

Your Guide To Receiving Services



Thank you for choosing The Resource Exchange.

This handbook is yours to keep and will help guide you through available options. It is a useful tool that includes a list of contacts, your rights, resources, and a description of available services. Experienced staff will guide you through this process. Please do not hesitate to contact us.

TOGETHER WITH OUR STAFF, YOU WILL DECIDE WHAT SERVICES ARE BEST FOR YOU.

Helpful Ways To Stay Informed

TRE is a partner with Colorado's Department of Health Care Policy and Financing (HCPF), specifically, the Office of Community Living (OCL). Updates are available to you through a variety of ways:

Sign up for the TRE Newsletter here.

For OCL and HCPF Communications sign up here.

To follow changes happening with Case Management in Colorado, follow along here.

Visit the TRE website at www.tre.org or call us at 719-380-1100.

Follow us on social media: Facebook Instagram Twitter LinkedIn

TRF Mission Statement

Advocating for independence and inclusion, TRE partners with children and adults who have a variety of disabilities, delays, mental health, or long-term care needs. We do this using a person-centered approach in coordinating care, promoting choices, and collaborating with community partners.

Empowering People. Strengthening Families. Building Inclusive Communities.

www.tre.org **f in o**













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What is The Resource Exchange (TRE)?

TRE is a Case Management Agency serving primarily El Paso, Pueblo, Teller, and Park Counties. We coordinate Case Management services for people with long term care needs to live in their homes and communities independently. Often referred to as a "waiver", and based on eligibility, long-term Medicaid benefits can help you access the services you need. We believe in achieving greater efficiencies, facilitating easier access for the people we serve, and providing the level of quality for which we are known across the state.

TRE services include eligibility determination, developmental disability determination, assistance with enrollment into Medicaid or State General Fund programs, service and support coordination, monitoring, referrals to other resources for Health First Colorado (Colorado's Medicaid Program) and termination and discharge from services. Learn more about Case Management here: Case Management Redesign | Colorado

Who is The Resource Exchange (TRE)?

A Colorado non-profit since 1964, TRE is honored to serve over 12,000 children, teenagers, adults, and seniors in El Paso, Pueblo, Teller, and Park counties. Over 400 dedicated employees serve our members and our relationships with over 500 community partners help us increase opportunities for the people we serve.

TRE takes an unafraid stance in embracing all levels of diversity, equity, and inclusion. Together with the involvement of ALL people, TRE will foster systems, structures, and policies that replicate equitability, accountability, and nurture a thriving workplace culture where each person is treated fairly and respectfully. TRE welcomes the progress that is needed to be a true, active, and mold-able antiracist organization.

To accomplish this, TRE has the following core values:

RESPECT

We respect and honor the inherent value of people and the unique contributions they bring to our community. Equally, we respect and value every employee and volunteer.

INTEGRITY

We conduct our business transparently, honestly, and ethically.

PARTNERSHIP

We build reciprocal relationships with community partners that increase opportunities and high-quality services.

EXCELLENCE

We dedicate ourselves to excellence through innovation because good enough is just NOT good enough!

ACCOUNTABILITY

Everyone is accountable.

TRE IS SUPPORTED BY:

A Citizen-led volunteer Board of Directors, individual volunteers, individual philanthropists, foundations, community partners, and corporate sponsors who leverage government funding. TRE's major contributors include Colorado Springs Health Foundation, Colorado Health Foundation, The Gazette Charities' Empty Stocking Fund, Pikes Peak United Way, Integrity Bank & Trust, Anschutz, Caring for Colorado, Disabling Barriers and the local Regional Accountability Entities.

TRE IS COMMITTED TO:

Providing services to qualified individuals regardless of their race, color, religion, national origin, sex, sexual orientation, gender expression, age, height, weight, disability status, veteran status, military obligations, and/or marital status. TRE STRONGLY OPPOSES any form of unlawful harassment. Unlawful harassment includes verbal or physical conduct, which has the purpose or effect of substantially interfering with service delivery or creating an intimidating, hostile or offensive work environment.

FUNDING AND ACCREDITATION:

TRE works in close partnership with HCPF. The majority of funds for Colorado services are provided from the Colorado legislature and administered through HCPF. A large portion of funding for adult services comes from Medicaid. TRE also raises money from private sources such as individuals, foundations, and corporations. To learn more about our fundraising efforts, please contact our Director of Development at 719-380-1100 or visit www.tre.org.

RECORDS AND CONFIDENTIALITY OF INFORMATION:

There are processes and laws that TRE follows to keep information private. TRE is HIPAA compliant. We use health information about you for treatment, to obtain payment for treatment, for administrative purposes and to evaluate the quality of care that you receive. We use health information about you to provide quality services. Every person has the right to request and receive a copy of their records. It is the policy of The Resource Exchange (TRE) to establish protections for privacy and confidentiality of medical information whether oral or recorded in any form or medium. The administrative simplification requirements of the Health Insurance Portability and Accountability Act (HIPAA) are covered in four parts:

- □ Standardization of electronic health, administrative and financial data
- ☐ Creation of unique health identifiers for individuals, employers, health plans and health care providers
- ☐ Establishment of security standards to protect the confidentiality and integrity of "individually identifiable health information," past, present, or future
- ☐ Enactment of protections for the privacy of one's health information



TRE Services: Partnering with You, Every Step of the Way

Eligibility

Enrollment

Ongoing Service

Coordination



Our Intake team has the privilege of being the first line of contact in accessing TRE services. This team helps determine if you qualify for Medicaid for waiver services, Long-Term Care, Nursing Facilities, or other services and helps you enroll. Each of the 10 or more funding

streams that we administer have different eligibility needs and we will help you along the way.

This process may include multiple assessments, information from your doctor, visits in your home, financial information, etc. We also partner with outside agencies such as the Department of Human Services for some of the pieces of eligibility.

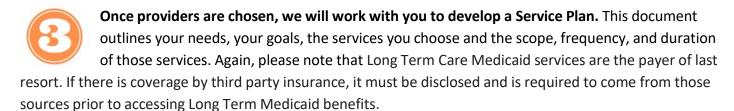
Not to worry, our experienced staff will help you along the way to make sure you know what is needed when. It may take up to six months, or more, to be fully enrolled and start services due to the multi-layered eligibility process. During this process you will meet and work with several members of our team and we are here to ensure the process moves as quickly and smoothly as possible.



After eligibility is complete, you will start working with either an Enrollment Coordinator or a Service Coordinator (SC) who will help you get services started. We will introduce you to provider options throughout your community and help you prioritize your needs in a Service Plan. It is critical that you choose an agency that works for you. The HCPF website www.colorado.gov/hcpf

has resources to find providers. Your Service Coordinator can also provide you with these options. Ask your coordinator about working with an agency, hiring your own providers, family caregiver options, etc. It is important to note that most services that TRE authorizes to be received must be provided by qualified providers and are not directly hired or paid by TRE.

