





# H.R.1 Work Session

**Presented by Dan Conway and County Staff** 

August 12, 2025

## Agenda

#### Overview

- Objectives
- From Policy to People
- Timeline Summary

Programmatic and Service Delivery Impacts

Fiscal Impact

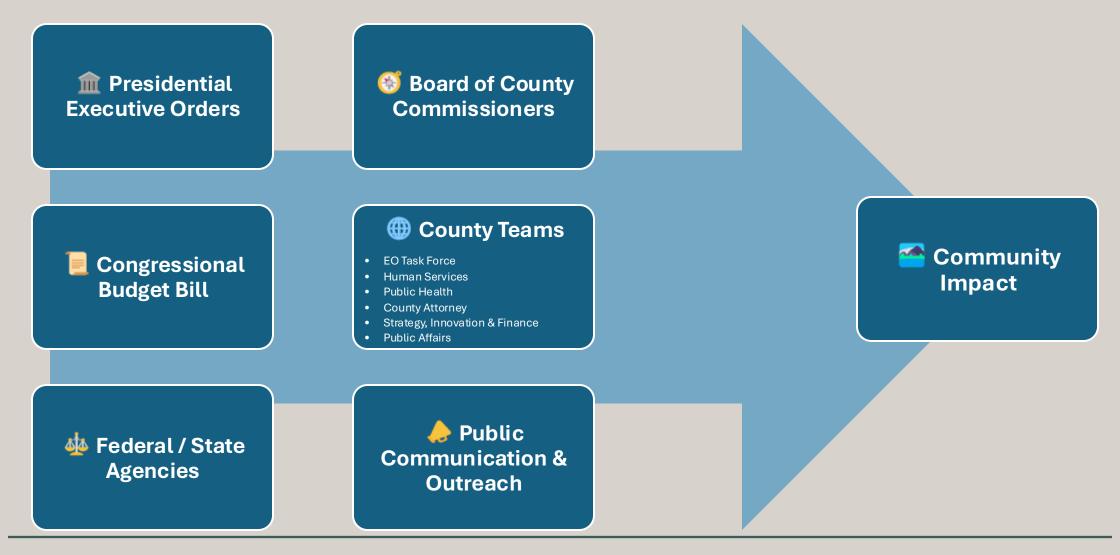
Considerations and What's Next?

## **Objectives**

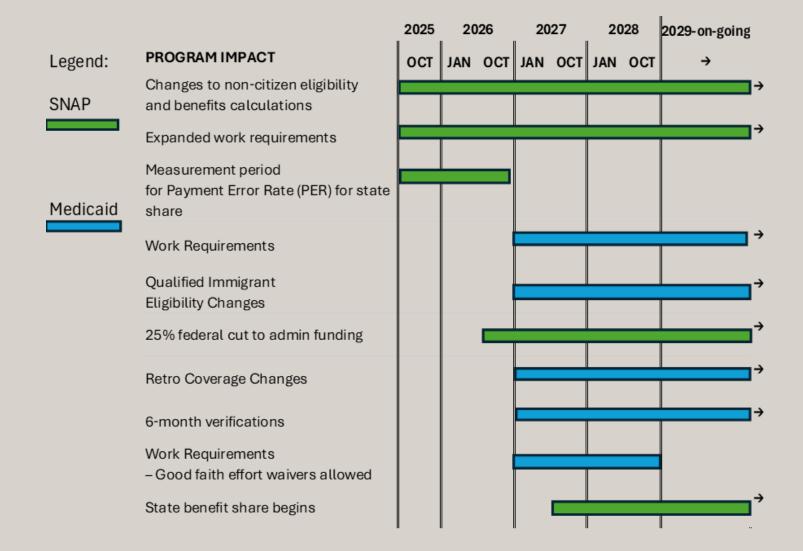
Provide detailed information to the BCC regarding potential service and financial impacts from H.R.1

Explore and consider recommendations for solutions and provide the BCC opportunity to give direction to county staff

## From Policy to People







# Implementation of H.R.1: SNAP and Medicaid

# Jefferson County Expansion Population

Estimated 33,340 in the Medicaid expanded population utilizing FY 2025 data

- The Affordable Care Act allowed for adults under 138% of the Federal Poverty Limit to receive Health Insurance.
- This population are directly impacted by the Medicaid Policy Changes included in H.R.1
- Caseload has decreased by 15% since the last data was received.
   Data estimate is made using limited data available.



