



Colorado Human Services Directors Association

11-10-2010

Roxane White
Chief of Staff
Governor-Elect John Hickenlooper

Dear Ms. White:

On behalf of the Colorado Human Services Directors Association (CHSDA), congratulations to you and the entire Hickenlooper team on your recent election. We look forward to working closely with you to make Colorado a safe and economically secure place where all families are able to thrive. We would also like to thank you for making the time to talk with the CHSDA members at the CCI conference at the end of this month.

Enclosed, please find a transition report from the Colorado Human Services Directors Association. We hope you will find this document to be a useful resource for information about the newly re-organized CHSDA, and about the current state of the human services delivery system in Colorado.

We would like to offer CHSDA as a resource and a strong partner as you transition into the Governor's Office and as you begin to tackle key health and human services issues facing Coloradans. We would welcome the opportunity to meet with you to discuss this document further. Please feel free to let us know if there is additional information that would be useful to you, which is not included in this document.

We look forward to a productive meeting at the CCI conference. **We would also like to gather a smaller group of Directors from the CHSDA Executive Committee to discuss opportunities for partnership in more detail.** We will contact your office early next week to see if we can find a convenient time to get together.

Again, congratulations on Governor-elect Hickenlooper's election. We look forward to working closely with you to strengthen and improve Colorado's health and human services system.

Sincerely,

Frank L. Alexander
President

Human Services:

A Report for the Hickenlooper Administration (11/10/10)

**Developed by
Colorado Human Services Directors Association**

CHSDA is dedicated to a human services system that promotes the strength, well-being, and self-sufficiency of individuals, families, and communities.



INTRODUCTION

The Colorado Human Services Directors Association (CHSDA) is a non-profit association representing the social/human services directors from each of Colorado's 64 counties. The Association promotes a human services system that encourages self-sufficiency of families and communities, and protects vulnerable children and adults from abuse and neglect. CHSDA works under the authority and direction of County Commissioners and Colorado Counties, Inc.

CHSDA is committed to a strong and productive partnership with the new state administration. As CHSDA, we have a key role as the standard bearer for the industry. As the standard bearer, we serve as an invaluable resource regarding human services issues in the state.

CHSDA and the new state administration must work closely together to formulate policies and approaches to current critical issues, such as:

- Ensuring access to financial, medical and food assistance benefits that promote family stability and self-sufficiency;
- Promoting and incentivizing the implementation of evidence-based practices to ensure strong outcomes for children and families;
- Addressing the consequences of the state's increasing poverty rate;
- Reducing disproportionality (over-representation) of minority cultures in child welfare, public assistance and other programs;

- Preparing Colorado for the implementation of the Patient Protection and Affordable Care Act;
- Ensuring that Colorado's families are effectively and efficiently served during an era of declining resources; and
- Enhancing and improving CBMS and other statewide data systems to promote effective management and operation of statewide programs.

This Transition Report provides a high-level description of CHSDA goals, positions, and recommendations for the incoming Hickenlooper administration. The report also provides recommendations specific to our partnership with the new administration.

CHSDA requests that when the state establishes statewide health or human services committees that address issues such as child welfare or public assistance, the counties be included at the leadership level at initiation to provide meaningful input into the dialogue, design, and implementation of the committee.

OPPORTUNITIES FOR COUNTY AND STATE COLLABORATION

There are numerous opportunities to strengthen and improve health and human services in Colorado and to enhance the exciting work of bridging services across many sectors including public health, mental health, housing, economic development, and the judicial system. CHSDA strongly believes that the counties and state departments can and should work in partnership to address the following

prioritized opportunities to improve services to Colorado's needy families, children and older adults.

