

**AGENDA**  
**ADVISORY COMMITTEE ON AGING**  
**Friday, April 16, 2021**  
**11:00 p.m. – 1:20 p.m.**  
**Via Webinar**

- 1      11:00      Call to Order and Introductions
- 2      11:05      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      11:20      Report of the Chair
- 4      11:30      Report of the AAA Director

**CONSENT AGENDA**

- 5      11:40      Move to Approve Consent Agenda
  - Minutes of March 19, 2021  
(Attachment A-B)

**Action Items**

- 6      11:45      Approval of AAA Contractor Allocations for FY2021-2022  
(Attachment C-D)

**INFORMATIONAL BRIEFINGS**

- 7      12:10      Discuss Formation of a Subcommittee for Community Based Services  
(Attachment E)
- 8      12:30      Legislative Updates  
(Attachment F)
- 9      12: 45      Homebound COVID Vaccine Discussion  
Time to share what your county is doing for homebound vaccines.  
(Attachment G)



10        1:10        County Reports

**ADMINISTRATIVE ITEMS**

11                    **Next Meeting – May 21, 2021**

12                    Other Matters by Members

13        1:20        Adjourn

14

Persons in need of auxiliary aids or services, such as interpretation services or assisted listening devices, are asked to contact DRCOG at least 48 hours in advance of the meeting by calling (303) 480-6763.



We make life better!

1001 17th St. • Suite 700 • Denver, CO 80202 • main: 303-455-1000 • fax: 303-480-6790 • email: [drcog@drcog.org](mailto:drcog@drcog.org) • web: [drcog.org](http://drcog.org)



### AAA Acronym Quick List

ACL/AOA	Administration for Community Living/Administration on Aging
ACO	Accountable Care Organization
ADA	Americans with Disabilities Act
ADL	Activities of Daily Living
ADRC	Aging and Disability Resource Center
AHC	Accountable Health Communities
CAC	Citizens Advisory Committee
CASOA	Community Assessment Survey for Older Adults
CCT	Colorado Choice Transitions
CMS	Centers for Medicare and Medicaid Services
COA	Council on Aging
DCOA	Denver Commission on Aging
DORA	Department of Regulatory Agencies
DOLA	Department of Local Affairs
DRMAC	Denver Regional Mobility and Access Council
F&B	Finance and Budget Committee
GIS	Geographic Information System
HB	House Bill
HCPF	Health Care Policy and Financing
HIPAA	Health Insurance Portability and Accountability Act
HTP	Hospital Transformation Project
I&A	Information and Assistance
JBC	Joint Budget Committee
LTC	Long Term Care
MIPPA	Medicare Improvement for Patient and Providers Act
MOU	Memorandum of Understanding
NASUAD	National Association of States United for Aging and Disabilities
OAA	Older Americans Act
PACE	Program of All-Inclusive Care for the Elderly
PHI	Personal Health Information
RFP	Request for Proposal
RFQ	Request for Qualifications
ROD	Record of Decision
RTC	Regional Transitions Committee (Aging)
RTC	Regional Transportation Committee*(Transportation)
SAPGA	Strategic Action Planning Group on Aging
SB	Senate Bill
SHIP	State Health Insurance Assistance Program
SMP	Senior Medicare Patrol
SRC	Seniors' Resource Center
SUA	State Unit on Aging
VDC	Veterans Directed Care
VOA	Volunteers of America

**ATTACH A**

**ADVISORY COMMITTEE ON AGING  
MEETING SUMMARY  
Friday, March 19, 2021**

**Members Present**

Anne Gross	Arapahoe County
Barbara Boyer	Arapahoe County
Bob Bocker	At Large Denver
Bob Davis	City and County of Broomfield
Cary Johnson	Jefferson County
Chris Lynn	Jefferson County
Connie Ward	Jefferson County
Dawn Perez	Adams County
Donna Mullins	Jefferson County
Houston "Tex" Elam	At Large Arapahoe County
Jim Dale	DRCOG Board - Golden
Perla Gheiler	City and County of Denver
Phil Cernanec	At Large Arapahoe County
Sean Wood	Clear Creek
Wynne Shaw	DRCOG Board - Lone Tree

**Guests Present**

Debbi Haynie, Director Castle Rock Senior Center, Kari Degerness, Center for Improving Value in Health Care, Kristine Burrows, Jewish Family Services, Valerie Robson, Douglas County

**DRCOG Staff Present**

AJ Diamontopoulos, AHC Manager, Alejandra Lerma, Case Manager, Amy Pulley ADRC Manager, Ana Lilia Lahowetz, Case Manager, Caitlin Phillips, Ombudsman, Cassie Scott, I&A Manager, Cindy Grainger, ADRC Administrative Assistant, Douglas Rex, Executive Director, Erika Dubray, I&A Program Manager, Gina Gentili, Lead Options Counselor, Jayla Sanchez-Warren, AAA Division Director, Jennifer Reeves, Veterans/Transitions Manager, Liv Berman, Community Resource Specialist, Lydia Dumam, Options Counselor, Marlene Priest, AHC Navigator, Mindy Patton, AAA Division Assistant, Rich Mauro, Senior Policy and Legislative Analyst, Ryan McGee, Transitions Counselor, Sara Beth Ford, Refugee Program Coordinator, Sarah Haggerty, Ombudsman, Shannon Gimbel, Ombudsman Manager, Sharon Day, Manager AAA Business Operations, Travis Noon, Senior Program Specialist, Yacob Nayte, AHC Navigator Zack Gibbons, Senior Fiscal Specialist, Zara Otaifah, AHC Navigator

Karie Erickson, Committee Vice 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**

Cathy Noon was unable to attend, Vice Chair Karie Erickson chaired the meeting.

- Karie read a message from Cathy thanking ACA and DRCOG staff.
- Karie mentioned that nearly 1,500 people sign up on the Nymbl app. She encouraged the committee to continue to promote the app.

