

Department of Health Care Policy and Financing

Funding Request for the FY 2026-27 Budget Cycle

Request Title R-08 CO Single Assessment Implementation & Stabilization

Dept. Approval By: Supplemental FY 2025-26
OSPB Approval By: Budget Amendment FY 2026-27
X Change Request FY 2026-27

Summary Information	Fund	FY 2025-26		FY 2026-27		FY 2027-28
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
Total of All Line Items Impacted by Change Request	Total	\$405,564,035	\$0	\$404,299,955	(\$11,668,682)	\$3,544,303
	FTE	800.7	0.0	795.6	2.7	3.0
	GF	\$143,542,524	\$0	\$143,398,949	(\$6,192,265)	\$1,410,899
	CF	\$27,417,142	\$0	\$27,888,391	\$60,986	\$61,763
	RF	\$3,338,005	\$0	\$3,373,942	\$0	\$0
	FF	\$231,266,364	\$0	\$229,638,673	(\$5,537,403)	\$2,071,641

Line Item Information	Fund	FY 2025-26	FY 2026-27		FY 2027-28	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$76,602,942	\$0	\$78,913,644	\$227,779	\$247,589
	FTE	800.7	0.0	795.6	2.7	3.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$29,477,201	\$0	\$30,293,906	\$34,685	\$37,701
General Administration - Personal Services	CF	\$6,407,940	\$0	\$6,602,894	\$18,464	\$20,069
	RF	\$3,155,881	\$0	\$3,211,037	\$0	\$0
	FF	\$37,561,920	\$0	\$38,805,807	\$174,630	\$189,819
	Total	\$12,823,330	\$0	\$16,840,982	\$44,580	\$53,298
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$5,434,254	\$0	\$6,493,890	\$6,789	\$8,115
General Administration - Health, Life, and Dental	CF	\$702,241	\$0	\$1,438,304	\$3,613	\$4,320
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$6,686,835	\$0	\$8,908,788	\$34,178	\$40,863
	Total	\$51,482	\$0	\$64,918	\$142	\$154
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$23,801	\$0	\$25,314	\$21	\$23
General Administration - Short-term Disability	CF	\$427	\$0	\$5,360	\$12	\$13
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$27,254	\$0	\$34,244	\$109	\$118
	Total	\$377,655	\$0	\$417,668	\$904	\$984
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$152,639	\$0	\$162,880	\$139	\$149
General Administration - Paid Family and Medical Leave Insurance	CF	\$27,098	\$0	\$34,480	\$72	\$79
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$197,918	\$0	\$220,308	\$693	\$756
	Total	\$7,918,630	\$0	\$9,281,509	\$20,140	\$21,894
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$3,391,947	\$0	\$3,619,548	\$3,067	\$3,333
General Administration - Unfunded Liability AED Payments	CF	\$365,358	\$0	\$766,216	\$1,632	\$1,776
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$4,161,325	\$0	\$4,895,745	\$15,441	\$16,785

	Total	\$3,400,167	\$0	\$3,097,991	\$23,028	\$2,208
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$1,344,473	\$0	\$1,287,723	\$3,507	\$336
General Administration - Operating Expenses	CF	\$296,462	\$0	\$257,147	\$1,867	\$180
	RF	\$50,071	\$0	\$30,852	\$0	\$0
	FF	\$1,709,161	\$0	\$1,522,269	\$17,654	\$1,692
	Total	\$3,700,205	\$0	\$3,700,205	\$13,950	\$13,950
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$1,482,562	\$0	\$1,482,562	\$2,123	\$2,123
General Administration - Leased Space	CF	\$322,276	\$0	\$322,276	\$1,132	\$1,132
	RF	\$38,849	\$0	\$38,849	\$0	\$0
	FF	\$1,856,518	\$0	\$1,856,518	\$10,695	\$10,695
	Total	\$45,936,358	\$0	\$40,397,469	\$200,000	\$200,000
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (A) General Administration, (1)	GF	\$16,663,486	\$0	\$14,707,769	\$33,346	\$33,346
General Administration - General Professional Services and Special Projects	CF	\$3,629,148	\$0	\$2,846,853	\$17,854	\$17,854
	RF	\$81,000	\$0	\$81,000	\$0	\$0
	FF	\$25,562,724	\$0	\$22,761,847	\$148,800	\$148,800
	Total	\$104,857,279	\$0	\$101,381,567	\$400,000	\$400,000
	FTE	0.0	0.0	0.0	0.0	0.0
01. Executive Director's Office, (B) Information Technology Contracts and Projects, (1)	GF	\$14,958,219	\$0	\$14,562,664	\$23,660	\$23,660
Information Technology Contracts and Projects - MMIS Maintenance and Projects	CF	\$10,671,589	\$0	\$10,614,200	\$16,340	\$16,340
	RF	\$12,204	\$0	\$12,204	\$0	\$0
	FF	\$79,215,267	\$0	\$76,192,499	\$360,000	\$360,000
	Total	\$149,895,987	\$0	\$150,204,002	(\$12,599,205)	\$2,604,226
	FTE	0.0	0.0	0.0	0.0	0.0
04. Office of Community Living, (A) Division of Intellectual and Developmental Disabilities, (2) Medicaid Programs - Case Management for People with Disabilities	GF	\$70,613,942	\$0	\$70,762,693	(\$6,299,602)	\$1,302,113
	CF	\$4,994,603	\$0	\$5,000,661	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$74,287,442	\$0	\$74,440,648	(\$6,299,603)	\$1,302,113

Auxiliary Data			
Requires Legislation?	NO		
Type of Request?	Health Care Policy and Financing Prioritized Request	Interagency Approval or Related Schedule 13s:	No Other Agency Impact



Department Priority: R-08 Colorado Single Assessment Tool Implementation

Summary of Funding Change for FY 2026-27

Fund Type	FY 2026-27 Base Request	FY 2026-27 Incremental Request	FY 2027-28 Incremental Request
Total Funds	\$404,299,955	(\$11,668,682)	\$3,544,303
General Fund	\$143,398,949	(\$6,192,265)	\$1,410,899
Cash Funds	\$27,888,391	\$60,986	\$61,763
Reappropriated Funds	\$3,373,942	\$0	\$0
Federal Funds	\$229,638,673	(\$5,537,403)	\$2,071,641
FTE	795.6	2.7	3.0

Summary of Request

Problem or Opportunity

SB 16-192, “Assessment Tool Intellectual And Developmental Disabilities,” required the state to develop and launch a single assessment tool, the Colorado Single Assessment (CSA), for all individuals seeking or receiving long-term services and supports (LTSS). However, SB 16-192 only provided funding for the first year of the CSA, and the Department needs ongoing funding for this new, more expansive assessment and person-centered support planning process.