Qualified Providers (alongside Medicaid providers) are here: www.healthfirstcolorado.com/find-doctors/



After the development of a Service Plan, we can get started on any other needs for the service you choose.

The last step is submitting and receiving an approved Prior Authorization Request so that your services can be paid to providers. These services are not reimbursable but must be preauthorized and providers are asked to have that preauthorization in hand prior to services starting. After that – services begin!

Depending on the service you choose – this process can take weeks to several months. We will help you.



TRE Services: Partnering with You, Every Step of the Way (cont'd)



We will communicate the date services are authorized to begin and the agency providing you services will receive a Prior Authorization Request. We encourage providers to not provide services until they have the authorization in hand. Internally, we will make sure you have an ongoing Service Coordinator (SC) at this time.

Once you are "in" services, here is what to expect next:

Your Service Coordinator will communicate with you frequently to maintain the services you choose, ask about how services are going, make any needed adjustments, arrange meetings, and request annual documentation. We will also need to be in your home throughout the year and will work alongside you as to when this is most convenient.

While we try not to use acronyms, it is really hard! Some of the terms you may hear us use are:

- Monitoring: This is checking in with you. We have some specific questions we need to review, but the
 process is making sure you are getting what you need, that you are being respected, and are satisfied
 with what is being received.
- CSR: This means Continued Stay Review. This is your annual planning process. We will help you walk through annual eligibility needs, develop a new Service Plan, make sure you know what to do if you are being mistreated, have a complaint, know your Rights, etc. (see next page)
- PASA (Program Approved Service Agency)/Provider: This is the oversight agency that hires your staff. We work together to support you.

It is important for you to communicate respectfully and respond to your coordinator as soon as possible. You can expect the same from us. Refusing to participate in required meetings or not submitting needed paperwork when it is due may jeopardize continuity of services.

- To ensure efficient communication, please make sure we have a good email address for you.
- Let your coordinator know your communications preferences, such as whether you prefer e-mail, phone, text messages, or traditional mail service.
- When you call us, you can expect a returned phone call or email in 2 business days, sooner if possible.
- If your matter is urgent, or you do not get a returned call, please call the main office and ask to talk to a supervisor or director for assistance. We keep these on our voice messages for your convenience.



Complaints, Disputes and Grievances

TRE, Providers, and PASAs have procedures for resolving any conflicts. We encourage you to talk directly with the person/entity with whom you are having trouble and try to arrive at a solution that works for everyone.

Specific Complaint and Grievance procedures are stated in writing with each organization and should be given to you upon enrollment and request. You received a full copy of TREs Policy and Procedure regarding Complaints, Disputes and Grievances when you were first going through Intake and Enrollment. If you want or need a new copy – ask your Service Coordinator or we have it posted on our website. A full version can always be found here: www.tre.org/notices/.

It is the policy of The Resource Exchange (TRE) to address grievances and complaints, or any other customer satisfaction concern with TRE services in accordance with applicable Colorado regulation and consistent with its own core values. We strive to amicably resolve grievances/complaints through informal negotiations and the Service Planning (SP) process when available. Significant attention shall be focused on creating options and service alternatives that address the best interests of the person receiving services and to provide an opportunity for individuals to come together to find a mutually acceptable solution. Each stage of the process will be treated as an opportunity to include fresh perspectives while achieving collaborative, creative resolutions.

Reporting a grievance or complaint is the first level of interaction for any concern with TRE. In the event an individual reports a complaint, TRE will attempt to resolve that grievance or complaint amicably with both parties. Grievance and complaints may be reported to any TRE staff member and should be reported to the appropriate TRE employee first (this could be the person with whom the issue resides or their supervisor).

New: You can file a compliant on our website here: Contact (tre.org)

How to Exercise Your Rights

Please note that advocacy groups are different from support groups. They exist not only for information and referral to appropriate supports, but also to assist you through system issues, rights violations, or appeals which may be necessary to get a system to respond to your needs. Many advocacy groups also work on policy issues as they relate to disability but may not always have direct contact with people who receive services. Colorado has a strong advocacy network. Any or all of the following resources are available to you.

INTERNAL TO TRE

- Your Coordinator is here to work on your behalf and to protect your rights and interests. Please contact them any time you have a question or a concern.
- Human Rights Committee (HRC). The purpose of the HRC is to safeguard the rights of persons receiving services. The HRC is an advisory committee that reports to TRE's Board of Directors and is comprised of professionals not employed by TRE.

EXTERNAL TO TRE

- The Arc Pikes Peak Region: (719) 471-4800 OR The Arc of Pueblo: (719) 545-5845
- Disability Law Colorado: (800) 722-0300



Rights of Persons Receiving Services

YOU HAVE THE SAME HUMAN AND CIVIL RIGHTS AS ANYONE ELSE. These rights should be limited or modified only to the extent necessary to be beneficial to you, and then only with due process. If you want assistance in exercising your rights, you can select a friend, family member, your TRE Service Coordinator, The Arc, or any other persons to advocate for you.

RIGHT TO AN INDIVIDUALIZED PLAN (IP) [ALSO CALLED THE SERVICE PLAN (SP)]



Each person receiving services shall have the right to participate in decisions regarding their services, to obtain available and accessible services to their waiver, and the right to obtain available and accessible services under the Contract. Each person can obtain a copy of their records through request.

RIGHT TO MEDICAL CARE AND TREATMENT



Each person receiving services shall have access to appropriate dental and medical care and treatment for any physical ailments and for the prevention of any illness or disability. No medication for which a prescription is required shall be administered without the written order of a physician that is reviewed at least annually. Persons receiving services shall have a right to be free from unnecessary or excessive medication. Medication shall not be used for the convenience of the staff, for punishment, as a substitute for a treatment program or in quantities that interfere with the treatment program of the person receiving services.

RIGHT TO RELIGIOUS BELIEF, PRACTICE AND WORSHIP



Each person receiving services should be allowed and assisted to worship as they choose. No one shall be coerced into engaging in or refraining from any religious activity, practice, or belief. No one will be required to perform any act or be subject to any procedure whatsoever which is contrary to the person's religious belief.

RIGHT TO FAIR EMPLOYMENT PRACTICES



Each person receiving services will be supported to work in an area of their choice and be paid as anyone doing that work would be paid. No person receiving services shall be required to perform labor, unless voluntarily and if the labor is compensated in accordance with applicable minimum wage laws. No person receiving services shall be involved in the physical care, care and treatment, training or supervision of other persons receiving services unless they have been specifically trained in the necessary skills, have the judgment required for such activities, are adequately supervised, and are reimbursed in accordance with the applicable minimum wage laws.

