

Second Regular Session
Sixty-seventh General Assembly
STATE OF COLORADO

CORRECTED REVISED

*This Version Includes All Amendments Adopted
on Second Reading in the Second House*

LLS NO. 10-0470.01 Jerry Barry

HOUSE BILL 10-1053

HOUSE SPONSORSHIP

Riesberg, Kefalas

SENATE SPONSORSHIP

Boyd,

House Committees

Health and Human Services
Appropriations

Senate Committees

Health and Human Services
Appropriations

A BILL FOR AN ACT

101 **CONCERNING COMMUNITY LONG-TERM CARE SAVINGS, AND MAKING**
102 **AN APPROPRIATION THEREFOR.**

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://www.leg.state.co.us/billsummaries.>)

Subject to the receipt of sufficient moneys through gifts, grants, or donations, the bill directs the department of health care policy and financing (department) to contract for a study of medicaid recipients who receive services under a home- and community-based waiver to evaluate whether cost savings can be realized from changes to reimbursement

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
*Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.*

SENATE
Am ended 2nd Reading
April 27, 2010

HOUSE
3rd Reading Unam ended
March 3, 2010

HOUSE
Am ended 2nd Reading
March 2, 2010

methods for alternative care facilities. The department will make necessary data available to the contractor.

If the study concludes that savings can be realized, the department will recommend to the joint budget committee (JBC), and the JBC may authorize, that the department implement a pilot program based upon the study. The department will report annually to the JBC on any savings realized as a result of the pilot program. If the JBC determines that the pilot program results in savings without adversely affecting the services provided, the JBC may direct the department to implement the changes to all medicaid recipients under the home- and community-based waivers.

The bill makes a legislative declaration.

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

2 **SECTION 1. Legislative declaration.** (1) The general assembly
3 hereby finds and declares that:

4 (a) The state demographer in the department of local affairs
5 estimates that between 2005 and 2015, the portion of Colorado's
6 population that is over sixty-five years of age will increase by more than
7 twenty-three percent;

8 (b) The state demographer in the department of local affairs
9 estimates that between 2007 and 2035, the portion of Colorado's
10 population that is over sixty years of age will double;

11 (c) This drastic increase in the older adult population is driven by
12 the aging "baby boomer" generation and will result in a parallel increase
13 in a demand for community long-term care services;

14 (d) Older adults and their families need quality health care
15 coverage and choice and flexibility in accessing in-home community
16 long-term care services that support their independence and ability to live
17 in the least restrictive environment;

18 (e) Coloradans deserve to have access to appropriate long-term
19 care services and supports and the proper level of health care;

1 (f) The state needs a long-term care delivery system that addresses
2 the needs of older adults and their families, and health care coverage and
3 coordination should not be fragmented or difficult to access but instead
4 should be integrated to meet the needs of older adults and families;

5 (g) A community long-term care system needs to provide
6 maximum service delivery and make efficient use of available public
7 funds;

8 (h) Home- and community-based services can be a less costly
9 alternative to institutional placement;

10 (i) In 2005, the general assembly passed Senate Bill 05-173,
11 concerning long-term care services under the "Colorado Medical
12 Assistance Act", in which a long-term care advisory committee, referred
13 to in this section as the "LTC advisory committee", was appointed. The
14 LTC advisory committee submitted a report to the joint budget committee
15 and the health and human services committees of the Senate and House
16 of Representatives with eighteen recommendations to improve the
17 long-term care delivery system in Colorado, including changing the rate
18 structure for alternative care facilities in Colorado, referred to in this
19 section as "ACFs".

20 (J) One of the recommendations from the LTC advisory
21 committee was to implement a tiered system of care for alternative care
22 residences;

23 (k) A pilot program that evaluates, financially models, and then
24 implements a tiered-rate payment system for ACFs to care for seniors
25 could result in Coloradans not being discharged to nursing homes
26 prematurely because of incontinence, Alzheimer's disease, or dementia;

27 (l) The department of health care policy and financing should

1 conduct one or more studies of community-based services to reduce the
2 overall state costs through the use of home- and community-based
3 services, including a study of past or current home- and community-based
4 clients who could potentially benefit from ACF tiered rates. If a study
5 evaluating the system shows cost containment through proper utilization
6 controls, the state would then implement the program statewide within the
7 home- and community-based medicaid waivers.

