Tier 1	2.05	1.50	2.08	0	3,000	0
Tier 2	3.06	1.50	3.11	0	3,000	0
Tier 3	4.00	1.50	4.06	14	3,000	170,520
Tier 4	4.76	1.50	4.83	16	3,000	231,840
Tier 5	5.73	1.50	5.82	29	3,000	506,340
Tier 6	7.37	1.50	7.48	3	3,000	67,320
Tier 7	8.92	1.50	9.05	0	3,000	0
Transportation = Annual Cost						
FY07 Cost	1,572.64	1.50	1,596.23	62		49,483
Skilled Nursing = Annual Cost						
FY07 Cost	690.04	1.50	700.39	62		21,712
Behavioral Services = Annual Cost						
FY07 Cost	258.76	1.50	262.64	62		8,142

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
Specialized Medical Equipment = Annual Cost						
FY07 Cost	13.04	1.50	13.24	62		410
Supplies – Disposable = Annual Cost						
FY07 Cost	15.62	1.50	15.85	62		491
Dental – Treatment = Annual Cost						
FY07 Cost	211.05	1.50	214.22	62		6,641
Dental Diagnostic = Annual Cost						
FY07 Cost	66.11	1.50	67.10	62		2,080
Vision = Annual Cost						
FY07 Cost	21.74	1.50	22.07			684
				Based on units in 6 months		
Targeted Case Mgt. – monthly	167.30	1.50	169.81	62	6	63,169
Utilization Review every six months	75.00		75.00	62	1	4,650
Quality Assurance monthly	23.18	1.50	23.53	62	6	8,753
Room & Board - daily	18.70	0		62	181	209,851
Local Match						158,748
					Total	**$3,174,962**
					General Fund	**$0**
					Cash Funds Exempt	**$3,174,962**
					Medicaid Cash Fund	**$2,806,363**
					Client Cash Fund	**$209,851**

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
					Local Cash Fund	**$158,748**
					Medicaid General Fund	**$1,403,182**
					Net General Fund	**$1,403,182**

The following table shows the level of care requested for each category of service for 44 Waiting List Resources.

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
Wait List Request				**44**		
Residential Habilitation = Number of days						
Tier 1	52.36	1.50	53.15	0	181	0
Tier 2	75.55	1.50	76.68	0	181	0
Tier 3	109.22	1.50	110.86	11	181	220,722
Tier 4	136.16	1.50	138.20	14	181	350,199
Tier 5	164.51	1.50	166.98	13	181	392,904
Tier 6	193.24	1.50	196.14	6	181	213,008
Tier 7	244.96	1.50	248.63	0	181	0
Day Habilitation = Number of units in six months						
Tier 1	2.05	1.50	2.08	0	3,000	0
Tier 2	3.06	1.50	3.11	0	3,000	0
Tier 3	4.00	1.50	4.06	11	3,000	133,980
Tier 4	4.76	1.50	4.83	14	3,000	202,860
Tier 5	5.73	1.50	5.82	13	3,000	226,980

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
Tier 6	7.37	1.50	7.48	6	3,000	134,640
Tier 7	8.92	1.50	9.05	0	3,000	0
Transportation = Annual Cost						
FY07 Cost	1,572.64	1.50	1,596.23	44		35,117
Skilled Nursing = Annual Cost						
FY07 Cost	690.04	1.50	700.39	44		15,409
Behavioral Services = Annual Cost						
FY07 Cost	258.76	1.50	262.64	44		5,778
Specialized Medical Equipment = Annual Cost						
FY07 Cost	13.04	1.50	13.24	44		291
Supplies – Disposable = Annual Cost						
FY07 Cost	15.62	1.50	15.85	44		349
Dental – Treatment = Annual Cost						
FY07 Cost	211.05	1.50	214.22	44		4,713
Dental Diagnostic = Annual Cost						
FY07 Cost	66.11	1.50	67.10	44		1,476
Vision = Annual Cost						
FY07 Cost	21.74	1.50	22.07	44		486
				Based on units in 6 months		
Targeted Case Mgt. – monthly	167.30	1.50	169.81	44	6	44,830
Utilization Review every six months	75.00		75.00	44	1	3,300
Quality Assurance	23.18	1.50	23.53	44	6	6,212

COLA calculations	FY 2006-07 Net Rate	FY 2007-08 COLA	FY 2008-09 With COLA	Persons	Number of Days or Units in 6 Months	FY 2008-09 Total Costs
monthly						
Room & Board - daily	18.70			44	181	148,927
Local Match						112,746
					Total	**$2,254,927**
					General Fund	**$0**
					Cash Funds Exempt	**$2,254,927**
					Medicaid Cash Fund	**$1,993,254**
					Client Cash Fund	**$148,927**
					Local Cash Fund	**$112,746**
					Medicaid General Fund	**$996,627**
					Net General Fund	**$996,627**

Assumptions for Calculations:

The cost projection for Foster Care is based on specific information on the level of need for youth transitioning from Foster Care. This request is based on an average six months of funding for 45 foster care individuals, although start dates may vary based on need throughout the year. The projection for emergency resources is based on historical levels of need and an average of six months funding.

