



General Assembly

Substitute Bill No. 841

January Session, 2009

* SB00841AGEGAE030909 *

AN ACT CONCERNING THE STATE DEPARTMENT ON AGING.

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

1 Section 1. Section 4-5 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective July 1, 2009*):

3 As used in sections 4-6, 4-7 and 4-8, the term "department head"
4 means Secretary of the Office of Policy and Management,
5 Commissioner of Administrative Services, Commissioner of Revenue
6 Services, Banking Commissioner, Commissioner of Children and
7 Families, Commissioner of Consumer Protection, Commissioner of
8 Correction, Commissioner of Economic and Community Development,
9 State Board of Education, Commissioner of Emergency Management
10 and Homeland Security, Commissioner of Environmental Protection,
11 Commissioner of Agriculture, Commissioner of Public Health,
12 Insurance Commissioner, Labor Commissioner, Liquor Control
13 Commission, Commissioner of Mental Health and Addiction Services,
14 Commissioner of Public Safety, Commissioner of Social Services,
15 Commissioner of Developmental Services, Commissioner of Motor
16 Vehicles, Commissioner of Transportation, Commissioner of Public
17 Works, Commissioner of Veterans' Affairs, Commissioner of Health
18 Care Access, Chief Information Officer, the chairperson of the Public
19 Utilities Control Authority, the executive director of the Board of
20 Education and Services for the Blind, the executive director of the

21 Connecticut Commission on Culture and Tourism, the Ombudsman
22 for Property Rights, [and] the executive director of the Office of
23 Military Affairs, and the Commissioner on Aging. As used in sections
24 4-6 and 4-7, "department head" also means the Commissioner of
25 Education.

26 Sec. 2. Section 17a-317 of the general statutes is repealed and the
27 following is substituted in lieu thereof (*Effective July 1, 2009*):

28 (a) Effective [~~July 1, 2008~~] July 1, 2009, there shall be established a
29 State Department on Aging which shall be under the direction and
30 supervision of the Commissioner on Aging who shall be appointed by
31 the Governor in accordance with the provisions of sections 4-5 to 4-8,
32 inclusive, as amended by this act, with the powers and duties
33 prescribed in said sections. The commissioner shall be knowledgeable
34 and experienced with respect to the conditions and needs of elderly
35 persons and shall serve on a full-time basis.

36 (b) The Commissioner on Aging shall administer all laws under the
37 jurisdiction of the State Department on Aging and shall employ the
38 most efficient and practical means for the provision of care and
39 protection of elderly persons. The commissioner shall have the power
40 and duty to do the following: (1) Administer, coordinate and direct the
41 operation of the department; (2) adopt and enforce regulations, in
42 accordance with chapter 54, as necessary to implement the purposes of
43 the department as established by statute; (3) establish rules for the
44 internal operation and administration of the department; (4) establish
45 and develop programs and administer services to achieve the purposes
46 of the department; (5) contract for facilities, services and programs to
47 implement the purposes of the department; (6) act as advocate for
48 necessary additional comprehensive and coordinated programs for
49 elderly persons; (7) assist and advise all appropriate state, federal, local
50 and area planning agencies for elderly persons in the performance of
51 their functions and duties pursuant to federal law and regulation; (8)
52 plan services and programs for elderly persons; (9) coordinate
53 outreach activities by public and private agencies serving elderly

54 persons; [and] (10) consult and cooperate with area and private
55 planning agencies; and (11) establish and maintain a toll-free telephone
56 number and an Internet web site in order to provide a single point of
57 access to information on services and resources available for elderly
58 persons.

59 (c) [The] In accordance with sections 4-38d, 4-38e and 4-39, all
60 functions, powers, duties and personnel of the Division of Elderly
61 Services of the Department of Social Services, or any subsequent
62 division or portion of a division with similar functions, powers,
63 personnel and duties, [shall be] are transferred to the State Department
64 on Aging. [pursuant to the provisions of sections 4-38d, 4-38e and 4-
65 39.] In addition and in accordance with sections 4-38d, 4-38e and 4-39,
66 the functions, powers, duties and personnel of the Department of
67 Social Services under subsection (b) of section 17b-4, as amended by
68 this act, and sections 17b-342, 17b-342a, 17b-349e, as amended by this
69 act, 17b-365, 17b-366, 17b-400 to 17b-417, inclusive, and 17b-427, as
70 amended by this act, are transferred to the State Department on Aging.
71 Whenever the words "Department of Social Services", "department",
72 "Commissioner of Social Services" or "commissioner" are used in said
73 sections, the words " State Department on Aging" or "Commissioner on
74 Aging", whichever is appropriate, are substituted in lieu thereof.