RIGHT TO VOTE



Each person receiving services who is eligible to vote according to law, has the right to vote in any and all elections.



Rights of Persons Receiving Services (cont'd)



RIGHT TO PERSONAL PROPERTY

Each person receiving services has the right to the possession and use of such person's own clothing and personal effects.





Each person in services has the right to be treated with respect, dignity, with consideration of privacy, free from discrimination and in a humane environment. Each person has the right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation. Each person receiving services shall be attended to by qualified staff in numbers sufficient to provide appropriate services and supports. Corporal punishment, Prone restraints, and Seclusion (placement of a person alone in a closed room for the purpose of punishment) is prohibited. service agencies and providers shall prohibit mistreatment, exploitation, neglect, or abuse in any form.



RIGHT TO NOTIFICATION

Each person receiving services shall have the right to read or have explained, in their native language, any rules or regulations adopted by the Provider and pertaining to such person's activities.



RIGHT TO TECHNOLOGY

TRE believes that the people we serve have the right to technology and information access. While not yet recognized in Colorado law as a civil right, TRE will assist people in accessing technology and information in ways that are personalized and assist them to live more independent lives.



RIGHT TO REPRODUCE

There are procedures in place by the general assembly that when sterilization is being considered for the primary purpose of rendering the individual incapable of reproduction, certain procedures must be followed. Please ask your Service Coordinator about these in the event sterilization is being considered.



RIGHT TO INFLUENCE POLICY

Each person receiving services has the right to communicate and is encouraged to get involved and express opinions. This can be on a local, statewide, national, or international basis based on interest. For opportunities to do this, please contact your Service Coordinator.



RIGHTS TO COMMUNICATIONS AND VISITS

Each person receiving services has the right to communicate freely and privately with others of the person's own choosing. Each person has the right to file a complaint. Each person receiving services has the right to receive and send sealed, unopened correspondence; have reasonable access to

telephones, both to make and to receive calls in privacy; afforded reasonable and frequent opportunities to meet with visitors. All service agencies shall ensure that persons receiving services have suitable opportunities for interaction with persons of their choice.



Mistreatment and Mandatory Reporting

Mistreatment against any person includes Abuse, Caretaker Neglect and Exploitation, and must be reported to law enforcement and APS/CPS, according to Colorado law. REPORTS TO LAW ENFORCEMENT (and APS/CPS) MUST BE MADE to the agency in the jurisdiction where the alleged mistreatment occurred. Additionally, all allegations of mistreatment against any person receiving services must be reported to TRE. PASA and TRE employees, contractors, families, guardians, and any other reporting parties may submit Incident Reports via email (ir@tre.org) or telephone (719) 380-1100. Additionally, allegations may be reported after business hours at (719) 439-9664. For your convivence: Incident Report Form

All allegations of mistreatment will be investigated by law enforcement agencies, county protective services agencies and/or TRE as applicable. Following initial reports of mistreatment, PASAs and TRE are responsible for ensuring any immediate health and safety needs are met and victim supports are provided as applicable to the allegation. Some common signs of potential mistreatment may include (but are not limited to), isolation, unexplained injuries or bruising, missing money or other items of value, fearfulness and/or avoidance or unusual behavior or affect. The definitions noted below may also aid in recognizing when to report suspected or known mistreatment. The following are statutory definitions, found at § C.R.S 25.5-10-202 (29.5) (a) – (e).

ABUSE

Defined as any of the following acts or omissions committed against a person with an intellectual and developmental disability:

- The non-accidental infliction of physical pain or injury, as demonstrated by, but not limited to, substantial or multiple skin bruising, bleeding, malnutrition, dehydration, burns, bone fractures, poisoning, subdural hematoma, soft tissue swelling, or suffocation.
- Confinement or restraint that is unreasonable under generally accepted caretaking standards; or
- Subjection to sexual conduct or contact classified as a crime under the "Colorado Criminal Code", Title 18 of Colorado Revised Statutes (C.R.S.).

EXPLOITATION

An act or omission committed by a person who:

- Uses deception, harassment, intimidation, or undue influence to permanently or temporarily deprive a person with an intellectual and developmental disability of the use, benefit or possession of anything of value.
- Employs the services of a third party for the profit or advantage of the person or another person to the detriment of the person with an intellectual and developmental disability.
- Forces, compels, coerces, or entices a person with an intellectual and developmental disability to perform services for the profit or advantage of the person or another person against the will of the person with an intellectual and developmental disability; or
- Misuses the property of a person with an intellectual and developmental disability in a manner that adversely affects the person with an intellectual and developmental disability's ability to receive health care or health care benefits or to pay bills for basic needs or obligations.

C.R.S 25.5-10-202 (15.5) (a)-(d)



Mistreatment and Mandatory Reporting (cont'd)

UNDUE INFLUENCE

Occurs when the use of influence to take advantage of a person with an intellectual and developmental disability's vulnerable state of mind, neediness, pain, or emotional distress. **C.R.S 25.5-10-202 (37.5)**

CARETAKER NEGLECT

Neglect that occurs when adequate food, clothing, shelter, psychological care, physical care, medical care, habilitation, supervision or other treatment necessary for the health and safety of a person with an intellectual and developmental disability is not secured for a person with an intellectual and developmental disability or is not provided by a caretaker in a timely manner and with the degree of care that a reasonable person in the same situation would exercise, or a caretaker knowingly uses harassment, undue influence or intimidation to create a hostile or fearful environment for an at-risk adult with an intellectual and developmental disability.

CARETAKER NEGLECT EXCEPTION:

Notwithstanding the provisions of paragraph (a) of this subsection (1.8), the withholding, withdrawing or refusing of any medication, any medical procedure or device, or any treatment, including but not limited to resuscitation, cardiac pacing, mechanical ventilation, dialysis, artificial nutrition and hydration, any medication or medical procedure or device, in accordance with any valid medical directive or order, or as described in a palliative plan of care, shall not be deemed caretaker neglect. As used in this subsection (1.8), "medical directive or order" includes a medical durable power of attorney, a declaration as to medical treatment executed pursuant to section 15-18-104, C.R.S., a medical order for scope of treatment form executed pursuant to article 18.7 of title 15, C.R.S., and a CPR directive executed pursuant to article 18.6 of title 15, C.R.S. C.R.S. 25.5-10-202 (1.8) (b) (c)

A CARETAKER IS ANY PERSON WHO:

- Is responsible for the care of a person with a disability as a result of a family or legal relationship.
- Has assumed responsibility for the care of a person with a disability; or is paid to provide care, services, or oversight of services to a person with a disability.



