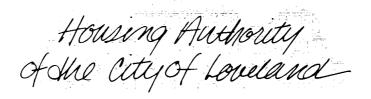


# APPLICATION FOR MEDICAID CERTIFICATION OF NEW NURSING FACILITIES

TO

# COLORADO DEPARTMENT OF HEALTH CARE POLICY & FINANCING

May 8, 2012



May 8, 2012

Sue Birch, Executive Director Colorado Department of Health Care Policy and Financing 1570 Grant St. Denver, Colorado 80203

Dear Ms. Birch.

It is with great excitement that we present this application for Medicaid certification for our project to build the Green House<sup>®</sup> transformational model of care at our Mirasol campus in Loveland. We applied your support of new non-institutional models of care, and feel that this model will not only benefit the elders of Loveland and our Mirasol Community, but will become a beacon for the future of community-based long-term care in Colorado.

The Housing Authority of the City of Loveland's mission for the past 40 years has been to provide low and moderate income residents with opportunities for home and community through housing. Our most recent award-winning project, Mirasol Senior Living Community, is setting a new standard for design, sustainability, and supportive programming for independent elders. Our organization has always believed that thoughtfully planned built environments, combined with appropriate supportive services, are the cornerstones of successful residential communities. We believe that Mirasol is a model that delivers on this belief. It is the vision of our organization that we must also create the opportunity for the residents of Mirasol to age in community, despite any care needs that may have in the future. We believe that the services and quality they receive in the delivery of that care should not be determined by their ability to pay. With your support, this project will meet that vision.

We have chosen Colorado's finest and most progressive long-term care provider to assist us in the development of this project and to manage the Green House homes after they are constructed. Piñon Management has a 30 year history of innovative models of care, and has been a state and national leader in the culture change movement in long-term care. Piñon also enjoys a proven success in public/private partnerships that have led to improved outcomes and sustainability for many long-term care facilities. We believe that their sustained commitment to the quality of life of their residents positions them to meet and deliver on this exciting new opportunity.

If we are to find answers to the challenges that lie ahead of us, then it will be important for us to seek new and different ways of delivering long-term care. The Green House model is certainly one of the right answers for the future. Its efficiency and effectiveness, not only in providing quality of life, but also improved quality of care is now validated through empirical research studies. We have included some of that research in this application for your review.

If we are to make this dream a reality for Colorado's elders, we will need your support in granting us new Medicaid beds for this new model. On behalf of our Board of Directors, but more importantly for the residents of Mirasol Community, I thank you for your consideration of our application as a new Medicaid –certified, community-based nursing home.

Sincerely,

Samuel G. Betters, Executive Director Housing Authority of the City of Loveland

### 8.430 MEDICAID CERTIFICATION OF NEW NURSING FACILITIES OR ADDITIONAL BEDS

#### 8.430.1 DEFINITIONS

Action means denial or approval of the application or request for additional information regarding an application.

Existing Colorado Nursing Facility means any nursing facility continuously licensed in Colorado for a period of at least 30 days prior to the date of application and which meets state and federal requirements.

Licensed Bed Capacity means the licensed bed capacity of a nursing facility on file with the Colorado Department of Public Health and Environment.

New Nursing Facility means any nursing facility not licensed as a Colorado nursing facility as of the date of application or any nursing facility, which for a period of 30 or more days subsequent to the date of application, has not been licensed as a Colorado nursing facility.

#### 8.430.3 NEW NURSING FACILITY CERTIFICATION

8.430.3.A. Procedures and Criteria for Medicaid Certification of a New Nursing Facility

1. The burden of demonstrating the need for a new Medicaid facility shall be entirely on the applicant.

### **Letter of Intent**

2. The applicant for Medicaid certification of a new nursing facility shall:	•
a. File a letter of intent to apply for certification with the Department in January or July of the year in which the application will be filed. The letter of intent shall specify:	Submitted 1/26/12
i) The person or corporation who will submit the application.	Loveland Elder Greenhouse Homes for Life Enrichment
ii) The proposed service area.	Loveland
iii) The number of beds in the new facility for which Medicaid approval will be requested.	60

# STATE OF

John W. Hickenlooper, Governor Christopher E. Urbina, MD, MPH **Executive Director and Chief Medical Officer** 

Dedicated to protecting and improving the health and environment of the people of Colorado

4300 Cherry Creek Dr. S. Denver, Colorado 80246-1530 Phone (303) 692-2000

Laboratory Services Division 8100 Lowry Blvd.

