

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

Request Title: Decision Item FY 08-09 Base Reduction Item FY 08-09 Supplemental FY 07-08 Budget Request Amendment FY 08-09
 Department: Governor's Initiative for Developmental Disabilities Resources
 Priority Number: Human Services Dept. Approval by: *Resendez J...* Date: 2/5/08
 SBA-4A OSPB Approval: *[Signature]* Date: 2/19/08

	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
Total of All Line Items	Total	0	306,326,376	0	306,326,376	309,139,044	8,265,672	317,404,716	6,635,575	324,040,291	30,527,249
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	0	15,659,594	0	15,659,594	15,633,437	0	15,633,437	293,500	15,926,937	587,000
	CF	0	0	0	0	0	0	0	0	0	0
	CFE	0	290,666,782	0	290,666,782	293,505,607	8,265,672	301,771,279	6,342,075	308,113,354	29,940,249
	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	5,637,979	272,763,252	26,632,433
	MGF	0	128,551,131	0	128,551,131	129,858,504	3,670,651	133,529,155	2,818,990	136,348,145	13,316,216
	NGF	0	144,210,725	0	144,210,725	145,491,941	3,670,651	149,162,592	3,112,490	152,275,082	13,903,216
((9) Services for People with Disabilities (A) Developmental	Total	0	247,005,842	0	247,005,842	249,601,798	8,006,126	257,607,924	4,375,154	261,983,078	25,487,315
	FTE	0.00	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Disability Services (1) Community Services -	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
(b) Program Costs - Adult Comprehensive	CFE	0	245,353,617	0	245,353,617	247,975,730	8,006,126	255,981,856	4,375,154	260,357,010	25,487,315
	FF	0	0	0	0	0	0	0	0	0	0
Services for 66 General Fund and 3,806-3,916 Medicaid resources	MCF	0	214,821,368	0	214,821,368	217,230,236	7,094,730	224,324,966	3,784,079	228,109,045	22,431,495
	MGF	0	107,377,201	0	107,377,201	108,581,636	3,547,366	112,129,002	1,892,040	114,021,042	11,215,747
	NGF	0	109,029,426	0	109,029,426	110,207,704	3,547,366	113,755,070	1,892,040	115,647,110	11,215,747
((9) Services for People with Disabilities (A) Developmental	Total	0	52,858,984	0	52,858,984	53,075,696	259,546	53,335,242	1,951,474	55,286,716	4,422,040
	FTE	0.00	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Disability Services (1) Community Services -	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
(b) Program Costs - Adult Supported Living	CFE	0	45,001,899	0	45,001,899	45,218,611	259,546	45,478,157	1,951,474	47,429,631	4,422,040
	FF	0	0	0	0	0	0	0	0	0	0
Services for 692 General Fund and 2,892-3,092 Medicaid	MCF	0	42,347,862	0	42,347,862	42,553,738	246,569	42,800,307	1,853,900	44,654,207	4,200,938
	MGF	0	21,173,930	0	21,173,930	21,276,868	123,285	21,400,153	926,950	22,327,103	2,100,469
	NGF	0	29,031,015	0	29,031,015	29,133,953	123,285	29,257,238	926,950	30,184,188	2,100,469

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

Request Title: Decision Item FY 08-09 Base Reduction Item FY 08-09 Supplemental FY 07-08 Budget Request Amendment FY 08-09
 Department: Governor's Initiative for Developmental Disabilities Resources
 Priority Number: Human Services Dept. Approval by: _____ Date: _____
 SBA-4A 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
((9) Services for People with Disabilities (A) Developmental											
	Total	0	6,461,550	0	6,461,550	6,461,550	0	6,461,550	308,947	6,770,497	617,894
	Disability Services (1)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Community Services -	0	6,150,284	0	6,150,284	6,150,284	0	6,150,284	293,500	6,443,784	587,000
	(b) Program Costs -	0	0	0	0	0	0	0	0	0	0
	Family Support Services	0	311,266	0	311,266	311,266	0	311,266	15,447	326,713	30,894
	for 4,176 1,276 General	0	0	0	0	0	0	0	0	0	0
	Fund resources	0	0	0	0	0	0	0	0	0	0
	MCF	0	0	0	0	0	0	0	0	0	0
	MGF	0	0	0	0	0	0	0	0	0	0
	NGF	0	6,150,284	0	6,150,284	6,150,284	0	6,150,284	293,500	6,443,784	587,000

Letternote revised text: Of this amount \$290,074,187 shall be from Medicaid funds transferred from the Department of Health Care Policy and Financing, \$27,030,092 shall be from client cash sources, and \$9,498,009 (L) shall be from local matching funds, 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:	SBA-4A
Change Request Title:	Governor's Initiative for Developmental Disabilities Resources

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:

Wait List Resources – This request would provide comprehensive services to 110 adults for an average of six months at a cost of \$3,784,079 Medicaid Cash Funds in FY 2008-09. These resources are Medicaid funded and require a 50 percent General Fund match of \$1,892,040.