75 (d) The Department of Social Services shall continue to administer
76 programs under the jurisdiction of the State Department on Aging
77 until the Commissioner on Aging is appointed and administrative staff
78 are hired.

79 (e) The Governor may, with the approval of the Finance Advisory
80 Committee, transfer funds between the Department of Social Services
81 and the State Department on Aging, pursuant to subsection (b) of
82 section 4-87, during the fiscal years ending June 30, 2010, and June 30,
83 2011.

84 [(d)] (f) Any order or regulation of the Department of Social Services
85 [or the Commission on Aging] that is in force on July 1, [2008] 2009,

86 shall continue in force and effect as an order or regulation until
87 amended, repealed or superseded pursuant to law.

88 Sec. 3. Section 17b-1 of the general statutes is repealed and the
89 following is substituted in lieu thereof (*Effective July 1, 2009*):

90 (a) There is established a Department of Social Services. The
91 department head shall be the Commissioner of Social Services, who
92 shall be appointed by the Governor in accordance with the provisions
93 of sections 4-5 to 4-8, inclusive, as amended by this act, with the
94 powers and duties therein prescribed.

95 (b) The Department of Social Services shall constitute a successor
96 department to the Department of Income Maintenance [] and the
97 Department of Human Resources [and the Department on Aging] in
98 accordance with the provisions of sections 4-38d and 4-39.

99 (c) Wherever the words "Commissioner of Income Maintenance" []
100 or "Commissioner of Human Resources" [or "Commissioner on
101 Aging"] are used in the general statutes, the words "Commissioner of
102 Social Services" shall be substituted in lieu thereof. Wherever the
103 words "Department of Income Maintenance" [] or "Department of
104 Human Resources" [or "Department on Aging"] are used in the general
105 statutes, "Department of Social Services" shall be substituted in lieu
106 thereof.

107 (d) [Any] Subject to the provisions of subsection (d) of section 17a-
108 317, as amended by this act, any order or regulation of the Department
109 of Income Maintenance, the Department of Human Resources or the
110 Department on Aging which is in force on July 1, 1993, shall continue
111 in force and effect as an order or regulation of the Department of Social
112 Services until amended, repealed or superseded pursuant to law.
113 Where any order or regulation of said departments conflict, the
114 Commissioner of Social Services may implement policies and
115 procedures consistent with the provisions of public act 93-262* while in
116 the process of adopting the policy or procedure in regulation form,
117 provided notice of intention to adopt the regulations is printed in the

118 Connecticut Law Journal within twenty days of implementation. The
119 policy or procedure shall be valid until the time final regulations are
120 effective.

121 Sec. 4. Subsection (b) of section 17b-4 of the general statutes is
122 repealed and the following is substituted in lieu thereof (*Effective July*
123 *1, 2009*):

124 (b) The State Department [of Social Services] on Aging shall study
125 continuously the conditions and needs of elderly and aging persons in
126 this state in relation to nutrition, transportation, home-care, housing,
127 income, employment, health, recreation and other matters. It shall be
128 responsible in cooperation with federal, state, local and area planning
129 agencies on aging for the overall planning, development and
130 administration of a comprehensive and integrated social service
131 delivery system for elderly persons and the aged. The department
132 shall: (1) Measure the need for services; (2) survey methods of
133 administration of programs for service delivery; (3) provide for
134 periodic evaluations of social services; (4) maintain technical,
135 information, consultation and referral services in cooperation with
136 other state agencies to local and area public and private agencies to the
137 fullest extent possible; (5) develop and coordinate educational
138 outreach programs for the purposes of informing the public and
139 elderly persons of available programs; (6) cooperate in the
140 development of performance standards for licensing of residential and
141 medical facilities with appropriate state agencies; (7) supervise the
142 establishment, in selected areas and local communities of the state, of
143 pilot programs for elderly persons; (8) coordinate with the Department
144 of Transportation to provide adequate transportation services related
145 to the needs of elderly persons; and (9) cooperate with other state
146 agencies to provide adequate and alternate housing for elderly
147 persons, including congregate housing, as defined in section 8-119e.

