



# House of Representatives

General Assembly

**File No. 459**

January Session, 2005

Substitute House Bill No. 6275

*House of Representatives, April 20, 2005*

The Committee on Public Health reported through REP. SAYERS of the 60th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

**AN ACT CONCERNING THE ACCEPTANCE OF ELECTRONIC SIGNATURES BY THE COMMISSIONER OF SOCIAL SERVICES.**

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

1 Section 1. Section 17b-242 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective October 1, 2005*):

3 (a) The Department of Social Services shall determine the rates to be  
4 paid to home health care agencies and homemaker-home health aide  
5 agencies by the state or any town in the state for persons aided or  
6 cared for by the state or any such town. For the period from February  
7 1, 1991, to January 31, 1992, inclusive, payment for each service to the  
8 state shall be based upon the rate for such service as determined by the  
9 Office of Health Care Access, except that for those providers whose  
10 Medicaid rates for the year ending January 31, 1991, exceed the median  
11 rate, no increase shall be allowed. For those providers whose rates for  
12 the year ending January 31, 1991, are below the median rate, increases  
13 shall not exceed the lower of the prior rate increased by the most  
14 recent annual increase in the consumer price index for urban

15 consumers or the median rate. In no case shall any such rate exceed the  
16 eightieth percentile of rates in effect January 31, 1991, nor shall any rate  
17 exceed the charge to the general public for similar services. Rates  
18 effective February 1, 1992, shall be based upon rates as determined by  
19 the Office of Health Care Access, except that increases shall not exceed  
20 the prior year's rate increased by the most recent annual increase in the  
21 consumer price index for urban consumers and rates effective  
22 February 1, 1992, shall remain in effect through June 30, 1993. Rates  
23 effective July 1, 1993, shall be based upon rates as determined by the  
24 Office of Health Care Access except if the Medicaid rates for any  
25 service for the period ending June 30, 1993, exceed the median rate for  
26 such service, the increase effective July 1, 1993, shall not exceed one  
27 per cent. If the Medicaid rate for any service for the period ending June  
28 30, 1993, is below the median rate, the increase effective July 1, 1993,  
29 shall not exceed the lower of the prior rate increased by one and one-  
30 half times the most recent annual increase in the consumer price index  
31 for urban consumers or the median rate plus one per cent. The  
32 Commissioner of Social Services shall establish a fee schedule for home  
33 health services to be effective on and after July 1, 1994. The  
34 commissioner may annually increase any fee in the fee schedule based  
35 on an increase in the cost of services. The commissioner shall increase  
36 the fee schedule for home health services provided under the  
37 Connecticut home-care program for the elderly established under  
38 section 17b-342, effective July 1, 2000, by two per cent over the fee  
39 schedule for home health services for the previous year. The  
40 commissioner may increase any fee payable to a home health care  
41 agency or homemaker-home health aide agency upon the application  
42 of such an agency evidencing extraordinary costs related to (1) serving  
43 persons with AIDS; (2) high-risk maternal and child health care; (3)  
44 escort services; or (4) extended hour services. In no case shall any rate  
45 or fee exceed the charge to the general public for similar services. A  
46 home health care agency or homemaker-home health aide agency  
47 which, due to any material change in circumstances, is aggrieved by a  
48 rate determined pursuant to this subsection may, within ten days of  
49 receipt of written notice of such rate from the Commissioner of Social

50 Services, request in writing a hearing on all items of aggrievement. The  
51 commissioner shall, upon the receipt of all documentation necessary to  
52 evaluate the request, determine whether there has been such a change  
53 in circumstances and shall conduct a hearing if appropriate. The  
54 Commissioner of Social Services shall adopt regulations, in accordance  
55 with chapter 54, to implement the provisions of this subsection. The  
56 commissioner may implement policies and procedures to carry out the  
57 provisions of this subsection while in the process of adopting  
58 regulations, provided notice of intent to adopt the regulations is  
59 published in the Connecticut Law Journal within twenty days of  
60 implementing the policies and procedures. Such policies and  
61 procedures shall be valid for not longer than nine months.

