

**Second Regular Session  
Seventy-third General Assembly  
STATE OF COLORADO**

**PREAMENDED**

*This Unofficial Version Includes Committee  
Amendments Not Yet Adopted on Second Reading*

LLS NO. 22-0991.02 Conrad Imel x2313

**SENATE BILL 22-235**

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**SENATE SPONSORSHIP**

**Rankin and Zenzinger,** Hansen, Ginal, Kirkmeyer, Kolker, Pettersen, Simpson

**HOUSE SPONSORSHIP**

**Herod and McCluskie,** Ransom

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**Senate Committees**

Appropriations

**House Committees**

State, Civic, Military, & Veterans Affairs  
Appropriations

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**A BILL FOR AN ACT**

101      **CONCERNING COUNTY ADMINISTRATION OF PUBLIC ASSISTANCE**  
102              **PROGRAMS, AND, IN CONNECTION THEREWITH, MAKING AN**  
103              **APPROPRIATION.**

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)*

**Joint Budget Committee.** The bill requires the department of human services (DHS) and the department of health care policy and financing (HCPF), in consultation with county departments of human and social services (county departments), to develop a scope of work for a comprehensive assessment of the best practices related to the

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
*Capital letters or bold & italic numbers indicate new material to be added to existing law.*  
*Dashes through the words or numbers indicate deletions from existing law.*

SENATE  
3rd Reading Unamended  
May 3, 2022

SENATE  
Amended 2nd Reading  
May 2, 2022

administration of public and medical assistance programs. The bill requires DHS to enter into an agreement with a third party to conduct the comprehensive assessment, evaluate existing practices for the administration of public and medical assistance programs, and to make recommendations related to administration of public and medical assistance programs and ongoing evaluation of the public and medical assistance program system. DHS is required to submit the results of the comprehensive assessment and a fiscal impact analysis of implementing the third party's recommendations to HCPF, county departments, and the joint budget committee.

Following completion of the comprehensive assessment, DHS is required to enter into an agreement with an outside entity to develop a public and medical assistance programs funding model (funding model) to determine the amount of money necessary to fund county administration of certain public assistance programs overseen by DHS and HCPF. DHS shall enter into an agreement with an outside entity to annually update and modify the funding model.

Beginning with fiscal year 2025-26, the joint budget committee shall use the results of the funding model to inform its decisions regarding the amount of the appropriation to DHS and HCPF to fund county administration of public assistance programs. DHS and HCPF shall allocate money to counties for public assistance program administration in accordance with the results of the funding model.

The bill requires DHS and HCPF to submit an annual report to the joint budget committee on the funding model.

The bill appropriates \$80,000 to HCPF for administration related to office of economic security - medicaid funding and \$420,000 to the DHS for administration.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2           **SECTION 1.** In Colorado Revised Statutes, **add** 26-1-121.5 as  
3 follows:

4           **26-1-121.5. Public assistance funding model - workload study**  
5 **- evaluation - report - definitions - repeal.** (1) AS USED IN THIS  
6 SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

7           (a) "FUNDING MODEL" MEANS THE COUNTY ADMINISTRATION OF  
8 PUBLIC AND MEDICAL ASSISTANCE PROGRAMS FUNDING MODEL TO  
9 DETERMINE THE APPROPRIATE LEVEL OF FUNDING FOR EACH COUNTY

1 REQUIRED TO MAKE ELIGIBILITY DETERMINATIONS REGARDING  
2 PARTICIPATION IN A PUBLIC ASSISTANCE PROGRAM.

3 (b) "MEDICAL ASSISTANCE PROGRAMS" MEANS THE FOLLOWING  
4 PUBLIC ASSISTANCE PROGRAMS ADMINISTERED BY THE DEPARTMENT OF  
5 HEALTH CARE POLICY AND FINANCING: THE MEDICAL ASSISTANCE  
6 PROGRAM, ESTABLISHED IN ARTICLES 4, 5, AND 6 OF TITLE 25.5, INCLUDING  
7 LONG-TERM CARE SERVICES; THE CHILDREN'S BASIC HEALTH PLAN,  
8 ESTABLISHED IN ARTICLE 8 OF TITLE 25.5; AND THE OLD AGE PENSION  
9 HEALTH AND MEDICAL CARE PROGRAM DESCRIBED IN SECTION 25.5-2-101.

