

ROUTING COVER SHEET

Document Details	
Document Type	Revenue Contract
New or Continuing?	Continuing
Parties	
County Contact Information	
Boulder County Legal Entity	Boulder County
Department	Housing and Human Services
Division/Program	Community Support
Mailing Address	P.O. Box 471, Boulder, CO 80306
Contact Name and Title	Susan Grutzmacher, Community Support Division Director
Contact Email	sgrutzmacher@bouldercounty.org
Other Party Contact Information	
Name	CO Department of Health Care Policy & Financing
Mailing Address	1570 Grant Street Denver, CO 80203
Contact Name and Title	Bre Benbenek, County Relations Coordinator
Contact Email	Breanne.benbenek@state.co.us
Term	
Start Date	7/1/20
Expiration Date	6/30/23
Brief Description of Work/Services Provided	
County Medicaid Incentive Program	
Revenue Contract/Lease Details	
Amount	\$312,486.71
Fixed Price or Not-to-Exceed?	Not-to-Exceed
Grant Details	
Award #	2021CMIP007A2 (Original Contract #2021CMIP007)
Project/Program Name	County Medicaid Incentive Program
Grant Funding	
Capital or Operating?	Operating
Amount: State Funds	\$312,486.71
Account String	
Notes	
<i>Additional information not included above</i>	
For review purposes only; contract amendment will be sent for signature to BOCC via DocuSign directly by the State.	

NON-PROCUREMENT DOCUMENTS ONLY

All approvals below will be obtained by HHS Finance.

Paralegal [ONLY FOR: Revenue Contracts]

County Attorney [ONLY FOR: Revenue Contracts, Leases, Grant Documents]

n/a

Risk Management [ONLY FOR: Leases]

Division Director

Finance

EO/DH

BOCC Clerk
(if applicable) _____