

Agenda
Advisory Committee on Aging
Friday, March 28, 2025
11:00 a.m. – 1:30p.m.
Virtual Meeting

If you have difficulty using this document's content, please email mmpatton@drcog.org or call 303-480-6723. Please expect a response within 72 hours (three business days).

Times listed with each agenda item are approximate. It is requested that all cell phones be silenced during the Advisory Committee on Aging meeting. Persons in need of auxiliary aids or services, such as interpretation services or assisted listening devices, are asked to contact the Denver Regional Council of Governments at least 48 hours in advance of the meeting.

- 1 11:00 a.m. Call to Order and Introductions
- 2 11:05 a.m. Public comment
Up to 45 minutes is allocated now for public comment and each speaker will be limited to 3 minutes. If there are additional requests from the public to address the Committee, time will be allocated at the end of the meeting to complete public comment.
- 3 11:10 a.m. Report of the Chair – Bob Brocker
- 4 11:15 a.m. Report of the AAA Director – Jayla Sanchez-Warren

Consent agenda

- 5 11:30 a.m. Move to Approve Consent Agenda
Minutes from February 28, 2025, meeting.
(Attachment A)

Action item

- 6 11:35 a.m. Recommendation to approve Fiscal Year 2026 Choice Services Program Contract Renewals – Travis Noon
(Attachment B)

Informational briefings

- 7 11:50 p.m. Update on State and Federal budget issues – Rich Mauro
(Attachment C)
- 8 12:15 p.m. AARP Presentation – Sara Schueneman
(Attachment D)

- 9 12:40 p.m. Ride Alliance Presentation – Malorie Miller (Attachment E)
- 10 1:05 p.m. DRCOG Board Report
- 11 1:10 p.m. County Reports

Administrative items

- 12 **Next meeting April 25, 2025 – this meeting will be in person location to be determined.**
- 13
- 14 1:25 p.m. Other Matters by Members
- 15 1:30 p.m. Adjourn

Calander of future meetings

April 25, 2025 – **In person**

May 23, 2025 – Virtual

June 27, 2025 – **In person**

July 25, 2025 – Virtual

August 22, 2025 – **In person**

September 26, 2025 – Virtual

October 24, 2025 – **In person**

November 28, 2025 – Virtual

December 26, 2025 – Virtual

January 23, 2026 – Virtual

February 27, 2026 – Virtual

March 27, 2026 – Virtual

ATTACH A

Advisory Committee on Aging (ACA) Meeting Summary

Friday, February 28, 2025

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Members Present

Ada Anderson	Douglas County
Andrea Suhaka	Arapahoe County
Barbara Boyer	Arapahoe County
Chris Lynn	Jefferson County
Connie Ward	Jefferson County
David Appel	Jefferson County
Dawn Perez	Adams County
Donna Mullins	Jefferson County
Edward Moss	Broomfield County
Greg Kahler	Adams County
Jim Dale	Jefferson County
Judi Kern	DRCOG Board Louisville
Karie Erickson	Douglas County
Paul Haseman	DRCOG Board Golden
Phil Cernanec	Arapahoe County
Bob Brocker	Denver
Sharon Tessier	Broomfield County
Steve Conklin	DRCOG Board Edgewater
Wynne Shaw	Douglas County

Guests Present

Allison Cutting, Douglas County, Debbi Haynie, Castle Rock Senior Center.

DRCOG Staff Present

AJ Diamontopoulos, Senior Management Analyst, Erin Iserman, AAA Grant Compliance Lead, Jayla Sanchez- Warren, AAA Division Director, Jennifer Reeves, Veterans & Community Options Manager, Kelly Roberts, Community Resource Specialist, Kelsie Jurin, Community Resource Specialist, Johnathan Dean, Community Resource Specialist, Liv Bergman, Sr. Community Resource Specialist, Mason Green, AAA Grant Specialist, Mindy Patton, Division Assistant, Rich Mauro, Director Legislative Affairs, Shannon Gimbel, Ombudsman Manager, Travis Noon, Manager AAA Business Operations.

Call to Order

Bob Brocker Committee Chair called the meeting to order at 11:01 a.m.

Public Comment Period (Non-ACA Members)

There was no public comment.

Report of the Chair – Bob Brocker

Chair Brocker updated the committee on MedRide's situation, explaining that although the company had been banned from providing Medicaid rides, a temporary restraining order was issued that permits them to continue these services until an agreement is reached with Health Care Policy & Finance (HCPF).

Additionally, Chair Brocker noted that the most-read blog post on the AgeWise Colorado website is titled "How can I get enrolled in Medicaid?" He emphasized this as a clear indication of the strong public interest in accessing Medicaid benefits, particularly amid potential reductions in these benefits.

Report of the AAA Director – Jayla Sanchez-Warren

Federal

Following the federal government's announcement of frozen funds, the AAA received multiple inquiries from providers concerned about whether DRCOG could fulfill payments for contracted services. Travis Noon and Jayla Sanchez-Warren promptly met with Doug Rex, DRCOG's Executive Director, to devise a solution. Doug immediately took action, instructing Jayla to prioritize clients based on their level of need and directing the finance director to assess investments to sustain life-saving services for as long as possible. Fortunately, these measures were not required, as the State had access to federal funds and emergency funding.

The Older Americans Act did not pass, as it was not included in the Continuing Resolution (CR). Work on the act is still ongoing. According to DRCOG lobbyists, the President is recommending that the CR extend for the full year. If this happens, the legislative process for the act will need to restart from the beginning.

