

**Human Services Committee
Public Hearing**

February 27, 2007

**Julie Evans Starr
Executive Director
CT Commission on Aging (CoA)**

**SB 1128, An Act Implementing the Governor's Budget Recommendations with
Respect to Social Services Programs**

- **Section 5 b) – Medicare Part D
~ CoA Does Not Support**

The Commission does not support the new language which states that expenditures shall not exceed the amount appropriated to the Department of Social Services in section 1 of Public Act 06-186. This means that funding for the Medicare Supplemental Needs Fund is capped at \$5 million. This is an arbitrary and inadequate cap and we strongly urge you to delete that specific language. In doing so, you will affirm the legislature's commitment to hold people harmless – that ConnPace participants and people who are dually eligible are not hurt by the implementation of Medicare Part D.

- **Section 7) – Money Follows the Person (MFP)
~ CoA Supports**

The Commission supports the expansion of the number of nursing home residents from 100 to 700 who will be able to live in their homes as communities as a result of a federal grant by Centers for Medicare and Medicaid Services. This initiative allows for more flexibility with Medicaid dollars. Historically, Medicaid pays for nursing home care and not home and community- based services and supports. Consequently, Connecticut's long-term care system is heavily institutionally biased (out of balance). For the participants of MFP, Medicaid dollars will provide for a range of home and community- based options, even 24 -hour care. This initiative supports PA 05-14, "*Such policy and plan shall provide that individuals with long- term care needs have the option to choose and receive long-term care and support in the least restrictive, appropriate setting.*"

It also helps with Connecticut's efforts to re-balance its long-term care system as outlined in the 2007 LTC Plan.

- **CoA Supports funding for the CHOICES Program**, which is not presently included in this bill. CHOICES is a partnership of the DSS, the 5 area agencies on aging, the Center for Medicare Advocacy, municipal partners (like senior centers) and hundreds of volunteers. Funding for the CHOICES program has hit a critical juncture as a result of the expiration of a federally funded grant, the increasingly complex health/long-term care system, and a growing constituency. Please fund this remarkable education and outreach support for older adults and persons with disabilities.

HB 5640, An Act Concerning Increased Access to the Medicaid Program for the Medically Needy

~ CoA Supports

For many older adults and persons with disabilities, especially people with cognitive impairments and mental illness, spend down is a significant barrier. This bill would make it possible for many of Connecticut's vulnerable citizens to get health insurance without spending down. This will both increase access to essential health care and help avoid expensive crises.

It also fixes an unintended consequence of Medicare Part D. Unfortunately, thousands of "aged, blind, and disabled" persons who qualify for Medicaid by spending down to the income limits can no longer count the cost of medications covered by Medicare Part D. As a result, many vulnerable people with limited resources and serious health needs are losing their Medicaid coverage for essential health care services.

HB 7191, An Act Concerning Revisions to the Statewide Respite Program

~ CoA Supports

Individuals who are eligible for Medicaid are prohibited from receiving services under the Statewide Respite Program because those age 65 and older are already able to receive respite services (such as adult day care, companion services) through the Connecticut Home Care Program for Elders (CHCPE).

Unfortunately, people who are not 65 years of age and therefore do not qualify for the CHCPE can't receive these services, as Medicaid does not cover them. So, if you are under age 65 and with Alzheimer's or related dementia this type of help is not available.

If the need exists, age should not be a barrier. We ask you to fix this unintended and unfair consequence by passing this bill.

Thank you.