

Mill Levy Advisory Council, BCHS

Monday, January 13th 2025

5:00 p.m. to 7:30 p.m.

Meeting Minutes

ADA statement

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Advisory Council Members in Attendance: Annette Treufeldt-Franck, Lisa Slager, Jolie Bernstein, Teresa Greene

Absent: Asher Johnson, Julie Marshall, Heidi Que, Robert Enderson

Community Members in Attendance: Ailsa Wonnacott, Kimberly DeGraff, Caitlin Looney

Boulder County Employees: Rebecca Seiden, IDD Mill Levy Program Coordinator & Ally Joel, IDD Mill Levy Program Specialist

Meeting

Meeting was held virtually through Microsoft Teams. No Public Comments were scheduled.

Approval of Minutes

No quorum; minutes not approved. Will approve the following month.

Ignite Adaptive Sports Presentation

Sam Brady, Ignite Adaptive Snow Sports

IGNITE ADAPTIVE SPORTS

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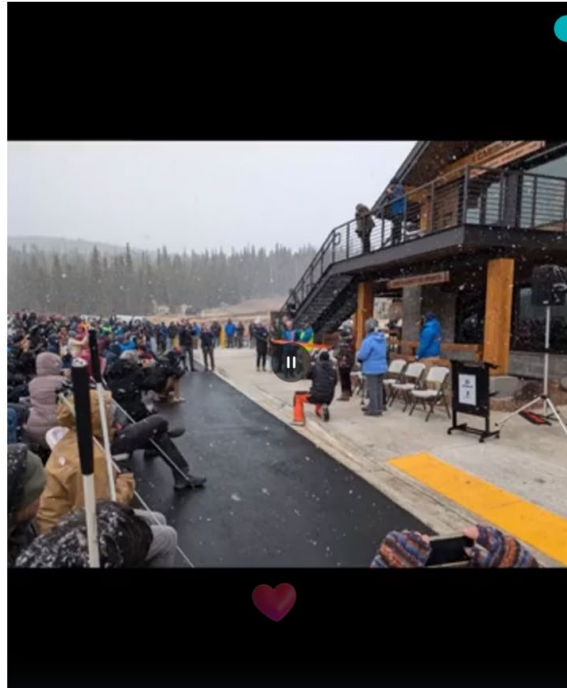
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Sam@igniteadaptivesports.org (Unverified)



A&I Avenues Update to Boulder County IDD Council
Kathryn Arbor, Co-CEO, A&I Avenues



November 18, 2024

Submitted by Kathryn Arbour and Barb Wilkins-Crowder, Co-CEOs

Current State

A&I Avenues, the CMA serving Boulder, Broomfield and Gilpin counties, is happy to report that our measures of stabilization, which continue to be the focus as we move through the first full year of the CMRD transition, are sound and on track. As reported previously to this Council, we can confirm that we have met stated goals for ensuring that the physical plant (our building at 1665 Coal Creek Drive) and our systems are not only functional but are operating effectively and meeting the needs of our many stakeholders.

As for staffing, which continues to challenge CMAs in the front range and metro areas, we are now going through another wave of transition as staff apply for the new opportunities included in the Boulder County mill levy contract. As current staff move through the process and are selected for some of those roles, the positions they have been filling become vacant. Currently, we are recruiting for approximately 12 positions overall, some of which are specifically part of our contract with the County.

At this seventh-month mark, however, we are seeing emergence of the culture of A&I Avenues as teams collaborate, learn and expand their knowledge of waivers and services across waivers, and get increasingly comfortable with the changes that were brought about by the CMRD transition.

Our Leadership Team continues to take great care to build in regular communication vehicles, including all staff town hall meetings every other month, and regular work team meetings. We celebrated the winter and holiday season offering some opportunities to gather, choose a simple but meaningful gift, and enjoy some extended time off with our generous holiday schedule.

We noted last time that quality oversight and performance management represent key areas of attention for us as we introduce more tools and training to improve case management and care coordination while we continue to implement the

required changes, ratios and workloads that are part of the CMA mandate. The network of 15 Colorado CMAs is strong as peers share ideas for problem-solving and addressing backlogs which are still a factor with some of the counties and ARG and create unintended issues for everyone in the system.

Additional Areas of Focus

We are officially launching the Community Advisory Committee later this month. We are still finalizing the selection of this volunteer committee, comprised of Members in Medicaid programs, their families and community partners, with a specific focus to provide input on complaints and related issues. We welcome your suggestions for membership on this committee as you review the eligibility requirements, attached again to this report.

And, as always, we appreciate you and the partnership we share with Boulder County, the IDD Council and our community partners as we all strive to bring the best to those who rely on us for services.

Finally, we will be sharing this role of updating the IDD Council regularly with our Director of Programs and Services, Jenna Corder, whom many of you know through her many years of service providing case management and care coordination services for members of our IDD communities. We are hoping that between the three of us we will be able to also attend some meetings. We will provide written updates in the months we are not able to attend.

Public Awareness Subcommittee Report Out

Ally Joel, IDD Program Specialist

We were not able to meet in December due to the holidays. At our upcoming meeting, we will be discussing setting 2025 objectives/goals, reviewing our new branding name, and further web updates. We meet 3rd Friday of the month at 1pm.

IDD Mill Levy Updates

Rebecca Seiden

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[\(English\)](#)

Disaster Preparedness Basics

- On January 14th, from 6 -7:30 p.m., join the Boulder Office of Disaster Management and increase your personal preparedness. During this 1-hour workshop, you'll learn about Boulder County's hazards, emergency alerts, and personal risk assessment, as well as how to create your own disaster preparedness plan! This event is free and open to the public.
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Survive and Thrive

- [Survive and Thrive](#), a \$7.5 million investment from the American Rescue Plan Act (ARPA) is designed to help provide financial assistance to local child care providers who serve children 5 and under, as well as 501c3 and 501c9 nonprofits. Funding from Survive and Thrive Grants will also be available to [Friend, Family, and Neighbor](#) (FFN) caregivers who typically are not eligible for grants.
- The application process is scheduled to begin in February of 2025. Please encourage the child care providers, nonprofit organizations, and FFN caregivers in your network to sign up for our [interest list](#) and visit our [website](#) for more information about program eligibility and a list of frequently asked questions. This program is open to all residents of Boulder County, regardless of immigration status. [Survive and Thrive - Boulder County](#)

Community Interpreter Training Opportunity

- Community Food Share is partnering with the Community Language Cooperative to host a free, four-day Community Interpreter Training. The training will take place next February 3, 4, 10, and 11, at Community Food Share. Those fully bilingual in English and Spanish, or any other languages, are welcome to apply. See the [flyer](#) for more information. [Apply by January 24, 2025.](#)

- Interested participants must commit to all four days of training. For training questions and program information, contact [Rosa Guzman Synder](#). For logistical questions, contact [Nina Stubblebine](#).

Next Steps Neurodiversity Expo

- Free Admission
- Sunday, January 26, 2025 10 a.m. to 3 p.m. Boulder County Fairgrounds, Exhibit Hall
- Register at www.nextstepsneurodiversity.com
- Temple Grandin will be giving a ticketed talk 11 a.m. to 12 p.m. Book Signing and Meet and Greet 12:30 to 2:00 p.m. Go to website for tickets.

RFP

- Housing Program RFP going out which will include navigation and residential supports.

Contracts

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Working Session

Council Members

- 2025 Goals
 - IDD consultant for Willoughby corners
 - RFP to update needs assessment
 - Market analysis
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 - Website update
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- Data on effectiveness of our RFA awards - did they meet the need, what else is needed?
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 - BI eligibility
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 - Disaster preparedness
 - How to spot the signs of abuse - reach out to Blue Sky Bridge on their training - they have a new ED.
- Continued website review

Meeting Adjourned at 7:38 p.m.

Minutes Submitted by Ally Joel

Mill Levy Advisory Council, BCHS

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5:00 p.m. to 7:30 p.m.

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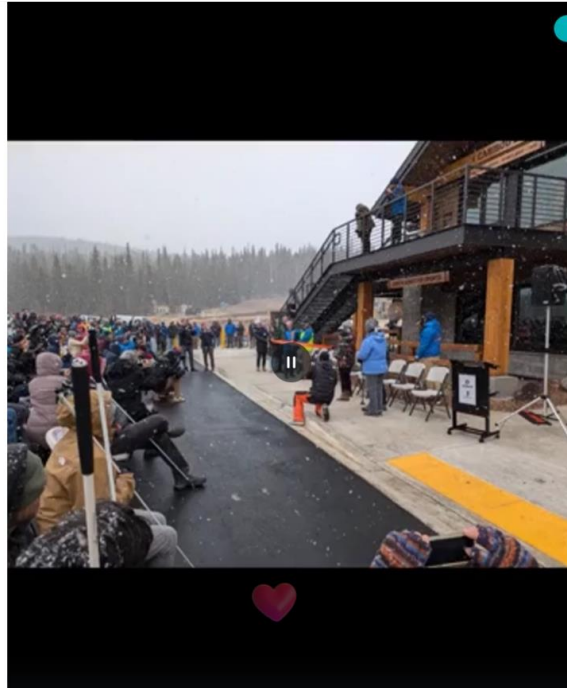
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Absent: Julie Marshall, Robert Enderson

Community Members in Attendance: Ailsa Wonnacott, Kimberly DeGraff

Boulder County Employees: Rebecca Seiden, IDD Mill Levy Program Coordinator

Meeting : Boulder County Lafayette Southeast Hub, also virtually on Microsoft Teams

Call to Order 4:10 pm

No signups for public comments

Welcome & Introduction of New Council Members

- February minutes will be approved at the next meeting.
- Ally will be out until July on maternity leave.
- Existing and new council members introductions.



Vote on Chair & Vice Chair

- Rebecca reviewed the role descriptions of the Chair and Vice Chair per the by-laws.
- Heidi offered to be considered for Vice Chair, Daren offered to be considered for Chair.
- Council members texted their votes to Rebecca. All 8 votes were in favor of the slate.

Section 4. Chairperson and Vice-Chairperson

- One member shall serve as Chairperson.
- One member shall serve as Vice-Chairperson.
- The Chairperson and Vice-Chairperson will be chosen by the Council by election and will each serve for a one-year term.
- The Chairperson shall preside at meetings of the Council.
- In the absence of the Chairperson, the Vice-Chairperson shall perform the duties of the Chairperson.
- In the absence of the Chairperson and Vice-Chairperson, any member may call the meeting to order and a temporary Chairperson shall be elected for purposes of conducting the meeting.
- The Chairperson shall serve as public spokesperson for the Council; maintain a working knowledge of applicable laws, regulations, and policies; oversee committee functioning; and assist in the recruitment, orientation, and support of Council members.
- The Chairperson and Vice-Chairperson shall confer with Staff Liaison regularly before meetings.
- The Vice-Chairperson shall lead the Council's efforts to recruit, orient, and support Council members.
- The Vice-Chairperson will share responsibilities as appropriate with the Chairperson.
- Prior to the first meeting of each calendar year, nominations will be accepted for the positions of Chairperson and Vice-Chairperson. These nominations shall be sent to the Staff Liaison, who shall provide adequate notice of the nominations prior to the first meeting of the calendar year. Nominations may also be accepted during the first meeting of the calendar year.
- The Council shall elect a Chairperson and Vice-Chairperson at the first meeting of each calendar year.

The Chairperson and Vice-Chairperson shall take office immediately upon election.

Voting on Chair & Vice Chair

IDDAC History, Overview of IDD Mill Levy Funding Solicitations/Opportunities and General Council Membership Refresher

Rebecca shared the Mill Levy definition. This was updated in February 2024 to further narrow the BI definition and require some documentation in cases requesting emergency funding.

In February of 2024, the Ballot language was further defined as the following:

- A documented intellectual and/or developmental disability that is manifested before the person reaches 22 years of age or brain injury acquired as an adult that results in a disability.
- A documented disability attributed to a diagnosed intellectual disability or related conditions which include cerebral palsy, epilepsy, autism or other neurological conditions when such conditions result in EITHER impairment of general intellectual functioning OR adaptive behavior similar to that of a person with a diagnosed intellectual disability.
- Individual must be in process of having qualified for a Medicaid waiver or disability benefit program due to an IDD/BI/autism diagnosis to receive IDD Mill Levy funding for emergency needs.



Boulder County Mill Levy Definition

The original property tax was passed in 2002, supported by several organizations and many individuals in BoCo. 1.5 mill property tax, 0.5 of which goes to HHS Allocation Restrictions. For many years most of the funding went to Imagine!, a local nonprofit.

Health and Human Services Property Tax

The Developmental Disabilities property tax, approved by voters in 2002, supplemented an existing mill levy to support developmental disabilities programs in Boulder County. Funding from this tax pays to help people of all ages with cognitive and developmental disabilities live fuller, more satisfying and independent lives.

- Majority of funding supports Imagine! a local nonprofit that provides services such as:
 - Education and therapy
 - Work opportunities in the community
 - Recreational learning and leisure activities
 - Facilitation of independent and group living
 - Support for families that care for their children at home
 - Guidance in everyday living

- Tax Calculations and Allocation
- 1.5 mill property tax
- Mill to fund services for developmentally disabled persons
- 0.5 mill to Health and Human Services Allocation Restrictions

In 2018 a Needs Assessment was done that suggested the need for the Advisory Council as well as a County staff person (Rebecca's role) to generate funding recommendations for the Board of County Commissioners under the supervisory umbrella of HHS. ("*HHS*" is now referred to as just "*HS*" Human Services). The council started meeting in January 2020, switching to virtual meetings during COVID. Recruitment is done at least once per year.

Background for Needs Assessment

Boulder County Department of Housing and Human Services (BCDHHS), with the support of the Boulder County Commissioners, hired OMNI Institute (OMNI) and Keystone Policy Center (Keystone) to conduct a county-wide assessment to explore the needs of individuals with intellectual and developmental disabilities (IDD). This report was submitted to the Boulder County Department of Housing and Human Services in November 2018. BCDHHS is committed to ensuring that county Mill Levy funds are utilized efficiently and effectively, with up-to-date information about the needs of the IDD community. The needs assessment sought a wide range of feedback from individuals with IDD, families, direct service providers, and community partners to understand the positive impacts of Mill Levy funds as well as gaps in the services continuum that could be addressed through future investments.



The Boulder County Needs Assessment recommended the development of an Intellectual and Developmental Disability Advisory Council

- "The purpose of the Intellectual and Developmental Disability Advisory Council is to work collaboratively to advise and recommend actions to Board of County Commissioners that promote opportunities to improve services for Boulder County residents with intellectual and/or developmental disabilities."

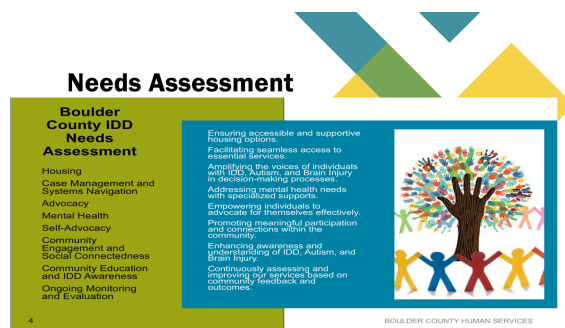


Advisory Council

- Intellectual and Developmental Disability Advisory Council established in 2019.
- Eleven Council Members appointed by Board of County Commissioners that include:
 - Individuals with an intellectual and/or developmental disability; family members or caregivers to someone who has an intellectual and/or developmental disability
 - businesses and/or non-profits with specific interest or experience with the IDD community
 - members of the community at large that may have specific expertise in the IDD community as well as identified in the IDD Community Needs Assessment, including transportation, housing, recreation, behavioral health, and employment.
- Serve in advisory capacity to the Board of County Commissioners on issues related to the IDD needs of the community.
- Committed to identifying and implementing new resources for the IDD community.

INTELLECTUAL AND DEVELOPMENTAL DISABILITY ADVISORY COUNCIL

The 2018 Needs Assessment suggested 6 priority area



Demographic data collected from existing contracts helps to inform future funding (such as navigation positions and underserved subgroups). Contract-specific outcome data is also collected. Data is available upon request, however Rebecca is careful not to share data in a way that would unfairly advantage a future funding request.

- The group discussed ways to fairly encourage new/more applicants in our next solicitation.
- Rebecca shared some county updates on how they are encouraging/supporting broader applications, as well as direct outreach efforts.

Solicitations

- 2022-Systems Navigation Solicitation
- 2024-Direct Services RFA
- 2024-Social and Recreational RFA
- 2025-IDD Housing Program solicitation
- 2025-Big RFA
- 2025-Housing Needs solicitation

2024 RFP Awards

- Center for People with Disabilities: \$77,861.25
- Dynamic Therapy: \$5,000
- Imagine!: \$2,529,478.75
- Boulder County Public Health: \$300,000
- Autism Society: \$6,500
- Community Link: \$25,674
- Ignite Adaptive Sports: \$25,000
- Inclusive Acres: \$7,500
- Play Expand: \$122,986

Rebecca reviewed general council membership guidelines.