62 (b) The Department of Social Services shall monitor the rates  
63 charged by home health care agencies and homemaker-home health  
64 aide agencies. Such agencies shall file annual cost reports and service  
65 charge information with the department.

66 (c) The home health services fee schedule shall include a fee for the  
67 administration of medication, which shall apply when the purpose of a  
68 nurse's visit is limited to the administration of medication.  
69 Administration of medication may include, but is not limited to, blood  
70 pressure checks, glucometer readings, pulse rate checks and similar  
71 indicators of health status. The fee for medication administration shall  
72 include administration of medications while the nurse is present, the  
73 pre-pouring of additional doses that the client will self-administer at a  
74 later time and the teaching of self-administration. The department  
75 shall not pay for medication administration in addition to any other  
76 nursing service at the same visit. The department may establish prior  
77 authorization requirements for this service. Before implementing such  
78 change, the Commissioner of Social Services shall consult with the  
79 chairpersons of the joint standing committees of the General Assembly  
80 having cognizance of matters relating to public health and human  
81 services.

82 (d) The home health services fee schedule established pursuant to



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:

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**OFA Fiscal Note**

**State Impact:**

<b>Agency Affected</b>	<b>Fund-Effect</b>	<b>FY 06 \$</b>	<b>FY 07 \$</b>
Department of Social Services	GF - Cost	Potential Minimal	Potential Minimal

**Municipal Impact:** None

**Explanation**

This bill requires the Department of Social Services to accept electronic records and records bearing electronic signatures from homemaker-home health aide agencies and makes changes to the auditing of these agencies. This may result in an additional cost to the department if it is necessary to make programming changes to accept such records electronically. However, any such costs are expected to be minimal.

**OLR Bill Analysis**

sHB 6275

***AN ACT CONCERNING THE ACCEPTANCE OF ELECTRONIC SIGNATURES BY THE COMMISSIONER OF SOCIAL SERVICES*****SUMMARY:**

This bill requires the Department of Social Services (DSS), when it processes or audits home health care and homemaker-home health aide agencies' reimbursement claims, to accept electronic records and records containing the electronic signature of an individual the home care agency has authorized to submit such records.

Under the bill, DSS must accept these electronic records and signatures in accordance with the existing Connecticut Uniform Electronic Transactions Act. That law specifies that it does not require a government agency in Connecticut to use or permit the use of electronic records or signatures, but it does permit keeping a record electronically if the law requires retention and the record meets certain statutory standards. This bill adds another exception for DSS to accept electronic records and signatures related to audits or processing of home care agencies' reimbursements.

It also requires DSS, when auditing such agencies' claims, to consider a physician's or other licensed health care practitioner's signature on the patient's care plan to be timely if the agency received the signed document before it sought reimbursement from DSS.

EFFECTIVE DATE: October 1, 2005

**BACKGROUND*****Related Law: Connecticut Uniform Electronic Transactions Act***

This law established a state version of the National Conference of Commissioners on Uniform State Laws' Uniform Electronic Transaction Act (UETA), which provides uniform rules governing electronic commerce transactions. It validates the use of electronic records and signatures and places electronic commerce and paper-

based commerce on the same legal footing.

The law defines “electronic record” as a record created, generated, sent, communicated, received, or stored by electronic means, such as facsimiles, electronic mail, telexes, and Internet messaging. It defines “electronic signature” as an electronic sound, symbol, or process attached to or logically associated with a record and executed or adopted by a person with the intent to sign the record.

It generally does not require a state or local government agency to use or permit the use of electronic records or signatures, but sets certain procedural requirements if an executive agency decides to use these methods and requires the Department of Information Technology to adopt regulations concerning certain administrative and security-related aspects.

**COMMITTEE ACTION**

Human Services Committee

Joint Favorable Change of Reference

Yea 15    Nay 1

Public Health Committee

Joint Favorable Substitute

Yea 26    Nay 0