Disability Law Colorado’s Older Americans Act Programs

2017 ANNUAL REPORT
Colorado Long-Term Care Ombudsman Program
Legal Assistance Developer Program
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.

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. Our work on behalf of elders has significantly expanded since 2015 with the addition of the Medicare-Medicaid Advocacy (MMA) Program and the State PACE Ombudsman Program.

WORKING TOGETHER TO PROTECT ELDER RIGHTS & IMPROVE LIVES

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.

TEAM WORK

Front Row, Left to Right: Anne Meier, State Long-Term Care Ombudsman; Kelsey Lesco, Legal Assistance Developer; Leah McMahon, State PACE Ombudsman.

Back Row, Left to Right: Julie Bansch-Wickert, Medicare/Medicaid Advocate; Seth Greiner, Medicare/Medicaid Assistant; Vinni Ferrara, Older Americans Program Assistant.
WHAT DO THE OMBUDSMEN DO?

Ombudsman (om-budzman) is a Swedish word meaning “one who speaks on behalf of another.” Colorado’s long-term care ombudsmen protect the rights of people living in nursing homes and assisted living residences. Colorado has 54 full- and part-time (approximately 37.5 full-time equivalent) staff ombudsmen. They are joined by 22 volunteer ombudsmen who gave 1,315 hours in 2017. 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.

WHAT DO THE LEGAL ASSISTANCE PROVIDERS DO?

Legal Assistance Providers are attorneys who contract with each of Colorado’s 16 Area Agencies on Aging (AAAs) to coordinate the delivery of free civil legal services for older adults (defined as 60 and older) under the Older Americans Act. Colorado has a total of 22 paid attorneys and numerous pro bono attorneys who in 2017 provided legal assistance to 6,555 older adults throughout Colorado.

- Representing homeowners who are facing foreclosure, loss of housing, or other housing issues.
- Guardianships and conservatorships.
- Consumer issues, such as consumer fraud.
- Financial exploitation, including misuse of a power of attorney by a family member or friend.
- Denials, reductions and terminations of needed public benefits such as Old Age Pension, Medicaid, and Social Security benefits.
- Preparing advance directives, deeds and wills.
It has been said that the hallmark of a society is how it cares for its young and disadvantaged. Long-term care is the established system to provide care for those whose need for daily social and medical support cannot be sustained in the home. There exists an implied duty to support people who are dependent on others for their care with the best quality of care in order to support their best quality of life. This is not only an implied ethical concern, but also an explicit, legal mandate that is required of the provider community. As one local ombudsman expressed it, “facilities should be the front line of safeguarding residents when it comes to (civil and human) rights, not the ombudsmen.”

Ombudsmen are charged with pursuing the resident’s expressed wishes for their care through “legal, administrative and other remedies” and thus will come behind the providers in assuring the full experience and expression of a vulnerable elder’s civil and human rights. And there have been many excellent examples of commitment to residents. As an example, the local ombudsman program in Larimer County was awarded a grant to address “Meaningful Ways to Honor Death in Long-Term Care Communities.” This grant will fund the creation of a guide which will be available to care communities across Colorado. The guide will be developed through a series of community meetings designed to identify and gather “best practices.”

At the national level, the Centers for Medicare and Medicaid Services (CMS) are implementing new regulations that affect care provision and state oversight of nursing homes across America. There is a strengthening of person-centered care planning and provision that is meant to improve the lived experience for every resident. There are protections in place to guard against poorly considered involuntary discharges, and increased requirements for facilities to provide appropriate care. These measures were added to ensure that the providers, the residents, and their friends and family, all come to the table and remain in conversation about the best outcomes for every person.