Member Exceptions

New to Colorado is a member exception process. This is in place to ensure you have a choice in the Case Management Agency you prefer. Each CMA has a process in place to accept/deny providing services to people outside of their typical geographic areas. In TRE's case, if you live outside of El Paso, Pueblo, Teller or Park Counties and you choose to receive Case Management from TRE, this applies to you! If approved, you will get a letter to confirm this choice.

The person making the request will send an email to TRE transfer@tre.org for TRE to be the CMA.

- The current CMA will be copied on the email.
- TRE will request the following, preferably in the format listed below:
 - o Subject: Requesting TRE as CMA

Email body:

Name of person in services

Address

County

DOB

Medicaid ID

Contact Information (if there is a guardian or authorized representative, this paperwork needs to

be attached)

Current needs

Current Provider agencies

Brief explanation of why the request is being made to change the CMA

Home and Community Based Services (HCBS)

Home and Community Based Services are often referred to as a waiver – you may hear us use both terms. Waivers are an extra set of Health First Colorado (Colorado's Medicaid program) benefits that you could qualify for in certain cases. These benefits can help you remain in your home and community. Waivers have extra program rules, and some programs may have waitlists.

At TRE, we provide Service Coordination for all the waivers in the next section. It is important to match you up with the waiver that best fits your needs. Some have waitlists, some do not, but talk to your Service Coordinator about options available to you.

Once you are using a waiver, it is possible to change waivers. Again, there may be a waiting list, specifically with the Developmental Disability waiver, but we can also look at Emergency Situations to see if set criteria is met. Always talk to your coordinator if your needs change. Be aware, that if you do change waivers, you will go through an eligibility process, have new start/end dates, likely a new Service Coordinator, etc.

Information in the following pages can be found here:

Home and Community-Based Services Waivers | Colorado Department of Health Care Policy & Financing



Home and Community Based Services for Children

Children's Extensive Support Waiver (CES) Birth-18

The Children's Extensive Support (CES) Waiver helps children and families by providing services and supports that will help children establish a long-term foundation for community inclusion as they grow into adulthood.

WHO QUALIFIES?

Level of Care

• Children must meet Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) level of care which is determined by the Functional Needs Assessment (ICF/IID services are defined in the Code of Federal Regulations: 42 CFR § 440.150)

Eligibility Group

Children in this program:

- · Are less than eighteen years of age
- Have been determined to have a developmental disability which includes developmental delay if under five (5) years of age
- Live in the family home
- Demonstrate a medical or behavioral condition that is so intense that almost constant line of sight supervision is required to keep the child and others safe
- Are determined to meet the Federal Social Security Administration's definition of disability

Financial

 Children must meet the Health First Colorado financial determination for Long-Term Services and Supports eligibility. Financial determination requirements are outlined in the Colorado Code of Regulations 10 CCR 2505-10, Section 8.100.

BENEFITS AND SERVICES

- Adaptive Therapeutic Recreational Equipment and Fees
- Assistive Technology
- Community Connector
- Home Accessibility Adaptations
- Homemaker Services
- Parent Education

- Professional Services
 - Hippotherapy
 - Massage Therapy
 - Movement Therapy
- Respite Care
- Specialized Medical Equipment & Supplies
- Vehicle Adaptations
- Youth Day

Children who receive services through the CES waiver are also eligible for all <u>Health First Colorado covered</u> <u>services</u> as long as they are not duplicative. <u>View the full text of the CES waiver and Waiver Lifecycle</u>

Source and more information: <u>Children's Extensive Support Waiver (CES) | Colorado Department of Health Care</u>
Policy & Financing



Home and Community Based Services for Children (cont'd)

Children's Home and Community-Based Services Waiver (CHCBS)

CHCBS is available for children with significant medical needs and who are at risk for institutional care in an acute hospital or skilled nursing facility.

- Services work with or add to the services that are available to your child through the Health First Colorado State plan and other federal, state, and local public programs.
- CHCBS also works with the supports that families and communities provide.

WHO QUALIFIES?

Your child must meet the following financial and program criteria to access services under this program. To use waiver benefits, your child must also be willing to receive services in your home or community.

Level of Care

- Your child must need long-term support services at a level comparable to services typically provided in a skilled nursing facility and/or an acute hospital.
- Your child must meet the Social Security Administration (SSA) definition of disability.
- Eligibility GroupYour child must not have reached their 18th birthday.
- Your child requires medical care that would typically be provided in either a skilled nursing facility and/or an acute hospital.

Financial

- Your child's income must be less than three times the current Federal Supplemental Security Income
 (SSI) limit per month (See <u>SSI website</u> for current information) and his or her countable resources must
 be less than \$2,000.
- Due to your income and/or resources, your child would not be otherwise eligible for Health First Colorado (Colorado's Medicaid Program).

BENEFITS AND SERVICES

Case Management ServicesIn-Home Support Services

Children who receive services through the CHCBS waiver are also eligible for all <u>Health First Colorado covered</u> services. <u>View the full text of the CHCBS waiver and Waiver Lifecycle</u>Source and more information: <u>Children's Home and Community-Based Services Waiver (CHCBS) | Colorado Department of Health Care Policy & Financing</u>



Home and Community Based Services for Children (cont'd)

Children's Habilitation Residential Program Waiver (CHRP) Birth-20

The Children's Habilitation Residential Program (CHRP) Waiver provides services for children and youth who have an intellectual or developmental disability and very high needs. Their needs for support put them at risk of, or in need of, out-of-home placement. Waiver services help children and youth learn and maintain the skills needed to live in their communities.

WHO QUALIFIES?

Level of Care

• Children must meet Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) level of care which is determined by the Functional Needs Assessment (ICF/IID services are defined in the Code of Federal Regulations: 42 CFR § 440.150)

Eligibility Group

- Your child is aged 0-20 years old.
- Your child has an intellectual or developmental disability or developmental delay if under age five (5) and has intensive behavioral or medical support needs that put them at risk or in need of out-of-home placement.

BENEFITS AND SERVICES

- Community Connector Services
- <u>Habilitation Services Residential 24-Hour</u>
 Support
 - Cognitive Services*
 - Communication Services*
 - Emergency Assistance Training*
 - Independent Living Training*
 - Personal Care Services*
 - Self-Advocacy Training*
 - Supervision Services*
 - Travel Services*
- Respite Services

- Professional Services
 - Hippotherapy
 - o Massage
 - o Movement Therapy
- Intensive Support Services
 - Wraparound Facilitator and Wraparound Plan
 - Prevention/Monitoring
 - Child & Youth Mentorship
- Transition Support Services
 - Wraparound Facilitator and Wraparound Plan
 - Prevention/Monitoring
 - Child & Youth Mentorship

TRE Note: Children aging out of CHRP can choose an adult waiver including the DD waiver, dependent on needs. If not chosen at the time of age-out, placement on the waitlist is an option. There is also an opportunity to request a DD enrollment if an emergency arises.