- Definition of “Open Meetings.” If >2 members present, it should be a public meeting (posting notice >24 hrs in advance). Formal actions can/should only occur in a public meeting.
- Conflict of Interest. If any suspicion of a possible CoI, please contact Rebecca to discuss. A CoI could result in no action, or possible disclosure or recusal.
- Lastly, please remember that Rebecca will communicate publicly on behalf of the council. Individual members should not share council information privately or publicly.

General Council Membership Refresher

What is an Open Meeting

A "meeting" is defined as any kind of gathering, convened to discuss public business, in person, by telephone, electronically, or by other means of communication.

What types of "meetings" must be "open to the public at all times?"

All meetings of a : quorum – 3 or more members or what constitutes a quorum, whichever is less

At which: any public business is discussed OR at which any formal action may be taken

The board must provide full and timely notice (usually by posting at least 24 hours in advance.

Ethics/Conflict of Interest What should you do?

If you suspect you might have a conflict, contact us to discuss.

Three options:

1. Could be nothing; you will participate as usual
2. Could just require you to disclose the issue when the board takes it up.
3. Could require recusal. Recusal includes not only not acting upon the pending application or matter, but also not participating in any discussions with other Board members or staff concerning the matter.

Be aware of what you are discussing in public. You should never be speaking on behalf of the IDD Advisory Council.

A&I Avenues Report Out

Barb Wilkins-Crowder (Co-CEO) was unable to attend but submitted a report.

Staffing: Total staffing target: 160

- New Hire Activity: January new hires: 8, February new hires: 7, March as of 3/7/25: 3
- Departures in last month: Retirement: , Voluntary departure due to job satisfaction: 3, Involuntary departure(s): 1
- Open Positions in IDD Case Management Division:
 - 3 IDD CM's vacancies
 - 1 Business Support III (supports HRC)
 - 1 bilingual Intake Case Manager
- Mill Levy Supported Positions:
 - Filled: Transitional Case Manager, Business Support Intake, Systems Navigator, 3 Case Specialist I's, 2 Case Specialist II's.
 - Still Open / In Recruitment: 1 Case Specialist II

Quality Oversight

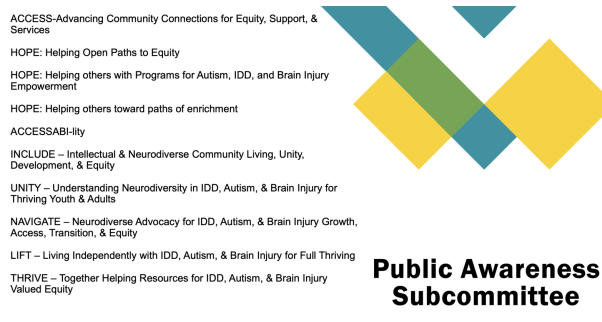
- IDD Caseloads remain at 45
- LTSS Caseloads are between 60 and 70
- CMA contract required CAC had first meeting on 2/20/2025
- HCPF continues to monitor our timeline compliance, particularly in intake
- CDEC continues to monitor our quality metrics and whether we are meeting our projections for children / families served and budget costs
- Boulder County and Broomfield County continue regular conversations regarding our service delivery and budget projections

Discussion/Questions from the Council

- Concerns about CM turnover - there should be proactive management providing interim/new contacts when someone departs.
- Concerns about accuracy of information requests for individuals/family during disability determination.
- Concerns about excessive delays in response time.
- Alisa shared more about the CAC - purpose is to review A&I complaints and ensure resolution. Encouraged participation in CAC as well as submitting complaints. She also referred to the escalation process that involves other state agencies.

Public Awareness Subcommittee Report Out

- Shared work to create an acronym to refer to our populations as well as our objectives
- Additional suggestions include: BEACON, BIADD, BLINC, ABCD
- Suggestion made to start with inspirational word (HANDS, ARC, LINK, SPAN...) and then figure out the acronym from there
- Asked council members to work on their own to come up with suggestions that we could then vote on



- Later in the meeting, a suggestion was made that this subcommittee could focus on promoting sensory-friendly environments in public spaces, restaurants, arts venues, etc.

Executive Working Session

- This year's Big RFA could be potentially up to \$5MM.
- The RFA will include several categories. Combining into one RFA simplifies administration as well as provides flexibility in allocating funds between areas.
- This may still be a 1 year contract but we hope to do 2 years or longer in the future.
- Rebecca shared last year's RFA, walking the group through the format. Discussion of ability to use funds for non-services (which is allowed), prioritization of included transportation, other possible prioritizations.
- If any council member has organizations in mind that could be interested, please provide the name/email to Rebecca and she will include them in a list that will get notified when the RFA is released. Organizations do not have to be limited to nonprofits.
- The group brainstormed additional detail on categories and specific services that are needed, capturing ideas on whiteboard.
- The Mental Health Data agenda item was moved to next meeting

Executive Working Session

Review and discuss the "2025 Big RFA"-funding to begin January 2026

Mental Health Data-Develop survey questions for Mental Health Practitioners who successfully completed the IDD Mental Health Training through Oliver Behavioral Consultants.

Open Discussion and Agenda Setting

Next Meeting Virtual Only April 14, 2025
5 p.m. to 7:30 p.m.

Meeting adjourned 7:37pm

Mill Levy Advisory Council, BCHS

Monday April 14, 2025 5-7:30 pm

Meeting Minutes

ADA Statement

This document contains materials from external parties that may not be fully accessible. To request an Americans with Disability Act (ADA) accommodation, please email ada@bouldercounty.gov or call 303-441-1386. [View the county's accessibility statement.](#)

Advisory Council Members in Attendance: Asher Johnson, Lisa Slager, Jayne Dixon-Weber, Daren Kraft, Heidi Que, Annette Treufeldt-Franck, Jolie Bernstein, Teresa Greene

Absent: Julie Marshall, Robert Enderson

Community Members in Attendance: Ailsa Wonnacott, Kimberly DeGraff, Kathryn Arbour,

Boulder County Employees: Rebecca Seiden, IDD Mill Levy Program Coordinator

Meeting location: Virtually on Microsoft Teams

Call to order: 5:05 pm

No community members asked to be added to the agenda

Approval of February and March Minutes

- Daren called for motion, Annette moved to approve, Jolie seconded, Daren noted no opposition

A&I Avenues Update (Kathryn Arbour)

Staffing

Total staffing target: 170 (current total census 167, 153 FT)

- **New Hire Activity**

February new hires: 7, March new hires: 14, April to date: none yet

- **Departures in last month:**

Retirement: 0, Voluntary departure due to job satisfaction: 1, Involuntary departure(s): 1

- **Open Positions in IDD Case Management Division:**

2 CMs, 1 LTSS Intake CM, 1 bilingual EI Case Manager, 1 Receptionist


- **Mill Levy Supported Positions:** Still Open

1 Case Specialist II

- **Ratios:**

IDD Caseloads remain at 45, LTSS Caseloads are between 60 and 70

Other items:

- Provider Fair – April 22 – 4 – 7 pm
- Community Advisory Committee (CAC), required by HCPF CMA contract, launched. We are still searching for two client representatives and/or family members of those receiving services to volunteer on this committee. You can read more on our website at [Community Advisory Committee | A&I Avenues](#). Please help us spread the word.
- Community First Choice (CFC) is scheduled to implement July 1, 2025, at which point a Medicaid Member can begin receiving CFC services. You can learn more about CFC on the HCPF website -  [Community First Choice Option | Department of Health Care Policy and Financing](#).

Question: Will implementation change the balance between Federal and State funding of services?

Some waiver services are being moved to the State Plan Medicaid. They will still require a Level of Care (LOC) qualification, though. The Federal match for those services will increase (6% higher), so in theory State Plan dollars will go further than they would have within the confines of the waivers themselves. (Caveat: This is our understanding, but information is clarifying daily on this subject. Please consult the HCPF website highlighted above for up to date information on CFC.)

- New features on our website:
 - Updated Intake and information pages about waivers and other services. Easier to navigate with updated links for applications and other relevant information.
 - Added a section on the CAC
 - Added a Kudos section on the Contact Us page - [Contact Us | A&I Avenues](#)
- We are in early stages of our FY 26 budget preparation for FY starting on July. We have been tracking stabilization for this first full FY post CMRD transition and are happy to report that we have (or will have) reached key identified milestones by June 30. We report monthly both to HCPF and Boulder County on a number of these metrics.

Quality Oversight

- IDD Caseloads remain at 45
- LTSS Caseloads are between 60 and 70
- CMA contract required Community Advisory Committee had first meeting on 2/20/2025
- HCPF continues to monitor our timeline compliance, particularly in intake
- CDEC continues to monitor our quality metrics and whether we are meeting our projections for children / families served and budget costs

- Boulder County and Broomfield County continue regular conversations regarding our service delivery and budget projections

A&I Avenues appreciates our partnership with Boulder County! Thank you for your support and commitment to ensuring people with intellectual and developmental disabilities continue to have access to the array of services they need and want for living as independently as possible.

ACL Overview & 2024 Key Metrics (Ailsa Wonnacott & Kimberly DeGraff)

- ACL = ARC chapter serving Boulder and Broomfield counties
- 15 staff people, mix of FT and PT
- ARC thrift store provides majority of funding (77%), remainder with Gov't contracts (12%), Grants (5%), Contributions (5%), Membership (1%)
- 90% of budget spending goes to salaries
- Provide advocacy and advice from conception to end-of-life
- Powerpoint shared data on Individual Advocacy for people served, hours provided, areas served, ages/ethnicities served, living location
- Also included top line data on Group and Systems Advocacy
- Next year will start collecting data for new goals/outcomes
- Rebecca reminded the group that this data has been helpful in making decisions on IDD Mill Levy funding allocations and contracts

2025 IDD Mill Levy Budget Overview

- Final funding allocations aren't available until later in the year
- Currently planning for \$9MM Total spending:
 - \$8.7MM Contracted services
 - \$0.35 CCAP (transfer to county for child care)
 - \$0.28 Admin/other
- Projected dip in property taxes means funding will dip in 2026/7
- \$8.7MM Contracted Services details:
 - \$3.34MM A&I
 - \$0.25MM ACL
 - \$0.298MM CPWD (separate from grant)
 - \$0.147MM PLAY/EXPAND
 - \$2.57MM Imagine!
 - \$0.30 Bo Co Public Health

- Also Dynamic Therapy, Autism Society, Community Link, Ignite Adaptive, Inclusive Acres, START, Housing Stability, other initiatives under development
- A&I and ACL should become “sole source providers” which should make contracting easier (no need to participate in competitive bidding process)
- All other contractors will participate in the upcoming RFA process
- Discussion of CCAP funding freeze implications

Proposed Mill Levy Funding Memo

1. 2025 Housing RFA (up to \$0.5MM/year) estimated 5/1/2025, begin ASAP
2. 2026 IDD Services RFA (up to \$5MM/year) targeted 6/1/25 release and starting 1/1/26
3. 2026 Sole Source Contracts (\$3.6MM/year) begin 1/1/26
4. *IDD Housing Needs Assessment (\$30 - \$150K/one-time) RFP release fall 2025.
5. *Emergency IDD RFA (up to \$2.5MM/year) targeted 1/2026 release.
 - * From Fund balance
 - Fund balance reasons: Contracts held flat for several years ~2018 (despite funding increasing), contracts were slow in getting started so couldn't spend 100%, other delays causing underspending (such as START)
 - Yearly budget must be spent first before pulling from fund balance
 - Need to show plans for fund balance, otherwise could risk losing it
 - Emergency Fund discussion
 - Without more details, \$2.5MM feels reasonable estimate. Can always return to use more if warranted
 - Includes 15% admin costs, as in all contracts
 - Could be one or more entities that would continue to provide services that have lost funding (not direct funding to clients)
 - Upcoming RFA
 - Request for making sure it is sent to broad section of community centers and businesses to create more accommodating spaces
 - Suggestion about offering virtual presentations (live or recorded) about the RFA to attract new/small organizations (prior to release)
 - Request for sharing list of RFA vendor list to spark other additions, Rebecca will look into her ability to share this with the AC
 - Daren called a motion, Heidi moved to approve, Asher seconded
 - Daren roll called the vote: no opposition, unanimously approved

IDDAC Vision/Mission Statement Review

- Shared original vision/mission, also shared alternate 'plain language' version
- Will send out for further thought and discussion, hoping to vote in May
- Discussion of why IDD and Autism must be called out separately when both fall under "neurodevelopmental disabilities" per the DSM.
 - It is driven by the ballot language not medical diagnosis.
 - Not all individuals with Autism would qualify as disabled.

IDDAC Alternative Program name

- Reviewed list from last meeting, shared new suggestions
- Rebecca will share list via email to get to short list for voting in May

RFA Priority Areas

- Shared the list of suggested priority areas for the upcoming RFA
- Benefits Counseling: should be provided by other agencies, but seems to not be hitting the mark, we could pursue this as to why but not likely something we would provide under IDD Mill Levy
- Sensory Friendly environments: may become even more important as a coping mechanism given political landscape and likely cuts
- Eligibility, evaluations & assessments: idea of addressing waitlist specifically for eligibility by offering funding to allow use of broader range of providers. Rebecca will look into this topic, including the mention of CO Disability Funding Committee.
- Adult vs. Child funding: suggestion to make funding less age-specific so it could be applicable to adults or children
- Tabled discussion for later: Discounted/free classes, scholarships that could be used for a variety of individually-driven activities

Next month

- More detailed START discussion (ran out of time)
- Data dashboard (in future will be quarterly)

Meeting adjourned 7:38

Mill Levy Advisory Council, BCHS

Monday June 9, 2025 5-7:30 pm

Meeting Minutes

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Advisory Council Members in Attendance: Kari Rowe, Daren Kraft, Heidi Que, Lisa Slager

Advisory Council Members in Virtual Attendance: Asher Johnson, Jayne Dixon-Weber, Annette Treufeldt-Franck, Jolie Bernstein, Gaby Weinberg

Absent: Teresa Green, Julie Marshall, Robert Enderson

Community Members in Attendance: Ailsa Wonnacott, Kimberly DeGraff

Boulder County Employees: Rebecca Seiden, IDD Mill Levy Program Coordinator, Estiberson Parra Cordero, Human Services Contract Performance Analyst

Meeting location: Boulder County HUB, 1755 S. Public Rd Lafayette

No community members asked to be added to the agenda

Meeting called to order: 5:14 pm

A&I Avenues Report: Submitted by Kathryn Arbor from A&I Avenues

Staffing

Total staffing target: 170 (current total census 168, 156 FT)

New Hire Activity

March new hires: 14; April to date: 2; May: 6

Departures in last month:

Retirement: 0; Voluntary departure due to job satisfaction: 1; Involuntary departure(s): 1

Open Positions in IDD Case Management Division:

- 3 CMs
- 1 Bilingual CM as a floating position
- 1 Service Coordinator
- 1 Children's CM Supervisor

Mill Levy Supported Positions:

Still Open

- 1 Boulder County Transitional CM

Ratios:

- IDD Caseloads remain at 45
- LTSS Caseloads are between 60 and 70

Other items:

- Community Advisory Committee (CAC), required by HCPF CMA contract, held its quarterly meeting in May. The next meeting takes place in July. We are still searching for two client representatives and/or family members of those receiving services to volunteer on this committee. You can read more on our website at [Community Advisory Committee | A&I Avenues](#). Please help us spread the word.
- Community First Choice (CFC) is scheduled to implement July 1, 2025, at which point a Medicaid Member can begin receiving CFC services. You can learn more about CFC on the HCPF website - [\[*\] Community First Choice Option | Department of Health Care Policy and Financing](#). CMAs are working with HCPF to ensure staff is trained sufficiently to respond when access to this option opens.
- Systems Navigation: Diana Hernandez continues to represent the A&I Avenues/Boulder County work by attending various community events and resource fairs including a monthly event in Nederland. Diana is currently working with approximately 30 individuals, all at the very beginning stages of becoming eligible for a program supporting those with IDD, Autism or Brain Injury.
- A&I Avenues Board of Directors: We are also seeking prospective candidates to serve on the Board of Directors for this agency. Please help spread this word and direct any interested parties to contact Kathryn Arbour (karbour@aiavenues.org) for more information about the process.

Quality Oversight

- IDD Caseloads remain at 45
- LTSS Caseloads are between 60 and 70
- HCPF continues to monitor our timeline compliance, particularly for intake. We are within the expected guidelines.
- CDEC is working with EI Brokers to determine budgets for FY 26 which begins July 1
- Boulder County and Broomfield County continue regular conversations regarding our service delivery and budget projections

A&I Avenues appreciates our partnership with Boulder County! Thank you for your support and commitment to ensuring people with intellectual and developmental disabilities continue to have access to the array of services they need and want to live as independently as possible.