Advocates hail these changes as positive and remain supportive of the rules as written. However, it is very disheartening to observe the provider community across the nation push back and request that the Centers for Medicare and Medicaid Services (CMS) either delay or reverse certain points of implementation. As an example, the American Health Care Association (AHCA), the for-profit nursing home industry trade association, opposes the requirement to inform the Long-Term Care Ombudsman Program of all discharges, stating the difficulty of complying with this provision in the new rules. However, nationally, ombudsmen report that improper discharge is the number one complaint across America. In Colorado, local ombudsmen have addressed this complaint 378 times in the past year. This effort to avoid involving ombudsmen creates the chilling realization that the providers, as a group, will choose to align on the side of fewer protections and quality standards affecting the dependent and powerless. AHCA is also fighting the ban on forced pre-dispute arbitration clauses in admission agreements which was included in the revised federal regulations issued in October 2016. Reversing
this ban would eliminate the opportunity for most residents or their next of kin to petition the courts for redress when egregious harm is perpetrated or tragic events occur. From AHCA’s website, an Issue Brief notes:

“The American Health Care Association (AHCA) believes arbitration agreements are essential and that banning these agreements would remove a critical legal remedy beneficial to both residents and NFs (Nursing Facilities).”

Strangely, they do not comment on the removal of the option of a court action by forcing binding arbitration. Advocates believe that access to court, as well as arbitration, is essential when grievous harm has been done. Advocates seek fair pathways to just ends. Taken together, these actions appear to indicate a retreat from concern for and commitment to their residents. Instead of supporting the full access to and expression of residents’ civil and human rights, AHCA’s position reinforces the observation that facility interest is their first priority.

Consumer Voice, a national advocacy group that seeks to amplify the resident’s interests in legislative and policy arenas, properly notes that these moves reduce important safeguards, transparency and accountability that should be afforded to elders. The Colorado Long-Term Care Ombudsman Program stands shoulder to shoulder with our fellow elder friends and neighbors in asking for support in defeating these troubling actions.

Long-term care has much to offer, and much to celebrate as we come together to serve elders and others. We have more insight, more good medicine and more goodwill to offer. Let us work together to create homes filled with care and heart and health.

Respectfully submitted,

Anne K. Meier
State Long-Term Care Ombudsman

SNAPSHOT OF LONG-TERM CARE IN COLORADO

Colorado has 234 nursing homes (a 5% increase over last year) with a total of 21,562 beds (3% increase) and 674 assisted living residences (6% increase) with a total of 22,147 beds (8% increase).

In Colorado, nursing facilities must be visited by an ombudsman at least once a month and assisted living residences at least quarterly. In SFY 2016/17, local ombudsmen made 9,058 visits to facilities – many more than were required – to monitor the quality of care, quality of life and to investigate and act upon concerns and complaints. This includes conversations with individual residents and attending resident council meetings.

In Fiscal Year 2016/17, across Colorado, local ombudsmen:

- Investigated 3,396 complaints of which 3,224 were partially or fully resolved to the satisfaction of the resident.
- Provided 6,117 facility consultations and 8,904 consultations to individuals, residents and family members on a wide range of long-term care issues and concerns.
- Attended 1,292 resident council meetings and conducted 588 community education sessions and 98 training sessions for facility staff.

The top five complaints in nursing homes and assisted living settings:

1. Resident Care | includes medical care and personal care [1,028]
2. Resident Rights | includes autonomy, choice, preference, exercise of rights and privacy [711]
3. Admission/Discharge/Transfer/Eviction [378]
4. Environment | includes concerns about general cleanliness of a facility, air temperature, availability of hot water [335]
5. Staffing | this category captures concerns about the level of staff training, and staff being unresponsive or unavailable to residents [301]
PACE OMBUDSMAN PROGRAM THRIVES IN COLORADO
Program for All-Inclusive Care for the Elderly

The State PACE Ombudsman Program had a very successful year. The program was established by the Colorado Legislature in 2016 to protect the rights of applicants, participants and those dis-enrolled from services throughout all the PACE organizations in Colorado. The State PACE Ombudsman Program offers free independent advocacy to navigate the service delivery system within the PACE Program, including: access to services, such as appointments with doctors and specialists; transitions of care; denial of services; grievance and appeals; and timeliness of service delivery. The program serves vulnerable adults 55 and older who live in their own homes, nursing homes or assisted living residences.

