

DISABILITY LAW COLORADO'S  
OLDER AMERICANS PROGRAMS:

**THE COLORADO LONG-TERM  
CARE OMBUDSMAN PROGRAM  
&  
LEGAL ASSISTANCE  
DEVELOPER PROGRAM**

**2015**

**ANNUAL REPORT**



**DISABILITY LAW  
COLORADO™**

Protecting the rights of Coloradans of all ages since 1976

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## ABOUT DISABILITY LAW COLORADO

Disability Law Colorado\* protects and promotes the rights of people with disabilities and older people in Colorado through direct legal representation, advocacy, education and legislative analysis. We specialize in civil rights and discrimination issues, and are committed to increasing opportunities for adults and children with disabilities to live, work and attend school in the community, enjoying independent and productive lives. We also protect the rights of people in institutions to be treated with dignity and respect.

As Colorado's Protection and Advocacy System (P&A), Disability Law Colorado has authority under federal law to gain access to facilities and records in order to investigate allegations of abuse and neglect. Similar P&A organizations exist in every state and territory as part of the National Disability Rights Network.

The Colorado Long-Term Care Ombudsman and Legal Assistance Developer programs have been administered by Disability Law Colorado since 1988 along with other disability advocacy programs.

*\*Disability Law Colorado was formerly known as The Legal Center for People with Disabilities and Older People.*

### *On the cover:*

Vera Cunningham, aged 102, is shown breaking ground for the new Green House Project in Akron, Colorado. Vera was a life-long resident of Washington County. Vera spent many years volunteering for the Area Agency on Aging. She visited local nursing homes and meal sites, and regularly attended the regional meetings. Vera lived independently until 2011 when she moved into a nursing home. Vera was very much looking forward to a new home in the Green House; unfortunately she died in October 2015.

Joe Theurer (right) has also lived most of his life in Washington County, farming wheat, corn and milo. Joe served in the U.S. Army in 1945. Joe is looking forward to living in the Green House, which is scheduled to open in late spring 2016.

Pictured between Joe and Vera is Washington County Commissioner David Foy, who has given many hours to the Green House Project.

*\*The mission of the Green House Project, a national movement: We envision homes in every community where elders and others enjoy excellent quality of life and quality of care; where they, their families, and the staff engage in meaningful relationships built on equality, empowerment, and mutual respect; where people want to live and work; and where all are protected, sustained, and nurtured without regard to the ability to pay.*



## WHAT DO THE OMBUDSMEN DO?

Ombudsman (om-budz-man) is a Swedish word meaning “one who speaks on behalf of another.” Ombudsmen protect the rights of people living in nursing homes and assisted living residences.

Colorado has 47 full- and part-time (approximately 35 full-time equivalent) staff ombudsmen across Colorado. They are joined by 16 volunteer ombudsmen who gave 1,743 hours in 2015. These 63 ombudsmen are fully certified. To attain certification, they must complete an orientation within their local region designed to help build familiarity with the facilities, residents and staff, the regulations and the regulatory system. They must also complete 15 hours of continuing education each year.

While most residents receive good care in long-term care facilities, far too many are neglected and others are victims of psychological, physical, and other kinds of abuse. Licensed facilities are required to allow ombudsmen to enter the facility and visit with residents, without interference from facility staff.

The role of the ombudsman is to act as an advocate for the resident and assist the resident in resolving issues related to care, health, safety, or the resident’s rights. Ombudsmen strive to resolve complaints that range from simple quality of care issues, such as a resident’s preferred time for breakfast, to very serious, sometimes life-threatening, concerns involving abuse and neglect. Other services include attending family and resident council meetings at a licensed facility, providing community education, and providing training to facility staff and other professional agencies that work with at-risk adults and residents of long-term care facilities.

**The Colorado Long-Term Care Ombudsman Program** and the Legal Assistance Developer Program work together to protect and promote the rights of Colorado’s older adults and to improve their quality of life.

