

Second Regular Session
Sixty-eighth General Assembly
STATE OF COLORADO

REREVISED

*This Version Includes All Amendments
Adopted in the Second House*

LLS NO. 12-0533.01 Debbie Haskins x2045

SENATE BILL 12-023

SENATE SPONSORSHIP

Boyd,

HOUSE SPONSORSHIP

Summers and Kerr A.,

Senate Committees

Health and Human Services

House Committees

Health and Environment

A BILL FOR AN ACT

101 **CONCERNING THE PROGRAM OF ALL-INCLUSIVE CARE FOR THE**
102 **ELDERLY, AND, IN CONNECTION THEREWITH, ADDRESSING**
103 **ENROLLMENT OF PERSONS WHO ARE ELIGIBLE FOR THE PACE**
104 **PROGRAM AND ADDRESSING HOW THE PACE PROGRAM WORKS**
105 **WITH INTEGRATIVE INITIATIVES INVOLVING THE MEDICAID**
106 **POPULATION IN COLORADO.**

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries.>)

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
*Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.*

HOUSE
3rd Reading Unam ended
M arch 21 , 2012

HOUSE
2nd Reading Unam ended
M arch 20 , 2012

SENATE
3rd Reading Unam ended
M arch 6 , 2012

SENATE
Am ended 2nd Reading
M arch 5 , 2012

The bill removes organizations providing a program of all-inclusive care for the elderly (PACE) from licensure by the department of public health and environment as home care agencies.

The bill requires the department of health care policy and financing (department) staff, the single entry point system staff, county department staff, and PACE program staff to fully inform an eligible person, prior to enrolling the person in an accountable care organization or collaborative, a managed care organization, or other risk-bearing entity that serves medicaid or medicaid-eligible beneficiaries, about the benefits available through the PACE program in the area where the eligible person resides and that PACE enrollment is an option for the eligible person. The medical services board (board) is required to adopt rules regarding these requirements.

The term "eligible person", for purposes of the PACE program, is amended to include dually eligible persons. A "dually eligible person" is defined as a person who is eligible for assistance or benefits under both medicaid and medicare. The bill also defines "accountable care organization or collaborative" and "regional care collaborative organization".

An eligible person who is enrolled in an accountable care organization or collaborative, a managed care organization, or other risk-bearing entity may elect to withdraw from or terminate such enrollment and enroll in and receive services from a PACE program. The board's rules shall define how such election is made.

The department shall provide quarterly to each PACE provider a list of all eligible persons residing in the area served by such PACE provider who have not elected to participate in the PACE program.

1 *Be it enacted by the General Assembly of the State of Colorado:*
2 **SECTION 1. In Colorado Revised Statutes, 25.5-5-412, amend**
3 **(6) and (7); and add (6.5) as follows:**
4 **25.5-5-412. Program of all-inclusive care for the elderly -**
5 **legislative declaration - services - eligibility - rules.** (6) The state
6 department, in cooperation with the single entry point agencies
7 established in section 25.5-6-106, shall develop and implement a
8 coordinated plan to provide education about PACE program site
9 operations under this section. The state board shall adopt rules:
10 (a) To ensure that case managers and any other appropriate state

1 department staff discuss the option and potential benefits of participating
2 in the PACE program with all eligible long-term care clients. These rules
3 shall require additional and on-going training of the single entry point
4 agency case managers in counties where a PACE program is operating.
5 This training shall be provided by a federally approved PACE provider.
6 In addition, each single entry point agency may designate case managers
7 who have knowledge about the PACE program; AND

8 (b) TO ALLOW PACE PROVIDERS TO CONTRACT WITH AN
9 ENROLLMENT BROKER TO INCLUDE THE PACE PROGRAM IN ITS
10 MARKETING MATERIALS TO ELIGIBLE LONG-TERM CLIENTS.

11 (6.5) AN ELIGIBLE PERSON WHO IS ENROLLED IN A MANAGED CARE
12 ORGANIZATION, AN ORGANIZATION CONTRACTED WITH THE STATE
13 DEPARTMENT PURSUANT TO PART 4 OF ARTICLE 5 OF THIS TITLE, OR OTHER
14 RISK-BEARING ENTITY MAY ELECT TO WITHDRAW FROM OR TERMINATE
15 SUCH ENROLLMENT AND ENROLL IN AND RECEIVE SERVICES THROUGH A
16 PACE PROGRAM. THE STATE BOARD'S RULES SHALL DEFINE HOW SUCH
17 ELECTION IS MADE. THE EFFECTIVE DATE OF AN ELIGIBLE PERSON'S
18 ELECTION SHALL NOT BE MORE THAN THIRTY DAYS AFTER THE ELIGIBLE
19 PERSON'S DATE OF ELECTION.

20 (7) For purposes of this section:

21 (a) "DUALY ELIGIBLE PERSON" MEANS A PERSON WHO IS ELIGIBLE
22 FOR ASSISTANCE OR BENEFITS UNDER BOTH MEDICAID AND MEDICARE.

23 (b) "Eligible person" means a frail elderly individual who
24 voluntarily enrolls in the PACE program and whose gross income does
25 not exceed three hundred percent of the current federal supplemental
26 security income benefit level, whose resources do not exceed the limit
27 established by the state department of human services for individuals

1 receiving a mandatory minimum state supplementation of SSI benefits
2 pursuant to section 26-2-204, C.R.S., or in the case of a person who is
3 married, do not exceed the amount authorized in section 25.5-6-101, and
4 for whom a physician licensed pursuant to article 36 of title 12, C.R.S.,
5 certifies that such a program provides an appropriate alternative to
6 institutionalized care. "ELIGIBLE PERSON" MAY ALSO INCLUDE A DUALY
7 ELIGIBLE PERSON.

8 (c) The term "Frail elderly" means an individual who meets
9 functional eligibility requirements, as established by the state department,
10 for nursing home care and who is fifty-five years of age or older.

11 **SECTION 2. In Colorado Revised Statutes, 25.5-6-106, amend**
12 **(2) (b) (IV); and add (2) (c) (IX.5) as follows:**

13 **25.5-6-106. Single entry point system - authorization - phases**
14 **for implementation - services provided. (2) Single entry point**
15 **agencies - service programs - functions. (b) The agency may serve**
16 **private paying clients on a fee-for-service basis and shall serve clients of**
17 **publicly funded long-term care programs, including, but not limited to,**
18 **the following:**

19 (IV) Long-term home health care, INCLUDING SERVICES PROVIDED
20 BY A PACE ORGANIZATION PROVIDING A PROGRAM OF ALL-INCLUSIVE
21 CARE FOR THE ELDERLY PURSUANT TO SECTION 25.5-5-412.

22 (c) The major functions of a single entry point shall include, but
23 need not be limited to, the following:

24 (IX.5) INFORMING ELIGIBLE PERSONS ABOUT THE BENEFITS OF
25 PARTICIPATING IN THE PROGRAM OF ALL-INCLUSIVE CARE FOR THE
26 ELDERLY PROVIDED BY A PACE ORGANIZATION PURSUANT TO SECTION
27 25.5-4-412 AS AN ALTERNATIVE TO ENROLLMENT IN A MANAGED CARE

1 ORGANIZATION, AN ORGANIZATION CONTRACTED WITH THE STATE
2 DEPARTMENT PURSUANT TO PART 4 OF ARTICLE 5 OF THIS TITLE, OR OTHER
3 RISK-BEARING ENTITY.

4 **SECTION 3. Safety clause.** The general assembly hereby finds,
5 determines, and declares that this act is necessary for the immediate
6 preservation of the public peace, health, and safety.