Proposed Solution

The Department is requesting ongoing funding for the assessment to true up SB 16-192, which only provided the Department funding for the first year of the CSA. The Department is requesting funding to support the implementation of the new CSA and Person-Centered Support Plan (PCSP), as well as to address and oversee any potential system issues that may arise after launch. This request will not only bring the Department into compliance with SB 16-192, but will also ensure more standardization, objectivity, transparency, and equity in the way in which service needs are being identified and service planning is completed across Colorado’s Home and Community Based Services (HCBS) waivers.

Fiscal Impact of Solution

The Department requests a reduction of \$11.7 million total funds, including a reduction of \$6.2 million General Fund and an increase of 2.7 term-limited FTE in FY 2026-27, and an increase of

\$3.5 million total funds, including an increase of \$1.4 million General Fund in FY 2027-28 and ongoing, and 3.0 term-limited FTE in FY 2027-28 through FY 2028-29.

Requires Legislation	Colorado for All Impacts	Revenue Impacts	Impacts Another Department?	Statutory Authority
No	Positive	No	No	25.5-6-104 (5) (a), C.R.S.

Background and Opportunity

Currently, the Department uses several different assessment tools for members who are eligible to receive long-term services and supports (LTSS) through the Home and Community-Based Services (HCBS) waiver programs.

Individuals seeking or receiving LTSS must undergo both a functional eligibility and a needs assessment process to determine the level of care, services, and supports needed. A functional eligibility assessment is used to determine initial eligibility for LTSS. SB 16-192, “Assessment Tool Intellectual And Developmental Disabilities,” required the Department to select a new eligibility and needs assessment tool for members receiving LTSS by July 1, 2018. SB 16-192 also provided funding to pay for the costs of developing the assessment tool. This assessment tool, known as the Colorado Single Assessment (CSA), is now fully developed and pending integration into the Department’s IT system. The CSA will be the new tool used to determine level-of-care functional eligibility and identify the acuity of needs for services and support planning for members. The CSA is a more robust and comprehensive tool than the current eligibility assessment, the ULTC 100.2, and the several existing needs assessments for different LTSS populations.

The CSA encompasses a broad range of life experiences, including work, education, health, safety, family, and activities of daily living, that impact a member’s independence in their home and community. It also addresses quality of life areas, helping to identify members’ needs, preferences, and personal goals. It is designed to support a person-centered approach, ensuring that assessments are tailored to the individual’s unique needs and preferences and inform the development of their Person-Centered Support Plan (PCSP). The PCSP is developed based on the findings of the CSA and outlines the specific services and supports needed to meet the individual’s goals and preferences. The PCSP is a process required by the Centers for Medicare and Medicaid Services (CMS). It serves as the culmination of assessed needs (from the CSA), identifying the amount, scope, frequency, and duration of home and community-based services and supports that the member has prioritized. The Care and Case Management (CCM) system automates this process, such that areas of need identified in the CSA are populated into the PCSP for discussion between the case manager, the member, and their identified support team.

The Department had to delay the implementation of the CSA and PCSP for various reasons, including the need to prioritize stabilizing the 2023 launch of the CCM IT system and the Case Management Agency (CMA) ecosystem. The new CSA and PCSP will be launched within the CCM system. Additionally, existing initiatives, such as the implementation of Case Management Redesign and Community First Choice, as well as unplanned efforts, like the COVID-19 Public Health Emergency, required the Department to reorder priorities and timelines.

To ensure continuity of service delivery for members while the CCM system was being stabilized, the Department developed, piloted, and implemented the Interim Support Level Assessments (ISLA). The ISLA is being used in the interim period to determine Support Levels for newly enrolling members on the adult Intellectual and/or Developmental Disabilities (IDD) waivers. This temporary assessment is a building block toward, and will be replaced with the permanent Support Level Assessment utilizing questions from the CSA, once the CSA is officially launched.

The Department is preparing to implement the CSA and PCSP with an anticipated go-live date of August 2026. The Department requires additional administrative resources to provide support for the implementation of the CSA and PCSP through a staggered rollout by CMA cohort over the first year of implementation.

Additionally, SB 16-192 only provided the Department with one year of funding, creating a cliff in the financing for the service costs associated with the CMAs conducting the CSA and PCSP with members. The Department requires ongoing funding to support the permanent use of the new assessment tool. When SB 16-192 was passed, the expectation was that another budget request would be required once the Department had more information as to the ongoing costs associated with the permanent use of the new assessment. The Department conducted a Time Study Pilot of the new assessment in 2019-2020 to help inform the ongoing funding needs. This study concluded that it takes more time to conduct the much more robust and comprehensive CSA than the time required to conduct the current ULTC 100.2 assessment. Thus, costs will increase for CMAs to implement on the Department's behalf, making the current rates insufficient. Successfully implementing the CSA is critical, as it is a standardized and valid assessment that will enable the Department to ensure that services authorized are consistently based on the member's assessed needs and protect the state against any future federal actions, including audits.

Proposed Solution and Anticipated Outcomes

The Department requests a reduction of \$11.7 million total funds, including a reduction of \$6.2 million General Fund and 2.7 FTE in FY 2026-27 and an increase of \$3.5 million total funds, including \$1.4 million General Fund and 3.0 FTE in FY 2027-28 for administrative resources and funding for the CMAs to help support the implementation and the roll-out of the CSA starting in August 2026. The new implementation plan will include a measured, staggered roll-out with small cohorts of Case Management Agencies (CMAs) slowly implementing the CSA/PCSP at members' annual planning meetings, or Continued Stay Reviews, which are the CMS-required processes where members' needs are reassessed. Their service and support planning is

conducted annually, and for newly enrolling members. This will ensure proper end-to-end testing, defect detection and remediation, and operational readiness. This approach will also enable CMAs to manage their workloads reasonably, thereby avoiding the potential to overwhelm an already taxed CMA ecosystem.

If the Department does not launch the CSA, then there will be continued reliance on the existing 100.2 assessment tool, which contains subjectivity and a lack of consistency in implementation. The CSA is a norm-referenced, validated assessment tool that is more robust in determining an individual's holistic needs. Continuing to rely on the 100.2 limits the Department's ability to determine appropriate services for members.

Once implemented, the CSA will replace the Interim Support Level Assessment (ISLA) for adult IDD Members, which was developed as a temporary assessment using major components of the CSA and thus is a natural bridge to full implementation of the CSA. The CSA is intended to be a more comprehensive replacement for the SIS assessment. Finally, the Department must fulfill its commitment to the legislature and stakeholders by implementing an assessment tool for all populations, thereby enabling the confident authorization of services based on assessed needs.