Leah McMahon joined Disability Law Colorado in 2016 as the State PACE Ombudsman, and in 2017 a local PACE ombudsman position was created and placed at the Denver Regional Council of Governments (DRCOG) Area Agency on Aging. Kyra Lanphier joined DRCOG in September 2017 to focus on PACE participants in the Denver metro area. Prior to accepting the position, Kyra worked for nine years at Colorado Access (Single Entry Point) providing case management services to adults who receive home and community-based services. Kyra has further expanded services in the Denver metro area for the PACE Ombudsman Program.

In its initial year, the PACE Ombudsman Program collected and presented statewide data across the four PACE organizations/10 centers in Colorado. The data informs program priorities, which are to provide advocacy statewide and positively impact participants’ experience with service delivery and quality of care. Outreach, education and visibility in the community continues to grow, and has created an increase in individual advocacy. The PACE Ombudsman Program has served over 500 people including vulnerable adults enrolled in PACE, family members, community professionals and PACE employees.

The PACE Ombudsmen investigated over 100 complaints within the first year of the program. The work is generated through site visits to the 10 PACE centers across Colorado and includes interviews with participants, family members, community professionals and PACE staff. The program expected to identify areas of improvement for the PACE organizations and offer suggestions on how to improve the participant’s overall experience. The top five complaints in 2017 included: 1.) concerns about quality of care, such as the inability to access timely doctor appointments; 2.) autonomy and choice within the program; 3.) access to information regarding how to request and navigate the services; 4.) the dis-enrollment process; and 5.) staff not responding in a timely manner to participants’ requests.

From the advocacy perspective, this first year of data highlights the importance of continued meaningful ombudsman presence at the 10 service centers. And from the provider side there seems to be an emerging trend where, in order to increase participant satisfaction, PACE centers are striving to find better ways to respond to individual care concerns and participant needs throughout the PACE experience. The promise of the PACE model is that it can be highly person-centered and nimble to best accommodate each participant’s unique experience. The PACE Ombudsman Program will continue to bring suggestions, education and best practices to the table as we seek ways to better incorporate participant voices at the table.
MEDICARE-MEDICAID ADVOCACY PROGRAM
Helping Coloradans Navigate Complex Healthcare Systems

In 2015, Colorado was selected by the Centers for Medicare and Medicaid Services (CMS) as one of 15 states to test a new approach to serving people dually-eligible for Medicare and Medicaid. Colorado's Department of Health Care Policy and Financing (HCPF) launched the Accountable Care Collaborative Medicare-Medicaid Enrollees program and Disability Law Colorado was chosen to develop and operate an advocacy program.

The people served by this program have very complex health problems and/or disabilities. They are among the most vulnerable people in our state as well as the most costly to serve. The program:

• Provides statewide support, education and outreach to beneficiaries of Medicare-Medicaid who participate in the Colorado Accountable Care Collaborative Financial Alignment model.
• Ensures that individual beneficiaries have access to person-centered assistance in resolving problems.
• Accepts and investigates inquiries and complaints related to beneficiary rights, Medicare and/or Medicaid benefits and the quality of services being provided.
• Informs the state, care coordination entities, CMS, and other stakeholders regarding beneficiary experience with care coordination services, and recommends areas of improvement.

*In 2017 the Medicare-Medicaid Advocacy (MMA) 5-Year Demonstration Program was ended early, at its third year. Funding for the program ended January 31, 2018 and as a result the program is no longer being offered.