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# Impacts of Medicaid Policy Changes

January 2027- Eligibility redeterminations every six months for Medicaid expansion population.

#### **Existing processes:**

- Eligibility Specialists process 768 Medicaid renewals on average monthly
  - 503 could fall into the Medicaid expanded population
  - 503 hours of work X 38% to capture those that would be in the expanded population = 191 additional renewals each month
  - 5 new eligibility specialists would be needed
  - Estimated cost \$375,000

#### If changes are made to auto re-enrollment (Ex Parte):

- 33,340 people are estimated to be in the Medicaid expansion population
  - o 33,340/12 months in a year = 2,778 each month on average
  - o 77 new eligibility specialists would be needed
  - Estimated cost \$5.78M



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# Impacts of Medicaid Policy Changes to People with Disabilities

- Prior to Affordable Care Act (ACA), Medicaid coverage was limited to children, individuals with disabilities and parents with very low income
  - Long Term Care Medicaid
  - SSI Mandatory Medicaid
- Medicaid expansion allowed for coverage up to 138% Federal Poverty Level (FPL)
  - Disabled persons that did not qualify for traditional Medicaid due to State or Federal standards of disability were able to receive coverage based on their Income. This population will be subject to policy changes.
- Starting October 2027, the Working Adults with Disabilities (WAwD)
  program will be sunset due to funding cuts



# Case Management Agency

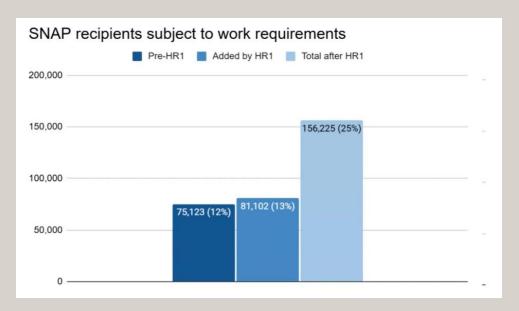
The CMA serve 4100 community members that are living with a documented disability and participating in various Medicaid Waivers.

- Currently there has been no reduction in Federal funding for those Medicaid members participating in Waivers.
- Waiver participants are exempt from the new work requirements.
- We are still seeking clarity on whether Medicaid members who are family caregivers of Waiver participants will be exempt from work requirements.
- Newly increased eligibility requirements and increased address verifications are expected to include Waiver members.

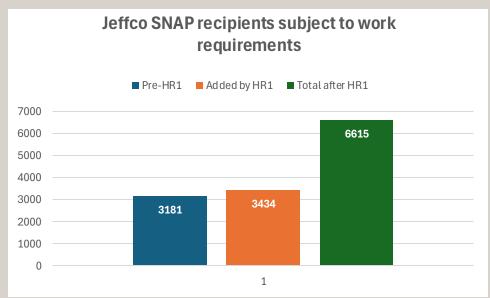


# Impact of SNAP Policy Changes

Upon enactment- SNAP Work Requirements: Expands the definition of "Able Bodied Adults Without Dependents (ABAWDs)" to include individuals up to age 64 (up from 54 currently) and individuals with children age 14 and up.



SNAP work requirement population in Colorado is estimated to increase by 108%



860 of the current ABAWD population in Jeffco will lose their exemption status for homeless, former foster youth or veteran status



# Impacts of ABAWD Policy Changes for SNAP

- Federal ABAWD requirements changed in 2020, 2023 and now with H.R. 1 in 2025.
- Policy and system data entry are complex and error prone Statewide.
- ABAWD vs. Medicaid Work Requirement misalignment in policies will cause confusion with customers and staff.
- Increase in the ABAWD population will lead to more case denials, terminations and subsequent applications.
- High potential to cause workload increases for Employment First program.