The CSA will help to streamline the process of determining eligibility for LTSS for individuals with disabilities and older adults in Colorado. By using a single, standardized assessment, it aims to create a more person-centered, efficient, and coordinated system of care. The CSA also aims to ensure that all individuals seeking or receiving LTSS have access to the appropriate level of care and support, regardless of their specific needs or the programs in which they are enrolled. By standardizing the needs assessment portion of the CSA, the CMAs will be more efficient in their operations, thereby saving time and money as they will not have to learn separate processes for each population they serve. This universal assessment and resulting person-centered support planning process aligns with the 2024 Case Management Redesign.

CSA Support FTE

The Department requests 3.0 term-limited staff starting in August 2026 and ending in August 2029 to help implement and oversee the stabilization of the CSA. The Department staff have absorbed the implementation and stabilization work, stretching existing staff far too thin to maintain at this pace, especially with the ramp-up of work that will be necessary to launch the CSA. These FTE will assist in the design and development of requirements for the CSA/PCSP functionality if additional enhancements are required, as identified post-launch. These FTEs will help to identify, test, and correct any system defects after the CSA/PCSP has been officially launched. They will also provide support for communication, training, and other technical assistance needed by CMAs after implementation. The FTE will provide quality assurance reviews and manage exception processes to ensure that assessments conducted are of high quality, that concerns identified by members during the assessment process are addressed, and that outcomes are closely monitored. The staff will establish consistent procedures for reviewing re-assessment requests and submissions of requests for exceptions, and will track data related to these exception processes for future quality improvement efforts. These FTE will track stabilization metrics for the CMAs, including responses from Member CSA

and PCSP experience surveys to identify where immediate escalations might be necessary and where longer-term improvements should be pursued. Following several significant changes to the case management system over the past few years, the Department has gained a deeper understanding of the internal demands associated with system launches, as well as the technical assistance and training needs of case managers. To meet these demands and support a successful roll-out of this critical initiative, 3.0 term-limited staff are needed.

CSA Support Contractor Funding

The Department requests \$400,000 in contractor funding for FY 2026-27, FY 2027-28, and FY 2028-29 to help support the implementation and stabilization of the CSA. If funding were approved, these contractors would assist with the launch of the CSA and PCSP, including engaging case managers and other relevant stakeholders to identify emerging issues, contribute to necessary adjustments within the CSA or PCSP, and conduct analyses to ensure the appropriate validation of the assessment. The contractors would identify trends in outcomes with the CSA implementation to ascertain if there are areas that are not adequately addressed and where additional questions may need to be included in the assessment and/or Person-Centered Support Plan. These contractors would also assist the Department in pursuing the most efficient and effective approaches to utilizing the CSA and PCSP to meet federal requirements outlined in the Access Rule and the HCBS Settings Rule, as these requirements evolve. Funding for contractors was included in the original request; however, due to project delays, the funding has expired. Therefore, the Department requires additional funding to continue its support throughout the implementation.

Rollout Proposal and Ongoing CSA Funding

The Department requests a true-up of the funding from SB 16-192 to support the case management agencies in rolling out and maintaining the CSA and PCSP. The Department proposes implementing a staggered rollout of the new CSA tool to help ensure a smooth transition to using the CSA tool for the CMAs. The Department has experienced challenges with the launch and stabilization of the CCM system. Delaying the full CSA rollout allows time for the CSA and its supporting systems to become more stable.

Contracted Project Management Support

Implementation of changes to policies, programs, and/or systems is a significant lift for the Department. Conducting stakeholder engagement and incorporating feedback, along with the state and federally required processes, such as rule changes, waiver and state plan amendments, and system changes, require strategic planning and coordination. Achieving a successful roll-out of any one project can be challenging, but managing multiple project lifecycles at a time is especially complex. To manage new projects within the Department, contracted project management support is needed. Project managers develop and oversee project schedules, support and track key milestones, assist with reporting, and provide general oversight of possible risks and issues. They are key to ensuring smooth planning and implementation, particularly when subject matter experts have a number of projects underway simultaneously. The initiatives within this request include required policy and system changes

to be implemented successfully. To support the internal team executing the work, the Department requests \$500,000 across this request, the FY 2026-27 R-15 OCL Payment Methodology Adjustments, and the FY 2026-27 R-17 OCL Benefit Adjustments request for business project management support. The Department included \$200,000 in this request as these resources will not be fully dedicated to the projects in this request and the hours required will be commensurate to the specific needs of these initiatives.

The Department requests ongoing funding to cover the expected increase related to the implementation of the new needs assessment required in SB 16-192. As shown in Tables 3.1 and 3.2 of the Appendix, the Department's request for ongoing needs assessment funding is partially offset by the discontinuation of the SIS assessment.

Supporting Evidence and Evidence Designation

Evidence Summary

Program Objective	Standardize, simplify and streamline the functional eligibility and needs assessment process for individuals seeking and maintaining long term services and supports through the implementation of a reliable and valid new Colorado Single Assessment tool and Person-Centered Support Plan, that will be automated in the Care and Case Management IT system.
Outputs being measured	The Department will measure the efficiency, effectiveness and person-centeredness of the new Colorado Single Assessment through the use of a Member experience survey following completion of CSAs. Trends in responses will be addressed as needed.
Stakeholder groups	Members, families, CMAs, HCBS Providers, legislature
Outcomes being measured	Data from the Member Experience surveys will be aggregated and reported back out to stakeholders with a scale of 1-5 in satisfaction with the process, as well as average time to conduct the CSA and PCSP processes.
Evidence Informed	The CSA is evidence-informed as indicated in the 2019-2020 CSA Pilot Reliability Analysis, the 2020 Time-Survey Report and the 2020 Comparative Analyses Reports.

Promoting Colorado for All

The new Colorado Single Assessment (CSA) is a standardized, valid, and reliable assessment of needs that will be used as an objective means of determining eligibility for long-term services and supports and a transparent manner for establishing necessary services and care for Medicaid Members. In this way, the Department will improve equity in access to Medicaid waiver services across Colorado for citizens with disabilities and the elderly.

Assumptions and Calculations

For detailed calculations, please see Appendix A.

Colorado Single Assessment Funding

The Department estimates the cost of the staggered rollout based on the number of members at each CMA and an assumed rollout date for each CMA. The Department plans to base the staggered rollout on targeted cohorts of CMAs contingent upon their meeting the established stabilization metrics. The first cohort of five CMAs will begin on August 1, 2026, based on historical performance. The second cohort is planned for February 1, 2027, and the third and final cohort will roll out in May 2027.

The Department estimated the total cost of implementing the CSA in FY 2026-27 by estimating the number of enrolled HCBS members who will receive a reassessment with the new CSA and newly incoming HCBS members who will undergo a first-time, initial assessment with the CSA. The Department estimated the number of new and established members that will be assessed with the new CSA for each CMA cohort rollout for FY 2026-27 and FY 2027-28, respectively.