- Heidi asked how Board/CAC positions are advertised

Approval of prior meeting minutes

Heidi motioned to approve the April minutes, Lisa seconded, all approved

Data Report: Estiberson Parra Cordero, BoCo Human Services Contract Performance Analyst

- Collects information from all contracts: aggregated data, not individual
- Shared presentation metrics on the following contract providers: ACL Advocacy, Play Foundation, CPWD, Imagine CCB, Imagine PASA, Imagine Crisis Management, Imagine AT, Autism Society, Boulder Public Health, Community Link, Ignite Adaptive Sports, Inclusive Acres, A&I Avenues, Dynamic Services
- Confirmed support was offered to smaller organizations to design/execute questionnaires, Rebecca pointed out that with new RFA there will be more support to help with data collection
- Moving to FormStack should be helpful
- Currently no client satisfaction measures included, should be included in future, also hoping to incorporate qualitative input
- Shared a draft of future data dashboard layout

Rebecca: Updates on related programs/events

- Will send out various PRIDE month activities/opportunities and links
- Reminder that Juneteenth is a county holiday, will send out link to county celebration
- Well-Mind connection offered as a mental health resource, particularly after the recent hate crime
- Housing RFA closed: 3 submissions received, will begin evaluations
- Program/Services RFA going out soon: up to \$5MM solicitation
- Noted that several previously funded programs struggled with hiring, which limited program impact (per the data shared by Estiberson)

IDD Mill Levy Program Name

- Finalists: ACCESS, UNITY, LIFT, NAVIGATE, BIG, CARE
 - *Discussion of ACCESS; doesn't include our specific populations but does seem to explain our function. A good launchpad that could be appended to include our populations.*
 - *Creating ACCESS for people with IDD*
 - *ACCESS for IDD*
 - *IDD Mill Levy ACCESS program*
- Darren called for a vote: Heidi motioned for "ACCESS", Kari seconded, roll-called voting list, all approved

IDDAC Vision and Mission Statement

- Discussion of drafted statements and plain language version.
- Many members preferred the plain language version as being more succinct and easier to understand.
- Small revisions were made to the plain language version, resulting in our final draft (below).
- Lisa motioned to approve, Jolie seconded, all approved, no one opposed.

Drafted statement:

Our mission is to empower Boulder County residents living with Intellectual and Developmental Disability, Autism, and/or Brain Injury and their support networks by fostering inclusivity and promoting a compassionate community that recognizes and celebrates the uniqueness of all members of our community as valued citizens and neighbors.

Our vision is to champion equitable access for individuals with Intellectual and Developmental Disabilities, Brain Injury, and/or Autism to have a diverse array of choices that align with their aspirations. We are dedicated to facilitating and supporting opportunities for housing, employment, health, wellness, and community inclusion, fostering an environment where everyone can pursue their goals.

Our purpose is to make informed recommendations to the Boulder County Board of County Commissioners which generates and encourages impactful investments that supports inclusivity and access for all members of our community.

Plain Language Version:

We support people in Boulder County who live with Intellectual and Developmental Disabilities, Autism, and/or Brain Injuries—and those who care for them—by building a welcoming, inclusive community that values everyone for who they are.

We want everyone with Intellectual and Developmental Disabilities, Autism, and/or Brain Injuries to have fair access to housing, jobs, healthcare, community inclusion and social opportunities that match their goals and dreams.

We give thoughtful and informed advice to the Boulder County Human Services and County Commissioners to help guide investments that make our community more inclusive and accessible for everyone.

START Update

*Background (from website): START is an evidence-based, community crisis prevention and intervention service model for individuals aged 6 and older with intellectual and developmental disabilities (IDD) and mental health needs (IDD-MH). The **START model** is designed to develop community capacity while achieving wellbeing for those served. The START model uses multiple evidence-based practices, including person-centered, culturally competent, whole person, solutions-focused, systemic, positive psychology, and other practices. START Programs provide 24-7 crisis response and stabilization services, often in conjunction with first responders. START Stands for Systemic, Therapeutic, Assessment, Resources, and Treatment*

- \$500,000 has been put aside for START implementation
- BOCO isn't large enough for its own program, suggestion to add onto Denver's START, but they can't accommodate us for a while
- Rebecca will follow back up with Denver about timing, as well as separately with the national organization

Oliver Behavioral Training Survey for Therapists

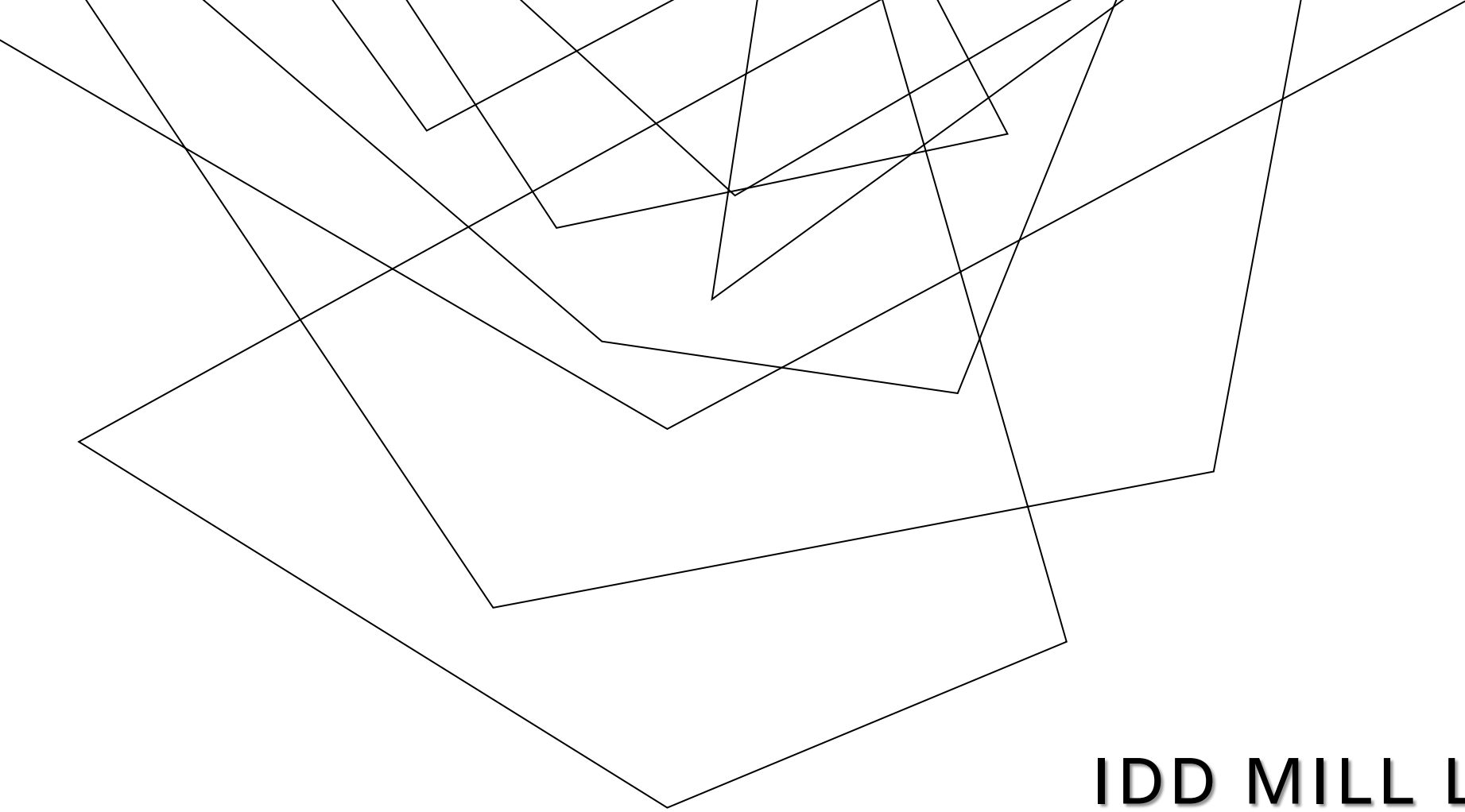
Discussion of questions to consider for the survey, including:

- Status of accepting Medicaid before/after training
- Client caseload before/after of our population?
- Agree/disagree 5 point scale(Along with opportunity for open-ended input
 - This training prepared me for working with this population
 - I learned more about this population
 - I changed how I worked with this population as a result
 - I feel more comfortable working with this population after the training
- What is holding you back from working with more of our population?

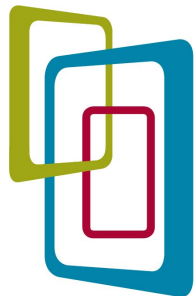
Future meeting agenda items

- Request for brief presentation and more time for questions
- Possibilities include:
 - Community Link
 - A&I: Community First Choice
 - A&I Waiver Training
 - Mobility for All
 - Housing Vouchers
 - Acronym glossary

Meeting adjourned: 7:30 pm



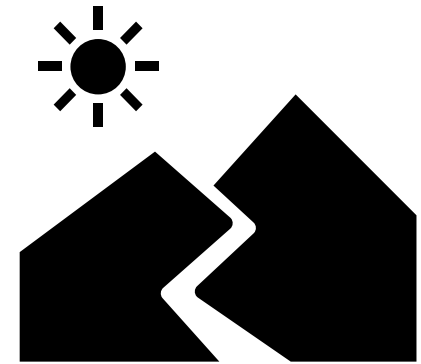
IDD MILL LEVY DATA PRESENTATION



BOULDER COUNTY
**HUMAN
SERVICES**

INTRODUCTION

- This presentation provides **a data-informed snapshot of service utilization and demographic reach** across IDD Mill Levy-funded programs for 2024 and early in some cases.
- It highlights quarterly and annual **trends in client participation**, equity metrics (race, origin, gender), and service type (case management, diagnostics, adaptive recreation, etc.).
- The data **enables us to understand** who is being served, where **services are being accessed**, and identify gaps for future outreach and development.
- Our goal is to use these insights to **improve inclusivity, support underrepresented populations, and expand the effectiveness** of funded programs



DATA COLLECTION PROCESS

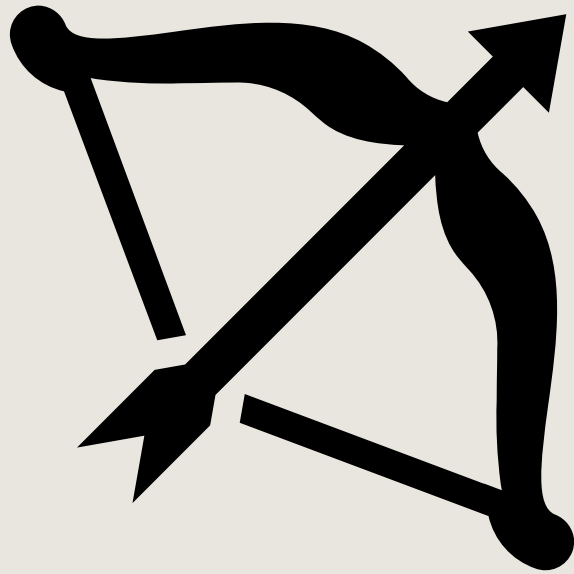
Quarterly Data Report

Data collected aggregated not individual

Demographics, to determine Program Reach and utilization

Demographic to determine equity and Inclusion

Program metrics to determine actions taken during the period



IDD 2025 – 2026 Opportunities:

Data collection, keep improving the collection to better represent:

- Older adults and younger children whenever if possible
- BIPOC and gender-diverse individuals
- Race, gender, and specific SSM services
- Outreach in underserved regions
- Cultural responsiveness & inclusivity
- Expand reporting completeness
- Services for underrepresented life domains
- Program Evaluation to determine the impact of the actions on the target population

ACL Advocacy Program

Program Reach & Utilization

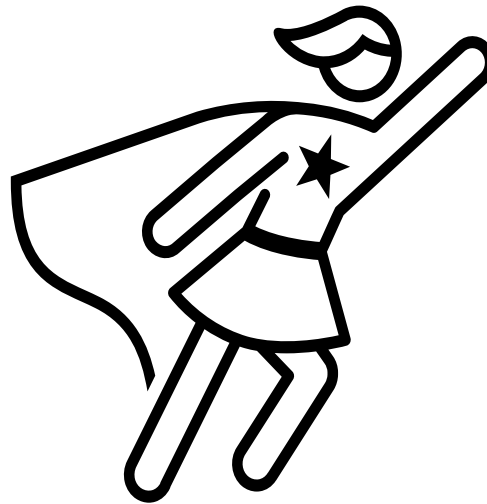
- Total New Cases:** Peaked in 2021 & 2023 (126); dropped in 2024 (91)
- Top Cities Served:** Boulder & Longmont
- Quarter with Highest Caseload:** 2024 Q4 (161 cases)
- Top Age Group:** 18–24 years (36.5% of clients)

Service Needs (SSM Domains)

- Most addressed: Housing, Parenting Skills, Support System
- Under-addressed: Healthcare, Legal, Education, Substance Use

Demographics & Equity

- Race:** Most clients identified as White; Pacific Islander = 0%
- Origin:** 100% Hispanic/Latino
- Gender:** 52.5% Male, 33.9% Female; Non-binary & other identities underreported



Play Foundation

Program Reach & Utilization

- Clients Served: Increased from 389 (2021) to 599 (2024), early 2025 shows drop (149).
- Ages: Most impacted 25–54 (41%), least 0–5 (2%) & 55–91 (3%).
- Residency: Top cities – Boulder (44%), Other BOCO (10%), Lafayette (8%).
- Homeless: 242 inside BOCO (uptrend), 12 outside BOCO (limited).

Programming

- School Year: Record 653 served in 2025 Q1. High waitlist (61) & referrals (67).
- Summer: New/expanded in 2025 Q1 with 114 served. 67 IDD eligible. Waitlist (31).



Equity

- Race: Majority White (64%), followed by Mixed Race (12%), and Black (7%).
- Origin: 63% Non-Hispanic, 27% Hispanic, decreasing unknowns over time.
- Gender: 49% Female, 44% Male, 6% gender-diverse identities. Strong LGBTQ+ inclusion.

Equity

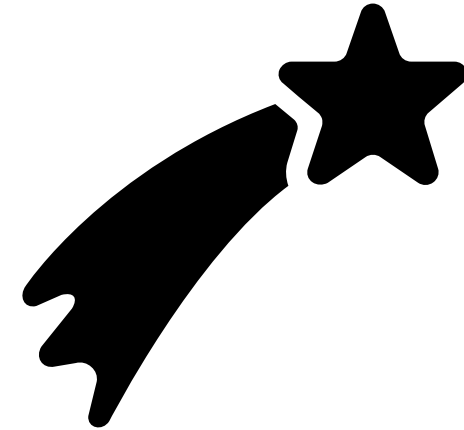
- Race: Majority White (69.4%); growing reach to BIPOC communities
- Origin: 78.9% Not Hispanic; 13.6% Hispanic; trend shows better data completeness
- Gender: Female (51.3%), Male (45.1%), Gender-diverse (3.6%)

Program Reach & Utilization

- Clients Served: 2024 had the most clients (314); steady growth since 2021
- Most Served Ages: 55–91 (49.7%), then 25–54 (37.9%)
- Top Residencies: Boulder (299), Longmont (175), Lafayette (108)

Programming

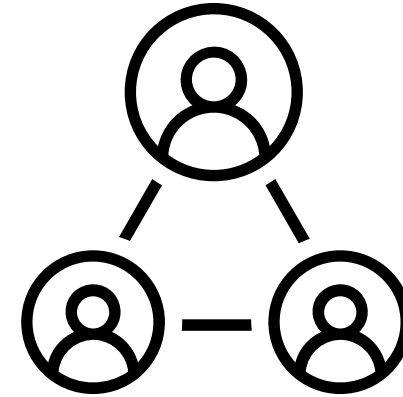
- Supported Employment: More referrals and placements each year
- Program Highlight: Integrated support network, with increasing DVR/community partnerships



IMAGINE CCB

Program Reach & Utilization

- 2023 was the peak year with 8,624 clients; 2024 saw a sharp drop to 4,417 (49%).
- Longmont (34%), Homeless Out-of-County (24%), and Boulder (17%) were the top serviced areas.
- Clients aged 6–17 made up 62.5% of the total; adults 25+ made up only 2.5%.



Equity

- Racially, 62.5% of clients were White; BIPOC representation was limited but improving.
- 17.8% of clients identified as Hispanic/Latina/o; origin data quality improved over time.

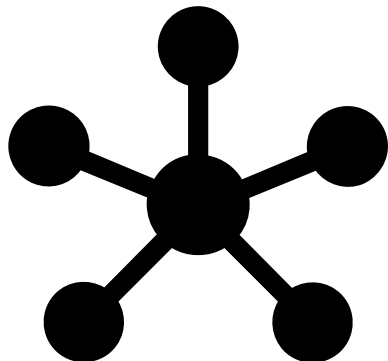
Programming

Program utilization was led by Case Management (38%) and OHCDS (33%); Family Support followed (26%).

- Overall, the data reflects a youth-focused service model with regional reach and steady demographic progress

Program Reach & Utilization

- 2023 marked the highest client volume with 1,496 clients served.
- A slight drop occurred in 2024 (-8%), but early 2025 shows promise with 328 clients already.
- Longmont served the most clients (46%), followed by Other Cities Outside BOCO (28%).
- Most clients are aged 25–54 (46.8%), followed by 18–24 (23.6%).



Equity

- Majority race: White/Caucasian (71.3%), followed by Black (7.7%) and Mixed Race (5.7%).
- 18.9% of clients identified as Hispanic/Latina/o; data completeness improved over time.
- Female clients represented 53.6%, with 3.3% identifying as gender-diverse.

