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Dear Joshua and Barry,

Senate Bill 22-235 required an assessment of the delivery of public and medical assistance programs in the State of Colorado. Both the Colorado Department of Human Services (CDHS) and Colorado Department of Health Care Policy and Financing (HCPF) worked together to secure a third-party vendor, Public Consulting Group (PCG), who provided a list of recommendations that focused on a review of policies, processes, workforce, and technology infrastructure.

During the assessment phase, counties worked directly with PCG to schedule site visits and staff focus groups, and to complete surveys to help inform PCG's recommendations. Additionally, PCG looked to other state supervised, county administered agencies and evaluated best practices in those states. The outcome was a document that offered six transformative recommendations and three quick win recommendations. Eleven additional opportunities were noted but not included in the formal recommendations.

Counties have now had the opportunity to review the recommendations that resulted from our collaborative work, and we would like to formally share our initial impressions and reactions.

TRANSFORMATIVE RECOMMENDATIONS

Recommendation 1: Develop service delivery standards for public and medical assistance programs

Counties believe it is misleading to say that there are 64 different service delivery models across the State. Over the past ten to fifteen years, counties have actively participated in numerous business process redesign efforts, at the request and with the support of CDHS and HCPF. These efforts have both modernized and standardized business practices, as well as improved overall service delivery. While the Public Health Emergency has created the need to review and potentially innovate new strategies for the business processes and practices developed through business process redesign efforts, counties argue that counties should not be mandated to adopt standardized models of service delivery.

within this recommendation. There may not be a one size fits all service delivery model that could be applied statewide.

Counties are concerned that an assumption was made in this recommendation that varying service delivery models lead to inaccurate or incorrect eligibility decisions. We do not see data to support this statement in the report provided.

Recommendation 2: Make work accessible and portable

Counties are generally in support of this recommendation. Having said that, many counties have invested in document and work management systems like HS Connects. Starting all over with a new document and work management system is concerning considering the investment in time and money several counties have already made. We encourage the State to consult heavily with counties to explore the benefits and shortcomings of current systems to ensure that if this recommendation is pursued, we have a system that works well for all counties and the State's needs.

Often, counties are providing workload and performance data directly from our work management systems to peer counties and to the State. We are deeply concerned about losing visibility and transparency should this shift to a State created and State managed solution.

We also have concerns about competing priorities between higher level program groups and timeframes required to work documents. Counties are experts at triaging work using program rules and requirements. Having a state-designed system that cannot be customized by a county could limit counties' abilities to react and respond to changing circumstances and adversely impact the clients we serve.

Recommendation 3: Modernize and customize eligibility worker roles, career paths, and compensation

Counties agree that eligibility staff are underpaid in many circumstances based on the technical and financial nature of their work. We agree with the recommendation of suggested base pay rates across the State, taking into consideration local factors. We would further ask that the State help county offices better define the complexity of eligibility work, perhaps aligning the job more closely with prevention services, to help local county commissioners better understand the intricacy of the work.

While we agree with the recommendation overall that we need to modernize and customize eligibility worker roles, career paths, and compensations, we are not sure of the State's role versus the local Boards of County Commissioners in human resource functions such as changing job classifications. Including local County Human Resource experts in these conversations is critical. Often, job classifications are in place across the entire county and impact positions that are not linked to human services. Proposed job classification changes could result in shifts from non-exempt to exempt positions, which could unintentionally change job requirements that could

Recommendation 4: Optimize PEAK

Counties support this recommendation and believe this should be a top priority if the recommendation is accepted. PEAK was launched with the intention of reducing eligibility technician processing time. This simply has not been the case. Technicians struggle with client data entry and deletions. We question why system functionality was created in this way and wonder whether the function of client entries into PEAK mapping to CBMS can be eliminated. In some cases, clients are editing a case at the exact time the technician is working the case, which introduces confusion for all. Clients submitting the same document over and over also increases the touch time for staff working the PEAK inbox, imaging, and indexing documents. It is our understanding that there will be some enhancements to the mobile applications soon to help prevent duplication, but at this time all counties continue to be adversely affected.

Recommendations 5: Improve policy documentation and dissemination

Counties support this recommendation and believe this should be a top priority. A single policy manual that encompasses all program areas in CBMS and is written in plain language is needed. This could include examples, with search functions and links to expedite access to review rule, as well as policy and operational requirements. In addition to having a central location for this, having the ability to track and share questions and State responses would be a tremendous source of support for eligibility teams across the State.

It is imperative that counties be at the table and involved in policy discussions and we are pleased to see the vendor call this out in their recommendations. Counties are critical partners and should be involved in all policy change discussions that impact the way that counties deliver services to our communities.

Counties are frequently challenged by competing priorities and conflicting policy between HCPF and CDHS. Having the two state Departments align wherever possible will improve service delivery and lessen confusion for both our eligibility teams and clients.

Recommendation 6: Continue with improvements to the current training model

Counties have mixed reactions to this recommendation. The State currently creates and shares all training content, defines how trainings will be delivered (in person or web-based), and certifies all trainers that are using the content to train new workers. Counties do not agree that the training is being delivered differently across the State. We do see the importance of utilizing trainers in person at the county to aid new and seasoned eligibility technicians through very complex system and policy training. Counties are currently supplementing training to ensure that new workers understand county specific business processes, imaging systems, work management systems, client demographics, de-escalation techniques, etc. that rests outside of the Staff Development Division. Further, there is an opportunity for county trainers to focus on specific error trends as identified through internal and State quality assurance outcomes improving eligibility decision outcomes.

We agree that the TRN environment does not provide “real life” outcomes, and this can cause confusion for the technician when they leave training and begin working in the production area of CBMS.

QUICK WIN RECOMMENDATIONS

Quick Win 1: Create opportunities for State and county collaboration

Counties agree with this recommendation. Counties struggle to receive clear guidance from the State when questions arise. Often, we are met with email box automated responses that indicate the State is unable to respond promptly, and this only delays our ability to help our clients. Policy misalignment between CDHS and HCPF is an ongoing struggle, and we are pleased to see this called out as an area of concern in the vendors recommendations.

Quick Win 2: Increase communication and collaboration between CDHS and HCPF

Counties support this recommendation. Since being separated, CDHS and HCPF have consistently been misaligned in policy, practice, and direction. The offices often do not present as if they are working together when changes are made, and there is an entirely different approach to county involvement and approval for policy and rule changes. Sub-PAC exists to inform and vote on changes for CDHS programs but there is not a similar structure for HCPF changes, which prevents the opportunity for valuable county feedback.

Quick Win 3: Alignment of administrative requirements

The counties agree with this recommendation. There are opportunities to align the management evaluation process between the two agencies. Conducting the evaluations jointly would reduce administrative burden for both the State and counties.

The counties believe that this quick win would be extremely valuable in improving communication and collaboration between CDHS, HCPF, and county partners as noted in Quick Win #2. Counties must create separate processes to support requirements in quality assurance as well as proactive or reactive work that occurs through report work for Public Assistance and Medicaid work.

Management Evaluation Reviews can occur up to three times per year, depending on the county, and are very different from each other in the implementation. Counties spend numerous hours preparing for the review and responding to the outcomes associated. Alignment in these duties and requirements would maximize efficiencies for counties, creating more time to dedicate to our clients and communities.

We are very hopeful that the State will embrace a partnership with counties when considering these recommendations and truly begin to make meaningful changes in a way that will best assist the State, the counties, and the community members we serve daily.