## Report of the AAA Director

Jayla attended several policy meetings with both federal and state

- National Council on Aging
  - Senator Casey was a speaker at this meeting, he said 172,000 died from COVID in nursing homes nationally.
    - The government will take a hard look into why this happened
    - Nursing home facilities are the second highest level of care and second highest payment for Medicare and Medicaid.
    - Studies also showed that COVID affected black and brown populations three times more than white populations
    - Will investigate the use of special designated areas in nursing homes for COVID patients and why facilities did not have supplies they needed, how funding was used and regulations for staffing and infection control
  - Spoke of community-based services
    - Need for more services and funding
    - Issue is hospitals will soon receive incentives to refer to community-based services, but service providers will not receive any funding.
    - There will be a need for coordination of services to avoid overlap with providers and overlap of hospital request for services

## Discussion

Karie suggested a subcommittee to address the issue

Bob Davis said the subcommittee should have more than just members from ACA

AJ Diamantopoulos thought this would be a good move short term and later, he also agreed with Bob's suggestion to include other outside members. He said more voices would be better to educate on how community-based services work.

Phil Cernanec said many organizations that include volunteers are trying to increase their volunteer base.

Karie mentioned that volunteers still need to be covered by insurance and admin dollars to oversee them.

AJ stated we need to expand capacity, technologies, policy and procedures, and insurance. To include maintaining marginal costs, and the culture of the way we assist clients to continue with high standards

Chris Lynn agreed about technology expansion and how difficult it is for providers to do this and agreed with Karie's comments regarding volunteers.

- Jayla said we do not know how much money DRCOG will be getting, when it will come, how long we will have to spend it and what we can spend it on.
- Colorado has been officially declared as the 2<sup>nd</sup> fastest aging state in the nation
  - Still big concern with how to accommodate services for the growing Boomer population

- Need to plan especially for when Boomers hit age 75 as that is when they typically need an increase in services
- Jayla said that Cassie Scott found that the average client in ADRC has 13 touch points in the program.
- Jayla thanked the Funding Subcommittee for their dedication to the RFP approval process and time spent reviewing over 80 RFPs
- 1<sup>st</sup> meeting regarding Adams County becoming their own AAA will be April 15<sup>th</sup>.

#### Move to approve consent agenda

Items on the consent agenda included: Summary of the February 19, 2021 meeting.

Karie asked for a motion to approve the consent agenda, Bob Davis made the motion, Tex Elam seconded the motion. There was unanimous approval of the consent agenda with one change on page 3 Tex Houston should be Tex (Houston) Elam.

- Agendas and summaries are posted on the DRCOG website located at <https://drcog.org/calendar> from there choose the month and date of the meeting, click on the event. Once clicked you will find the link to the meeting for that month.

#### **Action Items**

##### Approval of AAA Contractor Allocations for FY2021-2022

- RFP was released in November
  - Funding Subcommittee reviewed and scored based on need for service, demonstrated experience and past performance, coordination with other providers, how well they serve the targeted population and DRCOG service area with minimal service duplications
  - Approved 32 providers, 76 services
  - Funds are the best estimate until state informs of final number, and includes CARES dollars
- Sharon showed Recommended Funding Allocations
 

Phil asked how future CARES Act funds would be dispersed, Sharon said it would depend on how the funds were allowed to be spent but most likely through another RFP release

Jim mentioned a pie chart would be helpful, Sharon explained the different guidelines on where the money is allocated and there will be a future pie chart once the funding is known.
- Sharon introduced and thanked the Funding Subcommittee members.
- In addition to the providers presented there were four additional providers who have current contracts that were unable to meet the RFP deadline
  - Their proposals will be considered and evaluated and available for approval at the April ACA meeting
  - To be fair they will be eligible for a shorter contract cycle.

Phil made the motion to approve the funding as presented by the Subcommittee to move forward to present to the DRCOG Board.

The Committee approved funding with 12 yes votes and 2 abstentions (Karie Erickson and Chris Lynn)

## **Informational Briefings**

### Wellness Fund Update

AJ informed the group:

- There are two formal initiatives that spurred action
  - The Hospital Transformation Program
    - \$1.3 billion half paid to hospitals for Medicaid patients to screen patients for 5 health related social needs: utilities, housing, transportation, food securities and safety issues.
    - Approximately 179,000 referrals are expected this year, 19,000 were served in our AAA region last year.
    - Hospitals will be paid for the referrals to community-based services this starts in April.
  - Second is the Social Health Information Exchange which is the exchange of information between a hospital and primary care physician.
    - Allows for a physician to ask for records of services received in the hospital
    - The database entry allows for a question regarding the 5 social needs to be answered, a referral will then go to a community-based service provider
    - The provider will be required to input data on service(s) provided
- AJ has been working with the Social Health Information Exchange and has raised the issue and has advocated that community-based service providers do not have the capacity to serve the large number of referrals that will be coming
  - He is working with several entities to develop a wellness fund to support this system
  - He would like to use data and planning to prepare for the impacts this program will have and make investments to assist with the program
- A short-term goal is to get some of the American Rescue Fund dollars from the Governor's office.
  - Asking for \$5-\$15 million that would be used to begin the planning and identify other investments that would help make the communities be healthier
  - Evaluate where need is, what the need is, roadblocks and ways to overcome roadblocks

### Discussion

Phil asked if this would be applicable to all of Colorado or just the DRCOG region. AJ is working on the DRCOG region, SAPGA has recommended two wellness fund pilots for the two AHCs in the state.

Karie stated that she was surprised social connectivity was not a part of the five social determinates. DRCOG opted not to do social isolation because of the dynamics and complexity of the program, although the other AHC has included it in their program. As they plan this will be something that will come up for discussion.

DRCOG will start with food and housing.



Wynn suggested consolidation of data entry from 13 different databases to one. There is a review of this being done. Karie said that data entry is very labor intensive and takes away time with the client.

- Long term goal will be adjustments to Medicaid and coordination.

Phil suggested a letter be generated recommending the Governor solicit input from the legislature regarding dispensing of American Rescue funds. AJ was not sure what the process would involve for requesting or allocation of the funds but will ask ACA for advocacy when the time comes. Jayla said Rich is working on this through the DRCOG process.

### Legislative Update

Rich Mauro provided the following Bill update and DRCOGs standing

#### SB128 – DRCOG to monitor

Bill is regarding the nursing home penalty cash fund; the fund provides grants for projects or programs to improve quality of care. Currently there is a shift in administrative responsibilities from HCPF to CDPHE.

#### SB158 – DRCOG supports

Scheduled to be heard Monday in the session. There may be changes to the bill and may be headed to the floor. The bill deals with the need to increase number of geriatric specialty providers particularly in rural areas. There is discussion of the possibility for the grant budget to be spread over 4 or 5 years.

