



General Assembly

January Session, 2005

Raised Bill No. 6943

LCO No. 4649

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Referred to Committee on Human Services

Introduced by:
(HS)

AN ACT CONCERNING ENHANCEMENTS TO THE MEDICAID PROGRAM.

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

1 Section 1. (NEW) (*Effective July 1, 2005*) Not later than October 1,
2 2005, the Commissioner of Social Services shall amend the Medicaid
3 state plan to provide coverage under Medicaid for services provided
4 by chiropractors, naturopaths, psychologists, podiatrists, physical
5 therapists, occupational therapists, speech therapists and interpreter
6 services for deaf and hearing impaired individuals while such persons
7 receive medical treatment from a Medicaid provider.

8 Sec. 2. Section 17b-282a of the general statutes is repealed and the
9 following is substituted in lieu thereof (*Effective July 1, 2005*):

10 (a) The Commissioner of Social Services, to the extent permitted by
11 federal law, shall amend the Medicaid state plan to provide coverage
12 for general anesthesia, nursing and related hospital services provided
13 in conjunction with dental services, provided such anesthesia, nursing
14 and related hospital services are provided in conjunction with in-
15 patient dental services if the following conditions are met:

16 (1) The anesthesia, nursing and related hospital services are deemed
17 medically necessary by the treating dentist or oral surgeon and the
18 patient's primary care physician in accordance with the department's
19 requirements for prior authorization of services, if required; and

20 (2) The patient is either (A) a child under the age of four who is
21 determined by a licensed dentist, in conjunction with a licensed
22 physician who specializes in primary care, to have a dental condition
23 of significant dental complexity that it requires certain dental
24 procedures to be performed in a hospital, or (B) a person who has a
25 developmental disability, as determined by a licensed physician who
26 specializes in primary care, that places the person at serious risk. The
27 expense of such anesthesia, nursing and related hospital services shall
28 be deemed a medical expense under such health insurance policy and
29 shall not be subject to any limits on dental benefits under such policy.

30 (b) The Commissioner of Social Services, shall amend the Medicaid
31 state plan, to provide coverage to the extent permitted by federal law,
32 for screening and treatment of periodontal disease for pregnant
33 women under the Medicaid program.

34 Sec. 3. Subsection (a) of section 17b-261 of the general statutes is
35 repealed and the following is substituted in lieu thereof (*Effective from*
36 *passage*):

37 (a) Medical assistance shall be provided for any otherwise eligible
38 person whose income, including any available support from legally
39 liable relatives and the income of the person's spouse or dependent
40 child, is not more than one hundred forty-three per cent, pending
41 approval of a federal waiver applied for pursuant to subsection (d) of
42 this section, of the benefit amount paid to a person with no income
43 under the temporary family assistance program in the appropriate
44 region of residence and if such person is an institutionalized
45 individual as defined in Section 1917(c) of the Social Security Act, 42
46 USC 1396p(c), and has not made an assignment or transfer or other
47 disposition of property for less than fair market value for the purpose

48 of establishing eligibility for benefits or assistance under this section.
49 Any such disposition shall be treated in accordance with Section
50 1917(c) of the Social Security Act, 42 USC 1396p(c). Any disposition of
51 property made on behalf of an applicant or recipient or the spouse of
52 an applicant or recipient by a guardian, conservator, person
53 authorized to make such disposition pursuant to a power of attorney
54 or other person so authorized by law shall be attributed to such
55 applicant, recipient or spouse. A disposition of property ordered by a
56 court shall be evaluated in accordance with the standards applied to
57 any other such disposition for the purpose of determining eligibility.
58 The commissioner shall establish the standards for eligibility for
59 medical assistance at one hundred forty-three per cent of the benefit
60 amount paid to a family unit of equal size with no income under the
61 temporary family assistance program in the appropriate region of
62 residence, pending federal approval, except that the medical assistance
63 program shall provide coverage to persons under the age of nineteen
64 up to one hundred eighty-five per cent of the federal poverty level
65 without an asset limit. Said medical assistance program shall also
66 provide coverage to persons under the age of nineteen and their
67 parents and needy caretaker relatives who qualify for coverage under
68 Section 1931 of the Social Security Act with family income up to one
69 hundred per cent of the federal poverty level without an asset limit,
70 upon the request of such a person or upon a redetermination of
71 eligibility. Such levels shall be based on the regional differences in
72 such benefit amount, if applicable, unless such levels based on regional
73 differences are not in conformance with federal law. On July 1, 2005,
74 and annually thereafter, the commissioner shall increase the unearned
75 income disregard for recipients of medical assistance by the percentage
76 increase, if any, in the consumer price index for urban consumers over
77 the average of the previous calendar year. Any income in excess of the
78 applicable amounts shall be applied as may be required by said federal
79 law, and assistance shall be granted for the balance of the cost of
80 authorized medical assistance. All contracts entered into on and after
81 July 1, 1997, pursuant to this section shall include provisions for

