



COLORADO

Department of Corrections

MOSES "ANDRE" STANCIL
EXECUTIVE DIRECTOR

Lifetime Supervision of Sex Offenders Annual Report

A REPORT SUBMITTED TO THE
JUDICIARY COMMITTEES OF THE
SENATE AND HOUSE OF REPRESENTATIVES
DUE NOVEMBER 1, 2025, Pursuant to C.R.S. 18-1.3-1011

Prepared By:

Office of Planning and Analysis
Colorado Department of Corrections
1250 Academy Park Loop
Colorado Springs, CO 80910

Division of Probation Services
Colorado State Judicial Department
1300 Broadway, Suite 1100
Denver, CO 80203

Division of Criminal Justice
Colorado Department of Public Safety
700 Kipling Street, Suite 3000
Denver, CO 80215

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In accordance with Section 24-34-802 (1)(c), C.R.S., the Colorado General Assembly is in the process of remediating this document to meet accessibility requirements. In the meantime, if you have a disability and require reasonable accommodation to access this content, please contact our ADA Coordinator at doc_aic@state.co.us.

Introduction

The Colorado Department of Corrections (CDOC), Colorado Department of Public Safety (CDPS), and the State Judicial Department collaboratively write this Annual Report on the Lifetime Supervision of Sex Offenders. The report is submitted pursuant to 18-1.3-1011 C.R.S.:

On or before November 1, 2000, and on or before each November 1 thereafter, the Department of Corrections, the Department of Public Safety, and the Judicial Department shall submit a report to the judiciary committees of the House of Representatives and the Senate, or any successor committees, and the Joint Budget Committee of the General Assembly specifying, at a minimum:

- (a) The impact on the prison population, the parole population, and the probation population in the state due to the extended length of incarceration and supervision provided for in sections [18-1.3-1004](#), [18-1.3-1006](#), and 18-1.3-1008;
- (b) The number of inmates placed in the intensive supervision parole program and the intensive supervision probation program, and the length of supervision of inmates in said programs;
- (c) The number of sex offenders sentenced pursuant to this part 10 who received parole release hearings and the number released on parole during the preceding twelve months, if any;
- (d) The number of sex offenders sentenced pursuant to this part 10 who received parole or probation discharge hearings, and the number discharged from parole or probation during the preceding twelve months, if any;
- (e) The number of sex offenders sentenced pursuant to this part 10 who received parole or probation revocation hearings, and the number whose parole or probation was revoked during the preceding twelve months, if any;
- (f) A summary of the evaluation instruments developed by the management board, and use of the evaluation instruments in evaluating sex offenders pursuant to this part 10;
- (g) The availability of sex offender treatment providers throughout the state, including the location of the treatment providers, the services provided, the amount paid by offenders, and by the state for the services provided, and the manner of regulation and review of the services provided by sex offender treatment providers;

- (h) The average number of sex offenders sentenced pursuant to this part 10 who participated in Track I, II, or III of the department's sex offender treatment and monitoring program during each month of the preceding twelve months;
- (i) The number of sex offenders sentenced pursuant to this part 10 who were denied admission to treatment in Track I, II or III of the department's sex offender treatment and monitoring program for reasons other than the length of remaining sentence during each month of the preceding twelve months;
- (j) The number of sex offenders sentenced pursuant to this part 10 who were terminated from Track I, II, or III of the department's sex offender treatment and monitoring program during the preceding twelve months, and the reason for termination in each case;
- (k) The average length of participation by sex offenders sentenced pursuant to this part 10 in Track I, II, or III of the department's sex offender treatment and monitoring program during the preceding twelve months;
- (l) The number of sex offenders sentenced pursuant to this part 10 who were denied readmission to Track I, II, or III of the department's sex offender treatment and monitoring program after having previously been terminated from the program during the preceding twelve months;
- (m) The number of sex offenders sentenced pursuant to this part 10 who were recommended by the department's sex offender treatment and monitoring program to the parole board for release on parole during the preceding twelve months, and whether the recommendation was followed in each case; and
- (n) The number of sex offenders sentenced pursuant to this part 10 who were recommended by the department's sex offender treatment and monitoring program for placement in community corrections during the preceding twelve months, and whether the recommendation was followed in each case.

This report is intended to provide the Colorado General Assembly with information on the 25th year of implementation of the Lifetime Supervision Act in Colorado. The report is organized into three sections, one for each of the required reporting departments. Each department individually addresses the information for which it is responsible in implementing Lifetime Supervision and associated programs.

Colorado Department of Corrections

Impact on Prison and Parole Populations

The legislation enacting the Lifetime Supervision Act of Sex Offenders (CRS 18-1.3-1004, CRS 18-1.3-1006, and CRS 18-1.3-1008) affected persons convicted of sex offenses committed on or after November 1, 1998. The first prison admission for the qualifying Lifetime Supervision sexual offenses occurred in late 1999.

Admissions and Discharges for Fiscal Year 2025

During fiscal year (FY) 2025 (July 1, 2024, through June 30, 2025), 118 new court commitments were admitted to the CDOC under the Lifetime Supervision provisions for sex offenses. Inmates may be admitted to prison with a conviction for a determinate offense as well as a concurrent or consecutive Lifetime Supervision sentence to probation for the qualifying sex offense, but these inmates are not included among those counted as Lifetime Supervision Sex (LSX) Offenders. During FY 2025, 122 LSX inmates were released from the Colorado Department of Corrections: 101 were released to discretionary parole; 13 died (all while in prison); one inmate was re-paroled; six inmates had their sentence discharged; and one was released for other reasons.

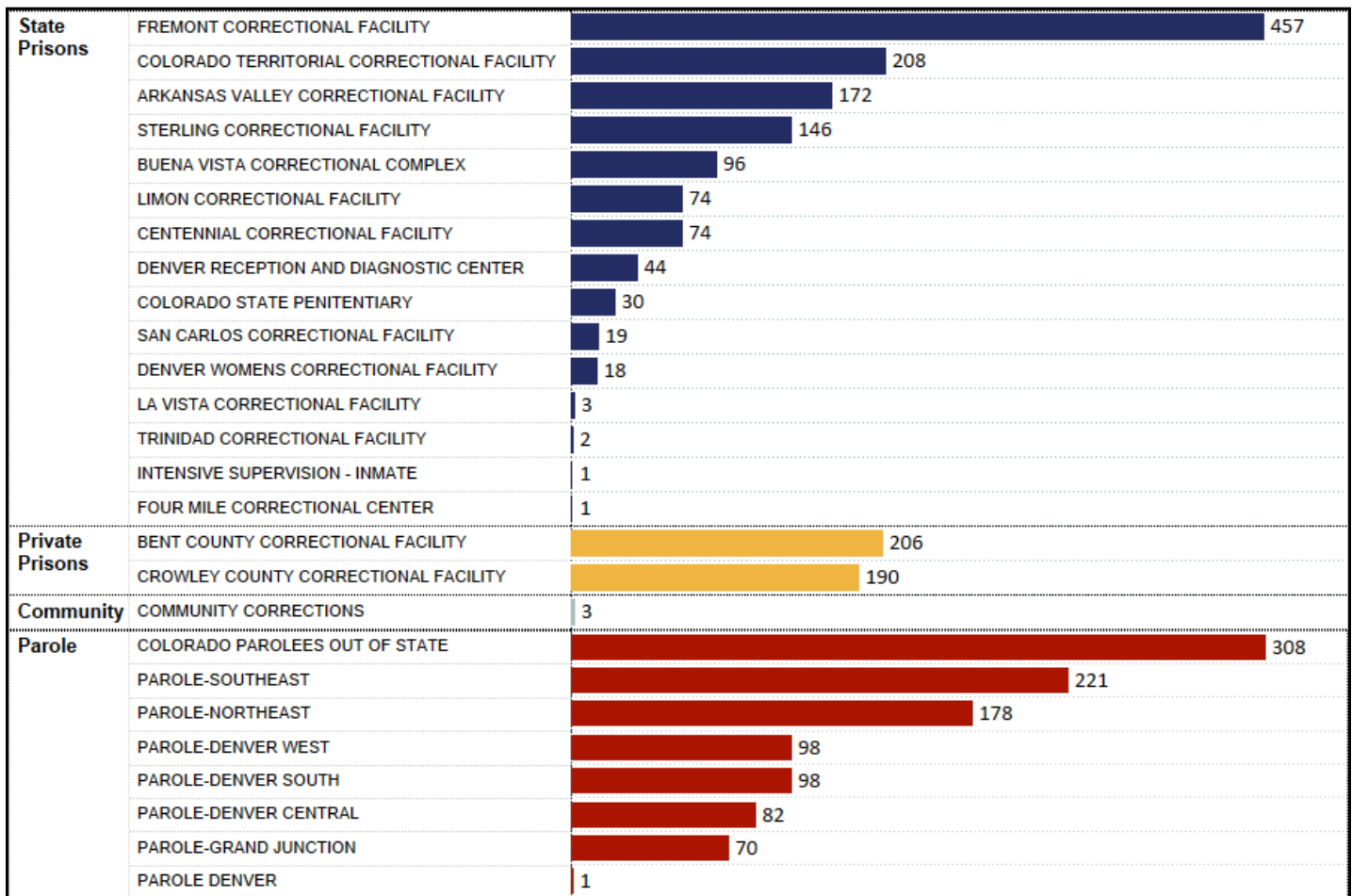
Inmates who receive prison sentences may have their sentences amended from a determinate sentence to a lifetime sentence or vice versa. A history of amended mittimus is not recorded electronically, so it is impossible to identify all sex offenders who have had their sentences amended while serving their sentence.

Current Population

On June 30, 2025, 2,800 inmates were under CDOC supervision for sexual offense convictions sentenced under the Lifetime Supervision provisions: 1,345 were in state prisons; 396 were in private prisons; 1,056 were on parole; and three were in other locations, including community corrections, interstate corrections compact transfer, jail backlog, and fugitive status.

Figure 1 further breaks down these placements. Of the 2,800 LSX inmates under CDOC supervision on June 30, 2025, 98.9% were male and the median age was 51.0 years. Of these inmates, 54.5% percent were Caucasian, 28.1% were Hispanic, 13.0% were African American, and 4.4% were other ethnicities.

Figure 1. Location of Lifetime Supervision Sex Offenders as of June 30, 2025

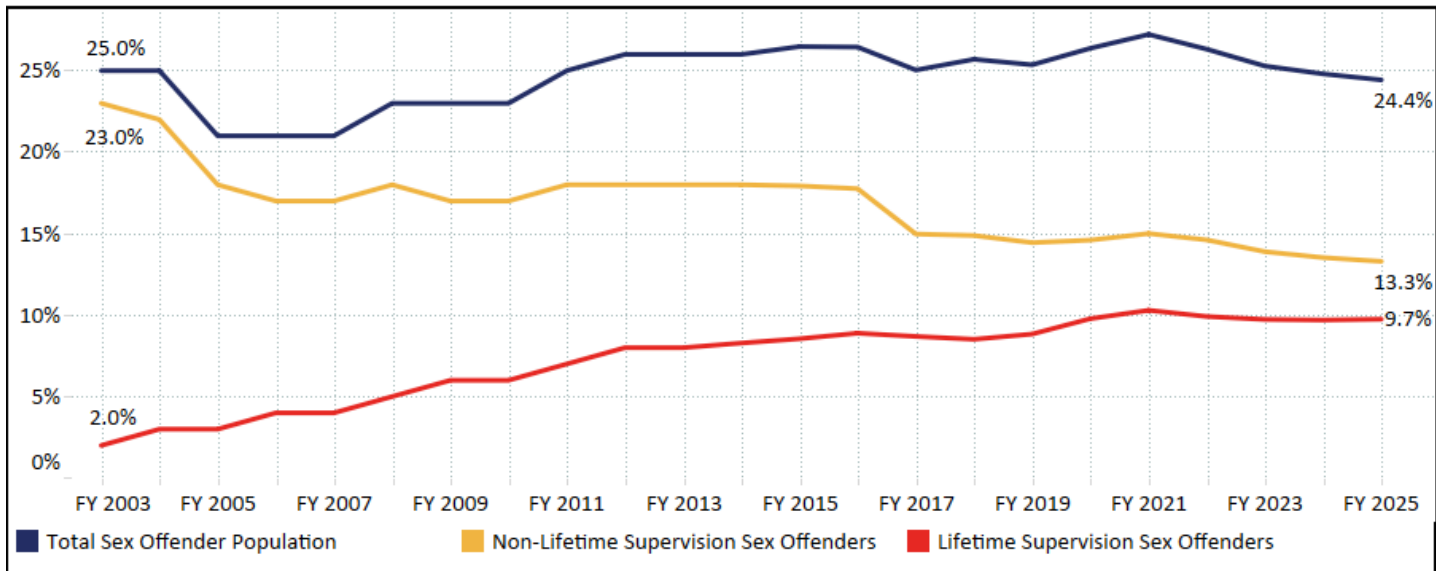


Impact on Prison Population

To assess the impact of the Lifetime Supervision Act on the total prison population, the percentage of LSX and non-LSX sex offenders within the total sex offender inmate population is displayed in **Figure 2**. The percentage of total inmates sentenced under the Lifetime Supervision Act stayed consistent at 9.7% between FY 2023 and FY 2025. On July 1, 2016, the administrative regulation on the Sex Offender Treatment and Monitoring

Program (SOTMP) was modified, and inmates with a sex offender treatment need level below 5 are no longer recommended for sex offense-specific treatment unless clinically indicated.