Denver, Colorado 80230-6928

Located in Glendale, Colorado (303) 692-3090

http://www.cdphe.state.co.us



and Environment

### LETTER OF INTENT REQUEST FOR A HEALTH FACILITY/AGENCY LICENSE APPLICATION AND/OR CERTIFICATION\* PACKET

Notice to Requestor and/or Applicant: Completion of this "Letter of Intent" in no way obligates the requestor or applicant to open a health facility/agency or to modify a facility/agency license. The form does allow the Division to track the number of proposed facilities, efficiently handle application requests and changes and to eliminate unnecessary mailings of information packets. Please complete the following form to the best of your knowledge. If a question is not applicable or is unknown at the time of request, please write "N/A" or "Unknown" where appropriate. When completed, fax form to 303-753-6214 attention LOI, send via email to HFLOI@cdphe.state.co.us or mail to: LOI, CDPHE/Health Facilities #A-2, 4300 Cherry Creek Dr. So., Denver, CO 80246. Your packet will be mailed shortly. Thank you for your inquiry.

### ITYPE OF APPLICATION REQUESTED (Check all that apply)

Living  Add/Change Secured Unit/Long Change of Licensed Initial Certification*	X
Initial Contification*	X
ridd Change Sceared Chine 2018	
Term Care Facility/Agency Name	
Change of Administrator/Assisted Change of Location/Address Initial License	X
Living	
Change of Beds: Change of Ownership Other	
Construction/Remodel*** (If this box is checked you will	
Occupying previously need to provide an	
unlicensed space*** organizational chart, pre and	İ
Utilizing only currently licensed post transaction, showing % of	
space ownership for each party)	
Change of Licensure Type**	
	!

General Hospitals Only (this section does not include Psychiatric or Rehabilitation Hospitals: Please circle one

A.) Same Campus - Addition of services under hospital license

B.) Addition of Off-Campus location(s)

*Certification is the Federal process that verifies a health care facility/agency is able to meet the standards of care required reimbursement.  **For a complete list of facility/agency types, please refer to www.healthfacilities.info.	for Medicare/Medicaid
Current Facility/Agency Type: N/A	
**Proposed Facility/Agency Type based on types of services offered: Long-Term Care Facility	H
(see http://www.cdphe.state.co.us/hf/lic_cert.pdf for a list of licensed facility/agency types	s, see
http://www.cdphe.state.co.us/regulations/healthfacilities/index.html for a list of facilities and correspond	iding regulations)
***For any construction on the following facility/agency types:	
Acute Treatment Units, Ambulatory Surgical Centers, Assisted Living Residence, Birth Centers, Comm	unity Clinics and
Community Clinic Emergency Centers, Community Residential Homes For Persons With Developmenta	al Disabilities,
Convalescent Centers, Dialysis Treatment Clinics, General Hospitals, Hospice, Hospital Units, Intermed	iate Care Facility For
Persons With Developmental Disabilities, Long Term Care Facilities, Maternity Hospitals, Psychiatric H	Iospitals.
Rehabilitation Centers please refer to <a href="http://www.cdphe.state.co.us/hf/LSCrequirements/">http://www.cdphe.state.co.us/hf/LSCrequirements/</a> for additional information of the state of the st	nation under the
Rehabilitation Centers please refer to http://www.cupile.state.co.us/mi/LScrequirements/ for additional information of the control of the con	dditional instructions
Architectural Requirements and Plan Review. You will need to choose the pertinent facility/agency type for ac	duttional instructions.
	/07/0010
Applicant or Requestor's Name: Nancy Fox Date of Request: 1	/2//2012
Applicant or Requestor's Title/Agency: Chief Life Enhancement Officer/Piñon Management	