148 Sec. 5. Subsection (c) of section 17b-337 of the general statutes is
149 repealed and the following is substituted in lieu thereof (*Effective July*
150 *1, 2009*):

151 (c) The Long-Term Care Planning Committee shall consist of: (1)
152 The chairpersons and ranking members of the joint standing and select
153 committees of the General Assembly having cognizance of matters
154 relating to human services, public health, elderly services and
155 long-term care; (2) the Commissioner of Social Services, or the
156 commissioner's designee; (3) one member of the Office of Policy and
157 Management appointed by the Secretary of the Office of Policy and
158 Management; (4) one member from the Department of Social Services
159 appointed by the Commissioner of Social Services; (5) one member
160 from the Department of Public Health appointed by the Commissioner
161 of Public Health; (6) one member from the Department of Economic
162 and Community Development appointed by the Commissioner of
163 Economic and Community Development; (7) one member from the
164 Office of Health Care Access appointed by the Commissioner of
165 Health Care Access; (8) one member from the Department of
166 Developmental Services appointed by the Commissioner of
167 Developmental Services; (9) one member from the Department of
168 Mental Health and Addiction Services appointed by the Commissioner
169 of Mental Health and Addiction Services; (10) one member from the
170 Department of Transportation appointed by the Commissioner of
171 Transportation; (11) one member from the Department of Children and
172 Families appointed by the Commissioner of Children and Families;
173 [and] (12) the executive director of the Office of Protection and
174 Advocacy for Persons with Disabilities or the executive director's
175 designee; and (13) the Commissioner on Aging, or the commissioner's
176 designee. The committee shall convene no later than ninety days after
177 June 4, 1998. Any vacancy shall be filled by the appointing authority.
178 The chairperson shall be elected from among the members of the
179 committee. The committee shall seek the advice and participation of
180 any person, organization or state or federal agency it deems necessary
181 to carry out the provisions of this section.

182 Sec. 6. Subsection (a) of section 17b-338 of the general statutes is
183 repealed and the following is substituted in lieu thereof (*Effective July*
184 *1, 2009*):

185 (a) There is established a Long-Term Care Advisory Council which
186 shall consist of the following: (1) The executive director of the
187 Commission on Aging, or the executive director's designee; (2) the
188 State Nursing Home Ombudsman, or the ombudsman's designee; (3)
189 the president of the Coalition of Presidents of Resident Councils, or the
190 president's designee; (4) the executive director of the Legal Assistance
191 Resource Center of Connecticut, or the executive director's designee;
192 (5) the state president of AARP, or the president's designee; (6) one
193 representative of a bargaining unit for health care employees,
194 appointed by the president of the bargaining unit; (7) the president of
195 the Connecticut Association of Not-For-Profit Providers for the Aging,
196 or the president's designee; (8) the president of the Connecticut
197 Association of Health Care Facilities, or the president's designee; (9)
198 the president of the Connecticut Association of Residential Care
199 Homes, or the president's designee; (10) the president of the
200 Connecticut Hospital Association or the president's designee; (11) the
201 executive director of the Connecticut Assisted Living Association or
202 the executive director's designee; (12) the executive director of the
203 Connecticut Association for Homecare or the executive director's
204 designee; (13) the president of Connecticut Community Care, Inc. or
205 the president's designee; (14) one member of the Connecticut
206 Association of Area Agencies on Aging appointed by the agency; (15)
207 the president of the Connecticut chapter of the Connecticut
208 Alzheimer's Association; (16) one member of the Connecticut
209 Association of Adult Day Centers appointed by the association; (17)
210 the president of the Connecticut Chapter of the American College of
211 Health Care Administrators, or the president's designee; (18) the
212 president of the Connecticut Council for Persons with Disabilities, or
213 the president's designee; (19) the president of the Connecticut
214 Association of Community Action Agencies, or the president's
215 designee; (20) a personal care attendant appointed by the speaker of
216 the House of Representatives; (21) the president of the Family Support
217 Council, or the president's designee; (22) a person who, in a home
218 setting, cares for a person with a disability and is appointed by the
219 president pro tempore of the Senate; (23) three persons with a

220 disability appointed one each by the majority leader of the House of
221 Representatives, the majority leader of the Senate and the minority
222 leader of the House of Representatives; (24) a legislator who is a
223 member of the Long-Term Care Planning Committee; [and] (25) one
224 member who is a nonunion home health aide appointed by the
225 minority leader of the Senate; and (26) the Commissioner on Aging, or
226 the commissioner's designee.