# Establishment of State Match for SNAP Benefits

Starting October 2027, Colorado will be required to pay a portion of SNAP benefit allotments based on the SNAP Quality Control Payment Error Rate (PER)

PER below 6% - No match is required

PER 6% to 7.99%- States pay a 5% share

PER 8% to 9.99%- States pay a 10% share

PER 10% or higher- States pay a 15% share





## Payment Error Rate in Colorado

#### **PER in Colorado- FFY 2024**

- Overpayment Rate: 7.91%
- Underpayment Rate: 2.06%
- Total PER 9.97%

#### **PER in Jefferson County**

- FFY 2024 8.93%
- We contributed to 5.46% of the total dollars that were found in error



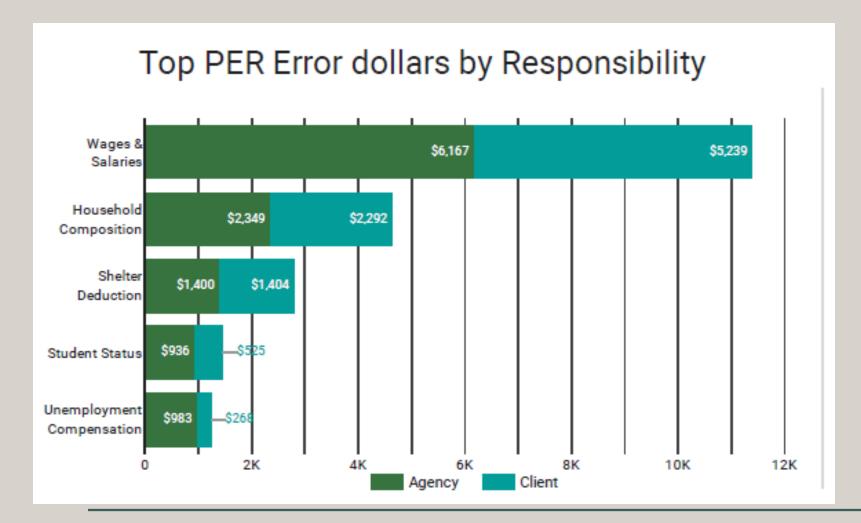
## Payment Error Rate Categories

PER is made up of three categories Colorado is accountable to all incorrect dollars issued over/under the threshold (\$53) regardless of what category the errors falls:

- County-caused errors
  - Policy is incorrectly applied, or data entry errors result in incorrect issuance.
- Customer-caused errors
  - Customer provided incorrect information or verification
- State- caused errors
  - CBMS incorrectly applies a rule or policy



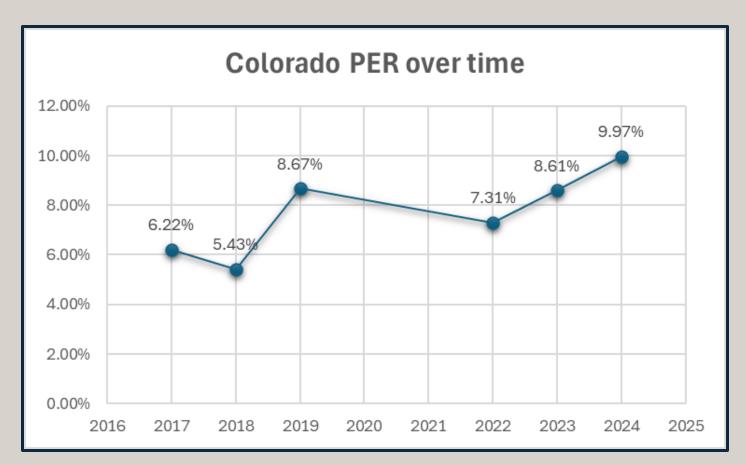
## PER Errors with Highest Impact



In FFY 2024, 45% of the errors attributed to the PER were client caused errors where the specialist did not have accurate information to determine eligibility correctly



# **SNAP Payment Error Rate History**



QC regulatory requirements for quality error rates suspended in 2020 and 2021, no data is available



## **Internal PER Strategies**

1

- Create review consistency- All lead ES and supervisors trained to complete all case reviews within the QA tool.
- Collaboration with the Program Integrity Team to enhance the QA tool to create efficiencies and gather meaningful trending data.
- Process improvement efforts to gather data on individual and division quality scores to identify a baseline of quality expectations for new and seasoned eligibility specialists.

2

- Utilize state and internal data and root causes to inform coaching support and training needs for individuals and the division.
- Identify individuals who are struggling in quality outcomes and create monitored coaching and performance improvement plans.
- Conduct division wide training utilizing quality data.
- Partner with CDHS in Statewide quality efforts to reduce the PER below 6%.

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- Increase the number of reviews completed on SNAP cases by shifting or adding staff to the quality assurance team.
- Conduct targeted pre and post authorization reviews in error prone areas.
- Analyze quality data to ensure training effectiveness. Continue to provide refresher training and coaching as needed.