Two kinds of assessments will be conducted as part of the CSA: a “Basic” Needs Assessment which focuses on a subset of items to determine a member’s eligibility for services, and a “Comprehensive” Needs Assessment which is a person-centered assessment designed to evaluate the acuity of needs of individuals with disabilities and older adults to help ensure access to appropriate services. For rate assumptions, the Department used the proposed rates for the CSA- Level Of Care (LOC) Screen assessment and the new Needs Assessment from the piloted rates Time Study.¹ Based on the 2019-2020 CSA pilot, the Department assumes that 25% of participants will opt for the “Basic” Needs Assessment, and of that 25%, 3.4% of participants will be either newly eligible or newly enrolling, as they have transitioned from another waiver. The 3.4% is based on the February 2025 forecasted growth from FY 2025-26 into FY 2026-27 for HCBS Waiver services. The remaining 75% are assumed to choose the “Comprehensive” Needs Assessment, with the same 3.4% of new participants defined above. In FY 2027-28, the Department expects that the ratio of Basic Needs Assessments to Comprehensive Needs Assessments will flip after members’ first assessment, with the majority of participants opting for the “Basic” Needs Assessments and the minority choosing the “Comprehensive” Needs Assessment. The Department makes this assumption because most participants taking the Needs Assessment in FY 2026-27 will have already taken it in FY 2025-26 and are less likely to answer the voluntary questions than new participants or those who have not experienced a significant change over the past year. During the CSA Time Study pilot, the length of time to complete the Comprehensive and Basic Assessments were timed in order to determine accurate rates. The study found that it took participants an average of two (2) hours and 17 minutes to complete the Comprehensive Assessment and had an average of 17 minutes of time savings when only completing the Basic Assessment.

1

<https://hcpf.colorado.gov/sites/hcpf/files/New%20Assessment%20and%20Support%20Plan%20Time%20Survey%20Report-June%202020.pdf>

The Department used the proposed rates for both the CSA Basic and CSA Comprehensive assessments, and multiplied these rates by the number of new and returning members estimated to undergo each type of assessment to determine the full cost of implementing the CSA tool. There are currently 15 CMAs across the State, and the Department anticipates that the CSA tool will be onboarded in phases with a series of 3 cohorts or groups of CMAs. The first cohort will have a total of 7 CMAs and is the first cohort that will start using the CSA on the anticipated go-live date of August 2026. The second cohort of CMAs will begin using the CSA in February 2027, and the third and last cohort will start using the CSA in May 2027. The Department anticipates that the CMAs that are the most stable, have shown to be the most financially sound, and have consistently provided quality services to Members, would be the first to start using the CSA for assessing members.

Administrative Resources

The FTE calculations were derived using the standard FTE calculation table.

Contractor funding is necessary to provide policy consultation support, enabling informed decisions that impact the CCM system. The contractor would work in partnership with our LTSS stakeholders. The estimated cost of this contractor is \$100,000 in total funds, and the Department assumes a 90% FFP for this contractor funding because the scope of work for this contractor would be related to enhancing the CCM IT infrastructure to improve efficiency and effectiveness. The Department assumes it would have an Advanced Planning Document (APD) submitted and approved by CMS, allowing the Department to receive enhanced federal match due to this being included in the CCM/MMIS (Medicaid Management Information System) APD that was previously submitted for Medicaid enhancements of the MMIS system. The Contractor would possess in-depth knowledge of the entire CSA and PCSP, and would have the ability to advise the Department on areas that may need modification based on the experience of members and Case Managers as the CSA is implemented in the field. Having a contractor involved in the CCM system design and development phase and therefore uniquely positioned to assist the Department in recommending changes that might be necessary to some of the CSA components within CCM would enhance the success of this project.

Contractor funding is necessary to facilitate system integration related to the stabilization of the CSA and PCPS post-launch. The estimated cost of this contract is \$300,000 total funds, and the Department assumes a 90% FMAP, due to this being included in the CCM/MMIS APD that was previously submitted for Medicaid enhancements of the MMIS system. The Contractor must have an in-depth understanding of the interplay between the various CSA items and the impacts on service delivery and drivers of cost, thus will be instrumental in advising the Department on necessary adjustments to factors in the CSA and to those elements which should be considered for and/or added to the Exceptions Process criteria.

The Department estimates that project management for business administration and system's project management will cost \$500,000 annually across this request and the FY 2026-27 R-17

OCL Benefits Adjustments and the FY 2026-27 R-15 OCL Payment Methodologies Adjustments request. In this request, \$200,000 has been added per year to support this work.

FTE Description

Position Title	Position Classification	# of FTE	Job Duties
Assessment Quality Lead	Policy Advisor IV	1.0	This position provides assessment design advice in the CCM system; design and development of requirements for the CSA/PCSP functionality in the event that additional enhancements are necessary as identified post-launch. This FTE will help to identify, test, and correct any system defects after the CSA/PCSP has been officially launched at the anticipated date of August, 2026. They will also support communication, training, and other technical assistance needed by CMAs post-implementation. This FTE will provide quality assurance reviews and manage the exceptions processes, to ensure that assessments conducted are of high quality, that concerns identified by members during the assessment process are addressed and that outcomes are monitored closely.
CCM Operations Analyst	Administrator IV	1.0	Position would support CSA/PCSP as implementation within the Care and Case Management (CCM) system. This position would ensure proper testing of the environment, to include test case authoring and support of all pre-implementation activities. Position would monitor and coordinate all post-implementation activities including case manager support and training.