The federal budget has not been released, and despite the federal fiscal year starting in October, DRCOG has not received any federal funds. This delay has occurred under previous administrations, sometimes extending to April or early May. The AAA is preparing for this possibility and is aware of the State emergency funds in the State Unit on Aging (SUA) that would be requested if federal funds are not received in a timely manner. DRCOG's shared goal with the State and all AAAs is to ensure services for those in need are not impacted.

DRCOG has no updates on the fiscal increase related to the Older Americans Act. It seems unlikely that DRCOG will receive this funding, presenting a challenge to implement new regulations without additional resources. The AAA's, have expressed concerns to the State about their ability to comply with these regulations without adequate funding. Jayla said in her 38 years of working in aging, periods of low funding often coincide with increased regulation, which remains a persistent challenge.

State

All SUA positions have been filled, and things are returning to normal. The State is currently developing its policies and procedures for the new Code of Federal Regulations (CFR) set to take effect in October 2025. Travis Noon and Erin Iserman have been participating in work groups with the AAAs and the State to help understand

the State's interpretation and intent of these new policies and procedures. The State has been a strong partner, aiming to support a common goal.

However, the regulatory nature of these changes is cumbersome and will be challenging for providers. While DRCOG has had some flexibility and meaningful conversations about easing the implementation process, there remains an exception with the nutrition programs, which have not been very flexible. The AAA is learning to voice its concerns, highlighting how these regulations impact providers, and the State is listening.

The AAA has acknowledged that they will not be receiving the \$2 million in funding that was secured last year. This funding would have provided approximately \$400,000 to DRCOG and has already been accounted for in their current budget planning. Although the precise amounts of State and Federal funding remain unclear, DRCOG is making informed projections to ensure that contracts are finalized, and services continue seamlessly by July 1st.

The AAA still does not know if there will be additional cuts, and while they are not currently including this in their budget, the State has indicated that additional funding cuts of 1-2% may be required. They have met with the SUA twice in the last two months but have not received further details.

The impact on the AAA remains uncertain. Medicaid, a mandated State program, must address any funding shortfalls, leading to struggles across departments. Legislators have emphasized the need to resolve Medicaid issues first before addressing other concerns. They will not have a clear picture until the long bill is finalized.

DRCOG

Erika Duprey, the ADRC manager, has left DRCOG. In response, Jayla will not be replacing her position and is reorganizing to promote more cross-training and resiliency to the division. Jayla commended the staff for their teamwork and efforts to streamline services and meet needs more efficiently.

The transportation team has found a way to expand the voucher program by analyzing current usage and spending patterns. Through reducing the monthly voucher amount to \$250, more people can be included in the transportation voucher services. Additionally, the Regional Transportation District (RTD) has lowered the cost of monthly bus passes, increasing transportation opportunities. DRCOG has also expanded services with Uber and Lyft.

Advocacy

Heading into this session, the AAA was warned that the budget outlook was grim. Legislative leadership instructed the AAA to maintain its current funding levels and not request additional funds, despite their increased needs.

DRCOG had the opportunity to discuss the necessity of AAA services with legislators on two separate occasions. DRCOG lobbyists arranged Zoom meetings for Jayla with congressional delegation staff to discuss the Older Americans Act. Jayla mentioned that

the staff were grateful for the call and were unaware of AAA's role. She explained that Older Americans Act funding supports community-based services, contracting with providers like Volunteers of America, who rely on this funding. She emphasized that people depend on AAA services, which save money in Medicaid and Medicare. The staff expressed their support, thanked her, and requested to be kept informed about developments in Washington. They asked to be contacted if any important bills related to the AAA arise.

Rich Mauro and Jayla are building relationships with Congressional staff and discussing potential quarterly outreach to remind them about the Older Americans Act and the importance of its services. They hope that by providing the necessary tools and information, staff will be able to advocate effectively.

The AAA is developing a flyer to send to state and federal legislators, highlighting the need to maintain current funding and secure additional resources. Jayla attended the Jefferson County Council on Aging meeting to discuss the AAA's current status and explore ways to collaborate with county councils. The new CFR does not reference county councils, so there is no longer a formal relationship. However, Jayla emphasized the value of the county relationship and the need to work together to support larger initiatives for older adults

Move to approve consent agenda

Items on the consent agenda included: November 22, 2024, meeting summary.

Andrea Suhaka motioned for approval. Donna Mullins seconded the motion; the consent agenda was unanimously approved.

Informational Briefings

Discussion of DRCOG Positions on Legislation – Rich Mauro

Bills

[House Bill 25-1022](#): Qualified Medication Administration Personnel

The bill has passed through the Legislature and was supported by the DRCOG board. The bill addresses qualified medication administration personnel (QMAP) to be able to administer medication in assisted living residences.

[House Bill 25-1156](#): Make Senior Home Tax Valuation Reduction Permanent

This bill was a parallel bill to [SB25-013](#) and makes it permanent; it was supported by the DRCOG board.

[House Bill 25-1162](#): Eligibility Redetermination for Medicaid Members

This bill aims to streamline the redetermination process for Medicaid eligibility under the Department of Health Care Policy and Financing (HCPF). It has successfully passed out of the Committee, completed its third reading, and is now awaiting a hearing in the Senate. Lindsey Doherty sponsors the bill.