227 Sec. 7. Subsection (i) of section 17b-342 of the general statutes is
228 repealed and the following is substituted in lieu thereof (*Effective July*
229 *1, 2009*):

230 (i) (1) On and after July 1, 1992, the Commissioner [of Social
231 Services] on Aging shall, within available appropriations, administer a
232 state-funded portion of the program for persons (A) who are sixty-five
233 years of age and older; (B) who are inappropriately institutionalized or
234 at risk of inappropriate institutionalization; (C) whose income is less
235 than or equal to the amount allowed under subdivision (3) of
236 subsection (a) of this section; and (D) whose assets, if single, do not
237 exceed the minimum community spouse protected amount pursuant
238 to Section 4022.05 of the [department's] Department of Social Services'
239 uniform policy manual or, if married, the couple's assets do not exceed
240 one hundred fifty per cent of said community spouse protected
241 amount and on and after April 1, 2007, whose assets, if single, do not
242 exceed one hundred fifty per cent of the minimum community spouse
243 protected amount pursuant to Section 4022.05 of the [department's]
244 Department of Social Services' uniform policy manual or, if married,
245 the couple's assets do not exceed two hundred per cent of said
246 community spouse protected amount.

247 (2) Any person whose income exceeds two hundred per cent of the
248 federal poverty level shall contribute to the cost of care in accordance
249 with the methodology established for recipients of medical assistance
250 pursuant to Sections 5035.20 and 5035.25 of the [department's]
251 Department of Social Services' uniform policy manual.

252 (3) On and after June 30, 1992, the program shall serve persons
253 receiving state-funded home and community-based services from the
254 department, persons receiving services under the promotion of
255 independent living for the elderly program operated by the
256 Department of Social Services, regardless of age, and persons receiving
257 services on June 19, 1992, under the home care demonstration project
258 operated by the Department of Social Services. Such persons receiving
259 state-funded services whose income and assets exceed the limits
260 established pursuant to subdivision (1) of this subsection may continue
261 to participate in the program, but shall be required to pay the total cost
262 of care, including case management costs.

263 (4) Services shall not be increased for persons who received services
264 under the promotion of independent living for the elderly program
265 over the limits in effect under said program in the fiscal year ending
266 June 30, 1992, unless a person's needs increase and the person is
267 eligible for Medicaid.

268 (5) The annualized cost of services provided to an individual under
269 the state-funded portion of the program shall not exceed fifty per cent
270 of the weighted average cost of care in nursing homes in the state,
271 except an individual who received services costing in excess of such
272 amount under the Department of Social Services in the fiscal year
273 ending June 30, 1992, may continue to receive such services, provided
274 the annualized cost of such services does not exceed eighty per cent of
275 the weighted average cost of such nursing home care. The
276 commissioner may allow the cost of services provided to an individual
277 to exceed the maximum cost established pursuant to this subdivision
278 in a case of extreme hardship, as determined by the commissioner,
279 provided in no case shall such cost exceed that of the weighted cost of
280 such nursing home care.

281 Sec. 8. Section 17b-342a of the general statutes is repealed and the
282 following is substituted in lieu thereof (*Effective July 1, 2009*):

283 (a) The Commissioner [of Social Services] on Aging shall, within

284 available appropriations, establish and operate a state-funded pilot
285 program to allow persons who are sixty-five years of age or older and
286 meet the eligibility requirements of the Connecticut home-care
287 program for the elderly established under section 17b-342, as amended
288 by this act, to receive personal care assistance provided such services
289 are cost effective as determined by the Commissioner [of Social
290 Services] on Aging. Persons who receive personal care assistance
291 services pursuant to the pilot program established by section 47 of
292 public act 00-2 of the June special session* shall be included as
293 participants of the pilot program established pursuant to this section.
294 Personal care assistance under the program may be provided by
295 nonspousal family members of the recipient of services under the
296 program.

297 (b) In conducting the pilot program, the commissioner or the
298 commissioner's agent (1) may require as a condition of participation
299 that participants in the pilot program disclose if a personal care
300 assistant is a nonspousal family member, (2) shall monitor the
301 provision of services under the pilot program, and (3) shall ensure the
302 cost-effectiveness of the pilot program.

