

~~You received Colbert Class Member Dementia Review~~

The decision made on your case is found on the page titled:
Notice of Colbert Dementia Review Outcome.

An explanation of that decision is found on the page titled:
Colbert Dementia Review Outcome Explanation.

If you do not agree with the Dementia Review decision, you have options.

You have the right to ask for a Fair Hearing

- A fair hearing is a chance to tell a hearing officer why you disagree with the Dementia Review decision. *This action is not required* but is your State and Federal right.
- The hearing officer will hear all evidence and the arguments submitted during the appeal of your case.
- You must request a fair hearing within 60-days from the *Date of Determination* found on the *Notice of Colbert Dementia Review Outcome*.
- You can find more information about the fair hearing process on the next page.

You can take no action.

- The decision on the *Notice of Colbert Dementia Review Outcome* will stay the same.

If you have questions, contact the Maximus Illinois helpdesk:

Phone: 833.727.7745

Email: ILDementiaReview@maximus.com

Fax: 877.431.9568

To Request a Fair Hearing

You have the right to ask for a fair hearing if you disagree with the Colbert Dementia Review decision and you make the request within 60 calendar days of the Date of Determination found on the Notice of Colbert Dementia Review Outcome.

A fair hearing is a chance for you to have the Illinois Department of Human Services (DHS) Bureau of Administrative Hearings (BAH) review the *Colbert Dementia Review* decision with which you disagree. This is sometimes called an *appeal*.

You (or someone you choose) have the right to ask for an expedited fair hearing if your life, health or ability to attain, maintain, or regain maximum function are in jeopardy.

You also have the right to look at your case file, electronic account and all documents and records to be used by the State, local agency, and skilled or non-skilled nursing facility at a reasonable time before the date of hearing and during the hearing.

During the hearing:

- An impartial hearing officer will listen to the facts of your case, consider the evidence that applies to your situation and then decide if the *Colbert Dementia Review* decision was correct.
- You may represent yourself or authorize someone else, such as a lawyer, relative, friend, or other spokesperson. You can also bring witnesses.
- You (or your authorized representative) will have an opportunity to present your argument without undue interference, question or refute evidence or testimony, including confronting or cross-examining witnesses (Code of Federal Regulations at 42 CFR § 431.242: Procedural rights)

To request a Fair Hearing complete the Fair Hearing Request Form (on the next page), within 60 days of the date on the *Date of Determination* found on the *Notice of Colbert Dementia Review Outcome* and send it to Maximus by fax, email, mail or phone:

Maximus Fax: 877.431.9568

Maximus Email: ILDementiaReview@maximus.com

Maximus Mail:

Attn: Maximus Clinical Services: Illinois
2555 Meridian Blvd.
Suite 350
Franklin, TN 37067-6372

You can also call Maximus at 833.727.7745 and we will help you submit the Fair Hearing form and give you a copy for your records. Maximus is available to answer questions about the *Colbert Dementia Review* decision and your and Fair Hearing options.

What to Expect Next

Once you have submitted a fair hearing request form:

- Maximus will give your fair hearing request form to the Illinois Department of Human Services (DHS) *within one business day*.
- *Within ten business days of receiving the request*, the DHS will:
 - Conduct an informal review of your case and reverse, modify, or leave the decision unchanged and
 - Provide, in writing, the outcome of their informal review to you, your representative, your facility/provider, and the DHS.
- If the decision is unchanged after the informal review, the DHS will schedule a state fair hearing at the first available opportunity, and you will receive a Hearing Schedule Letter with the date and time of the hearing.
- A decision on the appeal will be given to interested parties with 60 days from the date the appeal was requested unless additional time is required for proper disposition.
- You will receive a Final Administrative Decision on your appeal and appropriate actions will be taken to implement that decision within 90 days from the time you requested the appeal unless you request a delay of your hearing.
- If the determination in this notice would suspend, terminate or reduce services or benefits *you are already receiving*, those benefits or services will continue until your appeal is decided.

This information is available in other formats/languages by contacting Maximus.