[House Bill 25-1007](#): Concerning Paratransit Services

The bill mandates that any political subdivision of the state, public entity, or nonprofit corporation providing paratransit services must: establish a plan to communicate information and deliver services during emergencies; ensure fare collection technology is comparable to regular or fixed-route services; and consult with affected community members while conducting an impact analysis before reducing a paratransit service area. The Committee discussed this bill in the context of aging.

Budget

Rich mentioned that legislators and members of the Joint Budget Committee are describing this as the tightest and most problematic budget they've encountered in years, even worse than during the Great Recession of 2009-2010. This situation is not due to a recession, where revenue is low, and cuts are necessary to balance the budget. Instead, the economy is relatively stable, and the state has incoming funds, but they are restricted from spending it.

Additionally, Medicaid expenses have far exceeded expectations and budget allocations. A ballot initiative passed in November requires an additional \$350 million to be spent on law enforcement, and there are uncertainties with federal government funding. The latest figure indicates a \$1.2 billion shortfall, with various unappealing ideas being considered to address it. However, action is necessary, and the situation is quite depressing.

Regarding state funding for senior services, the \$2 million increase from last year, which has already been cut from AAA funding. The Joint Budget Committee (JBC) staff noted during the budget figure-setting that House Bill 1211, which allocated \$2 million for emergency situations for AAAs, had only seen \$700,000 to \$800,000 accessed and spent. The remaining balance in that fund is around \$1.2 million to \$1.3 million. The recommendation was to use half of that amount to help balance the budget, leaving approximately \$668,000 in the contingency fund

A question was asked regarding what caused the huge overspending with Medicaid.

Jayla explained that the suite of expanded services has contributed to the strain on the Medicaid system. During COVID-19, many individuals were added to the Medicaid rolls without proper assessments and eligibility verification. These enrollments were maintained through last year, further straining the system. Now, a costly redetermination process is required to ensure eligibility. In addition, the growth in the senior population, combined with the rise in services and benefits like mental health support, has contributed to increased expenses.

DRCOG Board Report – DRCOG Past Board Chair Steve Conklin

Jeslin Shahrezaei has been appointed Treasurer on the executive committee of DRCOG. Immediate Past Chair Conklin highlighted this as a valuable addition to the board's executive leadership. Jeff Baker continues to serve as Chair, alongside Colleen Whitlow as Vice Chair and Richard Kondo as Secretary.

County Reports

Adams County – Greg Kahler

Adams County will host two resource fairs this year. The first will take place on May 12th at the Adams County Service Building, located at 118th and Pecos. The second fair is scheduled for the Fall, with the location yet to be determined.

Jefferson County – Donna Mullins

Donna Mullins reported that the Jefferson County Board of County Commissioners has approved a 15-year strategic plan for affordable housing. The Jefferson County Council on Aging (JCCOA) has announced new leadership, with Chris Lynn serving as President and Connie Ward as Vice President. Dave Appel and Donna Mullins are actively engaged as interested members. The JCCOA plans to focus on defining its identity and determining its future direction.

Other Matters by Members

There were no other matters to discuss.

Next meeting – March 28, 2024, to be held virtually.

Adjournment

The meeting was adjourned at 12:43 p.m.

ATTACH B

Advisory Committee on Aging Meeting

Name of Committee: Advisory Committee on Aging

Meeting date: March 28, 2025

Agenda Item #: 6

If you have difficulty using this document's content, please email mmpatton@drcog.org or call 303-480-6723. Please expect a response within 72 hours (three business days).

Fiscal Year 2026 Choice Services Program Contract Renewals

Agenda item type: Action Item

Summary

The Area Agency on Aging's (AAA) Choice Services Program contracts with various service providers to offer in-home, transportation, and caregiver respite services to older adults in the region. DRCOG maintains a vetted list of providers from which participants can choose, and issues vouchers for the requested services. DRCOG is seeking to renew these contracts for the upcoming fiscal year, starting July 1, 2025, and ending June 30, 2026.

Background

The DRCOG AAA operates a Choice Services Program, offering participants additional options for in-home, transportation, and caregiver respite services. As a consumer choice program, participants receive a list of vetted providers and are issued vouchers to obtain the desired services. Currently, DRCOG contracts with five in-home providers delivering homemaker, personal care, and caregiver respite services, and four transportation providers who offer transportation services and distribute RTD bus passes within the region.

DRCOG has established budgets for these programs. However, given its participant choice nature, the allocation to any provider may vary based on participant selection. Attached to this agenda item is a list of the individual providers.

The total budget for in-home services is approximately \$547,000, with an additional \$168,000 allocated for the respite program. Approximately \$400,000 from the Older Americans Act and State Funding for Senior Services is designated for transportation program contracts, with \$100,000 set aside specifically for bus passes. Additionally, the transportation program receives support from the Federal Transit Administration Section 5310 and Human Services Transportation Set-Aside funding, amounting to about \$600,000. The ACA recommends approval of only the Older Americans Act portion of the transportation funding.

Action by others

February 28, 2025 – Advisory Committee on Aging Funding Subcommittee made a recommendation.

Previous discussions/actions

None

Recommendation

Move to recommend to the Board Finance and Budget Committee approval of the Choice Services Program contract renewals with Older Americans Act and State Funding for Seniors Services Funds totaling approximately \$1.1 million dollars split between the services for the period of July 1, 2025, through June 30, 2026.

Attachment

List of Choice Services Program contractors.

For more information

If you need additional information, please contact Travis Noon, Manager, AAA Business Operations, Administration and Finance, at 303-480-6775 or tnoon@drcog.org.