8 (m) In 2000, the general assembly passed Senate Bill 00-1072,
9 creating the older Coloradans program, which provides moneys to area
10 agencies on aging to award grants for community-based services to
11 persons sixty years of age or older to enable such persons to live in their
12 own homes and communities for as long as possible;

13 (n) The department of human services should conduct a study of
14 persons sixty years of age or older who could potentially benefit from
15 older Coloradans program services with the understanding that, if the
16 study evaluating the program shows cost savings through the provision
17 of community-based services, the state would then develop a long-term
18 strategic implementation plan for providing services through the older
19 Coloradans program.

20 (2) The general assembly further supports the efforts of
21 community organizations to facilitate a coalition of business leaders and
22 allied advocacy and trade organizations, as well as stakeholders, similar
23 to those included in the LTC advisory committee. This support includes
24 asking for technical assistance to bring together stakeholders to outline
25 a three-year plan to reconstitute the LTC advisory committee and make
26 recommendations through legislation and rule for the implementation of
27 the LTC advisory committee's recommendations.

1 **SECTION 2.** Part 1 of article 6 of title 25.5, Colorado Revised
2 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
3 read:

4 **25.5-6-108.5. Community long-term care studies - authority**
5 **to implement - alternative care facility report.** (1) (a) SUBJECT TO THE
6 RECEIPT OF SUFFICIENT MONEYS PURSUANT TO PARAGRAPH (b) OF THIS
7 SUBSECTION (1), THE STATE DEPARTMENT SHALL CONTRACT FOR ONE OR
8 MORE STUDIES OF THE POPULATION OF RECIPIENTS RECEIVING SERVICES
9 UNDER THE HOME- AND COMMUNITY-BASED WAIVERS AUTHORIZED
10 PURSUANT TO THIS ARTICLE. THE STATE DEPARTMENT SHALL MAKE
11 NECESSARY DATA AVAILABLE TO THE CONTRACTOR, INCLUDING BUT NOT
12 LIMITED TO DATA ON ACTIVITIES OF DAILY LIVING. IN SELECTING A
13 CONTRACTOR TO PERFORM ANY STUDY CONDUCTED PURSUANT TO THIS
14 SUBSECTION (1), THE STATE DEPARTMENT IS NOT REQUIRED TO FOLLOW
15 THE COMPETITIVE BIDDING REQUIREMENTS OF THE "PROCUREMENT
16 CODE", ARTICLES 101 TO 112 OF TITLE 24, C.R.S. THE STATE
17 DEPARTMENT SHALL PROVIDE COPIES OF ALL STUDIES CONDUCTED
18 PURSUANT TO THIS SUBSECTION (1) TO MEMBERS OF THE HEALTH AND
19 HUMAN SERVICES COMMITTEES OF THE GENERAL ASSEMBLY, OR ANY
20 SUCCESSOR COMMITTEES, AND TO THE MEMBERS OF THE JOINT BUDGET
21 COMMITTEE.

22 (b) IF A STUDY CONDUCTED PURSUANT TO THIS SUBSECTION (1)
23 CONCLUDES THAT A PROGRAM OF HOME- AND COMMUNITY-BASED
24 SERVICES WOULD RESULT IN COST SAVINGS, THE STATE DEPARTMENT
25 SHALL SEEK ANY NECESSARY FEDERAL AUTHORIZATION TO IMPLEMENT
26 THE PROGRAM. IF FEDERAL AUTHORIZATION TO IMPLEMENT THE PROGRAM
27 IS OBTAINED, THE STATE DEPARTMENT SHALL REQUEST, THROUGH THE

1 STATE BUDGET PROCESS, THAT THE PROGRAM BE IMPLEMENTED. THE
2 STATE DEPARTMENT SHALL REPORT TO THE JOINT BUDGET COMMITTEE
3 ANNUALLY CONCERNING THE AMOUNT OF ANY SAVINGS REALIZED FROM
4 THE PROGRAM.

