



Home Care Allowance

Background

- The Home Care Allowance (HCA) program is a non-entitlement program providing case assistance to older and disabled individuals.
- The cash is to be used to pay for services provided by a home care provider.
- The cash helps clients remain in their home while getting services to assist in their daily lives such as bathing, dressing, transfers, meal preparation, laundry, money management, appointment management, and shopping.

Service Providers

- The Single Entry Point (SEP) agencies perform case management duties including initial functional assessments, intake, screening, referrals, six-month reviews, responding to client questions, developing and monitoring care plans, reviewing service agreements, and conducting annual functional reassessments.

Eligible Persons

- Eligibility for HCA is based on financial need and functional capacity.
- Financial eligibility is determined by the client's income and resources.
- To be financially eligible for HCA an individual must be receiving at least \$1 of SSI; or, meet all eligibility criteria required for Aid to the Needy Disabled – State Only (AND-SO) program; or, have been receiving both Old Age Pension (OAP) benefits and HCA as of December 31, 2013 and remain **continuously** eligible for both benefits.
- Functional capacity is determined by a standard assessment of the client's capacity to complete Activities of Daily living (ADLs) and Instrumental Activities of Daily living (IADLs) and the frequency that assistance is needed in completing those activities.

Program Monitoring & Evaluation

- The State monitors and evaluates program performance, performs onsite program evaluations, and provides training, technical assistance, and consultation to county departments and the SEPs.
- Counties are responsible for processing the application and receive a copy of the assessments from SEPs in order to determine financial eligibility and the amount of the assistance. Counties retain case records, respond to client questions, and update any changes to the client's case in the Colorado Benefits Management System (CBMS).
- Ongoing monitoring/oversight includes monthly and quarterly reporting and invoicing tools to ensure that all costs are allowable, appropriate, and keep within the contracted budget for the local area contractor.

Funding

- The funding for the HCA program comes from General Fund and county match. The state contributes 95% and the counties are required to fund the remaining 5%.

