



LCS Committees &lt;committees.lcs.ga@coleg.gov&gt;

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**HB 25-1162 NOW!!**

1 message

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**Marcella Schieffelin** <schieffelinmarc@gmail.com>  
To: LCS Committees <committees.lcs.ga@coleg.gov>

Tue, Feb 18, 2025 at 4:27 PM

Good afternoon, Mr. Chair and members of the committee:

My name is Marcella Schieffelin, and I live in Mesa County.

I respectfully request an amendment to this bill. It doesn't make sense for long-term care recipients, who have already been approved, to undergo a full re-enrollment process every three years. Instead, alternative verification methods could streamline the process and conserve state resources. For example, some states use automated, trigger-based systems that flag significant changes in a recipient's health or care needs—such as hospitalizations or shifts in prescription patterns—to prompt a review.

Last October, my daughter was undergoing a waiver change and pending reinstatement of her former waiver. She needed a month of respite care and relocated to a different county. Yet, I received a 30-page disability eligibility document filled with irrelevant questions about her employment, prior disability benefits, education, and detailed medical history. This process wasted hours gathering unnecessary data and delayed the entire process.

Please consider amending the bill to adopt a more streamlined approach that saves resources through alternative verification methods.

Thank you for your time.

**Marcella Schieffelin** (she/her)

Disability Advocate | Music Therapist

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*"Fight for the things you care about, but do it in a way that will lead others to join you." ~ Ruth Bader Ginsburg*

TESTIMONY OF BILL LEVIS IN SUPPORT OF HB25-1162  
BEFORE HOUSE HEALTH & HUMAN SERVICES, HCR 0112  
FEBRUARY 18, 2025

Mr. Chair and members of the committee. I am Bill Levis, the father and legal guardian of my disabled son who lives in Rep. Feret's district. He receives Social Security Disability Income, Medicaid, Medicare, the brain injury waiver and state PTC rebate program. Based on my experience in applying for benefits the last 19 years and having to file at least four yearly reports, I strongly support House Bill 1162 which would allow Medicaid reapplications every three years instead of one.

Even though I am a former assistant attorney general, past president of the Brain Injury Association of Colorado and an advocate with AARP, I have experienced difficulty and frustration in getting my son's Medicaid renewed. There have been occasions when his initial renewal application was rejected and it had to be resubmitted. In so doing, I have had difficulty reaching someone at the county Medicaid office and getting someone to respond to my calls and emails. In addition, caseworkers often change, sometimes yearly, which means they have to be educated, not only concerning the system, but also about my son's status. The state's Peak reporting website can also be challenging.

If I, as a lawyer, am having trouble navigating a complicated system, imagine what other people with limited time and skills have been going through. This bill not only should lessen the number of times a redetermination needs to be made but also should lighten the counties' caseload and make it easier to reach caseworkers.

For these reasons, I support the passage of House Bill 1162.

**House Health & Human Services**

**02/18/2025 Upon Adjournment**

**HB25-1162 Eligibility Redetermination for Medicaid Members**

**Typed Text of Testimony Submitted**

<b>Name, Position, Representing</b>	<b>Typed Text of Testimony</b>
Jennifer Thamer For themselves	<p>Dear Representatives:</p> <p>On Tuesday, the HHS Committee will hear HB25-1162. This bill would have a real impact on many Colorado families, like ours, with disabled members who have qualified for Medicaid and are on a fixed income.</p> <p>Under the current system, HCPF requires our family members to go through the annual months-long, incredibly stressful process of Medicaid redetermination, even when their medical or financial circumstances do not change. The risks of a system error, of misfiling, of missing an email have real consequences. Those risks keep me up nights from every January to April, because Medicaid is a life-line for my family members.</p> <p>I ask that the Legislature vote to approve this bill, help make necessary health care more accessible, and significantly simplify the Medicaid redetermination process for disabled Coloradans. Thank you for your consideration.</p> <p>Sincerely, Jennifer Thamer</p>
Stephanie Fairbanks For themselves	<p>I am testifying in support of HB25-1162, Medicaid Redetermination and Presumptive Eligibility. I am the parent of multiple disabled children who do qualify for Medicaid, but who aren't on due to the complications in the redetermination process. My son had Medicaid through the buy-in program for years and lost it just before COVID due to an error on my part regarding the monthly payment. This was five years ago, and despite multiple attempts and still qualifying, we have been unsuccessful in getting him back on Medicaid. The process is confusing, complex, and burdensome. But even when I've finally gotten the application completed, I don't know with whom to follow</p>