Figure 2. Percentage of Sex Offenders and Lifetime Supervision Sex Offenders Out of the Prison Population



Impact on Parole Population

As of June 30, 2025, there were 1,883 Lifetime Supervision Sex Offenders who had been released to parole for the first time, including the 101 who were paroled during FY 2025. Since the inception of the act, a total of 2,066 inmates have been released to parole. There have been 181 inmates who had their parole revoked, returned to incarceration, and were subsequently re-paroled. There have also been two inmates who were released under COVID-19 criteria. **Figure 3** details the discrete and cumulative number of initial releases to parole and re-paroles of Lifetime Supervision Sex Offenders by fiscal year.

Figure 4 displays the length of stay of Lifetime Supervision Sex Offenders on parole as of June 30, 2025. This figure only tracks active parolees during the fiscal year who were Lifetime Supervision Sex Offenders or whose sentence was discharged. The longest a Lifetime Supervision Sex Offender has been under parole supervision is 18.0 years and the average is 5.8 years. Of the 1,056 parolees under lifetime supervision, 308 (29.2%) were released to parole supervision in another state and 150 (14.2%) were under intensive supervision parole.

Figure 3. Lifetime Supervision Sex Offender Releases by Year

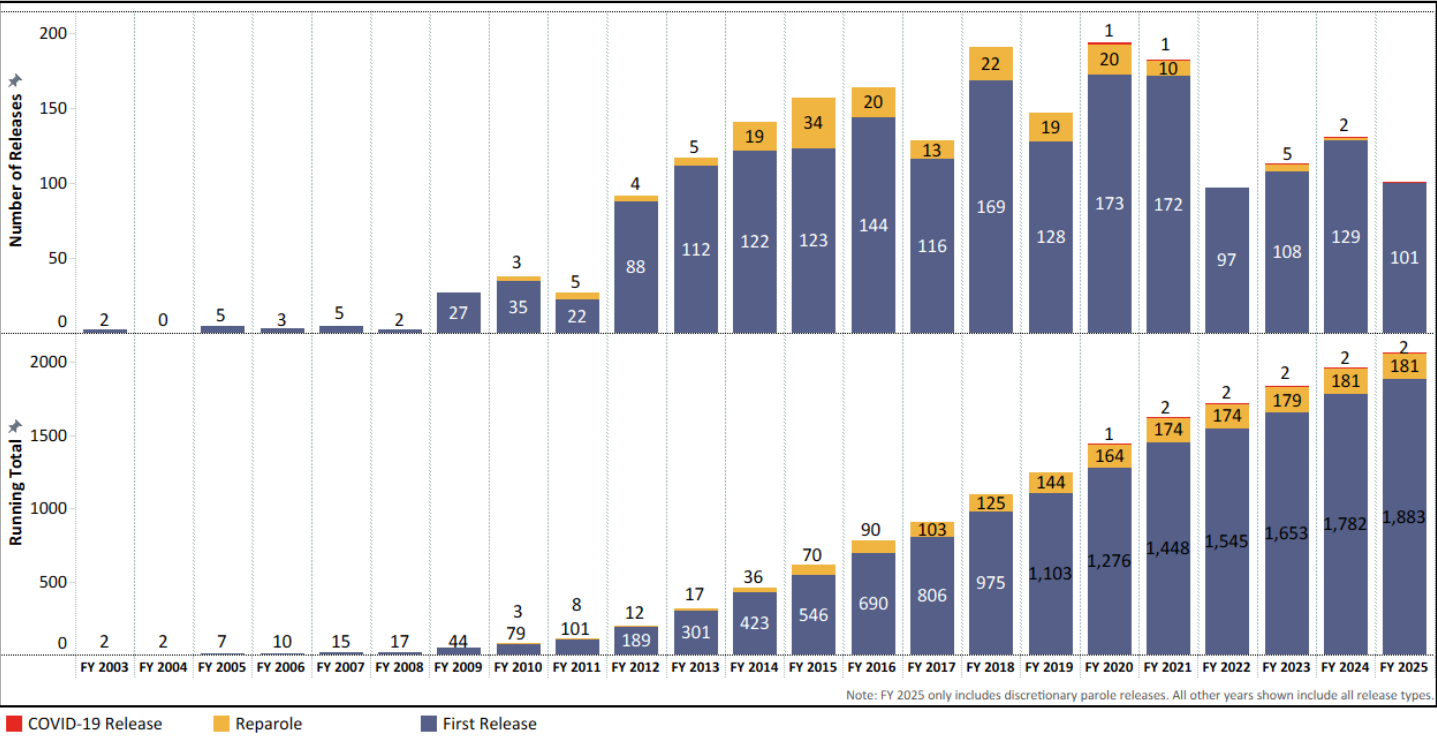
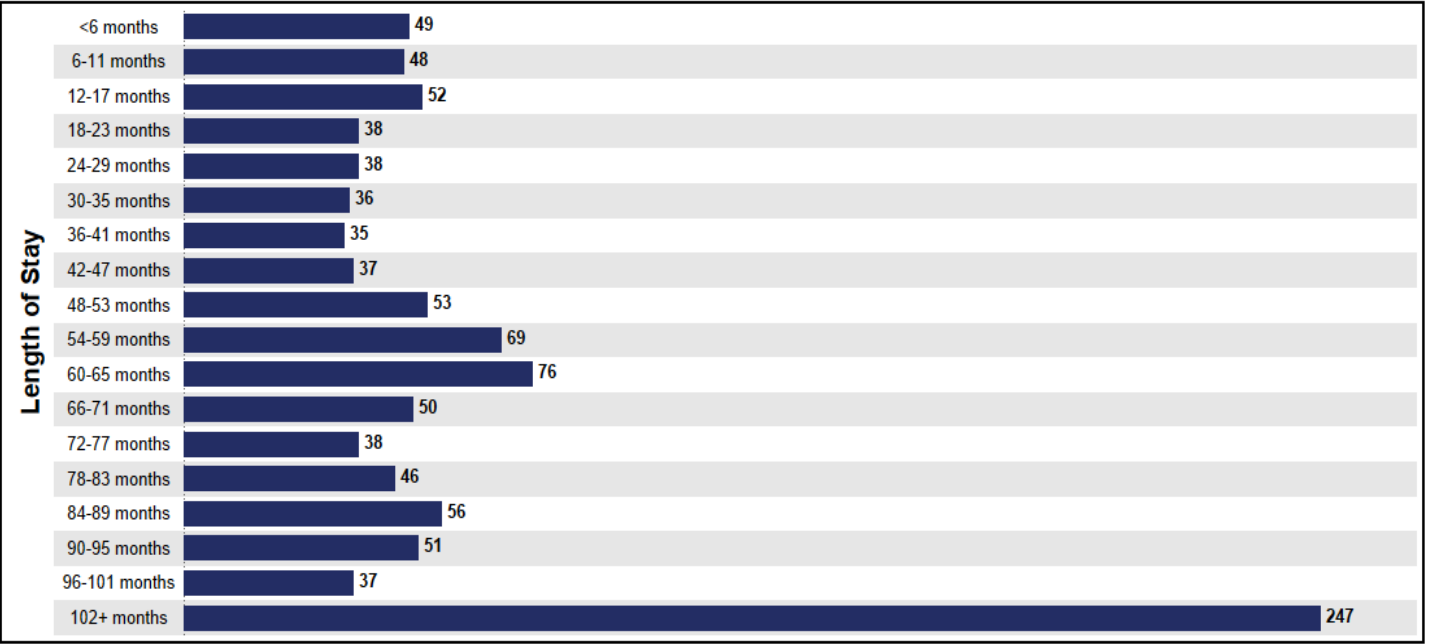


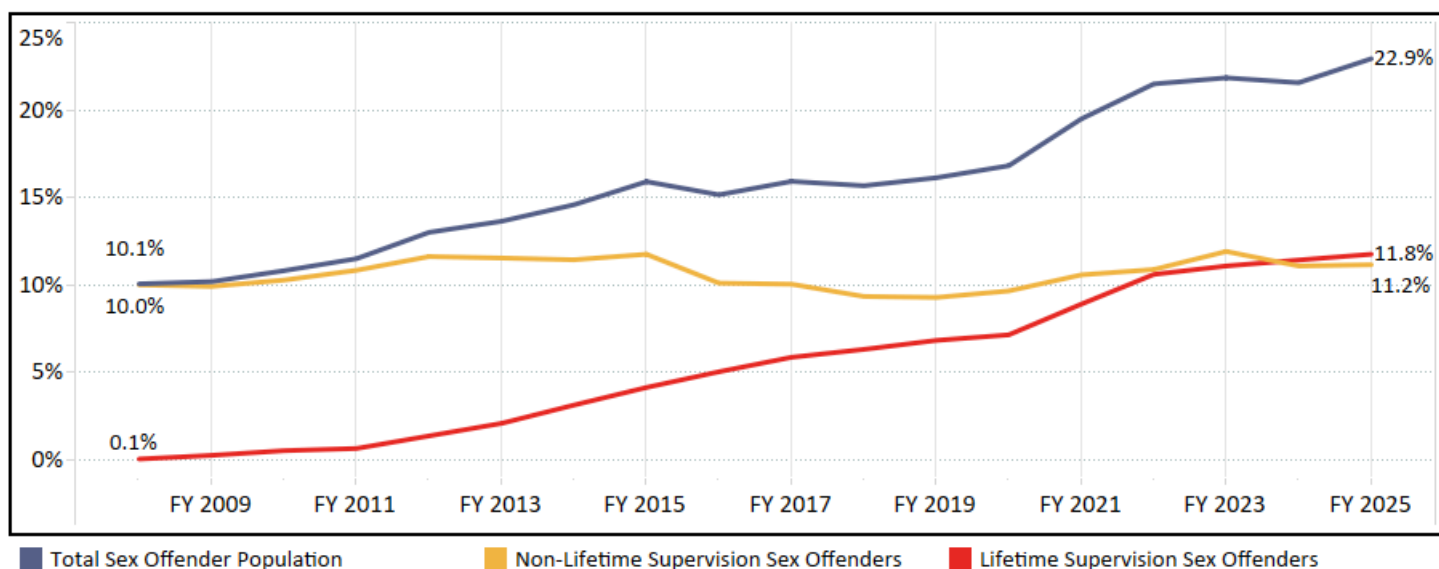
Figure 4. Current Lifetime Supervision Sex Offenders Parole Length of Stay



Note. This is length of stay for LSX offenders on parole as of 6/30/2025 or those who discharged their sentence during FY 2025. Offenders who were paroled, but discharged prior to FY 2025 are not included in this figure.

Figure 5 displays the total percentage of parolees who are sex offenders (22.9%); 11.8% are LSX and 11.2% are non-LSX.

Figure 5. Percentage of Sex Offenders and Lifetime Supervision Sex Offenders Out of Total Parolees



Parole Release Hearings

The Parole Board completed 664 applications for release hearings for 624 Lifetime Supervision Sex Offenders during FY 2025; some inmates were not meeting the criteria at the time of their hearing, and some had multiple hearings over the course of the year. The Parole Board granted discretionary release for 75 of the 624 Lifetime Supervision Sex Offenders, although not all of these were paroled by the end of the fiscal year.

Parole Revocation Hearings and Number of Parole Revocations

The Parole Board completed 61 revocation hearings for 54 Lifetime Supervision Sex Offenders in FY 2025, for whom 44 hearings resulted in revocation of parole, 2 hearings resulted in continuations on parole, 1 inmate self-revoked their parole, and 7 hearings were not yet finalized at the end of the fiscal year.

Of the 2,066 releases to parole since the Lifetime Supervision Act went into effect, 690 have resulted in revocation (some inmates have been released and revoked multiple times). Of the 690 revocations, 86 returns were for new felony convictions. During FY 2025, one inmate returned on new felony convictions.

Parole Discharge Hearings and Number Discharged from Parole

According to CRS 18-1.3-1006, the period of parole for any sex offender convicted of a class 4 felony shall be an indeterminate term of at least 10 years and a maximum of the remainder of the sex offender's natural life. The period of parole for any sex offender convicted of a class 2 or 3 felony shall be an indeterminate term of at least 20 years and a maximum of the remainder of the sex offender's natural life. Early discharge has been reviewed and approved for 153 inmates as of June 30, 2025.

Summary of Evaluation Instruments

Release to parole or community corrections is subject to the discretion of the Parole Board. The CDOC informs the Parole Board whether or not inmates have participated in treatment and have met the criteria for successful progress in prison treatment, as defined in the following: *Sex Offender Management Board Standards and Guidelines for the Assessment, Evaluation, Treatment and Behavioral Monitoring of Adult Sex Offenders; Lifetime Supervision Criteria; Standards for Community Entities That Provide Supervision and Treatment for Adult Sex Offenders Who Have Developmental Disabilities*. Completion of the SOTMP program **does not** guarantee a release to the community.

Sex Offender Treatment and Monitoring Program (SOTMP)

All providers in the CDOC must comply with the standards and provider qualifications of the Colorado Sex Offender Management Board (SOMB).

Sex Offender Treatment Tracks

Following the release of a comprehensive evaluation of the SOTMP, the programming and curriculum were revised and updated based on the evaluation recommendations beginning in April 2013. To implement positive change to programming and treatment, key positions were filled, including:

- A Psychologist to complete assessments;
- Staff to complete risk assessments and staff to deliver treatment;
- A clinical trainer to train, mentor, and coach treatment providers, and develop training curricula.

