



**SB 1085 – AN ACT CONCERNING HOMEMAKER AND COMPANION AGENCIES AND
AUDITS FOR VENDOR FRAUD**

Before the Human Services Committee
March 17, 2009

Senator Doyle, Representative Walker, and members of the Human Services Committee, my name is Brian Ellsworth and I am President & CEO of the Connecticut Association for Home Care & Hospice (CAHCH), whose members serve over 100,000 elderly, disabled, and terminally ill Connecticut citizens. CAHCH is pleased to provide comments on S.B. 1085, which proposes to change Department of Social Services (DSS) policies regarding audits of providers, add personal care assistance to the CT Home Care Program for Elders and increase payments for transportation services provided by homemaker-companion agencies.

Regarding DSS audits, our provider members' experience on DSS financial audits has significantly improved from the myriad of problems we had four years ago. This improvement is no doubt due to the enactment of several bills in 2005 (Public Acts 05-195 & 272), which clarified policy on physician signatures on the plan of care and electronic recordkeeping, as well as provided due process protections for audits. The Department has improved its communication with home care providers, giving us better insight on audit trends and issues to watch. The improved communication has included DSS making presentations to our membership and working with us to clarify policy issues as they have arisen.

Given the budget deficits, concerns still remain about the potential misuse or misapplication of extrapolation in DSS audits in order to fill budget holes. We urge the General Assembly to maintain continued vigilance on these issues. In the event that legislation is necessary, our top priorities would be to remove the \$150,000 annual claims threshold, under which the provider is exempt from extrapolation and to provide more due process.

We understand that the intent of section 2 of the bill is to add personal care assistance as covered service under the CT Home Care Program for Elders as provided by homemaker-companion agencies. This would open up the program to hands-on home care being provided by entities other than licensed home health agencies. CT has historically rejected this approach out of concerns about maintaining quality and ensuring access to the Medicare benefit. These continue to be valid concerns, however, it is also clear that home health agencies are struggling to provide home health aide services to Medicaid patients at rates that are 30 percent below the costs of care.

Therefore, we think that new models of care, such as a PCA provided through an agency, should be carefully examined through a deliberative process. A balance of quality and cost must be struck, with appropriate oversight from nurses, manageable requirements for training & supervision and pre-employment screening. CAHCH would be pleased to participate in a process to find a middle ground on these challenging issues.

CAHCH supports section 3 of the bill to increase transportation payments.

Thank you for the opportunity to present our concerns to you.