The rates used for calculating the needs of the 45 Foster Care, 44 Wait List and 62 Emergency individuals are based on the interim rates established in FY 2006-07 as a result of the DDD conversion to a fee for service billing system. This was mandated by the Centers for Medicare and Medicaid Services (CMS) to ensure that services provided and billed in the DDD Comprehensive programs met the CMS accountability

requirements. DDD intends to use these rates in FY 2007-08 until new rates are developed and approved and will submit appropriate budget changes when the impact is known. The amounts for residential services are based on 181 days of actual residential services. The day habilitation is based on an average of 25 fifteen minute units daily, multiplied by 5 days a week, multiplied by 4 weeks a month, multiplied by 6 months (3,000 Units). The estimates for transportation, skilled nursing, behavioral services, specialized medical equipment, supplies, dental treatment and diagnostic, and vision are based on average use per client for FY 2006-07. The targeted case management costs are based on a monthly rate per person multiplied by 6 months. The utilization review costs are based on one review per year per person. The quality assurance costs are based on a monthly rate per person for 6 months. The change to a fee for service billing system in FY 2006-07 necessitated estimating expenditures for the various levels of service by the nine service categories, based on historical costs and current rates.

The CES to SLS request is based on an average annual cost of $16,069 per resource (from FY 2007-08 Long Bill) and an additional per resource cost of $2,038 for targeted case management (TCM), $282 for quality assurance (QA) and $75 for utilization review (UR), for a full year total of $459,928. For FY 2008-09, the request is for 6 months (50%) of the average annual cost per resource, TCM, and QA, plus the $75 UR fee. The calculation is $16,069 + $2,038 + $282 multiplied by 28 resources and 50% = $257,446 + $75 UR cost for 28 resources = $2,100, for a total request of $259,546. Local match is 5% for this program ($12,977) and the remaining $246,569 is Medicaid Cash Funds.

Actual expenditures will be based on the level of need per client as dictated by the Supports Intensity Scale scores.

Impact on Other Government Agencies: This request will require funding changes in Health Care Policy and Financing budget to reflect the changes in Medicaid funding for that Department as the single state Medicaid agency.

Cost Benefit Analysis: The cost benefit for the Foster Care, Emergency, Wait List and SLS services is based on a comparison of funding the request at the rates and months of services as shown in the

tables above, versus the cost of placing these vulnerable individuals in the Regional Centers or similar high cost intermediate care facilities habilitation settings.

Benefit	Amount
Placement of 179 (45 Foster Care + 62 Emergency + 44 Wait List +28 Supported Living Services resources =135) individuals in Regional Center or similar habilitation setting @ average daily cost of $437* = 179 individuals X 181 days X $437 = $14,158,363	$14,158,363
Decision Item Total	$8,265,672
Cost Benefit Difference	$5,892,691

*Source: the ICF-MR rates as submitted to HCPF based on the federal "MED13" cost reports. It is a blended rate of a community provider and the Regional Center rate.

Statutory and Federal Authority:

27-10.5-104, C.R.S. (2007) Authorized services and supports - conditions of funding - purchase of services and supports - boards of county commissioners - appropriation.

(1) Subject to annual appropriations by the general assembly, the department of human services shall provide or purchase, pursuant to subsection (4) of this section, authorized services and supports through the community centered boards for persons who have been determined to be eligible for such services and supports pursuant to section 27-10.5-106, and as specified in the eligible person's individualized plan. Those services and supports may include, but are not limited to, the following:

(c) Case management services;

(d) Respite care services, which include temporary care of a person with a developmental disability in order to offer relief to the person's family or caregiver, or to allow the family or caregiver to deal with emergency situations or to engage in personal, social, or routine activities and tasks that otherwise may be neglected, postponed, or curtailed due to the demands of caring for a person who has a developmental disability;

(e) Day services and supports which offer opportunities for persons with developmental disabilities to experience and actively participate in valued adult roles in the community. These services and supports will enable persons receiving services to access and participate in community activities, such as work, recreation, higher education, and senior citizen activities. Day services and supports, including early intervention services, may also include the administration of nutrition or fluids through gastrostomy tubes, if administered by an individual authorized pursuant to section 27-10.5-103 (2) (k) and supervised by a licensed nurse or physician.