Fiscal Year 2026 DRCOG AAA Choice Services Contractors

In-home Services

Contractor	Service	Contractor Since	Homemaker/Personal Care Funding	Caregiver Respite Funding
Alpine Homecare	Homemaker/Personal Care/Caregiver Respite	2020	\$ 287,262.00	\$ 88,246.00
Apollo Home Care Services	Homemaker/Personal Care/Caregiver Respite	2022	\$ 34,986.00	\$ 10,747.00
FirstLight Home Care Boulder	Homemaker/Personal Care/Caregiver Respite	2020	\$ 45,238.00	\$ 13,897.00
FirstLight Home Care Greater Denver	Homemaker/Personal Care/Caregiver Respite	2020	\$ 114,237.00	\$ 35,093.00
FirstLight Home Care Parker	Homemaker/Personal Care/Caregiver Respite	Pending	Unknown	Unknown
Griswold Home Care	Homemaker/Personal Care/Caregiver Respite	2022	\$ 65,447.00	\$ 20,105.00
Total			\$ 547,170.00	\$ 168,088.00

Transportation Services

Contractor	Service	Contractor Since	Transportation Funding	Cost Per Trip
HopSkipDrive	Transportation	2019	\$ 27,316.00	\$34.16
Uber	Transportation	2020	\$ 194,793.00	\$16.61
MedRide	Transportation	2024	\$ 7,038.00	\$54.74
OnTheGo	Transportation	2024	\$ 70,853.00	\$15.02
Bus Tickets (RTD)	Transportation	2020	\$ 100,000.00	N/A
Total			\$ 400,000.00	

ATTACH C

Advisory Committee on Aging Meeting

Name of Committee: Advisory Committee on Aging

Meeting date: March 28, 2025

Agenda Item #: 7

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Discussion of DRCOG Positions on Legislation and Budget Updates

Agenda item type: Informational Briefing

Summary

Review and discussion of the DRCOG Board's positions on 2025 legislation. Since the last ACA meeting, no ageing related bills have been presented to the Board. Any new bills introduced after the mailing of this agenda will also be addressed. Additionally, there will be an update on the state budget, reductions in funding for senior services, the implications of TABOR, and concerns regarding the FY2026-27 budget.

Background

The DRCOG Board has taken positions on 12 bills with four related to aging. DRCOG staff typically review these actions with the ACA.

Action by others

The DRCOG Board has taken positions on four bills related to aging.

Previous discussions/actions

February 28, 2025

Recommendation

None

Attachment

DRCOG Legislative Report Aging-Related Bill Positions as of 3-19-25

For more information

If you need additional information, please contact Rich Mauro, Director of Legislative Affairs, at (303) 480-6778 or rjmauro@drcog.org.



DRCOG Legislative Report

Aging-Related Bill Positions, as of March 19, 2025

Rich Mauro, Director of Legislative Affairs

If you need digital accessibility assistance, submit a request at drcog.org/access or call 303-455-1000. Please expect a response within 72 hours (three business days).

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 House Bill 25-1156: Make Senior Home Tax Valuation Reduction Permanent 5

 House Bill 25-1162: Eligibility Redetermination for Medicaid Members 6

 Senate Bill 25-013: Senior Housing Income Tax Credit Extension 7



Transportation bills

[House Bill 25-1007](#): Concerning Paratransit Services

Bill Summary: Transportation Legislation Review Committee. Beginning on January 1, 2026, the bill *requires* any political subdivision of the state, public entity, or nonprofit corporation that provides paratransit services in the state (*paratransit provider*), in addition to those duties otherwise provided by law: to establish, in coordination with local public entities providing emergency services, a plan to communicate information and provide paratransit services during emergencies. *The communication plan must include information on the number of riders who use paratransit services and the resource capacity of the paratransit provider, including the number of drivers and the number of vehicles used to provide paratransit services. The bill also requires paratransit providers and public entities providing emergency services to submit a report to the Transportation Legislation Review Committee on or before September 1, 2026, about the implementation of the communication and emergency services plan.*

Sponsors: Froelich & Valdez/ Winter F. & Simpson

Current Status: Senate Transportation

[Fiscal Note for House Bill 25-1007](#)

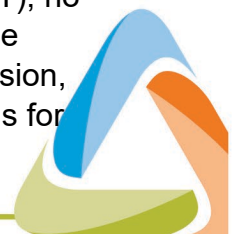
Position: Amend

Staff comments: May apply to and create a burden on local agencies and small non-profits, some of whom receive grant funding through DRCOG's Area Agency on Aging Human Services Transportation program or 5310 program for older adult and other populations. While it may not affect DRCOG directly, we should make sure the bill clearly distinguishes paratransit services from our demand-responsive transportation services.

Legislative Policy: DRCOG supports adequate funding for providing transportation services for the elderly and individuals with disabilities. DRCOG also supports a system that ensures more and better transportation services are provided to older adults and vulnerable populations.

[Senate Bill 25-030](#): Increase Transportation Mode Choice Reduce Emissions

Bill Summary: The bill requires the Colorado Department of Transportation (CDOT), no later than October 31, 2025, to present a statewide mode choice assessment to the Transportation Legislation Review Committee (TLRC), the Transportation Commission, and the Colorado Energy Office, which assessment must include recommendations for targets for 2030, 2035, 2040, 2045, and 2050. CDOT, metropolitan planning



organizations (MPOs), and transit providers that provide public transit to a population of 100,000 or more.