10 (c) "PUBLIC ASSISTANCE PROGRAMS" MEANS THE PROGRAMS OF  
11 PUBLIC ASSISTANCE ADMINISTERED BY THE STATE DEPARTMENT  
12 PURSUANT TO ARTICLE 2 OF THIS TITLE 26.

13 (2) (a) ON OR BEFORE AUGUST 15, 2022, THE STATE DEPARTMENT  
14 AND THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, IN  
15 CONSULTATION WITH COUNTY DEPARTMENTS, SHALL DEVELOP A SCOPE OF  
16 WORK FOR THE COMPREHENSIVE ASSESSMENT OF BEST PRACTICES  
17 RELATED TO THE ADMINISTRATION OF PUBLIC AND MEDICAL ASSISTANCE  
18 PROGRAMS, INCLUDING, BUT NOT LIMITED TO, POLICIES, PROCESSES, SIZE  
19 AND STRUCTURE OF THE WORKFORCE THAT ADMINISTERS THE PROGRAMS,  
20 INFORMATION SYSTEMS INFRASTRUCTURE, AND DATA TO ENSURE  
21 IMPROVED ACCESS BY ELIGIBLE INDIVIDUALS TO PUBLIC AND MEDICAL  
22 ASSISTANCE PROGRAMS, TIMELINESS OF APPLICATIONS PROCESSING,  
23 ADMINISTRATIVE EFFICIENCY, AND COST EFFECTIVENESS.

24 (b) ON OR BEFORE NOVEMBER 1, 2022, THE STATE DEPARTMENT,  
25 AFTER CONSULTATION WITH THE DEPARTMENT OF HEALTH CARE POLICY  
26 AND FINANCING AND COUNTY DEPARTMENTS, SHALL ENTER INTO AN  
27 AGREEMENT WITH A THIRD PARTY TO:

1 (I) CONDUCT THE COMPREHENSIVE ASSESSMENT WITHIN THE  
2 SCOPE OF WORK DEVELOPED PURSUANT TO SUBSECTION (2)(a) OF THIS  
3 SECTION;

4 (II) EVALUATE THE EXISTING POLICIES, PROCESSES, SIZE AND  
5 STRUCTURE OF PROGRAM WORKFORCE, INFORMATION SYSTEMS  
6 INFRASTRUCTURE, AND DATA FOR THE ADMINISTRATION OF THE PUBLIC  
7 AND MEDICAL ASSISTANCE PROGRAMS AT THE STATE AND COUNTY LEVELS;

8 (III) MAKE RECOMMENDATIONS FOR CHANGES TO STATE AND  
9 COUNTY PUBLIC AND MEDICAL ASSISTANCE PROGRAM POLICIES,  
10 PROCESSES, SIZE AND STRUCTURE OF PROGRAM WORKFORCE, AND  
11 INFORMATION SYSTEMS INFRASTRUCTURE TO ENSURE IMPROVED ACCESS  
12 BY ELIGIBLE INDIVIDUALS TO PUBLIC AND MEDICAL ASSISTANCE  
13 PROGRAMS, TIMELINESS OF APPLICATIONS PROCESSING, ADMINISTRATIVE  
14 EFFICIENCY, AND COST EFFECTIVENESS; AND

15 (IV) MAKE RECOMMENDATIONS RELATED TO THE ONGOING  
16 EVALUATION OF THE PUBLIC AND MEDICAL ASSISTANCE PROGRAM SYSTEM,  
17 INCLUDING APPROPRIATE METRICS FOR DETERMINING WHETHER THE  
18 EFFICIENCY AND COST-EFFECTIVENESS OF THE SYSTEM HAS IMPROVED AS  
19 A RESULT OF THE IMPLEMENTATION OF RECOMMENDATIONS MADE  
20 PURSUANT TO THIS SUBSECTION (2)(b).

21 (c) ON OR BEFORE JULY 1, 2023, THE STATE DEPARTMENT SHALL  
22 SUBMIT THE RESULTS OF THE COMPREHENSIVE ASSESSMENT AND  
23 RECOMMENDATIONS REQUIRED PURSUANT TO SUBSECTION (2)(b) OF THIS  
24 SECTION TO THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING,  
25 THE COUNTY DEPARTMENTS, AND THE JOINT BUDGET COMMITTEE.