Children who receive services through the CHRP waiver are also eligible for all <u>Health First Colorado covered</u> services as long as they are not duplicative. <u>View the full text of the CHRP waiver and Waiver Lifecycle</u>

Source and more information: <u>Children's Habilitation Residential Program Waiver (CHRP) | Colorado</u>
Department of Health Care Policy & Financing



^{*}These services are not billed separately but under the habilitation services and are part of residential services

Home and Community Based Services for Children (cont'd)

Children with Life-Limiting Illness Waiver (CLLI) Birth-19

The CLLI program provides Health First Colorado benefits in the home for children with a life-limiting illness. This waiver allows you to seek curative treatment while your child is receiving palliative care.

• Services offered with this waiver supplement the services that you already receive through regular health First Colorado benefits and other federal, state, and local public programs, as well as the support that you get from your community.

WHO QUALIFIES?

Your child must meet financial and program criteria to access services under the CLLI program. You must be willing to receive services in your home or community.

Level of Care

- Your child must be at risk of institutionalization in a hospital setting.
- Your child must meet the Social Security Administration definition of disability.

Eligibility Group

- Your child must be 18 years or younger.
- Your child must have a life-limiting illness certified by a physician.

Financial

- Your child's income must be less than three times the current Federal Supplemental Security Income
 (SSI) limit per month (See <u>SSI website</u> for current information) and their countable resources must be
 less than \$2,000.
- Parent income is not considered for the child's eligibility.

BENEFITS AND SERVICES

- Counseling/Bereavement Services
- Expressive Therapy
- Massage Therapy
- Palliative/Supportive Care
- Respite Care Services
- Therapeutic Life Limiting Illness Support

Children who receive services through the CLLI waiver are also eligible for all <u>Health First Colorado covered</u> services except nursing facility and long-term hospital care. <u>View the full text of the CLLI waiver and Waiver</u> Lifecycle

Source and more information: <u>Children With Life Limiting Illness Waiver (CLLI) | Colorado Department of Health</u>
<u>Care Policy & Financing</u>



Supported Living Services Waiver (SLS) Ages 18+

The Supported Living Services (SLS) waiver provides necessary services and supports for individuals with adults with intellectual or developmental disabilities so they can remain in their homes and communities with minimal impact to individuals' community and social supports. The SLS waiver promotes individual choice and decision-making through the planning process and the tailoring of services and supports to address prioritized, unmet needs. In addition, this waiver is designed to supplement existing natural supports and traditional community resources with targeted and cost-effective services and supports. The person receiving services is responsible for living arrangements which can include living with family or in their own home. Up to three persons receiving services can live together. Participants do not require twenty-four (24) hour supervision on a continuous basis for services and supports offered on this waiver.

WHO QUALIFIES?

To enroll in the HCBS-SLS waiver the individual must meet financial and program criteria: Level of Care

• Individuals must meet Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID) level of care as determined by the functional needs assessment (as defined in 42 CFR § 440.150).

Eligibility Group

• Individuals must be determined by a <u>Community Centered Board (CCB)</u> to have a developmental disability AND Individuals must be 18 years or older.

Financial

- Your income must be less than three times the current Federal Supplemental Security Income (SSI) limit per month. (See <u>SSI website</u> for current information)
- For a single person, countable resources must be less than \$2,000; for a couple, less than \$3,000.
- If you do not meet these financial requirements, you may be eligible through the <u>Health First Colorado</u> Buy-In Program for Working Adults with Disabilities.

BENEFITS AND SERVICES

- Assistive Technology
- Behavioral Services
- Consumer Directed Attendant Support Services (CDASS)
- <u>Day Habilitation</u>
 <u>Services</u> (Specialized Habilitation, Supported Community Connections)
- HCBS Dental Services
- Health Maintenance Activities
- Home Delivered Meals

- Home Modifications
- Homemaker Services
- Life Skills Training
- Mentorship
- Non-Medical Transportation
- Peer Mentorship
- Personal Care Services
- Personal Emergency Response
 System (PERS)
- <u>Prevocational Services</u>

- <u>Professional Services</u> (Includes Hippotherapy, Massage & Movement Therapy)
- Respite Services
- Specialized Medical Equipment and Supplies
- Supported Employment
- <u>Transition Set Up</u>
- Vehicle Modifications
- Vision Services

Individuals who receive services through the SLS waiver are also eligible for all <u>Health First Colorado covered services</u> as long as they are not duplicative. <u>View the full text of the SLS waiver and Waiver Lifecycle</u>

Source and more information: <u>Supported Living Services Waiver (SLS) | Colorado Department of Health Care Policy & Financing</u>



Developmental Disabilities Waiver (DD) Ages 18+

The Home and Community-Based Services Waiver For Persons With Developmental Disabilities (DD) provides access to 24-hour, seven days a week supervision through Residential Habilitation and Day Habilitation Services and Supports. The service provider is responsible to support individuals in services to find living arrangements. Living arrangements can range from host homes settings with 1-2 persons, individualized settings of 1-3 persons, and group settings of 4-8 persons, as well as residential supports for participants who live in their own home or who live with and/or are provided services by members of their family.

WHO QUALIFIES?

To enroll in the DD waiver, you must meet financial and program criteria: Level of Care

• Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID) level of care as determined by the functional needs assessment (as defined in 42 CFR 440.150).

Eligibility Group

- You must be determined to have a developmental disability.
- You must be 18 years or older.
- You must require access to services and supports 24 hours a day.

Financial

- Your income must be less than three times the current Federal Supplemental Security Income (SSI) limit per month. (See <u>SSI website</u> for current information)
- For a single person, countable resources must be less than \$2,000; for a couple, less than \$3,000.
- If you do not meet these financial requirements, you may be eligible through the <u>Health First Colorado</u> <u>Buy-In Program for Working Adults with Disabilities</u>.