# Personal Responsibility and Work Opportunity Reconciliation Act 1996

- July 10th United States Department of Health and Human Services (HHS) announced an expanded interpretation of PRWORA
- PRWORA prohibits individuals who are not considered "qualified" immigrants from receiving federal public benefits unless under a specific exemption
- PRWORA delegated authority to federal agencies to determine which programs fall under the definition of a federal public benefit
- The law requires agencies to verify immigration status before granting access to any program classified as a public benefit.
- Under 8 U.S.C 1642, nonprofit charitable organizations are exempt from the requirement to verify immigration status, whereas state, county, and school district grantees are subject to PRWORA's verification requirements.



# New Federal Interpretation of PRWORA July 2025

#### **Programs within the Human Services Department**

- SNAP has already been determined a federal public benefit
- Head Start was reclassified as a federal public benefit (previously considered an early education program)

Head Start Act guarantees that once a child is eligible, they remain eligible through the following program year.

- Child Welfare Title IVE prevention program or Family First Preservation Services Act
- Kinship Guardianship programs
- Workforce Innovation Opportunity Act Programs, Wagner Pyser programs (Business and Workforce Center)
- Community Services Block Grant



# New Federal Interpretation of PRWORA July 2025

#### **Community Based Programs**

Certified Community Behavioral Health Clinics

Community Mental Health Services Block Grant

Federal Qualified Health Center Program (Stride)

Mental Health and Substance Use Disorder Treatment, Prevention, and Recovery Support Services Programs administered by the Substance Abuse and Mental Health Administration

Projects for Assistance in Transition from Homelessness Grant Program



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# Discussion of Other Impacts: Public Health

#### Safety Net and Assistance Providers

Potential for closures or reduced services

#### **Economic Impacts**

- Increased unemployment
- Reduced worker productivity
- Increased insurance and leave costs for employers

#### Residents

- Delayed care and increased emergency room visits
- Worsening food insecurity
- Negative impacts on mental health and wellbeing



## Fiscal Impact

#### Potential Cost Increases->\$17.19M

#### **SNAP Cost Sharing**

County could face \$11.4 million in additional costs if State's cost share is passed down to Counties:

- \$9.25M SNAP benefit cost share (10% based on FY24 PER)
- \$2.16M Administrative cost share (25% increase)

### Administrative, Staffing, Technology Costs (Medicaid and SNAP ~\$5.78M)

 Greater system demands, PER monitoring, expanded client communication on eligibility and compliance changes; rising operational complexity and resource needs

#### Rising employer health insurance costs

 Marketplace premium rate hike → rising employer costs, higher employee out-of-pocket expenses, delayed care, reduced wellbeing, increased absenteeism/turnover

#### Potential Funding Losses->\$16.8M

#### **Sequestration Risks**

- Head Start~\$4.3M
- TANF~\$7.7M
- Social Services Block Grant (SSBG)~\$1.8M
- Other human service (CSBG, HUD, LIHEAP)~\$3M

#### **Shifting Federal Priorities**

- Reduced support for workforce programs due to reprioritization
- Uncertainty around sustained funding for existing initiatives





# American Rescue Plan (ARPA) Interest Revenue & Rescue Plan Project Fund (RPPF) \$5M Total One-Time Funding

Unallocated Funds
Available from ARPA
Interest Revenue and
LATCF \*

\$1.4M

Unallocated Funds
Available from RPPF
Fund Balance

\$3.6M

<sup>\*</sup> Local Assistance and Tribal Consistency Fund (LATCF)

### **Potential Financial Considerations**

(Each item carries broader implications beyond its immediate scope.)

#### On-Going

- Ballot measure
  - Sales tax
  - Debt (Bonds/Certificate of Participation)



#### One-Time

- Reallocation of Mill Levies
- General Fund underspend
- Social Services Fund balance
- American Rescue Plan (ARPA) Interest Revenue
  - •Unassigned \$1.4M
  - Navigation Center \$6M
- Rescue Plan Project Fund (RPPF)
  - RPPF Fund Balance \$3.6M
  - Broadband Infrastructure \$2.3M
  - Sheriff Detention Center Staffing \$4.5M
- Reduction submissions
- Salary and hiring freeze
- Non-County Agencies Program (NCAP)
- Sale of buildings and assets

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# **Considerations What's Next?**

Statewide Work Groups

Communication Strategy

Community coordination (summit/roundtable, etc.)

Community Partner Survey
Outreach

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# Thank you for your time!