	<p>up. I turned in the initial paperwork here in Broomfield and when I didn't hear anything for weeks - and had been back multiple times to find out with whom to talk - I finally got someone who told me my paperwork was incomplete because I was missing a form. I turned that form in and again, weeks passed before I finally got in touch with someone who told me we had been denied because of our income. On this phone call, I verified our income and was told flatly that we didn't qualify because we make too much. The person on the other end was going off of the income requirements for a family much smaller than ours, and they weren't considering we were applying for the buy-in program.</p> <p>It was such a frustrating conversation after more than a year of trying to get this done that I haven't tried again. I have often said to my husband that it boggles the mind that anyone can get through the application process at all. I am highly educated, as is my husband. But the process has confused both of us, and then to have our case dismissed without the information on our form even being considered (I very specifically wrote we were applying for the buy-in program, as well as reported our income and family size clearly) along with not having anyone with whom to talk for help, I have kept putting it off until I have the bandwidth to spend months dealing with it again.</p> <p>In the meantime, our son has gone years without the care he needs because we cannot afford it. Our daughter also qualifies, but we have never even applied for her because the process has been such a nightmare for our son, who has higher support needs. We pay out of pocket for what we can, but it isn't nearly enough. And again, our income is half of the upper qualifying limit for a family our size. I can't help but wonder if the complexity of the process is one reason why nobody is available to help us. I know the case workers are too few and have too much work. It's no wonder it takes me weeks to find anyone to talk to and when I do, they don't have time to examine my paperwork carefully and actually listen to me. We have got to make it easier for families to access healthcare for our children. If the income requirements are a set dollar level and someone falls below that level, families who need this help and qualify should be able to get it in a timely manner. Redetermination should be simplified and streamlined, and this is why I support HB25-1162 and urge you to do so as well. Thank you.</p>
<p>Ingrid Moore</p>	<p>Please vote YES on this bill.</p>

<p>For themselves</p>	<p>Members needing Medicaid services will be greatly aided by extending the timeline for member reenrollment in the state Medicaid program, verifying the eligibility for reenrollment based on income and need at the same time.</p> <p>Also, relieving the requirement for new documentation for a member transitioning between service categories (an institutional setting to receiving services in a home- and community-based setting and vice versa) will greatly relieve the bureaucratic burden for those who are least able to jump through these hoops.</p> <p>This bill is going to help many qualified individuals receive the benefits that they may otherwise be denied.</p> <p>Please pass this bill.</p> <p>Thank you!</p>
<p>Joseph Dubroff For LeadingAge Colorado</p>	<p>My name is Joe Dubroff and I am the director of government affairs for LeadingAge Colorado. LeadingAge Colorado is the leading voice of senior living and care providers. Our mission is to foster a collaborative network that leads, advocates and shares knowledge to enrich and advance services to the aging and promote a healthy business environment for our members. Our strength lies in the diversity of our membership that includes: Assisted Living Residences, Home- and Community-based Services (HCBS), Independent Senior Housing, Life Plan Communities, Nursing Homes and Programs of All-Inclusive Care for the Elderly (PACE).</p> <p>LeadingAge Colorado is proud to support HB25-1162. Our membership includes many organizations that provide long-term services and support (LTSS) through Medicaid, including adult day services, alternative care facilities (ACFs, which are Medicaid-funded assisted living residences), nursing homes and PACE. Annual Medicaid redeterminations put significant administrative burden onto these members, who are making significant investments of time, workforce and other resources to provide the highest quality care to older adults with significant needs.</p> <p>Many of these care recipients are on fixed incomes. Care for them is a long-term investment that unfortunately does not always yield</p>

	<p>immediate results. Because of this, in annual Medicaid redeterminations, care providers end up giving the same information with little to no changes. Adding more time between redeterminations so that they need to be done every three years will lessen the administrative burden for HCPF as administrators of the program and providers to focus on more important work, such as caring for these people in need. We call on all members of the House Health &amp; Human Services Committee to vote yes on HB25-1162.</p>
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To Committee Members:

My name is Kristina Ericson and I am a disability policy advisor and former disability social worker writing in support of House Bill 25-116.

I proudly work for the State of Colorado's Developmental Disabilities Council - a 24 member, governor appointed, Council that advocates for systems change for Coloradans with intellectual and developmental disabilities (I/DD) and their families. Mandated under the federal Developmental Disabilities Act, we work to help make Colorado more accessible and inclusive, and to help Coloradans with disabilities live a meaningful life.

Health First Colorado, the State's Medicaid program, covers nearly 22% of Coloradans - including thousands of individuals with I/DD. Medicaid-funded supports and services, such as those provided by waiver programs, provide critical physical and mental healthcare services that help more Coloradans live in the communities of their choice and not in institutionalized settings. These programs knock down many of the physical, social, and financial barriers to living that people with disabilities face every day. However, there are still many administrative hurdles that make it difficult for people with disabilities to access the care they need, and to live outside of institutional care.

House Bill 25-116 will make it easier for people with intellectual, developmental, and learning disabilities to apply and access Medicaid services by simplifying the application process and creating an easier journey to redetermination. As a former disability case worker, I can also say with confidence that this bill would ease the burdensome workloads of social workers and families who are tasked with helping people with disabilities navigate these systems. Additionally, this bill will ease administrative burdens for people with disabilities who are transitioning out of institutional spaces to live in their own homes - a process that we should all be working together to simplify and uphold.

Thank you for your time and consideration, and I look forward to knocking down accessibility barriers with you.

Best,

**Kristina Ericson**, MSW, CPACC, ADAC (she/her)

Director of Policy and Outreach

Colorado Developmental Disabilities Council

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Colorado Developmental  
Disabilities Council