#### HB1172 – DRCOG to monitor

Bill deals with family access to facility visitation. We are already seeing some opening up of facility access, this bill may no longer be necessary.

#### HB1187 – DRCOG to monitor

This bill is a case management redesign and deals mostly with Medicaid. Case management and I&A overlap, this bill sets up a process over the next couple years to work with stakeholders in a redesign to establish conflict free case management.

#### HB1117 – DRCOG supports

Redefines fair housing (Telluride law) and allows negotiations between the county and developers to have affordable housing be legal.

#### HB1121 – DRCOG supports

This bill is regarding the eviction court process. It asks that more time be given for a tenant to address issue(s) they are being evicted for and more transparency in the notice and eviction process.

#### SB173 – DRCOG supports

Regulates late fees and other fees landlords can impose with some restrictions with more notice and transparency in the process.

Phil asked about sustainable funding for the AAAs. Rich answered with the following update.

- JBC is scheduled to hear the March revenue forecast anytime.
  - This revenue forecast is used to determine the long bill.
  - There is a lot of optimism now that the economy is improving.

- The funding from the federal government will also relieve a lot of pressure.
- Rich has been pleased with the JBC decisions so far, they have almost completely restored the state funding for senior services line item to where it was last year.
- They were going to take \$163K out of state service funding to fund the PACE program.
  - Rich told them it should not come out of the senior services fund but the general fund, they agreed.
- Statewide funding should be about \$3M above last year, JBC will evaluate over the next few days to balance the budgets.
- Rich has not heard anything about American Relief Act funding.

#### Discussion

Doug said DRCOG really is interested in pursuing establishment of a wellness fund and sustainable AAA funding.

Phil mentioned the saving of taxpayer dollars due to prevention by providing services and how this needs to be highlighted in conversations as the Governor would like to see a return on investment when he considers allotment of American Recovery Act funds.

#### Ombudsman Update

- CDC and CMS released new guidance regarding those who have been vaccinated.
- Waiting for CDPHE to change the public health order from November.
  - That order was very restrictive and there is no reinforcement of the order.
  - Shannon hopes that the new order will be out next week.
- Isolation is very hard on residents.
  - Ombudsmen are out in the field.
  - There is no requirement for how many field visits need to be done.
  - An average visit can take about 3 hours now that staff must put on PPE and then safely disposed of it when visit completed.

Phil asked what facilities are doing to fill vacancies. Shannon said this is limited because many facilities do not have the staff to take care of residents. She thought we would begin to see facility closings. Once a facility gets below 70% full it is very hard for them to stay afloat.

- PACE is getting the same complaints as long-term care facilities, lack of service, lack of service providers, lack of coordination of services.
- Shannon said staff really did well with the virtual world to conduct various meetings with residents and resident families.

Karie asked about the morale of residents. Shannon said residents are happy to see and speak to someone other than just the same people in the facility.

- Ombudsman are starting over getting to know the residents, residents they knew before are no longer there.

### County Reports

City and County of Denver – Perla Gheiler

Denver helped 800 residents from the recent storm that needed shoveling. They used volunteers and had incentives for staff to donate their time to help when they ran out of volunteers.

Douglas County – Karie Erickson

Douglas County has an 82% vaccination rate for 70+ residents

### Other Matters by Members

Tex Elam

Tex wanted to let the group know that he had to attend two Zoom funerals and they were much better than he expected and said if you had to do as an alternative, they can work well.

Next meeting – **April 16, 2021**

### Adjournment

The meeting adjourned at 1:12 p.m.

# ATTACH B

## DENVER REGIONAL COUNCIL OF GOVERNMENTS

## STATUS OF AGING BILLS--2021 SESSION

As of 3-18-21

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<b>AGING BILLS</b>							
<a href="#">SB128</a>	<b>Modification To Administration Of The Nursing Home Penalty Cash Fund</b> -makes changes to the fund and the nursing Home Innovations Grant Board: Transitions all authority over the fund, and the board from the Colorado Department of Health Care Policy and Financing (HCPF) to the Colorado Department of Public Health and Environment (CDPHE) effective July 1, 2021.	Kolker / Lontine	Health & Human Services	Monitor		Removes the \$10,000 spending limitation; Removes the provision allowing members of the board to be reimbursed for expenses; Removes the provision restricting any governmental entity from applying for a grant from the fund; Adds a requirement that HCPF and CDPHE develop an annual budget to administer the fund and support the board; Adds a requirement that HCPF and CDPHE collaborate annually on any emergency funding needs and specifies that HCPF will administer such funding; Adds projects that compliment statewide quality and safety goals as a consideration in making a distribution from the fund; and Lengthens the period for CDPHE to provide notice of a violation to a nursing facility from 5 days to 10 days after inspection.	DRCOG supports increases in the quality of care and consumer protections for older adults and their caregivers and, in particular, legislation strengthening the role of the long-term care ombudsman and PACE ombudsman as resident and consumer advocates. DRCOG urges the state, when making decisions regarding funding for long-term care programs, to structure such funding to protect the quality of care for residents and participants, including funding for optimal ombudsman staffing.
<a href="#">SB158</a>	<b>Increase Medical Providers For Senior Citizens</b> - modifies the Colorado Health Service Corps program administered by the Primary Care Office in the Department of Public Health and Environment, which program includes a loan repayment program, as follows: allows geriatric advanced practice providers, which include advanced practice registered nurses and physician assistants with geriatric training or experience, to participate in the loan repayment program on the condition of committing to provide geriatric care to older adults in health professional shortage areas for a specified period; and requires the general assembly to annually and continuously appropriate money from the general fund to the office for the 2021-22 through the 2025-26 fiscal years to help repay loans for geriatric advanced practice providers.	Danielson & Pettersen/ Titone & Duran	Senate Health & Human Services	Support		This is a reintroduction of a bill DRCOG supported in the 2020 session. The bill was pulled after the pandemic shortened the legislative session. As an Area Agency on Aging, DRCOG staff has observed the value of older adults being treated by providers specifically trained to consider the entire patient. Geriatric practitioners spend more time with patients to understand the social factors that affect older persons and are more likely to consider the need for community services, economic security, risk for fraud and abuse, isolation, and depression. The bill spreads out \$2 million over five years.	As an advocate for older adults, individuals with disabilities, veterans and their caregivers, DRCOG works with various agencies, groups and individuals to support state legislation, regulations and programs to meet their needs. DRCOG supports increased funding for programs and exploration of programs providing services to older adults, individuals with disabilities, veterans and their caregivers, especially services that support individuals continuing to live independently in their homes and communities.