26 (d) ON OR BEFORE NOVEMBER 1, 2023, THE STATE DEPARTMENT  
27 SHALL SUBMIT AN ANALYSIS OF THE FISCAL IMPACT OF IMPLEMENTING THE

1 RECOMMENDATIONS REQUIRED IN SUBSECTION (2)(b) OF THIS SECTION TO  
2 THE JOINT BUDGET COMMITTEE. THE ANALYSIS MUST INCLUDE A  
3 DETERMINATION OF THE FEASIBILITY OF IMPLEMENTING THE  
4 RECOMMENDATIONS, A TIMELINE FOR IMPLEMENTATION, AND COST OF  
5 IMPLEMENTATION FOR EACH FISCAL YEAR INCLUDED IN THE TIMELINE. THE  
6 ANALYSIS MUST ALSO INCLUDE A DISCUSSION OF ANY CONCERNS  
7 EXPRESSED BY THE STATE DEPARTMENT, THE DEPARTMENT OF HEALTH  
8 CARE POLICY AND FINANCING, OR THE COUNTY DEPARTMENTS RELATED TO  
9 THE COMPREHENSIVE ASSESSMENT AND RECOMMENDATIONS DESCRIBED  
10 IN SUBSECTIONS (2)(a) AND (2)(b) OF THIS SECTION.

11 (e) THIS SUBSECTION (2) IS REPEALED, EFFECTIVE JUNE 30, 2024.

12 (3) (a) ON OR BEFORE JANUARY 2, 2024, THE STATE DEPARTMENT  
13 SHALL ENTER INTO AN AGREEMENT WITH AN OUTSIDE ENTITY TO DEVELOP  
14 A COUNTY ADMINISTRATION OF PUBLIC AND MEDICAL ASSISTANCE  
15 PROGRAMS FUNDING MODEL TO DETERMINE THE AMOUNT OF MONEY  
16 NECESSARY TO FUND THE ADMINISTRATION OF PUBLIC AND MEDICAL  
17 ASSISTANCE PROGRAMS IN EACH COUNTY. THE OUTSIDE ENTITY MAY BE  
18 THE SAME ENTITY AS THE THIRD PARTY THAT PERFORMS THE  
19 COMPREHENSIVE ASSESSMENT DESCRIBED IN SUBSECTION (2) OF THIS  
20 SECTION.

21 (b) THE OUTSIDE ENTITY SHALL WORK WITH THE STATE  
22 DEPARTMENT, THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING,  
23 AND COUNTY DEPARTMENTS TO DETERMINE THE APPROPRIATE PROCESS  
24 AND DATA TO BE USED IN THE DEVELOPMENT OF THE FUNDING MODEL.

25 (c) ON OR BEFORE JULY 1, 2024, THE OUTSIDE ENTITY SHALL  
26 DEVELOP THE FUNDING MODEL FOR FISCAL YEAR 2025-26.

27 (d) ON OR BEFORE NOVEMBER 1, 2024, THE STATE DEPARTMENT

1 SHALL SUBMIT THE RESULTS OF THE FUNDING MODEL TO THE JOINT  
2 BUDGET COMMITTEE, THE DEPARTMENT OF HEALTH CARE POLICY AND  
3 FINANCING, AND THE COUNTY DEPARTMENTS.

4 (e) THIS SUBSECTION (3) IS REPEALED, EFFECTIVE JUNE 30, 2026.

5 (4) (a) ON OR BEFORE JULY 1, 2025, AND ON OR BEFORE JULY 1  
6 EVERY THIRD YEAR THEREAFTER, THE STATE DEPARTMENT SHALL ENTER  
7 INTO AN AGREEMENT WITH AN OUTSIDE ENTITY TO ANNUALLY UPDATE  
8 AND MODIFY THE FUNDING MODEL. THE OUTSIDE ENTITY MAY BE THE  
9 SAME ENTITY THAT DEVELOPED PRIOR VERSIONS OF THE FUNDING MODEL.  
10 THE OUTSIDE ENTITY SHALL DEVELOP EACH UPDATE IN CONSULTATION  
11 WITH THE STATE DEPARTMENT, THE DEPARTMENT OF HEALTH CARE POLICY  
12 AND FINANCING, AND THE COUNTY DEPARTMENTS.

13 (b) ON OR BEFORE NOVEMBER 1, 2025, AND ON OR BEFORE  
14 NOVEMBER 1 OF EACH YEAR THEREAFTER, THE STATE DEPARTMENT SHALL  
15 SUBMIT THE RESULTS OF THE FUNDING MODEL TO THE JOINT BUDGET  
16 COMMITTEE, THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING,  
17 AND THE COUNTY DEPARTMENTS.