In addition to the above mentioned changes, the SOTMP went through another revision of the program in fiscal year 2025 to incorporate evidence-based practices and provide more efficient processes due to the consistent admission of clients requiring SOTMP. Significant changes include:

- Addition of a low risk (well below average) track of treatment;
- Updated AR 700-19;
- Updated the LSX criteria to better align with the individual risk of this population;
- Discharges from SOTMP;
- Curriculum update for all tracks of treatment to stay aligned with the current research;
- Maximized resources by housing our two largest programs together to improve efficiency;
- Implementation of an “L-qualifier” review on every LSX returnee to determine treatment appropriateness.

The SOTMP provides comprehensive assessment, evaluation, treatment, and monitoring services to sex offenders who are motivated to eliminate sexual abuse behaviors. SOTMP is responsible for assessing the inmate’s progress when recommending specific SOTMP levels of treatment based on individual risk and needs. SOTMP offers risk assessment to determine the level of treatment intensity recommended:

- All eligible inmates with identified sex offense-specific treatment needs are assessed with the Static-99R actuarial assessment. This assessment assesses static factors in an inmate’s history and provides a baseline risk category, which is used to determine the initial recommended treatment track. All inmates are placed into treatment groups according to risk and individual needs. During the treatment process, additional dynamic assessments are administered. Clients who are identified remain in the low risk category after ongoing assessment will be placed in Track I. Those who are assessed to be in the moderate risk category and who have more significant treatment needs will participate in Track II. Those with who are assessed to be in the high risk category and who have the most significant treatment needs will participate in Track III. All those who have participated in treatment who meet criteria will progress to the maintenance phase. The amount of time required in the maintenance phase will be determined based on their assessed risk level and individual treatment needs. After the maintenance phase if the individual has not been released to parole the client will be

discharged from SOTMP and will be identified as a general population offender. There are no validated risk assessments for use in the female population; therefore, CDOC does not assess females with these types of assessment tools.

Track I Low Risk

The Track I program was developed during FY 2024 to better align the evidence-based risk, needs, responsivity model (RNR) principles to a population that does not require as much or as intense treatment as those who are at higher risk of sexual recidivism. The successful completion of Track I is based on meeting the Lifetime Supervision Criteria as developed by the Sex Offender Management Board (SOMB) in conjunction with the CDOC SOTMP, the Judicial Branch, and the Parole Board. This level of treatment includes cognitive behavioral therapeutic goals based on the evidence-based risk, needs, responsivity model (RNR) focusing on the research supported risk areas of sex offenders. This program is offered at Fremont Correctional Facility, Denver Reception and Diagnostic Center, and Colorado Territorial Correctional Facility. The goals and curriculum of Track I were developed to address the needs of clients in the low risk category. Track I is a cognitive behavioral therapeutic group for very low to below average risk for sexual recidivism and treatment needs that addresses criminogenic factors associated with sexual offending behaviors. All offenders in this level of treatment will have the opportunity to meet all six of the Sex Offender Management Board (SOMB) Lifetime Supervision Treatment Progress criteria that indicate positive progression in treatment.

Track I Criteria:

1. The offender identifies factors that contribute to their sexually abusive behavior;
2. The offender applies and incorporates the material learned in treatment into their lifestyle;
3. The offender demonstrates a willingness to utilize the treatment program to make changes to prevent further sex offense behavior through participation in the treatment group and behavior in the institution;
4. Further evaluation of the offender's treatment needs and dynamic risk level;

5. The offender identifies their high-risk factors and methods for intervention in the management of high-risk factors. They will have an opportunity to meet the lifetime supervision treatment progress criteria;
6. The offender demonstrates management of identified risk factors.

Track II Moderate Risk

Track II is a cognitive behavioral therapeutic group for average risk for sexual recidivism and treatment needs that addresses criminogenic factors associated with sexual offending behaviors. All offenders in this level of treatment will have the opportunity to meet all six of the SOMB criteria that indicate positive progression in treatment.

The successful completion of Track II is based on meeting the Lifetime Supervision Criteria as developed by the Sex Offender Management Board (SOMB) in conjunction with the CDOC SOTMP, the Judicial Branch, and the Parole Board. This level of treatment includes cognitive behavioral therapeutic goals based on the evidence-based risk, needs, responsivity model (RNR), focusing on the research supported risk areas of sex offenders. This program is offered at Fremont Correctional Facility, Denver Reception and Diagnostic Center, and Colorado Territorial Correctional Facility. The goals and curriculum of Track II were developed to address the needs of clients in the moderate risk category. Track II is a cognitive behavioral therapeutic group for clients who are at average risk for sexual recidivism and treatment needs that addresses criminogenic factors associated with sexual offending behaviors. All offenders in this level of treatment will have the opportunity to meet all six of the Sex Offender Management Board (SOMB) Lifetime Supervision Treatment Progress criteria that indicate positive progression in treatment.

The goals include, but are not limited to, the following:

1. The offender identifies factors that contribute to their sexually abusive behavior;
2. The offender applies and incorporates the material learned in treatment into their lifestyle;
3. The offender demonstrates a willingness to utilize the treatment program to make changes to prevent further sex offense behavior through participation in the treatment group and behavior in the institution;

4. Further evaluation of the offender's treatment needs and dynamic risk level;
5. The offender identifies their offense cycle and methods for intervention in the cycle. They will have an opportunity to meet the lifetime supervision treatment progress criteria;
6. The offender demonstrates management of identified risk factors.

Track III High Risk

Offenders who have been assessed as above average to well above average risk for sexual recidivism and have more intensive treatment needs will be recommended for participation in Track III when clinically indicated.

Track III provides cognitive behavioral treatment that addresses criminogenic factors correlated with sexual recidivism and focuses on changing distorted thinking patterns, behaviors, and assists offenders in developing effective relapse prevention plans (i.e. risk management plans).

The successful completion of Track III is based on meeting the Lifetime Supervision Criteria as developed by the Sex Offender Management Board (SOMB) in conjunction with the CDOC SOTMP, the Judicial Branch, and the Parole Board. This level of treatment includes cognitive behavioral therapeutic goals based on the evidence-based risk, needs, responsivity model (RNR), focusing on the research supported risk areas of sex offenders. This program is offered at Fremont Correctional Facility, Denver Reception and Diagnostic Center, and Colorado Territorial Correctional Facility. The goals and curriculum of Track III were developed to address the needs of clients in the high risk category. Track III is a cognitive behavioral therapeutic group for clients who are at high risk for sexual recidivism and treatment needs that addresses criminogenic factors associated with sexual offending behaviors. All offenders in this level of treatment will have the opportunity to meet all eight of the Sex Offender Management Board (SOMB) Lifetime Supervision Treatment Progress criteria that indicate positive progression in treatment.

The goals include, but are not limited to:

1. The offender receives further evaluation and collaborates with the treatment team to develop treatment plan goals that mitigate individual risk factors;
2. The offender applies and incorporates the material learned in treatment into their lifestyle;
3. The offender identifies distorted thinking patterns and develops healthy alternatives;

4. The offender demonstrates a commitment to behave as a pro-social, responsible member of the community;
5. The offender realizes the importance of developing a balanced lifestyle and monitoring their thoughts and behaviors for the rest of their life;
6. The offender identifies their specific high-risk factors and methods for intervention in the cycle;
7. The offender realizes the importance of sharing their offense cycle and methods of intervention;
8. The offender practices and incorporates a model for solving problems.

Maintenance Level

Maintenance level is offered for all risk tracks and at each facility. After the completion of SOTMP, clients in all risk categories will progress to the Maintenance level. The duration of time in the maintenance phase is dependent on risk, participation, and assessment of progress. The Maintenance level is a less intensive level of treatment. Clients participating in the Maintenance program can return to a more intensive level of treatment if clinically indicated. Once a client has successfully demonstrated management of identified risk areas, they are discharged from SOTMP and moved into more of a general population setting. The SOTMP provides “check-in” sessions with a SOMB approved therapist every quarter to those who have been discharged. This allows clients to ask questions, receive updates, and/or problem-solve difficult situations.

Specialized Services

SOTMP also offers, to the extent that resources permit, specialized services to the following sex offenders: females; youth; Spanish-speaking; and clients with medical restrictions, hearing impairments, developmental needs, and chronic mental illness. Treatment formats for Lifetime Supervision of Sex Offenders are no longer any different than formats for all offenders.

The 1998 passage of the Colorado Lifetime Supervision Act requires that inmates must serve the term of their minimum sentence in prison and participate and progress in treatment to be considered a candidate for parole. In FY 2016, the SOTMP collaborated with representatives from parole and the Parole Board to replace the previous specialized format for Lifetime Supervision of Sex Offenders. The revised format allows all sex

offenders (both determinate and indeterminate) to participate in treatment commensurate with their relative level of risk. The treatment phases have been designed with the following assumptions:

- Although treatment tracks and curriculum are designed to encourage cooperation with and treatment progress, they do not ensure it;
- Clients will continue in treatment and supervision if placed in community corrections or on parole;
- Clients need to be willing to work on problems and demonstrate motivation to change;
- The Parole Board will be informed when clients meet the Lifetime Supervision criteria for successful progress in-prison treatment.

The SOTMP informs the Parole Board when clients meet the Lifetime Supervision treatment progress criteria which correspond to their risk level. The Community Corrections Board is notified when clients meet the criteria for release to community corrections based on the Senate Bill 20-085 that corresponds to the clients' risk level.

The CDOC made changes to Administrative Regulation AR 700-19 Sex Offender Treatment and Monitoring Program (SOTMP) in 2015 to have the SOTMP prioritize offenders for treatment based on their parole eligibility date (PED), in addition to sentence type. Treatment participants are assessed to determine their level of risk for committing another sexual offense, and they participate in the level of treatment based on their individual needs. Clients who fall within the lower-risk categories for sexual recidivism are recommended to participate in Track I. Clients who fall within the moderate risk category for sexual reoffense are recommended for participation in Track II. Clients who fall within the high risk categories for sexual re-offense are recommended for participation in Track III. Prioritization now occurs in the following manner.

A. 1st Priority

Clients with active judicial determinations of sex offenses (convicted of a sex offense, finding of sexual factual basis) who are within 4 years of their PED, and sentenced under the Lifetime Supervision Act. Active sentences include judicial determinations that were active during any period of their current DOC sentence:

- Clients who have not had an opportunity to participate in treatment will have priority over a client who has had an opportunity and did not take advantage of it by refusing to participate in a group, dropping out of a group, being terminated from a group, or not successfully completing the group. Clients who participated in a track of treatment and demonstrated motivation and effort, but needed additional time to understand the concepts, will not fall in the previous treatment attempt category;
- Clients will be prioritized for group placement by their PED. Those with earlier PED dates will be placed in groups before others with later PED dates;
- Once all clients who have not had prior opportunities to participate in SOTMP and are within 4 years of their PED have been placed in group, those clients with the fewest prior opportunities will be placed in group by order of their referral date.

B. 2nd Priority

Once all clients who have not had prior opportunities to participate in SOTMP and are within 4 years of their PED have been placed in a group, clients with the fewest prior opportunities will be placed in group by order of their referral list placement date.

To meet the growing treatment needs of Lifetime Supervision Sex Offenders with CDOC's limited treatment resources, the following changes were implemented to increase treatment opportunities for clients:

- Active and ongoing communication with the Parole Board, the Colorado Association of Community Corrections Boards, and the Colorado Community Corrections Coalition regarding community transition for Lifetime Supervision sex offenders;
- Implemented a group for male clients with significant medical impairments at Denver Reception and Diagnostic Center;
- Revised the treatment curriculum to implement an open group format;
- Implemented a Track I for clients who are below average and very low risk;
- Discharged clients after a period of managing their risk factors effectively.

Cost of Sex Offender Treatment

The FY 2025 CDOC budget included \$4,012,601 for assessment, treatment, testing (including polygraphs), program evaluation, and registration coordination for incarcerated sex offenders in state facilities. Approximately \$129,320 was expended for polygraph testing. For inmates on parole, \$3,651,017.75 was spent for approved sex offender treatment provider services for FY 2025.

Referral to Sex Offender Treatment

A statewide referral process was created for CDOC behavioral health treatment in prison. One of the goals of the referral system was to establish a global referral list for all clients who meet the requirements for sex offender treatment. For Track I and Track II lifetime supervision, sentenced offenders are prioritized for treatment. For Track III, lifetime and determinate sentenced offenders are prioritized for treatment. Clients must be within 4 years of their parole eligibility date (PED) to be placed on the global referral list. Clients who are classified as a low treatment priority are not placed on the global referral list. The following describes offenders who may be identified as a low-resource priority:

- The offender may have an administrative, judicial, or institutional determination of a sex offense, but does not currently meet the participation requirements for SOTMP;
- Offenders with unadjudicated sex abuse allegations may also be low-resource priority for classification review. These offenders may have their priority reassessed at any time during incarceration, community, or parole.

The statewide global referral list ensures clients are moved to a facility offering SOTMP when they are prioritized to start treatment. During FY 2025, 258 Lifetime Supervision Sex Offenders had been referred for treatment, and 464 were still on the global referral list as of June 30, 2025.

