



General Assembly

January Session, 2001

Raised Bill No. 6908

LCO No. 4371

Referred to Committee on Select Committee on Aging

Introduced by:
(AGE)

**AN ACT TO ALLOW PERSONS ON MEDICAID TO APPLY FOR
CONNPACE PRIOR TO TERMINATION OF MEDICAID BENEFITS.**

Be it enacted by the Senate and House of Representatives in General
Assembly convened:

1 Section 17b-492 of the general statutes is repealed and the following
2 is substituted in lieu thereof:

3 (a) Eligibility for participation in the program shall be limited to any
4 resident (1) who is sixty-five years of age or older or who is disabled,
5 (2) whose annual income, if unmarried, is less than thirteen thousand
6 eight hundred dollars, or whose annual income, if married, when
7 combined with that of [his] such resident's spouse is less than sixteen
8 thousand six hundred dollars, (3) who is not insured under a policy
9 which provides full or partial coverage for prescription drugs once a
10 deductible amount is met, and (4) on and after September 15, 1991,
11 who pays an annual twenty-five-dollar registration fee to the
12 Department of Social Services. On January 1, 1998, and annually
13 thereafter, the commissioner shall, by the adoption of regulations in
14 accordance with chapter 54, increase the income limits established
15 under this subsection over those of the previous fiscal year to reflect
16 the annual inflation adjustment in Social Security income, if any. Each

17 such adjustment shall be determined to the nearest one hundred
18 dollars.

19 (b) Payment for a prescription under the program shall be made
20 only if no other plan of insurance or assistance is available to an
21 eligible person for such prescription at the time of dispensing. The
22 pharmacy shall make reasonable efforts to ascertain the existence of
23 other insurance or assistance.

24 (c) Any eligible resident who (1) is insured under a policy [which]
25 or is a recipient of assistance under any government benefit program
26 that provides full or partial coverage for prescription drugs, and (2)
27 expects to exhaust such coverage, may apply to participate in the
28 program prior to the exhaustion of such coverage. Such application
29 shall be valid for the applicable income year. To be included in the
30 program, on or after the date the applicant exhausts such coverage,
31 [he] such applicant or [his] such applicant's designee shall notify the
32 department that such coverage is exhausted and, if required by the
33 department, shall submit evidence of exhaustion of coverage. Not later
34 than ten days after an eligible resident submits such evidence, [he]
35 such resident shall be included in the program. The program shall (A)
36 cover prescriptions that are not covered by any other plan of insurance
37 or assistance available to the eligible resident and that meet the
38 requirements of this chapter, and (B) retroactively cover such
39 prescriptions filled after or concurrently with the exhaustion of such
40 coverage. Nothing in this subsection shall be construed to prevent a
41 resident from applying to participate in the program as otherwise
42 permitted by this chapter and regulations adopted pursuant to this
43 chapter.

44 (d) The Commissioner of Social Services may adopt regulations in
45 accordance with the provisions of chapter 54 to implement the
46 provisions of subsection (c) of this section. Such regulations may
47 provide for the electronic transmission of relevant coverage
48 information between a pharmacist and the department or between an

