

The Guide to get help from Medicaid to  
Pay for Assisted Living

**Grand County**

Licensed Assisted Living Residences that are certified to accept Medicaid funds are called Alternative Care Facilities.

The Medicaid Program that pays for assisted living is called Home and Community Based Services – under either: the Elderly, Blind and Disabled (EBD) Waiver or Mental Illness (MI) Waiver programs. They are called waiver programs because they are intended to serve individuals who meet the level of care screening for long term care (nursing) facilities, and provide the state with a cost effective alternative. The program is for those with limited incomes. It is possible that you may not currently meet the income/asset qualifications. The entire process can take several months or more so stay in touch with the different agencies along the way.

There are three parts to the application process:

1) Financial eligibility – which is determined by the County Department of Human Services

And,

2) Functional eligibility, which is assessed by a “Single Entry Point” agency.

Applications must be submitted for both parts and may take several months before approval is received.

And possibly

3) Disability Determination by Social Security

**Helpful Tips:**

- Keep copies of everything you send in
- Hand deliver when possible
- Certify by mail so you have a receipt
- Check often on the status of your application
- Get all required paperwork in as soon as possible to avoid delays

**Contact Information:**

**Department of Human Services conducts the financial eligibility determination for Medicaid. 620 Hemlock Hot Sulphur Springs, CO 80451 Phone 970-725-3331 Fax 970-725-3696**

State website with general information about Medicaid: <http://www.chcpf.state.co.us/>

- The county has 45 days to respond to your initial application if no disability determination is needed.

- The county has 90+ days to respond to your initial application if disability determination is needed.
- You have 10 days to provide any missing information. Once all information is complete, the timeline will begin again.
- A case manager from a “SEP” agency will call to do the first assessment of needs.
- Medicaid Customer Service phone number is 303-866-3513 (within Metro Denver) or 1-800-221-3943 (outside Metro Denver)
- If a client is under 65 and not receiving SSI or SSDI, client must complete a Medicaid Disability Determination application in addition to the financial application. Contact your local Social Security and apply for SSI or SSDI benefits.
- Social Security Online Claim at [www.socialsecurity.gov/applyfordisability](http://www.socialsecurity.gov/applyfordisability)
- Social Security toll-free number at 1-800-772-1213 from 7 a.m. to 7 p.m. M-F. If you are deaf or hard of hearing you may call the TTY number at 1-800-325-0778.

**Northwest OLTC is the Single Entry Point (SEP) Agency for Grand County-195 W. 14<sup>th</sup> St Rifle, CO 81650 Intake Phone 970-945-9191 Fax 970-928-0465**

**SEP website**

[http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1205189474220#\\_Toc193015348](http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1205189474220#_Toc193015348)

**HCBS Eligibility Requirements?**

- Aged or Blind or Disabled
  - Aged 65+, no disability required
  - Under 65, client must be determined Disabled by Social Security standards
- Institutionalized
  - 30 consecutive days in a medical institution; or
  - meet nursing facility level of care through the functional assessment by the SEP
- Financial
  - Income, resources and citizenship/identity
  - The applicant's income must be less than \$2,022.00 (300%, or three times, the Supplemental Security Income allowance-\$694.00) per month and countable resources less than \$2,000 for a single person. These are subject to change.