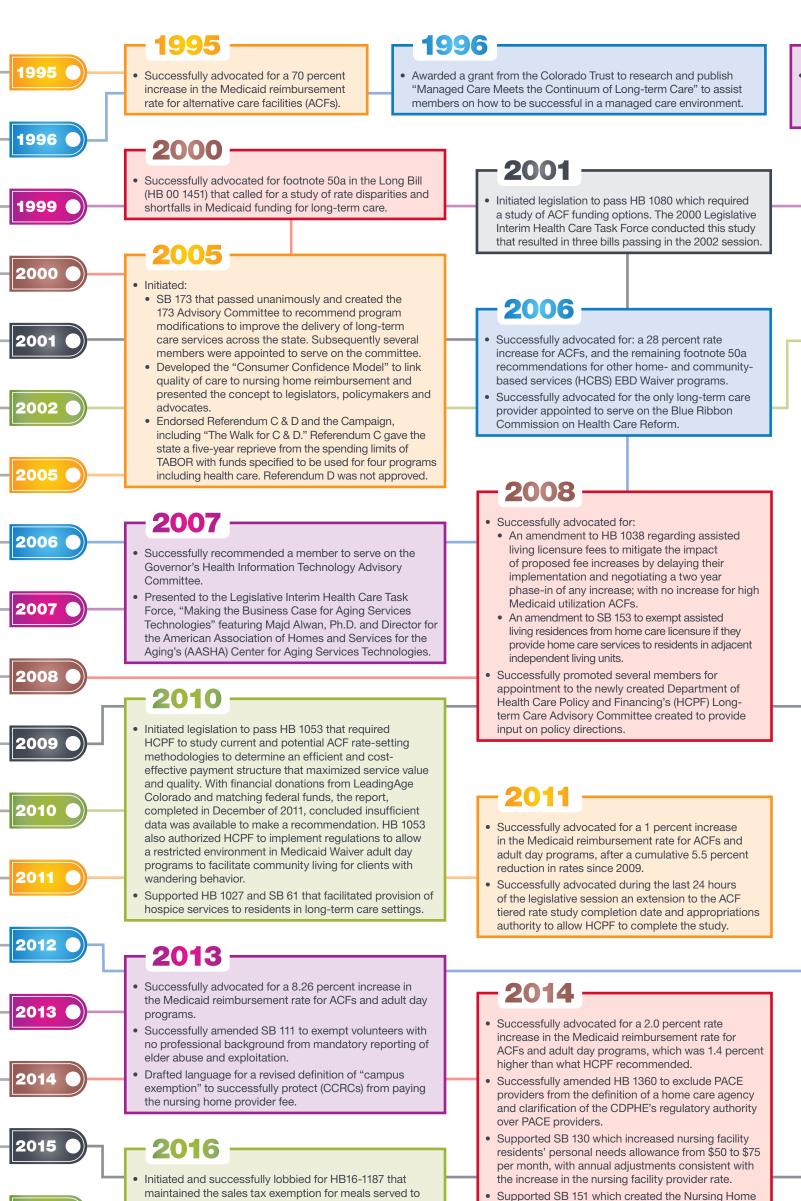
LeadingAge Colorado's Advocacy History

Since 1968, LeadingAge Colorado has worked, and continues to work, on behalf of its members to support senior living and care providers, and promote options and choices for individuals as their care needs change over time. These efforts typically focus on advocating updates to existing regulations to stay current with new approaches; or influencing legislation that may impact our members in terms of how they get paid, deliver services, or the scope of services permitted under regulation and licensure – all of which are achieved through LeadingAge Colorado's leadership and collaboration with legislators, regulators, policy makers, and other stakeholders. This timeline highlights LeadingAge Colorado's most significant advocacy successes.



residents of retirement communities

Hickenlooper.

Successfully lobbied against a 1 percent cut for

HCBS Medicaid providers as proposed by Gov. John

1999

 Initiated legislation to pass SB 006, "Return to Home" legislation that allowed seniors to return to the nursing home in their continuing care retirement community (CCRC) after a hospitalization, rather than be discharged to their health plan's contracted provider.

2002

- Successfully advocated for:
 - HB 1029 to allow for Program of All-inclusive Care for the Elderly (PACE) expansion.
 - HB 1039 to implement a consumer-directed program for the Elderly. Blind and Disabled (EBD) Waiver program.
 - HB 1027 to study case mix reimbursement for ACFs; this bill was vetoed by Governor Bill Owens.
- Initiated amendments to HB 1323 to require the Colorado Department of Public Health and Environment (CDPHE) to explore risk based inspections of assisted living residences (ALRs), institute a survey process focused on outcomes related to measures and treatment of residents, and created a definition for "high Medicaid utilization residence" that are to be assessed lower licensure fees than residences not meeting the definition.

2009

- Successfully advocated for:
 - HB 1103 that authorized HCPF to seek federal approval to implement presumptive eligibility for long-term care.
 - An amendment to HB 1114 to exempt continuum of care campuses from the nursing home provider fee and added a hold harmless in payment for additional years to allow the "price" paid for Administrative and General portion of the rate to catch up to providers whose current payment exceeded the "price."
- HB 1196 amendment regarding the use of civil monetary penalties (CMPs) to promote improvements in nursing home care. The amendment substituted "resident-centered care" for "culture change," clarified that consumer education is to focus on promoting resident-centered care in nursing homes, clarified that the CMP funds cannot be used by the department for administering the fund nor for any administrative costs associated with any specific movement, association or organization; and technical changes regarding the allocation of funds.
- SB 128 amendment regarding the continuation of the regulation of administration of medication by unlicensed persons to require an individual need only pass the Qualified Medication Administration Personnel (QMAP) test every five years and not have to re-test if they change jobs within that five-year period.

2012

- Initiated legislation to pass:
 - SB 127 which created "health homes" for Medicaid Long Term Services and Supports providers, and allows them to participate as part of the care coordination team as HCPF expands the Accountable Care Collaborative (ACC) to include dually-eligible persons, persons with chronic conditions, and/or persons in need of long-term care services and supports.
- SB 023 which allows eligible clients to enroll in PACE, and allows them to disenroll from the ACC.
- An amendment to SB 128 to require HCPF to incorporate the results of their tiered rate payment study, mandated by HB 10-1053, in considering any new payment methodologies for ACFs.
- Represented assisted living providers as part of a coalition of licensed health care facility representatives, to successfully advocate for HB 12-1294 that extended survey cycles, provided performance incentives and an annual Consumer Price Index (CPI) cap on licensure fee increases.
- Sucessfully advocated for a member appointment to the Community Living Advisory Group established by executive order of the governor to help meet the growing need for long-term care services by people with disabilities and aging adults.

2015 -

Innovation Grant Board to replace the Culture

Change Accountability Board, clarified how cash

fund money is used, and increased the amount

available for grants.

- Initiated legislation for SB 289 that provided a technical correction to affirm the intent of HB 12-1294 to cap assisted living annual licensure fee increases to the CPI. The bill passed the Senate but was postponed indefinitely in the House.
- Successfully promoted two members' appointments, representing ACFs and HCBS providers, to the SB 228 Advisory Committee charged with reviewing and making recommendations regarding Medicaid provider payments.