Programming

- Core service lines (Mental Health, Behavior Support, School Age Services)
- Newer services like Social Enterprise grew in 2024.
- Most services peaked in 2023, reflecting possible strategic shifts, funding changes, or capacity limits

Program Reach & Utilization

- 2023: 211 unduplicated clients, 250 duplicated count – indicating recurring or extended service use.
 - 2024: 112 unduplicated clients, 129 duplicated count – drop due to contract transition to A&I Avenues post-Q2.
- Residency Trends:
- Longmont (33%), Boulder (15%), Lafayette (9%). 54 homeless in-county, 3 out-of-county.
- Age Distribution:
- Highest: 25–54 (26%), 6–12 (24%), 0–5 (16%)
 - Lowest: 55+ (5%), 13–17 (12%), 18–24 (14%)

Equity

Race:

- White: 63%, Asian: 3.8%, Black: 1.9%, Race Unknown: 39%

Origin:

- Not Hispanic/Latinx: 52%
- Hispanic/Latinx: 26%, Unknown: 22%

Programming

Referrals:

- 92 in 2023 → 60 in 2024 (↓35%) due to program transition

Top Needs (SSM Domains):

- Income (176), Housing (97), Physical Health (85), Support Systems (55), Functional Ability (67)



Program Reach & Utilization

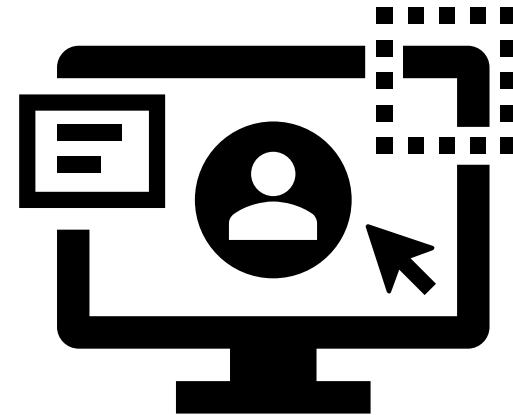
- Total Clients Served: 2023 - 315, 2024 - 362 (+15%), 2025 Q1 - 87 (-76%)
- Boulder County Clients: 2023 - 263, 2024 - 299, 2025 - 68
- Top Cities: Longmont highest each year; drop in all areas in 2025
- Age: Majority adults 18–54 (59%), youth under 18 (23%), older adults (10%)

Equity

- Race: Predominantly White (63%), Black (8%), Asian (6%), Mixed (4%)
- Hispanic Origin: 19%, with 8.5% Unknown
- Language: 94.6% English, 4.3% Spanish, <1% ASL/Device

Programming

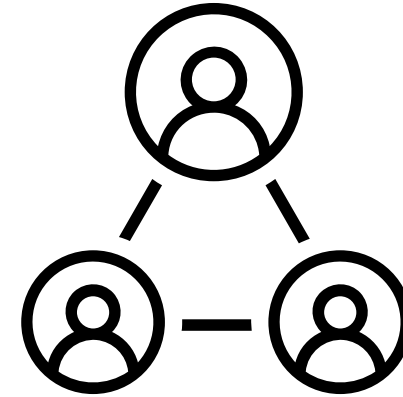
- Departments: Community & School Age served most
- AT Goals: Clients with goals rose in 2024
- Equipment: iPads, Communication Devices, Art Kits most used.



Autism Society

Program Reach & Utilization

- Total Clients reported: 187 only QT 3 2024
- Boulder the city with most clients 98
- Ages 6 – 17 The most served



Equity

- Race & Origin Unknown shows the 100 % of the reported clients, opportunity to improve data collection
- Gender 49 % Males ; 47% Females and a small representation of other genders 4%

Programming

1 report of Transportation provided and 102 of people with disabilities.

Program Reach & Utilization

- Increasing from Q3 to Q4 2024, then slight drop in 2025 Q1.
- Longmont 38% consistently leads across quarters, with engagement rising in Louisville and Lafayette.
- Services strongly oriented toward early childhood (0–5). 62%



Equity

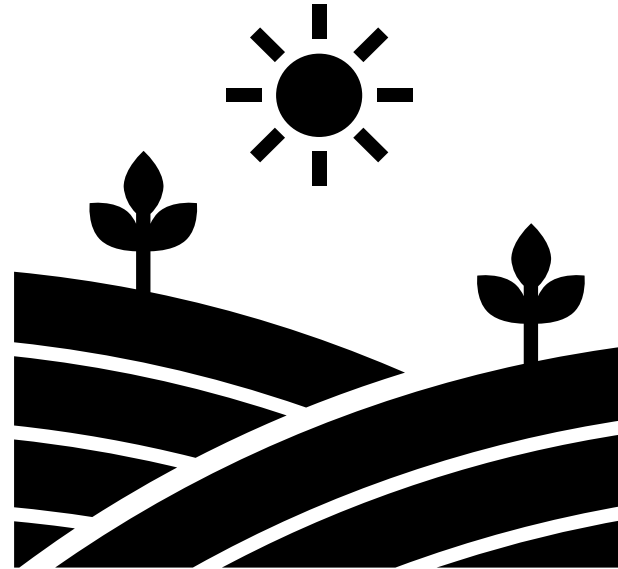
- White/Caucasian: 40 clients (36%); Race Unknown: 32 clients (29%); BIPOC Total: 38 clients (34%)
- Hispanic/Latinx: 45 clients (41%); Hispanic/Latinx population most impacted.
- Gender: Majority Male 57%, with growing inclusion of gender-diverse individuals.

Programming

- Children with Special Needs & Service
- Clients w/ Developmental Delays (0–3): 17
 - Eligible for IDD Services: 63
 - With ASD: 35
 - With Brain Injury: 7
 - Referrals to Early Intervention: 8
 - Referrals to Crisis Supports: 40
- Consistent identification and referral; crisis support referrals surged in 2025 Q1.

Program Reach & Utilization

- 44% increase in clients served, signaling early expansion.
- Initial geographic concentration in Longmont, with gradual outreach growth.
- Adult-focused service delivery, especially midlife clients. **25–54**: 14 clients (56%) – Most impacted



Programming

- Consistent DD waiver access; SLS slightly increasing; activities and private pay clients emerging in 2025.
- **Clients on Waivers:**
 - DD Waiver: 14
 - SLS Waiver: 7
 - EBD Waiver: 0
- **Private Pay:** 1 (Q1 2025 only)
- **Activities Offered:** 9 (Q1 2025)

Equity

- Limited racial diversity; slight improvements in demographic; Race White/Caucasian: 20 clients (80%) – Most impacted, **Origin:** Not Hispanic/Latinx: 18 (72%)
- Predominantly male 68% participation. No gender-diverse identities reported.

Ignite Adaptive Sports



Program Reach & Utilization

- Rapid growth in Q4 2024 (+84%), sustained in 2025 Q1
- Boulder consistently highest; followed by Longmont and Louisville
- Most impacted: Ages 25–54 (avg. 189), then 55+ (avg. 87)

Equity

- Race & Origin: Majority: White/Caucasian (avg. 192) Increasing representation: Black/African American (avg. 17), Asian (avg. 12) Hispanic/Latinx: 30.2% in 2025 Q1, up from 23.5% in 2024 Q3
- Female clients increased to 289 in Q1 2025; Gender-diverse clients stable (approx. 6–7 per quarter)

Programming

- Disability-Specific Engagement & Support
- Participants with IDD, ASD, Brain Injury increased each quarter
- High referrals from outreach (e.g., 46 in 2025 Q1)
- BIPOC participation rose steadily in snow sports
- Transportation supports nearly doubled from 2024 Q3 to Q1 2025

Program Reach & Utilization

- Clear increase in service reach (+35%) from 2024 to 2025
Most Impacted Area (2025): Longmont, Other cities such as Boulder, Lafayette, and Louisville showed moderate engagement
- Most Represented Group: Ages 6–12; Other groups: Age 0–5 and Age 13–17 had lower participation.

Equity

- Race: Most reported race is White/Caucasian other races are under reported.
- Most Clients: Identified as Not of Hispanic, Latina/o, or Spanish origin
- Inclusion of gender-diverse clients, though in small numbers, indicates growing accessibility.

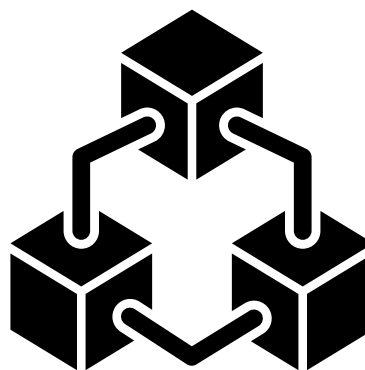
Programming

- Program offerings are expanding, and more IDD-eligible individuals are being reached.
- BIPOC and ASD communities are notably absent—either from programming or reporting.
- Zero participation in affinity groups may represent a missed opportunity for identity-based or peer-led connection.
- No data reported for Brain Injury, suggesting further outreach or clarification may be needed in intake processes.



Program Reach & Utilization

- Total Clients Served (Q3 2024): 6,026 the only recorded quarter so far, and Q4 is pending. This makes it difficult to establish a trend, but Q3 reflects strong service activity.
- Strong regional coverage centered in Longmont and Boulder, with notable outreach beyond the county. No reported homeless client data may indicate gaps in outreach or classification.
- Most Impacted Age Group: Age 6–12 29.8% least impacted 0–5 3.5%



Programming

- Case Management Clients (Q3 2024): 3,722 Case management represents over 61% of total clients served. It's the core function of A&I's services, suggesting a robust infrastructure to support coordination and ongoing care.
- All programs were active in Q3 2024. Family support is the most prominent after case management, while diagnostic and OHCDs services are smaller but still relevant.

Equity

- Race: Most reported race is White/Caucasian 63% . But Mixed Race and Black/African American show notable engagement. The 13% "Unknown" rate signals need for improved demographic collection.
- Most Clients: Identified as Not of Hispanic, Latina/o, or Spanish origin; Hispanic engagement is moderate, and high unknowns limit deeper equity analysis.
- While most clients identify within the binary, (Male 56.9% & Female 43%) **three clients** (0.05%) identify as gender-diverse, indicating the agency includes and recognizes LGBTQ+ identities, though more inclusive outreach may be needed.

Dynamic Services



Program Reach & Utilization

- 2024 – 2025 4 Clients reported
- Services were concentrated in Boulder. 75 %
- Age 0–5: 2 clients (50%) Age 6–12: 2 clients (50%)

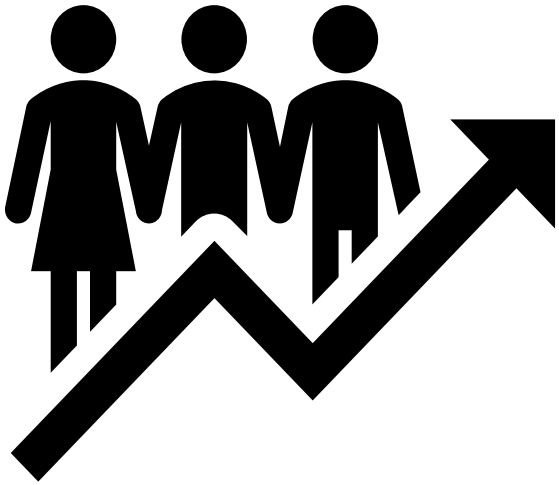
Equity

- Most Impacted: White/Caucasian 3
Limited racial diversity, but small sample size.
- No available data on Hispanic/Latinx identity; likely an issue in data capture, which limits ability to assess equity.
- Male: 4 clients (100%)

Programming

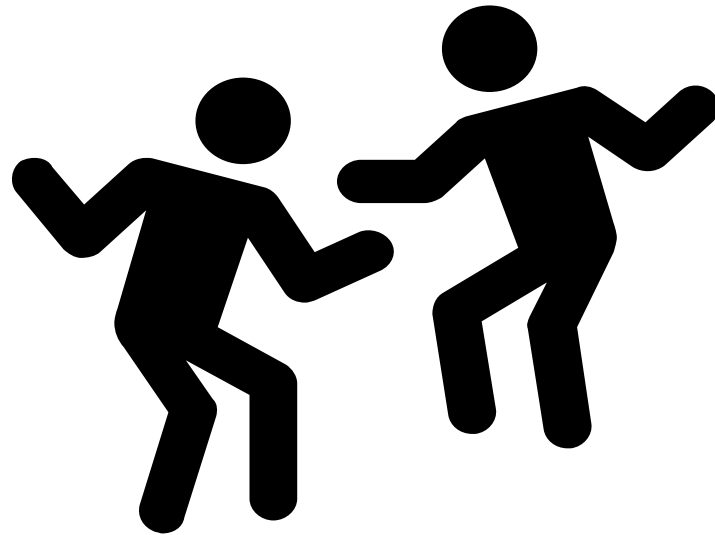
Pediatric Services Usage
Clients receiving Hippotherapy: 4
Therapeutic Horseback Riding: 0
Aquatic Therapy: 0
Other Dynamic Therapy: 0
The only service activated was hippotherapy, aligning with early childhood developmental needs. Other therapy modalities were not recorded during this quarter.

CONCLUSION



- **Clear Growth:** Multiple programs demonstrated increased reach particularly in case management and adaptive sports.
- **Demographic Gaps:** While White, non-Hispanic clients are the majority, several programs are improving representation of BIPOC and gender-diverse participants.
- **Data Completeness:** Some datasets—particularly around race, origin, and homelessness—require stronger collection methods to support equity analysis.
- **Service Trends:** Pediatric services and newer supports (e.g., affinity groups, transportation) remain underutilized or underreported—indicating room for expansion or awareness.
- **Next Steps:**
 - Standardize demographic data across programs.
 - Strengthen outreach in underserved geographic and cultural communities.
 - Use findings to inform funding priorities and program design in FY2025–26.
 - Implementation of Program Evaluation to assess the impact of all the programs

THANK YOU!



Mill Levy Advisory Council, BCHS

Monday, July 14th 2025

5:00 p.m. to 7:30 p.m.

Meeting Minutes

ADA statement

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Advisory Council Members in Attendance: Kari Rowe, Daren Kraft, Asher Johnson, Jayne Dixon-Weber, Annette Treufeldt-Franck, Jolie Bernstein, Teresa Green.

Absent: Julie Marshall, Robert Enderson, Lisa Slager, Heidi Que

Community Members in Attendance: Ailsa Wonnacott, Kimberly DeGraff

Boulder County Employees: Rebecca Seiden, IDD Mill Levy Program Coordinator & Ally Joel, IDD Mill Levy Program Specialist

Meeting

Meeting was held virtually through Microsoft Teams. No Public Comments were scheduled.

Approval of Minutes

Annette moved to approve June's minutes, Jolie seconded. All were in favor. Minutes approved.

A&I Avenues Update to Boulder County IDD Council

Barb Wilkins-Crowder, Co-CEO, A&I Avenues

Staffing

Total staffing target: 170

Staffing as of July 11, 2025: 165

New Hire Activity

May: 5

June: 2

July to date: 7

Departures in last month:

Retirement: 0

Voluntary departure due to job satisfaction: 5

Involuntary departure(s): 1

Open Positions in IDD Case Management Division:

- 1 Ongoing caseload CMs
- 1 Bilingual Intake CM
- 1 Bilingual CM as a floating position
- 1 Service Coordinator
- 1 Children's Lead CM

Mill Levy Supported Positions:

- 1 Boulder County Transitional CM --- hire has been made and internal transition is underway

Ratios:

- IDD Caseloads remain at 45-50
- LTSS Caseloads are between 65 and 75

Other items:

- Community Advisory Committee (CAC), required by HCPF CMA contract, meets next on August 13. We are still searching for two client representatives and/or family members of those receiving services to volunteer on this committee. You can read more on our website at [Community Advisory Committee | A&I Avenues](#). Please help us spread the word.
- Community First Choice (CFC) began on July 1, 2025. You can learn more about CFC on the HCPF website - [Community First Choice Option | Department of Health Care Policy and Financing](#). CMAs are working with HCPF to ensure staff is trained sufficiently to respond when access to this option opens.
- KFF.org provides a thoughtful and informed overview of the impacts to Medicaid in recent legislation: [Medicaid Watch | KFF](#)
- Systems Navigation: Diana Hernandez continues to represent the A&I Avenues/Boulder County work by attending various community events and

resource fairs including a monthly event in Nederland. Diana is currently working with approximately 30 individuals, all at the very beginning stages of becoming eligible for a program supporting those with IDD, Autism or Brain Injury.

- A&I Avenues Board of Directors: We are also seeking prospective candidates to serve on the Board of Directors for this agency. Please help spread this word and direct any interested parties to contact Kathryn Arbour (karbour@aiavenues.org) for more information about the process.

Quality Oversight

- A&I Avenues continues to participate in a collaborative conversation across all 15 CMAs and with HCPF personnel to address the impact of continued system changes and pressures on our workforce. This group also hopes to deepen conversations about how the state defines and supports quality in case management delivery.
- HCPF continues to monitor our timeline compliance, particularly for intake. We are within the expected guidelines.
- CDEC is working with EI Brokers to determine budgets for FY 26 which begins July 1
- Boulder County and Broomfield County continue regular conversations regarding our service delivery and budget projections

A&I Avenues appreciates our partnership with Boulder County! Thank you for your support and commitment to ensuring people with intellectual and developmental disabilities continue to have access to the array of services they need and want to live as independently as possible.