Both programs are administered by Disability Law Colorado under a contract with the Colorado Department of Human Services, Division of Aging and Adult Services. The two programs operate in conjunction with the 16 regional Area Agencies on Aging (AAA) to coordinate services statewide.

## WHAT DO THE LEGAL ASSISTANCE PROVIDERS DO?

Each of Colorado’s 16 Area Agencies on Aging has a legal assistance provider who coordinates free civil legal services for older persons (defined as adults 60 and older) under the Older

Americans Act. Colorado has a total of 22 paid attorneys and numerous pro bono attorneys who in 2015 provided legal assistance to 8,227 older persons.

Based upon the needs of the community, each AAA establishes the types of legal services that may be provided. Services are targeted to elders with the greatest economic and/or social need. The overarching goals of the Older Americans Act (OAA) are the protection and enhancement of the autonomy, dignity, financial security, health, and rights of older Americans. Legal assistance is a critical service in meeting these goals. Vulnerable older persons are less likely to seek the assistance of an attorney, either because he/she cannot afford one or do not realize that he/she has a legal need.

Legal assistance providers help older adults with a variety of legal issues:

- efforts to save their home from foreclosure and from home repair scams
- responding to creditor-initiated bank garnishments for unpaid medical bills and asserting the elder’s rights to exemptions
- financial exploitation, including misuse of a power of attorney by a relative or caregiver
- denials, reductions and terminations of Medicaid and other public benefits
- preparation of deeds, wills and advance directives
- guardianships and conservatorships

*Beautiful young people are accidents of nature, but beautiful old people are works of art.”*

*~ Eleanor Roosevelt*

# THE COLORADO LONG-TERM CARE OMBUDSMAN PROGRAM IN 2015

As State Long-Term Care Ombudsman, Anne Meier supports the statewide long-term care ombudsman program through direct consultation to residents, family members, facility staff and policy makers. In 2015, she

- Conducted five on-site evaluations of local ombudsman programs. The purpose of these visits is two-fold: first, to seek strengths and areas of improvement for each program, and to support implementation of best practices across the state; second, to provide material support, problem-solving, strategizing and information pertinent to each local program, based on its unique needs and attributes.
- Spoke before 19 groups including Senior Day at the Capitol and other public forums reaching approximately 1,850 people. In addition to an overview of the ombudsman program, presentation topics included the provisions in law regarding the ombudsman's access to facilities and records, the importance of confidentiality, elder abuse, elder justice activities, and resident rights.
- Participated in a panel discussion with national, state and local experts addressing elder abuse in the community and in long-term care facilities.
- Testified at the Colorado General Assembly on behalf of a bill that would have required education every two years for administrators of assisted living facilities (the bill did not become law) and monitored and educated legislators about several bills affecting elders in long-term care.
- Applied for and received a technical assistance grant to build capacity within the Long-Term Care Ombudsman Program and long-term care in the area of emergency preparedness. The end result was several expert presentations at statewide conferences for Adult Protective Services staff and local ombudsmen, and the establishment of a stakeholder group addressing the gaps in preparedness across the state among facilities, ombudsmen, local emergency re-

sponse and state supports. The State Long-Term Care Ombudsman facilitates this work group.

- Served as a member of the Long-Term Care Informal Dispute Resolution Committee, as well as the Independent Dispute Resolution Committee, and attended several policy committee meetings within the Colorado Department of Public Health and Environment and Health Care Policy and Financing. Issues addressed in these committees directly impact the daily lives of residents.
- Monitored the activities of the Strategic Action Planning Group on Aging (SAPGA), which is