- There are opportunities to improve communications between state agencies and counties. The recent recommendation to centralize human services significantly impacted the state's relationship with CCI and the county departments. HCPF's implementation of Eligibility and Enrollment for Medical Assistance Programs (EEMAP) and the recent MAXIMUS contract has likewise caused serious concern among providers and counties due to the negative impact to clients through the bifurcation of collateral services. In both instances, the counties were not provided with the opportunity to participate in a meaningful way although we are major stakeholders and the entry point for all medical, food, and financial assistance.
- There is an opportunity for the counties to work in partnership with the Office of Information Technology (OIT) and state departments to fix and improve CBMS. For too long, we have allowed a faulty computer system to manage the programs, rather than serve the needs of Colorado's most needy. In the past, the counties have individually contacted state and CBMS staff members with their concerns. The new CHSDA structure has enabled the counties to have a more coordinated, cohesive, productive, and collaborative partnership with the effectively reorganized CBMS office in OIT. Counties, as the end users of CBMS, have a large stake in improving its capacity. We would recommend that recent process success in CBMS be replicated across state data systems.

- Colorado is currently not accessing all of the federal dollars it could for human services programs. For example, a county group, with the assistance of Casey Family Programs, identified a number of opportunities to increase federal funding for child welfare. The counties would welcome the opportunity to partner with the state to pursue these opportunities.

CHSDA recommends an official structure be established for discussions between state agencies, the legislature, and the counties on implementing the Patient Protection and Affordable Care Act.

- There are opportunities to access program waivers, with state support, which may provide more flexibility for counties to locally determine the most effective way to deliver programs as the state moves towards outcomes-driven systems. For example, Colorado places high needs foster children out-of-state at a very high cost. An opportunity exists, with improved state cooperation, to bring Colorado's children home to their communities, access untapped federal Medicaid funds, and offer better services to these children.
- Colorado should place more emphasis on prevention programs, such as the Nurse Home Visitor, substance abuse prevention, and homelessness prevention programs. Studies show that a focus on front-end prevention leads to much better outcomes for families and saves the taxpayer money in the long-run. There is an opportunity for counties to work together with the state in identifying and implementing evidence-based prevention programs.

- Colorado has numerous human services and medical assistance rules and regulations. There is an opportunity for the counties and state to work together to review these rules and requirements and determine which ones are directly linked to positive outcomes for families, children, and adults and which ones impede effective service-delivery. For example, a group of child welfare administrators met with representatives from the state and discussed the excessive number of reviews and rules that have little demonstrable link to federal or state outcomes. CHSDA is committed to effective dialogues with the state on these critical issues.

CHSDA recommends a joint state and county review of all state rules and regulations to eliminate unnecessary and burdensome rules that are not linked to desired results or outcomes. In tight budgetary times, administrative red tape needs to be assessed and reduced so that resources can be directed to client services.

BACKGROUND

Reorganization of CHSDA

In 2010, CHSDA underwent a major reorganization in an attempt to become more effective in its work with the state and key stakeholders, including county commissioners, CCI, the legislature, and other important entities. For the first time in its 70 year history, CHSDA is now organized in a manner that allows it to be more agile and to work more effectively with CCI, the state departments and the Governor's Office, and other partners in delivering health and human services to Colorado residents.

The new **organizational structure** was approved and implemented in June of 2010. The new structure **ensures county involvement and representation from counties across the state.**

The Casey Family Programs and CCI have helped facilitate the development and implementation of a new vision, mission, goals, and objectives for CHSDA. As a result, the organization has a stronger ability to communicate and provide meaningful, cohesive input to the incoming administration. We believe this represents a great opportunity for developing a strong, collaborative partnership with the state.

CHSDA Values

Throughout its 70 year history, the CHSDA has developed and refined the following organizational values:

- **Quality Client Services Come First** – A consistent value held by all counties is the importance of providing quality customer service. All county departments strive to professionally assist needy families in times of crisis, whether they need child protection, public assistance, or any of the other services available to eligible Colorado residents. The client should always be at the center of, and included in, the dialogue.
- **Open and Efficient Access to Public Assistance** – CHSDA values providing multiple, easy points of access to public assistance programs to Colorado's eligible clients. CHSDA endorses a best practice strategy that incorporates both state and local solutions for determining eligibility for benefits.