Adult Supported Living Services (SLS) – This request will provide services for 200 adults at for an average of six months at a cost of \$1,853,900 Medicaid Cash Funds in FY 2008-09. These resources are Medicaid funded and require a 50 percent General Fund match of \$926,950.

Family Support Services Program (FSSP) - This request will provide services for 100 families at a cost of \$293,500. This program is funded by General Fund.

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.

<u>Comprehensive Services for Adults by the CCB system</u>	FY 2001-02	FY 2002-03	FY 2003-04	FY2004-05	FY 2005-06	FY 2006-07
Number in Services during June	3,371	3,496	3,582	3,607	3,652	3,557

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.

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.

Family Support Services Program (FSSP) - Services include funding intended to assist families with costs and services beyond those normally experienced and needed by other families without children with a developmental disability, and to avoid or delay costly out of home placements. FSSP includes the Family Support Services Loan Fund. Per state statute 27-10.5-404 (4), and the Department is allowed to use up to seven percent of the appropriation for family support services for administrative costs within the Community Centered Boards and the Department.

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
Family Support Services Program	0	0	0	0	0	0	0	0
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	\$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
Match						
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

DDD Programs	Total	General Fund	Cash Funds Exempt	Medicaid	Medicaid General Fund	Net General Fund
Total COLA (base)	\$4,312,692	\$199,526	\$4,113,166	\$3,998,235	\$1,998,130	\$2,197,656
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:

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 most 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:

DDD expects that it will be necessary to adjust the Medicaid waiver caps for each of the waivers in order to accommodate these additional resources. DDD is in the process of submitting the required waiver amendments for the HCBS-DD (Comprehensive) waiver and the Supported Living Services waiver and will incorporate any approved additional resources.

Prior discussions have indicated that the DD system might not be able to absorb a large number of additional resources if appropriated in one fiscal year. Recent discussions with the Community Centered Boards and service providers project that the number of resources in this request could be absorbed.

Program	November 1, 2007 FY 2008-09 Request			February 15, 2008 FY 2008-09 Request			Total FY 2008-09 Request		
	Resources	Total Funds	Net General Fund	Resources	Total Funds	Net General Fund	Resources	Total Funds	Net General Fund

Comprehensive Foster care to Comprehensive Emergency Waiting list	151	\$8,006,126	\$3,547,366	110	\$4,375,154	\$1,892,040	261	\$12,381,280	\$5,439,406
Comprehensive	45	\$2,576,237	\$1,147,557	0	\$0	\$0	45	\$2,576,237	\$1,147,557
Emergency	62	\$3,174,962	\$1,403,182	0	\$0	\$0	62	\$3,174,962	\$1,403,182
Waiting list	44	\$2,254,927	\$996,627	110	\$4,375,154	\$1,892,400	154	\$6,630,081	\$2,889,027
Supported Living Services	0	\$0	\$0	200	\$1,951,474	\$926,950	200	\$1,951,474	\$926,950
Family Support Services Program	0	\$0	\$0	100	\$308,947	\$293,500	100	\$308,947	\$293,500
Children's Extensive Support to Supported Living Services	28	\$259,546	\$123,285	0	\$0	\$0	28	\$259,546	\$123,285
Total	179	\$8,265,672	\$3,670,651	410	\$6,635,575	\$3,112,490	589	\$14,901,247	\$6,783,141

The table below shows the effect the November 1, 2007 FY 2008-09 request and the Requested February 15, 2008 request. The columns on the far right show the cumulative effect of these requests in addressing the Developmental Disabilities waiting lists.

		November 1, 2007 FY 2008-09 request		February 15, 2008 FY 2008-09 request		Total of November 1 and February 15 requests	
	Waiting list as of March 2007	Resources requested	Percent of waiting list addressed	Resources requested	Percent of waiting list addressed	Total resources requested	Percent of waiting list addressed

Comprehensive*	1,368	44	3.2%	110	8.0%	154	11.3%
Supported Living Services**	2,324	0	0.0%	200	8.6%	200	8.6%
Family Support Services Program	4,178	0	0.0%	100	2.4%	100	2.4%

*The Comprehensive waiting list does not include transitional resources from foster care or emergency resources.

