



## Written Testimony before the Select Committee on Aging

### In opposition to S.B. 489 An Act Concerning A Single Point Of Entry For Long-Term Care

SB 489 provides for the establishment of a statewide single entry point (SEP) system by the Department on Aging for individuals seeking long-term care to create uniform information on all long-term care services to be provided as well as to promote consumer choice of options through a web site. Proposed HB 5057 was a similar bill proposed out of the Aging Committee, but the current bill not only has added more specificity, but has also deleted responsibility for the system from DSS and added it to the new Department on Aging. While the bill adds significant specifics about collaboration, a comprehensive uniform screening process, a support plan, timely eligibility screening by DSS and the implementation of quality assurance standards and procedures, it does not specifically define "long-term care services" and indicate that the SEP be specifically for services for those persons 18 years of age and older.

In this bill, no funding has been provided for implementation. The department certainly supports the concept of SEP and has been leading the development of SEPs in Connecticut; however, the department recognizes that funding is necessary for SEP development and operation. A bill similar to this was proposed last year and not passed; however much has been done by DSS since that time to develop a pilot plan that would meet the intent of this bill.

The UConn Long Term Care Needs Assessment concluded that the majority of consumers want to remain in their own homes with homecare services and supports as necessary. The greatest obstacles to receiving such services, however, are the finances and the lack of knowledge about services. The critical need is for education and simply put, an Aging and Disability Resource Center (ADRC) is a solution. SEPs, or ADRCs as envisioned by the National Association of State Units on Aging and in development by the department's Aging Services Division, will provide information and assistance to both the Aging and Disability communities to meet the long-term care informational and referral needs of CT's population, persons age 18 years of age and older. Through two federal grants, Aging Services, in collaboration with BRS, has not only designated Area Agencies on Aging and Centers for Independent Living (CIL) as the regional entities responsible for comprehensive information and assistance, but also completed the critical steps making possible the opening of a South Central ADRC ("Community Choices") and the development of another in the Western Region. The other regional Area Agencies, though currently unfunded for transition, are already aligning with their CILs. This, in part, has been possible through the Money Follows the Person Project which has linked the two partners to assist with transitions out of nursing facilities. CHOICES, the widely recognized information and assistance program operating out of the AAAs, is providing long-term care options counseling. Of note, CHOICES would become a function under the new Department on Aging rather than remaining with DSS and, accordingly, that language would have to be changed in the

Bill. Community CHOICES, the South Central ADRC, is already in operation. Notably, the Department's Aging Services Division and Bureau of Rehabilitation Services have already begun this integral collaboration, as have the AAAs and the CILs. This bill, however, requires the Department on Aging to establish a request for proposal process for entities to serve as SEP agencies which may prove to be costly in time and funding when agencies are already aligned to serve these functions.

Despite having an infrastructure in place, more needs to be accomplished in order to build the foundation for ADRC's in CT. The cost of such development and operation statewide is approximately \$1.5 million dollars per year.

In addition, DSS is in the process of developing a web-based on-line application system which will be able to be utilized by the single point of entry servicer in assisting those applying for long-term care Medicaid coverage from the department. Implementation of this system is planned for late in 2010.

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