Mailing Address for Application: 121  Attn: Nancy Fox			Zip Code: <u>80228</u>	
Telephone Number: <u>303-987-3088</u>			,	
Do you wish to receive your application			, (NO)	
f yes, please provide the appropriate E	Email address: _nfox@pin	onmgt.com		
Current Facility/Agency Certification l Current Facility/Agency License Num Current Facility/Agency Name as licer	ber issued by the Division:	N/A		
Proposed Facility/Agency Name as it is (Please note, facility/agency names m	is to be licensed: Lov ust be approved by the Div	eland Elder Green Housision prior to registrate	use Homes for Life Enricion with the Secretary of	hment State's Office)
Proposed Opening Date <u>Unknown</u>	_Proposed Closing Date N	V/A Propo	sed Date of Change: N/	Α
Current Owner of the Business: N/A		·		. ,
<b>Proposed</b> Owner of the Business:  Loveland Elder Green House I	Homes for Life Enrichment	- Not-for-profit		· · · · · · · · · · · · · · · · · · ·
Current Facility/Agency Location:	N/A			 
City: N/A Cou	nty:N/A	Zip Code:N/A_		
Proposed Facility/Agency Location:				Sec. 1
_	nty: Larimer			
Current # of Private Pay Beds: N/A				'A
<b>Proposed</b> # of Private Pay Beds: 60				
Current # of Secured Unit Beds: N/A		_	Unit Beds <u>Unknown</u>	
<b>Proposed</b> list of services to be offered				
House® model with housing provided				
each other and licensed as one facility				
Piñon Management and share a campu	<del></del>			ithority of the City
Additional Comments/Notes: Lovela	nd. http://www.mirasolse	niorcommunity.com/ir	ndex.htm	
	<u>.</u>			•
The following	items are to be completed by C	CDPHE/HF personnel. Do	not write below this line.	
Health Facilities and Emergency Medic Assistance Line at (303) 692-2836 Weel		22-2800 or direct LICEN	ISING questions to the Lic	ensure Customer
Date Application/Info Mailed:/_	/ Attestation Mailed: _	/ By:	Entered:/_/_	By:
Packet Code(				

### Application

- b. No later than five months from the date of filing the letter of intent, the applicant shall submit a complete application. The application shall include:
  - i) The name, address and phone number of the person or corporation requesting approval for the new nursing facility.

The Corporation requesting approval for the new nursing facility is:

Loveland Elder Green House Homes for Life Enrichment – a newly formed not-for-profit entity formed by the Housing Authority of the City of Loveland (HACOL) solely for this project. The Housing Authority Board of Commissioners will control the Board of the Loveland Elder Green House Homes for Life Enrichment and the Housing Authority of the City of Loveland will also be the financial guarantor.

Address:

375 W. 37th St., Suite 200

Loveland, CO 80538

Phone:

970-667-3232

Fax:

970-667-2860

Contact:

Sam Betters, CEO

Email:

sbett@lovelandhsg.org



Document must be filed electronically. Paper documents will not be accepted. Document processing fee
Fees & forms/cover sheets are subject to change.
To access other information or print copies of filed documents, visit <a href="https://www.sos.state.co.us">www.sos.state.co.us</a> and select Business.

Colorado Secretary of State

Date and Time: 05/09/2012 03:10 PM

ID Number: 20111405726

\$25.00 Document number: 20121262821

Amount Paid: \$25.00

ABOVE SPACE FOR OFFICE USE ONLY

#### **Articles of Amendment**

filed pursuant to §7-90-301, et seq. and §7-130-105 of the Colorado Revised Statutes (C.R.S.)

