



General Assembly

February Session, 2008

**Raised Bill No. 567**

LCO No. 2711

\* SB00567HS\_APP031408 \*

Referred to Committee on Human Services

Introduced by:  
(HS)

**AN ACT CONCERNING THE CONNECTICUT HOME-CARE PROGRAM FOR THE ELDERLY.**

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

1 Section 1. Subsection (a) of section 17b-342 of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective July*  
3 *1, 2008*):

4 (a) The Commissioner of Social Services shall administer the  
5 Connecticut home-care program for the elderly state-wide in order to  
6 prevent the institutionalization of elderly persons (1) who are sixty  
7 years of age or older, (2) who are recipients of medical assistance, [(2)]  
8 [(3)] who are eligible for such assistance, [(3)] (4) who would be eligible  
9 for medical assistance if residing in a nursing facility, or [(4)] (5) who  
10 meet the criteria for the state-funded portion of the program under  
11 subsection (i) of this section. For purposes of this section, a long-term  
12 care facility is a facility which has been federally certified as a skilled  
13 nursing facility or intermediate care facility. The commissioner shall  
14 make any revisions in the state Medicaid plan required by Title XIX of  
15 the Social Security Act prior to implementing the program. The  
16 annualized cost of the community-based services provided to such

17 persons under the program shall not exceed sixty per cent of the  
18 weighted average cost of care in skilled nursing facilities and  
19 intermediate care facilities. The program shall be structured so that the  
20 net cost to the state for long-term facility care in combination with the  
21 community-based services under the program shall not exceed the net  
22 cost the state would have incurred without the program. The  
23 commissioner shall investigate the possibility of receiving federal  
24 funds for the program and shall apply for any necessary federal  
25 waivers. A recipient of services under the program, and the estate and  
26 legally liable relatives of the recipient, shall be responsible for  
27 reimbursement to the state for such services to the same extent  
28 required of a recipient of assistance under the state supplement  
29 program, medical assistance program, temporary family assistance  
30 program or food stamps program. Only a United States citizen or a  
31 noncitizen who meets the citizenship requirements for eligibility under  
32 the Medicaid program shall be eligible for home-care services under  
33 this section, except a qualified alien, as defined in Section 431 of Public  
34 Law 104-193, admitted into the United States on or after August 22,  
35 1996, or other lawfully residing immigrant alien determined eligible  
36 for services under this section prior to July 1, 1997, shall remain eligible  
37 for such services. Qualified aliens or other lawfully residing immigrant  
38 aliens not determined eligible prior to July 1, 1997, shall be eligible for  
39 services under this section subsequent to six months from establishing  
40 residency. Notwithstanding the provisions of this subsection, any  
41 qualified alien or other lawfully residing immigrant alien or alien who  
42 formerly held the status of permanently residing under color of law  
43 who is a victim of domestic violence or who has mental retardation  
44 shall be eligible for assistance pursuant to this section. Qualified aliens,  
45 as defined in Section 431 of Public Law 104-193, or other lawfully  
46 residing immigrant aliens or aliens who formerly held the status of  
47 permanently residing under color of law shall be eligible for services  
48 under this section provided other conditions of eligibility are met.

49 Sec. 2. Subsection (c) of section 17b-342 of the general statutes is  
50 repealed and the following is substituted in lieu thereof (*Effective July*

51 1, 2008):

52 (c) The community-based services covered under the program shall  
 53 include, but not be limited to, the following services to the extent that  
 54 they are not available under the state Medicaid plan, occupational  
 55 therapy, homemaker services, companion services, meals on wheels,  
 56 adult day care, transportation, mental health counseling, care  
 57 management, elderly foster care, personal care assistance services,  
 58 minor home modifications and assisted living services provided in  
 59 state-funded congregate housing and in other assisted living pilot or  
 60 demonstration projects established under state law. Recipients of state-  
 61 funded services and persons who are determined to be functionally  
 62 eligible for community-based services who have an application for  
 63 medical assistance pending shall have the cost of home health and  
 64 community-based services covered by the program, provided they  
 65 comply with all medical assistance application requirements. Access  
 66 agencies shall not use department funds to purchase community-based  
 67 services or home health services from themselves or any related  
 68 parties.

69 Sec. 3. (*Effective July 1, 2008*) The sum of \_\_\_\_ dollars is appropriated  
 70 to the Department of Social Services, from the General Fund, for the  
 71 fiscal year ending June 30, 2009, for the purpose of increasing  
 72 reimbursement rates paid to providers of home care services under the  
 73 Connecticut home-care program for the elderly established pursuant to  
 74 section 17b-342 of the general statutes, as amended by this act.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2008</i>	17b-342(a)
Sec. 2	<i>July 1, 2008</i>	17b-342(c)
Sec. 3	<i>July 1, 2008</i>	New section

**HS**

**Joint Favorable C/R**

**APP**