18 (5) THE FUNDING MODEL MUST INCLUDE:

19 (a) THE NUMBER OF ELIGIBILITY STAFF, LEAD WORKERS,  
20 SUPERVISORS AND MANAGERS, CUSTOMER SERVICE STAFF, QUALITY  
21 ASSURANCE STAFF, PROGRAM INTEGRITY STAFF, INVESTIGATORS, CLAIMS  
22 ESTABLISHMENT AND COLLECTIONS STAFF, APPEALS STAFF, ATTORNEYS,  
23 AND ADDITIONAL SUPPORT STAFF NECESSARY FOR A COUNTY TO PERFORM  
24 ALL RESPONSIBILITIES REQUIRED BY STATE AND FEDERAL LAW, AND MUST  
25 INCLUDE A COMPONENT THAT CONSIDERS THE VARIOUS RESOURCES,  
26 INCLUDING FINANCIAL RESOURCES, REQUIRED TO EFFECTIVELY HIRE,  
27 TRAIN, AND RETAIN STAFF IN THEIR RESPECTIVE AREAS OF RESPONSIBILITY

1 ASSOCIATED WITH PUBLIC AND MEDICAL ASSISTANCE PROGRAMS;

2 (b) DEMOGRAPHIC DATA, INCLUDING POVERTY STATISTICS, AND  
3 STATE AND LOCAL ECONOMIC DRIVERS, INCLUDING STAFF COMPENSATION,  
4 AT BOTH THE COUNTY AND REGIONAL LEVELS, THAT MAY INFLUENCE THE  
5 OVERALL COST OF DELIVERING PUBLIC AND MEDICAL ASSISTANCE  
6 PROGRAMS IN EACH COUNTY;

7 (c) THE ESTIMATED ADMINISTRATIVE WORKLOAD FOR EACH  
8 COUNTY TO MAKE PUBLIC ASSISTANCE PROGRAM ELIGIBILITY  
9 DETERMINATIONS, TO BE FUNDED BY THE MONEY ALLOCATED TO  
10 COUNTIES PURSUANT TO SECTION 26-1-122;

11 (d) A COMPONENT THAT SUPPORTS BUSINESS PROCESS  
12 IMPROVEMENTS AS DESCRIBED IN SECTION 26-1-122.3 (1)(b)(IX) IN EACH  
13 COUNTY; AND

14 (e) ANY MODIFICATIONS TO THE PUBLIC AND MEDICAL ASSISTANCE  
15 PROGRAM SYSTEM THAT HAVE BEEN IMPLEMENTED BY THE DEPARTMENT  
16 OR THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, INCLUDING  
17 THOSE THAT MAY HAVE BEEN RECOMMENDED BY THE THIRD PARTY  
18 PURSUANT TO SUBSECTION (2)(b) OF THIS SECTION AND PROVIDED TO THE  
19 JOINT BUDGET COMMITTEE PURSUANT TO SUBSECTION (2)(c) OF THIS  
20 SECTION.

21 (6) (a) THE JOINT BUDGET COMMITTEE SHALL USE THE RESULTS OF  
22 THE FUNDING MODEL TO INFORM ITS DECISIONS REGARDING THE AMOUNT  
23 OF THE APPROPRIATION TO THE STATE DEPARTMENT FOR COUNTY  
24 ADMINISTRATION OF PUBLIC ASSISTANCE PROGRAMS AND THE AMOUNT OF  
25 THE APPROPRIATION TO THE DEPARTMENT OF HEALTH CARE POLICY AND  
26 FINANCING FOR COUNTY ADMINISTRATION OF MEDICAL ASSISTANCE  
27 PROGRAMS.

1           (b) THE STATE DEPARTMENT SHALL ALLOCATE MONEY TO  
2           COUNTIES FOR PUBLIC ASSISTANCE PROGRAMS IN ACCORDANCE WITH THE  
3           RESULTS OF THE FUNDING MODEL. THE DEPARTMENT OF HEALTH CARE  
4           POLICY AND FINANCING SHALL ALLOCATE MONEY TO COUNTIES AS  
5           PERMITTED BY STATE AND FEDERAL LAW FOR MEDICAL ASSISTANCE  
6           PROGRAMS INFORMED BY THE RESULTS OF THE FUNDING MODEL. IF THE  
7           APPROPRIATION MADE FOR A FISCAL YEAR TO EITHER DEPARTMENT IS NOT  
8           EQUAL TO THE AMOUNT NECESSARY TO FULLY FUND THE ALLOCATIONS  
9           REQUIRED BY THE FUNDING MODEL, THE AFFECTED DEPARTMENT SHALL  
10          ADJUST THE ALLOCATION TO EACH COUNTY TO ENSURE THAT THE FUNDING  
11          MADE AVAILABLE TO ALL COUNTIES DOES NOT EXCEED THE ANNUAL  
12          APPROPRIATION.