\* FN = Fiscal Note

## DENVER REGIONAL COUNCIL OF GOVERNMENTS

## STATUS OF AGING BILLS--2021 SESSION

As of 3-18-21

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">HB1172</a>	<b>Hospital Patient Long-term Care Resident Visit Rights-</b> specifies that a patient admitted to a hospital for inpatient care and a resident of a nursing care facility or assisted living residence may have at least one visitor of the patient's or resident's choosing during the stay or residency. These health-care facilities must have written policies and procedures regarding the visitation rights of patients and residents, including policies and procedures setting forth any clinically necessary or reasonable restriction or limitation that the health-care facility may need to place on patient and resident visitation rights and the reasons for the restriction or limitation. The bill also prohibits a health-care facility from adopting policies or procedures that prohibit visitation of a patient or resident if the sole reason for the prohibition is to reduce the risk of transmission of a pandemic disease, but a health-care facility may impose specified requirements and limitations for visitors to reduce the risk of transmission of the pandemic disease.	Geitner/ Smallwood & Ginal	House Health & Insurance	Monitor		<p>DRCOG's long term care ombudsmen have been concerned about the health effects on residents of long term care facilities since the pandemic resulted in visitation restrictions. As public health authorities has begun to allow some return to visitation, implementation of visitation protocols has been uneven. Staff intends to work with the sponsors of this bill, the state and public health authorities to reinstate visitation in a safe, consistent manner.</p>	DRCOG supports increases in the quality of care and consumer protections for older adults and their caregivers and, in particular, legislation strengthening the role of the long-term care ombudsman and PACE ombudsman as resident and consumer advocates.

## DENVER REGIONAL COUNCIL OF GOVERNMENTS

## STATUS OF AGING BILLS--2021 SESSION

As of 3-18-21

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">HB1187</a>	<b>Long-term Services And Support Case Management Redesign-</b> requires the Medical Services Board to adopt rules providing for the establishment of a redesigned case management system, no later than July 1, 2024, that consists of case management agencies throughout the state for the purpose of enabling individuals in need of long-term care to access appropriate long-term services and supports. No later than December 31, 2021, the Department of Health Care Policy and Financing shall work with stakeholders to develop a timeline for the implementation of the system. No later than December 31, 2022, HCPF shall issue a competitive solicitation in order to select case management agencies for the system.	Young & Pelton/ Rankin & Winter	House Public & Behavioral Health & Human Services	Monitor		Current law provides for the establishment of a single entry point system that consists of single entry point agencies throughout the state for the purpose of enabling persons 18 years of age or older in need of long-term care to access appropriate long-term care services.	DRCOG supports collaboration and partnerships to better meet the service needs of older adults consistent with DRCOG's responsibilities as an Area Agency on Aging and an ADRC.

## DENVER REGIONAL COUNCIL OF GOVERNMENTS

## STATUS OF AGING BILLS--2021 SESSION

As of 3-18-21

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<b>HOUSING BILLS</b>							
<a href="#">HB1117</a>	<b>Local Government Authority Promote Affordable Housing Units-</b> clarifies that the existing authority of cities and counties to plan for and regulate the use of land includes the authority to regulate development or redevelopment in order to promote the construction of new affordable housing units. The provisions of the state's rent control statute do not apply to any land use regulation that restricts rents on newly constructed or redeveloped housing units as long as the regulation provides a choice of options to the property owner or land developer and creates one or more alternatives to the construction of new affordable housing units on the building site.	Lontine & Gonzales-Gutierrez/ Gonzales & Rodriguez	Transportation & Local Government	Support	<a href="#">FN</a>	This bill has been initiated by the Colorado Municipal League. CCI and CCAT also support the bill.	DRCO supports policies and programs that support the private and public sectors in the creation and maintenance of an adequate supply of affordable rental and ownership options and providing a variety of housing sizes and types integrated with the community to meet the needs of people of all ages, incomes, and abilities



## DENVER REGIONAL COUNCIL OF GOVERNMENTS

## STATUS OF AGING BILLS--2021 SESSION

As of 3-18-21

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">HB1121</a>	<b>Residential Tenancy Procedures</b> - requires landlords to give 14 days' notice to tenants prior to starting eviction proceedings for failure to pay rent or for a first or subsequent violation of any other condition or covenant other than a substantial violation; requires that the clerk of the court issue the summons in a residential eviction action; extends the period for which the summons must be issued from 7 days before the court appearance to 14 days before; removes existing provisions for service in residential tenancy actions and requires that the notice to quit or summons be served in the same manner as any other civil action; extends the period for residential evictions to 14 days after judgment; prohibits residential landlords from increasing rent more than one time in a 12-month period of tenancy; extends the notice period for nonpayment of rent for a home owner in a mobile home park from 10 days to 14 days; for a residential tenancy, extends the notice period to 60 days and makes it apply to a tenancy of any duration without a written agreement and prohibits a landlord from terminating a tenancy in which there is no written agreement with the primary purpose of increasing a tenant's rent without providing 60 days' notice.	Jackson & Jodeh/ Gonzales	House Appropriations	Support	<a href="#">FN</a>	Under existing law, certain residential landlords must give 10 days' notice to tenants prior to starting eviction proceedings for failure to pay rent or for a first or subsequent violation of any other condition or covenant other than a substantial violation; the clerk of the court or the attorney for the plaintiff may issue a summons to a defendant in an eviction action; in certain circumstances, a person may serve a notice to quit or summons to the tenant by posting a copy of the notice or summons and the complaint in a conspicuous place upon the premises and a person may serve a notice to quit by leaving it with a member of the tenant's family who is at least 15 years old; if a landlord wins judgment in an eviction action, the court cannot issue a writ of restitution, which directs the county sheriff to assist the landlord in removing the tenant, until 48 hours after judgment; for a tenancy of one month or longer but less than 6 months in which there is no written agreement between the landlord and tenant, a landlord must give 21 days' written notice to the tenant prior to increasing the rent.	DRCOG supports renters and homeowners (including manufactured home owners) having appropriate protections from discrimination and displacement. Policies should emphasize the rights of residents and minimize disparities in treatment under the law. DRCOG supports policies, programs and services that preserve existing affordable housing stock, promote access to a variety of housing options in diverse geographic locations, and provide consumer protections that enable older adults and individuals with disabilities to age in place.

