



Colorado
Cross-Disability
Coalition

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I am submitting these comments on behalf of the Colorado Cross-Disability Coalition (CCDC). CCDC is the largest disability organization in Colorado run by and for people with all types of disabilities. CCDC represents a significant portion of people who are qualified to receive services through the PACE program, meaning people over age 55, who are eligible for both Medicare and Medicaid and who have a variety of medical, physical, cognitive and mental health conditions.

CCDC is very concerned about this proposed conversion for several reasons:

- 1) The charitable funding assets are going to a foundation that is completely controlled by the existing organization. It is critically unclear how the the intended beneficiary population will benefit from the conversion. There are no safeguards to prevent the identified Board of Directors from funding front groups to funnel unsuspecting disabled and elderly citizens into the for profit PACE program without assuring full and informed choice. A front group would be a group that pretends to be an advocacy group or information and referral group or even case management but their real purpose is to recruit clients and refer them to the PACE program.
- 2) This organization does not appear to be connected to other viable community resources. There is no demonstration of intent and purpose to reach out to and engage the community and people that do or could participate in the PACE option. The only time CCDC ever heard from INNOVAGE was when they wanted us to support or not oppose their legislation to convert from non-profit to for-profit.
- 3) There is no representation on the foundation Board of Directors that is solely accountable to the client community. We did not even know they had a foundation.
- 4) INNOVAGE as a non profit has made minimal if any apparent effort to to engage the client community. Even when they had the Single Entry Point contract with Health Care Policy and Financing (which they lost a couple years ago) they either never established or never opened the mandatory client advisory council. The organizations that held this same contract before and after INNOVAGE have included us and others in their advisory councils. The current INNOVAGE Board of Directors will be the new Foundation Board of Directors.
- 5) As with all Medicaid funded programs there should be oversight regardless of profit or non profit status. We have concerns about the quality of the PACE program. While we have not had many people enroll in the PACE program the people that did spoke of

coercion, feeling as if they had a “bait and switch” experience and extreme difficulty dis-enrolling from the program. Clients would be recruited and promised all sorts of services and promised that other services they currently had would remain in tact. Once they were in PACE everything changed and the promises were not kept. When INNOVAGE also held the SEP contract there significant delays in reinstating new/different services when someone left the PACE program. On the other hand, when enrolling people they would aggressively move to terminate existing services before they even set up PACE services. We recently had a complaint about someone who was coerced to join PACE by being told that if she did not join she would not be able to participate in activities at a retirement community she was contemplating. This individual was not on Medicaid but privately paying.

We request that the Attorney General in your role of consumer/citizen protection require the following:

- 1) An oversight Board of Directors to monitor quality and take client complaints. The complaint investigation process should be funded by the proceeds from the sale and be completely independent from INNOVAGE. The availability of complaint resolution should be advertised to current clients and families. A neutral organization such as Disability Law Colorado or Colorado Legal Services could be contracted to investigate and enforce quality standards.
- 2) Funds that are to benefit low-income people over 55 that are eligible for Medicare and Medicaid be sent to an established community foundation for distribution. There are plenty of reputable foundations that could support a designated fund. These include The Colorado Health Foundation, Caring for Colorado Foundation, the Rose Community Foundation, the Colorado Trust and the Denver Foundation.
- 3) If the funds remain with the existing foundation a majority of board members must be appointed from the community. These board members should be from individual advocacy organizations and should be people who are over 55 and eligible for Medicaid and Medicare or immediate family members thereof. These individuals should be appointed by either the Governor or the House or Senate Majority and Minority leaders.

We also agree fully with the statement submitted by the Colorado Center for Law and Policy and the Colorado Consumer Health Initiative.

Sincerely

Julie Reiskin, Colorado Cross-Disability Coalition