Community Link Colorado Presentation

Shaylyn Wilson, CEO, Community Link Colorado

- Shaylyn Wilson presented on the Social Link program; a weekend activity initiative funded through Mill Levy dollars.
- Since October 2024, 26 individuals have participated (22 in-county, 4 out-of-county).
- Activities focus on socialization, personal interests, and friendships outside day programs. Transportation is provided.
- The program experienced early staffing and scheduling challenges but has since stabilized. Many participants are new to Community Link services.

- A highlight was an organic friendship that developed between two attendees.
- Participants must be 18+ to participate.
- Transportation is flexible, including door-to-door routes when needed.
Volunteer support is welcomed.
- Waitlists are common but often resolved before events.

IDD Mill Levy Updates

Rebecca Seiden

Colorado Emergency Rental Assistance (CERA)

- Pre-application window: July 14th, 11 AM - July 16th, 5 PM.
- Eligibility:
 - 24-month look back rule applies only to households previously assisted by CERA, ERA, or TRAG.
 - Households must be at or below 60% of the Area Median Income (AMI).
 - No cap on the total months of rental assistance.
- Post-window applications: Clients at the court stage can apply through the Daily Random Selection (DRS) process by contacting the CARE Center at (303) 838-1200 or visiting a CEDP office.
- In-person assistance:
 - Denver Office: Mon-Fri, 9 AM - 12 PM and 1 PM - 4 PM.
 - Durango Office: July 15th, 10 AM - 1 PM.
 - Colorado Springs Office: Mon-Fri, 9 AM - 4 PM.

Federal Changes to Medicaid and SNAP

- Legislation impacts:
 - Nearly \$1 trillion in Medicaid cuts over 10 years.
 - \$186 billion in SNAP cuts over the same period.
 - Penalties for states spending on health coverage for undocumented immigrants.
 - No extension of ACA enhanced tax credits.

Local financial challenges

- Boulder County Human Services managing a multi-year budget deficit.
- Both Boulder County and the State of Colorado facing significant budget deficits.

Key points from NACHSA

- Reduced access to SNAP and Medicaid.
- Increased financial responsibility for states and counties.

- Minimal federal funding for implementation.
- Short timelines for system changes, effective December 2026 or January 2027.

OUR Center Back to School Bash

- Event date: Friday, August 8th, 2-4 PM.
 - Grade-appropriate school supplies and backpacks for children (pre-school to 12th grade).
 - Registration required (July 7th - July 18th) via 2-1-1 or texting zip code to 898-211.

Housing Program

- Grant status: Closed, applications reviewed, decisions on awards forthcoming.
- Programs and Services RFA: Closing July 21st, decisions expected the week of September 8, 2025.

Working Session

Council Members

Willoughby Corners and IDD Design Consultant Approval:

The IDD Mill Levy Program is requesting approval to allocate an estimated \$10,000 to support a collaborative RFP with BCHA, who will lead the RFP process. We are recommending that IDD Mill Levy funds be used to include an IDD Consultant for the Design Team for Willoughby Corners, Phase Two.

This consultant would work to ensure that the building design is inclusive of individuals with IDD, autism, and BI, providing their expertise and guidance throughout the planning and design process. In addition, this will advance collaboration between Boulder County departments and leverage Mill Levy funds for systemic impact.

This recommendation aligns with the IDDAC commitment to dedicated affordable units at Willoughby Corners for people with IDD, autism, and BI.

- Council approved \$10,000 for an IDD design consultant for Willoughby Corners Phase 2 to ensure inclusive design.

- There was discussion on consultant implementation, reporting structure, and community engagement.

Addressing Mental Health (START program)

- Discussed delays with implementing START and led to the agreement to create a local wraparound mental health program.
- The council approved \$500,000 and plans to develop an RFP.

Follow Up Items

- Updates on Community Awareness and Engagement subcommittee
- Share START program information and stats with council.
- Revisit START & Mental Health solicitation in September's in-person meeting
- Invite Imagine!, MHP/Clinica or CCHA to present at August meeting
- Review Needs Assessment again at August meeting
- Distribute Shaylyn Wilson's contact info and August flyer when available

Meeting Adjourned at 7:21 p.m.

Minutes Submitted by Ally Joel

Mill Levy Advisory Council, BCHS

Monday, August 11th 2025

5:00 p.m. to 7:30 p.m.

Meeting Minutes

ADA statement

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Absent: Annette Treufeldt-Franck, Jayne Dixon-Weber, Julie Marshall, Robert Enderson

Community Members in Attendance: Ailsa Wonnacott, Kimberly DeGraff, Caitlin Looney

Boulder County Employees in Attendance: Rebecca Seiden, IDD Mill Levy Program Coordinator & Ally Joel, IDD Mill Levy Program Specialist

5:08 pm - Call to Order: Daren Kraft, Chair. Public comment requested by Ailsa Wonnacott for ACL updates.

Approval of Minutes: July minutes approved by council.

A&I Avenues Update to Boulder County IDD Council

Jenna Corder, Director of Programs and Services, A&I Avenues

- Vacancies: 4 CM (1 promotion, 1 term, 2 for anticipated growth due to Community First Choice (CFC))
- CFC offers additional or alternative services to HCBS waivers
- 30 new CFC referrals, anticipated increase.
- Annual provider fair scheduled for 3rd week in October.
- DD Waiver waitlist: ~3,000 people; urgent cases may bypass (1:5 approvals monthly).

- Eligibility starts at age 14 with regular check-ins; many receive SLS/FSSP services while waiting.
- Loss of Medicaid does not affect DD eligibility or waitlist status.
- Turnover due to constant change, reliance on complex systems, limited client contact, and compensation; tech training being integrated into hiring/screening.

Imagine! Mental Health Presentation

Jodi Walters, CEO; Sarah Smith, CSO; Kari Easterly, Assistant Director of Family & Therapeutic Services; Dr. Kalis, Clinician.

IDD Mill Levy Updates

Rebecca Seiden, Staff Liaison

Public Engagement – Website Rebrand

- Reviewing responsibilities of the IDD Advisory Council to potentially increase visibility of recommendations and expand involvement in solicitation awards.
- Researching how other boards and councils approach similar responsibilities.
- Holding off on developing the program name, mission, and vision statements until the review is complete. Updates will be provided as research progresses.

IDD Mill Levy Housing Program Grant Award

Imagine! awarded \$217,285 (Year 1) and \$259,991 (Year 2) for a two-year term

- Funding will support individualized housing navigation, wraparound coordination, transitional living services, skill development, embedded staffing, and culturally responsive outreach.
- **Year One:**
 - Maintain weekly on-site presence at BHP and All Roads to assist individuals with IDD, autism, and BI experiencing housing insecurity.
 - 0–3 Months: Phase in full-time navigation specialists, execute MOU with All Roads, formalize intake processes, begin housing stability plans.
 - 3–6 Months: Train project staff in navigation systems, mental health awareness, and professional boundaries.
 - 8–12 Months: Expand navigation to Longmont Housing Authority and HOPE sites; implement skill-building plans using AFLS.
- **Year Two:**
 - Continue weekly navigation services at all sites with annual plan updates.
 - Convert companion home to 24/7 specialized support for individuals transitioning from homelessness.

- Expand skill-building for those with aging caregivers and young adults using behavioral health teams, peer mentors, and assistive tech.

Programs and Services RFA

- Applications due July 21; currently under panel review.
- Awards anticipated to be announced September 8.

Farmers Market Subscription Box for SNAP Participants

- 8 weeks of fresh produce available August 13 – October 1 in Boulder, Longmont, and Lafayette.
- Through Double Up Food Bucks, participants get \$40 of produce for \$20 per week.

Discussion & Vote – County Wide IDD Housing Needs Assessment

Rebecca Seiden, Staff Liaison

The council discussed a proposal to fund a comprehensive housing needs assessment to inform future planning, identify service gaps, and guide resource allocation for individuals with IDD, autism, and brain injury (BI) in Boulder County.

Purpose and Scope:

- The assessment would inform future resource allocation.
- A large RFA (Request for Applications) is proposed to invite agencies to submit proposals to increase housing inventory.
- The needs assessment is estimated to cost up to \$75,000.

Objectives:

- Quantify current housing opportunities.
- Assess accessibility and types of housing available.
- Gather perspectives from the community, including self-advocates and caregivers.
- Evaluate the effectiveness of current housing and support programs.
- Provide recommendations to address identified gaps.

Methodology:

- The assessment would include focus groups, interviews, and other community engagement strategies.
- It would also capture data on individuals who have been pushed out of

Boulder County due to lack of housing or services.

Clarifications:

- The assessment includes physical buildings, such as new builds and creative housing options.
- It may include supportive housing, with the goal of identifying both unit needs and the supportive services required for long-term success.

Motion:

I move that we recommend funding a Boulder County IDD, autism, BI Housing Needs Assessment to inform future planning, identify gaps and resource allocation up to \$75,000.

- Motion by: Heidi
- Seconded by: Jolie
- Vote: Unanimous approval by Asher, Daren, Lisa, Kari, Jolie, and Heidi
- Next Step: Recommendation will be forwarded to Susan Caskey.

Working Session

Council Members

Focus: Boulder County IDD, Autism, BI Housing Needs Assessment

The council continued its discussion on the proposed housing needs assessment and explored broader strategies to support housing access, systems navigation, and mental health services for individuals with IDD, autism, and BI.

Housing

- Council members discussed the possibility of leveraging local policy tools, such as a rumored vacancy tax or fine on empty properties in Boulder, to apply pressure on landlords and expand housing access for individuals with IDD. Staff will follow up to confirm whether such a policy has been enacted and explore opportunities to align advocacy efforts.
- There was strong support for Accessory Dwelling Units (ADUs) as a housing solution for families. Members expressed interest in identifying or proposing initiatives to lower barriers—such as cost or zoning restrictions—for families who wish to add ADUs to support the independence of IDD family members while maintaining proximity to family support.

Systems Navigation

- The group emphasized the importance of accessible, centralized resources for families and individuals. Suggestions included:
 - A free online resource hub with live support or chat functionality.
 - Hosting an open house or virtual event to connect families with IDD-related services and supports.

Mental Health

- Members proposed a county-wide training on Medicaid billing to help providers and families navigate the system more effectively.
- Discussion included identifying barriers to Medicaid enrollment and how to address them.
- The council agreed to move forward with Oliver Behavioral's survey questions to better understand community needs and inform future planning.

September Agenda Setting

- **START Program Overview**
A presentation on the START (Systemic, Therapeutic, Assessment, Resources, and Treatment) program, including its history and foundational principles, to help council members become familiar with its structure and potential relevance to Boulder County.
- **Mental Health Practitioner Survey**
Review and discussion of the survey distributed to mental health practitioners who participated in the Oliver Behavioral Consulting mental health training. The goal is to assess training impact and identify next steps.

Public Comment

Ailsa Wonnacott, ACL

- Ailsa emphasized the importance of individualized, group, local, and systems-level advocacy to support individuals with IDD.
- Encouraged the council to begin integrating IDD considerations into the Behavioral Health Roadmap.
- Highlighted the Mental Health Cohort and the Mill Levy Subcommittee on Mental Health, which are supporting a ballot measure aimed at generating approximately \$15 million annually for 15 years to expand access to mental health services.

- Public hearing on the measure is scheduled for tomorrow at 1:00 p.m. via the Boulder County Commissioners' website.
- Advocacy efforts are included in the Inclusive Housing Coalition (IHC).
- In Longmont, advocacy has focused on new construction and engagement with local housing officials. Ailsa noted that Longmont currently lacks an inclusive housing plan.
- The Housing Advocacy Network emphasized that the most impactful way to influence decision-makers is through home tours that illustrate the benefits and challenges of inclusive housing.
- SABE (Self Advocates Becoming Empowered) meets bimonthly and is working on embedding housing navigation services in Broomfield.
- SABE members also serve as public health ambassadors through the Family Connect nursing program, which supports new and expecting parents.
- SABE is active in health care advocacy and will host a JEDI fundraiser on August 21st.

Next Virtual IDDAC Meeting

October 6th, 2025

5:00 PM to 7:30 PM

Meeting Adjourned at 7:30 p.m.

Minutes Submitted by Ally Joel

Mill Levy Advisory Council, BCHS

Monday, September 8th 2025

5:00 p.m. to 7:30 p.m.

Meeting Minutes

ADA statement

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Absent: Annette Treufeldt-Franck and Jayne Dixon-Weber

Community Members in Attendance: Ailsa Wonnacott, Kimberly DeGraft, Jodi Walters.

Boulder County Employees in Attendance: Rebecca Seiden, IDD Mill Levy Program Coordinator & Ally Joel, IDD Mill Levy Program Specialist

5:02 pm - Call to Order: Daren Kraft, Chair.

Approval of Minutes: August minutes approved by council.

A&I Avenues Update to Boulder County IDD Council

Barb Wilkins-Crowder, Co-CEO A&I Avenues

Staffing

Total staffing target: 170

Staffing as of September 8, 2025: 172

New Hire Activity

June: 3

July: 6

August: 3

September to date: 5

Departures in last month:

Retirement: 0

Health / Personal reasons: 2

Voluntary departure due to job satisfaction or other reasons: 2

Involuntary departure(s): 2

Open Positions in IDD Case Management Division:

- 1 Service Coordinator over hire position to assist with multiple LOAs underway
- 1 Children's Lead CM over hire position to assist with system and program changes

Mill Levy Supported Positions:

- All Mill Levy funded positions are staffed at this time

Ratios:

- IDD Caseloads remain at 45-50
- LTSS Caseloads are between 65 and 75

Other items:

- Community Advisory Committee (CAC), required by HCPF CMA contract, meets next in November. We are still searching for two client representatives and/or family members of those receiving services to volunteer on this committee. You can read more on our website at [Community Advisory Committee | A&I Avenues](#). Please help us spread the word.
- A&I Avenues Board of Directors: We are also seeking prospective candidates to serve on the Board of Directors for this agency. Please help spread this word and direct any interested parties to contact Kathryn Arbour (karbour@aiavenues.org) for more information about the process.
- The Colorado Department of Health Care Policy & Financing (HCPF) has launched a dedicated website in response to the state and federal budget pressures: [Medicaid Sustainability and Colorado's LTSS System | Department of Health Care Policy and Financing](#)

Quality Oversight

- A&I Avenues continues to participate in a collaborative conversation across all 15 CMAs and with HCPF personnel to address the impact of continued system changes and pressures on our workforce. This group also hopes to deepen conversations about how the state defines and supports quality in case management delivery.
- HCPF continues to monitor our timeline compliance, particularly for intake. We are within the expected guidelines.
- CDEC is working with EI Brokers to determine budgets and contracts for FY 26
- Boulder County and Broomfield County continue regular conversations regarding our service delivery and budget projections

IDD Mill Levy Updates

- Ongoing state and federal budget had put recent pressures on services, particularly in light of recent developments from the Office of Community Living (OCL) and the Colorado Department of Health Care Policy and Financing (HCPF).
- The state's budget shortfall, driven by federal tax changes, has led to spending reductions across state agencies.
- As part of these reductions, the 1.6% provider rate increase that took effect on July 1, 2025, has been rescinded as of October 1, 2025.
- This rollback affects a wide range of services, including those provided by provider agencies and therapy providers.
- BCHS will be closely tracking these changes over the next couple of years to assess their impact on service delivery, staffing, and sustainability.
- Further adjustments may be proposed as the state continues to address its budget challenges.
- Council discussed how these changes may affect family caregivers, particularly those who received rate increases earlier this year.
- There is concern that rescinding those raises could lead to financial strain and reduce caregiver availability or willingness to continue providing care.