ID number	20111405726		
1. Entity name	Loveland Elder Green House Homes for Life Enrichment, a Colorado Nonprofit Corporation		
1. Zavity tianite	(If changing the name of the corporation, indicate name BEFORE the name change)		
2. New Entity name (if applicable)			
3. (If the following statement applies, adopt the	statement by marking the box and include an attachment.)		
4. If the nonprofit corporation's period of duration as amended is less than perpetual, state the date on which the period of duration expires	(mm/dd/yyyy)		
OR			
If the nonprofit corporation's period of	of duration as amended is perpetual, mark this box		
5. (Optional) Delayed effective date	(mm/dd/yyyy)		
	ed pursuant to other organic statutes such as title 12, C.R.S. If lude an attachment stating the additional information.		
Notice:			
acknowledgment of each individual causindividual's act and deed, or that the individual is person on whose behalf the individual is with the requirements of part 3 of article statutes, and that the individual in good for	the secretary of state for filing shall constitute the affirmation or ing such delivery, under penalties of perjury, that the document is the vidual in good faith believes the document is the act and deed of the causing the document to be delivered for filing, taken in conformity 90 of title 7, C.R.S., the constituent documents, and the organic faith believes the facts stated in the document are true and the s of that Part, the constituent documents, and the organic statutes.		
This perjury notice applies to each indivi	dual who causes this document to be delivered to the secretary of		

AMD\_NPC Page 1 of 2 Rev. 5/01/2010.

state, whether or not such individual is named in the document as one who has caused it to be delivered.

7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing

be delivered for filing	Matsunaka	Stanley	T.		
	(Last)	. (First)	(.	Middle)	(Suffix)
	2881 N. Monroe Av	enue/			
	Suite 1 (Street name and number or Post Office Box information)				
	Loveland	CO	80538	} .	
	(City)	(State) United		Postal/Zip Code,	)
	(Province – if applicable)	(Country -	if not US)		
(The document need not state the true name a of any additional individuals causing the doc				ite the name and attachment stat	
I . I I C l. i li . i de ala l					

#### Disclaimer:

This form, and any related instructions, are not intended to provide legal, business or tax advice, and are offered as a public service without representation or warranty. While this form is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form. Questions should be addressed to the user's attorney.

### AMENDED ARTICLES OF INCORPORATION OF

# LOVELAND ELDER GREEN HOUSE HOME FOR LIFE ENRICHMENT, A COLORADO NONPROFIT CORPORATION

#### KNOW ALL MEN BY THESE PRESENTS:

That pursuant to ARTICLE XIV of the Articles of Incorporation filed with the Colorado Secretary of State on July 18, 2011, the undersigned incorporator, being a natural person of the age of 21 years or more, desiring to form a nonprofit Corporation under the provisions of the Colorado Nonprofit Corporation Act, Articles 20 through 29, inclusive, of Chapter 7 of the Colorado Revised Statutes (1973), as they may be amended from time to time, does adopt, execute, acknowledge and deliver to the Secretary of State of Colorado the following Amended Articles of Incorporation:

## ARTICLE I

The name of the Corporation shall be Loveland Elder Green House Homes for Life Enrichment, a Colorado nonprofit corporation, hereinafter called the "Corporation."

## ARTICLE II PERIOD OF DURATION

This Corporation shall exist perpetually unless dissolved according to law.

# ARTICLE III OBJECTS AND PURPOSES

This Corporation is organized as a nonprofit corporation incorporated under the laws of the State of Colorado and is organized exclusively for charitable and educational purposes, including but not necessarily limited to providing life enrichment, housing and skilled nursing services to frail elder citizens, especially those of lower incomes.

### ARTICLE IV POWERS

In furtherance of the preceding objects and purposes, and subject to the restrictions contained in these Amended Articles of Incorporation, the Corporation shall have and may exercise all of the rights, powers, privileges, and immunities now or subsequently conferred upon nonprofit corporations organized under the laws of the State of Colorado.

