

Testimony of

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Select Committee on Aging

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Good morning and thank you for this opportunity to comment on a number of bills before you today.

SB 156: AAC a Nursing Home Report Card

The Commission supports efforts to educate consumers about facility quality and all long-term care options to help them make informed decisions. The federal Centers for Medicare and Medicaid Services (CMS) has an online nursing home report card containing information about nursing facilities in Connecticut and the rest of the country. The CMS report card includes, among other indicators: hours of staffing per day, deficiencies found in recent inspections, fire inspection information and quality indicators (i.e., percent of patients with pressure sores). The Commission recommends that Connecticut prominently link the CMS report card on the state's Long-Term Care website, as well as prominently post the Department of Public Health's regulatory action orders on the same site (they are already accessible from the DPH website). As proposed in SB 156, the state should conduct an education campaign to publicize the availability of this information. This proposal is in line with the recommendation from the Long-Term Care Needs Assessment to "address the education and information needs of the Connecticut public."

Some states have created their own report cards with information beyond the CMS report card. While some of these efforts may be worthwhile, we believe Connecticut should first maximize the use of existing information, to allow our state to make careful decisions about which additional measures should be included for comparison. The collecting and posting of resident satisfaction measures, as proposed in SB 156, may be costly, difficult to collect and of modest value. For example, nursing home residents may feel pressured to respond positively if facility staff are nearby during the interview or have access to the resident input.



Connecticut can and should provide residents with comprehensive, clear information to help families make decisions about all the long-term care services and supports options. The Commission also believes that making this information publicly available and accessible will incent providers to take action to improve quality. Ideally, these efforts would take place in conjunction with affirmative incentives to promote a “culture change” promoting and honoring person-centered care in nursing facilities.

SB 215: AAC Increased Access to the State’s Assisted Living Pilot Projects

The Commission on Aging supports this proposal as a critical component of providing affordable, accessible, appropriate housing for all individuals with long-term care needs. Connecticut’s assisted living pilot projects provide options to those who may otherwise have inappropriately entered nursing facilities. As illustrated in Connecticut’s recently completed Long-Term Care Needs Assessment, 80% of those surveyed (approximately 7,000 CT residents) reported that they want to remain in their homes and communities. Assisted living honors those wishes and helps people remain in their communities, receiving the services they need to live high quality lives. Making assisted living more affordable helps Connecticut meet its “rebalancing” goals, as outlined in the state’s Long-Term Care Plan.

SB 378: AA Reducing the Age for Eligibility in the Connecticut Home Care Program for the Elderly

The Commission supports this initiative to expand the Connecticut Home Care Program for Elders to persons over the age of sixty (instead of 65).

The state mandated Long-Term Care Needs Assessment based its recommendations on two guiding principles: creating parity among age groups, across disabilities and among programs, to serve people based on need rather than on age or type of disability; and, breaking down silos that exist within and among state agencies and programs.

Clearly, many people under age 65 often have the same long-term care needs, but sadly the same right or access to services does not exist in CT. Specifically, many people do not qualify for the Connecticut Home Care Program for Elders because they are too young. For example, adults with Multiple Sclerosis often require assistance with daily activities, but do need or want institutionalization. In response to these concerns, Connecticut recently created a pilot home care program for persons with disabilities to mirror the Connecticut Home Care Program for Elders. Though well intentioned, these efforts further fragment the already complex system.

Instead, we recommend working toward serving individuals under the Home Care Program based on need regardless of age. Doing so would meet many of the recommendations of the Long-Term Care Needs Assessment, including providing “a broader range of community-based choices for long-term care supports” (recommendation #2) and fostering “flexibility in home care delivery” (recommendation #3).

SB 378 takes a step in the right direction by lowering the age limit for the Connecticut Home Care Program for Elders.

We also appreciate efforts, as proposed in this bill, to increase reimbursement to all providers of home care services. We recommend clarifying language to ensure that critical community providers such as adult day care and nutrition assistance are also included in any rate increases. Increased reimbursement is a critical component of ensuring that our home and community based services are available now and into the future.

SB 379: AAC the Provision of Personal Care Assistance Services Under the Connecticut Home Care Program for Elders

The Commission supports SB 379, which gives participants in the Connecticut Home Care Program for Elders the opportunity to hire and manage their own personal care attendants (PCAs). This proposal would enhance the ability of individuals to live in the community with dignity and the appropriate services. Additionally, it could help fill gaps created by a shortage of home health aides and other home-based workers, which is projected to worsen over time.

In 2000, Connecticut created the Personal Care Assistance Pilot program. This pilot program has demonstrated that many individuals with long-term care needs are able to successfully manage their own care. The Connecticut General Assembly has seen fit to expand this program over the years.

This bill seeks to provide these same services under the Home Care Program. In essence, this would eliminate the need for a continuing pilot program. Like other bills this Committee is hearing today, this proposal is directly in line with recommendations from the Long-Term Care Needs Assessment, to foster flexibility in home care delivery and increase consumer choice. Additionally, it may create a more seamless system, providing for easier understanding on the part of consumers.

We urge your support.

