



General Assembly

January Session, 2007

Raised Bill No. 1359

LCO No. 4915

04915_____HS_

Referred to Committee on Human Services

Introduced by:
(HS)

AN ACT CONCERNING THE PROVISION OF CHIROPRACTIC SERVICES UNDER THE STATE-ADMINISTERED GENERAL ASSISTANCE PROGRAM.

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

1 Section 1. Subsection (a) of section 17b-192 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective July*
3 *1, 2007*):

4 (a) The Commissioner of Social Services shall implement a state
5 medical assistance component of the state-administered general
6 assistance program for persons ineligible for Medicaid. Not later than
7 October 1, 2003, each person eligible for state-administered general
8 assistance shall be entitled to receive medical care through a federally
9 qualified health center or other primary care provider as determined
10 by the commissioner. The Commissioner of Social Services shall
11 determine appropriate service areas and shall, in the commissioner's
12 discretion, contract with community health centers, other similar
13 clinics, and other primary care providers, if necessary, to assure access
14 to primary care services for recipients who live farther than a
15 reasonable distance from a federally qualified health center. The

16 commissioner shall assign and enroll eligible persons in federally
17 qualified health centers and with any other providers contracted for
18 the program because of access needs. Not later than October 1, 2003,
19 each person eligible for state-administered general assistance shall be
20 entitled to receive hospital services. Medical services under the
21 program shall be limited to the services provided by a federally
22 qualified health center, hospital, or other provider contracted for the
23 program at the commissioner's discretion because of access needs. The
24 commissioner shall ensure that ancillary services and specialty services
25 are provided by a federally qualified health center, hospital, or other
26 providers contracted for the program at the commissioner's discretion.
27 Ancillary services include, but are not limited to, radiology, laboratory,
28 and other diagnostic services not available from a recipient's assigned
29 primary-care provider, and durable medical equipment. Specialty
30 services are services provided by a physician with a specialty that are
31 not included in ancillary services and services provided by a
32 chiropractor licensed under chapter 372. [In no event shall ancillary or
33 specialty services provided under the program exceed such services
34 provided under the state-administered general assistance program on
35 July 1, 2003.] Eligibility criteria concerning income shall be the same as
36 the medically needy component of the Medicaid program, except that
37 earned monthly gross income of up to one hundred fifty dollars shall
38 be disregarded. Unearned income shall not be disregarded. No person
39 who has family assets exceeding one thousand dollars shall be eligible.
40 No person eligible for Medicaid shall be eligible to receive medical
41 care through the state-administered general assistance program. No
42 person shall be eligible for assistance under this section if such person
43 made, during the three months prior to the month of application, an
44 assignment or transfer or other disposition of property for less than
45 fair market value. The number of months of ineligibility due to such
46 disposition shall be determined by dividing the fair market value of
47 such property, less any consideration received in exchange for its
48 disposition, by five hundred dollars. Such period of ineligibility shall
49 commence in the month in which the person is otherwise eligible for

50 benefits. Any assignment, transfer or other disposition of property, on
51 the part of the transferor, shall be presumed to have been made for the
52 purpose of establishing eligibility for benefits or services unless such
53 person provides convincing evidence to establish that the transaction
54 was exclusively for some other purpose.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2007</i>	17b-192(a)

Statement of Purpose:

To restore services provided by a licensed chiropractor as a covered service under the state-administered general assistance program.

[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.]