Eligibility Criteria for Treatment

Clients must meet basic eligibility criteria to be placed in treatment. The requirements for admission into sex offender treatment are:

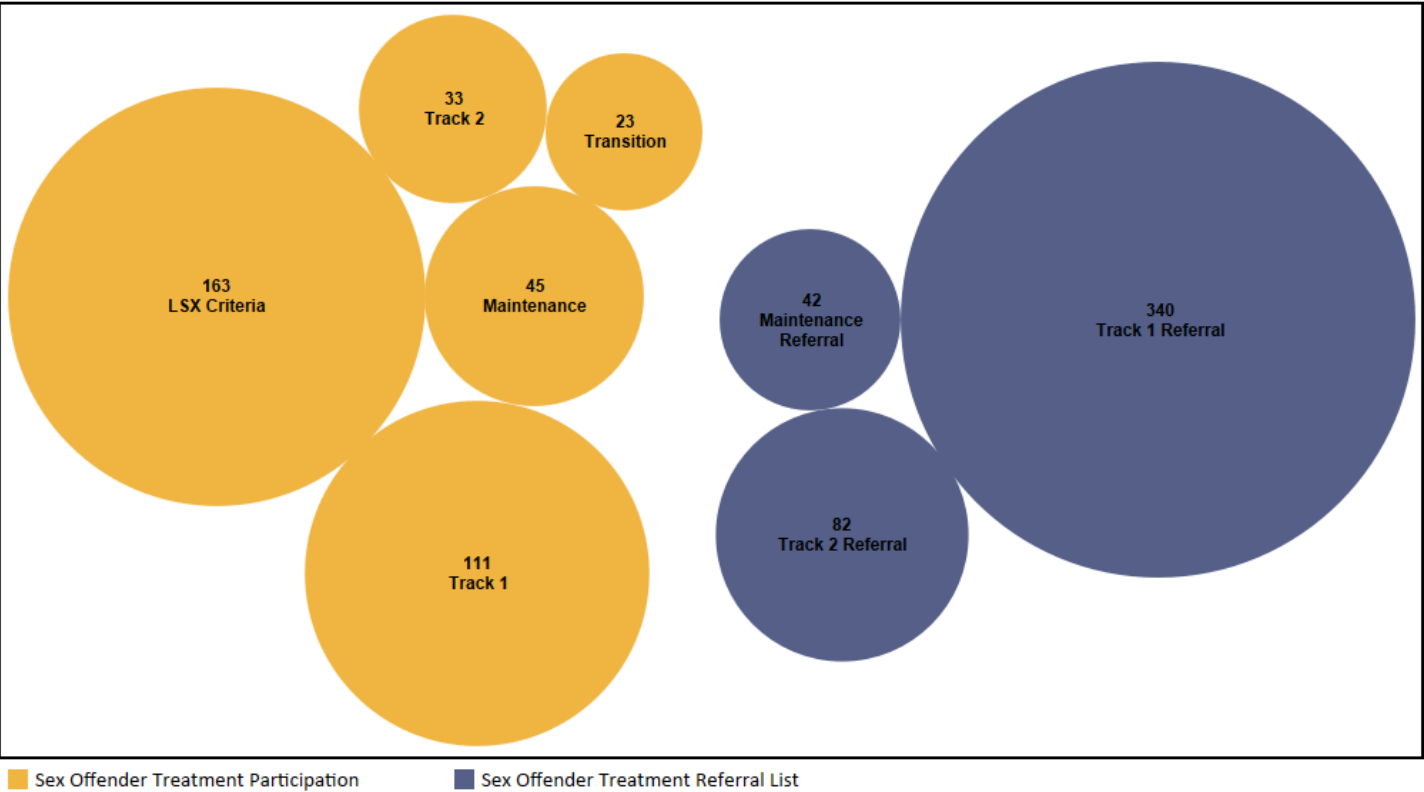
- Must have 4 years or less to parole eligibility date (PED) to be placed on the global referral list;
- Must be willing to discuss problems related to sexually abusive behavior and work on them in treatment;
- Must demonstrate a willingness to participate in group treatment at the level recommended by the program;
- Must sign and comply with the conditions of all SOTMP treatment contracts.

Clients are interviewed and screened before participation in treatment using these criteria. Even if the client does not initially meet participation requirements, the requirements and the specific reasons for the requirements are explained, and the client is encouraged to reapply when they meet the criteria in the future. Typically, clients can meet the criteria and become amenable to treatment over time.

Clients are reinterviewed and screened upon request for reconsideration and may change from “not meeting criteria” to “meeting criteria” at any time. Inmates may initially refuse to participate in treatment, may not progress in treatment, may cease complying with treatment requirements, or may drop out of treatment. These clients are encouraged to reapply for treatment as soon as they are willing to comply with the requirements.

As of June 30, 2025, of the 1,744 (all LSX offenders regardless of needs level) Lifetime Supervision Sex Offenders incarcerated in a state or private facility, 1,189 did not meet the eligibility criteria to be placed on the global referral list (see description above). **Figure 6** depicts the treatment and referral status of Lifetime Supervision Sex Offenders on June 30, 2025: 175 Lifetime Supervision Sex Offenders were in treatment and participating in various stages of treatment. An inmate can participate in multiple stages of treatment at the same time, so those 175 inmates accounted for 375 participations. In addition, there were 172 inmates on the global referral list waiting for treatment.

Figure 6. Treatment Status of Lifetime Supervision Sex Offenders as of June 30, 2025



Participation in Treatment

On June 30, 2025, 175 Lifetime Supervision Sex Offenders were participating in treatment. **Table 1** details the number of Lifetime Supervision Sex Offenders who participated in sex offender treatment during each month of FY 2025. The length of participation for Lifetime Supervision Sex Offenders in treatment was calculated using program participation admission and termination dates, or June 30, 2025, if the client was currently in a sex offender treatment program. For Lifetime Supervision Sex Offenders who participated in treatment at any point during FY 2025, the average length of stay in treatment was 339.2 days in Track I groups, 379.1 days in Track II groups, 328.5 days in Criteria groups, 243.0 days in Maintenance groups, and 251.8 days in the Transition groups.

Table 1. Treatment Participation of Lifetime Supervision Offenders During Each Month of FY 2025

Program	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025
Track I	88	79	89	85	82	75	74	65	73	82	92	84
Track II	18	18	19	17	17	17	23	23	23	27	28	28
Maintenance	47	48	37	43	50	49	56	51	47	40	49	45
Criteria	111	107	115	112	110	101	116	108	116	128	135	129
Transition	16	18	16	17	16	13	17	16	16	15	14	12
Total	280	270	276	274	275	255	286	263	275	292	318	298

Note: Table 1 data includes offenders who participated for any amount of time during the month. Some offenders may have participated in more than one level of the program within a month. All participation was counted each time it occurred.

Terminations from Track I, Track II, Track III, and Maintenance

Standardized program termination types are used for all program and work assignments throughout the department and describe positive and negative termination reasons. Terminations may also be administrative in nature, including situations such as medical emergencies or movement from the facility for security reasons. Terminations from Track I, Track II, and Track III have been grouped into the following categories for this report:

- Administrative Termination: The client is terminated due to medical and/or psychological reasons, or other administrative reasons;
- Dropped Out / Self Terminated: The client decides to discontinue treatment or stops attending groups and informs the treatment staff they are no longer interested in participating in treatment;
- Expelled from Program: The client is terminated from treatment for a contract violation. In the majority of cases, the client is terminated after being placed on probation and given opportunities to improve their participation. If the client is terminated, completion of assignments is required before readmission to treatment is allowed. This category includes client behaviors that threaten the safety

and security of other treatment participants. Termination from treatment without a period of probation may result based on the seriousness of the behaviors;

- Satisfactory Completion: The client completes a time-limited group that meets the client's treatment goals;
- Transfer / Paroled / Discharge: The client transfers to another facility, is released to parole, or the sentence is discharged;
- Unsatisfactory Completion: If the client needs more time to understand the material or achieve the client's treatment goals, the client unsatisfactorily completes and may be recommended to repeat the group.

In April 2007, the CDOC instituted a due process system for sex offender treatment terminations due to treatment noncompliance or lack of progress. Under this system, the therapist recommends clients for termination based on their behavior. The facility's sex offender treatment team reviews the therapist's recommendation. The SOTMP administrator reviews the request for suspension, and if the administrator supports the request, the client is suspended. If the team supports the termination recommendation, the client is suspended and served with a notice of right to termination review. The client can request a termination review where a three-member panel evaluates all information presented by the client and their therapist. A disposition is issued regarding the termination. **Table 2** provides details on SOTMP terminations in FY 2025. In FY 2025, 69.0% of Track I participants who terminated had a satisfactory completion, 33.3% of Track II participants who terminated had a satisfactory completion, 62.5% of LSX Criteria participants had a satisfactory completion, and 60.9% of ARMS participants had a satisfactory completion.

Table 2. Lifetime Supervision of SOTMP Terminations by Program, FY 2025

Program	Termination Type	Count of Inmates	Percent of Inmates
Track 1	Satisfactory Completion	49	69.0%
	- Released	5	7.0%
	- Terminated	4	5.6%
	- Transferred to another Facility	7	9.9%
	- Transferred within Program	6	8.5%
	Total	71	100.0%
Track 2	Satisfactory Completion	3	33.3%
	- Terminated	4	44.4%
	- Transferred to another Facility	2	22.2%
	Total	9	100.0%
Maintenance	Satisfactory Completion	10	12.8%
	- Released	57	73.1%
	- Terminated	1	1.3%
	- Transferred to another Facility	9	11.5%
	- Transferred within Program	1	1.3%
	Total	78	100.0%
LSX Criteria	Satisfactory Completion	55	62.5%
	- Released	8	9.1%
	- Terminated	10	11.4%
	- Transferred to another Facility	15	17.0%
	Total	88	100.0%
Transition	Satisfactory Completion	14	60.9%
	- Terminated	3	13.0%
	- Transferred to another Facility	5	21.7%
	- Transferred within Program	1	4.3%
	Total	23	100.0%
Grand Total	-	269	100.0%

Note: Due to rounding, not all percentages will add exactly to 100%.

Met Criteria for Community Corrections

Per Senate Bill 20-085, progression in treatment is required to be referred to community corrections for a client sentenced under the Lifetime Supervision Act. Criteria are outlined based on the risk level of the client.

Sex offender treatment in the prison setting is preliminary to continued treatment and supervision in the community post-release from prison. Since treatment is a vital component in reducing recidivism for those who have committed sex offenses, and per the Senate Bill 20-085 **(A)**, *the offender has successfully*

progressed in treatment required by section 16-11.7-105, as determined by the department of corrections after consideration of the criteria developed pursuant to section 18-1.3-1009 (1) (b), and would not pose an undue threat to the community if transferred to a community corrections program under appropriate treatment and monitoring requirements. In accordance with the Risk, Need, Responsivity model, these criteria were carefully developed for offenders to receive a recommendation for a Community Corrections referral.

Lifetime Supervision Sex Offenders actively participating in treatment are discussed individually in a clinical staffing meeting to determine if they meet the Lifetime Supervision treatment progress criteria for successful progress in-prison treatment or the SB 20-085 criteria for progression in treatment. Sex offender program therapists work closely with community corrections providers who accept sex offenders into transitional programs and the respective community parole officers.

During FY 2025, 94 sex offenders were released to the community, all of whom were in the LSX category, met the statutory and departmental criteria for successful progress in prison treatment (see description above for risk categories and requirements), or met the SB 20-085 criteria. There were 91 Lifetime Supervision Sex Offenders recommended to the Parole Board by the department's SOTMP during FY 2025 who were released to parole, and five who were released to community corrections.

State Judicial Department

Probation Population Impact

The Sex Offender Intensive Supervision Program (SOISP) is designed to provide the highest level of supervision to adult sex offenders who are placed on probation, pursuant to §18-1.3-1007(2). Although initially created in statute in 1998 to address the risk posed by lifetime supervision cases, the legislature made a significant change to the statute in 2001. Pursuant to HB01-1229, all felony sex offenders convicted on or after July 1, 2001, are statutorily mandated to be supervised by the SOISP program.

The goal of SOISP is to minimize risk to the public to the greatest extent possible by holding probationers accountable for pro-criminal and sexually assaultive behavior. The program promotes decreasing risk factors and increasing protective factors, along with encouraging pro-social skill building and assisting probationers to repair the harm caused by their actions, when possible. SOISP includes a combination of high-level surveillance and monitoring; research-based and best practice supervision strategies; physiological monitoring; and collaboration with Community Supervision Teams. Some sex offenders cannot or will not respond to treatment, and there is no implication that all sex offenders can be successful in treatment. Depending on the strengths and risk level of the probationer, elements of community supervision may include restricted activities, daily contact with the probationer, curfew checks, home visitation, employment visitation and monitoring, drug and alcohol screening, and/or sex offense-specific treatment. SOISP consists of three phases, each with specific criteria that must be met prior to a reduction in the level of supervision. Phase progression occurs when a probationer's risk to the community declines and protective factors increase. The goal of supervision for any probationer is a reduction in risk factors. The use of phases provides a structured process designed to provide clear expectations for the supervising officer to assess the probationer's progress. The phase requirements are intended to be applied with an individualized approach, since not all conditions will apply to every probationer, but should serve as benchmarks for supervising the probationer. Those probationers who satisfactorily meet the requirements of the program may be successfully terminated from probation or transferred to non-SOISP, sex offender regular probation supervision for the remainder of their sentence.