5 (c) THE STATE DEPARTMENT IS AUTHORIZED TO SEEK AND ACCEPT
6 GIFTS, GRANTS, OR DONATIONS FROM PRIVATE AND PUBLIC SOURCES FOR
7 THE PURPOSES OF THIS SUBSECTION (1); EXCEPT THAT THE STATE
8 DEPARTMENT MAY NOT ACCEPT A GIFT, GRANT, OR DONATION THAT IS
9 SUBJECT TO CONDITIONS THAT ARE INCONSISTENT WITH THIS SUBSECTION
10 (1) OR ANY OTHER LAW OF THE STATE. THE STATE DEPARTMENT SHALL
11 TRANSMIT ALL PRIVATE AND PUBLIC MONEYS RECEIVED THROUGH GIFTS,
12 GRANTS, OR DONATIONS TO THE STATE TREASURER, WHO SHALL CREDIT
13 THE SAME TO THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING
14 CASH FUND CREATED IN SECTION 25.5-1-109.

15 (2) (a) SUBJECT TO THE RECEIPT OF SUFFICIENT MONEYS, ONE OF
16 THE STUDIES CONTRACTED FOR PURSUANT TO SUBSECTION (1) OF THIS
17 SECTION SHALL INCLUDE RESEARCH AND ANALYSIS OF:

18 (I) THE NUMBER OF RECIPIENTS WITH INCONTINENCE, ALZHEIMER'S
19 DISEASE, DEMENTIA, OR OTHER DIAGNOSES OF A CHRONIC INCAPACITATING
20 CONDITION THAT SEVERELY LIMIT THEIR ACTIVITIES OF DAILY LIVING WHO
21 WOULD BENEFIT FROM RECEIVING ADDITIONAL SERVICES THROUGH AN
22 ALTERNATIVE CARE FACILITY THEREBY AVOIDING NURSING HOME
23 PLACEMENT;

24 (II) THE ACTUARIALY SOUND RATE FOR PROVIDING SERVICES FOR
25 THE RECIPIENTS AT AN ALTERNATIVE CARE FACILITY;

26 (III) THE AMOUNT OF SAVINGS ASSOCIATED WITH PROVIDING
27 SERVICES AT AN ALTERNATIVE CARE FACILITY;

1 (IV) RECOMMENDATIONS FOR UTILIZATION CONTROLS OR
2 PROGRAM CONTROLS FOR A PROGRAM TO PROVIDE SERVICES AT AN
3 ALTERNATIVE CARE FACILITY;

4 (V) THE EXPERIENCES OF THE PROGRAM OF ALL-INCLUSIVE CARE
5 FOR THE ELDERLY, CREATED PURSUANT TO SECTION 25.5-5-412, WITH
6 TIERED RATES FOR ALTERNATIVE CARE FACILITIES, INCLUDING COST
7 SAVINGS OR COST AVOIDANCE;

8 (VI) OTHER STATES' EXPERIENCES WITH TIERED RATES FOR
9 ALTERNATIVE CARE FACILITIES, INCLUDING COST SAVINGS OR COST
10 AVOIDANCE; AND

11 (VII) RECOMMENDATIONS FOR MAINTAINING OR IMPROVING
12 QUALITY OF CARE.

13 (b) THE STUDY CONDUCTED PURSUANT TO THIS SUBSECTION (2)
14 SHALL BE COMPLETED BY JANUARY 1, 2011, AND, IF FEDERAL APPROVAL
15 IS OBTAINED PRIOR TO FINAL FIGURE-SETTING FOR THE FISCAL YEAR
16 COMMENCING JULY 1, 2011, THE STATE DEPARTMENT SHALL SUBMIT A
17 REQUEST THROUGH THE BUDGET PROCESS FOR IMPLEMENTATION OF THE
18 APPROVED CHANGES FOR THAT FISCAL YEAR.