### ARTICLE V RESTRICTIONS OF POWERS

Notwithstanding any other provisions of these Amended Articles of Incorporation, the powers of the Corporation are restricted as follows:

- (a) The Corporation shall not conduct or carry on any activities not permitted to be conducted or carried on (a) by an organization exempt from federal income taxation under Section 501(c)(3) of the Internal Revenue Code, or (b) by an organization, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or the corresponding sections of any future federal tax code.
- (b) No-part of the net earnings of the Corporation shall inure to the benefit of or be distributable to any director of officer of the Corporation or any private individual whatsoever except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payment of expenses incurred and distributions in furtherance of its objects and purposes. No director or officer of the Corporation or any private individual whatsoever shall be entitled to share in the distribution of any of the assets on dissolution of the Corporation.
- (c) No substantial part of the Corporation activities shall be the carrying on of propaganda or otherwise attempting to influence legislation, and the Corporation shall not participate or intervene in (including the publication or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

#### ARTICLE VI CAPITAL STOCK AND MEMBERSHIP

- (a) The Corporation shall neither have nor issue any capital stock.
- (b) The classes of members and qualifications and rights of members shall be as set forth from time to time in the Bylaws of the Corporation.

#### ARTICLE VII BOARD OF DIRECTORS

The affairs and management of the Corporation shall be under the control of a Board of Directors. The number, terms, and qualifications of the Directors shall be as set forth from time to time by the Bylaws of the Corporation. The names of the persons who shall serve as the initial Directors until the first annual meeting of the Board of Directors or until their successors are elected and shall qualify are:

BLABATE

OFFICE	NAIVIE
Chairman	David Eikner
Vice Chairman	Marlyn Tandy
Treasurer	Nicole Reeves
Secretary	Samuel G. Betters

The Board of Commissioners of the Housing Authority of the City of Loveland shall appoint and remove the members of the Board of Directors of the Corporation. The Board of Commissioners may elect as many as nine (9) members to the Board of Directors of the Corporation, five of whom are members of the Board of Commissioners; and four of whom are not members of the Board of Commissioners. The term "Board of Commissioners" shall mean

OFFICE

and refer to the members of the Board of Commissioners of the Housing Authority of the City of Loveland. The terms "Board of Directors" and "Directors" shall mean and refer to the members of the Board of Directors of the Corporation.

The Board of Directors of the Corporation may be increased or decreased at any time by adoption of or amendment to the Bylaws, but no decrease shall have the effect of shortening the term of any incumbent Director. In the absence of any provision in the Bylaws fixing the number of Directors, the number shall be the same as provided in these Amended Articles of Incorporation.

## ARTICLE VIII LIMITED LIABILITY OF DIRECTORS

The Directors, Officers and employees of the Corporation shall not, by virtue of such status, be liable on the obligations of the Corporation. The personal liability of the Directors, Officers and Members are limited to the greatest extent provided by Colorado law.

# ARTICLE IX INDEMNIFICATION

The Corporation shall indemnify its Directors and Officers to the full extent permitted by Colorado law.

### ARTICLE X BYLAWS

The initial Bylaws of the Corporation will be adopted by the Board of Directors. The Board of Directors may from time to time alter, amend or repeal the Bylaws.

### ARTICLE XI OFFICERS

The Corporation shall have such officers selected from among their Directors as may from time to time be prescribed by the Bylaws. Their terms of office and manner of their designation or selection shall be determined according to the Bylaws in effect. The names of the persons who shall serve as the initial officers of the Corporation until the first annual meeting of the Board of Directors and until their successors are elected and shall qualify are:

NAME.

OFFICE	IVAIVE
Chairman	David Eikner
Vice Chairman	Marlyn Tandy
Treasurer	Nicole Reeves
Secretary	Samuel G. Betters

OFFICE

### ARTICLE XII REGISTERED OFFICE AND REGISTERED AGENT

The principal office for the transaction of the business of the Corporation in the State of Colorado shall be in Larimer County. The address of the initial registered office of the Corporation-shall be at 375 W 37th Street, Suite 200, Toveland, CO 80538, and the name of the initial registered agent is Stanley T. Matsunaka whose address is P.O. Box 675, Loveland, CO 80539. Either the registered office or the registered agent may be changed in the manner provided by law.

### ARTICLE XIII NONDISCRIMINATORY POLICY

The Corporation shall make its services, facilities and programs available to all persons regardless of race, color, creed, national origin, physical handicap, sex, or sexual orientation and the Corporation shall not discriminate in any way against any person on the basis of race, color, creed, national origin, physical handicap, sex, or sexual orientation.