303 (c) The commissioner shall establish the maximum allowable rate to
304 be paid for such services under the pilot program and may set a
305 separate lower rate for nonspousal family members providing services
306 as personal care assistants in the pilot program if deemed necessary by
307 the commissioner to ensure cost effectiveness of the pilot program and
308 to conduct the pilot program within available appropriations.

309 [(d) Not later than January 1, 2007, the Commissioner of Social
310 Services shall submit a report on the pilot program to the joint
311 standing committees of the General Assembly having cognizance of
312 matters relating to appropriations and human services and to the select
313 committee of the General Assembly having cognizance of matters
314 relating to aging. The report shall include information on the quality of
315 services provided under the pilot program and shall be submitted in
316 accordance with section 11-4a.]

317 Sec. 9. Section 17b-349e of the general statutes is repealed and the
318 following is substituted in lieu thereof (*Effective July 1, 2009*):

319 (a) As used in this section:

320 (1) "Respite care services" means support services which provide
321 short-term relief from the demands of ongoing care for an individual
322 with Alzheimer's disease.

323 (2) "Caretaker" means a person who has the responsibility for the
324 care of an individual with Alzheimer's disease or has assumed the
325 responsibility for such individual voluntarily, by contract or by order
326 of a court of competent jurisdiction.

327 (3) "Copayment" means a payment made by or on behalf of an
328 individual with Alzheimer's disease for respite care services.

329 (4) "Individual with Alzheimer's disease" means an individual with
330 Alzheimer's disease or related disorders.

331 (b) The Commissioner [of Social Services] on Aging shall establish a
332 [demonstration] program, within available appropriations, to provide
333 respite care services for caretakers of individuals with Alzheimer's
334 disease, provided such individuals with Alzheimer's disease meet the
335 requirements set forth in subsection (c) of this section. Such respite
336 care services may include, but need not be limited to (1) homemaker
337 services; (2) adult day care; (3) temporary care in a licensed medical
338 facility; (4) home-health care; or (5) companion services. Such respite
339 care services may be administered directly by the department, or
340 through contracts for services with providers of such services, or by
341 means of direct subsidy to caretakers of individuals with Alzheimer's
342 disease to purchase such services.

343 (c) (1) No individual with Alzheimer's disease may participate in the
344 program if such individual (A) has an annual income of more than
345 thirty thousand dollars or liquid assets of more than eighty thousand
346 dollars, or (B) is receiving services under the Connecticut home-care

347 program for the elderly.

348 (2) No individual with Alzheimer's disease who participates in the
349 program may receive more than three thousand five hundred dollars
350 for services under the program in any fiscal year or receive more than
351 thirty days of out-of-home respite care services other than adult day
352 care services under the program in any fiscal year.

353 (3) The commissioner may require an individual with Alzheimer's
354 disease who participates in the program to pay a copayment for respite
355 care services under the program, except the commissioner may waive
356 such copayment upon demonstration of financial hardship by such
357 individual.

358 (d) The commissioner shall adopt regulations in accordance with the
359 provisions of chapter 54 to implement the provisions of this section.
360 Such regulations shall include, but need not be limited to (1) standards
361 for eligibility for respite care services; (2) the basis for priority in
362 receiving services; (3) qualifications and requirements of providers,
363 which shall include specialized training in Alzheimer's disease,
364 dementia and related disorders; (4) a requirement that providers
365 accredited by the Joint Commission on the Accreditation of Healthcare
366 Organizations, when available, receive preference in contracting for
367 services; (5) provider reimbursement levels; (6) limits on services and
368 cost of services; and (7) a fee schedule for copayments.

369 [(e) The Commissioner of Social Services may allocate any funds
370 appropriated in excess of five hundred thousand dollars for the
371 demonstration program among the five area agencies on aging
372 according to need, as determined by said commissioner.]