From the desk of

**ANNE MEIER**

State Long-Term Care Ombudsman

*Colorado nursing homes and assisted living residences care for and serve over 40,000 people daily. The mission is an important one – elders and their families and loved ones have entrusted their care and nurture to the staff and professionals of these facilities. Within the building they must ensure that proper medical care is provided and that all the “activities of daily living” are accomplished. In real terms this is moving through the day as a typical person would – caring for your body and your health activities such as bathing, eating, walking (or other means of mobility if you use a wheelchair or other device), toileting and dressing. These are vital for basic maintenance of life, but they are not what brings joy, meaning and purpose to life. And so long-term care, to be successful and to fulfill the meaning of home, must also address and offer ways for elders to maintain dignity while in a time of decline, allowing for full expression of each individual’s human rights.*

a broad-brush look across services and infrastructure for all older adults in Colorado. The end product will be a comprehensive report that will inform the Legislature and the provider system as they design and build programs and resources (workforce, transportation, health care, public access and more) for elders for the next 30 to 50 years. Additionally, Anne is an active member of the Health and Wellness subcommittee of the SAPGA.

- Served as a member of the National Association of State Ombudsman Programs (NASOP) Program Evaluation, Training and Federal Policy committees.
- Appointed by Governor Hickenlooper as a member of the State Veterans Community Living Centers Commission until July 2019.
- Joined the Board of the Colorado Senior Lobby.

*Long-term care ombudsmen across Colorado see dedicated staff that work long and hard every day to serve our elders with tender care. Staff offer words of encouragement and hands that provide tender care in intimate moments. We are heartened by all the kindness and skill that staff bring to residents. However, this system is also strained by low wages, high needs, staff turnover, and a growing population of vulnerable elders. A developing challenge is that as hospitals discharge more quickly after resolution of acute care, we see elders with increasingly complex medical or behavioral care coming into long-term care. The heightened acuity necessitates new skills and models of care that preserve a resident's rights while also keeping the resident, other residents, and the staff safe from unreasonable harm.*

*In the months and years to come, the Colorado Long-Term Care Ombudsman Program calls on stakeholders across the state to come to the table with integrity and innovation so we may preserve what is good in providing assistance to elders and others in long-term care settings, while finding new ways of fostering independence and a robust quality of life for every resident in that home. In this way, individually and collectively, we may begin to fulfill the promise of "a life worth living" that is due to every citizen of any age.*

Anne Meier



## SNAPSHOT OF LONG-TERM CARE IN COLORADO

Colorado has 222 nursing homes with a total of 20,715 beds and 617 assisted living residences with a total of 20,006 beds.

In Colorado, nursing facilities must be visited by an ombudsman at least once a month and assisted living residences at least quarterly. In SFY 2014/15, local ombudsmen made 8,586 visits to facilities—many more than were required—to monitor the quality of care, quality of life and to investigate individual complaints. This includes conversations with individual residents and attending resident council meetings.

In Fiscal Year 2014/15, across Colorado, local ombudsmen

- ☑ Investigated 3,897 complaints over 90% of which were partially or fully resolved to the satisfaction of the resident.
- ☑ Provided 4,830 facility consultations and 7,346 consultations to individuals, residents and family members on a wide range of long-term care issues and concerns.
- ☑ Attended 1,365 resident council meetings and conducted 627 community education sessions and 92 training sessions for facility staff.

### THE TOP FIVE COMPLAINTS IN NURSING HOMES AND ASSISTED LIVING SETTINGS IN 2014/15

1. **Resident Care** – includes medical care and personal care 1,126
2. **Quality of Life** – includes meals, environment and activities 715
3. **Resident Rights** – includes autonomy/choice/exercise of rights/privacy 678
4. **Admission/Transfer/Discharge/Eviction** 340
5. **Administration** – includes attitudes, policies, staffing 340



# THE LEGAL ASSISTANCE DEVELOPER PROGRAM IN 2015

In 2015, Mary Catherine Rabbitt, as the Legal Assistance Developer:

- Responded to 1,068 requests for technical assistance
  - 352 from local legal providers, ombudsmen and AAA directors
  - 793 from other professionals, such as attorneys and social workers
  - 61 from seniors and family members
- Conducted 20 trainings for a total of 34.9 hours to 793 participants (including a two-day training for local legal assistance attorneys and volunteers and two trainings for Colorado Legal Services' attorneys) on such topics as: Sources of Law for Ombudsmen, Unrepresented Residents in Long-term Care, Assisted Living and Nursing Home Issues, The Affordable Care Act and Seniors, Guardianship Law in Colorado, "Dual Eligibles" (persons receiving both Medicare and Medicaid), Current Issues in Colorado Medicaid for Long Term Services and Supports, How to Choose a Nursing Home or Assisted Living Residence, Elder Abuse, Advance Directives, Misuse of Power of Attorney, and The Role of the Legal Assistance Provider.
- Conducted four on-site evaluations of local Legal Assistance Programs in Denver, Sterling, Greeley and Cortez and reviewed desk evaluations from the other 12 local programs.

Across Colorado, the Legal Assistance Developer Program served 8,227 older adults in 2015 (up from 4,355 the previous year). The breakdown by region is as follows:

The table demonstrates that while some matters can be handled rather quickly (e.g., preparation of documents) others may need several hours of legal work, including appearances in

## LEGAL ASSISTANCE DEVELOPER PROGRAM

October 1, 2014 - September 30, 2015

Region #	Number of Clients Served*	Hours of Service	Pro Bono Unit	Number Unable to Serve
1	58	74	6	0
2A	315	300	0	0
2B	148	696	0	108
3A	4,526	4,860	506	366
3B	280	573	132	52
4	176	666	103	37
5	10	9	80	0
6	171	296	0	0
7	128	1,785	223	11
8	0	0	3	0
9	207	181	34	2
10	376	570	318	15
11	1,376	887	68	29
12	175	103	16	0
13	51	194	35	2
14	230	281	0	0
<b>Total</b>	<b>8,227</b>	<b>11,475</b>	<b>1,522</b>	<b>622</b>
State-wide Summary	8,227	11,475	1,522	622
Difference	0	0	0	0

\*This is not an unduplicated count of clients.

court or before an administrative law judge. The total number of clients served was 8,227, but their cases required 11,475.38 hours of legal work, 1,522.7 of which were done on a pro bono basis or at a greatly reduced hourly rate (the average hourly rate across the state was \$76.65 per hour). In some of the larger regions, legal providers were not able to serve all clients who came to them, leaving 622 seniors who were not able to be served (down from 681 the previous year).

In 2015, we inaugurated a new tracking form that allowed us to see the types of legal cases handled in each region and their ultimate disposition. This form also gave us a profile of clients “most in need,” as directed by the Older Americans Act. These include low-income seniors, seniors living in rural areas, seniors who are members of a minority and seniors who are frail and/or disabled. As a result of the more detailed and more accurate data collection (and some increased funding) the program was able to nearly double the number of older adults served.

The legal concerns most frequently reported are: consumer issues, including garnishments and collections for medical debts; housing issues, including foreclosures and evictions; elder abuse and financial exploitation; family disputes over property or second marriages; Medicaid eligibility for long-term care and Medicaid coverage issues; Medicare coverage for pharmacy, durable medical equipment and rehabilitation; requests for medical and/or financial powers of attorney; public benefits issues, including SNAP (Supplemental Nutrition Assistance Program) and LIEAP (Low Income Energy Assistance program); and issues about Social Security and/or Supplemental Security Income.

Mary Catherine serves as a member of the Executive Committee of the National Association of Legal Service Developers. She continues to chair the Medicaid Regulatory Review Sub-Committee of the Elder Law Section of the Colorado Bar Association and, as a member of the Executive Council of the Elder Law Section, is often asked to review and comment on pending state and federal legislation and regulations affecting elders. Review of legislation and regulations at both the federal and state levels occupies a great deal of Mary Catherine’s time and attention, especially during the 120-day session of the Colorado General Assembly.