BCHA Proposal for Willoughby Corners – Phase 2

Susana Lopez-Baker, BCHA Director; Tyler Elick Brickwell; Tanya Jimenez, BCHA

*AFFORDABLE HOUSING
INITIATIVE FOR
IDD/BI/AUTISM INDIVIDUALS
IN BOULDER COUNTY*



Housing



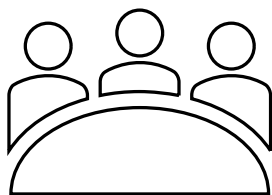
AGENDA



- Introduction
- Details of the Initiative
 - Commitment to Affordable Housing Units
 - Specialized Design Features and Support Services
- Financial Aspects
 - Cost Estimates and Funding Sources
 - Pre-development and Development Costs
 - Funding Request and Timeline

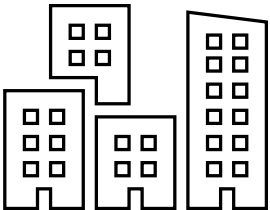


INTRODUCTION



Background of the Initiative

Proposed by the IDD Advisory Council
Discussed at the February 11, 2024 meeting



Purpose of the Initiative

To provide affordable housing units
Targeted for Boulder County Human Services (BCHS)



COMMITMENT TO AFFORDABLE HOUSING UNITS

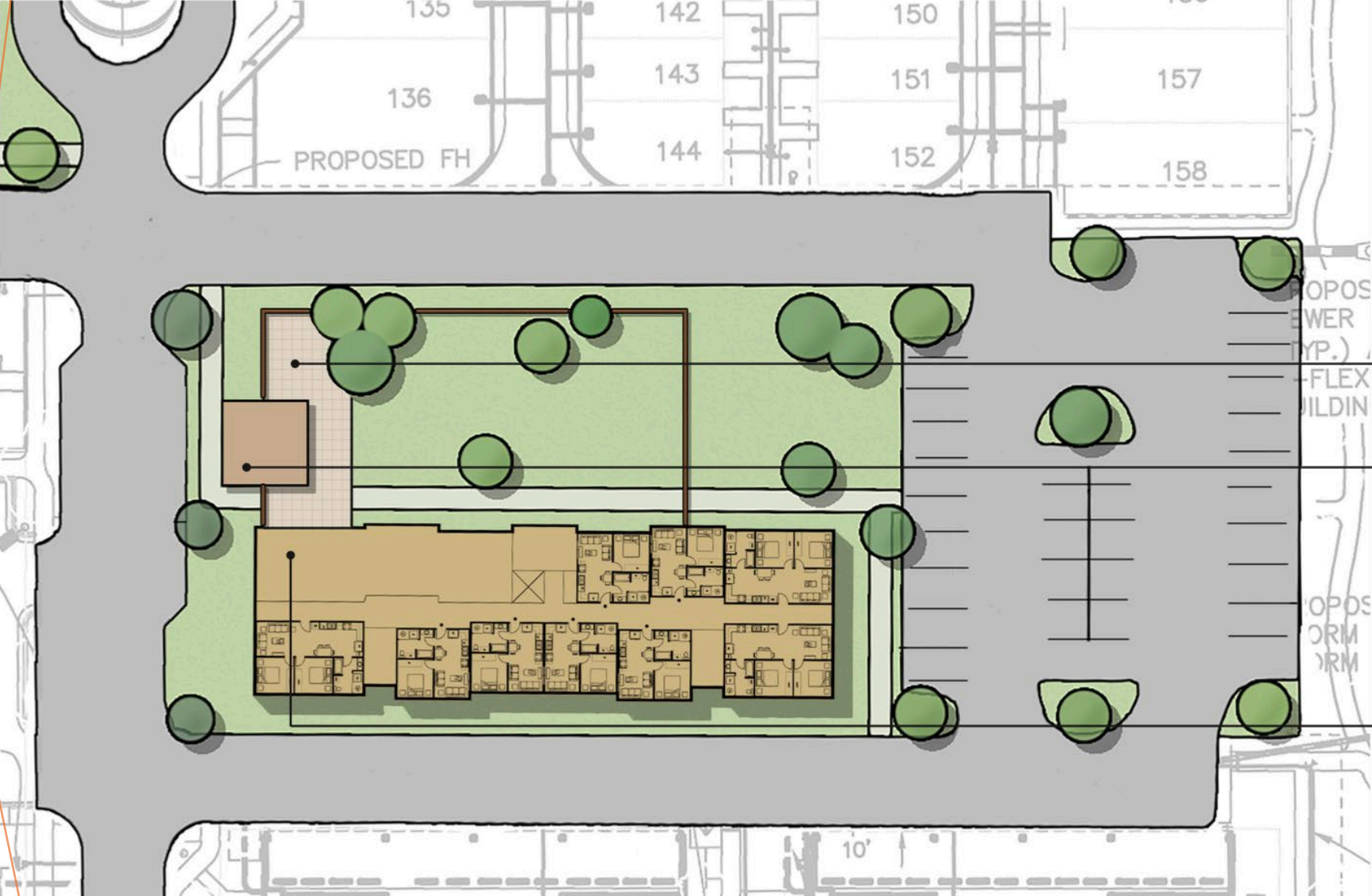
- IDD Advisory Council's Commitment
- Willoughby Corner, Phase Two
- Challenges Faced by the Population
- Importance of the Commitment



SPECIALIZED DESIGN FEATURES AND SUPPORT SERVICES

- Importance of Affordable Housing
- Specialized Design Features
- On-going Supportive Services Area
- Comprehensive Development Plan

SITE PLAN DETAIL: NEURO-INCLUSIVE HOUSING



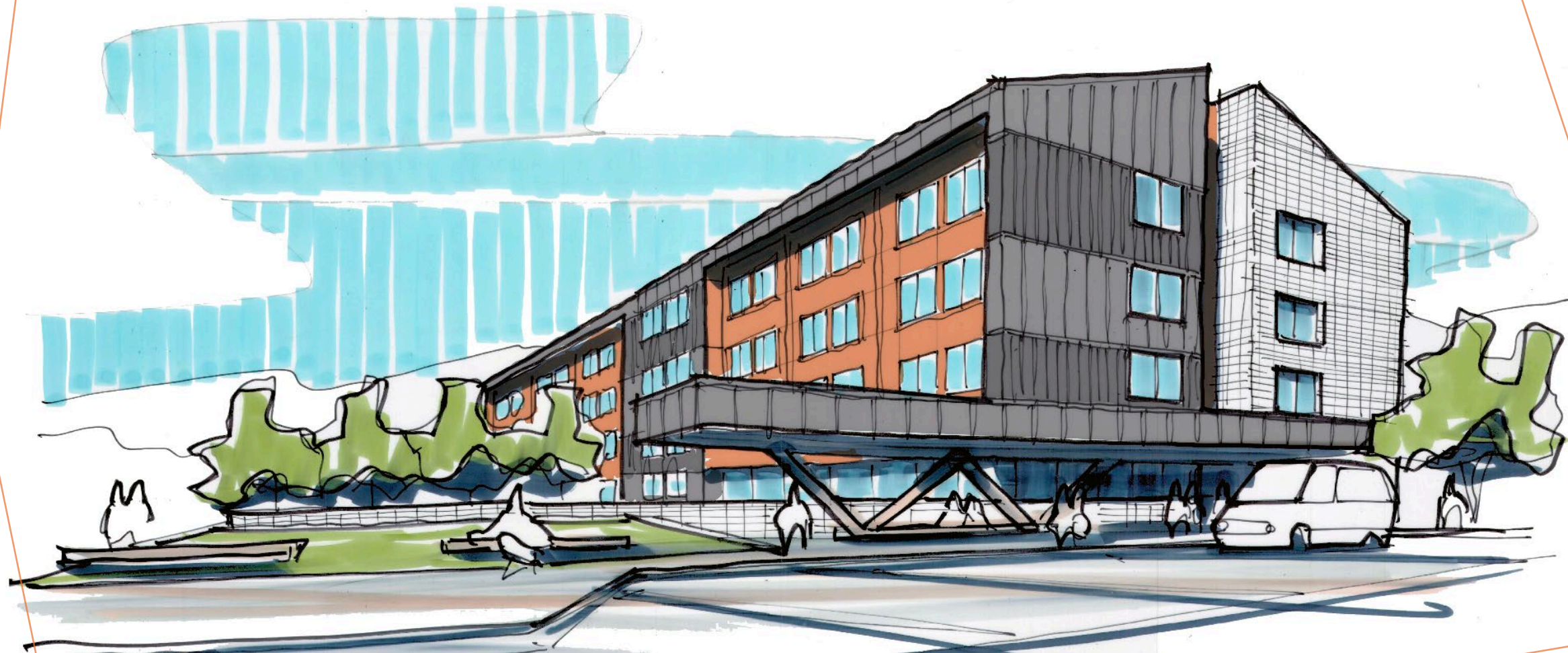
# OF UNITS	44-45	DU
1 BR	30	DU
2 BR	14-15	DU
3 BR	0	DU

FENCED SPACE WITH GRASS & HARDSCAPING

COVERED ENTRY

SIGHT LINES TO OPEN SPACE, ENTRY, & SURROUNDINGS

RENDERING: NEURO-INCLUSIVE HOUSING





COST ESTIMATES AND FUNDING SOURCES

- Development Plan: 9% LIHTC, Feb 2026 Application
- Estimated Total Cost: \$25M / \$555k/du
- Building Costs: \$16M / \$355k/du



COST ESTIMATES AND FUNDING SOURCES

WILLOUGHBY CORNER PHASE II Project Summary, Timing & Unit Mix

Project Summary

Project Name:	Willoughby Corner Phase II.A	
Address:	999 Canturbury Dr, Lafayette, CO 80026	
Project Type:	NC: 4-Story Wood (V)	
Residential Units		45
Commercial Space (SF)		0
Total Bldg GSF (w/o Parking)		48,881
Site Size:	56,628 SF	1.3 AC
Density:		35 DU / AC
Description:	Neuro Inclusive (IDD) Affordable Housing	

Timing

Activity	Duration	Activity Ending
Analysis Start Date / LIHTC Credit Award 5/25		5/15/26
Permitting / Equity Closing	7 Months	12/31/26
Construction / Renovation	16 Months	4/30/28
Move-Ins / Lease Up	4 Months	8/31/28
Stabilization / Conversion	3 Months	11/30/28

AMI LEVEL	UNITS	%
80% AMI	0 Units	0%
70% AMI	0 Units	0%
60% AMI	16 Units	36%
50% AMI	13 Units	29%
40% AMI	8 Units	18%
30% AMI	8 Units	18%
Total	45 Units	100%

UNIT TYPE	AVG SIZE	UNITS	%
Stu / 1BA	480 SF	0 Units	0%
1BR / 1BA	660 SF	30 Units	67%
2BR / 2BA	960 SF	15 Units	33%
3BR / 3BA	1,080 SF	0 Units	0%
Total	760 Units	45 Units	100%



PRE- DEVELOPMENT AND DEVELOPMENT COSTS

- Pre-development Costs
- Development Costs
- On-going Services Costs



FUNDING REQUEST AND TIMELINE



- Funding Request
 - BCHA requests \$2 million for project and construction work
- Collaboration
 - BCHA and BCHS will work together during predevelopment and development
 - Ensure adequate supportive services space for ID/BI/Autism individuals and households
- Construction Timing
 - Earliest start would be Fall 2026

Boulder County Housing Department

BCHA Discussion & Recommendation

A motion was presented by the council and unanimously in favor that the IDDAC “received more information prior to making a recommendation of allocation of \$1,000,000.00 or \$2,000,000.00 to BCHA for Willoughby Corners Phase 2 due by October so that the council can proceed by October with a vote.”

Council’s questions for more information they will need before making a recommendation include:

- How will the \$2,000,000.00 requested from the IDD mill levy be allocated?
- What do the construction costs include? (amenities, disability accessibility, acuity/level of support and care, oversight?)
- How much of this request is for construction & design? How much is for supportive services?
- How many units will be designated exclusively for individuals with IDD, autism, or brain injury?
- Can there be an oversight committee to ensure accountability and transparency in the allocation of units?
- What specific design features will be included to accommodate these populations?
- How will you ensure that the housing is neuro-inclusive?
- Does Phase 2 have its own community room or is it shared with Phase 1 and 3?

Public Awareness/Engagement

The Council explored strategies to increase awareness and engagement around IDD, autism, and brain injury within the community to gain greater social inclusion. One proposed approach includes issuing a solicitation to fund a Community Liaison. This role would be responsible for coordinating community activities, expanding public understanding and inclusive practices related to IDD, autism, and brain injury, and managing a centralized community partner calendar to serve as a shared repository of events and offerings.

START Overview

Boulder County IDD/BI-MH Service System Evaluation

National Center for START Services
February 10, 2024

START Program

START is a crisis prevention and intervention model that focuses on community linkages, filling in gaps and capacity building across the system of care rather than segregated or duplicative service development.

Data provided by the Colorado Health Alliance (CCHA) Medicaid Program in 2023

- Approximately 1891 individuals receiving IDD Medicaid waiver services in Boulder County.
- 39% of those also have a mental health diagnosis.

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Four Areas of Concern Regarding Service Delivery

1. Outpatient Mental Health Services
and Supports
2. Linkages Across Systems
3. IDD and Community Services
4. Crisis Response

Improve Access to Outpatient Mental Health Services and Supports

- While over three quarters of survey respondents reported access to some mental health services, only 10% reported services worked well for individuals with IDD/BI-MH.
- Individuals with IDD are under-represented as a patient receiving mental healthcare.
- Mental Health treatments such as psychotherapy, particularly grief therapy, intensive outpatient and substance use disorder treatment are rarely available for IDD/BI.
- Medication management is often the only service provided.
- Shortage of Medicaid providers.
- Improve focus on well-being and crisis prevention.

Need to Improve Linkages Across Systems

- Improve collaboration and coordination
- Lack of provider Clarity around whose job it is to do what.
- Ability to positively implement a fidelity -based model
- Support in navigating the Mental Health system for families.
- Lack of transition services between service systems.

Improve IDD and Community Services

- Need for greater access to IDD and community services for people with IDD/BI-MH.
- Need to improve both IDD and outpatient mental health
- Proactive support to prevent/de-escalate crises.
- Increased training across service systems (IDD, MH, and criminal justice)
- Training to increase knowledge of mental health symptoms as they are often overlooked by caregivers or being considered a "behavior".

Improve Crisis Response

- People with IDD and mental health service needs do not receive adequate crisis intervention services.
- Limited availability and hours for the co-responder program.
- Only service can get quickly is Police.
- Need a safety-net 24-hour response for services.

Elements to address to improve the system

1. Cross systems collaboration linkage agreement
2. Tertiary care approach to mental health and IDD
3. Service navigation
4. Strength based approaches and strength activation methods
5. Cross systems crisis prevention and intervention planning
6. Response to urgent needs and follow up
7. A highly skilled well trained work force
8. Integrated/multimodal CLC approaches to assessment and treatment
9. Evidence informed practices
10. Community capacity building

Council reviewed the START model and discussed the need for MH/BH services, particularly 24-hour access to these services, similar to that of START.

A motion was presented by the council and unanimously in favor that the “IDDAC recommends to the Boulder County Commissioners that we allocate \$500,000 a year to go out in an RFA to develop an IDD/autism/BI MH wraparound program.”

Mental Health Survey – Oliver Behavioral Consultants Training

Council reviewed and refined a survey to be sent to mental health providers who took the Oliver Behavioral Health training. The survey aims to gather information on the impact of the training and identify barriers to serving clients with IDD, autism, or brain injury.

Clientele Caseload Trends

1. Are you still working at the same practice from when you took this training?

☐ Yes, I work at the same practice

- ☐ No, I work at a new practice
- ☐ No, I no longer work at a mental health practice
- 2. Before completing the training, approximately how many clients with IDD, autism, or BI did you serve?
 - ☐ 0%
 - ☐ 1–10%
 - ☐ 11-25%
 - ☐ 26-50%
 - ☐ Over 50%
- 3. Since completing the training, approximately how many clients with IDD, autism, or BI have you served?
 - ☐ 0%
 - ☐ 1–10%
 - ☐ 11-25%
 - ☐ 26-50%
 - ☐ Over 50%
- 4. Has the training contributed to an increase in your caseload of clients with IDD, autism, or BI?
 - ☐ Yes
 - ☐ No
 - ☐ Not sure
 - ☐ Additional thoughts to share: _____

Medicaid Certification and Billing

- 4. Were you/your organization certified to bill Medicaid prior to the training?
 - ☐ Yes

☐ No

5. Are you/your organization currently certified to bill Medicaid?

☐ Yes

☐ No

☐ In progress

6. If you are not Medicaid certified, what are the main barriers?

[Open text field]

7. Would you be interested in a training on how to set up Medicaid billing?

☐ Yes

☐ No

☐ Maybe

Training Impact

Please rate your experience with the following statements:

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The training prepared me to work with clients with IDD, autism, or BI.					
I feel more confident welcoming these clients into my practice.					
I have adjusted my approach to working with this population as a result of the training.					

Application to Practice

8. Have you applied any specific strategies or tools from the training in your work? If so, please describe.

[Open text field]

9. Have you encountered any challenges when applying what you learned in the training?

- ☐ Yes
- ☐ No
- ☐ Not yet

If yes, please describe:

Barriers and Support Needs

10. What challenges, if any, are currently limiting your ability to serve more clients with IDD, autism, or BI?

[Open text field]

11. What additional support, resources, or training would help you serve this population more effectively?

[Open text field]

12. What additional support, resources, or training would help serve the IDD, autism and BI population more effectively?

[Open text field]

13. Would you be interested in follow-up sessions or peer consultation groups?

- ☐ Yes
- ☐ No
- ☐ Maybe

14. Are there other trainings that you would like Boulder County Human Services to offer?

[Open text field]

15. Do you have any other comments or suggestions?

[Open text field]

Next Virtual IDDAC Meeting

October 6th, 2025

5:00 PM to 7:30 PM

Meeting Adjourned at 7:36 p.m.

Minutes Submitted by Ally Joel

Mill Levy Advisory Council, BCHS

Monday, October 6th 2025

5:00 p.m. to 7:30 p.m.

Meeting Minutes

ADA statement

This document contains materials from external parties that may not be fully accessible. To request an Americans with Disability Act (ADA) accommodation, please email ada@bouldercounty.gov, or call 303-441-1386. [View the county's accessibility statement.](#)

Advisory Council Members in Attendance: Lisa Slager, Heidi Que, Kari Rowe, Daren Kraft, Asher Johnson, Jayne Dixon Weber, and Teresa Greene.

Absent: Julie Marshall, Jolie Bernstein and Robert Enderson

Community Members in Attendance: Jodie Walters, Ailsa Wonnacott and Kimberly DeGraff,

Boulder County Employees in Attendance: Rebecca Seiden, IDD Mill Levy Program Coordinator & Ally Joel, IDD Mill Levy Program Specialist

5:02 pm - Call to Order: Daren Kraft, Chair.