No later than June 1, 2026, CDOT must adopt rules establishing mode choice targets. No later than October 31, 2026, and every 3 years thereafter, CDOT, in coordination with the MPOs, must present a report to the TLRC on the mode choice targets and the entities' plans to implement the mode choice targets (mode choice implementation plans). No later than December 31, 2026, and every 5 years thereafter, CDOT, MPOs, subject transit providers, and local governments with a population of 25,000 individuals or more must each prepare a mode choice implementation plan, which must include certain information about the mode choice targets, a multimodal transportation gaps summary, and an analysis of certain projected greenhouse gas emissions. State funds may be available for the development of those plans.

Sponsors: Winter & Hinrichson/Froelich

Status: Senate Appropriations

Fiscal Note: [Fiscal Note for Senate Bill 25-030](#)

Position: Amend

Staff comments: Would require additional effort for DRCOG where the timing for required implementation plan does not align with federal requirements for regional transportation plans. Sponsors should change the requirement so that implementation plans be developed in conjunction with federally-required RTP for the MPO.

The required multimodal transportation gaps summary is both unclear and onerous and does not work in the context of overlapping MPOs, transit providers, and subject local governments. Is the transit agency going to identify gaps in pedestrian and bicycle networks? Is a local government going to identify gaps in the transit network? What constitutes a “gap”? The effort to define the enormous number of potential “projects” to fill gaps and estimating their costs is unreasonable, particularly at the regional scale.

Appreciate the effort to fund the required implementation plans, but 1) DRCOG’s allocation of MMOF funds has been fully allocated through 2027, so resources are not available to fund the plans to meet the 12/31/26 deadline, and 2) further reduces available MMOF funds to implement multimodal improvements.

Legislative Policy: DRCOG supports legislation that promotes efforts to fund, maintain and expand a multimodal transportation system. DRCOG also supports measures to improve safety for users of alternative modes, especially pedestrians and bicyclists. DRCOG supports state investment in regional programs that promote transportation demand management efforts, including coordinated regionwide efforts like the Way to Go partnership between DRCOG and eight transportation management associations (TMA) that promote and encourage adoption of non-single-occupant-vehicle travel options.



Aging bills

[House Bill 25-1022](#): **Qualified Medication Administration Personnel**

Bill Summary: For the purpose of determining workers who are qualified to work in an assisted living residence, current law includes in its definition of "qualified medication administration personnel" (QMAP) an individual who has passed a competency evaluation administered by an approved training entity on or after July 1, 2017. The bill adds to this definition an individual who has passed a competency evaluation administered by the Department of Public Health and Environment (CDPHE) before July 1, 2017.

Sponsors: Espenozza and McCormick/ Michaelson Jenet

Status: Signed by the governor

[Fiscal Note for House Bill 25-1022](#)

Position: Support

Staff comments: CDPHE used to do the testing for the QMAP program and then stopped. When the regulations were changed, it only included language that said, "administered by an approved training entity", which technically does not include CDPHE since they no longer are an approved "training entity". This bill cleans up the language.

Legislative Policy: DRCOG supports efforts to improve the quality of care and consumer protections for older adults and their caregivers.

[House Bill 25-1156](#): **Make Senior Home Tax Valuation Reduction Permanent**

Bill Summary: The bill extends an existing reduction in the valuation for assessment of qualified-senior primary residence real property (valuation reduction) that applies for only the 2025 and 2026 property tax years so that the valuation reduction is permanent. The bill also makes permanent the existing obligation of the state to annually reimburse local governments that levy property tax for the amount of property tax revenue lost due to the valuation reduction.

Sponsors: Lieder/Kolker

Status: House Appropriations



Fiscal Note: [Fiscal Note for House Bill 25-1156](#)

Recommended position: Support

Staff comments: At its January meeting, the DRCOG Board supported SB25-013, which extends the income tax credit created in 2024 for qualified seniors who don't claim the senior property tax exemption. This bill makes permanent the reduction in assessed value of a qualified-senior primary residence established in 2024 by SB24-233.

Legislative Policy: DRCOG supports property tax relief to help reduce a tax liability that especially burdens low-income seniors and older adults on fixed incomes.

[House Bill 25-1162: Eligibility Redetermination for Medicaid Members](#)

Bill Summary: The bill authorizes the Department of Health Care Policy and Financing (state department) to seek federal authorization to:

- Extend the timeline for member reenrollment in the state medical assistance program (Medicaid) based on the financial eligibility for a member whose income is based solely on a fixed income source; and
- Verify a member's eligibility for reenrollment based on income and need at the same time.
- The bill requires the state department to modify the questions asked to medical professionals when verifying a member's need for long-term services and supports and allows any licensed medical professional who has a bona fide physician-patient relationship with a member to complete the documentation necessary to verify a member's need for long-term services and supports.
- The bill prohibits the state department from requiring new documentation for a member who transitions from receiving services in an institutional setting to receiving services in a home- and community-based setting and vice versa.

Sponsors: Feret/

Status: Senate Health & Human Services

[Fiscal Note for House Bill 25-1162](#)

Recommended position: Support

Staff comments: DRCOG staff who work with in case management and information/assistance have worked with people who had qualified for Medicaid during COVID emergency declaration period but then lost their qualification after the declaration ended. Staff have observed these people having difficulties getting



requalified. Staff believes this bill will help make the redetermination process more accessible and efficient.