19 **SECTION 3.** Part 2 of article 11 of title 26, Colorado Revised
20 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
21 read:

22 **26-11-205.7. Community long-term care study - strategic plan**
23 **- authority to implement.** (1) (a) SUBJECT TO THE RECEIPT OF
24 SUFFICIENT MONEYS PURSUANT TO PARAGRAPH (b) OF THIS SUBSECTION
25 (1), THE STATE DEPARTMENT OR, IF APPROPRIATE, THE DEPARTMENT OF
26 HEALTH CARE POLICY AND FINANCING SHALL CONTRACT FOR A STUDY OF
27 THE POPULATION ELIGIBLE FOR SERVICES UNDER THE OLDER COLORADANS

1 PROGRAM CREATED PURSUANT TO SECTION 26-11-205.5. THE STATE
2 DEPARTMENT AND THE DEPARTMENT OF HEALTH CARE POLICY AND
3 FINANCING SHALL MAKE NECESSARY DATA AVAILABLE TO THE
4 CONTRACTOR. IN SELECTING A CONTRACTOR TO PERFORM THE STUDY, THE
5 STATE DEPARTMENTS ARE NOT REQUIRED TO FOLLOW THE COMPETITIVE
6 BIDDING REQUIREMENTS OF THE "PROCUREMENT CODE", ARTICLES 101 TO
7 112 OF TITLE 24, C.R.S. THE STUDY SHALL INCLUDE RESEARCH AND
8 ANALYSIS OF:

9 (I) THE DEMOGRAPHIC CHANGES THAT WILL IMPACT THE DEMAND
10 FOR LONG-TERM CARE SERVICES AND SUPPORTS;

11 (II) THE NUMBER OF PERSONS SIXTY YEARS OF AGE OR OLDER WHO
12 WOULD BENEFIT FROM RECEIVING ADDITIONAL SERVICES THROUGH THE
13 OLDER COLORADANS PROGRAM THEREBY AVOIDING MORE EXPENSIVE
14 CARE NEEDS;

15 (III) THE TYPES OF SERVICES AND SUPPORTS NEEDED BY PERSONS
16 OVER SIXTY YEARS OF AGE TO REMAIN IN THEIR OWN RESIDENCES AND
17 COMMUNITIES FOR AS LONG AS POSSIBLE AND ANY EXISTING OR PROJECTED
18 NEEDS FOR THOSE SERVICES AND SUPPORTS;

19 (IV) THE OVERALL AMOUNT OF SAVINGS TO THE STATE ACROSS
20 THE CONTINUUM OF CARE ASSOCIATED WITH PROVIDING SERVICES TO
21 OLDER ADULTS IN THEIR OWN HOMES AND COMMUNITIES;

22 (V) OTHER STATES' EXPERIENCES WITH LONG-TERM CARE
23 SERVICES AND SUPPORTS, INCLUDING COST SAVINGS OR COST AVOIDANCE;
24 AND

25 (VI) RECOMMENDATIONS FOR A LONG-TERM STRATEGIC
26 IMPLEMENTATION PLAN FOR PROVIDING SERVICES THROUGH THE OLDER
27 COLORADANS PROGRAM.

1 (b) (I) THE STATE DEPARTMENT IS AUTHORIZED TO SEEK AND
2 ACCEPT GIFTS, GRANTS, OR DONATIONS FROM PRIVATE AND PUBLIC
3 SOURCES FOR THE PURPOSES OF THIS SECTION; EXCEPT THAT THE STATE
4 DEPARTMENT MAY NOT ACCEPT A GIFT, GRANT, OR DONATION THAT IS
5 SUBJECT TO CONDITIONS THAT ARE INCONSISTENT WITH THIS SECTION OR
6 ANY OTHER LAW OF THE STATE. THE STATE DEPARTMENT SHALL
7 TRANSMIT ALL PRIVATE AND PUBLIC MONEYS RECEIVED THROUGH GIFTS,
8 GRANTS, OR DONATIONS TO THE STATE TREASURER, WHO SHALL CREDIT
9 THE SAME TO THE OLDER COLORADANS STUDY CASH FUND, WHICH FUND
10 IS HEREBY CREATED AND REFERRED TO IN THIS SECTION AS THE "FUND".
11 THE MONEYS IN THE FUND SHALL BE SUBJECT TO ANNUAL APPROPRIATION
12 BY THE GENERAL ASSEMBLY TO THE STATE DEPARTMENT FOR THE DIRECT
13 AND INDIRECT COSTS ASSOCIATED WITH IMPLEMENTING THIS SECTION.