BENEFITS AND SERVICES

If you are enrolled in the DD waiver, you may receive the following services to address needs:

- Behavioral Services
- <u>Day Habilitation Services</u> (Specialized Habilitation, Supported Community Connections)
- HCBS Dental Services
- Home Delivered Meals
- Non-Medical Transportation
- Peer Mentorship

Prevocational Services

- <u>Residential Habilitation Services</u> (24-hour individual or group)
- Specialized Medical Equipment and Supplies
- <u>Supported Employment</u>
- Transition Set Up
- Vision Services

Individuals who receive services through the DD waiver are also eligible for all <u>Health First Colorado covered</u> services as long as they are not duplicative. <u>View the full text of the DD waiver and Waiver Lifecycle</u>

Source and more information: <u>Developmental Disabilities Waiver (DD) | Colorado Department of Health Care</u>
Policy & Financing



Community Mental Health Supports Waiver (CMHS) Ages 18+

The Home and Community-Based Services Community Mental Health Supports Waiver (CMHS) provides assistance to people with a mental illness that require long-term supports and services in order to remain in a community setting.

- CMHS services work with or add to the services that are available to you through the Health First Colorado State plan and other federal, state, and local public programs.
- CMHS works with the supports that families and communities provide.

WHO QUALIFIES?

You must meet the following financial and program criteria to access services under this program. To use waiver benefits, you must also be willing to receive services in your home or community.

Level of Care

 You must require long-term support services at a level comparable to services typically provided in a nursing facility.

Eligibility Group

- A person experiencing severe and persistent mental health needs that require assistance with one or more Activities of Daily Living (ADL),
- 18 years of age or older with a severe and persistent mental health need,
- Currently has or at any time during the past year leading up to assessment has a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), and
- Has a disorder that is episodic, recurrent, or has persistent features, but may vary in terms of severity and disabling effects, and
- Has resulted in functional impairment which substantially interferes with or limits one or more major activities.
- A severe and persistent mental health need does not include:
 - o Intellectual or developmental disorders, or
 - Substance use disorder without a co-occurring diagnosis of a severe and persistent mental health need.

Financial

- Your income must be less than three times the current Federal Supplemental Security Income (SSI) limit per month. (See <u>SSI website</u> for current information)
- For a single person, countable resources must be less than \$2,000; for a couple, less than \$3,000.
- If you do not meet these financial requirements, you may be eligible through the <u>Health First Colorado Buy-In</u> <u>Program for Working Adults with Disabilities.</u>

BENEFITS AND SERVICES

If you are enrolled in the CMHS waiver, you will receive regular <u>Health First Colorado benefits</u>. Additionally, you will also receive the following services specific to the CMHS waiver:

- Adult Day Services
- Alternative Care Facilities
- Consumer Directed
 Attendant Support Services
 (CDASS)
- Home Delivered Meals

- Homemaker Services
- Life Skills Training
- Medication Reminder
- Non-Medical Transportation
- Peer Mentorship

Personal Care

- Personal Emergency Response System (PERS)
- Respite Care
- Transition Set Up

If you receive services through the CMHS waiver, you are also eligible for all <u>Health First Colorado covered</u> services **except** nursing facility and long-term hospital care. View the full text of the CMHS waiver and Waiver Lifecycle

Source and more information: <u>Community Mental Health Supports Waiver (CMHS) | Colorado Department of Health</u>
Care Policy & Financing



Elderly, Blind, and Disabled (EBD) Ages 18+

The Home and Community-Based Services Waiver for persons who are Elderly, Blind, or Disabled (EBD) provides assistance to people ages 65 and older who have a functional impairment, or are blind, or to people ages 18-64 who are physically disabled or have a diagnosis of HIV or AIDS and require long-term supports and services in order to remain in a community setting. Effective April 1, 2014, this program incorporated services formerly provided under the Persons Living with AIDS/HIV (PLWA) program.

- EBD services work with or add to the services that you receive through the Health First Colorado State Plan and other federal, state, and local public programs.
- EBD also works with the supports that families and communities provide.

WHO QUALIFIES?

You must meet the following financial and program criteria to access services under this program. To use waiver benefits, you must also be willing to receive services in your home or community.

Level of Care

- You require long-term support services at a level comparable to services typically provided in a nursing facility. Eligibility Group
 - You must be 18 years or older.
 - If you are between the ages of 18 and 64, you must be blind or have a physical disability, or have a diagnosis of HIV or AIDS.
 - If you are age 65 and older, you must have been determined to have a significant functional impairment.

Financial

- Your income must be less than three times the current Federal Supplemental Security Income (SSI) limit per month. (See SSI website for current information)
- For a single person, countable resources must be less than \$2,000; for a couple, less than \$3,000.
- If you do not meet these financial requirements, you may be eligible through the <u>Health First Colorado Buy-In</u> Program for Working Adults with Disabilities.

BENEFITS AND SERVICES

If you are enrolled in the EBD waiver, you will receive regular <u>Health First Colorado benefits</u>. Additionally, you will also receive the following services specific to the EBD waiver:

- Adult Day Services
- Alternative Care Facilities
- Consumer Directed
 Attendant Support Services
 (CDASS)
- Electronic Monitoring

- Home Delivered Meals <u>Home Modifications</u>
- Homemaker Services
- <u>In-Home Support Services</u> (IHSS)
- Life Skills Training
- Non-Medical Transportation

- Peer Mentorship
- Personal Care
- Respite Care
- Transition Set Up

If you receive services through the EBD waiver, you are also eligible for all <u>Health First Colorado covered</u> services **except** nursing facility and long-term hospital care. <u>View the full text of the EBD waiver and Waiver Lifecycle</u>

Source and more information: <u>Elderly, Blind, and Disabled Waiver (EBD) | Colorado Department of Health Care Policy & Financing</u>



Brain Injury (BI) Ages 16+

The Brain Injury (BI) waiver helps people with a brain injury who need extra support to live in their communities. Getting waiver services won't change supports that you may get from other public programs, your family, or the community.

WHO QUALIFIES?

You must meet financial and program requirements to get BI waiver services. You must also be willing to get services in your home or community.

Level of Care Requirement

• You must need long-term services as you would get in a nursing home or a hospital.

Eligibility Group

- You must be 16 years or older.
- You must have a brain injury.
- Your brain injury occurred before your 65th birthday.
- Your diagnosis must fit within certain categories. Contact your local <u>Single Entry Point (SEP)</u> to find out more.

Financial

- Your income must be less than three times the current Federal Supplemental Security Income (SSI) limit per month. (See SSI website for current information)
- For a single person, countable resources must be less than \$2,000; for a couple, less than \$3,000.
- If you do not meet these financial requirements, you may be eligible through the <u>Health First Colorado</u> Buy-In Program for Working Adults with Disabilities.