13          (7) (a) ON OR BEFORE NOVEMBER 15, 2026, AND ON OR BEFORE  
14          NOVEMBER 15 OF EACH YEAR THEREAFTER, THE STATE DEPARTMENT AND  
15          THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING SHALL SUBMIT  
16          A JOINT REPORT REGARDING THE FUNDING MODEL TO THE JOINT BUDGET  
17          COMMITTEE. THE REPORT MUST INCLUDE THE FOLLOWING INFORMATION  
18          CONCERNING THE PREVIOUS FISCAL YEAR:

19               (I) THE RESULTS OF THE FUNDING MODEL, INCLUDING THE COST  
20               PER COUNTY NECESSARY TO MEET ALL STATE AND FEDERAL  
21               REQUIREMENTS FOR THE COMPREHENSIVE DELIVERY OF PUBLIC  
22               ASSISTANCE BENEFITS AND MEDICAL ASSISTANCE BENEFITS;

23               (II) THE TOTAL AMOUNT APPROPRIATED FOR PUBLIC ASSISTANCE  
24               PROGRAMS TO THE STATE DEPARTMENT AND FOR MEDICAL ASSISTANCE  
25               PROGRAMS TO THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING,  
26               AND THE DIFFERENCE BETWEEN EACH COUNTY'S ACTUAL ALLOCATION AND  
27               THE ALLOCATION AMOUNT IDENTIFIED BY THE FUNDING MODEL;



- 1 (III) THE FINAL CLOSE-OUT FOR THE PREVIOUS FISCAL YEAR;
- 2 (IV) ANY MODIFICATIONS MADE TO THE MODEL TO IMPROVE THE
- 3 ACCURACY OF THE DATA;
- 4 (V) A DESCRIPTION OF ANY ASSESSMENT PERFORMED OF COUNTY
- 5 BUSINESS PROCESSES AND WORKFLOW AND A DESCRIPTION OF
- 6 MODIFICATIONS MADE BY A COUNTY THAT HAVE IMPROVED OR ARE
- 7 INTENDED TO IMPROVE WORKFLOW AND THE TIMELINES OF ELIGIBILITY
- 8 DETERMINATIONS, CLIENT SATISFACTION, AND WORKFORCE RETENTION;
- 9 AND
- 10 (VI) ANY OTHER ISSUES RELATED TO FUNDING THE DELIVERY OF
- 11 PUBLIC AND MEDICAL ASSISTANCE BENEFITS.

12 (b) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), THE

13 REPORTING REQUIREMENT DESCRIBED IN THIS SUBSECTION (7) CONTINUES

14 INDEFINITELY.

15 **SECTION 2.** In Colorado Revised Statutes, 26-1-121, **amend** (2)

16 as follows:

17 **26-1-121. Appropriations - food distribution programs.**

18 (2) (a) The general assembly shall appropriate from the general fund for

19 the costs of administering assistance payments, food stamps, social

20 services, the food pantry assistance grant program created in section

21 26-2-139, and other public assistance and welfare functions of the state

22 department and the state's share of the costs of administering such

23 functions by the county departments amounts sufficient for the proper and

24 efficient performance of the duties imposed upon them by law, including

25 a legal advisor appointed by the attorney general. The general assembly

26 shall make two separate appropriations, one for the administrative costs

27 of the state department and another for the administrative costs of the

1 county departments. Any applicable matching federal funds must be  
2 apportioned in accordance with the federal regulations accompanying  
3 such funds. Any unobligated and unexpended balances of such state funds  
4 so appropriated remaining at the end of each fiscal year must be credited  
5 to the state general fund.