Using the Judicial Department’s case management information system, staff at the Division of Probation Services selected all sex offender cases eligible for mandatory indeterminate sentences, as well as all applicable sex offender cases that terminated probation supervision, during FY 2025. The following statutory charges were reviewed and included in this analysis:

I. Offenders who **must** be sentenced to an indeterminate term:

§18-3-402, C.R.S.	Sexual Assault; or Sexual Assault in the First Degree, as it existed prior to July 1, 2000
§18-3-403, C.R.S.	Sexual Assault in the Second Degree, as it existed prior to July 1, 2000
§18-3-404(2), C.R.S.	Felony Unlawful Sexual Contact; or Felony Sexual Assault in the Third Degree, as it existed prior to July 1, 2000
§18-3-405, C.R.S.	Sexual Assault on a Child
§18-3-405.3, C.R.S.	Sexual Assault on a Child by One in a Position of Trust
§18-3-405.5(1), C.R.S.	Aggravated Sexual Assault on a Client by a Psychotherapist
§18-3-305, C.R.S.	Enticement of a Child
§18-6-301, C.R.S.	Incest
§18-6-302, C.R.S.	Aggravated Incest
§18-7-406, C.R.S.	Patronizing a Prostituted Child
§18-3-306(3), C.R.S.	Class 4 Felony Internet Luring of a Child
§18-3-405.4, C.R.S.	Internet Sexual Exploitation of a Child
§18-3-405.7, C.R.S.	Class 3 Felony Unlawful Sexual Contact by a Peace Officer

In 2002, coding was installed in the Judicial's case management system that distinguishes between lifetime and non-lifetime cases. The coding to differentiate lifetime from non-lifetime is based on sentencing codes entered by the court. This report also includes an additional 295 cases terminated from non-lifetime probation supervision for lifetime eligible offenses during FY 2025.

Between July 1, 2024, and June 30, 2025, 300 adults were charged in district court with one of the 13 mandatory lifetime eligible sex offenses identified in statute and were sentenced to probation. Of these, 56 offenders (19%) received an indeterminate sentence to probation of at least 10 or 20 years to a maximum of the offender's natural life and were sentenced to SOISP. As a condition of probation, 3 were sentenced to Community Corrections, 2 were sentenced to work release, and 20 were sentenced to jail. Additionally, 1 individual was ordered to serve a Department of Corrections sentence prior to being supervised by probation.

The following **Table 3** reflects a comparison of sentences to probation for lifetime eligible offenses for FY 2021 through 2025:

Table 3: Placement of New Cases Eligible for Indeterminate Lifetime Term Sentences to Probation

Type of Supervision	FY 2021 Cases (%)	FY 2022 Cases (%)	FY 2023 Cases (%)	FY 2024 Cases (%)	FY 2025 Cases (%)
Lifetime Probation with SOISP	43 (9%)	81 (13%)	49 (15%)	59 (19%)	56 (19%)
SOISP (non-lifetime probation for felony sex offenses with SOISP)	238 (48%)	280 (44%)	120 (38%)	131 (41%)	106 (35%)
*Regular Probation (Cases Ineligible for Lifetime or SOISP and/or sex offense reduced to misdemeanors)	217 (44%)	270 (43%)	148 (47%)	128 (40%)	138 (46%)
Total Cases	498 (100%)	631 (100%)	317 (100%)	318 (100%)	300 (100%)

*Offenders whose offense date is before November 1, 1998, are ineligible for indeterminate sentences and not eligible for SOISP as created in 16-13-807 C.R.S.

Of the 56 cases sentenced to SOISP for lifetime, 6 (11%) cases had a proven claim of domestic violence associated with the sentence. The non-lifetime SOISP group included 13 (12%) of the 106 cases where a domestic violence factual basis was proven. In the previous fiscal year (2024), 9 cases overall had a similar claim for both lifetime and non-lifetime.

As of June 30, 2025, there were 1,745 probationers under active Sex Offender Intensive Supervision (SOISP). Of these, approximately 856 (49%) probationers are under lifetime supervision.

Probation Discharge Hearings and Discharges

For FY2025, 31 sex offenders under a lifetime supervision sentence successfully terminated their probation. An additional 22 offenders under a lifetime supervision sentence completed SOISP and were transferred to regular probation and are currently active under supervision.

Probation Revocation Hearings and Revocations

- During FY 2025, 34 sex offenders had their lifetime supervision sentences terminated other than successfully. The following represents the termination status for these probationers:
- 1 - Probation revoked; new felony
- 2 - Probation revoked; new misdemeanor
- 19- Probation revoked; technical violations
- 1 - Deported
- 4 - Died
- 0 – No other closure type applies
- 7 - Absconded; warrants issued and remain outstanding

The individual was revoked for the commission of a new felony, which was the result of Sexual Exploitation of a Child (F4). The individuals revoked for a new misdemeanor were the result of Failure to Register as a Sex Offender (M1).

When accounting for discharges and revocations, 65 sex offenders had their lifetime supervision sentences terminated.

Cost of Services

In July 1998, the SOISP program was created with a General Fund appropriation for 46 FTE probation officers and funding to provide treatment services. In FY 2001, all expenses associated with SOISP were transferred from the General Fund to the Offender Services Cash Fund. Section 18-21-103, C.R.S., requires that sex offenders pay a surcharge, with collected revenue deposited in the Sex Offender Surcharge Fund. A portion of the funds is appropriated to Judicial and partially meets expenses associated with completion of the offense-specific evaluations required by statute, as shown in **Table 4**.

Table 4: Sex Offender Treatment and Evaluation Costs by Surcharge or Offender Services Fund

Year	CF – Sex Offender Surcharge Treatment Costs	CF – Sex Offender Surcharge Evaluation Costs	CF – Offender Services Fund Treatment Costs	CF – Offender Services Fund Evaluation Costs	Total
FY 2015	\$0	\$302,029	\$1,098,952	\$969,823	\$2,370,804
FY 2016	\$0	\$302,029	\$1,016,892	\$994,691	\$2,313,612
FY 2017	\$0	\$302,029	\$906,930	\$973,401	\$2,182,360
FY 2018	\$0	\$302,029	\$944,130	\$1,123,024	\$2,369,183
FY 2019	\$0	\$81,413	\$961,814	\$1,387,073	\$2,430,301
FY 2020	\$0	\$123,140	\$1,093,191	\$1,185,441	\$2,401,772
FY 2021	\$0	\$302,029	\$1,103,149	\$908,487	\$2,313,666
FY 2022	\$0	\$301,629	\$1,405,659	\$1,215,210	\$2,922,498
FY 2023	\$0	\$302,029	\$1,753,195	\$1,357,017	\$3,412,241
FY 2024	\$0	\$302,029	\$2,015,382	\$1,232,900	\$3,550,311
FY 2025	\$0	\$503,044	\$1,330,723	\$748,962	\$2,582,729

The cost expended for adult polygraphs for FY 2025 was \$379,728, which is approximately a \$247,185 decrease from FY 2024 spending. Probation funds have been required to pay for evaluations and assessments to avoid any delays in case processing for the courts and to ensure that probationers who are unable to pay all of the costs associated with court-ordered evaluation and treatment are not returned to court for revocation based on non-payment. Revocations can result in sentences to DOC, a significantly higher cost option for the state. The expenditure of \$2.6 million for adult sex offender related evaluation and treatment costs represents approximately 14% of the total offender and treatment service dollars (approximately \$18 million) spent in FY 2025 for treatment and service support for all probationers. The adult sex offender population represents approximately 4.7% of the adult probation population. The Judicial Department continues to seek options for the containment of these costs.

Summary Of Evaluation Instruments

The Sex Offender Management Board (SOMB) has developed two distinct evaluation processes for individuals with sex offense convictions. The first is the sex offense-specific evaluation process, detailed in the *Standards and Guidelines for the Assessment, Evaluation, Treatment, and Behavioral Monitoring of Adult Sex Offenders*, referred to in this document as the *Adult Standards and Guidelines*. The second is the Sexual Predator Risk Assessment Screening Instrument, which was created in collaboration with the Office of Research and Statistics in the Division of Criminal Justice, Department of Public Safety. Both evaluation types are described in further detail below.

Sex Offense-Specific Evaluation

The sex offense-specific evaluation is conducted as part of the Probation Pre-Sentence Investigation Report (PSIR). This report is prepared after conviction and before sentencing. Its purpose is to provide the court with information to identify an individual's risks and needs, thereby assisting with sentencing decisions. Most offenders sentenced under the Lifetime Supervision Act undergo a sex offense-specific evaluation as part of their PSIR. However, for offenders with mandatory prison sentences, a PSIR is not required and may be waived.

According to *Section 2.000 of the Adult Standards and Guidelines*, a sex offense-specific evaluation aims to assess the need for treatment, determine the appropriate type of treatment, and identify the individual's risk level and any additional needs. The evaluation shall:

- Describe and conceptualize the development, nature, and extent of sexually abusive behavior;
- Determine the criminogenic and other needs that should be addressed in offense-specific treatment and additional interventions;
- Accurately assess risk factors associated with the short and long-term risk for sexual recidivism;

- Identify specific responsivity factors and strengths likely to influence treatment and outcomes;
- Identify protective factors and how they influence risk;
- Obtain baseline assessment information to allow progress and change monitoring over time;
- Where applicable, address risk factors associated with non-sexual recidivism and any potential connection with sexual behavior.

Evaluations that recommend sex offense-specific treatment should propose research-informed treatment, management, and monitoring interventions appropriate for the individual's risk level, needs, and responsivity, to minimize their likelihood to reoffend sexually. Consequently, evaluators will prioritize the physical and psychological safety of victims and potential victims when making recommendations based on an individual's assessed risk and needs.

Further information on sex offense-specific evaluations can be found in *Section 2.000 of the Adult Standards and Guidelines*. *Appendix V* also details the Lifetime Supervision Criteria for determining an individual's progress and successful completion under Lifetime Supervision.

Sexually Violent Predator Assessment Screening Instrument (SVPASI)

In response to federal legislation, the Colorado General Assembly enacted legislation concerning the identification and registration of Sexually Violent Predators (SVPs) (§ 16-11.7-103 (4) (c.5), C.R.S.). Individuals designated as SVPs by the courts or Parole Board have specific requirements that include quarterly registration with law enforcement instead of annual registration (§ 16-22-108 (1) (d), C.R.S.), public posting on the Colorado Bureau of Investigation's website (§ 16-22-111 (1) (a), C.R.S.) and, as of May 30, 2006, potential community notification (§ 16-13-903, C.R.S.). Since May 30, 2006, all offenders convicted of attempt, conspiracy, or solicitation to commit one of the five specific crime types are referred for a sexually violent predator risk assessment (§ 18-3-414.5, C.R.S.).

Instrument

Currently, when an offender commits one of the five specific crime types or associated inchoate offenses, the SVPASI is administered by either Probation Services or the Department of Corrections in conjunction with an SOMB-approved evaluator. If the offender meets the criteria outlined in the instrument, they qualify for a Sexual Violent Predator (SVP) designation. Ultimately, however, it is the authority of the sentencing judge or the Parole Board to apply the SVP designation in individual cases.

Pursuant to § 16-11.7-103 (4) (c.5), C.R.S., the SOMB, in collaboration with the Office of Research and Statistics (ORS) in the Division of Criminal Justice (DCJ), developed both criteria and an empirical risk assessment scale for identifying individuals as SVPs. The criteria were established between July 1, 1998, and December 1, 1998, with input from representatives of the SOMB, the Parole Board, the Division of Adult Parole, the private treatment community, and victim services agencies. The actuarial scale was developed by the ORS-DCJ in consultation with the SOMB over three years. The ORS-DCJ has made subsequent revisions and updates to the [SVPASI instrument](#) and [SVPASI handbook](#).

Most recently, in FY 2017, the SOMB, a working committee, and the ORS-DCJ developed a new actuarial Sex Offender Risk Scale (SORS) for incorporation into the SVPASI. Data from the Judicial Branch ICON/Eclipse management information system was integrated into the SORS, with the expectation that a risk assessment with appropriate computer programming could be electronically self-populated, thereby eliminating the need for staff to compute the risk scores. An evaluation study completed in 2018 confirmed that the SORS accurately predicted new sexual and violent offense criminal filings over eight years.

Availability And Location Of Sex Offender Service Providers

As of June 30, 2025, Colorado's 23 judicial districts are served by 223 SOMB-approved adult treatment providers and 24 adult polygraph examiners.¹

¹ Data represent SOMB-approved adult providers as of June 30, 2025; juvenile-only providers are excluded. Providers may hold full or associate status, with some also listed as clinical supervisors or approved to work with DD/ID clients. Most evaluators also serve as treatment providers, creating overlap between categories.

Table 5 provides a breakdown of approved providers by operating level and service type, including specialty listings for FY 2025, while **Figure 7** shows the number of approved providers over the preceding decade. **Figures 8-10** show the distribution of approved providers across Colorado counties.