373 Sec. 10. Section 17b-365 of the general statutes is repealed and the
374 following is substituted in lieu thereof (*Effective July 1, 2009*):

375 [(a)] The Commissioner [of Social Services] on Aging may, within
376 available appropriations, establish and operate a pilot program to
377 allow individuals to receive assisted living services, provided by an

378 assisted living services agency licensed by the Department of Public
379 Health in accordance with chapter 368v. In order to be eligible for the
380 program, an individual shall: (1) Reside in a managed residential
381 community, as defined in section 19a-693; (2) be ineligible to receive
382 assisted living services under any other assisted living pilot program
383 established by the General Assembly; and (3) be eligible for services
384 under the Medicaid waiver portion of the Connecticut home-care
385 program for the elderly established under section 17b-342, as amended
386 by this act. The total number of individuals enrolled in said pilot
387 program, when combined with the total number of individuals
388 enrolled in the pilot program established pursuant to section 17b-366,
389 as amended by this act, shall not exceed seventy-five individuals. The
390 Commissioner [of Social Services] on Aging shall operate said pilot
391 program in accordance with the Medicaid rules established pursuant
392 to 42 USC 1396p(c), as from time to time amended.

393 [(b) The pilot program established pursuant to this section may
394 begin operation on or after January 1, 2003. Not later than January 1,
395 2005, the Commissioner of Social Services shall report, in accordance
396 with section 11-4a, to the joint standing committees of the General
397 Assembly having cognizance of matters relating to public health,
398 human services, appropriations and the budgets of state agencies on
399 the pilot program.]

400 Sec. 11. Section 17b-366 of the general statutes is repealed and the
401 following is substituted in lieu thereof (*Effective July 1, 2009*):

402 [(a)] The Commissioner [of Social Services] on Aging may, within
403 available appropriations, establish and operate a pilot program to
404 allow individuals to receive assisted living services, provided by an
405 assisted living services agency licensed by the Department of Public
406 Health, in accordance with chapter 368v. In order to be eligible for the
407 pilot program, an individual shall: (1) Reside in a managed residential
408 community, as defined in section 19a-693; (2) be ineligible to receive
409 assisted living services under any other assisted living pilot program
410 established by the General Assembly; and (3) be eligible for services

411 under the state-funded portion of the Connecticut home-care program
412 for the elderly established under section 17b-342, as amended by this
413 act. The total number of individuals enrolled in said pilot program,
414 when combined with the total number of individuals enrolled in the
415 pilot program established pursuant to section 17b-365, as amended by
416 this act, shall not exceed seventy-five individuals. The Commissioner
417 [of Social Services] on Aging shall operate said pilot program in
418 accordance with the Medicaid rules established pursuant to 42 USC
419 1396p(c), as from time to time amended.

420 [(b) The pilot program established pursuant to this section may
421 begin operation on or after January 1, 2003. Not later than January 1,
422 2005, the Commissioner of Social Services shall report, in accordance
423 with section 11-4a, to the joint standing committees of the General
424 Assembly having cognizance of matters relating to public health,
425 human services, appropriations and the budgets of state agencies on
426 the pilot program.]

427 Sec. 12. Section 17b-400 of the general statutes is repealed and the
428 following is substituted in lieu thereof (*Effective July 1, 2009*):

429 (a) As used in this chapter:

430 (1) "State agency" means the [Division of Elderly Services of the
431 Department of Social Services] State Department on Aging.

432 (2) "Office" means the Office of the Long-Term Care Ombudsman
433 established in this section.

434 (3) "State Ombudsman" means the State Ombudsman established in
435 this section.

436 (4) "Program" means the long-term care ombudsman program
437 established in this section.

438 (5) "Representative" includes a regional ombudsman, a residents'
439 advocate or an employee of the Office of the Long-Term Care
440 Ombudsman who is individually designated by the ombudsman.

441 (6) "Resident" means an older individual who resides in or is a
442 patient in a long-term care facility who is sixty years of age or older.

443 (7) "Long-term care facility" means any skilled nursing facility, as
444 defined in Section 1819(a) of the Social Security Act, (42 USC 1395i-
445 3(a)) any nursing facility, as defined in Section 1919(a) of the Social
446 Security Act, (42 USC 1396r(a)) a board and care facility as defined in
447 Section 102(19) of the federal Older Americans Act, (42 USC 3002(19))
448 and for purposes of ombudsman program coverage, an institution
449 regulated by the state pursuant to Section 1616(e) of the Social Security
450 Act, (42 USC 1382e(e)) and any other adult care home similar to a
451 facility or nursing facility or board and care home.

452 (8) "Commissioner" means the Commissioner [of Social Services] on
453 Aging.

454 [(9) "Director" means the director of the Division of Elderly Services
455 of the Department of Social Services.]

