



[Nursing Facility Diversion Projects | Department of Health Care Policy and Financing](#)

[Medicaid Transition to Community Request Form](#)

Skilled Nursing Facility (SNF) Social Work Office Hours with HCPF

- Aug 12, 2026 01:00 PM
- Oct 14, 2026 01:00 PM
- Dec 9, 2026 01:00 PM
- Feb 10, 2027 01:00 PM
- [Meeting Registration - Zoom](#)

I have created a form to help document an evaluation of capacity. See below

[Physician_Statement_Decision_Making_Capacity_1Download](#)

OPT-OUT REASONS

Date

I, (Doctorate Level Provider's Name), have personally assessed (member name), and I have deemed them to have significant cognitive decline or incapacitation to where they can't make an educated choice.

(Medical Provider Name)
(Medical Provider Signature)



Anyone who is **on active hospice care** can be opted out due to not disrupting end-of-life services. If residents in hospice want to transition back home, the TransitionCare Coordination (TCA) can expedite their processing of the transition.



Anyone who has been assessed by a doctorate-level provider can be opted out due to having a **significant cognitive decline or if they have been deemed incapacitated**. This can be verified by the provider writing a letter with the resident(s) name listed. A sample letter has been provided. They can also verify a previous progress note, completed assessment with the results written in the margin & signed by the provider, as neurocognitive disorders typically are not expected to improve.



Legal Guardians or Conservators can also opt residents from receiving this education. The In-Reach Counselors should be verifying the paperwork and will need to speak directly to the guardian to verify that they wish to opt the member out.

[Ethics Committee 6-6-26Download](#)

[Settlement Agreement - U.S. v. ColoradoDownload](#)