BENEFITS AND SERVICES

- Adult Day Services
- Behavioral Management and Education
- Consumer Directed Attendant Support Services (CDASS)
- <u>Day Treatment</u>
- Home Delivered Meals
- Home Modification
- Independent Living Skills Training (ILST)
- Medication Reminder
- Mental Health Counseling

Non-Medical Transportation

- Peer Mentorship
- Personal Care
- Personal Emergency Response System (PERS)
- Respite Care
- Specialized Medical Equipment & Supplies
- Substance Abuse Counseling
- Supported Living Program
- Transition Set Up
- Transitional Living Program

You can get these extra services along with your regular <u>Health First Colorado covered services</u> as long as they are not duplicative. Nursing facility and long-term hospital care are not covered while you get waiver services. <u>View the full text of the BI waiver and Waiver Lifecycle</u>

Source and more information: Brain Injury Waiver (BI) | Colorado Department of Health Care Policy & Financing



Complementary and Integrative Health Waiver (CIH) (formerly SCI Waiver) 18+

WHO QUALIFIES?

The Home and Community-Based Services Complementary and Integrative Health waiver helps individuals living with a spinal cord injury, multiple sclerosis, a brain injury, spina bifida, muscular dystrophy, or cerebral palsy with the inability for independent ambulation.

To qualify for the CIH waiver, you must:

- Be 18 years of age or older
- Have a qualifying condition of a spinal cord injury (traumatic or nontraumatic), multiple sclerosis, brain injury, spina bifida, muscular dystrophy, or cerebral palsy
- Have been determined to have an inability for independent ambulation resulting from the qualifying condition as identified by the case manager through the assessment process. The inability for independent ambulation for the HCBS-CIH waiver means:
 - The individual does not walk, and requires use of a wheelchair or scooter in all settings, whether or not they can operate the wheelchair or scooter safely, on their own, OR;
 - The individual does walk, but requires use of a walker or cane in all settings, whether or not they can use the walker or cane safely, on their own, OR;
 - The individual does walk, but requires "touch" or "stand-by" assistance to ambulate safely in all settings.
- Have been determined to be financially eligible
 - If you do not meet the financial requirements, you may be eligible through the <u>Health First Colorado</u> <u>Buy-In Program for Working Adults with Disabilities</u>.
- Have been determined to need long-term services and supports as you would receive in a nursing home or a hospital.

BENEFITS AND SERVICES

- Adult Day Services
- Complementary and Integrative Health Services (Acupuncture, Chiropractic, Massage Therapy)
- Consumer Directed Attendant Support Services (CDASS)
- Home Delivered Meals
- Home Modification
- Homemaker Services
- In-Home Support Services (IHSS)

- Life Skills Training
- Medication Reminder
- Non-Medical Transportation
- Peer Mentorship
- Personal Care
- Personal Emergency Response Systems (PERS)
- Respite Care
- Transition Set Up

Source and more information: Complementary and Integrative Health Waiver (CIH) | Colorado Department of Health Care Policy & Financing



Consumer Directed Services and Supports (CDASS)

Consumer Directed Attendant Support Services (CDASS) is a service option in some of the waivers listed on the previous pages to include:

Brain Injury (BI) waiver
Community Mental Health Supports (CMHS) waiver
Elderly, Blind and Disabled (EBD) waiver

<u>Spinal Cord Injury (SCI) waiver</u> Supported Living Services (SLS) waiver

CDASS empowers you to hire, train and manage attendants who provide your personal care, homemaker, and health maintenance services, rather than working through an agency. This allows you to find the best fit for your unique needs. You may also delegate these responsibilities to an Authorized Representative (AR). While having an AR is always an option there are also instances where it will be required. This flexibility enables you to manage the services you need to live independently and to participate in your community more fully.

Services included in CDASS are below:

- Personal Care includes assistance with activities such as bathing, dressing, or eating.
- Health Maintenance includes assistance with health-related activities that are typically provided by a certified or licensed attendant, such as a CNA, LPN, or RN. In CDASS, the Nurse Practice Act has been waived so that members have the flexibility to hire and train staff without certifications or licensure.
- <u>Homemaker Services</u> include assistance with general household activities needed to maintain a healthy
 and safe living environment, such as housekeeping, meal preparation and laundry.

Please note: CDASS income can increase the income of a home and is included when applying for other benefits such as food assistance, and cash programs. With proper documentation and approval from DHS, the only program that CDASS is exempt from is MAGI if the caregiver lives in the home of the person receiving LTC.

Accessing CDASS is sometimes a lengthy process. Please see the timeline on the next page for the required steps before this service can be received.

Source and more information: https://hcpf.colorado.gov/consumer-directed-attendant-support-services





Accessing Consumer Directed Services and Supports (CDASS)





Home Modifications

Home Modifications vary from waiver to wavier as to what benefit is allowable over what period. These can take quite a bit of time to get started and complete. It often takes up to 120 days AFTER the receipt of the professional in-home assessment to get a final approval. If your child is aging into an adult wavier (at age 18 for most waivers), it is important to start this as early as possible. Requests received within 120 days of aging out of a waiver will be denied.

Source and more information: <u>Home Modification Benefit | Colorado Department of Health Care Policy & Financina</u>

State General Fund Services

Family Support Services Program

The Family Support Services Program (FSSP) provides support for families who have children with intellectual and developmental disabilities or delays with costs that are beyond those normally experienced by other families. The primary purpose of the FSSP is to support children with intellectual and developmental disabilities or delays remaining within their family setting and prevent out-of-home placements.

WHO QUALIFIES?

Any individual with an Intellectual and Developmental Disability (IDD) or Developmental Delay living with their family is eligible for the FSSP.

BENEFITS AND SERVICES

Examples of services that may be provided through the program:

- Assistive Technology
- Environmental Engineering
- Medical and Dental Items
- Parent and Sibling Support
- Professional Services
- Respite
- Transportation

Note: FSSP is not an entitlement program and there is no guarantee that funding will be available.

Source and more information: https://hcpf.colorado.gov/family-support-services-program-fssp



State General Fund Services (cont'd)

State-Supported Living Services Program

The State Funded Supported Living Services (State-SLS) program is funded through an allocation from the Colorado General Assembly. The State-SLS program is designed to provide supports to individuals with an intellectual or developmental disability to remain in their community. The State-SLS program shall not supplant Home and Community Based services for those who are currently eligible.

WHO QUALIFIES?

Eligibility Group

You must be 18 years or older and a Colorado resident

- Be determined to have an intellectual or developmental disability pursuant to the procedures set forth in section 8.607.
- Eligibility for the State-SLS program does not guarantee the availability of services and supports under this program.

General Provisions

The availability of services offered through the State-SLS program may not be consistent throughout the State of Colorado or among CCBs.

- An individual enrolled in the State-SLS program shall access all benefits available under the Medicaid State Plan, HCBS Waiver or EPSDT, if available, prior to accessing services under the State-SLS program.
 Services through the State-SLS program may not duplicate services provided through the State Plan when available to the Client.
- When an individual is enrolled only in the State-SLS program the CCB Case Manager shall authorize a Program Approved Service Agency (PASA) to deliver the services, when available.