CCM System Implementation Analyst	Analyst IV	1.0	This position functions as the staff authority for functional testing on the CCM system. Position acts as the Department authority on the requirements, functional testing, strategic vision, and process documentation for the CCM system. Conducts in depth analysis of the CCM functional test cases to identify completeness and scope of testing. Reviews and updates training materials, and coordinates with the training teams for implementation. Directs and recruits testing resources as necessary to fully test requirements and functionality within time constraints.
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Table 1.1 Summary by Line Item FY 2026-27									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (A) Administration, Personal Services	\$227,779	2.7	\$34,685	\$18,464	\$0	\$174,630	76.67%	Table 8.1 FTE
B	(1) Executive Director's Office; (A) Administration, Health, Life, Dental	\$44,580	0.0	\$6,789	\$3,613	\$0	\$34,178	76.67%	Table 8.1 FTE
C	(1) Executive Director's Office; (A) Administration, Short Term Disability	\$142	0.0	\$21	\$12	\$0	\$109	76.76%	Table 8.1 FTE
D	(1) Executive Director's Office; (A) Administration, Paid Family and Medical Leave Insurance	\$904	0.0	\$139	\$72	\$0	\$693	76.66%	Table 8.1 FTE
E	(1) Executive Director's Office; (A) Administration, Unfunded Liability AED Payments	\$20,140	0.0	\$3,067	\$1,632	\$0	\$15,441	76.67%	Table 8.1 FTE
F	(1) Executive Director's Office; (A) Administration, Operating Expenses	\$23,028	0.0	\$3,507	\$1,867	\$0	\$17,654	76.66%	Table 8.1 FTE
G	(1) Executive Director's Office; (A) Administration, Leased Space	\$13,950	0.0	\$2,123	\$1,132	\$0	\$10,695	76.67%	Table 8.1 FTE
H	(1) Executive Director's Office; (A) Administration, General Professional Services and Special Projects	\$200,000	0.0	\$33,346	\$17,854	\$0	\$148,800	74.40%	Table 7.1 Row B
I	(1) Executive Director's Office; (C) IT Contracts & Projects, MMIS Maintenance and Projects	\$400,000	0.0	\$23,660	\$16,340	\$0	\$360,000	90.00%	Table 7.1 Row A
J	(4) Office of Community Living; (2) Programs; Case Management	(\$12,599,205)	0.0	(\$6,299,602)	\$0	\$0	(\$6,299,603)	50.00%	Table 3.2 Row O
K	Total Request	(\$11,668,682)	2.7	(\$6,192,265)	\$60,986	\$0	(\$5,537,403)	47.46%	Sum of Rows A through J
Table 1.2 Summary by Line Item FY 2027-28									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (A) Administration, Personal Services	\$247,589	3.0	\$37,701	\$20,069	\$0	\$189,819	76.67%	Table 8.1 FTE
B	(1) Executive Director's Office; (A) Administration, Health, Life, Dental	\$53,298	0.0	\$8,115	\$4,320	\$0	\$40,863	76.67%	Table 8.1 FTE
C	(1) Executive Director's Office; (A) Administration, Short Term Disability	\$154	0.0	\$23	\$13	\$0	\$118	76.62%	Table 8.1 FTE
D	(1) Executive Director's Office; (A) Administration, Paid Family and Medical Leave Insurance	\$984	0.0	\$149	\$79	\$0	\$756	76.83%	Table 8.1 FTE
E	(1) Executive Director's Office; (A) Administration, Unfunded Liability AED Payments	\$21,894	0.0	\$3,333	\$1,776	\$0	\$16,785	76.66%	Table 8.1 FTE
F	(1) Executive Director's Office; (A) Administration, Operating Expenses	\$2,208	0.0	\$336	\$180	\$0	\$1,692	76.63%	Table 8.1 FTE
G	(1) Executive Director's Office; (A) Administration, Leased Space	\$13,950	0.0	\$2,123	\$1,132	\$0	\$10,695	76.67%	Table 8.1 FTE
H	(1) Executive Director's Office; (A) Administration, General Professional Services and Special Projects	\$200,000	0.0	\$33,346	\$17,854	\$0	\$148,800	74.40%	Table 7.2 Row B
I	(1) Executive Director's Office; (C) IT Contracts & Projects, MMIS Maintenance and Projects	\$400,000	0.0	\$23,660	\$16,340	\$0	\$360,000	90.00%	Table 7.2 Row B
J	(4) Office of Community Living; (2) Programs; Case Management	\$2,604,226	0.0	\$1,302,113	\$0	\$0	\$1,302,113	50.00%	Table 3.2 Row O
K	Total Request	\$3,544,303	3.0	\$1,410,899	\$61,763	\$0	\$2,071,641	58.45%	Sum of Rows A through J
Table 1.3 Summary by Line Item FY 2028-29 and Ongoing									
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	(1) Executive Director's Office; (A) Administration, Personal Services	\$247,589	3.0	\$37,701	\$20,069	\$0	\$189,819	76.67%	Table 8.1 FTE
B	(1) Executive Director's Office; (A) Administration, Health, Life, Dental	\$53,298	0.0	\$8,115	\$4,320	\$0	\$40,863	76.67%	Table 8.1 FTE
C	(1) Executive Director's Office; (A) Administration, Short Term Disability	\$154	0.0	\$23	\$13	\$0	\$118	76.62%	Table 8.1 FTE
D	(1) Executive Director's Office; (A) Administration, Paid Family and Medical Leave Insurance	\$984	0.0	\$149	\$79	\$0	\$756	76.83%	Table 8.1 FTE
E	(1) Executive Director's Office; (A) Administration, Unfunded Liability AED Payments	\$21,894	0.0	\$3,333	\$1,776	\$0	\$16,785	76.66%	Table 8.1 FTE
F	(1) Executive Director's Office; (A) Administration, Operating Expenses	\$2,208	0.0	\$336	\$180	\$0	\$1,692	76.63%	Table 8.1 FTE
G	(1) Executive Director's Office; (A) Administration, Leased Space	\$13,950	0.0	\$2,123	\$1,132	\$0	\$10,695	76.67%	Table 8.1 FTE
H	(1) Executive Director's Office; (A) Administration, General Professional Services and Special Projects	\$200,000	0.0	\$33,346	\$17,854	\$0	\$148,800	74.40%	Table 7.2 Row B
I	(1) Executive Director's Office; (C) IT Contracts & Projects, MMIS Maintenance and Projects	\$400,000	0.0	\$23,660	\$16,340	\$0	\$360,000	90.00%	Table 7.3 Row B
J	(4) Office of Community Living; (2) Programs; Case Management	\$2,604,226	0.0	\$1,302,113	\$0	\$0	\$1,302,113	50.00%	Table 3.2 Row O
K	Total Request	\$3,544,303	3.0	\$1,410,899	\$61,763	\$0	\$2,071,641	58.45%	Sum of Rows A through J