Legislative Policy: DRCOG supports efforts to improve the quality of care and consumer protections for older adults and their caregivers.

Senate Bill 25-013: Senior Housing Income Tax Credit Extension

Bill Summary: Extends a refundable income tax credit (established by HB24-1052) that is available for the income tax years commencing on January 1, 2022, and January 1, 2024, so that the credit is also available for the income tax years commencing on January 1, 2025, and January 1, 2026. Credit is for a qualifying senior who is: 65 years or older; has federal adjusted gross income (AGI) less than or equal to \$75,000 for a single return or \$125,000 for a joint return; and has not claimed the senior property tax exemption for that year.

The amount of the credit for both types of filers is: \$800 for a return with federal AGI that is \$25,000 or less. For every \$500 of federal AGI above \$25,000, the amount of the credit is reduced by \$8. A taxpayer who also qualifies for a property tax and rent assistance grant or heat assistance grant is eligible to receive the full amount of the credit.

Sponsors: Mullica/ Marshall & Joseph

Current Status: Senate Appropriations

Fiscal Note for Senate Bill 25-013

Position: Support

Staff comments: The DRCOG Board supported HB24-1052, which created the credit.

Legislative Policy: DRCOG supports property tax relief to help reduce a tax liability that especially burdens low-income seniors and older adults on fixed incomes.



ATTACH D

Advisory Committee on Aging Meeting

Name of Committee: Advisory Committee on Aging

Meeting date: March 28, 2025

Agenda Item #: 8

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AARP Presentation

Agenda item type: Informational Briefing

Summary

AARP staff will update the Committee on Colorado and national level activities.

Background

AARP's public policy framework, which focuses on better health, financial resilience, livable communities, and consumer rights and protection, aims to enhance the lives of individuals, diverse communities, and society as a whole. As staunch advocates for Medicare, Social Security, and strong supporters of the Older Americans Act, AARP serves as a crucial partner for Area Agencies on Aging (AAAs) and older adults.

Action by others

None

Previous discussions/actions

None

Recommendation

None

Attachment

None

For more information

If you need additional information, please contact Jayla Sanchez-Warren, AAA Division Director, Area Agency on Aging, 303-480-6735 or jswarren@drcog.org.

ATTACHE

Advisory Committee on Aging Meeting

Name of Committee: Advisory Committee on Aging

Meeting date: March 28, 2025

Agenda Item #: 9

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Ride Alliance Presentation

Agenda item type: Informational Briefing

Summary

Staff will provide an overview of the Ride Alliance project highlighting the history, goals, funding source, partners and next steps.

Background

In July 2024, DRCOG received a grant award of \$975,486 through the Strengthening Mobility and Revolutionizing Transportation (SMART) program. This grant provides funding to upgrade and pilot the Ride Alliance Trip Exchange Hub, building on previous efforts to develop the initial hub. The purpose of the Trip Exchange Hub is to coordinate human service transportation trip requests across the region, reduce trip denials, create a no-wrong door approach for clients seeking services, and streamline reporting processes across human service transportation providers.

With the current SMART funds, the project will enhance the Trip Exchange Hub's functionality, integrate transportation providers via an application programming interface (API), and pilot the hub with actual trips. Several organizations, including the Regional Transportation District (RTD), the Denver Regional Mobility and Access Council (DRMAC), Douglas County, City and County of Broomfield EasyRide, and Via Mobility, submitted letters of commitment for the SMART application. Additionally, the North Front Range Metropolitan Planning Organization and A Little Help have expressed interest and support. As the project progresses, additional transportation providers may become involved.

There is a significant need for Ride Alliance due to the rapidly aging population in Colorado. The demand for services is increasing rapidly while funding remains limited. Ride Alliance maximizes current resources and provides a cost-effective solution for regional coordination.



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Action by others

None.

Previous discussions/actions

None.

Recommendation

None.

Attachment

Ride Alliance ACA Presentation.

For more information

If you need additional information, please contact Malorie Miller, Sr. Project Manager – Ride Alliance, Transportation Planning and Operations, at 303-720-2334 or mmiller@drcog.org



Ride Alliance Project Overview

Advisory Committee on Aging: March 28, 2025

Why Ride Alliance?

Current state of the region:

- **11,966 trip denials** in 2024.
- **No coordination** between providers.
- **Waitlist** for services.

By 2030:

- **27.8% increase** in the older adult population.
- **1 in 5 persons** over the age of 60.
- **1,186,441 persons** over 65.

Goals

- Trip Exchange Hub.
- No wrong door approach.
- Maximize available resources.
- Eliminate silos.





History

- Mobility Services for All Americans grant.
- Veterans Transportation and Community Living Initiative grant.



SMART grant

- Bipartisan Infrastructure Law.
- Strengthening Mobility and Revolutionizing Transportation.
- DRCOG received **\$975,486** in July 2024.
- Two-stage grant:
 - **Stage 1**: Enhance, integrate and pilot the Hub.
 - **Stage 2**: 3-year grant, up to \$15 million available.

Consultant expertise

DemandTrans

- Built Trip Exchange Hub.
- Helped develop Transactional Data Specifications.
- Worked on previous Ride Alliance iterations.