6 (b) BEGINNING WITH FISCAL YEAR 2025-26, BEFORE MAKING THE  
7 APPROPRIATION DESCRIBED IN SUBSECTION (2)(a) OF THIS SECTION, THE  
8 GENERAL ASSEMBLY SHALL CONSIDER, BUT IS NOT REQUIRED TO  
9 APPROPRIATE AMOUNTS INCLUDED IN, THE RESULTS OF THE PUBLIC  
10 ASSISTANCE PROGRAMS FUNDING MODEL DESCRIBED IN SECTION  
11 26-1-121.5.

12 **SECTION 3.** In Colorado Revised Statutes, 26-1-122, **amend**  
13 (2)(a) as follows:

14 **26-1-122. County appropriations and expenditures -**  
15 **advancements - procedures.** (2) (a) The county boards, in accordance  
16 with the rules of the state department, shall file requests with the state  
17 department for advancement of funds for the program costs of assistance  
18 payments, food stamps (except the value of food stamp coupons), and  
19 social services and for the administrative costs of each. The state  
20 department shall determine the requirements of each county for ~~such~~  
21 program costs, ~~and administrative costs~~, taking into consideration  
22 available funds and all pertinent facts and circumstances, AND  
23 ADMINISTRATIVE COSTS, IN ACCORDANCE WITH THE FUNDING MODEL  
24 DESCRIBED IN SECTION 26-1-121.5, and shall certify by voucher to the  
25 controller the amounts to be paid to each county. The amounts so certified  
26 ~~shall~~ MUST be paid from the state treasury upon voucher of the state  
27 department and warrant of the controller and ~~shall~~ MUST be credited by

1 the county treasurer to the county social services fund in accordance with  
2 the law and rules of the state department.

3 **SECTION 4.** In Colorado Revised Statutes, 25.5-8-111, **add** (3)  
4 as follows:

5 **25.5-8-111. Department - administration - outsourcing.** (3) IF  
6 THE STATE DEPARTMENT USES COUNTY DEPARTMENTS OF HUMAN OR  
7 SOCIAL SERVICES TO PERFORM FUNCTIONS RELATING TO THE  
8 ADMINISTRATION OF THE CHILDREN'S BASIC HEALTH PLAN PURSUANT TO  
9 SUBSECTION (1)(a)(II) OF THIS SECTION AND ALLOCATES MONEY TO A  
10 COUNTY FOR THAT PURPOSE, THE STATE DEPARTMENT SHALL MAKE THE  
11 ALLOCATION IN ACCORDANCE WITH THE RESULTS OF THE PUBLIC  
12 ASSISTANCE PROGRAMS FUNDING MODEL DESCRIBED IN SECTION  
13 26-1-121.5.

14 **SECTION 5. Appropriation.** (1) For the 2022-23 state fiscal  
15 year, \$80,000 is appropriated to the department of health care policy and  
16 financing for use by department of human services medicaid-funded  
17 programs. This appropriation consists of \$48,120 General Fund, which  
18 amount is subject to the "(M)" notation as defined in the annual general  
19 appropriation act for the same fiscal year, and \$31,880 from the  
20 healthcare affordability and sustainability fee cash fund created in section  
21 25.5-4-402.4 (5)(a), C.R.S. To implement this act, the department may  
22 use this appropriation for administration related to the office of economic  
23 security - medicaid funding.

24 (2) For the 2022-23 state fiscal year, the general assembly  
25 anticipates that the department of health care policy and financing will  
26 receive \$80,000 in federal funds to implement this act. The appropriation  
27 in subsection (1) of this section is based on the assumption that the

1 department will receive this amount of federal funds to be used for  
2 administration related to the office of economic security - medicaid  
3 funding. ■■■

4 (3) For the 2022-23 state fiscal year, \$280,000 is appropriated to  
5 the department of human services for use by the office of economic  
6 security. This appropriation consists of \$120,000 from the general fund  
7 and \$160,000 from reappropriated funds received from the department of  
8 health care policy and financing under subsections (1) and (2) of this  
9 section. To implement this act, the office may use this appropriation for  
10 administration.

11 (4) For the 2022-23 state fiscal year, the general assembly  
12 anticipates that the department of human services will receive \$120,000  
13 in federal funds to implement this act. The appropriation in subsection (3)  
14 of this section is based on the assumption that the department will receive  
15 this amount of federal funds, which is subject to the "(I)" notation as  
16 defined in the annual general appropriation act for the same fiscal year.

17 **SECTION 6. Safety clause.** The general assembly hereby finds,  
18 determines, and declares that this act is necessary for the immediate  
19 preservation of the public peace, health, or safety.