14 (II) ANY MONEYS IN THE FUND NOT EXPENDED FOR THE PURPOSE
15 OF THIS SECTION MAY BE INVESTED BY THE STATE TREASURER AS
16 PROVIDED BY LAW. ALL INTEREST AND INCOME DERIVED FROM THE
17 INVESTMENT AND DEPOSIT OF MONEYS IN THE FUND SHALL BE CREDITED
18 TO THE FUND. ANY UNEXPENDED AND UNENCUMBERED MONEYS
19 REMAINING IN THE FUND AT THE END OF A FISCAL YEAR SHALL REMAIN IN
20 THE FUND AND SHALL NOT BE CREDITED OR TRANSFERRED TO THE
21 GENERAL FUND OR ANOTHER FUND.

22 (2) IF THE STUDY CONDUCTED PURSUANT TO PARAGRAPH (a) OF
23 SUBSECTION (1) OF THIS SECTION CONCLUDES THAT INCREASING FUNDING
24 FOR COMMUNITY-BASED SERVICES AS PROVIDED IN THE OLDER
25 COLORADANS PROGRAM WOULD RESULT IN COST SAVINGS, BY JULY 1,
26 2011, SUBJECT TO THE RECEIPT OF SUFFICIENT MONEYS PURSUANT TO
27 PARAGRAPH (b) OF SUBSECTION (1) OF THIS SECTION, THE STATE

1 DEPARTMENT SHALL REPORT TO THE MEMBERS OF THE HEALTH AND
2 HUMAN SERVICES COMMITTEES OF THE SENATE AND HOUSE OF
3 REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, AND TO THE
4 MEMBERS OF THE JOINT BUDGET COMMITTEE A LONG-TERM STRATEGIC
5 IMPLEMENTATION PLAN, DEVELOPED IN COOPERATION WITH THE AREA
6 AGENCIES ON AGING CREATED PURSUANT TO SECTION 26-11-204, THAT
7 IDENTIFIES THE EXPECTED NEEDS FOR SERVICES AND RECOMMENDS
8 POTENTIAL FUNDING SOURCES.

9 (3) IF THE STUDY CONDUCTED PURSUANT TO PARAGRAPH (a) OF
10 SUBSECTION (1) OF THIS SECTION CONCLUDES THAT ONE OR MORE
11 CHANGES WOULD RESULT IN COST SAVINGS TO THE STATE, WITHOUT
12 ADVERSELY AFFECTING THE CARE PROVIDED, AND THE CHANGES ARE
13 RECOMMENDED IN THE STRATEGIC IMPLEMENTATION PLAN DEVELOPED
14 PURSUANT TO SUBSECTION (2) OF THIS SECTION, THE STATE DEPARTMENT
15 OR THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING SHALL
16 REQUEST, THROUGH THE STATE BUDGET PROCESS, THAT THE CHANGES BE
17 IMPLEMENTED AND, IF NECESSARY, SHALL RECOMMEND LEGISLATION TO
18 IMPLEMENT THE CHANGES TO THE HEALTH AND HUMAN SERVICES
19 COMMITTEES OF THE SENATE AND HOUSE OF REPRESENTATIVES, OR ANY
20 SUCCESSOR COMMITTEES, OR THE JOINT BUDGET COMMITTEE.

21 (4) (a) IF THE STRATEGIC IMPLEMENTATION PLAN DEVELOPED
22 PURSUANT TO SUBSECTION (2) OF THIS SECTION IDENTIFIES ADDITIONAL
23 STUDIES THAT SHOULD BE CONDUCTED, SUBJECT TO THE RECEIPT OF
24 SUFFICIENT MONEYS PURSUANT TO PARAGRAPH (b) OF SUBSECTION (1) OF
25 THIS SECTION, THE STATE DEPARTMENT OR THE DEPARTMENT OF HEALTH
26 CARE POLICY AND FINANCING SHALL CONTRACT FOR ONE OR MORE
27 STUDIES IDENTIFIED IN THE STRATEGIC IMPLEMENTATION PLAN. THE

1 STATE DEPARTMENT AND THE DEPARTMENT OF HEALTH CARE POLICY AND
2 FINANCING SHALL MAKE NECESSARY DATA AVAILABLE TO ALL THE
3 CONTRACTORS. IN SELECTING A CONTRACTOR TO PERFORM ANY STUDY
4 CONDUCTED PURSUANT TO THIS SUBSECTION (4), THE STATE
5 DEPARTMENTS ARE NOT REQUIRED TO FOLLOW THE COMPETITIVE BIDDING
6 REQUIREMENTS OF THE "PROCUREMENT CODE", ARTICLES 101 TO 112 OF
7 TITLE 24, C.R.S.