TransitPlus

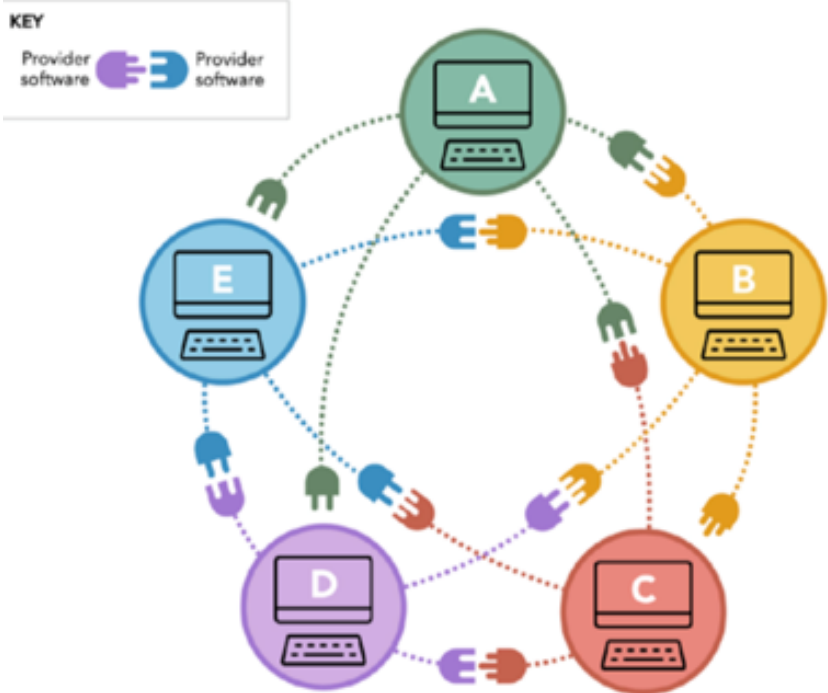
- Experience leading transit projects.
- Ride NoCo.
- Worked on previous Ride Alliance iteration.