Table 5. SOMB-Approved Adult Provider Totals, June 30, 2025

Provider Status	Treatment Provider	<i>Treatment Provider DD/ID*</i>	<i>Clinical Supervisor Treatment*</i>	Evaluator	<i>Evaluator DD/ID*</i>	<i>Clinical Supervisor Evaluator*</i>	Polygraph Examiner	<i>Polygraph Examiner DD/ID*</i>
Full Operating	143	32	80	66	11	38	23	11
Associate	80	21	-	42	8	-	1	1
Total	223	53	80	108	19	38	24	12

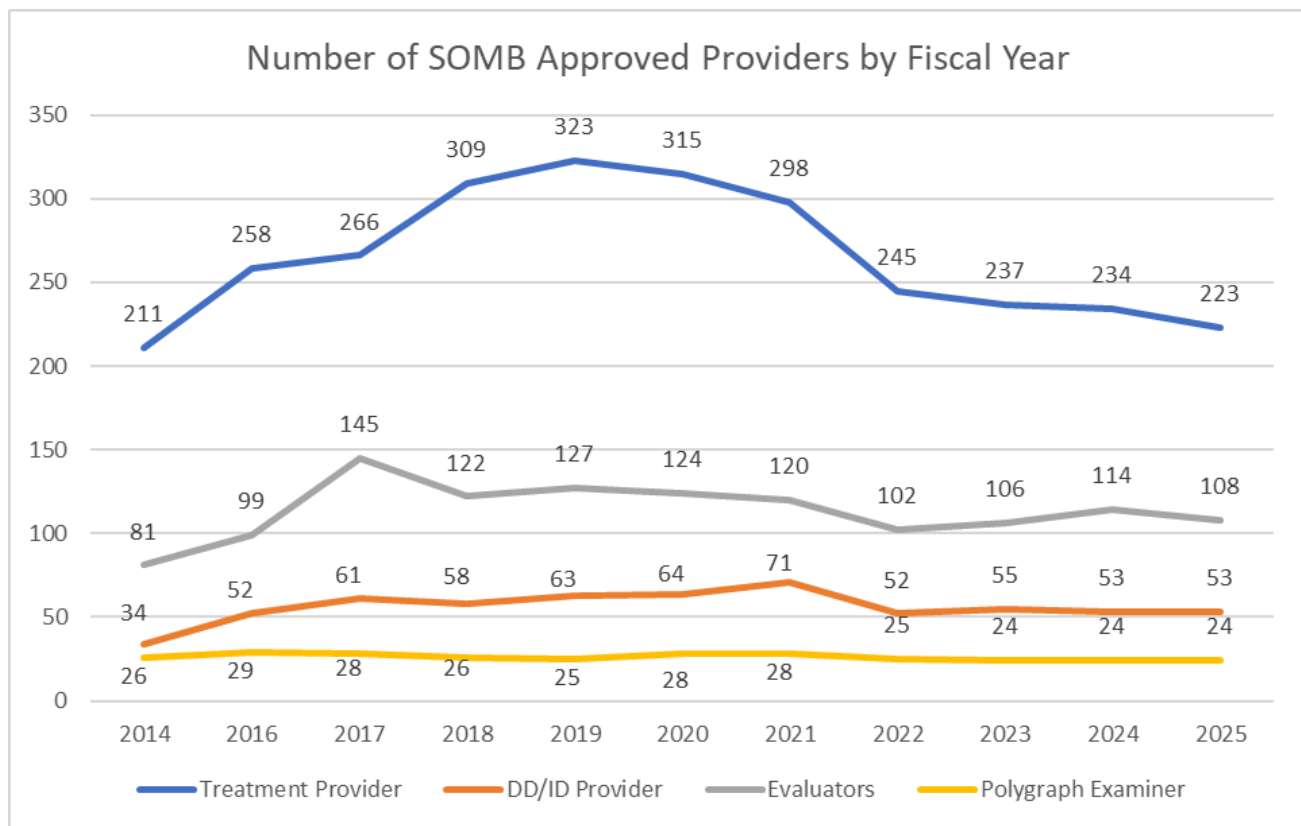
* These listing statuses are subcategories. For example, Treatment Provider DD/ID indicates the Full or Associate Treatment Provider also holds approval to work with clients who have a diagnosed developmental or intellectual disability.

Key observations include:

- **Adult Treatment Providers:** There were 143 full-operating and 80 associate-level adult treatment providers, representing a 4.7% decrease (11 providers) from FY 2024. The number of adult treatment providers with developmental/intellectual disability (DD/ID) listings remained consistent with FY 2024.
- **Adult Evaluators:** There were 66 full-operating and 42 associate-level adult evaluators, reflecting a 5.3% decrease (6 evaluators) from FY 2024. The number of adult evaluators with a specialty listing for developmental/intellectual disability (DD/ID) reflected a 5.0% decrease (1 evaluator) from FY 2024.
- **Polygraph Examiners:** The number of approved adult full-operating and associate-level polygraph examiners remained stable at 24 over the last three years. The number with a specialty listing for developmental/intellectual disability (DD/ID) was consistent with FY 2024 and FY 2023.
- **Geographic Reach:** A significant portion of approved providers (75%) offered services in multiple counties, averaging five different counties per provider.

In addition, in FY 2025, the SOMB processed a total of 285 applications. This included approving 70 applications for a new listed service, 107 renewal applications for an existing listing status, and 85 applications for upgraded listing statuses (e.g., Associate Level to Full Operating, or Full Operating to Clinical Supervisor) or an additional listing status (e.g., Developmentally Disabled/Intellectually Disabled).²

Figure 7. Number of SOMB-Approved Adult Service Providers by FY. For the data table, see Appendix A1.



² Approved providers may hold multiple listings (e.g., evaluation, treatment, supervision) and submit separate applications for each. Application data include both juvenile and adult listings, whereas the provider data above reflect adult-approved providers only.

Figure 8. Location of SOMB-Approved Adult Treatment Providers by County, June 30, 2025. For the data table, see Appendix A2.

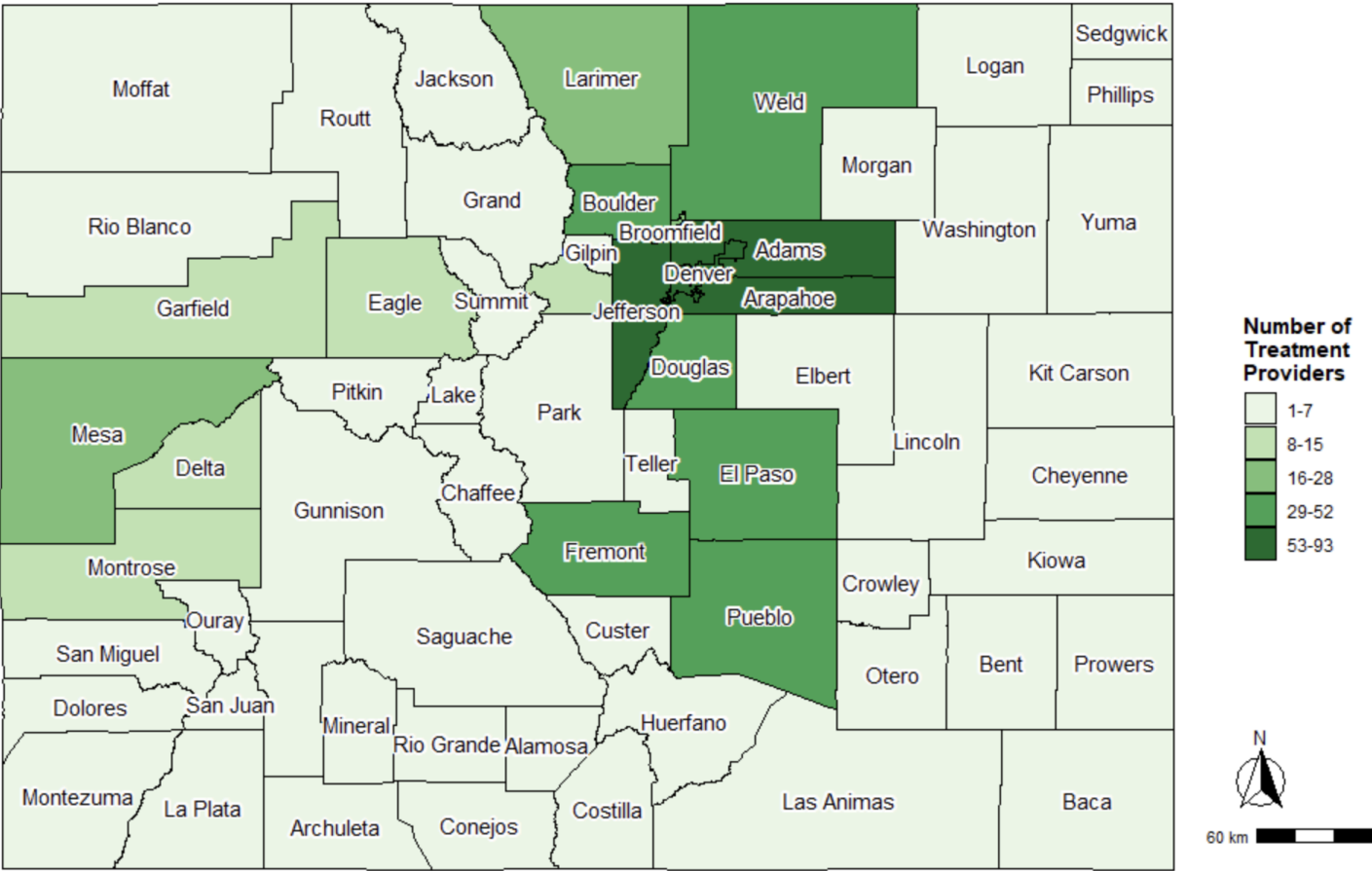


Figure 9. Location of SOMB-Approved Adult Evaluators by County, June 30, 2025. For the data table, see Appendix A2.

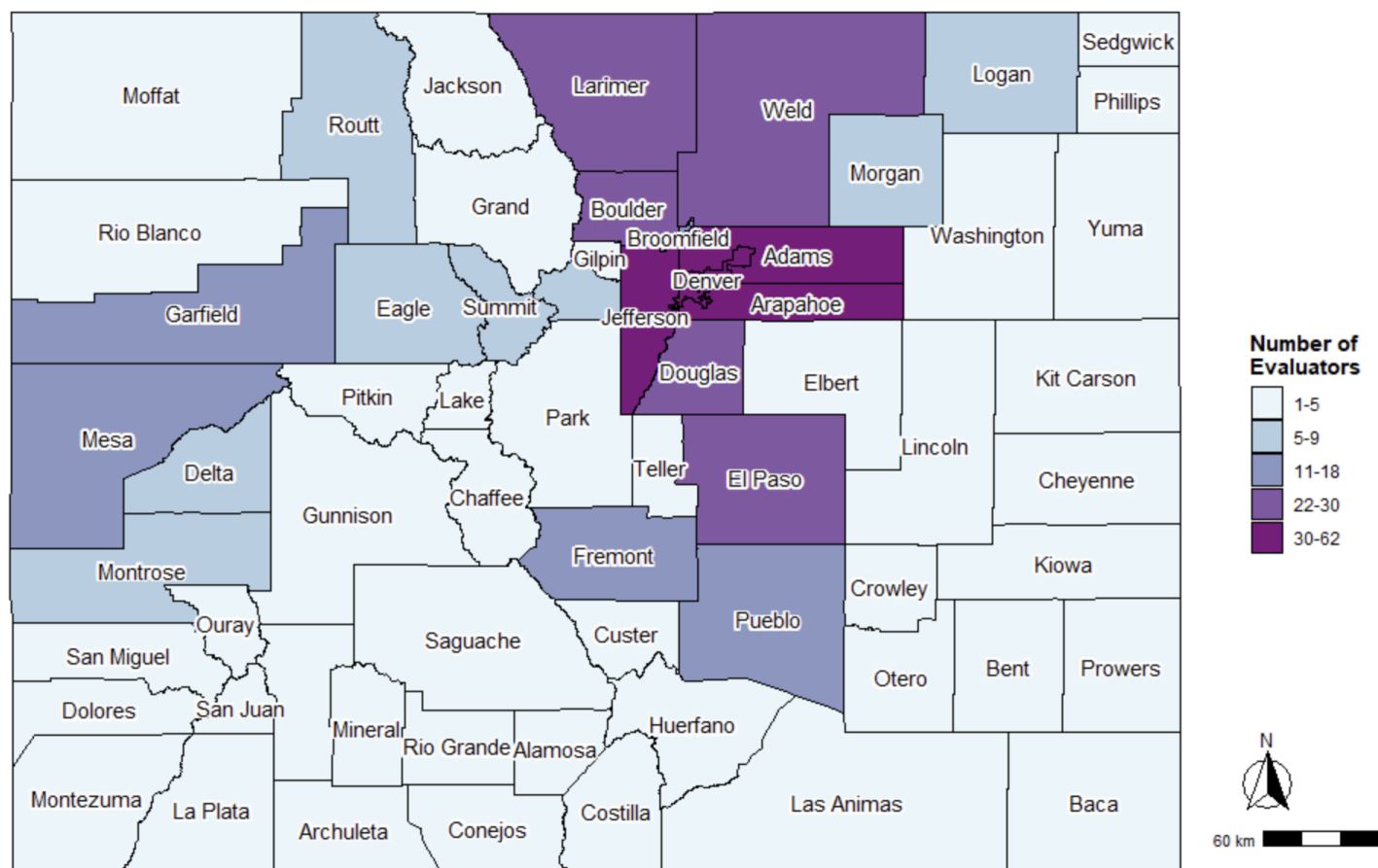
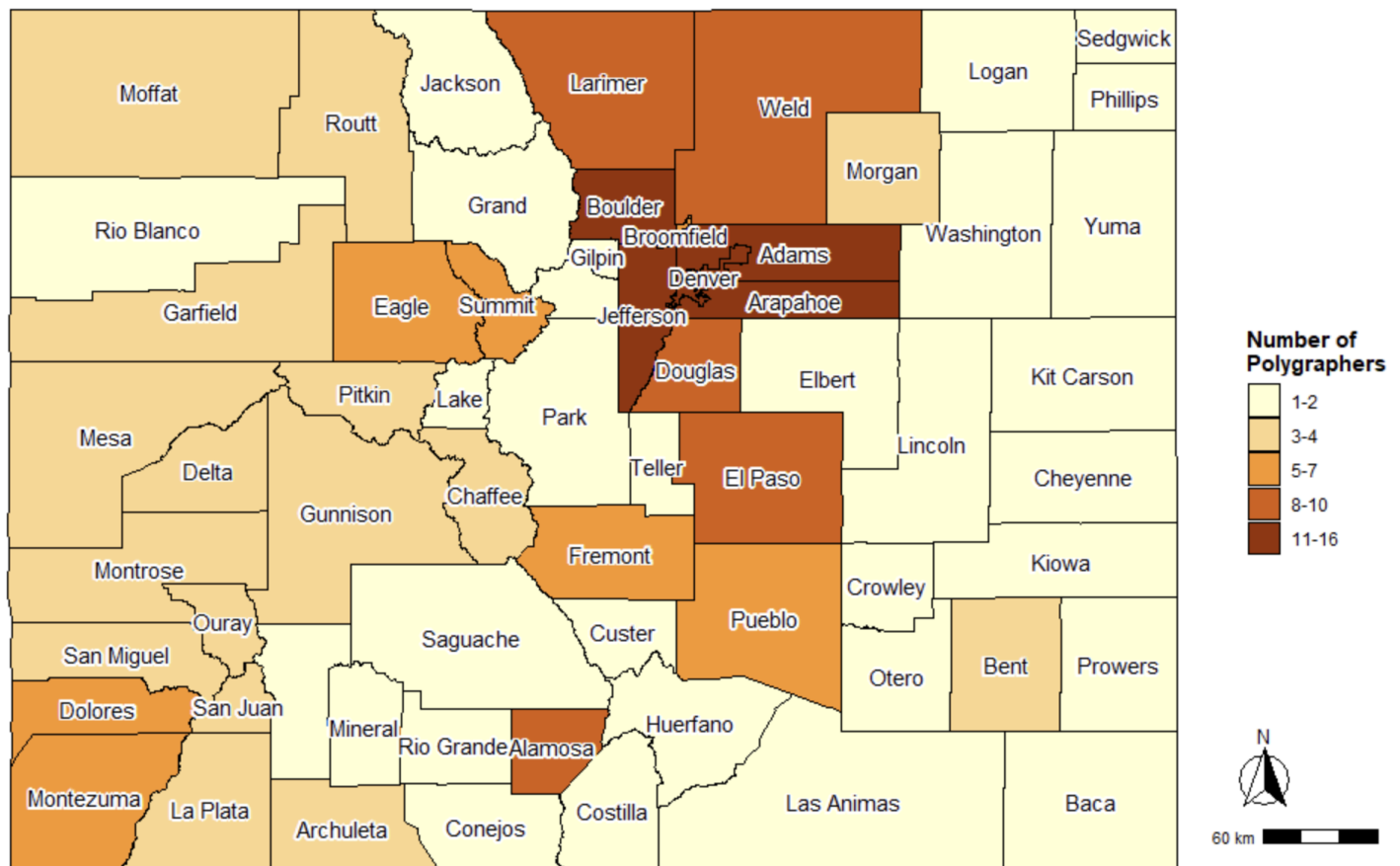