**The Supported Living Services waiting list does not include transition from the Children's Extensive Support Program to Supported Living Services.

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	General Fund	Cash Funds Exempt	Medicaid Cash Funds	Medicaid General Funds	Net General Fund
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Total Request FY 2008-09	\$6,635,575	\$293,500	\$6,342,075	\$5,637,979	\$2,818,990	\$3,112,490
Supported Living Services Resources (1/2 Year)	\$1,951,474	0	\$1,951,474	\$1,853,900	\$926,950	\$926,950
Family Support System Program Resources (1/2 Year)	\$308,947	\$293,500	\$15,447	0	0	\$293,500
Wait List Resources (1/2 Year)	\$4,375,154	0	\$4,375,154	\$3,784,079	\$1,892,040	\$1,892,040

Summary of Request FY 2009-10	Total Funds	General Fund	Cash Funds Exempt	Medicaid Cash Funds	Medicaid General Funds	Net General Fund
Total Request FY 2009-10	\$13,925,784	\$587,000	\$13,338,784	\$11,891,690	\$5,945,845	\$6,532,845
Supported Living Services Resources	\$3,902,948	0	\$3,902,948	\$3,707,800	\$1,853,900	\$1,853,900
Family Support System Program Resources	\$617,894	\$587,000	\$30,894	0	0	\$587,000
Wait List Resources	\$9,404,942	0	\$9,404,942	\$8,183,890	\$4,091,945	\$4,091,945

The following table shows the level of care requested for each category of service for 110 Wait List Resources.

FY2008-09 New Resources						2/13/08	
COLA	0.00%			# of			
FY07-08 Net Rate	FY08-09 COLA	FY08-09 Net Rate	# of Persons	Days/Units		FY08-09 Total	FY09-10 Total
Wait List	110	New Resources		6 Months			

FY2008-09 New Resources						2/13/08	
	COLA FY07-08 Net Rate	0.00% FY08-09 COLA	FY08-09 Net Rate	# of Persons	# of Days/ Units	FY08-09 Total	FY09-10 Total
Residential Habilitation							
Tier 1	\$53.15	0.00%	\$53.15	7	181	\$67,341	\$135,798
Tier 2	\$76.68	0.00%	\$76.68	29	181	\$402,493	\$811,658
Tier 3	\$110.86	0.00%	\$110.86	37	181	\$742,429	\$1,497,164
Tier 4	\$138.20	0.00%	\$138.20	16	181	\$400,227	\$807,088
Tier 5	\$166.98	0.00%	\$166.98	9	181	\$272,010	\$548,529
Tier 6	\$196.14	0.00%	\$196.14	8	181	\$284,011	\$572,729
Tier 7	\$248.63	0.00%	\$248.63	4	181	\$180,008	\$363,000
Day Habilitation							
Tier 1	\$2.08	0.00%	\$2.08	7	2,400	\$34,944	\$87,360
Tier 2	\$3.11	0.00%	\$3.11	29	2,400	\$216,456	\$541,140
Tier 3	\$4.06	0.00%	\$4.06	37	2,400	\$360,528	\$901,320
Tier 4	\$4.83	0.00%	\$4.83	16	2,400	\$185,472	\$463,680
Tier 5	\$5.82	0.00%	\$5.82	9	2,400	\$125,712	\$314,280
Tier 6	\$7.48	0.00%	\$7.48	8	2,400	\$143,616	\$359,040
Tier 7	\$9.05	0.00%	\$9.05	4	2,400	\$86,880	\$217,200
Supported Employment							
FY07 Cost	\$1,422.97	0.00%	\$1,422.97	110			
Transportation							
FY07 Cost	\$1,596.23	0.00%	\$1,596.23	110		\$87,793	\$175,585
Skilled Nursing							
FY07 Cost	\$700.39	0.00%	\$700.39	110		\$38,521	\$77,043
Behavioral Services							
FY07 Cost	\$262.64	0.00%	\$262.64	110		\$14,445	\$28,890
Specialized Medical Equipment							
FY07 Cost	\$13.24	0.00%	\$13.24	110		\$728	\$1,456
Supplies - Disposable							
FY07 Cost	\$15.85	0.00%	\$15.85	110		\$872	\$1,744