### ARTICLE XIV CHANGE IN ARTICLES OF INCORPORATION

The Board of Directors of this Corporation shall have the right from time to time on the vote of two-thirds (2/3) of the Directors in office, and not otherwise, to dissolve the Corporation, or shall have the right from time to time on the vote of fifty-one percent (51%) of the Directors in office, to amend, alter, change, or repeal any provision in these Amended Articles of Incorporation in the manner now or subsequently prescribed by statute.

# ARTICLE XV DISSOLUTION

Upon the dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all liabilities, dispose of all of the assets of the Corporation exclusively in such a manner or to such organization or organizations organized and operated exclusively for charitable, scientific, or educational purposes as shall at the time qualify under \$501(c)(3) of the Internal Revenue Code, as amended, as the Board of Directors shall determine.

### ARTICLE XVI INTERNAL REVENUE CODE

All reference herein to the Internal Revenue Code shall be deemed to mean the Internal Revenue Code of 1954, as amended, as it presently is constituted, as it may be amended, or any successor statute of similar purpose.

# ARTICLE XVII INCORPORATOR

The name and address of the incorporator is as follows: Samuel G. Betters, 375 W. 37<sup>th</sup> Street, Suite 200, Loveland, CO 80538.

### ARTICLE XVIII DATE OF EXISTENCE

Pursuant to the provisions of §7-21-104 C.R.S. 1973, as amended, the Corporation began its existence by acceptance by the Colorado Secretary of State, of the Articles of Incorporation dated July 18, 2011.

IN WITNESS WHEREOF, the above-named incorporator signed these Amended Articles of Incorporation on May 8, 2012.

Samuel G. Betters, Secretary

ii) The total number of proposed beds and the number of beds requested for Medicaid certification.

The total number of proposed beds = 60

The total number of beds requested for Medicaid certification = 60



iii) A description of the service area and justification that the service area can be reasonably served by the new nursing facility.

#### Service Area Definition – Please also see the included Market Study

### **Mirasol Senior Community**

Mirasol Senior Living Community is located in Loveland, Colorado, at the foot of the Rocky Mountains. As one of Loveland's most successful retirement communities, Mirasol offers adults aged 55+ a combination of independent living choices with a wide variety of amenities, high-quality services, and a multitude of activities.

The long-range vision for this 25-acre parcel involves affordable rental units, market-rate duplex rental units, and homeownership opportunities. Programs and services designed to assist residents with transportation, social and educational needs are included. At the heart of the community is a 5,600-foot Event Center which hosts Mirasol service staff, a coffee bistro (including daily continental breakfast), barber/beauty shop, business center, exercise room, complete conference room, massage services and event room with a 72" television. The Event Center and its staff offer all residents of the community classes (example, yoga, pilates, nutrition, cooking, crafts), group transportation to local vendors and banks, weekly community outings, parties, and volunteer opportunities. All residents of the community pay community dues which are used to support these services and transportation. Presently, the community consists of 49 affordable apartment units, 12 market rate duplex units, 5 affordable rate duplex units and 15 homeownership homes. Occupancy is currently holding at 100% in all areas.

After the winter months of 2012, Mirasol will hold a groundbreaking in April for the construction of a second affordable rental apartment building which will offer 60 one- and two-bedroom apartment homes. At this point in time, the Housing Authority of the City of Loveland has a waitlist of over 200 applicants for the affordable apartment buildings that are in place or planned to be developed within the next year.

#### Primary Market Area

The proposed new skilled nursing community, with 60 beds, will service not only its primary target community, the Mirasol campus, providing the residents of Mirasol the opportunity to age in their own community despite any physical or mental challenges they may experience, but will also extend its service area to a broader geographic area as explained below. This extension of service area will bring the benefit of a new model of care to a larger audience, benefitting the community of Loveland and parts of Larimer County.

The defined primary market area (PMA) is comprised of the southeast portion of Larimer County. The southern and eastern boundaries of the PMA follow Larimer County's borders with Boulder and Weld Counties, respectively. The PMA extends about 14 miles east to west and 18 miles north to south, reaching the Flatiron Reservoir on the west and Horsetooth Reservoir to the north.