Table 2.1 Summary by Initiative FY 2026-27									
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Colorado Single Assessment	(\$12,599,205)	0.0	(\$6,299,602)	\$0	\$0	(\$6,299,603)	50.00%	Table 3.2 Row O
B	FTE	\$330,523	2.7	\$50,331	\$26,792	\$0	\$253,400	76.67%	Table 8.1 FTE + Table 8.2 FTE + Table 8.3
C	Systems Contractor Costs	\$400,000	0.0	\$23,660	\$16,340	\$0	\$360,000	90.00%	Table 7.1 Row A
D	Contracted Project Managers	\$200,000	0.0	\$33,346	\$17,854	\$0	\$148,800	74.40%	Table 7.1 Row B
E	Total Request	(\$11,668,682)	2.7	(\$6,192,265)	\$60,986	\$0	(\$5,537,403)	47.46%	Sum of Rows A through D
Table 2.2 Summary by Initiative FY 2027-28									
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Colorado Single Assessment	\$2,604,226	0.0	\$1,302,113	\$0	\$0	\$1,302,113	50.00%	Table 3.2 Row O
B	FTE	\$340,077	3.0	\$51,780	\$27,569	\$0	\$260,728	76.67%	Table 8.1 FTE + Table 8.2 FTE + Table
C	Systems Contractor Costs	\$400,000	0.0	\$23,660	\$16,340	\$0	\$360,000	90.00%	Table 7.2 Row A
D	Contracted Project Managers	\$200,000	0.0	\$33,346	\$17,854	\$0	\$148,800	74.40%	Table 7.2 Row B
E	Total Request	\$3,544,303	3.0	\$1,410,899	\$61,763	\$0	\$2,071,641	58.45%	Sum of Rows A through D
Table 2.3 Summary by Initiative FY 2028-29 and Ongoing									
Row	Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	Notes/Calculations
A	Colorado Single Assessment	\$2,604,226	0.0	\$1,302,113	\$0	\$0	\$1,302,113	50.00%	Table 3.2 Row O
B	FTE	\$340,077	3.0	\$51,780	\$27,569	\$0	\$260,728	76.67%	Table 8.1 FTE + Table 8.2 FTE + Table
C	Systems Contractor Costs	\$400,000	0.0	\$23,660	\$16,340	\$0	\$360,000	90.00%	Table 7.3 Row a
D	Contracted Project Managers	\$200,000	0.0	\$33,346	\$17,854	\$0	\$148,800	74.40%	Table 7.3 Row B
E	Total Request	\$3,544,303	3.0	\$1,410,899	\$61,763	\$0	\$2,071,641	58.45%	Sum of Rows A through D

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Appendix A: Assumptions and Calculations

Table 3.1: Colorado Needs Assessment (CSA) Tool Population Breakdown					
Row	Item	FY 2026-27	FY 2027-28	FY 2028-29	Source/Calculations
A	Total HCBS Clients	15,830	54,504	54,504	Table 4.1
C	HCBS Clients Estimated to Choose Basic	3,957	21,535	21,535	(Row A) * (Row B)
D	HCBS Clients Estimated to Choose Comprehensive	11,873	32,969	32,969	(Row A) * (Row C)

Table 3.2: Colorado Single Assessment (CSA) Tool Expenditure					
Row	Item	FY 2026-27	FY 2027-28	FY 2028-29	Source/Calculations
A	Initial Needs Assessment (Formally Basic)	\$260.28	\$260.28	\$260.28	FY 2024-25 Rate Adjustment
B	Annual Reassessment Needs Assessment (Formally Basic)	\$244.31	\$244.31	\$244.31	FY 2024-25 Rate Adjustment
C	Number of New Participants	135	733	733	Table 1.2 Row B * 3.4% Growth Rate
D	Number of Returning Participants	3,957	21,535	21,535	Table 1.2 Row E - Row C
E	Basic Total	\$1,001,872	\$5,452,001	\$5,452,001	(Row A * Row C) + (Row B * Row D)
F	Initial Needs Assessment (Formally Comprehensive)	\$325.36	\$325.36	\$325.36	FY 2024-25 Rate Adjustment
G	Annual Reassessment Needs Assessment (Formally Comprehensive)	\$272.34	\$272.34	\$272.34	FY 2024-25 Rate Adjustment
H	Number of New Participants	404	1,122	1,122	Table 1.2 Row C * 3.4% Growth Rate
I	Number of Returning Participants	11,873	32,969	32,969	Table 1.2 Row E - Row C
J	Comprehensive Total	\$3,364,938	\$9,343,831	\$9,343,831	(Row F * Row H) + (Row G * Row I)
K	Total CSA Expenditure from CMA Cohort Rollout	\$4,366,810	\$14,795,832	\$14,795,832	(Row E) + (Row J)
L	SB 16-192 Funding Appropriated	\$13,425,049	\$0	\$0	FY 2026-27 R-5 Office of Community Living Cost and Caseload Adjustments
M	Difference	(\$9,058,239)	\$14,795,832	\$14,795,832	(Row K) - (Row L)
N	Savings from discontinuation of assess	(\$3,540,966)	(\$12,191,606)	(\$12,191,606)	Table 6.1 Row G
O	Total Savings	(\$12,599,205)	\$2,604,226	\$2,604,226	(Row M) + (Row N)

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Appendix A: Assumptions and Calculations

Table 4.1: CMA Cohort Rollout Timeline					
Fiscal Year	Date	CMA Cohort 1	CMA Cohort 2	CMA Cohort 3 Start in May 2027	Total
FY 2026-27	July 2026	0	0	0	0
	August 2026	1,044	0	0	1,044
	September 2026	1,044	0	0	1,044
	October 2026	1,044	0	0	1,044
	November 2026	1,044	0	0	1,044
	December 2026	1,044	0	0	1,044
	January 2027	1,044	0	0	1,044
	February 2027	1,044	212	0	1,256
	March 2027	1,044	212	0	1,256
	April 2027	1,044	212	0	1,256
	May 2027	1,044	212	0	1,256
	June 2027	1,044	212	3,286	4,542
	Total FY 2026-27	11,484	1,060	3,286	15,830
FY 2027-28	July 2027	1,044	212	3,286	4,542
	August 2027	1,044	212	3,286	4,542
	September 2027	1,044	212	3,286	4,542
	October 2027	1,044	212	3,286	4,542
	November 2027	1,044	212	3,286	4,542
	December 2027	1,044	212	3,286	4,542
	January 2028	1,044	212	3,286	4,542
	February 2028	1,044	212	3,286	4,542
	March 2028	1,044	212	3,286	4,542
	April 2028	1,044	212	3,286	4,542
	May 2028	1,044	212	3,286	4,542
	June 2028	1,044	212	3,286	4,542
	Total FY 2027-28	12,528	2,544	39,432	54,504
FY 2028-29	July 2028	1,044	212	3,286	4,542
	August 2028	1,044	212	3,286	4,542
	September 2028	1,044	212	3,286	4,542
	October 2028	1,044	212	3,286	4,542
	November 2028	1,044	212	3,286	4,542
	December 2028	1,044	212	3,286	4,542
	January 2029	1,044	212	3,286	4,542
	February 2029	1,044	212	3,286	4,542
	March 2029	1,044	212	3,286	4,542
	April 2029	1,044	212	3,286	4,542
	May 2029	1,044	212	3,286	4,542
	June 2029	1,044	212	3,286	4,542
	Total FY 2028-29	12,528	2,544	39,432	54,504

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Table 4.2 : CMA Comprehensive Versus Basic Breakout 1