## DENVER REGIONAL COUNCIL OF GOVERNMENTS

## STATUS OF AGING BILLS--2021 SESSION

As of 3-18-21

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">SB173</a>	<b>Rights In Residential Lease Agreements-</b> addresses several items related to landlord and tenant rights in residential rental agreements, particularly related to legal and court processes, including removal or exclusion from a dwelling, filing of complaints, answering complaints, judgement appeals, restitution, warranty of habitability, liquidated damage clauses, one-way fee-shifting clauses, right to a trial by jury. The bill also amends or prohibits certain late fees, charges and penalties a landlord of a mobile home park or a residential premises (landlord) may impose on a tenant or mobile home owner. The bill also addresses penalties On landlords who commit violations.	Gonzales-Gutierrez & Caraveo/Moreno & Gonzales	Senate State, Veterans, & Military Affairs	Support		These reforms of eviction court prcesses are intended to give tenants more opportunities to resolve issues, especially regarding payment of rent, that may occur with a landlord, as well as to ensure landlord accountability for unfair practices. These reforms also are intended to keep tenants housed and housed in safe, healthy settings.	DRCOG supports renters and homeowners (including manufactured home owners) having appropriate protections from discrimination and displacement. Policies should emphasize the rights of residents and minimize disparities in treatment under the law. DRCOG supports policies, programs and services that preserve existing affordable housing stock, promote access to a variety of housing options in diverse geographic locations, and provide consumer protections that enable older adults and individuals with disabilities to age in place.

**ATTACH C**

To: Chair and Members of the Advisory Committee on Aging

From: Sharon Day, Program Manager, AAA Business Operations  
(303) 480-6705 or [sday@drcog.org](mailto:sday@drcog.org)

Meeting Date	Agenda Category	Agenda Item #
April 16, 2021	Action	6

#### SUBJECT

This item is regarding funding allocations for existing AAA contractors.

#### PROPOSED ACTION/RECOMMENDATIONS

DRCOG staff recommends approval of funding allocations to contractors as reviewed and recommended by the ACA funding subcommittee.

#### ACTION BY OTHERS

ACA Funding Subcommittee met on April 1, 2021 to review proposals and other funds requests and have made funding recommendations

#### SUMMARY

For a variety of reasons, a few providers were unable to complete a proposal during DRCOG's most recent Request for Proposals (RFP) solicitation for AAA contractors, which closed in January 2021. Since those providers were current AAA contractors, the ACA funding subcommittee agreed to consider a request for funds but for a shorter term of six months so that services may continue through the remainder of calendar year 2021. Four providers submitted proposals for nine Older Americans Act service programs.

In addition, current contractors were given the opportunity to request additional funds to use during the remainder of the current state fiscal year ending on June 30, 2021 (SFY2021). Ten providers submitted requests to increase funds for their programs, and two providers submitted requests to simply redistribute funds among their contracted services. Requests for additional funds were required to include a justification including the increased number of service units and clients served. Volunteers of America (VOA), DRCOG's largest nutrition contractor, submitted a funding request for capital assets. The assets included various equipment needed in VOA's kitchen and warehouse facilities to support the nutrition program. VOA submitted a formal proposal that outlined the need for such equipment together with multiple price bids and the rationale for its chosen vendors.

The ACA funding subcommittee reviewed all of the proposals and other funds requests and have recommended funding as outlined in the attached summary of requests. Their recommended allocations total approximately \$680.9K for SFY2021 and \$782.6K for SFY2022.

#### PREVIOUS DISCUSSIONS/ACTIONS

N/A

**PROPOSED MOTION**

Move to make a recommendation that the Advisory Committee on Aging approve short-term state and federal allocations to AAA providers, and to accordingly enter into or amend contracts with such providers.

**ATTACHMENT**

ACA FSC – Recommended Contractor Allocations

**ADDITIONAL INFORMATION**

If you need additional information, please contact Jayla Sanchez-Warren, Director, Area Agency on Aging, at 303-480-6735 or [jswarren@dracog.org](mailto:jswarren@dracog.org), or Sharon Day, Program Manager, AAA Business Operations, at 303-480-6705 or [sday@dracog.org](mailto:sday@dracog.org).

**ATTACH D**

## DRCOG ACA Funding Subcommittee - Recommended Contractor Allocations

### Additional Proposals

Provider	Service	SFY2022 Funds (6 mos)
City and County of Denver Office on Aging	Information and Assistance	\$55,440.00
Dominican Home Health Agency, Inc.	Education	\$7,386.00
	Homemaker	\$15,288.00
	Personal Care	\$55,601.00
	Screening	\$20,877.00
Jefferson Center for Mental Health	Counseling	\$76,149.00
The Senior Hub	Adult Day Care/ Adult Day Health	\$49,590.00
	Caregiver Respite Care	\$93,015.00
	Home Delivered Meals	\$409,237.00

**Total Funds Recommended SFY2022**      **\$782,583.00**

### Additional Funds Request

Provider	Service	SFY2021 Additional Funds	Revised Total Funds
A Little Help	Chore	\$10,064.00	\$30,314.00
	Material Aid - Emergency Assistance	\$3,000.00	\$3,750.00
	Reassurance	\$3,900.00	\$12,900.00
Audio Information Network of Colorado	Education	\$8,365.00	\$124,494.90
Brothers Redevelopment, Inc.	Information and Assistance	\$12,500.00	\$145,075.88
Colorado Gerontological Society	Material Aid - Audiology	\$350,000.00	\$881,887.52
	Reassurance	\$15,000.00	\$75,000.00
Colorado Nonprofit Development Center dba Benefits in Action	Counseling	\$14,304.00	\$78,669.00
	Material Aid	\$40,233.00	\$121,233.00
Denver Inner City Parish	Education	\$5,000.00	\$23,000.00
Douglas County	Assisted Transportation	\$14,268.00	\$166,448.00
	Personal Care	\$976.00	\$44,864.64
Project Angel Heart	Home Delivered Meals	\$39,584.00	\$363,308.16
Senior Support Services	Screening	\$15,000.00	\$200,333.00
Seniors Resource Center, Inc.	Special Equipment for Visually Impaired	(\$10,712.00)	\$2,500.00
	Visually Impaired - Counseling	(\$17,000.00)	\$5,000.00
	Homemaker	(\$165,000.00)	\$161,705.55
	Personal Care	(\$30,000.00)	\$8,823.60
	Chore - Hoarding	\$100,000.00	\$228,424.99
	Material Aid - Emergency Assistance	\$107,712.00	\$213,967.28
	Reassurance	\$15,000.00	\$30,000.00
The Senior Hub, inc.	Caregiver Respite Care	\$15,210.00	\$123,435.00
	Material Aid - Emergency Assistance	\$54,000.00	\$154,000.00
Via Mobility Services	Assisted Transportation	\$157,376.23	\$1,516,193.23
	Program Development	(\$157,376.23)	\$134,781.96
Volunteers of America	Capital Assets for Nutrition Programs	\$79,460.00	\$79,460.00