***SB 385: AAC Nursing Home Staffing Levels and
SB 388: AAC Direct Care Provider Staffing Levels in Nursing Homes***

The Commission on Aging supports all efforts to improve the quality of care provided in nursing homes. Numerous national studies have confirmed the importance of staffing in providing high quality care to nursing home residents. Working with other advocates, the Commission recommends increasing minimum staffing levels in our state. Specifically, we would like to see our state switch to assessing staffing based on staff-patient ratios, instead of hours of care per resident per day. The levels proposed in SB 388 would meet the standards proposed by many national experts.

We also urge the Committee, to remain cognizant of the very real workforce shortage issues in our state. In fact, from 2005-2025, the demand for long-term care is expected to increase by 30%. Meanwhile, the number of people aged 21-64—generally, those who are working—is actually expected to decrease by 2%.

Over the next ten to fifteen years, Connecticut is expected to face one of the worst nursing shortages in the nation, and that shortage is expected to reach crisis proportions quickly: already short about 10,000 nurses, by 2020 we'll be short 22,000 nurses, a 57% shortage rate.

This increase in need is not restricted to nurses: Connecticut's Department of Labor projects an enormous increase from 2004 to 2014 in the need for nursing aides and orderlies (9% increase), respiratory therapists (14% increase), physical therapists (26% increase) and other occupations providing long term care.

Efforts at the state level have established and expanded nursing faculty incentive programs, established loan forgiveness for certain nursing students and extended licensure to more individuals. Additional coordinated efforts among the K-12 schools, colleges and universities, and hospitals and other health care settings are needed to recruit more individuals into direct care fields.

We also must make a concerted effort towards better retention of workers. The Commission on Aging has partnered with other state agencies on an initiative called "Redefining Retirement Years." By 2010, twenty percent of Connecticut's workforce will be over the age of 55. Providing flexibility in workplace policies and practices will enable and encourage employees who want to continue working to do so, better positioning Connecticut to offer the full range of long term care services that individuals will need, now and into the future.

Actively working as a state to promote health care careers is a critical component to efforts to improve staffing levels. We urge your support of these initiatives.

Property Tax Reform Proposals: SB 184, SB 380, HB 5167, HB 5168, HB 5572, HB 5573, HB 5574, HB 5575

The Commission, with the support of this committee, has recently completed and published a report entitled Property Tax Relief for Older Adults: A Profile of Connecticut's Local Programs. The goal of this research project was to inventory the local property tax programs being offered throughout the state. The research process creating this report involved rigorous and extensive work in order to get a complete inventory of all the local programs that have been set up around Connecticut. Surveys were sent out to every tax assessor in the state and we were pleased to have a response rate of 93% with only 11 non-responding towns.

Generally, what the Commission found was a lot of confusion among residents, assessors, and governing bodies trying to implement and modify programs. ***There are no two towns in the state of Connecticut that have established and implemented the same exact local elderly property tax relief program.*** Eligibility requirements such as age, assets and income, residency, and marital status vary widely between towns; moving from one town to another with the assumption of receiving the same benefits is not possible.

Based on this research, the Commission recommends the following:

- Information about existing programs should be included in annual property tax bills, in language that is easy to read and to understand.
 - Variation in programs from town to town make knowing what programs are available and what homeowners are eligible for confusing. By inserting a summary with

program descriptions in the same mailing as the bill, residents can be educated without increasing the burden to municipalities.

- The state should collect information about property tax relief programs annually and make this information available to the public.
 - Information regarding programs and their usage is important to state agencies, policymakers and homeowners. By making this information available on the Department of Economic and Community Development (DECD) website along with property tax rates, housing costs and a link to the Long-Term Care website, a more complete guide to programs and services can be accessible to all in one place.
- Local elected officials and assessors should have access to more information to help them make decisions about property tax relief programs and options for implementing revaluation.
 - The Connecticut Commission on Aging, along with the Connecticut Conference of Municipalities and the Connecticut Association of Assessing Officers, could lead an education campaign, including forums held state-wide, to help officials learn about program options and to assist in creating an information-sharing system wherein assessors will be able to exchange ideas and information regarding data that informs decision-making.
- Property tax relief programs should be provided in an equitable manner to low and moderate income households.
- The state should examine the possibility of combining or streamlining existing property tax relief programs to achieve efficiency and for ease of use by residents.
 - On the survey, assessors were given room to comment on the tax structure of their towns. One assessor wrote the following, reflecting the true complexity of the issue and mirroring the thoughts of many other respondents: *“In addition, programs are complex, fragmented and confusing. Every town in the state has a different program, with different guidelines, eligibility criteria...As policymakers make changes to the tax system they must be mindful of the confusion that already exists as they attempt to provide relief.”*
- Existing programs and their use should be considered as part of comprehensive tax reform.

This committee is understandably interested in property tax relief programs and I encourage you to consider these recommendations as you move forward with your deliberations. Before considering modifications to current programs, the Commission urges this Committee to help move our state towards greater information sharing and education efforts.

The property tax relief report is available on our website, and hard copies can be provided as requested. We would be happy to work with you to craft legislation that supports the recommendations of this report.