Mary Catherine presented a workshop on Medicaid at the Second Senior Law Day in Mesa County in May 2015 and continues to serve on the Planning Committee for the Sixth Senior Law Day in Jefferson County, to be held in June 2016. Larimer County marked World Elder Abuse Awareness Day with an all-day confer-



*Mary Catherine Rabbitt at Senior Law Day in Grand Junction. 5/1/15*

ence on June 12, 2015; Mary Catherine Rabbitt and Anne Meier were panelists.

Mary Catherine continues to provide education and training to legal providers, ombudsmen and other local groups and evaluates each of the 16 regional legal providers yearly, through on-site and desk evaluations. She provides a monthly set of “Advocacy Notes” to more than 50 professionals across the state, tracking legislation and providing helpful resources to those on the e-mailing list. In April 2015, Mary Catherine planned and presented a two-day training for local legal assistance developers.

## MEETING THE NEEDS OF “DUAL ELIGIBLES”

In 2015, Disability Law Colorado was awarded a contract from the Colorado Department of Human Services to implement an Ombudsman (or Advocate) Program to serve individuals who receive both Medicare (Parts A, B & D) and have full Medicaid benefits and no other private insurance. Some 30,000 Coloradans were enrolled in a pilot program to better coordinate the delivery of care and services to them. In May of 2015, Julie Bansch-Wickert joined Disability Law Colorado to serve as the Medicare-Medicaid Advocate for this population. Mary Catherine Rabbitt is her supervisor and meets regularly with Julie to discuss complex cases involving complaints, grievances, and reductions or terminations of services coming from this population. This population is especially vulnerable and often requires a higher level of care. Mary Catherine also continues to serve as a member of the community-based Beneficiary Rights and Protections Alliance, which advises the advocate.



# URGENT ISSUES FOR COLORADO'S SENIORS

## MEDICAID ELIGIBILITY FOR LONG-TERM SERVICES AND SUPPORTS

The eligibility requirements for Medicaid benefits to pay for nursing home care, assisted living, or Home and Community Based Services (HCBS) continue to cause a great deal of confusion for seniors facing the need for care for themselves or for a loved one. Many of the individual legal providers have assisted clients who were initially denied Medicaid benefits because of an error or omission in reporting assets, in particular, the value of life insurance policies or ownership of oil and mineral rights or second properties. The rules governing resources for Medicaid purposes are extremely complex. There is also considerable misunderstanding about the effect of giving money or property to loved ones before applying for Medicaid. The "Look-Back" period is five years for "transfers without fair consideration." Transfers without fair consideration occur when a senior gives away assets to a relative without receiving anything in return. The presumption is that they did so in order to qualify for Medicaid and this presumption must be disproved in order to become eligible for Medicaid. These transfer rules also apply when someone else has misused a Power of Attorney (POA) to deprive an elder of his or her resources. There is a process known as a "hardship exception" if the funds were lost due to no action on the part of the elder, but this process is also quite complicated. By contrast, the new Medicaid expansions under the Affordable Care Act only look at income, not resources. For these reasons, Mary Catherine Rabbitt and the local legal providers have devoted many hours of community education to an understanding of Medicaid.

## "OBSERVATION STATUS" IN HOSPITALS

"Observation Status" has become a common problem when a person on Medicare is hospitalized for whatever reason and then needs skilled nursing and rehabilitation services, often following a fall or a stroke, or other illness. The result is an unexpected and unaffordable bill. Oftentimes, the person is never actually "admitted" to the hospital (even if they remain there for more than three days) but is merely considered to be in "Observation Status." The consequence is that many of the expenses associated with the hospitalization are billed to Medicare Part B, not Medicare Part A, for which there are deductibles and co-pays charged to the patient. More significant is the fact that subsequent rehabilitation services in a nursing home are not covered at all by Medicare. Here again, community education is vital to an understanding of Medicare and its complexities. There is pending federal legislation to address this problem.

