



House of Representatives

File No. 687

General Assembly

February Session, 2004

(Reprint of File No. 579)

Substitute House Bill No. 5007
As Amended by House
Amendment Schedule "A"

Approved by the Legislative Commissioner
April 30, 2004

**AN ACT ESTABLISHING A PILOT PROGRAM TO PROVIDE
PERSONAL CARE ASSISTANCE UNDER THE HOME-CARE
PROGRAM FOR THE ELDERLY.**

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

1 Section 1. (NEW) (*Effective July 1, 2004*) (a) Until June 30, 2006, the
2 Commissioner of Social Services shall, within available appropriations,
3 establish and operate a state-funded pilot program to allow no more
4 than one hundred persons who are sixty-five years of age or older and
5 meet the eligibility requirements of the Connecticut home-care
6 program for the elderly established under section 17b-342 of the
7 general statutes to receive personal care assistance as an alternative
8 covered service to home health services in order to avoid
9 institutionalization, provided the average annual cost to the state for
10 such personal care assistance for each recipient in the pilot program
11 does not exceed the average annual cost to the state for a recipient of
12 home health services provided under the program. Personal care
13 assistance under the program may be provided by nonspousal family
14 members of the recipient of services under the program.

15 (b) In conducting the pilot, the commissioner or the commissioner's
 16 agent (1) may require as a condition of participation that participants
 17 in the pilot program disclose if a personal care assistant is a
 18 nonspousal family member, (2) shall monitor the participants to ensure
 19 quality of services by the personal care assistants, and (3) shall ensure
 20 the cost-effectiveness of the program.

21 (c) The commissioner shall establish the maximum allowable rate to
 22 be paid for such services under the pilot program and may set a
 23 separate lower rate for nonspousal family members providing services
 24 as personal care assistants in the pilot program if deemed necessary by
 25 the commissioner to ensure cost effectiveness of the pilot program and
 26 to conduct the pilot program within available appropriations.

27 (d) Not later than January 1, 2006, the Commissioner of Social
 28 Services shall submit a report on the pilot program to the joint
 29 standing committees of the General Assembly having cognizance of
 30 matters relating to appropriations and human services and to the select
 31 committee of the General Assembly having cognizance of matters
 32 relating to aging. The report shall be submitted in accordance with
 33 section 11-4a of the general statutes.

34 Sec. 2. (NEW) (*Effective from passage*) The Commissioner of Social
 35 Services, pursuant to section 17b-342 of the general statutes, shall
 36 apply to the Centers for Medicaid and Medicare Services for a waiver
 37 to include in the Medicaid funded home-care program the pilot
 38 program established in section 1 of this act. In no event shall the
 39 number of pilot program participants exceed one hundred persons.

This act shall take effect as follows:	
Section 1	<i>July 1, 2004</i>
Sec. 2	<i>from passage</i>

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect
Department of Social Services	GF - See Below

Municipal Impact: None

Explanation

This bill establishes a 100 person pilot program to allow personal care assistance (PCA) services as an alternative to home health services under the Connecticut Home Care program. The care under this pilot program cannot exceed the average annual cost for current home health services. Due to this provision and the requirement that the program be established within available appropriations, it is anticipated that the Department of Social Services (DSS) can establish this program within anticipated resources.

The bill further requires DSS to submit a report on the pilot program to the General Assembly. It further requires DSS to apply for a federal waiver to include this pilot program in the Medicaid home care program. These requirements will lead to minimal administrative costs to the department.

House "A" struck the underlying bill and results in the fiscal impact noted above.

OLR Bill Analysis

sHB 5007 (as amended by House "A")*

AN ACT CONCERNING PERSONAL CARE ASSISTANCE AND THE HOME-CARE PROGRAM**SUMMARY:**

This bill requires the Department of Social Services (DSS) commissioner, within available appropriations, to establish and operate a state-funded pilot program until June 30, 2006 for up to 100 eligible seniors to receive personal care assistance (PCA) as an alternative to regular home health services (through agencies) in order to avoid institutionalization. To qualify for the pilot, seniors must be age 65 or over and meet the eligibility requirements of the Connecticut Home Care Program for Elders (CHCPE). The bill also permits recipients' relatives, other than spouses, to act as personal care assistants in this pilot. Under the bill, the average annual cost to the state for PCA services for each recipient in the pilot cannot exceed the average annual cost to the state for a recipient of home health services.

The bill allows the DSS commissioner or her agent to require pilot participants, as a condition of participation, to disclose if a personal care assistant is a nonspousal family member. It also requires the commissioner or her agent to (1) monitor the participants to ensure the personal care assistants' quality of service and (2) ensure the program's cost-effectiveness. The commissioner must establish the maximum allowable rate to be paid for PCA services in the pilot program, but she may set a separate lower rate for nonspousal family members providing PCA services if she deems it necessary to ensure cost-effectiveness and to conduct the pilot within available appropriations.

By January 1, 2006, the commissioner must report on the pilot to the Appropriations, Human Services, and Aging committees.

The bill also requires the commissioner to apply for a federal Medicaid waiver to include this PCA pilot in the Medicaid-funded portion of CHCPE and specifies that the pilot cannot exceed 100 people.

*House Amendment "A" replaces the original file, which required PCA services to be offered in the CHCPE as an alternative to regular home care through an agency starting July 1, 2004.

EFFECTIVE DATE: July 1, 2004, except upon passage for the Medicaid waiver provision, which takes effect upon passage.

BACKGROUND

Personal Care Assistance

Consumer-directed PCA services are an alternative to nursing homes or home care through an agency. In such a program, the client chooses his own personal care assistant (also sometimes called a personal care attendant) to help him with personal care and activities of daily living. The client employs, trains, supervises, and may fire the attendant, but a financial intermediary takes care of the paperwork. The program provides training to the client on how to function as the employer.

In the regular home care program, the client receives care through a home health care agency, which employs various home health care aides, homemakers, or chore persons for different functions and usually does not allow the client to choose the aide. The personal care assistant can take over a number of these different functions.

Connecticut PCA Program for Younger Disabled People

Connecticut already allows this consumer-directed PCA model of care to some extent under the Medicaid PCA waiver for disabled people age 18 to 64 and the acquired brain injury waiver, but has only a limited number of slots available in each of these programs. Until the state-funded 50-person elderly pilot began in 2000 (see below), people in this program had to switch to regular home care through an agency when they turned age 65.

Existing Limited Elderly PCA Pilot

Legislation in 2000 required DSS to create a state-funded PCA pilot program within the CHCPE program for up to 50 people age 65 and over and allowed the commissioner, at her discretion and within available appropriations, to increase the cap on participants to 100 if the pilot demonstrates it is cost-effective. The commissioner has not

increased the cap.

The existing pilot, which the bill does not change, allows eligible applicants to hire their own personal care assistants instead of going through a home health care agency for services. It is more limited than the bill's proposed pilot in that it is available only to people who (1) were receiving PCA services under the Medicaid waiver program for the disabled during the year before they turned age 65 or (2) are eligible for CHCPE services but unable to access adequate home care services.

COMMITTEE ACTION

Select Committee on Aging

Joint Favorable Substitute Change of Reference
Yea 9 Nay 0

Human Services Committee

Joint Favorable Change of Reference
Yea 17 Nay 0

Appropriations Committee

Joint Favorable Substitute
Yea 38 Nay 12