

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

Department: Heath Care Policy and Financing  
 Request Title: DHS Regional Center Capital Outlay  
 Priority Number: NP R-13

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

- |  |
|--|
| <input checked="" type="checkbox"/> Decision Item FY 2014-15 |
| <input type="checkbox"/> Base Reduction Item FY 2014-15      |
| <input type="checkbox"/> Supplemental FY 2013-14             |
| <input type="checkbox"/> Budget Amendment FY 2014-15         |

Line Item Information		FY 2013-14		FY 2014-15		FY 2015-16
		1	2	3	4	5
	Fund	Appropriation FY 2013-14	Supplemental Request FY 2013-14	Base Request FY 2014-15	Funding Change Request FY 2014-15	Continuation Amount FY 2015-16
<b>Total of All Line Items</b>	<b>Total</b>	47,499,561	-	48,951,494	420,000	-
	FTE	-	-	-	-	-
	GF	21,883,639	-	22,609,607	210,000	-
	GFE	-	-	-	-	-
	CF	1,866,142	-	1,866,142	-	-
	RF	-	-	-	-	-
	FF	23,749,780	-	24,475,745	210,000	-
<b>(6) Department of Human Services Medicaid-Funded Programs; (G) Services for People with Disabilities - Medicaid Funding, Regional Centers</b>	<b>Total</b>	47,499,561	-	48,951,494	420,000	-
	FTE	-	-	-	-	-
	GF	21,883,639	-	22,609,607	210,000	-
	GFE	-	-	-	-	-
	CF	1,866,142	-	1,866,142	-	-
	RF	-	-	-	-	-
	FF	23,749,780	-	24,475,745	210,000	-

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

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