**Colbert Dementia Review
Fair Hearing Request Form**

Name:

Email:

Address:

Telephone No.

(____)_____

Date of Birth: ____/____/____

Individual ID Number:

**You can find the Assessment ID
(AID) number on the page titled Notice
of Colbert Dementia Review Outcome*

I do not agree with the *Colbert Dementia Review* decision taken on my case. I am
requesting a fair hearing because:

Use the back of this form or attach additional pages if you need more room to write.

X _____

Signature

Date

Fax this request to:

Maximus Clinical
Services/Illinois
877.431.9568

Mail this form to:

Maximus Clinical
Services/Illinois
2555 Meridian Blvd.
Suite 350
Franklin, TN. 37067

**Call or email the
Maximus helpdesk:**

833.727.7745
ILDementiaReview@maximus.com

Illinois Community Resources

Illinois Department of Aging (IDOA)

Programs and services for persons 60 years of age and older and their caregivers (available Mon-Fri: 8:30am -5pm).

Senior Helpline: 1-800-252-8966 or 711 (for Telecommunications Relay Services for speech or hearing needs)

Division of Developmental Disabilities (DDD)

Service options and eligibility determinations for persons with qualifying developmental disabilities.

**1- 888-337-5267 [Voice] or
1-866-376-8446 [TTY]**

Division of Mental Health (DMH)

Mental health assessment and services for adults diagnosed with a mental illness or emotional disturbance and an impaired level of functioning.

1- 800-843-6154 [Voice] or 1-866-324-5553 [TTY]

Division of Substance Use Prevention & Recovery (SUPR)

Treatment services for alcoholism & addiction.

1- 866-213-0548 [Voice] or 1-866-843-7344 [TTY]

Division of Rehabilitation Services (DRS)

For those with disabilities and their families

1- 877-581-3690 [Voice] or 1-866-324-5553 [TTY]

Illinois Housing Search

Information about rental properties and help to find housing (available Mon-Fri, 8:00 am - 7:00pm CDT)

Call: 1-877-428-8844 or 711 (TTY)

Email: info@socialserve.com

Website: www.ILHousingSearch.org

Illinois Department of Human Services (IDHS) Helpline

Information about Illinois housing programs

1-800-843-6154 (Voice) or 1-866-324-5553 (TTY)

Experiencing or at Risk of Homelessness?

Information about homelessness resources:

<https://housingactionil.org/get-help/resources-homeless/>

Cook County: Comprehensive Class Member Program Information

Adults in Cook County SNFs or Illinois SMHRFs who can get Medicaid and who may be able to live in the community with the right supports and services.

IDHS Williams/Colbert hotline (312) 793-7205 or

Email: DHS.ColbertDecree@Illinois.gov or

DHS.WilliamsConsentDecree@Illinois.gov

Application for Benefits Eligibility (ABE)

Apply for cash, SNAP or medical assistance

ABE hotline: 1-800-843-6154

711 (Telecommunications Relay Services for speech or hearing needs)

Ombudsman Program

Advocacy to protect rights and improve the care of older persons and adults with disabilities who receive services in a variety of settings

**Senior Helpline at 1-800-252-8966 or
711 (Telecommunications Relay Services for speech or hearing needs)**

Illinois Warm Line

Phone based, pre-crisis, peer support for mental health and/or substance use challenges.

Call: 866-359-7953

Veterans' Crisis Line

For veterans in crisis or those concerned about a vet. Open to all service members, including the National Guard and Reserves. Enrollment in VA benefits is not required.

1-800-273-8255 or Text: 838255

211 (*dial 211 from any phone)

Health and human service assistance for non-emergency crisis and everyday needs (free, anonymous and confidential).

Illinois Call4Calm Text Line

Emotional support for you or a loved one who is dealing with stress related to the COVID-19 pandemic.

For English, text: TALK to 552020

For Spanish, text: HABLAR to 552020

Suicide and Crisis Lifeline

Suicide prevention network serving those in crisis or emotional distress (free, confidential, available 24/7).

Dial 988 or text 988 or chat with Lifeline here:

www.988lifeline.org