Approval of Minutes: September minutes approved by council.

A&I Avenues Update to Boulder County IDD Council

Kathryn Arbour, Co-CEO A&I Avenues

Staffing

- Total staffing target: 170
- Staffing as of October 7, 2025: 171

New Hire Activity

- July: 6
- August: 3
- September: 6

October to date: 1 (2 more scheduled for later in the month)

- Departures in last month:
- Retirement: 0
- Health / Personal reasons: 1
- Voluntary departure due to job satisfaction or other reasons: 3
- Involuntary departure(s):

Open Positions in Case Management Division:

- 1 Service Coordinator over hire position to assist with multiple LOAs underway
- 1 Children's CM over hire position to assist with system and program changes
- 2 CM (IDD)
- 2 CM (LTSS)

Mill Levy Supported Positions:

- All Mill Levy-funded positions are staffed at this time

Ratios:

- IDD Caseloads remain at 45-50
- LTSS Caseloads are between 65 and 75

Other items:

- Community Advisory Committee (CAC), required by HCPF CMA contract, meets next in November. We are still searching for two client representatives and/or family members of those receiving services to volunteer on this committee. You can read more on our website at [Community Advisory Committee | A&I Avenues](#). Please help us spread the word.
- A&I Avenues Board of Directors: We are also seeking prospective candidates to serve on the Board of Directors for this agency. Please help spread this word and direct any interested parties to contact Kathryn Arbour (karbour@aiavenues.org) for more information about the process.
- The Colorado Department of Health Care Policy & Financing (HCPF) has launched a dedicated website in response to the state and federal budget pressures: [Medicaid Sustainability and Colorado's LTSS System | Department of Health Care Policy and Financing](#)

Quality Oversight

- A&I Avenues continues to participate in a collaborative conversation across all 15 CMAs and with HCPF personnel to address the impact of continued system changes and pressures on our workforce. This group also hopes to deepen conversations about how the state defines and supports quality in case management delivery.
- HCPF continues to monitor our timeline compliance, particularly for intake. We are within the expected guidelines.
- CDEC is working with EI Brokers to refine budgets and contracts for FY 26; the CDEC is working closely with the Joint Budget Committee of the Colorado State Legislature to address a myriad of operational and funding concerns that could impact future contracts with EI Brokers. We are staying close to these conversations.
- Boulder County and Broomfield County continue regular conversations regarding our service delivery and budget projections

Q&A:

- Rebecca asked Kathryn if there were any emergency funding being put out during the budget cutbacks and what areas had the most severe needs.
- Kathryn responded that early childhood services are under significant pressure due to budget shifts, although the full impact is not yet clear. She mentioned that housing remains a critical issue, with ongoing pressures due to changes in the voucher process.
- Kathryn emphasized that housing continues to be a major concern, with pressures building due to changes in the voucher process. She noted that housing is always a significant issue for their organization and the community.

IDD Mill Levy Updates

- RFA Application Requirements: Rebecca detailed the application requirements for the RFA process, including the need for applicants to be 501(c)(3) nonprofit organizations, government entities, or educational institutions. She also mentioned the importance of having a record of sound business integrity and compliance with county contracts.
- Evaluation Criteria: Rebecca explained the evaluation criteria used to assess RFA applications, which include alignment with county priorities,

organizational capacity, impact on the community, adaptability, and collaboration. Financial stability and the ability to provide required data are also evaluated.

- Cultural and Linguistic Responsiveness: Rebecca emphasized the importance of cultural and linguistic responsiveness in service delivery. She mentioned that the county centers racial equity in all RFAs and looks for programs that address barriers faced by people of color and aging caregivers in accessing services.
- Funding and Budget: Rebecca mentioned that the county is awarding up to \$5 million for the RFA, with a two-year term funding agreement ending on December 31, 2027. She explained the use of funds, which includes filling funding gaps for program services not covered by Medicaid, Medicare, or other insurance.

BCHA Willoughby Corners Follow Up Discussion & Recommendation

The council discussed the \$2 million funding request for Willoughby Corners. They reviewed the allocation for construction and design, the number of units for IDD, and the need for oversight and accountability.

- Funding Allocation: \$2 million funding request for Willoughby Corners, with the entire amount allocated for construction and design costs. This includes building expenses, labor, materials, design, permitting, and financing.
- Unit Allocation: Council agreed to allocate 16 to 32 units, ensuring that up to 25% of the units can be used by individuals with vouchers.
- Oversight and Accountability: Council highlighted the need for oversight and accountability in the allocation of units and discussed the importance of having a tenant preference policy and reporting qualified tenants to an oversight committee.
- Design and Inclusivity: Council discussed the importance of ensuring that the design of the units and common areas meets the needs of neurodiverse residents. They highlighted the need for engaging experts and conducting listening sessions with individuals who have lived experience.

The council voted and approved the recommendation to allocate \$2 million to Willoughby Corners – Phase 2 with specific conditions, including:

- Designating 16–32 units for residents with IDD, autism, and BI, as outlined in BCHA’s proposal.
- Prioritizing Boulder County residents for unit selection.
- Ensuring universal/neurodiverse design in all common areas.
- Ensuring all designated units include universal/neurodiverse design features.
- Ensuring a majority of designated units are 2-bedroom/2-bathroom.
- Ensuring no more than 25% of total units in the development are designated for the IDD, autism, and BI population to maintain eligibility for housing vouchers.
- Involving individuals with IDD, autism, and BI in the design of supportive services to be provided by the Supportive Services Unit.
- Providing regular updates and respond to IDDAC inquiries regarding the progress of Phase 2 and the use of previously committed funding, including the \$10,000 for the IDD Design Consultant.

November’s Agenda

Council plans to discuss the mental health behavioral health solicitation, activity calendar, public engagement, and host homes in the next meeting. They also agreed to review the Imagine housing program.

Next Virtual IDDAC Meeting

November 17th, 2025
5:00 PM to 7:30 PM

Meeting Adjourned at 7:21 p.m.
Minutes Submitted by Ally Joel

Mill Levy Advisory Council, BCHS

Monday, November 17th 2025

5:00 p.m. to 7:30 p.m.

Meeting Minutes

ADA statement

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Advisory Council Members in Attendance: Lisa Slager, Heidi Que, Kari Rowe, Daren Kraft, Asher Johnson, Julie Marshall, Jayne Dixon Weber.

Absent: Teresa Greene, Jolie Bernstein, Asher Johnson, and Robert Enderson

Community Members in Attendance: Jodi Walters, Sarah Smith, Dakota Turner, Ailsa Wonnacott, Kimberly DeGraff, and Desiree Kameka Galloway

Boulder County Employees in Attendance: Rebecca Seiden, IDD Mill Levy Program Coordinator & Ally Joel, IDD Mill Levy Program Specialist

5:05 pm - Call to Order: Daren Kraft, Chair.

Approval of Minutes: October minutes approved by council.

A&I Avenues Update to Boulder County IDD Council

Total staffing target: 170

Staffing as of November 17, 2025: 164

Job Openings

- Children's Case Manager x 3 (1 resignation, 1 over-hires)
- Service Coordinator (1 resignation)
- Case Manager (1 resignation)
- Early Intervention Therapist (new position)

Mill Levy Supported Positions:

- All Mill Levy-funded positions are staffed at this time

Success Stories:

Client A successfully divorced her now ex-husband, leaving an unhealthy relationship. She then went through a period of being unhoused in early 2025 and lost her Section 8 voucher in the process. In July, 2025, Amanda Seyle Jones, one of the Case Specialist II's that Boulder County funds, supported her in finding housing through the CAT voucher program. She is figuring out next steps, identifying and advocating for her own needs including finding a mentor and mental health supports. She has health struggles that have made it difficult to find stable work, but she is trying to go back to school and was accepted to Front Range Community College.

Other items:

- Community Advisory Committee (CAC), required by HCPF CMA contract, met this month. We are still searching for two client representatives and/or family members of those receiving services to volunteer on this committee. You can read more on our website at [Community Advisory Committee | A&I Avenues](#). Please help us spread the word.
- A&I Avenues Board of Directors: We are also seeking prospective candidates to serve on the Board of Directors for this agency. Please help spread this word and direct any interested parties to contact Kathryn Arbour (karbour@aiavenues.org) for more information about the process.
- The Colorado Department of Health Care Policy & Financing (HCPF) has launched a dedicated website in response to the state and federal budget pressures: [Medicaid Sustainability and Colorado's LTSS System | Department of Health Care Policy and Financing](#)
 - Our Case Management team is aware of the upcoming changes.
 - We are looking into a training on having difficult conversations as we know our Case Managers will be the messengers to share the service cuts/caps/changes.

Do you want to make a difference in the lives of clients of A&I Avenues?

Are you a Member, community partner, parent/guardian, or family member? Volunteer for the committees below!

Human Rights Committee

- *Review use of psychotropic medications by clients
- *Review allegations of abuse/neglect/mistreatment
- *Review Rights' Modifications
- *Meets 2nd Wednesday each month with homework between meetings

Family Support Council

- *Provide recommendations for the Family Support Services Program
- *Develop policies for the Family Support Services Program
- *Meets quarterly for 90 minutes with minimal homework

Community Advisory Committee

- *Review client complaints and resolutions
- *Prepare information for the Board of Directors
- *Meets quarterly for 1.5 hours with minimal homework

Contacts

CAC: Kathryn Arbour - karbour@aiavenues.org
FSSP: Claire Gritton - cgritton@aiavenues.org
HRC: Erika Schroeder - eschroeder@aiavenues.org

Learn more about A&I Avenues: www.aiavenues.org

IDD Mill Levy Updates

Via Mobility is now Fare Free

We are happy to share that, starting September 1, 2025, Via Mobility Services is fare-free. This means riders no longer pay fares for trips within a town or between towns.

24/7 Mental Health Crisis, Urgent Psychiatric Care, and Detox Services Available in Louisville

Clinica Family Health and Wellness has opened a new walk-in crisis and addiction services center in Louisville, and they are open day and night to provide help when it's needed. Anyone can get caring, private, in-person support – regardless of age,

diagnosis, insurance, or residency. Get connected to additional services, information, and resources.

Please save and print the bilingual flyer as needed. Please note, medical and dental services are not offered at this location.

- 1107 W Century Drive, Louisville
- Crisis: 303-447-1665
- Withdrawal: 303-441-1281

The flyer is primarily yellow with purple and blue accents. At the top left, a blue van icon with 'We moved' is next to a circular photo of the new facility. The Clinica logo is at the top right. The main title is in large blue and green font. Below it, a purple banner contains the text 'Visit our new facility in Louisville for 24/7 help.' Two circular photos show people interacting. The text describes the crisis services available. A section titled 'New Location' provides the address and contact info. 'Closest bus stop' information is also included. A QR code and a Google map link are at the bottom right. Icons at the bottom left indicate crisis and medical services.

We moved

Clinica
family health & wellness

Walk-in Mental Health Crisis, Urgent Psychiatric Care, & Detox Services

Visit our new facility in Louisville for 24/7 help.

A crisis can happen to anyone, at anytime. Maybe you are dealing with high anxiety, depression, drug or alcohol use, thoughts of suicide, or something else. **Our new Walk-In Crisis & Addiction Services Center in Louisville is always open - day and night - to provide help whenever you need it.**

Anyone can get caring, private, in-person support – regardless of age, diagnosis, insurance, or where you live. Get connected to additional services, information, and resources. You do NOT need to be a Colorado resident or a current client to get crisis support.

New Location
1107 W Century Drive
Louisville, CO
Crisis: (303) 447-1665
Withdrawal: (303) 441-1281

Closest bus stop
McCaslin Blvd & Century Cir
(228A, 228F. Info: rtd-denver.com)

Call or text **988** for the Suicide and Crisis Lifeline. Call **911** for medical emergencies.

Medical and dental services are NOT offered at this location.

Google map: [scnv.io/crisis](https://www.google.com/maps/place/1107+W+Century+Drive,+Louisville,+CO+80202/@39.768,-105.085,15z)

SNAP benefits have resumed as of 11/13.

“Based on new work requirements for SNAP that began Nov. 1, some community members in Boulder County are predicted to lose food assistance benefits over the next year.

If you can help, please consider donating unrestricted funds, time, or non-perishable food items to local food banks or nonprofits. Local nonprofits serving our communities are under increasing pressure and every bit helps. You can explore and support local organizations at [Coloradogives.org](https://coloradogives.org).”

Supporting Food Access

Boulder County will award \$1.15 million to four community food providers to help ensure food access gaps can be filled during the federal government shutdown.

- \$850,000 will go to Community Food Share, which supports food distribution across the region
- \$100,000 each will go to Sister Carmen Community Center (Lafayette), OUR Center (Longmont), and EFAA (Boulder) to help food banks maintain enough stock to serve people in need

This funding helps ensure that no one in Boulder County goes without access to nutritious food during this uncertain time.

Gentle Nutcracker

Longmont Symphony Orchestra and Boulder Ballet are putting on The Gentle Nutcracker (sensory-friendly performance) this year at the Vance Brand Civic Auditorium on Dec. 6th at 1pm.

BCHA Willoughby Corners IDD Design Consultant

- Two-story building with 32 dedicated units designed for accessibility and inclusion.
- The project team includes autistic designers and an occupational therapist. A community engagement session is scheduled to gather feedback on design and amenities.
- Proposed outdoor features such as swings, hammock areas, outdoor games, fire pits, amphitheater, fitness areas, water features, bike storage, and gardens.
- Council members suggested adult-oriented swings, private gardening plots, butterfly habitats, shaded arbors, and raised beds for accessibility.
- Maintenance and security concerns were raised, and ideas for safe, private hammock spaces and community art areas were discussed.
- Discussed options for indoor amenities including gaming rooms, computer labs, quiet rooms, sensory rooms, movie rooms, teaching apartments, community kitchens, gyms, and creative arts spaces.

- Council members highlighted the need for multi-purpose, flexible spaces, combining library and computer areas, and providing private meeting rooms for residents and service providers.
- Discussion on unit features such as flooring (hard vs. carpet), tub vs. shower options, security systems, and kitchen safety. Members recommended universal design, walk-in showers with seats, accessible stove controls, induction cooktops, and options for personalizing bathrooms. Security features like key fobs and video entry systems were supported.
- Discussed potential extras including resident assistants, community navigators, organized activities, budgeting support, emergency buttons, life skills classes, and access to neuro-affirming therapists.
- Members highlighted the importance of partnerships, funding strategies, and flexibility in service provision, with suggestions for shared rental leases and robust caregiver support systems.



HOUSING FEEDBACK NEEDED

Help shape Neuro-Inclusive Affordable Housing in Lafayette

WHAT? Join a tour of the future location and tell us what people with I/DD want and need in their home and future neighborhood.

WHEN?
Thursday, November 20th from 10:45-12:15pm

WHERE?
Willoughby Corner Community Center
933 Canterbury Dr. Lafayette CO 80026

Accessible by DASH and Bus 225.
Stop is Canterbury Dr - Willoughby Blv.
Located in front of the Willoughby Corner Community Center

More Info: Desiree@NeuroInclusiveHousingSolutions.com

Imagine! Housing Program

- Imagine!'s Housing Program focuses on supporting housing stability, skill building, and service navigation.
- They have hired Dakota Turner as Housing Navigator and is collaborating with Boulder Housing Partners to hire a resident services coordinator.

- Partnerships with local agencies such as Longmont Housing Authority, Boulder County Housing Authority, and A&I are being formalized to provide wraparound support.
- The service pathway includes intake, documentation support, skill assessments using the AFLS tool, and development of individualized housing stability plans.
- They expect to serve 80 people, with additional referrals to community resources for those not eligible.
- Council raised concerns about the decline of group homes and host home options for adults with severe needs. Sarah and Jodi acknowledged the need for diverse housing models, including companion homes and creative solutions, and described efforts to re-establish a Family Council to inform future planning.
- Imagine! outlined expected outcomes, including increased skill building and confidence among participants, and described plans for ongoing evaluation, marketing, and expansion into Longmont Housing Authority properties. The program is positioned as a pilot with potential for future growth.



Boulder County Housing Grant

Monday, November 17, 2025

1



Imagine! Housing Team



Sarah Kathleen Smith, MSW
Chief Services Officer



Jenna Crowe
Assistant Director of
Community Partnerships



Dakota Turner, WIP-C
Housing Navigator

Our Path to Success

1. Purpose
2. Programming
3. Partnerships
4. Progress





Purpose

- Address urgent housing needs for people with IDD, brain injury, and autism in boulder county.
- Create a continuum of housing support from homelessness prevention to independent living.
- Expand housing navigation and skillbuilding services to close gaps identified in the Boulder County needs assessment.



Learning New Skills

AFLS, job
development and
coaching, confidence



Technology

innovative tech to help keep me
safe and support me daily



Cultural Support

Bilingual supports
& help accessing
my community



Home Life

Accessible & in a
location works for
me



Daily Life

Developing routines and
schedules, cleaning and
organizing



Social Supports

Help making friends and
community connections &
time in the community



Health & Wellness

Diagnostics, eligibility
and access, behavioral
and mental health
supports, medication
management.



Imagine! Your Best Life!