Cohort 1 - Members Using Comprehensive	Cohort 1 - Members Using Basic	Cohort 2 - Members Using Comprehensive	Cohort 2 - Members Using Basic	Cohort 3 - Members Using Comprehensive	Cohort 3 - Members Using Basic	Total Basic	Total Comprehensive	Grand Total
0	0	0	0	0	0	0	0	0
783	261	0	0	0	0	261	783	1,044
783	261	0	0	0	0	261	783	1,044
783	261	0	0	0	0	261	783	1,044
783	261	0	0	0	0	261	783	1,044
783	261	0	0	0	0	261	783	1,044
783	261	0	0	0	0	261	783	1,044
783	261	0	0	0	0	261	783	1,044
783	261	159	53	0	0	314	942	1,256
783	261	159	53	0	0	314	942	1,256
783	261	159	53	0	0	314	942	1,256
783	261	159	53	0	0	314	942	1,256
783	261	159	53	2,465	821	1,135	3,407	4,542
8,613	2,871	795	265	2,465	821	3,957	11,873	15,830
783	261	159	53	2,465	821	1,135	3,407	4,542
261	783	159	53	2,465	821	1,657	2,885	4,542
261	783	159	53	2,465	821	1,657	2,885	4,542
261	783	159	53	2,465	821	1,657	2,885	4,542
261	783	159	53	2,465	821	1,657	2,885	4,542
261	783	159	53	2,465	821	1,657	2,885	4,542
261	783	159	53	2,465	821	1,657	2,885	4,542
261	783	53	159	2,465	821	1,763	2,779	4,542
261	783	53	159	2,465	821	1,763	2,779	4,542
261	783	53	159	2,465	821	1,763	2,779	4,542
261	783	53	159	2,465	821	1,763	2,779	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
3,654	8,874	1,378	1,166	27,937	11,495	21,535	32,969	54,504
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
261	783	53	159	822	2,464	3,406	1,136	4,542
3,132	9,396	636	1,908	9,864	29,568	40,872	13,632	54,504

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Appendix A: Assumptions and Calculations

Table 5.1: Cohort 1 Monthly Assessments			
Row	CMA	Members	Source/Calculations
A	Prowers County Public Health	468	Department PAR data on April, 2025
B	Montrose County DHHS	490	Department PAR data on April, 2025
C	Las Animas County DHS	536	Department PAR data on April, 2025
D	Weld County AAA	2,601	Department PAR data on April, 2025
E	Foothills Gateway	2,662	Department PAR data on April, 2025
F	Rocky Mountain Health Plans	4,951	Department PAR data on April, 2025
G	Garfield County DHS	819	Department PAR data on April, 2025
H	Total Members	12,527	Sum Row A through Row G
I	Monthly Number of Assessments	1,044	(Row G) / 12

Table 5.2: Cohort 2 Monthly Assessments			
Row	CMA	Members	Source/Calculations
A	Northeastern Colorado AAA	910	Department PAR data on April, 2025
B	Otero County DHS	701	Department PAR data on April, 2025
C	Community Connections, Inc.	935	Department PAR data on April, 2025
D	Total Members	2,546	Sum Row A through Row C
E	Monthly Number of Assessments	212	(Row G) / 12

Table 5.3: Cohort 3 Monthly Assessments			
Row	CMA	Members	Source/Calculations
A	Jefferson County Social Services	3,713	Department PAR data on April, 2025
B	A&I Avenues	2,816	Department PAR data on April, 2025
C	Developmental Pathways	9,549	Department PAR data on April, 2025
D	The Resource Exchange	11,628	Department PAR data on April, 2025
E	Rocky Mountain Human Services	11,721	Department PAR data on April, 2025
F	Total Members	39,427	Sum Row A through Row E
G	Monthly Number of Assessments	3,286	(Row G) / 12

Table 5.4: Total Monthly Assessments			
Row	Item	Total Members	Source/Calculations
A	Total CMAs	15	Total of all CMAs in prior tables.
B	Total Members	54,500	Table x.1 Row F + Table x.2 Row F + Table x.3 Row F
C	Total Monthly Assessments	4,542	(Row B) / 12

Table 6.1: Discontinuation of Initial Level of Care and CSR Level of Care Assessments					
Row	Item	FY 2026-27	FY 2027-28	FY 2028-29	Source/Calculations
A	Initial Level of Care Assessment 100.2 Rate	\$283.62	\$283.62	\$283.62	Based on rates found in FY 24-25 CMA Contract
B	Number of New Participants	539	1,855	1,855	Table 3.2 (Row C) + (Row H)
C	Total Savings From Discontinuation of Initial LOC 100.2 Assessment	(\$152,871.00)	(\$526,115.00)	(\$526,115.00)	(Row A) * (Row C)
D	CSR Level of Care Assessment 100.2 Rate	\$214.03	\$214.03	\$214.03	Based on rates found in FY 24-25 CMA Contract
E	Number of Returning Participants	15,830	54,504	54,504	Table 3.2 (Row D) + (Row I)
F	Total Savings From Removal of CSR Level of Care 100.2 Assessment	(\$3,388,095.00)	(\$11,665,491.00)	(\$11,665,491.00)	(Row D) * -(Row E)
G	Total Savings from Discontinued Assessments	(\$3,540,966.00)	(\$12,191,606.00)	(\$12,191,606.00)	(Row C) + (Row F)

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Appendix A: Assumptions and Calculations

Table 7.1 Colorado Single Assessment (CSA) Contractor Funding Tool FY 2026-27							
Row	Item	Total Funds	General Fund	Cash Funds	RF	Federal Funds	FMAP
A	CSA Development Support	\$400,000	\$23,660	\$16,340	\$0	\$360,000	90.00%
B	Contracted Program Manager	\$200,000	\$33,346	\$17,854	\$0	\$148,800	74.40%
C	Contractor Funding Total Cost	\$600,000	\$57,006	\$34,194	\$0	\$508,800	88.25%

Table 7.2 Colorado Single Assessment (CSA) Contractor Funding Tool FY 2027-28							
Row	Item	Total Funds	General Fund	Cash Funds	RF	Federal Funds	FMAP
A	CSA Development Support	\$400,000	\$23,660	\$16,340	\$0	\$360,000	90.00%
B	Contracted Program Manager	\$200,000	\$33,346	\$17,854	\$0	\$148,800	74.40%
C	Contractor Funding Total Cost	\$600,000	\$57,006	\$34,194	\$0	\$508,800	88.25%

Table 7.3 Colorado Single Assessment (CSA) Contractor Funding Tool FY 2028-29							
Row	Item	Total Funds	General Fund	Cash Funds	RF	Federal Funds	FMAP
A	CSA Development Support	\$400,000	\$23,660	\$16,340	\$0	\$360,000	90.00%
B	Contracted Program Manager	\$200,000	\$33,346	\$17,854	\$0	\$148,800	74.40%
C	Contractor Funding Total Cost	\$600,000	\$57,006	\$34,194	\$0	\$508,800	88.25%