Potential partners

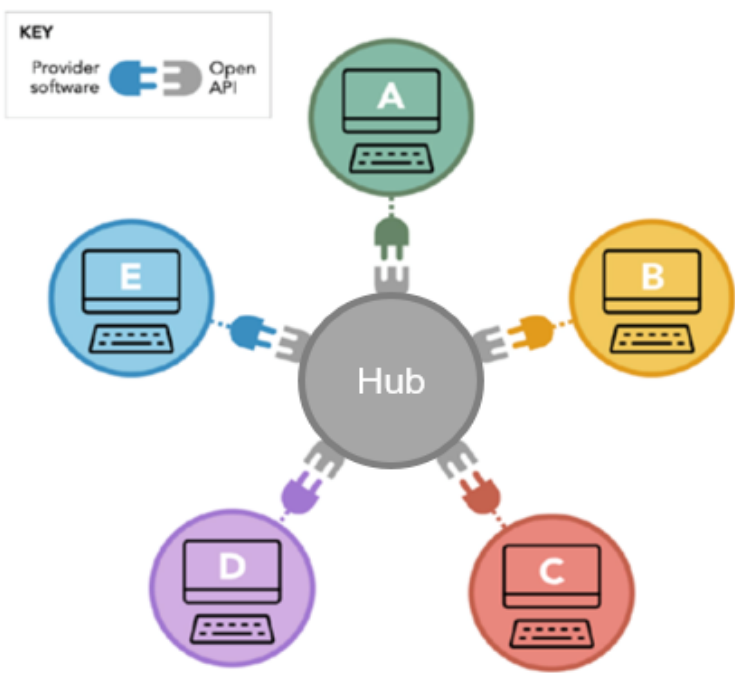


How it would work

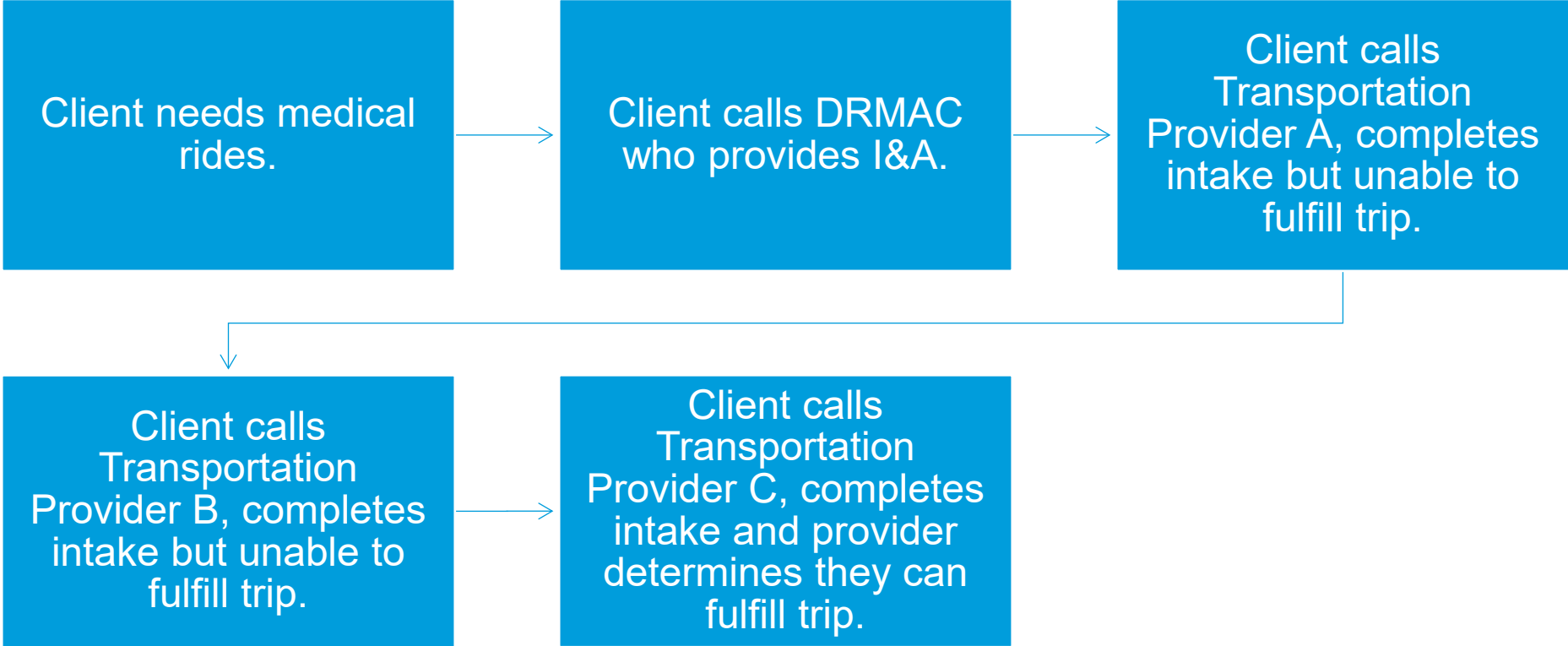
Interoperability using Proprietary APIs



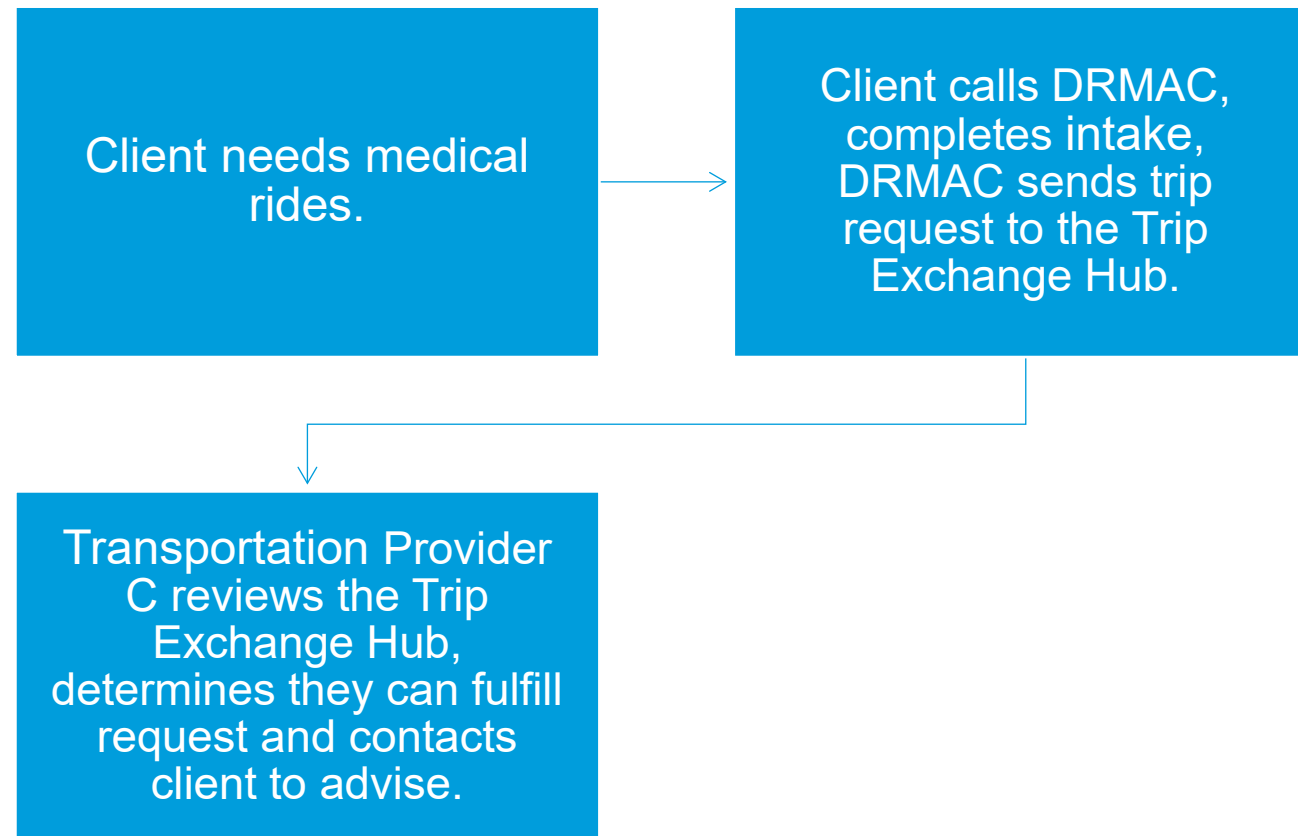
Trip Exchange (Hub) Interoperability



Current Client Experience



Future Client Experience



Next Steps

- MOU agreements signed.
- API development and integration.
- Trip Exchange Hub enhancement.
- Pilot Trip Exchange Hub.
- Apply for Stage 2 funding.

Thank you!
Malorie Miller
Senior Project Manager
mmiller@drcog.org

If you have difficulty using this document's content, please email access@drcog.org or call 303-455-1000. Please expect a response within 72 hours (three business days).