Programming Pathway

Service Navigation

- Assess overall client need.
- Support with documentation and applications.
- Benefit eligibility
- Contingency planning with family caregivers.

Skill Building

- AFLS: Assessment of Functional Living Skills
- Three assessments: 30 days, midpoint, year end.
- Guide the focus of skill building.

Stability

- Housing Stability Plans
 - Identify housing goals.
 - Build steps to success.
- Secure housing (shelter/ structure)
- Companion home renovation.

By the Numbers & Outcomes

2

Full time
employees.

80

Individuals
served
through the
grant.

27

Ineligible and
diverted from
the grant.

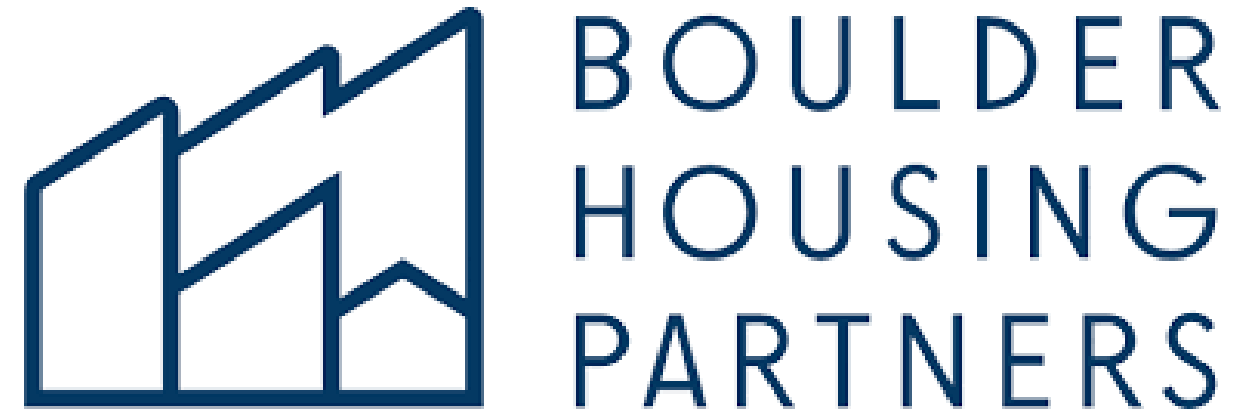
80%

Anticipated
increase in
skill building.

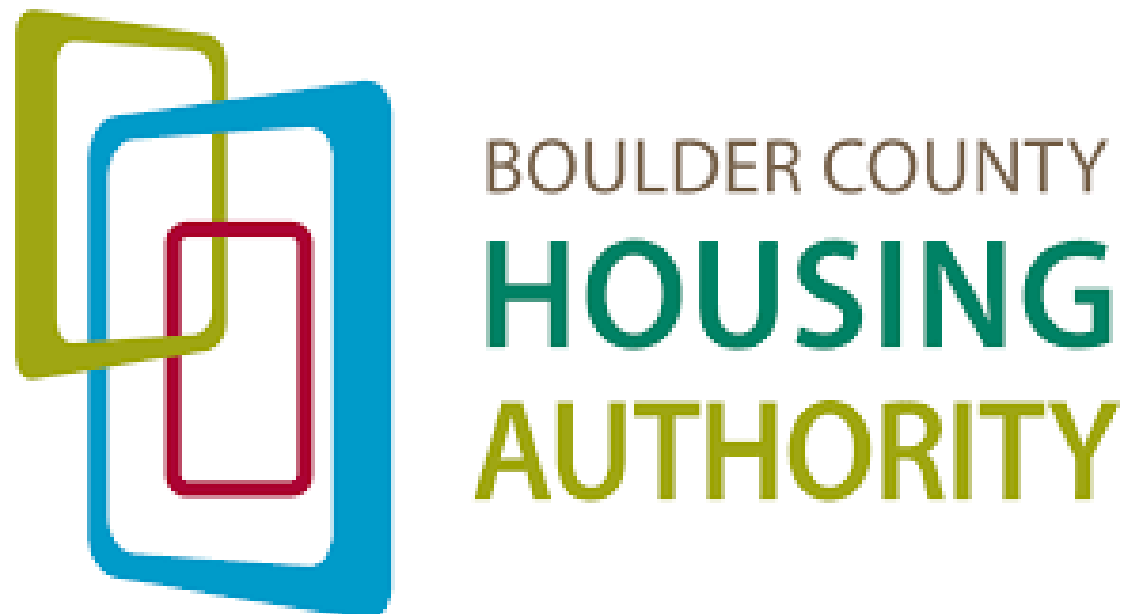
90%

Anticipated
increase in
confidence.*

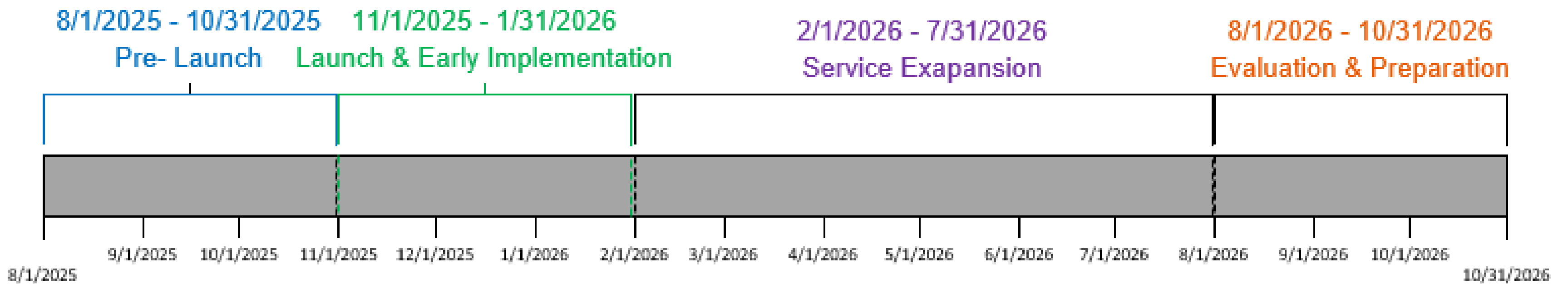




**The Longmont
Housing Authority**



Community Partnerships



Pre-Launch Tasks:

- Draft, finalize, and post job descriptions
- Interview and hire Imagine! and BHP staff
- Draft and sign MOUs with community partner sites: BHP, All Roads, BCHA, LHA, HOPE, Focus ReEntry
- Plan and prepare orientation and onboarding of staff, to include training
- Scope internal workflows for data tracking and reporting
- Draft and finalize policies, procedures, and protocols necessary
- Finalize intake, eligibility, and other documents

Launch & Early Implementation Tasks:

- Onboard and train staff
- Community engagement, outreach, and trust building
- Begin intake, eligibility, and referrals.
- Start AFLS assessments
- Develop and refine tracking tools, including referral and skill building forms

Expansion & Skill Building:

- Increase intakes
- Draft structured skill-building plans
- Begin mid-point evaluations
- Prepare reporting documents
- Refine SOPs

Evaluation & Preparation:

- Evaluation housing stability and access outcomes
- Prepare year-end report for Boulder County
- Plan for year two expansion

Program Launch

Recruitment

- Imagine! Housing Navigator hired.
- BHP interviewing for the Resident Service Coordinator.

Formalizing Partnerships

- MOU in place with Boulder Housing Partners
- Initial and secondary meeting with community partners.
- Official grant kickoff meeting on Tuesday, December 2nd.

Intake Launch and Outreach

- Developing marketing materials for professionals and community partners.
- Building intake and referral processes.
- Training on best practices.



Imagine!

Thank you!

Imagine!

Do you have more questions or
need help? Contact us!

(303) 665 - 7789

dturner@imaginecolorado.org

imaginecolorado.org

Mental & Behavioral Health Solicitation Planning

Council discussed developing a \$500,000 solicitation for mental and behavioral health services, touching on program needs, crisis models, cross-system collaboration, and service delivery strategies for people with IDD, autism, and brain injury.

- This solicitation aims to fund a crisis-oriented, wraparound mental health program modeled after the START program, focusing on early intervention, cross-system collaboration, and prevention of hospitalization for people with IDD, autism, and brain injury.
- Council members suggested a mobile treatment unit, support within the justice system, cross-system planning, consistent intake and assessment processes, and partnerships with schools, medical providers, and co-responders.
- Council members highlighted the limitations of available funding, the need for efficient use of resources, and the importance of leveraging insurance reimbursements to sustain the program beyond initial county support.
- There was some expressed need for functional behavior assessments in schools to prevent punitive measures against students with IDD, and for education and support for parents and educators on effective behavior planning.
- Next steps: Council members to review START program materials and the county needs assessment before the next meeting, with the goal of identifying actionable items and priorities for inclusion in the solicitation.

2026 Calendar

- **In-Person Meeting Frequency:** Council members expressed interest in meeting in person more frequently, especially outside of winter months, with hybrid options available for flexibility.
- **Location:** Rebecca noted that the Lafayette hub is currently the most convenient location due to parking and accessibility, with plans to consider Boulder locations once new facilities are available.

Proposed 2026 meeting dates:

- January 12th - virtual
- February 9th - virtual
- March 9th - hybrid
- April 13th - virtual
- May 18th - hybrid

- June 8th - virtual
- July 13th- hybrid
- August 10th - virtual
- September 14th - hybrid
- October 12th - virtual
- November 9th - hybrid
- December 14th - virtual

Next Virtual IDDAC Meeting

January 12th, 2026

5:00 PM to 7:30 PM

Meeting Adjourned at 7:32 p.m.

Minutes Submitted by Ally Joel

Mill Levy Advisory Council, BCHS

Monday, December 8, 2025

5:00 p.m. to 7:30 p.m.

Meeting Minutes

ADA statement

This document contains materials from external parties that may not be fully accessible. To request an Americans with Disability Act (ADA) accommodation, please email ada@bouldercounty.gov, or call 303-441-1386. [View the county's accessibility statement.](#)

Advisory Council Members in Attendance: Lisa Slager, Heidi Que, Daren Kraft, Asher Johnson, and Jayne Dixon Weber.

Absent: Kari Rowe, Jolie Bernstein, Julie Marshall and Robert Enderson

Community Members in Attendance: Jodi Walters, Ailsa Wonnacott, Kimberly DeGraff.

Boulder County Employees in Attendance: Rebecca Seiden, IDD Mill Levy Program Coordinator & Ally Joel, IDD Mill Levy Program Specialist

5:05 pm - Call to Order: Daren Kraft, Chair.

Approval of Minutes: November minutes approved by council.

A&I Avenues Update to Boulder County IDD Council

Staffing

- Total staffing target: 170
- Staffing as of December 1, 2025: 167

Job Openings

- Children's Case Manager x 2 (2 over-hires for caseload growth)
- Service Coordinator x2
- Early Intervention Therapist x1 (new position)

Mill Levy Supported Positions:

- All Mill Levy-funded positions are staffed at this time

Successes in November:

- Leadership has engaged in multiple venues with both CDEC and HCPF officials regarding Colorado's budget constraints and planned cost-saving measures. A&I Avenues case managers and care coordinators have worked to communicate the impacts to clients who may see a reduction in services.
- In our 2nd year of operations as a combined case management entity, we continue to build our common culture and, in particular, are developing a robust system for performance feedback and quality improvement.

Other items:

- Community Advisory Committee (CAC), required by HCPF CMA contract, met on 11/6 for its quarterly review of complaints, concerns and successes. We are still searching for two client representatives and/or family members of those receiving services to volunteer on this committee. You can read more on our website at [Community Advisory Committee | A&I Avenues](#). Please help us spread the word.
- A&I Avenues Board of Directors: We are also seeking prospective candidates to serve on the Board of Directors for this agency. Please help spread this word and direct any interested parties to contact Kathryn Arbour (karbour@aiavenues.org) for more information about the process.
- The Colorado Department of Health Care Policy & Financing (HCPF) has launched a dedicated website in response to the state and federal budget pressures: [Medicaid Sustainability and Colorado's LTSS System | Department of Health Care Policy and Financing](#)
 - Our Case Management team is aware of the upcoming changes.

IDD Mill Levy Updates

- 2026 Programs and Services RFA funding agreements are underway.
- Desiree Kameka Galloway held an in-person design feedback forum at Willoughby Corners with BCHA.
- BCHS attended Imagine!'s joint partner meeting with Longmont Housing Authority, All Roads and Boulder Housing Partners, Boulder County Housing Authority to kick off their housing navigation program.

“As I Am” Project

Sensory friendly community

Welcome to Maynooth
Autism Friendly Town



MAYNOOTH AUTISM FRIENDLY TOWN



IRELAND'S AUTISM CHARITY





**CLONAKILTY
PARKHOTEL**

SENSORY MAP

High Intensity

Low Intensity

Quiet

Exit

*Exits marked are for the purpose of the sensory map only. In the event of emergency follow the emergency exit signs in the hotel



Smell



Loud



Queuing

- The establishment of a voluntary Autism Friendly Town Committee.**
- The development and implementation of a 3-year town plan.**
- Engaging a minimum of 2 employers in supporting the initiative and providing work experience or employment opportunities for the autistic community.**
- Engaging and training a quota of “Autism Friendly Champions” across a variety of sectors within the community.**
- Participating businesses and organisations must be assistance dog-friendly.**

1. Calendar vendor

- a. **Create and manage a web-hosted calendar** available to the public with events for I/DD, ASD and BI. *this contract should include a requirement to transfer calendar to next vendor if/when vendors change

2. Community “Ambassador”

- a. **Increase awareness of prevalence and needs** of people with I/DD, BI and ASD to increase support, accessibility and engagement by fostering relationships with community organizations
- b. **Create new partnerships** in the community with accountability and training to generate more sensory safe spaces and have staff be more patient and understanding of BI, ASD, and I/DD
- c. **Increase awareness/visibility** of the needs and humanity of those with ASD, I/DD and BI to other members of the public who may use the same spaces, through placards, a posted certification for partnered business and public buildings, or by some other means
- d. **Increase the number and diversity of events** that are accessible to folks with I/DD, BI and ASD. These could be sensory friendly events or times/days, other ways to access events like CWF or sensory friendly sections and accommodations at sporting events, and many others. We want to see a range of events to cater to those who enjoy watching sports, intellectual stimulation, recreational activities, group based and individually accessible opportunities, and all the other things not yet explicitly mentioned.

Strategies to Strengthen Host Homes Discussion

Host Home Models & Dynamics

- Companion Home Model: Individual owns the home or determines how the environment is run (greater autonomy).
- Host Home Model: Individual with IDD is welcomed into someone else's home for care (adult foster care); less agency in decision-making compared to other models.
- PCA Model: 1–3 individuals needing 24/7 supports; can live independently but still require continuous assistance.

Information Needs & Legislative Updates

- Council expressed need for more information on the Host Home (HH) landscape.
- Jodi mentioned upcoming HH legislation.
- Proposed bill will create a public database of HHs:
- Will not include addresses (HIPAA compliance).
- Will provide a complete inventory once passed.

Data & Demand Analysis

- Need to know:
 - Number of host homes in Boulder County and surrounding counties.
 - Demand vs. inventory before dedicating significant time to this issue.
 - If DD waiver access is not reopened and accelerated:
 - How many individuals will be eligible for HH?

Provider Engagement & Barriers

- Suggestion: Talk to a small panel of providers to understand:
- Barriers to adoption.
- How to improve understanding of HH benefits.
- Companion homes are family-owned but still require DD or private pay for support.
- If DD funding isn't improved, payment issues for providers will persist.

Respite & Support Networks

- Strengthen the respite network for Host Home providers.
- Respite should be the responsibility of provider agencies to ensure HH providers have support when needed.
- Resources:

- Colorado Caregiver Resources
- Colorado Respite Coalition

Recruitment & Best Practices

- Best Host Home Providers (HHPs) come from:
 - Referrals from other HHPs.
 - Former staff members.
- Agency has a large staff base, aiding recruitment compared to other providers.

Mental & Behavioral Health Solicitation Planning

Priority Areas:

- Cross systems collaboration linkage agreement
- Tertiary care approach to mental health and IDD
- Service navigation
- Strength based approaches and strength activation methods
- Cross systems crisis prevention and intervention planning
- Response to urgent needs and follow up
- A highly skilled well trained work force
- Integrated/multimodal CLC approaches to assessment and treatment
- Evidence informed practices
- Community capacity building

Support for the Corresponder Team

- Explore the possibility of providing additional support to the correspondent team.
- Determine the number and type of interactions the team is currently handling.
- Assess what training needs the team has.
- Evaluate whether the population is using the team's services and if they are helpful.

Emergency Transport Protocol

- If a person needs to be transported to the ED for an emergency:
 - Notify their designated team member(s).
 - Ideally, ensure a representative from the central agency accompanies the person.

Community Training

- Provide training to the community identified as a good idea.
- Disability Awareness Terminology

Alternative names for IDD or disability awareness include:

- Sunflower
- Blue or Yellow Envelope

2026 Priorities

- Funding:
 - Budget discussion in the Spring
- Housing:
 - Host homes
 - Companion models - possibly at WC Phase 2 as it includes this setup
 - Talking to PASAs as to what are the barriers to increasing inventory
 - Surveys
- Mental Health:
 - Oliver behavioral mental health survey

Meeting adjourned at 7:29pm