82 collaboration of managed care organizations with the Healthy Families
83 Connecticut Program established pursuant to section 17a-56. The
84 Commissioner of Social Services shall provide applicants for assistance
85 under this section, at the time of application, with a written statement
86 advising them of the effect of an assignment or transfer or other
87 disposition of property on eligibility for benefits or assistance.

88 Sec. 4. (*Effective from passage*) (a) The Commissioner of Social
89 Services, in consultation with the advisory council established under
90 section 5 of this act, shall evaluate the necessity of adjusting the asset
91 and income rules under the Medicaid program.

92 (b) Not later than January 1, 2006, the commissioner shall report on
93 such evaluation, including findings and recommendations, to the joint
94 standing committee of the General Assembly having cognizance of
95 matters relating to human services, in accordance with the provisions
96 of section 11-4a of the general statutes.

97 Sec. 5. (*Effective from passage*) (a) There is established an advisory
98 council to advise the Commissioner of Social Services on the
99 evaluation required under subsection (a) of section 4 of this act.

100 (b) The advisory council shall consist of the following members: (1)
101 Four members of the General Assembly, one each appointed by the
102 speaker of the House of Representatives, the president pro tempore of
103 the Senate, the minority leader of the House of Representatives and the
104 minority leader of the Senate; (2) one member representing the legal
105 assistance service programs in this state, appointed by the speaker of
106 the House of Representatives; (3) one member who is a health care
107 provider with experience in providing care to participants in the
108 Medicaid medically needy program, appointed by the president pro
109 tempore of the Senate; (4) one member who is a recipient of benefits
110 under the Medicaid medically needy program, appointed by the
111 minority leader of the House of Representatives; and (5) one member
112 who is a recipient of benefits under the state supplement program and
113 who resides in a noninstitutional setting, appointed by the minority

114 leader of the Senate.

115 (c) All appointments to the advisory council shall be made no later
 116 than thirty days after the effective date of this section. Any vacancy
 117 shall be filled by the appointing authority.

118 (d) The advisory council shall terminate on the date the
 119 Commissioner of Social Services submits the report or January 1, 2006,
 120 whichever is earlier.

121 Sec. 6. Section 17b-28e of the general statutes is repealed. (*Effective*
 122 *July 1, 2005*)

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2005</i>	New section
Sec. 2	<i>July 1, 2005</i>	17b-282a
Sec. 3	<i>from passage</i>	17b-261(a)
Sec. 4	<i>from passage</i>	New section
Sec. 5	<i>from passage</i>	New section
Sec. 6	<i>July 1, 2005</i>	17b-28e repealed

Statement of Purpose:

To: (1) Restore the availability of certain medical services under the Medicaid program, (2) require the Commissioner of Social Services to adjust the unearned income disregard, used to make program eligibility determinations, by any corresponding increase to the consumer price index, and (3) require the Commissioner of Social Services, in consultation with the advisory council created pursuant to this act, to review the rules of eligibility concerning the Medicaid program and thereafter report back to the General Assembly on findings and recommendations.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]