FY2008-09 New Resources

2/13/08

	COLA FY07-08 Net Rate	0.00% FY08-09 COLA	FY08-09 Net Rate	# of Persons	# of Days/ Units	FY08-09 Total	FY09-10 Total
Dental - Treatment							
FY07 Cost	\$214.22	0.00%	\$214.22	110		\$11,782	\$23,564
Dental Diagnostic							
FY07 Cost	\$67.10	0.00%	\$67.10	110		\$3,691	\$7,381
Vision							
FY07 Cost	\$22.07	0.00%	\$22.07	110		\$1,214	\$2,428
TCM	\$169.80	0.00%	\$169.80	110	6	\$112,068	\$224,136
UR	\$75.00	0.00%	\$75.00	110	1	\$8,250	\$16,500
QA	\$23.53	0.00%	\$23.53	110	6	\$2,588	\$5,177
Room & Board	\$18.70	0.00%	\$18.70	110	181	\$372,317	\$750,805
Local Match						\$218,758	\$470,247
					Total	\$4,375,154	\$9,404,942
					GF	\$0	\$0
					CFE	\$4,375,154	\$9,404,942
					MCF	\$3,784,079	\$8,183,890
					CCF	\$372,317	\$750,805
					LCF	\$218,758	\$470,247
					MGF	\$1,892,040	\$4,091,945
					NGF	\$1,892,040	\$4,091,945

Supported Living Services Calculations 200 New Resources for 6 Months	Average Annual Medicaid Cost per Resource	Targeted Case Management Medicaid Costs	Quality Assurance Medicaid Costs	Sub-Total Annual Medicaid Costs	Utilization Review Medicaid Costs Per Review	Total Annual Costs
Medicaid Cost per Resource	\$16,069	\$2,038	\$282	\$18,389	\$75	\$18,464
Medicaid Cost 200 Resources (for 12 Months)	\$3,213,800	\$407,600	\$56,400	\$3,677,800	\$15,000	\$3,692,800
Total Cost with Local Match						\$3,887,157
GF						\$0
CFE						\$3,887,157
MCF						\$3,692,800
LCF						\$194,357
MGF						\$1,846,400
NGF						\$1,846,400
Medicaid Cost 200 Resources (50% for 6 Months)	\$1,606,900	\$203,800	\$28,200	\$1,838,900	\$15,000	\$1,853,900
Total Cost with Local Match						\$1,951,474
GF						\$0
CFE						\$1,951,474
MCF						\$1,853,900
LCF						\$97,574
MGF						\$926,950
NGF						\$926,950

Family Support Services Program Calculations 100 Resources for 6 Months	Average Annual General Fund Cost per Resource					Total Annual Costs
Cost per Resource	\$5,870					\$5,870
GF Cost for 100 Resources (12 Months)	\$587,000					\$587,000
Total						\$617,894
GF						\$587,000
LCF						\$30,894
GF Cost for 100 Resources (6 Months 50%)	\$293,500					\$293,500
Total						\$308,947
GF						\$293,500
LCF						\$15,447

Assumptions for Calculations:

The rates used for calculating the needs of the Wait List 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, which is not inflated by the COLA for FY 2008-09. 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 20 hours per week broken down to fifteen minute units = 2,400 per year. 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 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 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 200 resources and 50%. = $\$1,838,900 + \75 UR cost for 200 resources = $\$15,000$, for a total request of $\$1,853,900$. Local match is 5% for this program ($\$97,574$) that increases the total CFE to $\$1,951,474$.

The FSSP request is based on an average annual cost of \$5,870 per resource for 100 resources. For FY 2008-09, the request is for 6 months (50%) of the average annual cost. The calculation is $\$5,870$ multiplied by 100 and 50% = $\$293,500$ GF. Local match is 5% CFE for this program ($\$15,447$) that increases the total to $\$308,947$.

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 Wait List, SLS and FSSP 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 110 Wait List +200 SLS resources =310) individuals in Regional Center or similar habilitation setting @ average daily cost of \$437* = 310 individuals X 181 days X \$437 = \$24,520,070	\$24,520,070
Decision Item Total	\$6,635,575
Cost Benefit Difference	\$17,884,495

*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	Program Benchmark	N/A	N/A	Increase above FFY 2007 baseline	Increase above FFY 2008 baseline

Measure	Outcome	FY 2005-06 Actual	FY 2006-07 Target	FY 2007-08 Target	FY 2008-09 Target
that early intervention services have improved the family's ability to help their child develop and learn.	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 Habilitation 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 incidents, as a percentage of the average daily census, at the Regional Centers.	Program Benchmark	N/A	N/A	10.56%	10.27%
	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.					

Measure	Outcome	FY 2005-06 Actual	FY 2006-07 Target	FY 2007-08 Target	FY 2008-09 Target
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.