BENEFITS AND SERVICES

- Supports for individuals awaiting HCBS waiver enrollment
- Supports for individuals experiencing temporary hardships
- Supporting independence in the community
- On-going State-SLS Support

State-SLS funds may be authorized by the CCB for individuals who have been determined to meet the DD Determination requirements, but do not meet the requirements to be enrolled in HCBS-SLS Waiver section 8.500.93.



State General Fund Services (cont'd)

Home Care Allowance

The Home Care Allowance (HCA) program provides cash assistance to individuals five (5) years of age and older with a disability to pay a home care provider. HCA is used to pay for services to help clients remain in their homes (such as bathing, dressing, meal preparation, and shopping). Services are provided by a home care provider. *Download the information below as a fact sheet*.

Program purpose

- The Home Care Allowance (HCA) program provides cash assistance to individuals five (5) years of age and older with a disability to pay a home care provider.
- HCA is used to pay for services to help clients remain in their homes (such as bathing, dressing, meal preparation, and shopping).
- Services are provided by a home care provider.
- There are three levels of payments, the maximum 2021 HCA grants are:
 - o Tier 1 \$330.00
 - o Tier 2 \$472.00
 - o Tier 3 \$605.00

Eligibility

- Eligibility for HCA is based on financial need and functional ineligibility for a HCBS Waiver.
- Financial eligibility is determined by the client's income and resources.
 - o To be financially eligible, the client must be:
 - approved for Supplemental Security Income (SSI),
 - meet all eligibility criteria for the Aid to the Needy Disabled State Only (AND-SO) program or
 - have been receiving both Old Age Pension (OAP) and HCA as of 12/31/13 and remain continuously eligible for both benefits.
- Functional capacity is determined by a standard assessment of the client's capacity to complete daily activities and the frequency that assistance is needed to complete those activities.
- HCA cannot be received while receiving or if eligible for Home and Community Based Services (HCBS).
- HCA applicants/clients must be assessed for HCBS by Single Entry Point (SEP) agencies at each functional
 assessment. If the client is functionally eligible for HCBS, then the client is ineligible for HCA regardless of
 financial eligibility.

Service providers

- SEP agencies are responsible for:
 - o Case management duties.
 - Conducting functional assessments for HCBS and HCA to determine functional eligibility, and if eligible, the amount of assistance.
 - Developing and monitoring care plans.

County role

- Responsible for determining financial eligibility.
- Retains case records.

State role

- Monitors and evaluates program performance.
- Establishes statewide program policy in consultation with the State Board of Human Services.
- Provides training, technical assistance, and consultation to county departments and the SEPs.

Funding

• The total appropriation for HCA is \$8,720,437. \$8,218,473 from the General Fund and \$501,964 from Cash Funds. The State contributes 95% and the counties are required to fund the remaining 5%.





Helpful Resources

- TRE website
- Regional Accountability Entities (RAE):
 - El Paso, Park and Teller Counties: Colorado Community Health Alliance (CCHA)
 - Pueblo County: Health Colorado
- Department of Human Services:
 - El Paso, Park and Teller Counties or (719) 444-5532 or (303) 866-5700
 - Pueblo County or (719) 583-6160
- Colorado Department of Health Care Policy and Financing or (303) 866-2993 / (800) 221-3943
 - Acronym Glossary
 - Health First Colorado Member Handbook (Medicaid) or (800) 221-3943
- Centers for Medicare and Medicaid Services or (800) 772-1213
- Colorado Revised Statute or contact the Office of Legislative Legal Services at (303) 866-2045
- <u>Early and Periodic Screening, Diagnostic and Treatment (EPSDT)</u>: Provides comprehensive and preventive health care services for Health First Colorado (Colorado's Medicaid Program); members age 20 and under and must be accessed prior to HCBS services.
- Division of Vocational Rehab or (719) 635-3585 or (303) 318-8571
- Federal Supplemental Security Income (SSI) or (800) 772-1213 (TTY 1-800-325-0778).
- Other Resources and assistance available to you: https://cdhs.colorado.gov/benefits-assistance





The Resource Exchange CONSENT TO RELEASE INFORMATION, PHOTOS/VIDEOS/STATEMENTS

Please keep this copy for your records

Name:			
Birthdate:			
The Resource Ex person(s) or orga	I change (TRE) is authorized to disclose or release my Prog anization(s):	ected Health Information as specified bel	ow to the following
Name:			
Or			
Organization: _			
	ested or released can include, but is not limited to medical reconformation, or vocational assessments/records. If there is other		
Initial your pref	erence.		
	TRE may use my full name on marketing and pro	omotions materials.	
	TRE may only use my first name on marketing a	nd promotions materials.	
TRE marketing a	above: Photos, Videos, Statements, printed material. These ma and promotions both internally with staff and externally with t statements, and printed materials released between the effect lic domain.	ne community via TRE's website and social med	dia. I understand
	I DO NOT wish for The Resource Exchange to phemarketing and/or promotional materials.	otograph or use my likeness to promo	ote TRE in any
	EED FOR INFORMATION BEING REQUESTED: This coargeting criteria for services received from TRE. Ad	•	to ensure
	A: This consent will remain in effect for one year from the sertify that this request has been made voluntarily a	_	d until revoked by
that I/we do so i	we authorize this to be a two-way release and understan in writing to The Resource Exchange. Signatures below on in is accurate to the best of my knowledge.		
Signature of Inc	dividual	Date	(OR)
	rent/Guardian		
	of signor above:		



Receipt of Participant Handbook ***Please keep this copy for your records***

Person Receiving Services:	
I have received a copy of the "Guide to Receiving Services from The Resource Exch documents, had a chance to ask questions and have been able to see source docu enrollments or as requested. I am aware of who to contact should I have any conc	ments as listed upon
Newsletters and Mailing List sign up options – page 2	
Contacts/Communicating with TRE – page 2	
Stay Informed – page 2	
Confidentiality – page 5	
Qualified Service Providers (local and statewide) – page 6	
Complaints, disputes, grievances – page 8	
Explanation of Your Rights – page 9-10	
Mistreatment and Mandatory Reporting – page 11-12	
Member Exception Process - page 13	
Available services in the waiver/program (Fact Sheets from HCPF) – pages 13-23	
Signature of Individual	Date
Signature of Parent/Guardian	Date
Written Name of signor	



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Available services in the waiver/program (Fact Sheets from HCPF) – pages 13-23	
Signature of Individual	Date
OR	
Signature of Parent (for those under 18)/Guardian	Date
Written Name of signor	