## SCAMS AND PREDATORY COLLECTION ACTIONS

Scams against senior homeowners proliferated as a result of frequent hail storms and wind damage in Colorado. Individuals would "offer" to examine an elder's roof "at no cost," then describe a costly, often unnecessary "solution" and require a large down payment. Then never show up again! Foreign lotteries, fake calls

## FINANCIAL EXPLOITATION OF AT-RISK ELDERS

According to the Colorado Department of Human Services, Mandatory Reporting of Elder Abuse (which became law on July 1, 2014) has brought to light substantiated losses of nearly \$57 million to elders age 70 and older in Colorado in the first year of its operations. The average loss (due to misuse of a POA, theft, identity theft or scams) was approximately \$145,000.

to “grandma” or “grandpa” to wire large sums of money overseas are often met with a sympathetic but unwitting response.

Unscrupulous consumer collection agencies often purchase “bundles” of old consumer credit card debts (for ten cents or less on the dollar). These are often very old debts that ordinarily could not be collected because of the passage of time, but a quick call to the elder asking him or her to “just send \$10” could re-activate the debt and result in a long period of harassment and eventual garnishment of the person’s bank account (which is illegal if the only funds on deposit are Social Security Retirement Income or Supplemental Security Income).

## GUARDIANSHIPS, CONSERVATORSHIPS AND MEDICAL AND LEGAL POWERS OF ATTORNEY

Guardianships, conservatorships and medical and legal powers of attorney are powerful and often necessary legal tools to assist older adults with decision-making as they age and become impaired. However, these same tools can often be misused by a family member or “close friend” who may be enriching himself or herself by a misuse of the other’s income and resources. There is also a great deal of misunderstanding about the scope of authority of proxy decision-makers, especially when their decisions conflict with the expressed wishes of the elder. The Legal Assistance Developer doesn’t see many good examples of effective substitute decision-making, but is often called when the situation results in abuse or exploitation of the elder.

## STORIES FROM THE FIELD

### HELP FOR ELDERLY LEGAL RESIDENTS

Starting in January 2014, a change in Colorado’s Old Age Pension sponsor deeming rules resulted in the exclusion of a significant number of elderly legal permanent residents from the Old Age Pension and Medicaid programs.

This change has caused great distress for some permanent legal residents. Individual representation by legal assistance providers led to clarification of the “hardship” exception to the rule changes that benefitted these clients.

## SECURING MEDICAID BENEFITS FOR ELDERS

Legal providers worked on several cases involving Medicaid denials due to transfers of property for less than fair market value. In one case, the client had transferred her interest in her home to her grandson and, when asked, he refused to transfer it back to her. We brought a “constructive trust” action and recovered the property in order to preserve her eligibility for Medicaid.

## PROTECTING ELDERS FROM SCAMS

An elder was the victim of a scam involving a total of \$125,000 being taken from her bank account by a bogus “government” agency. Guardianship and conservatorship proceedings were initiated, in an attempt to recoup her losses.

## MOBILE ADVANCE DIRECTIVES

One innovative legal provider offers a series of visits to five senior centers in his region. He loads up a lap top, printer, cards, folder, and pens, then travels to each center once a year and meets with seniors individually to discuss options concerning advance directives. His secretary prepares the legal documents (simple will, medical power of attorney, financial power of attorney and/or living will) for review and any corrections and then the senior signs and leaves with the completed documents. Certainly a valuable - and free - service!

## PRESERVING AN ELDER’S FREEDOM

The Denver Ombudsman Program was contacted by facility staff concerned that a resident in a secure memory care unit was being coerced by his wife to sign Power of Attorney (POA) paperwork. During the ombudsman’s initial visit, the resident told her he was admitted by his wife under false pretenses, and did not want to be in a secure unit. Over multiple visits, the ombuds-

man noted that the resident remembered her and appeared to be alert and oriented to person, place, and time. The resident's wife petitioned the court for emergency guardianship, and the resident retained an attorney to challenge the petition – he wanted to return to work to close a multi-million dollar real estate deal on the sale of his property.