**Total Funds Recommended SFY2021**      **\$680,864.00**

**ATTACH E**



To: Chair and Members of the Advisory Committee on Aging

From: Jayla Sanchez-Warren, Director Area Agency on Aging, (303) 480-6735 or [jswarren@drcog.org](mailto:jswarren@drcog.org)

Meeting Date	Agenda Category	Agenda Item #
April 16, 2021	Informational Briefing	7

#### SUBJECT

Develop the parameters for a Hospital Transformation Project (HTP)/ Community services Subcommittee of the Advisory Committee on Aging

#### PROPOSED ACTION/RECOMMENDATIONS

Develop an ad hoc sub-committee to discuss the impact of the HTP on the AAA and our contracted community-based providers and the services in the region. Discuss membership, goals and frequency and duration of the meetings and develop the first meeting agenda.

#### ACTION BY OTHERS

ACA members

#### SUMMARY

The HTP is a program implemented by Colorado's Medicaid Agency as a five-year program to transition how it pays clinical providers from fee-for-service to value-based payment. As part of the HTP, the state will pay hospitals to screen and refer patients to community-based organizations (CBO).

Current estimates show that more than 447,000 Coloradans are insured by Medicaid in the nine county Denver metro area. When fully implemented this could mean more than 160,000 people could be referred annually for community services with no compensation to the AAAs or the providers for the service. This is an alarming number since many of our service providers are at capacity.

#### PREVIOUS DISCUSSIONS/ACTIONS

March 19, 2021 ACA meeting

#### PROPOSED MOTION

N/A

#### ATTACHMENT

N/A

If you need additional information please contact Jayla Sanchez-Warren, Director Area Agency on Aging, 303-480-6735 or [jswarren@drcog.org](mailto:jswarren@drcog.org)

**ATTACH F**

To: Chair and Members of the Advisory Committee on Aging

From: Rich Mauro, Senior Policy and Legislative Analyst, 303-480-6778 or [rmauro@drcog.org](mailto:rmauro@drcog.org).

Meeting Date	Agenda Category	Agenda Item #
April 16, 2021	Informational Briefing	8

**SUBJECT**

State Legislative Update

**PROPOSED ACTION/RECOMMENDATIONS**

N/A

**ACTION BY OTHERS**

N/A

**SUMMARY**

Rich Mauro will provide an update on activities and issues at the Colorado General Assembly. This will include a status report on bills of interest and a review of the Long Bill.

**PREVIOUS DISCUSSIONS/ACTIONS**

N/A

**PROPOSED MOTION**

N/A

**ATTACHMENT**

Legislative Status Report as of April 12, 2021

**ADDITIONAL INFORMATION**

Rich Mauro can be contacted at 303-480-6778 or [rmauro@drcog.org](mailto:rmauro@drcog.org).

**DENVER REGIONAL COUNCIL OF GOVERNMENTS**  
**STATUS OF AGING BILLS--2021 SESSION**  
**As of 4-12-21**

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<b>AGING BILLS</b>							
<a href="#"><u>SB128</u></a>	<b>Modification To Administration Of The Nursing Home Penalty Cash Fund</b> -makes changes to the fund and the nursing Home Innovations Grant Board: Transitions all authority over the fund, and the board from the Colorado Department of Health Care Policy and Financing (HCPF) to the Colorado Department of Public Health and Environment (CDPHE) effective July 1, 2021.	Kolker / Lontine	House Public & Behavioral Health & Human Services	Monitor	<a href="#"><u>FN</u></a>	Removes the \$10,000 spending limitation; Removes the provision allowing members of the board to be reimbursed for expenses; Removes the provision restricting any governmental entity from applying for a grant from the fund; Adds a requirement that HCPF and CDPHE develop an annual budget to administer the fund and support the board; Adds a requirement that HCPF and CDPHE collaborate annually on any emergency funding needs and specifies that HCPF will administer such funding; Adds projects that compliment statewide quality and safety goals as a consideration in making a distribution from the fund; and Lengthens the period for CDPHE to provide notice of a violation to a nursing facility from 5 days to 10 days after inspection.	DRCOG supports increases in the quality of care and consumer protections for older adults and their caregivers and, in particular, legislation strengthening the role of the long-term care ombudsman and PACE ombudsman as resident and consumer advocates. DRCOG urges the state, when making decisions regarding funding for long-term care programs, to structure such funding to protect the quality of care for residents and participants, including funding for optimal ombudsman staffing.
<a href="#"><u>SB158</u></a>	<b>Increase Medical Providers For Senior Citizens</b> -modifies the Colorado Health Service Corps program administered by the Primary Care Office in the Department of Public Health and Environment, which program includes a loan repayment program, as follows: allows geriatric advanced practice providers, which include advanced practice registered nurses and physician assistants with geriatric training or experience, to participate in the loan repayment program on the condition of committing to provide geriatric care to older adults in health professional shortage areas for a specified period; and requires the general assembly to annually and continuously appropriate money from the general fund to the office for the 2021-22 through the 2025-26 fiscal years to help repay loans for geriatric advanced practice providers.	Danielson & Pettersen/ Titone & Duran	Senate Appropriations	Support	<a href="#"><u>FN</u></a>	This is a reintroduction of a bill DRCOG supported in the 2020 session. The bill was pulled after the pandemic shortened the legislative session. As an Area Agency on Aging, DRCOG staff has observed the value of older adults being treated by providers specifically trained to consider the entire patient. Geriatric practitioners spend more time with patients to understand the social factors that affect older persons and are more likely to consider the need for community services, economic security, risk for fraud and abuse, isolation, and depression. The bill spreads out \$2 million over five years.	As an advocate for older adults, individuals with disabilities, veterans and their caregivers, DRCOG works with various agencies, groups and individuals to support state legislation, regulations and programs to meet their needs. DRCOG supports increased funding for programs and exploration of programs providing services to older adults, individuals with disabilities, veterans and their caregivers, especially services that support individuals continuing to live independently in their homes and communities.