ARBIGATION AGREEMENT CONCERNS
A Story of Impact from the Field

An anxious family member contacted the local ombudsman about his father’s recent facility admission. His father had called him stating he felt apprehensive as he had been approached by a staff member during the evening meal, in the communal dining hall. The staff member presented the resident with a document and asked him to sign it, stating it was something “every resident had to sign.” This resident did sign it, but after he completed his meal, he returned to his room and called his son. The son visited his father the next day and they studied the document together. It was an “Arbitration agreement,” stating in part that the resident agrees to use arbitration in place of hiring an outside professional (including retaining an attorney) to handle issues with the nursing home. At that point, the resident and his son called the local ombudsman. The local ombudsman asked the administrator about the document and she was told the document was not revocable and was involuntary.

Once the resident understood what the document was, he decided to rescind his agreement and wrote a letter to the Nursing Home Administrator advising her of the same. The Arbitration Agreement itself states “the resident has 30 days to rescind the agreement.” The nursing home refused to accept the letter, despite the fact it was tendered well within the stated limit. The local ombudsman contacted the local Legal Assistance Provider, who advised them to meet with the Administrator and Social Service Director to assert their right to rescind. The lawyer also advised the ombudsman to remind the facility that they could not deny admission, or continued residency, to the elder for refusing to sign the Arbitration Agreement. *The meeting was held and while contentious, at the end of the meeting, the facility acknowledged and upheld the resident's choice in this matter. The ombudsman also reinforced with the facility leadership that there were several procedural concerns, including that the resident was approached in a public setting at a busy meal time, that the resident (and his family) were not given time or privacy to consider the document, and that there was perceived coercion as his placement in this home was threatened should he choose to not sign this document.

*Due to long-term care industry push-back, the federal rule implementing the protections the attorney mentioned to the ombudsman are now suspended pending review.
The Older Americans Act (OAA) was enacted in 1965 by the U.S. Congress to provide essential services to vulnerable older adults, aged 60 and older. The overarching goals of the OAA are to promote and protect the independence, dignity, financial security, health, and rights of older adults. Under the OAA, states receive federal funding based on the state’s share of the U.S. population age 60 and older. These funds are then used to support a range of home and community-based services that generally assist an older adult in aging independently in their homes as engaged members of their communities. These services include in-home care, transportation, nutrition programs such as Meals on Wheels, and critical legal services through the Legal Assistance Developer Program. The OAA requires states to target these services to older adults with the greatest social and economic need.

The essential services provided by the OAA, including legal services, are needed now more than ever as the nation is in the midst of a major demographic shift with an aging population that continues to grow at an unprecedented rate. According to a report published by the our state’s Strategic Action Planning Group on Aging, Colorado’s aging population is growing at one of the fastest rates in the nation; it increased by 29% between 2010 and 2015 and the growth is projected to continue. This major demographic shift is one of the reasons that elder law is one of the fastest growing areas of law in Colorado.

At the same time that the population of older adults is growing, their legal issues are becoming increasingly complex. Cases commonly seen by legal assistance providers involve preserving public benefits, maintaining housing, combating fraud, and maintaining personal financial security in the face of the daunting costs of long-term care. Civil legal help is critical to meeting the goals of the OAA as sometimes only skilled legal intervention can preserve and enhance seniors’ rights. In fact, Legal Services Corporation estimates that 56% of low-income senior households (age 65 and older) have experienced at least one civil legal problem in the last year, yet only 13% receive adequate legal assistance. It is in this environment that the legal assistance providers go to great lengths to provide the necessary high-quality legal services to older adults throughout Colorado.

Across the state the Legal Assistance Developer Program served 6,555 older adults in 2017, requiring 11,494 hours of legal services. The difference between the number of clients served and the number of hours of service provided demonstrates that some cases are more complex and can require many hours of legal work. In addition to the 11,494 hours of legal services, 1,781 hours were provided on a pro bono basis or at a reduced rate. Even with the use of these pro bono hours, legal providers, generally in more populous regions of the state, were unable to serve 442 clients.

