



General Assembly

February Session, 2004

Substitute Bill No. 5617

* HB05617HS_APP031604 *

AN ACT CONCERNING THE STATE-ADMINISTERED GENERAL ASSISTANCE PROGRAM.

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

1 Section 1. Subsection (b) of section 42 of public act 03-3 of the June
2 30 special session is repealed and the following is substituted in lieu
3 thereof (*Effective from passage*):

4 (b) [No earlier than September 1, 2003, but not later than October 1,
5 2003, the] The state-administered general assistance program
6 [pursuant to this section and any general assistance program operated
7 by a town] shall provide cash assistance of (1) [two hundred] three
8 hundred fifty dollars per month to a single unemployable person upon
9 determination of such person's unemployability; (2) two hundred
10 dollars per month for a single transitional individual who is required
11 to pay for shelter; and (3) one hundred fifty dollars per month for a
12 single transitional individual who is not required to pay for shelter.
13 [No earlier than September 1, 2003, but not later than October 1, 2003,
14 eligible families shall receive cash assistance in an amount that is fifty
15 dollars less than] Cash assistance shall be provided to eligible families
16 in an amount that is equivalent to the standard of assistance such
17 [family] families would receive under the temporary family assistance
18 program. The standard of assistance paid for individuals residing in
19 rated boarding facilities, shall remain at the level in effect on August

20 31, 2003. No individual shall be eligible for cash assistance under the
21 program if eligible for cash assistance under any other state or federal
22 cash assistance program.

23 Sec. 2. Section 17b-257 of the general statutes, as amended by section
24 18 of public act 03-2 and section 43 of public act 03-3 of the June 30
25 special session, is repealed and the following is substituted in lieu
26 thereof (*Effective from passage*):

27 (a) The Commissioner of Social Services shall implement a state
28 medical assistance component of the state-administered general
29 assistance program for persons ineligible for Medicaid. [Not later than
30 October 1, 2003, each] Each person eligible for state-administered
31 general assistance shall be entitled to receive medical care through a
32 federally qualified health center or other primary care provider as
33 determined by the commissioner. The Commissioner of Social Services
34 shall determine appropriate service areas and shall, in the
35 commissioner's discretion, contract with community health centers,
36 other similar clinics, and other primary care providers, if necessary, to
37 assure access to primary care services for recipients who live farther
38 than a reasonable distance from a federally qualified health center. The
39 commissioner shall assign and enroll eligible persons in federally
40 qualified health centers and with any other providers contracted for
41 the program because of access needs. [Not later than October 1, 2003,
42 each] Each person eligible for state-administered general assistance
43 shall be entitled to receive hospital services. Medical services under the
44 program shall be limited to the services provided by a federally
45 qualified health center, hospital, or other provider contracted for the
46 program at the commissioner's discretion because of access needs. The
47 commissioner shall ensure that ancillary services and specialty services
48 are provided by a federally qualified health center, hospital, or other
49 providers contracted for the program at the commissioner's discretion.
50 Ancillary services include, but are not limited to, radiology, laboratory,
51 and other diagnostic services not available from a recipient's assigned
52 primary-care provider, and durable medical equipment. Specialty
53 services are services provided by a physician with a specialty that are

54 not included in ancillary services. In no event, shall ancillary or
55 specialty services provided under the program exceed such services
56 provided under the state-administered general assistance program on
57 July 1, 2003. Eligibility criteria concerning income shall be the same as
58 the medically needy component of the Medicaid program, except that
59 earned monthly gross income of up to one hundred fifty dollars shall
60 be disregarded. Unearned income shall not be disregarded. No person
61 who has family assets exceeding one thousand dollars shall be eligible.
62 No person eligible for Medicaid shall be eligible to receive medical
63 care through the state-administered general assistance program.

64 (b) Recipients covered by a general assistance program operated by
65 a town shall be assigned and enrolled in federally qualified health
66 centers and with any other providers in the same manner as recipients
67 of medical assistance under the state-administered general assistance
68 program pursuant to subsection (a) of this section.

69 (c) On and after October 1, 2003, pharmacy services shall be
70 provided to recipients of state-administered general assistance through
71 the federally qualified health center to which they are assigned or
72 through a pharmacy with which the health center contracts. Prior to
73 said date, pharmacy services shall be provided as provided under the
74 Medicaid program. Recipients who are assigned to a community
75 health center or similar clinic or primary care provider other than a
76 federally qualified health center or to a federally qualified health
77 center that does not have a contract for pharmacy services shall receive
78 pharmacy services at pharmacies designated by the commissioner.

79 [(d) Recipients of state-administered general assistance shall
80 contribute a copayment of one dollar and fifty cents for each
81 prescription.]

82 [(e)] (d) The Commissioner of Social Services shall contract with
83 federally qualified health centers or other primary care providers as
84 necessary to provide medical services to eligible state-administered
85 general assistance recipients pursuant to this section. The

86 commissioner shall [, within available appropriations,] make payments
87 to such centers based on their pro rata share of the cost of services
88 provided or the number of clients served, or both. The Commissioner
89 of Social Services shall [, within available appropriations,] make
90 payments to other providers based on a methodology determined by
91 the commissioner. The Commissioner of Social Services may reimburse
92 for extraordinary medical services, provided such services are
93 documented to the satisfaction of the commissioner. For purposes of
94 this section, the commissioner may contract with a managed care
95 organization or other entity to perform administrative functions.
96 Provisions of a contract for medical services entered into by the
97 commissioner pursuant to this section shall supersede any inconsistent
98 provision in the regulations of Connecticut state agencies.

99 [(f)] (e) Each federally qualified health center participating in the
100 program shall, within thirty days of August 20, 2003, enroll in the
101 federal Office of Pharmacy Affairs Section 340B drug discount
102 program established pursuant to 42 USC 256b to provide pharmacy
103 services to recipients at Federal Supply Schedule costs. Each such
104 health center may establish an on-site pharmacy or contract with a
105 commercial pharmacy to provide such pharmacy services.

106 [(g)] (f) The Commissioner of Social Services shall [, within available
107 appropriations,] make payments to hospitals for inpatient services
108 based on their pro rata share of the cost of services provided or the
109 number of clients served, or both. The Commissioner of Social Services
110 shall [, within available appropriations,] make payments for any
111 ancillary or specialty services provided to state-administered general
112 assistance recipients under this section based on a methodology
113 determined by the commissioner.

114 [(h)] (g) [On or before March 1, 2004, the] The Commissioner of
115 Social Services shall seek a waiver of federal law under the Health
116 Insurance Flexibility and Accountability demonstration initiative for
117 the purpose of extending health insurance coverage under Medicaid to
118 persons qualifying for medical assistance under the state-administered

119 general assistance program. The provisions of section 17b-8 shall apply
120 to this section.

121 Sec. 3. Subsection (b) of section 44 of public act 03-3 of the June 30
122 special session is repealed and the following is substituted in lieu
123 thereof (*Effective from passage*):

124 (b) A recipient of state-administered general assistance cash
125 assistance aggrieved by a decision of the Commissioner of Social
126 Services under the program operated pursuant to section 42 of [this
127 act] public act 03-3 of the June 30 special session may request a hearing
128 pursuant to section 17b-60, [but shall not be] and shall remain eligible
129 for the continuation of cash assistance pending a hearing decision.

This act shall take effect as follows:	
Section 1	<i>from passage</i>
Sec. 2	<i>from passage</i>
Sec. 3	<i>from passage</i>

HS

Joint Favorable Subst. C/R

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