



House of Representatives

General Assembly

File No. 868

January Session, 2009

Substitute House Bill No. 6675

House of Representatives, April 30, 2009

The Committee on Human Services reported through REP. WALKER of the 93rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT INCREASING ACCESS TO HEALTH CARE IN CONNECTICUT.

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

1 Section 1. (NEW) (*Effective from passage*) The Commissioner of Social
2 Services, in consultation with the Commissioner of Public Health and
3 the State Comptroller, shall develop short-term and long-term
4 recommendations addressing the most effective use of the increase in
5 federal funds received by the state, including federal funds received
6 that are attributable to the enhanced federal medical assistance
7 percentage, for purposes of utilizing such funds to provide improved
8 access to health care for state residents. Such recommendations may
9 address topics that include, but are not limited to, provider
10 reimbursement rates, expanded enrollment in existing state health care
11 programs, the improved delivery of health care services through
12 existing state health care programs, development of health information
13 technology and improved leveraging of federal dollars for state health
14 care costs. On or before July 1, 2009, and annually thereafter, the

15 Commissioner of Social Services shall report, in accordance with the
16 provisions of section 11-4a of the general statutes, such
17 recommendations to the joint standing committees of the General
18 Assembly having cognizance of matters relating to human services,
19 public health and appropriations and the budgets of state agencies.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section

HS *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: Minimal Cost

Municipal Impact: None

Explanation

This bill requires the Department of Social Services (DSS), in consultation with the Department of Public Health and the State Comptroller, to develop recommendations concerning the use of federal funds. DSS must annually submit a report of its recommendations to the General Assembly. DSS will incur a minimal administrative cost to meet the requirements of this bill.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis**sHB 6675*****AN ACT INCREASING ACCESS TO HEALTH CARE IN CONNECTICUT.*****SUMMARY:**

This bill requires the social services commissioner to develop short- and long-term recommendations on the most effective ways to use increased funds the state receives, including increases due to federal medical assistance percentage (FMAP) enhancements, to improve state residents' access to health care. He must do this in consultation with the public health commissioner and comptroller.

Their recommendations can address any topic, including provider reimbursement rates, expanded enrollment in state health care programs and improved service delivery in these programs, developing health information technology, and obtaining more federal health care money.

The commissioner must report the recommendations by July 1, 2009 and annually thereafter to the Public Health, Human Services, and Appropriations committees.

EFFECTIVE DATE: Upon passage

BACKGROUND***Enhanced Federal Medical Assistance Percentage***

FMAP is the federal share of a state's Medicaid expenditures. Connecticut's FMAP is normally 50%, but the 2009 American Recovery and Reinvestment Act (the federal financial stimulus law) temporarily increases FMAPs through December 31, 2010. Connecticut's enhanced FMAP is 56.2%.

Legislative History

The House referred this bill (file 574) to the Human Services Committee on April 14. That committee reported this substitute, which limits the purview of the commissioner's recommendations to the use of the enhanced FMAP.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 22 Nay 8 (03/20/2009)

Human Services Committee

Joint Favorable Substitute

Yea 18 Nay 0 (04/16/2009)