Quarterly reports from each of the 16 local Area Agencies on Aging provide a breakdown of the types of cases handled. Based on this data we can see that the most urgent need of older adults in Colorado was for legal assistance with consumer issues, such as consumer fraud and consumer debt. Similar to last year, assistance with housing issues is also at the top of the list. There is also a high level of demand for assistance with Medicaid eligibility, public benefits, powers of attorney and estate planning. As the population of older Coloradans continues to grow, in the coming years I believe we can expect an increase in demand for these legal services.

Respectfully submitted,

Kelsey Lesco
Legal Assistance Developer
THE LEGAL ASSISTANCE DEVELOPER PROGRAM
2017 Program Highlights & Accomplishments

Kelsey Meredith Lesco became Legal Assistance Developer in April of 2017. Her charge is to provide oversight, training and assistance to the legal assistance providers, as well as training and technical assistance to ombudsmen, professionals and members of the public. Kelsey also spends a great deal of her time tracking state and federal legislation and public policy issues affecting older adults. In 2017, Kelsey*

- Responded to 209 requests for technical assistance:
  - 57 calls from local legal assistance providers, local ombudsmen & AAA directors
  - 125 calls from other professionals, such as attorneys and social workers
  - 27 calls from seniors and family members.
- Provided six trainings to approximately 200 participants, including the Colorado Legal Assistance Developer Conference, a continuing legal education (CLE) training to which all legal assistance providers are invited. Other training topics included: Avoiding Home Improvement Scams; Sources of Law for the Ombudsman Program; and Ballot Measures Impacting Older Coloradans.
- Conducted four on-site evaluations of legal assistance programs in Ft. Collins, Colorado Springs, Salida and Boulder, and reviewed self-evaluations from the other 12 legal assistance programs.
- Engaged in numerous outreach activities reaching approximately 300 older Coloradans at regional Senior Law Days, senior resource fairs, and other events.

Over the past several years, the Legal Assistance Developer Program has worked on legislation to implement an office of public guardianship, including former Legal Assistance Developer Mary Catherine Rabbitt’s participation on the Public Guardianship Advisory Committee. In 2017, legislation to establish an Office of Public Guardianship Pilot program passed the General Assembly and HB17-1087 was signed into law by Governor Hickenlooper. Both Mary Catherine and Kelsey worked to support this bill, testifying before the Legislature, attending committee hearings, and creating fact sheets and letters of support distributed to the Governor, legislators and members of the public. Since the passage of this bill, Kelsey has been appointed to the Office of Public Guardianship Commission by the Chief Justice of the Colorado Supreme Court. Kelsey will serve as one of five commissioners.

*Due to staff turnover requests for technical assistance are based on six months of data.

FRISCO’S SENIOR LAW DAY
First Senior Law Day a Success

On September 27, 2017, Colorado Legal Services partnered with the Alpine Area on Aging to offer the first Senior Law Day for Region XII. Private attorneys and representatives from state agencies and nonprofit organizations serving seniors presented workshops on a variety of legal topics:

- Aging in Place
- What to Do When Somebody Dies
- Retirement & Financial Planning for Women
- Estate Planning/Financial Health Check-Up
- Advance Directives

Thirty-four seniors attended the six-hour session held at the Senior and Community Center in Frisco, and 97% reported that Senior Law Day had been helpful to them, while 100% indicated that they would refer friends and family to the next Senior Law Day. The area’s second annual Senior Law Day is planned for September 12, 2018.
POWER OF ATTORNEY ABUSE
Legal Assistance Providers & Ombudsmen Teamwork

A client was referred to the legal assistance provider by the local ombudsman. The client wanted to revoke a Power of Attorney (POA) she had granted in the past because her current POA was attempting: (1) to put her into a nursing home against her wishes; (2) to force her to stop smoking; and (3) to gain control over her finances. After meeting with the client, the legal assistance provider drafted a document entitled “Revocation of Power of Attorney.” The provider explained what the consequences of executing this document were to the client. He also evaluated the client, and deemed her competent. She signed the document and the attorney mailed a signed copy along with a letter of explanation to her current POA. He also called the POA and explained that her authority had been revoked. Recently, the ombudsman discovered that the person acting as the client’s POA before the revocation is now under investigation for decisions she has made concerning other people in the community who have designated her as their POA. Although the services provided to the client were brief, the legal assistance provider was able to assist her in getting out of a potentially dangerous situation.