**DENVER REGIONAL COUNCIL OF GOVERNMENTS**  
**STATUS OF AGING BILLS--2021 SESSION**  
**As of 4-12-21**

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">SB181</a>	Equity Strategic Plan Address Health Disparities- renames the existing "health disparities grant program" to the "health disparities and community grant program" and expands the program to authorize the office of health equity to: award grants from money currently transferred from the prevention, early detection, and treatment fund to the health disparities grant program fund (fund) for the purpose of positively affecting social determinants of health to reduce the risk of future disease and exacerbating health disparities in underrepresented populations; and award grants from any additional money appropriated by the general assembly to the fund to community organizations to reduce health disparities in underrepresented communities through policy and systems changes regarding the social determinants of health.mOn or before July 1, 2022, the office is required to facilitate a state agency work group to develop an equity strategic plan. Specific state agencies are required to participate in the state agency work group to ensure coordination in equity-related work across state agencies to address social determinants of health in each agency's respective area.	Fields & Coram/ Herod	Senate Appropriations	Pending DRCOG Board Consideration	<a href="#">FN</a>	The definition in statute of "health disparities" includes differences in health status, access to care, and quality of care as determined by race, ethnicity, sexual orientation, gender identity, disability status, <u>aging population</u> , socioeconomic status, and other factors.	DRCOG supports collaboration and partnerships to better meet the service needs of older adults consistent with DRCOG's responsibilities as an Area Agency on Aging and an ADRC.

DENVER REGIONAL COUNCIL OF GOVERNMENTS  
STATUS OF AGING BILLS--2021 SESSION  
As of 4-12-21

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">HB1172</a>	<b>Hospital Patient Long-term Care Resident Visit Rights-</b> specifies that a patient admitted to a hospital for inpatient care and a resident of a nursing care facility or assisted living residence may have at least one visitor of the patient's or resident's choosing during the stay or residency. These health-care facilities must have written policies and procedures regarding the visitation rights of patients and residents, including policies and procedures setting forth any clinically necessary or reasonable restriction or limitation that the health-care facility may need to place on patient and resident visitation rights and the reasons for the restriction or limitation. The bill also prohibits a health-care facility from adopting policies or procedures that prohibit visitation of a patient or resident if the sole reason for the prohibition is to reduce the risk of transmission of a pandemic disease, but a health-care facility may impose specified requirements and limitations for visitors to reduce the risk of transmission of the pandemic disease.	Geitner/ Smallwood & Ginal	House Health & Insurance	Monitor	<a href="#">FN</a>	DRCOG's long term care ombudsmen have been concerned about the health effects on residents of long term care facilities since the pandemic resulted in visitation restrictions. As public health authorities has begun to allow some return to visitation, implementation of visitation protocols has been uneven. Staff intends to work with the sponsors of this bill, the state and public health authorities to reinstate visitation in a safe, consistent manner.	DRCOG supports increases in the quality of care and consumer protections for older adults and their caregivers and, in particular, legislation strengthening the role of the long-term care ombudsman and PACE ombudsman as resident and consumer advocates.
<a href="#">HB1187</a>	<b>Long-term Services And Support Case Management Redesign-</b> requires the Medical Services Board to adopt rules providing for the establishment of a redesigned case management system, no later than July 1, 2024, that consists of case management agencies throughout the state for the purpose of enabling individuals in need of long-term care to access appropriate long-term services and supports. No later than December 31, 2021, the Department of Health Care Policy and Financing shall work with stakeholders to develop a timeline for the implementation of the system. No later than December 31, 2022, HCPF shall issue a competitive solicitation in order to select case management agencies for the system.	Young & Pelton/ Rankin & Winter	House Public & Behavioral Health & Human Services	Monitor	<a href="#">FN</a>	Current law provides for the establishment of a single entry point system that consists of single entry point agencies throughout the state for the purpose of enabling persons 18 years of age or older in need of long-term care to access appropriate long-term care services.	DRCOG supports collaboration and partnerships to better meet the service needs of older adults consistent with DRCOG's responsibilities as an Area Agency on Aging and an ADRC.

**DENVER REGIONAL COUNCIL OF GOVERNMENTS**  
**STATUS OF AGING BILLS--2021 SESSION**  
**As of 4-12-21**

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">HB1227</a>	Nursing Home Demonstration of Need- requires HCPF to develop, analyze, and enforce a demonstration of need for each new nursing facility provider seeking medicaid certification (does not apply to a nursing facility provider certified prior to June 30, 2021); requires the Medical Services Board to promulgate rules, no later than June 30, 2022, addressing establishment of criteria to be used in determining a provider's Medicaid certification; and allows HCPF to exempt nursing facilities with 5 or fewer Medicaid beds from the current reimbursement methodology and instead require the facilities to be reimbursed at the statewide average rate.	Lontine/ Fields	House Floor	Pending DRCOG Board Consideration	<a href="#">FN</a>	A Demonstration of Need policy permits HCPF to only authorize expansion of skilled nursing Medicaid providers when localities can sustain expansion. This would include a set of clear and predetermined criteria HCPF would use to approve or deny facilities that seek to serve Medicaid members. The criteria would be based on an analysis of demographics at the county level and the needs of the surrounding community. The policy will ensure stability, access to care and quality of care remain consistent for one of our most vulnerable populations.	DRCOG supports increases in the quality of care and consumer protections for older adults and their caregivers and, in particular, legislation strengthening the role of the long-term care ombudsman and PACE ombudsman as resident and consumer advocates. DRCOG urges the state, when making decisions regarding funding for long-term care programs, to structure such funding to protect the quality of care for residents and participants, including funding for optimal ombudsman staffing.