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Table 8.1 FTE Calculations										
Personal Services										
Position Classification	FTE	Start Month	End Month	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
POLICY ADVISOR IV	1.0	Jul 2026	Jun 2029	\$0	\$75,926	\$82,528	\$82,528	\$0	\$0	Assessment Quality Lead
Total Personal Services (Salary, PERA, FICA)	1.0			\$0	\$75,926	\$82,528	\$82,528	\$0	\$0	

Centrally Appropriated Costs										
Cost Center	FTE	FTE	Cost or	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Health, Life, and Dental	0.0	0.0	Varies	\$0	\$14,860	\$17,767	\$17,767	\$0	\$0	
Short-term Disability	-	-	0.07%	\$0	\$47	\$51	\$51	\$0	\$0	
Paid Family and Medical Leave Insurance	-	-	0.45%	\$0	\$302	\$328	\$328	\$0	\$0	
Unfunded Liability AED Payments	-	-	10.00%	\$0	\$6,714	\$7,298	\$7,298	\$0	\$0	
Centrally Appropriated Costs Total				\$0	\$21,923	\$25,444	\$25,444	\$0	\$0	

Operating Expenses										
Ongoing Costs	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Standard Allowance	0.0	0.0	\$500	\$0	\$460	\$500	\$500	\$0	\$0	
Communications	0.0	0.0	\$235	\$0	\$216	\$235	\$235	\$0	\$0	
Other	0.0	0.0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
<i>Subtotal</i>				\$0	\$676	\$735	\$735	\$0	\$0	
One-Time Costs (Capital Outlay)	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Cubicle	1.0		\$5,000	\$0	\$5,000	\$0	\$0	\$0	\$0	
PC	1.0		\$2,000	\$0	\$2,000	\$0	\$0	\$0	\$0	
Other	1.0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
<i>Subtotal</i>				\$0	\$7,000	\$0	\$0	\$0	\$0	
Total Operating				\$0	\$7,676	\$735	\$735	\$0	\$0	

Leased Space										
	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Leased Space	0.0	0.0	\$4,650	\$0	\$4,650	\$4,650	\$4,650	\$0	\$0	

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Table 8.2 FTE Calculations										
Personal Services										
Position Classification	FTE	Start Month	End Month	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
ADMINISTRATOR IV	1.0	Jul 2026	Jun 2029	\$0	\$75,926	\$82,528	\$82,528	\$0	\$0	CCM Operations Analyst
Total Personal Services (Salary, PERA, FICA)	1.0			\$0	\$75,926	\$82,528	\$82,528	\$0	\$0	

Centrally Appropriated Costs										
Cost Center	FTE	FTE	Cost or	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Health, Life, and Dental	0.0	0.0	Varies	\$0	\$14,860	\$17,767	\$17,767	\$0	\$0	
Short-term Disability	-	-	0.07%	\$0	\$47	\$51	\$51	\$0	\$0	
Paid Family and Medical Leave Insurance	-	-	0.45%	\$0	\$302	\$328	\$328	\$0	\$0	
Unfunded Liability AED Payments	-	-	10.00%	\$0	\$6,714	\$7,298	\$7,298	\$0	\$0	
Centrally Appropriated Costs Total				\$0	\$21,923	\$25,444	\$25,444	\$0	\$0	

Operating Expenses										
Ongoing Costs	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Standard Allowance	0.0	0.0	\$500	\$0	\$460	\$500	\$500	\$0	\$0	
Communications	0.0	0.0	\$235	\$0	\$216	\$235	\$235	\$0	\$0	
Other	0.0	0.0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
<i>Subtotal</i>				\$0	\$676	\$735	\$735	\$0	\$0	
One-Time Costs (Capital Outlay)	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Cubicle	1.0		\$5,000	\$0	\$5,000	\$0	\$0	\$0	\$0	
PC	1.0		\$2,000	\$0	\$2,000	\$0	\$0	\$0	\$0	
Other	1.0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
<i>Subtotal</i>				\$0	\$7,000	\$0	\$0	\$0	\$0	
Total Operating				\$0	\$7,676	\$735	\$735	\$0	\$0	

Leased Space										
	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Leased Space	0.0	0.0	\$4,650	\$0	\$4,650	\$4,650	\$4,650	\$0	\$0	

R-08 Colorado Single Assessment Implementation
Appendix A: Assumptions and Calculations

Table 8.3 FTE Calculations										
Personal Services										
Position Classification	FTE	Start Month	End Month	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
ANALYST IV	1.0	Jul 2026	Jun 2029	\$0	\$75,926	\$82,528	\$82,528	\$0	\$0	CCM Systems Analyst
Total Personal Services (Salary, PERA, FICA)	1.0			\$0	\$75,926	\$82,528	\$82,528	\$0	\$0	

Centrally Appropriated Costs										
Cost Center	FTE	FTE	Cost or	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Health, Life, and Dental	0.0	0.0	Varies	\$0	\$14,860	\$17,767	\$17,767	\$0	\$0	
Short-term Disability	-	-	0.07%	\$0	\$47	\$51	\$51	\$0	\$0	
Paid Family and Medical Leave Insurance	-	-	0.45%	\$0	\$302	\$328	\$328	\$0	\$0	
Unfunded Liability AED Payments	-	-	10.00%	\$0	\$6,714	\$7,298	\$7,298	\$0	\$0	
Centrally Appropriated Costs Total				\$0	\$21,923	\$25,444	\$25,444	\$0	\$0	

Operating Expenses										
Ongoing Costs	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Standard Allowance	0.0	0.0	\$500	\$0	\$460	\$500	\$500	\$0	\$0	
Communications	0.0	0.0	\$235	\$0	\$216	\$235	\$235	\$0	\$0	
Other	0.0	0.0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
<i>Subtotal</i>				\$0	\$676	\$735	\$735	\$0	\$0	
One-Time Costs (Capital Outlay)	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Cubicle	1.0		\$5,000	\$0	\$5,000	\$0	\$0	\$0	\$0	
PC	1.0		\$2,000	\$0	\$2,000	\$0	\$0	\$0	\$0	
Other	1.0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	
<i>Subtotal</i>				\$0	\$7,000	\$0	\$0	\$0	\$0	
Total Operating				\$0	\$7,676	\$735	\$735	\$0	\$0	

Leased Space										
	FTE	FTE	Cost	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29	FY 2029-30	FY 2030-31	Notes
Leased Space	0.0	0.0	\$4,650	\$0	\$4,650	\$4,650	\$4,650	\$0	\$0	