SECURING ECONOMIC FREEDOM
Legal Assistance Provider & AAA Office Working Together

An elder came to a local AAA office with his younger son. The elder had previously been living on his own in his own home, but had recently moved in with his son due to financial constraints. Soon after he moved in, it became apparent to the son that his father had more financial trouble than just being unable to make rent. He had accumulated several thousands of dollars in credit card debt trying to live on his own for as long as possible. The client had been spending his entire Social Security retirement check trying to pay back his creditors, often neglecting his personal needs to pay bills. As a protection against financial hardship, in some cases, a person may be shielded from certain creditors if they are “judgement proof.” This means that the individual does not have any assets or income that a creditor can legally garnish to recover funds awarded in a money judgement. Often income that cannot be garnished includes public benefits, such as social security. A “judgment proof” status may be temporary and can be affected by changes in income or assets. Aware of this protection, CLS attorneys advised him that he was “judgment proof” and to spend his Social Security funds on meeting his needs rather than paying creditors back. The elder left our office relieved and was able to provide for some of his own needs again instead of relying on his son.
### 2018 DIRECTORY
Colorado Long-Term Care Ombudsmen
Legal Assistance Developers
Area Agency on Aging

#### REGION

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**ADVOCATING FOR RIGHTS**

Colorado Long-Term Care Ombudsmen met with U.S. Sen. Cory Gardner to discuss concerns about efforts to stall or rollback the Center for Medicare and Medicaid Services rules impacting better quality of care. The group is troubled by the implication that providers seek not only to lessen their obligation to the resident’s best quality care, but also seek to block access to courts when grievous harm has occurred.
**HB 1087: Office of Public Guardianship Pilot Program**

This bill establishes an office of public guardianship pilot program and creates the Office of Public Guardianship within the Colorado Judicial Branch. The program will serve three judicial districts and provide legal guardianship services to indigent and incapacitated adults who have neither a family member nor friend available to serve as guardian, nor the resources to compensate a private guardian to provide guardianship services. This bill creates a five-member Public Guardianship Commission to administer the program, raise funds, and hire an executive director. The pilot program will be evaluated in 2021, at which time the program will be expanded, continued, or discontinued at the discretion of the General Assembly.

**HB 1264: Expanding the Program of All-Inclusive Care for the Elderly (PACE) Ombudsman Program**

This bill expands the PACE Ombudsman Program by creating a local PACE ombudsman who will support PACE participants along the Front Range through individual advocacy, promoting the rights of person enrolled in PACE, and ensuring the quality of care and services. The program began in 2016 with the establishment of the State PACE Ombudsman Program located within Disability Law Colorado.

**HB 1139: Medicaid Provider Compliance Billing Safety Rules “Balanced Billing”**

This bill empowers the Department of Health Care Policy and Financing (HCPF) to begin resolving erroneous billing issues by issuing warnings, entering into collective action plans with providers for remediation, and penalizing habitual offenders for repeated violations.

**HB 1284: Data System Check for Employees Serving At-Risk Adults**

The bill establishes a program within the Colorado Department of Human Services to check the Colorado Adult Protective Services (CAPS) data system to verify whether certain persons who provide direct care to at-risk adults have a substantiated case of mistreatment of an at-risk adult. This program closes a serious gap in protection for elders by requiring background checks for people wishing to work directly with at-risk adults.

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<td>13</td>
<td>Chaffee, Custer, Fremont, Lake</td>
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