- **Collaboration** – CHSDA values meaningful county participation and collaboration with the state and other human services stakeholders, including the non-profit, business and faith-based communities.
- **Locally Based Service Delivery** - Colorado has a long tradition of empowering local governments to provide key services. It is critical that the provision of community-based, front-end prevention services be preserved and strengthened. Front-end prevention services are essential for promoting strong, positive results in preventing family dislocations, addressing poverty, and promoting positive outcomes within the child welfare system. Across all delivery systems and populations, the human and financial outcomes of evidence-based front-end prevention services are proven to be effective. Studies show that local governments are most responsive to local citizens and have a better understanding of the needs of local communities. Counties throughout Colorado have developed strong partnerships with local agencies and leveraged local funds to provide the best integrated services to Colorado residents. It is clear to the counties that “one size does not fit all.”
- **Cultural Relevancy and Addressing Disproportionality** - Colorado must implement human services programs that are culturally relevant and appropriate. Colorado is a state with a rich mix of racial and ethnic diversity. It is critical that our human services system is able to respond to the unique needs of all families in need.
- **No Unfunded Mandates** – While the counties are strongly committed to

serving our clients, CCI and CHSDA are opposed to unfunded mandates. We believe that any mandates created must come with appropriate funding resources to ensure effective implementation. A strong review of current practice and a strategic focus on desired outcomes will promote the removal of unnecessary and burdensome barriers to effective delivery of services.

- **Accountability and Transparency** – CHSDA values accountability and outcomes-based practices. CHSDA is committed to data-driven decision-making in the management and implementation of all services. CHSDA promotes the effective development of statewide data systems.

Strengths and weaknesses

CHSDA is committed to a number of effective and collaborative human services initiatives that we believe should continue under the new administration. CHSDA views these as strengths in our current human services:

- The state and counties are jointly working on the **Colorado Practice Initiative**, a model that implements **best practices in child welfare across the state**.
- A new child care provider billing system, called **CHATS**, is being implemented providing more accountability and efficient processing of child care assistance.
- **Policy Advisory Committee**, comprised of state and county representatives has been operating for over two years to improve collaborative policy-making and rule development.

- The state and counties have jointly developed a new process for handling **child fatality reviews**.
- **CBMS** is being reorganized at the state level to more effectively address capacity, implementation, and process issues moving forward. Their collaborative and strategic approach will support the improvement and stability of the system as a whole.
- The counties and the state have started to implement the vast majority of the recommendations presented in the **Governor's Child Welfare Action Committee Reports**. The number of **House Bill 1451** child welfare collaboratives increased in 2009, suggesting that more regions and counties are working together to meet the needs of Colorado's children.

Weaknesses

While there have been many recent improvements in the development of human services policy and practice, Colorado's human services system also has a few areas for further collaboration and exploration.

- In recent years, there have been times when the counties and the state have been in disagreement on critical issues. Too much energy has gone into negative dialogue and polarization rather than developing meaningful solutions that effectively improve and better serve Colorado's most needy citizens. We are committed to initiating a strong new chapter in the County-State partnership built on effective communication, open dialogue, collaboration and mutual respect.
- Funding levels for county departments have not kept pace with needs. The counties, similar to other government

agencies, have not had sufficient resources to meet all of the federal and state mandates for health and human services. For example, in the spring of 2007, a state funded workload study concluded that the appropriate level of funding needed for county administration was **\$85.2** million. Two years after the study was completed, in FY 2009-10, counties were allocated a total of **\$82.1** million for county administration, while workloads continued to increase. Since then, with the exception of short-term ARRA funds this allocation has not increased, and workloads have risen by nearly 50% during these tough budgetary times.

CHSDA recommends that the county departments of human/social services, through the direction of CCI, be included as a partner in the discussions regarding potential budget considerations.

HOW DID WE GET HERE?