With the resident's permission, the ombudsman took several actions: 1) She conducted a thorough medical record review, which indicated that the resident's expressed interests were not reflected on the MOST (medical orders for scope of treatment) form and the facility had allowed his wife/POA to fill out all paperwork, which included restriction of the use of a cell phone, mail, and visitors. 2) The ombudsman contacted the resident's lawyer to inform her of ombudsman's findings and the resident's expressed interests; 3) The ombudsman advocated for a meeting to discuss the resident returning home and to educate the facility staff on their violation of resident rights. With thorough examination and assistance from the Attorney General and State Ombudsman, the ombudsman was cleared to testify on behalf of the resident and his expressed interest to return home, as well as his opinion that he was being inappropriately and involuntarily confined in a secure unit. The resident's attorney wrote demand letters to the facility - that the facility update the MOST form to reflect the resident's wishes, that alternative placement be found, and that financial records be provided.

Days before the guardianship hearing, the wife withdrew the petition for emergency guardianship. With assistance from Adult Protective Services, the resident's lawyer, the ombudsman, and a private case manager, the resident was able to move into his daughter's home with health services. Utilizing many different advocacy tools and collaboration with multiple outside agencies, the resident was finally able return to work just in time to close on the sale of his business and to personally hand out Christmas bonuses to his staff as he had done for over 40 years.

## THE NURSING HOME PROJECT AT DISABILITY LAW COLORADO

*“Disability Law Colorado protects and promotes the rights of people with disabilities and older people in*

*Colorado through direct legal representation, advocacy, education and legislative analysis.”* Decades of effort toward this mission has brought extraordinary benefit for people living with disabilities across the state. Established in 1976, Disability Law Colorado has helped over 25,000 people with disabilities through direct legal representation. The vast majority of these cases sought to protect and promote the civil and human rights of people with disabilities in institutions. In 2010, the Colorado Department of Health Care Policy and Financing issued “Olmstead: Recommendations and Policy Options for Colorado.” This report analyzed the state's nursing home population, and brought attention to the fact that more people with mental illness or intellectual and developmental disabilities were living in nursing homes than were residing in the more traditional institutions such as the Community Mental Health Institutes (Pueblo or Fort Logan) or the three Regional Centers. At that time, there was no attention given to the concern that these people were living in a setting which did not maximize their right to the least restrictive environment.

Disability Law Colorado undertook a major effort to identify those residents who desired to live in a community setting with the supports needed for an independent life. This was called the Nursing Home Project, and through individual advocacy by the attorneys and staff of Disability Law Colorado several people were able to plan for and achieve a more appropriate and happy life in the community. Since the issuance of the Olmstead report, the Colorado Choice Transitions Program was initiated. It held promise that through coordinated identification, assessment and person-centered planning many more people would be able to move into community settings with the support needed for a safe and satisfying life outside of a nursing home. While this program is well-intentioned, there have been some stumbling blocks to the full realization of the goal. In particular, there is a scarcity of available, affordable and accessible housing for these individuals in their local community. The advocates at Disability Law Colorado and local long-term care ombudsmen across the state continue to work on behalf of residents so that they can enjoy the fullness of a life in their home communities.

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*Continued On Back Page*

## SENIOR DAY AT THE CAPITOL 2015



Governor Hickenlooper came to Senior Day at the Capitol April 1, 2015 to address the questions and concerns of 200 elders.

Ruth Yoshiko Yamauchi, along with some of her family members, including her granddaughter who is a state trooper, at the 2015 Senior Day at the Capitol. Ruth is a Colorado citizen and a centenarian who led the Pledge of Allegiance. As a Japanese/American, she was interned during World War II. After the war ended she worked with schoolchildren, including children with developmental disabilities.



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All of Colorado's ombudsmen, pictured at a training conference in March 2015