Figure 10. Location of SOMB-Approved Adult Polygraph Examiners by County, June 30, 2025. For the data table, see Appendix A2.



Cost Of Services

Table 6 presents the average costs of SOMB-approved provider services by judicial district. These figures were compiled from a July 2025 survey of SOMB-approved providers (see below). In community-based programs, individuals with a sex offense conviction are typically responsible for paying the costs of their treatment and behavioral monitoring. However, to improve accessibility, many providers use a sliding scale fee based on client income. The Adult Standards and Guidelines require weekly group treatment and semi-annual polygraph examinations at a minimum, although this may be adjusted according to client risk and needs, allowing for higher-risk individuals to receive more frequent monitoring and lower-risk individuals to receive less. In addition, most programs require other services at various stages of treatment.

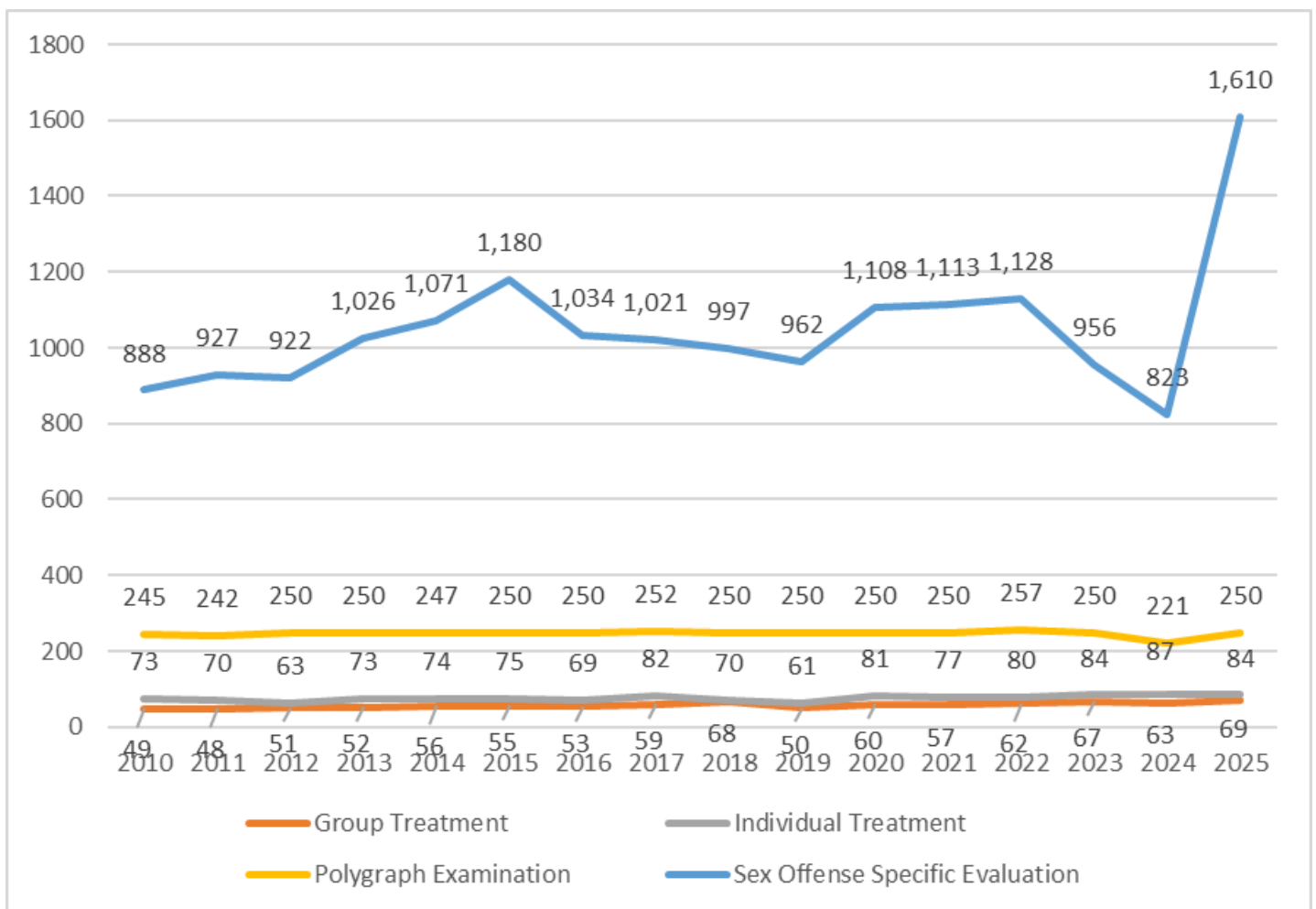
Table 6. Average Cost of Adult Services by Judicial District FY 2025

Judicial District	Sex Offense Specific Treatment Session	Sex Offense Specific Individual or Adjunct Treatment Session	Sex Offense Specific Evaluation, including PPG and VR testing	Polygraph Examination
1st	\$ 64.45	\$ 80.13	\$1,366.67	\$ 250.00
2nd	\$ 68.58	\$ 76.00	\$1,642.86	\$ 250.00
3rd	NA	NA	NA	NA
4th	\$ 66.00	\$ 76.67	\$1,481.25	\$ 254.11
5th	\$ 69.00	\$ 110.63	\$2,750.00	\$ 250.00
6th	\$ 71.25	\$ 85.00	\$1,287.50	*\$ 250.00
7th	\$ 60.00	\$ 85.00	\$1,400.00	NA
8th	\$ 66.67	\$ 101.11	\$1,658.33	\$ 250.00
9th	\$ 62.50	\$ 109.17	\$2,075.00	NA
10th	*\$ 65.00	*\$66.67	*\$800.00	*\$ 250.00
11th	\$ 72.17	\$ 87.50	\$1,587.50	\$ 250.00
12th	\$ 74.83	\$ 87.50	\$1,250.00	NA
13th	\$ 70.42	\$ 74.17	*\$1,275.00	\$ 250.00
14th	\$ 65.00	\$ 81.25	\$1,812.50	\$ 250.00
15th	\$ 95.00	\$ 61.25	\$1,000.00	NA
16th	\$ 70.00	\$ 70.00	\$1,216.67	NA
17th	\$ 67.40	\$ 91.17	\$2,114.58	\$ 250.00
18th	\$ 70.33	\$ 72.63	\$1,683.33	\$ 250.00
19th	\$ 68.33	\$ 99.44	\$2,125.00	\$ 250.00
20th	\$ 65.00	\$ 81.25	\$1,850.00	\$ 250.00
21st	\$ 60.00	\$ 85.00	*\$1,400.00	NA
22nd	\$ 67.50	\$ 85.00	\$1,250.00	NA
23rd	\$ 75.10	\$89.02	\$2,394.44	\$250.00
Overall Average	\$68.84	\$84.34	\$1,610.03	\$250.27
Range	\$60.00-\$95.00	\$61.25-\$110.63	\$800.00-\$2750.00	\$250.00-\$254.11

*Denotes only one responding provider/agency from that Judicial District. NA denotes “Not Available” due to no responding provider/agency from that Judicial District. Data were obtained in July 2025. Averages and ranges exclude the state-paid-for Department of Corrections services.

Figure 11 presents the average costs of approved provider services by fiscal year. While the average costs for group treatment, individual or adjunct treatment, and polygraph examinations have remained stable, sex offense-specific evaluations have significantly increased. This trend may not all be due to a true price increase, as the average cost can be skewed by the high degree of fee variation among evaluators and by different providers responding to the survey each year. The average evaluation fee excludes services provided by staff in correctional facilities, as these are not charged, but does include fees for sexual interest testing, a service that may not always be conducted.

Figure 11. Average Costs of SOMB-Approved Adult Provider Services by FY. For the data table, see Appendix A3.



Sex Offender Surcharge Fund

Pursuant to § 16-11.7-103(4)(c) C.R.S., the SOMB is responsible for developing a plan for the allocation of money deposited in the sex offender surcharge fund. For FY 2025, the SOMB recommended a total allocation of \$846,681 from this fund to permitted agencies to support the treatment and monitoring of individuals convicted of sex offenses.³ An amount of \$453,044 was specifically designated for the Judicial Department to cover the costs of sex offense-specific evaluations and assessments for pre-sentence investigation reports for indigent individuals with a sex offense conviction, as well as to assist with post-conviction polygraph examination costs. Local probation departments administer these funds for these purposes. For FY 2026, the SOMB recommended a total allocation of \$1,060,843, with \$453,044 again allocated to the Judicial Department.⁴

Provider Survey

The SOMB administers an annual survey to agencies with SOMB-approved providers. The survey aims are twofold: (i) to determine the average costs of services in each judicial district, as presented above, and (ii) to assess the effects of providing services to clients under lifetime supervision sentences. This year, 37 agencies responded, which accounts for over 50% of all approved adult providers.⁵ The data presented here is derived from responses by providers who work with adults convicted of sexual offenses.

Of the responding agencies, 20.6% reported having 20 or more offenders with indeterminate sentences, 11.8% had 10-14, 53% had 1-9, and 15% had none. For agencies that served offenders with indeterminate sentences, over 90% reported an average treatment length of one to six years, while 7% reported nine years or more, consistent with FY 2024 findings. A small percentage (13.3%) reported that the Lifetime Supervision Act negatively affected their program's service delivery.

³ Recommendation ratified at SOMB meeting September, 20, 2024.

⁴ Recommendation ratified at SOMB meeting May 16, 2025.

⁵ The total number of providers included 171 treatment providers, 37 evaluators, and 5 polygraph examiners. This count encompasses all designated provider positions within each agency, even if those positions were vacant.

The survey also included specific questions about potential challenges in treating offenders serving lifetime supervision. Over 50% of the respondents reported no challenges. The two most frequent issues reported by the others were: concerns about continuing treatment when clients seemed to have met their goals or lacked clear needs; and client disengagement due to demoralization or hopelessness. The survey also asked specific questions about supervision expectations and system coordination. About 70% of respondents indicated encountering no challenges in this area, while the two most reported by the others were: conflicting expectations among treatment providers, supervision officers, and the parole board; and disagreements within the Community Supervision Team (CST) concerning appropriate treatment needs or discharge timing.