8 (b) IF ONE OR MORE STUDIES CONDUCTED PURSUANT TO
9 PARAGRAPH (a) OF THIS SUBSECTION (4) CONCLUDES THAT IMPLEMENTING
10 THE CHANGES RECOMMENDED BY THE STUDY WOULD RESULT IN COST
11 SAVINGS TO THE STATE, WITHOUT ADVERSELY AFFECTING THE CARE
12 PROVIDED, THE STATE DEPARTMENT OR THE DEPARTMENT OF HEALTH
13 CARE POLICY AND FINANCING SHALL REQUEST, THROUGH THE STATE
14 BUDGET PROCESS, THAT THE CHANGES BE IMPLEMENTED AND, IF
15 NECESSARY, SHALL RECOMMEND LEGISLATION TO IMPLEMENT THE
16 CHANGES TO THE HEALTH AND HUMAN SERVICES COMMITTEES OF THE
17 SENATE AND HOUSE OF REPRESENTATIVES, OR ANY SUCCESSOR
18 COMMITTEES, OR TO THE JOINT BUDGET COMMITTEE OF THE GENERAL
19 ASSEMBLY.

20 **SECTION 4.** 25.5-6-313, Colorado Revised Statutes, is amended
21 BY THE ADDITION OF A NEW SUBSECTION to read:

22 **25.5-6-313. Rules - federal authorization.** (1.5) THE RULES
23 ADOPTED BY THE STATE BOARD PURSUANT TO SUBSECTION (1) OF THIS
24 SECTION SHALL INCLUDE THE FOLLOWING PROVISIONS CONCERNING ADULT
25 DAY CARE FACILITIES:

26 (a) A DEFINITION OF A RESTRICTED ENVIRONMENT AND A
27 RESTRICTIVE EGRESS ALERT DEVICE;

1 (b) PARAMETERS GOVERNING HOW THE RESTRICTIVE EGRESS
2 ALERT DEVICE SHALL BE USED AND TESTED AND THE STAFF ROLES
3 REGARDING THE USE AND OVERSIGHT OF THE DEVICE; AND

4 (c) PARAMETERS GOVERNING A RESTRICTED ENVIRONMENT,
5 INCLUDING BUT NOT LIMITED TO STAFFING AND TRAINING REQUIREMENTS;
6 APPROPRIATENESS OF PLACEMENT; ASSESSMENT; PARTICIPANT'S RIGHTS;
7 RECORDS AND REPORTING REQUIREMENTS; BUILDING REQUIREMENTS
8 INCLUDING GROUNDS AND FIRE SAFETY; RESTRICTIVE EGRESS ALERT
9 SYSTEMS AND DEVICES; FENCING OR OTHER ENCLOSURES; AND THE
10 APPLICATION PROCESS TO OFFER A RESTRICTED ENVIRONMENT.

11 **SECTION 5. Appropriation.** (1) In addition to any other
12 appropriation, there is hereby appropriated, to the department of health
13 care policy and financing, for allocation to the executive director's office,
14 general professional services and special projects, for the fiscal year
15 beginning July 1, 2010, the sum of seventy-five thousand dollars
16 (\$75,000), or so much thereof as may be necessary, for the
17 implementation of this act. Of said sum, thirty-seven thousand five
18 hundred dollars (\$37,500) shall be from the department of health care
19 policy and financing cash fund created in section 25.5-1-109, Colorado
20 Revised Statutes, and thirty-seven thousand five hundred dollars
21 (\$37,500) shall be from federal funds.

22 (2) In addition to any other appropriation, there is hereby
23 appropriated, to the department of human services, for allocation to the
24 executive director's office, for the fiscal year beginning July 1, 2010, the
25 sum of two hundred thousand dollars (\$200,000), or so much thereof as
26 may be necessary, for the implementation of this act. Said sum shall be
27 from the older Coloradans study cash fund created in section 26-11-205.7

1 (1) (b) (I), Colorado Revised Statutes.

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