**DENVER REGIONAL COUNCIL OF GOVERNMENTS**  
**STATUS OF AGING BILLS--2021 SESSION**  
**As of 4-12-21**

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<b>HOUSING BILLS</b>							
<a href="#">HB1117</a>	<b>Local Government Authority Promote Affordable Housing Units-</b> clarifies that the existing authority of cities and counties to plan for and regulate the use of land includes the authority to regulate development or redevelopment in order to promote the construction of new affordable housing units. The provisions of the state's rent control statute do not apply to any land use regulation that restricts rents on newly constructed or redeveloped housing units as long as the regulation provides a choice of options to the property owner or land developer and creates one or more alternatives to the construction of new affordable housing units on the building site.	Lontine & Gonzales-Gutierrez/ Gonzales & Rodriguez	Senate Transportation & Local Government	Support	<a href="#">FN</a>	This bill has been initiated by the Colorado Municipal League. CCI and CCAT also support the bill.	DRCO supports policies and programs that support the private and public sectors in the creation and maintenance of an adequate supply of affordable rental and ownership options and providing a variety of housing sizes and types integrated with the community to meet the needs of people of all ages, incomes, and abilities
<a href="#">HB1121</a>	<b>Residential Tenancy Procedures-</b> requires landlords to give 14 days' notice to tenants prior to starting eviction proceedings for failure to pay rent or for a first or subsequent violation of any other condition or covenant other than a substantial violation; requires that the clerk of the court issue the summons in a residential eviction action; extends the period for which the summons must be issued from 7 days before the court appearance to 14 days before; removes existing provisions for service in residential tenancy actions and requires that the notice to quit or summons be served in the same manner as any other civil action; extends the period for residential evictions to 14 days after judgment; prohibits residential landlords from increasing rent more than one time in a 12-month period of tenancy; extends the notice period for nonpayment of rent for a home owner in a mobile home park from 10 days to 14 days; for a residential tenancy, extends the notice period to 60 days and makes it apply to a tenancy of any duration without a written agreement and prohibits a landlord from terminating a tenancy in which there is no written agreement with the primary purpose of increasing a tenant's rent without providing 60 days' notice.	Jackson & Jodeh/ Gonzales	House Appropriations	Support	<a href="#">FN</a>	Under existing law, certain residential landlords must give 10 days' notice to tenants prior to starting eviction proceedings for failure to pay rent or for a first or subsequent violation of any other condition or covenant other than a substantial violation; the clerk of the court or the attorney for the plaintiff may issue a summons to a defendant in an eviction action; in certain circumstances, a person may serve a notice to quit or summons to the tenant by posting a copy of the notice or summons and the complaint in a conspicuous place upon the premises and a person may serve a notice to quit by leaving it with a member of the tenant's family who is at least 15 years old; if a landlord wins judgment in an eviction action, the court cannot issue a writ of restitution, which directs the county sheriff to assist the landlord in removing the tenant, until 48 hours after judgment; for a tenancy of one month or longer but less than 6 months in which there is no written agreement between the landlord and tenant, a landlord must give 21 days' written notice to the tenant prior to increasing the rent.	DRCOG supports renters and homeowners (including manufactured home owners) having appropriate protections from discrimination and displacement. Policies should emphasize the rights of residents and minimize disparities in treatment under the law. DRCOG supports policies, programs and services that preserve existing affordable housing stock, promote access to a variety of housing options in diverse geographic locations, and provide consumer protections that enable older adults and individuals with disabilities to age in place.

\* FN = Fiscal Note



**DENVER REGIONAL COUNCIL OF GOVERNMENTS**  
**STATUS OF AGING BILLS--2021 SESSION**  
**As of 4-12-21**

Bill No.	Short Title/Bill Summary	Sponsors	Status	Position	*FN	Staff Comments	Legislative Policy
<a href="#">SB173</a>	<b>Rights In Residential Lease Agreements-</b> addresses several items related to landlord and tenant rights in residential rental agreements, particularly related to legal and court processes, including removal or exclusion from a dwelling, filing of complaints, answering complaints, judgement appeals, restitution, warranty of habitability, liquidated damage clauses, one-way fee-shifting clauses, right to a trial by jury. The bill also amends or prohibits certain late fees, charges and penalties a landlord of a mobile home park or a residential premises (landlord) may impose on a tenant or mobile home owner. The bill also addresses penalties On landlords who commit violations.	Gonzales-Gutierrez & Caraveo/ Moreno & Gonzales	Senate Floor	Support	<a href="#">FN</a>	These reforms of eviction court pcesses are intended to give tenants more opportunities to resolve issues, especially regarding payment of rent, that may occur with a landlord, as well as to ensure landlord accountability for unfair practices. These reforms also are intended to keep tenants housed and housed in safe, healthy settings.	DRCOG supports renters and homeowners (including manufactured home owners) having appropriate protections from discrimination and displacement. Policies should emphasize the rights of residents and minimize disparities in treatment under the law. DRCOG supports policies, programs and services that preserve existing affordable housing stock, promote access to a variety of housing options in diverse geographic locations, and provide consumer protections that enable older adults and individuals with disabilities to age in place.

**ATTACH G**

To: Chair and Members of the Advisory Committee on Aging

From: Jayla Sanchez-Warren, Director Area Agency on Aging, (303) 480-6735 or [jswarren@drcog.org](mailto:jswarren@drcog.org)

Meeting Date	Agenda Category	Agenda Item #
April 16, 2021	Informational Briefing	9

**SUBJECT**

Efforts in the region to vaccinate homebound older adults

**PROPOSED ACTION/RECOMMENDATIONS**

Informational

**ACTION BY OTHERS**

N/A

**SUMMARY**

The State Unit on Aging has asked DRCOG Area Agency on Aging to report on efforts to vaccinate homebound individuals in the region. The Colorado Department of Public Health and Environment (CDPHE) is working with local health departments to identify homebound individuals and then send county nurses out to provide vaccinations to those that want them. Understanding the efforts happening in each county is important and challenging, so many different organizations are participating in similar efforts including churches, service organizations, fire departments, clinics, and hospitals.

We are asking ACA members to learn about what is happening in their county and report in the meeting how homebound individuals are being identified, contacted and served if they want a COVID vaccination.

**PREVIOUS DISCUSSIONS/ACTIONS**

NA

**PROPOSED MOTION**

N/A

**ATTACHMENT**

N/A

If you need additional information please contact Jayla Sanchez-Warren, Director Area Agency on Aging, 303-480-6735 or [jswarren@drcog.org](mailto:jswarren@drcog.org)