Regulation And Review Of Services Provided By SOMB-Approved Providers

Application Process

The SOMB-approved adult provider application process consists of a background investigation by the Application Review Committee (ARC) that includes personal interviews of applicant references and referring criminal justice personnel. Approval of an applicant results in the applicant being placed on the SOMB Approved Provider List, which indicates (i) the provider has met the education and experience qualifications established in the Adult Standards and Guidelines, and (ii) has provided sufficient information for the committee to decide that the services provided appear in accord with the Adult Standards and Guidelines. Each provider also must agree in writing to provide services in compliance with the Adult Standards and Guidelines. Importantly, placement on the SOMB Approved Provider List is neither a form of licensure nor certification. The list does not imply that all providers offer the same services, nor does it create an entitlement for referrals from criminal justice system agencies.⁶

The current approved provider reapplication process includes an expedited background check and completion of a short reapplication form. Providers are also required to submit work products for the ARC to review. Additionally, Standards Compliance Reviews (SCR) are used by the ARC to assess providers' compliance with the Adult Standards and Guidelines. These can be randomly selected, for cause, or voluntary. SCRs involve SOMB staff and the ARC conducting a thorough review of provider compliance through a comprehensive

⁶ The application process described in this section applies to both adult and juvenile approved providers.

review of file information and consultation with the provider. The purpose of the SCRs is to increase the SOMB's compliance oversight of providers through a more detailed and in-depth evaluation of their service delivery. Since January 1, 2025, the SOMB is required by statute to conduct compliance reviews on at least 10% of providers every two years.

Competency-Based Model

The SOMB uses a Competency-Based Model (CBM) to aid clinical supervisors in evaluating applicants on competencies specific to the field of sex offense-specific evaluation and treatment. The CBM was developed by SOMB's Best Practices Committee and implemented in February 2016. The CBM utilizes qualitative and quantitative measures to assess the proficiency level of existing approved providers and candidates for provider approval. Knowledge and Integration of SOMB Standards and Clinical Intervention and Goal Setting Skills is one of the specific content areas deemed crucial to becoming an effective treatment provider or evaluator.

Adult Standards Revision Committee

In July 2014, the SOMB reconvened the Adult Standards Revision Committee (ASRC) to recommend updates to the Adult Standards and Guidelines and ensure alignment with current and emerging research, and address necessary administrative updates. In FY 2025, several key revisions were adopted, including:

- *Standard 3.500: Acceptance of Responsibility and Accountability.* This standard was revised from "Managing Clients in Denial" to better support providers in working with clients who maintain categorical denial of their sex offense.
- *Standards 3.600 and 3.700: Transition Points, Continuity of Care, and Treatment within the Colorado Department of Corrections (DOC).* These standards were updated to incorporate best practices and clarify roles and responsibilities related to continuity of care.
- *Standard 5.100 (Subsections 5.110, 5.115, and 5.120): Responsibilities of the Supervising Officer Within the Team.* These subsections were revised to align with the statutory requirement, effective June 5,

2023, mandating that adult sex offenders be provided with a complete list of SOMB-approved treatment providers, along with guidance on implementation.

- *Standard 4.000 and Appendix A: Qualifications of Treatment Providers, Evaluators, and Polygraph Examiners.* The definition of criminal history and the qualifications for polygraph examiners were updated to align with recent legislative changes.

Sex Offender Service Providers Requirements for Listing Status

In addition to meeting all the other applicable Adult Standards and Guidelines, the general requirements for service providers are detailed in **Table 7**. For a comprehensive list of requirements, please refer to Section 4.000 of the [Adult Standards and Guidelines](#).

Table 7. Approval Requirements for Treatment Providers, Evaluators, and Polygraph Examiners

Service Level and Service Type	Current Competency-Based Approval Requirements
Full Operating Level Treatment Provider:	Treatment Providers seeking placement at the Full Operating Level must demonstrate the necessary competencies, as determined by the ARC, and complete the minimum professional training hours. Co-facilitation hours may also be required. Once approved, providers at this level may practice without supervision and can apply for clinical supervisor status. Providers at this level must demonstrate competency every three years to renew their status at this level.
Associate Level Treatment Provider:	Treatment Providers seeking initial or renewed placement at the Associate Level status must demonstrate competency at the Associate Level as verified by a clinical supervisor. They also must receive the minimum required professional training hours, which include initial Adult Standards and Guidelines orientation and booster training. Co-facilitation hours may also be required. To maintain status, providers at this level must demonstrate competency every three years. During the initial three-year renewal, or if there is a status change, they must also include work products in their re-application.
Full Operating Level Evaluator:	Evaluators seeking placement at the Full Operating Level must demonstrate the necessary competencies as determined by the ARC and complete the minimum professional training hours. Co-facilitation hours may also be required. Once approved, providers at this level may practice without supervision and can apply for clinical supervisor status. Providers at this level must demonstrate competency every three years to renew their status at this level.

Service Level and Service Type	Current Competency-Based Approval Requirements
<i>Associate Level Evaluator:</i>	Evaluators seeking initial or renewed placement at the Associate Level status must also apply for placement as an Associate Level Treatment Provider. Providers must demonstrate competency at the Associate Level as verified by a clinical supervisor. They must also complete the minimum professional training hours, which include initial Adult Standards and Guidelines orientation and booster training. To maintain status, providers at this level must demonstrate competency every three years.
<i>Clinical Supervisor Listing Status:</i>	Full Operating providers may apply to become an approved clinical supervisor once they have met the required qualifications and completed the following steps: (i) received supervision from an SOMB-approved clinical supervisor to assess their supervisory competence; (ii) be assessed as competent in SOMB clinical supervisor Competency 1; and (iii) provide supervision, as deemed appropriate, under the oversight of their SOMB clinical supervisor.
<i>Full Operating Level Polygraph Examiner:</i>	Polygraph Examiners seeking placement at the Full Operating Level must have conducted a minimum of 200 post-conviction sex offender polygraph tests and completed 100 hours of specialized sex offender polygraph examiner training.
<i>Associate Level Polygraph Examiner:</i>	Polygraph Examiners seeking placement at the Associate Level must work under the guidance of a qualified Polygraph Examiner listed at the Full Operating Level while completing the requirements for Full Operating Level.
<i>DD/ID Listing Status:</i>	To be approved to work with offenders with developmental or intellectual disabilities, providers must apply for SOMB approval. To gain approval, providers must demonstrate specific experience, knowledge, and competence with this population by providing evidence of coursework, training, and work experience.

Summary

This report is intended to provide the Colorado General Assembly with information on the twenty-fifth year of implementation of the Lifetime Supervision Act in Colorado. The Colorado Department of Corrections, the Colorado Judicial Department, and the Colorado Department of Public Safety work collaboratively in implementing comprehensive programs for managing sex offender risk in Colorado.

During FY 2025, 118 Lifetime Supervision Sex Offenders were admitted to prison and 122 were removed from Lifetime Supervision status. As of June 30, 2025, 2,800 inmates were under CDOC supervision for sexual offense convictions sentenced under the Lifetime Supervision provisions. The Sex Offender Treatment and Monitoring Program (SOTMP) for CDOC inmates was designed to utilize the most extensive resources with those inmates who have demonstrated a desire and motivation to change. Because the Lifetime Supervision legislation is not intended to increase the minimum sentence for sex offenders, the Colorado Department of Corrections has designed treatment formats which provide inmates the opportunity to progress in treatment and be considered a candidate for parole within the period of their minimum sentence. In FY 2025, 121 Lifetime Supervision Sex Offenders were released to parole. During FY 2025, 175 Lifetime Supervision Sex Offenders participated in treatment and 94 Lifetime Supervision Sex Offenders met the statutory and departmental criteria for successful progress in prison treatment.

The Parole Board completed 664 applications for release hearings for 624 Lifetime Supervision Sex Offenders during FY 2025; some inmates were not meeting the criteria at the time of their hearing, and some had multiple hearings over the course of the year. The Parole Board granted discretionary release for 75 of the 624 Lifetime Supervision Sex Offenders, although not all of these were paroled by the end of the fiscal year.

The Parole Board completed 61 revocation hearings for 54 Lifetime Supervision Sex Offenders in FY 2025, for whom 44 hearings resulted in revocation of parole, 2 hearings resulted in continuations on parole, 1 inmate self-revoked their parole, and 7 hearings were not yet finalized at the end of the fiscal year.

As of June 30, 2025, there were approximately 1,745 individuals under SOISP probation supervision. Of these, approximately 856 (49%) probationers were under lifetime supervision. A comparison of data for FY 2024 to FY 2025 reflects a 5% (3 cases) decrease in the number of individuals eligible and sentenced to

indeterminate lifetime sentences and under SOISP supervision. New eligible cases for indeterminate lifetime term sentences to probation include 56 probationers under lifetime probation with SOISP, 106 probationers under non-lifetime probation with SOISP, and 138 probationers under regular probation. In FY 2025, 65 sex offenders had their lifetime supervision sentences terminated (1 revoked – new felony, 2 revoked – new misdemeanor, 19 revocations – technical violations, 1 terminated – deportation, 4 terminated – death, 7 revoked – absconded, 31 terminated – successful terminations), and 22 offenders under lifetime supervision completed SOISP and were subsequently transferred to regular probation.

The expenses associated with sex offender offense-specific evaluations continue to be substantial annually. Probation funds have been required to pay for these evaluations and assessments to avoid any delays in case processing for the courts and to ensure that probationers who are unable to pay all of the costs associated with court-ordered evaluation and treatment are not returned to court for revocation based on non-payment. Revocations generally result in sentences to the CDOC, which is a significantly higher cost option for the state. The Judicial Department is seeking alternative options to manage and curb these costs.

The number of approved treatment providers decreased this fiscal year by 4.7% (11 providers). The number of approved full operating evaluators decreased by 5.3% (6 evaluators). The number of approved polygraph examiners has remained stable over time, and was the same in FY 2024 and FY 2023. The availability of services across the state has also remained stable, with providers operating in each county, a significant portion of whom (75%) offered services in multiple counties. Notwithstanding the average cost for sex offense-specific evaluations, average costs for services have also remained fairly stable.

In summary, the number of sex offenders subject to Lifetime Supervision in prison and in the community is rising, resulting in increased caseloads for those agencies responsible for the management of sex offenders. Additionally, sex offenders will continue to be identified in the future, including those who are subject to lifetime supervision. In an effort to achieve community safety, accurate static and dynamic risk assessments must be an element of sex offense-specific evaluations to ensure the proper placement of sex offenders in an appropriate level of supervision, thereby using available resources wisely. Accordingly, the Colorado Department of Corrections, the Colorado Judicial Department, and the Colorado Department of Public Safety

will continue to evaluate the impact of the Lifetime Supervision Act on sex offenders both in prison and in the community.

Appendix A. SOMB Data Tables

A1. Data Table for Figure 7: SOMB Approved Adult Service Providers by Fiscal Year.

FY	Treatment Providers	Treatment Providers with DD/ID Approval	Evaluators	Polygraph Examiners
2014	211	34	81	26
2016	258	52	99	29
2017	266	61	145	28
2018	309	58	122	26
2019	323	63	127	25
2020	315	64	124	28
2021	298	71	120	28
2022	245	52	102	25
2023	237	55	106	24
2024	234	53	114	24
2025	223	53	108	24

A2. Data Table for Figures 8-10: SOMB Approved Adult Providers by County, June 30, 2025

County Name	Adult Treatment Provider	Adult Evaluator	Adult Polygraph Examiner
Adams	76	48	14
Alamosa	6	4	8
Arapahoe	64	45	14
Archuleta	4	4	3
Baca	2	2	2
Bent	2	2	3
Boulder	36	24	12
Broomfield	24	17	6
Chaffee	7	4	4
Cheyenne	4	3	2
Clear Creek	10	9	2
Conejos	3	2	1
Costilla	3	2	1
Crowley	4	3	2
Custer	3	2	1
Delta	10	6	4
Denver	93	62	14
Dolores	2	2	5
Douglas	46	30	10
Eagle	12	9	5
El Paso	51	22	9
Elbert	4	3	2
Fremont	38	12	6
Garfield	14	11	4
Gilpin	5	5	2
Grand	5	4	2
Gunnison	5	2	3

County Name	Adult Treatment Provider	Adult Evaluator	Adult Polygraph Examiner
Hinsdale	2	2	2
Huerfano	3	3	1
Jackson	1	1	1
Jefferson	66	39	16
Kiowa	2	1	1
Kit Carson	2	1	2
La Plata	4	3	4
Lake	4	3	1
Larimer	28	21	8
Las Animas	2	2	1
Lincoln	2	1	2
Logan	7	7	2
Mesa	17	10	4
Mineral	2	1	1
Moffat	4	3	4
Montezuma	5	4	5
Montrose	11	7	4
Morgan	7	7	3
Otero	3	3	2
Ouray	1	1	4
Park	7	5	2
Phillips	2	2	1
Pitkin	3	3	3
Prowers	2	2	1
Pueblo	30	18	6
Rio Blanco	4	4	2
Rio Grande	3	2	1
Routt	7	6	3

County Name	Adult Treatment Provider	Adult Evaluator	Adult Polygraph Examiner
Saguache	3	2	1
San Juan	3	3	4
San Miguel	1	1	3
Sedgwick	3	3	2
Summit	7	6	5
Teller	4	4	2
Washington	3	3	2
Weld	37	29	8
Yuma	5	4	2

A3. Data Table for Figure 11: Average Costs of Approved Adult Provider Services by Fiscal Year.

FY	Group Treatment Session	Individual Treatment Session	Offense Specific Evaluation	Polygraph Examination
2010	49	73	888	245
2011	48	70	927	242
2012	51	63	922	250
2013	52	73	1,026	250
2014	56	74	1,071	247
2015	55	75	1,180	250
2016	53	69	1,034	250
2017	59	82	1,021	252
2018	68	70	997	250
2019	50	61	962	250
2020	60	81	1,108	250
2021	57	77	1,113	250
2022	62	80	1,128	257
2023	67	84	956	250
2024	63	87	823	221
2025	69	84	1610	250