Colorado has a state-supervised and county-administered human services system. Under this system, county departments are the **main conduit of direct services to Colorado's families, children, and adults**. County Human/Social Services Departments, in partnership with their local communities, provide the safety net for Colorado's residents. In recent years the public demand and need for county-delivered services has increased dramatically. For example, Colorado counties have:

- Responded to reports of suspected cases of child maltreatment, which have increased **21.9%** from **61,232** in 2003 to slightly over **74,700** in 2009. The

number of substantiated (founded) cases of child maltreatment grew by **15%**.

- Handled Medicaid caseloads which have grown to over **540,724** as of September 30, 2010. This represents a **39.3%** increase from November 30, 2007; the first date posted on the HCP&F website. State projections for 2011-2012 top 600,000.
- Determined eligibility for, and managed dramatically increased food assistance caseloads. In Federal Fiscal Year 2008, there were 109,405 households receiving food assistance. In 2010, this number grew **61.4%** to an estimated 176,587 households. The number of individuals grew **60.2%** over this same span.
- Handled approximately **140,000** child support enforcement cases and collected **\$312,964,370** for Colorado families and children last year.

CHSDA believes that a number of defining events have occurred over the past decade which have framed health and human services delivery in Colorado.

- **Restructuring** - In 1994, the Departments of Human Services, Institutions, and Health were restructured. CRS 26-1-105 and CRS 25.5-1-102 mandated that the Departments of Human Services and Health Care Policy and Financing be created on July 1, 1994.
- **New Computer Systems** - The development and implementation of complex statewide computer systems, such as CBMS and TRAILS.
- **Constitutional Limits** – Colorado voters passed the TABOR and other Constitutional Amendments, such as the

Gallagher Amendment and Arveschoug-Byrd, which restricted the availability of state and local governments to financially operate.

- **Devolution** - The devolution of human service programs to the counties through welfare reform.
- **Economic Downturn** - The recent economic recession has impacted public assistance applications and caseloads, such as Medicaid, TANF, LEAP, and Food Assistance. Applications for all of these programs continue to rise, as resources are more constrained.
- **Coordination of Committees** - **Numerous** health and human services statewide **committees** and panels have conducted evaluations, including the Governor's Blue Ribbon Panel on Health Care Reform, two Governor's Child Welfare Action Committees, and an Early Childhood Committee. Although counties were eventually invited to participate, they were **not invited to participate** in sufficient numbers to have **meaningful** input, despite being the primary service delivery system in Colorado.

These committees made numerous recommendations for systems improvement and change. Some recommendations contradict those made by other committees. The counties are eager to work with the new administration and serve as a valuable **resource** to navigate these complex, intersecting systems.

CHSDA recommends that any policy recommendations be assessed for their impacts on other systems before they move forward into statewide policy. Recommendations from statewide committees should be **coordinated** by the state with close and formalized county collaboration to ensure that conflicts are eliminated or addressed.

Development of Transition Document

In September 2010, the CHSDA Executive Committee appointed a team comprised of county directors of social/human services from across the state and requested that they develop a transition plan for the new administration.

In response, the team developed this document, which includes an assessment of the **strengths and weaknesses** of:

- Prior **organizational relationships** between the State Department of Human Services, Health Care Policy and Financing and county departments of human services; and
- Jointly administered state and county health and human services programs.

The CHSDA Executive Committee also asked the team to identify particular **human services issues** where the CHSDA and new administration might want to partner in a spirit of collaboration.

CONCLUSION

CHSDA is committed to a human services system that encourages self-sufficiency of families and communities, and protects vulnerable children and adults from abuse and neglect. A newly reorganized CHSDA, working together with a new administration provides a unique opportunity to revitalize

and refresh the relationship between the county social/human services departments and the state to effectively address the needs and challenges throughout Colorado.

It is in this spirit that we offer CHSDA as a resource and a partner. We hope members of the new administration will contact us for clarification or further information. We welcome the opportunity to meet with the transition team to discuss these issues further.

Thank you for taking the time to review this document and for all you do for the people of Colorado. Congratulations on your election to the Governor's Office.

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