(f) Residential services and supports, which include an array of training, learning, experiential, and support activities provided in living alternatives designed to meet the individual needs of persons receiving services and may include the administration of nutrition or fluids through gastrostomy tubes, if administered by an individual authorized pursuant to section 27-10.5-103 (2) (k) and supervised by a licensed nurse or physician;

(g) Ancillary services, which include activities that are secondary but integral to the provision of the services and supports specified in this subsection (1).

(2) Service agencies receiving funds pursuant to subsection (1) of this section shall comply with all of the provisions of this article and the rules and regulations promulgated thereunder.

(3) Service and support coordination shall be purchased from the community centered board designated pursuant to section 27-10.5-105, except pursuant to subsection (4) of this section.

(4) (a) The department of human services may purchase services and supports, including service and support coordination, directly from service agencies under the following conditions:

(I) The executive director requests the provision of an authorized service or support for which a need has been identified in at least one designated service area and funds are available to purchase such service or support, and the community centered board has

failed to purchase such service or support from a service agency or failed to provide it directly; or

(II) A designated community centered board has declined to participate in a pilot program authorized by the executive director or has declined to provide or purchase a service or support deemed critical by the executive director based on the following findings:

(A) The service or support is consistent with local, regional, and state needs;

(B) The service or support is needed immediately to ensure the health or safety of a person receiving services; and

(C) The service or support, or service and support coordination, is an innovative service which may lead to increased cost savings or efficiencies in a designated service area; or

(7) (a) Each year the general assembly shall appropriate funds to the department of human services to provide or purchase services and supports for persons with developmental disabilities pursuant to this section. Unless specifically provided otherwise, services and supports shall be purchased on the basis of five percent local funding to be matched by ninety-five percent state funding less any federal or cash funds received for general operating expenses from any other state or federal source, less funds available to a person receiving residential services or supports after such person receives an allowance for personal needs or for meeting other obligations imposed by federal or state law, and less the required local school district funds specified in paragraph (b) of this subsection (7). The yearly appropriation, when combined with all other sources of funds, shall in no case exceed one hundred percent of the approved program costs as determined by the general assembly. Funds received for capital construction shall not be considered in the calculation for the distribution of funds under the provisions of this section.

Performance Measures:

Measure	Outcome	FY 2005-06 Actual	FY 2006-07 Target	FY 2007-08 Target	FY 2008-09 Target
Families will have the enhanced capacity to provide for their child's needs. Increase the percentage of families participating in early intervention services who report that early intervention services have improved the family's ability to help their child develop and learn.	Program Benchmark	N/A	N/A	Increase above FFY 2007 baseline	Increase above FFY 2008 baseline
	Actual	N/A	Available in December 2007		
Young children will have the enhanced capacity to improve their competencies and talents. Increase the percentage of infants and toddlers participating in early intervention services who improve their acquisition and use of knowledge and skills (motor, cognition, speech, language, etc.).	Program Benchmark	N/A	N/A	Increase above FFY 2007 baseline	Increase above FFY 2008 baseline
	Actual	N/A	Available in December 2007		
Integrated employment should be the primary option for all persons receiving Day Habilitation Services and Supports. Increase the percentage of adults with developmental disabilities in the community enrolled in day services who have integrated employment.	Program Benchmark	30.1%	30.9%	31.9%	33.0%
	Actual	30.1%	31.4%		
DDD rules dictate that integrated employment should be the primary option for all persons receiving Day Habitation Services and Supports. Projections were calculated from the FY 2006 total enrollment of 6,574 in day program and 1,981 in integrated employment. The projections assume that the total number enrolled each year in Day Habitation will increase by approximately 100 persons. The measure targets a 5% increase each year in the actual number of persons employed after adjusting the total number enrolled in Day Habitation for this assumption.					
Provide a safe and secure residential environment for Regional Center residents. Decrease the rate of critical	Program Benchmark	N/A	N/A	10.56%	10.27%

Measure	Outcome	FY 2005-06 Actual	FY 2006-07 Target	FY 2007-08 Target	FY 2008-09 Target
incidents, as a percentage of the average daily census, at the Regional Centers.	Actual	N/A	10.96%		
The benchmarks assume a 3% reduction in the total number of Critical incidents and no change to the average daily census.					
Provide adult services in the least restrictive setting. Increase the number of adults receiving 24-hour residential services who are able to be moved from institutional settings (Regional Centers, nursing facilities, and Mental Health Institutes) into community-based settings.	Program Benchmark	N/A	32	35	36
	Actual	32	35		

* These goals/objectives and performance measures were from the FY 2008-09 DHS Strategic Plan.