



General Assembly

Substitute Bill No. 1350

January Session, 2007

* SB01350HS_APP032207 *

AN ACT CONCERNING ADMINISTRATION OF 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 17b-191 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective July*
3 *1, 2007*):

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 thirty-three dollars per month to (1) a single unemployable
9 person upon determination of such person's unemployability; [(2) two
10 hundred dollars per month for] and (2) a single transitional individual,
11 [who is required to pay for shelter; and (3) fifty dollars per month for a
12 single transitional individual who is not required to pay for shelter. No
13 earlier than September 1, 2003, but not later than October 1, 2003,
14 eligible families] Families eligible for cash assistance shall receive
15 [cash] such assistance in an amount that is [fifty dollars less than]
16 equal to the standard of assistance such family would receive under
17 the temporary family assistance program. [The standard of assistance
18 paid for individuals residing in rated boarding facilities, shall remain
19 at the level in effect on August 31, 2003.] No individual shall be eligible

20 for cash assistance under the program if eligible for cash assistance
21 under any other state or federal cash assistance program.

22 Sec. 2. Subsection (a) of section 17b-192 of the general statutes is
23 repealed and the following is substituted in lieu thereof (*Effective July*
24 *1, 2007*):

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

53 chiropractor licensed under chapter 372. [In no event shall ancillary or
54 specialty services provided under the program exceed such services
55 provided under the state-administered general assistance program on
56 July 1, 2003.] Eligibility criteria concerning income shall be the same as
57 the medically needy component of the Medicaid program, except that
58 earned monthly gross income of up to one hundred fifty dollars shall
59 be disregarded. Unearned income shall not be disregarded. No person
60 who has family assets exceeding one thousand dollars shall be eligible.
61 No person eligible for Medicaid shall be eligible to receive medical
62 care through the state-administered general assistance program. No
63 person shall be eligible for assistance under this section if such person
64 made, during the three months prior to the month of application, an
65 assignment or transfer or other disposition of property for less than
66 fair market value. The number of months of ineligibility due to such
67 disposition shall be determined by dividing the fair market value of
68 such property, less any consideration received in exchange for its
69 disposition, by five hundred dollars. Such period of ineligibility shall
70 commence in the month in which the person is otherwise eligible for
71 benefits. Any assignment, transfer or other disposition of property, on
72 the part of the transferor, shall be presumed to have been made for the
73 purpose of establishing eligibility for benefits or services unless such
74 person provides convincing evidence to establish that the transaction
75 was exclusively for some other purpose.

76 Sec. 3. (NEW) (*Effective from passage*) The Commissioner of Social
77 Services shall reimburse providers of vision services under the state-
78 administered general assistance program and the Medicaid program at
79 a rate that is equal to the rate paid to providers of comparable services
80 under the Medicaid fee-for-service program. Such reimbursement rate
81 shall be retroactive to all services provided on or after January 2, 2007,
82 and shall remain in place in subsequent fiscal years.

83 Sec. 4. (NEW) (*Effective from passage*) Notwithstanding any provision
84 of chapter 319t or 319v of the general statutes, the Department of Social
85 Services shall not require that a recipient of medical assistance under

86 the state-administered general assistance program or the Medicaid
87 program obtain a physician's referral prior to accessing the
88 professional services of a licensed ophthalmologist or a licensed
89 optometrist.

90 Sec. 5. (*Effective from passage*) The sum of _____ dollars is
91 appropriated to the Department of Social Services, from the General
92 Fund, for the fiscal year ending June 30, 2007, to increase the
93 reimbursement to providers of vision care services under the state-
94 administered general assistance program in accordance with section 1
95 of this act.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2007</i>	17b-191(b)
Sec. 2	<i>July 1, 2007</i>	17b-192(a)
Sec. 3	<i>from passage</i>	New section
Sec. 4	<i>from passage</i>	New section
Sec. 5	<i>from passage</i>	New section

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Joint Favorable Subst. C/R

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