456 [(10)] (9) "Applicant" means an older individual who has applied for
457 admission to a long-term care facility.

458 (b) There is established an independent Office of the Long-Term
459 Care Ombudsman within the State Department [of Social Services] on
460 Aging. The Commissioner [of Social Services] on Aging shall appoint a
461 State Ombudsman who shall be selected from among individuals with
462 expertise and experience in the fields of long-term care and advocacy
463 to head the office and the State Ombudsman shall appoint assistant
464 regional ombudsmen. In the event the State Ombudsman or an
465 assistant regional ombudsman is unable to fulfill the duties of the
466 office, the commissioner shall appoint an acting State Ombudsman and
467 the State Ombudsman shall appoint an acting assistant regional
468 ombudsman.

469 (c) Notwithstanding the provisions of subsection (b) of this section,
470 on and after July 1, 1990, the positions of State Ombudsman and
471 regional ombudsmen shall be classified service positions. The State

472 Ombudsman and regional ombudsmen holding said positions on said
473 date shall continue to serve in their positions as if selected through
474 classified service procedures. As vacancies occur in such positions
475 thereafter, such vacancies shall be filled in accordance with classified
476 service procedures.

477 Sec. 13. Section 17b-405 of the general statutes is repealed and the
478 following is substituted in lieu thereof (*Effective July 1, 2009*):

479 The regional ombudsmen shall, in accordance with the policies and
480 procedures established by the Office of the Long-Term Care
481 Ombudsman and the [director] commissioner:

482 (1) Provide services to protect the health, safety, welfare and rights
483 of residents;

484 (2) Ensure that residents in service areas have regular timely access
485 to representatives of the program and timely responses to complaints
486 and requests for assistance;

487 (3) Identify, investigate and resolve complaints made by or on
488 behalf of residents that relate to action, inaction or decisions that may
489 adversely affect the health, safety, welfare or rights of the residents or
490 by, or on behalf of, applicants in relation to issues concerning
491 applications to long-term care facilities;

492 (4) Represent the interests of residents and applicants, in relation to
493 their applications to long-term care facilities, before government
494 agencies and seek administrative, legal and other remedies to protect
495 the health, safety, welfare and rights of the residents;

496 (5) (A) Review and, if necessary, comment on any existing and
497 proposed laws, regulations and other government policies and actions
498 that pertain to the rights and well-being of residents and applicants in
499 relation to their applications to long-term care facilities, and (B)
500 facilitate the ability of the public to comment on the laws, regulations,
501 policies and actions;

502 (6) Support the development of resident and family councils; and

503 (7) Carry out other activities that the State Ombudsman determines
504 to be appropriate.

505 Sec. 14. Subsection (c) of section 17b-406 of the general statutes is
506 repealed and the following is substituted in lieu thereof (*Effective July*
507 *1, 2009*):

508 (c) The Commissioner [of Social Services] on Aging shall have
509 authority to seek funding for the purposes contained in this section
510 from public and private sources, including, but not limited to, any
511 federal or state funded programs.

512 Sec. 15. Section 17b-407 of the general statutes is repealed and the
513 following is substituted in lieu thereof (*Effective July 1, 2009*):

514 (a) Any physician or surgeon licensed under the provisions of
515 chapter 370, any resident physician or intern in any hospital in this
516 state, whether or not so licensed, and any registered nurse, licensed
517 practical nurse, medical examiner, dentist, optometrist, chiropractor,
518 podiatrist, social worker, clergyman, police officer, pharmacist,
519 physical therapist, long-term care facility administrator, nurse's aide or
520 orderly in a long-term care facility, any person paid for caring for a
521 patient in a long-term care facility, any staff person employed by a
522 long-term care facility and any person who is a sexual assault
523 counselor or a battered women's counselor as defined in section
524 52-146k who has reasonable cause to suspect or believe that a resident
525 in a long-term care facility has been abused, neglected, exploited or
526 abandoned, or is in a condition that is the result of such abuse, neglect,
527 exploitation or abandonment, shall, not later than seventy-two hours
528 after such suspicion or belief arose, report such information or cause a
529 report to be made in any reasonable manner to the Commissioner [of
530 Social Services] on Aging pursuant to chapter 319dd. Any person
531 required to report under the provision of this section who fails to make
532 such report within the prescribed time period shall be fined not more
533 than five hundred dollars, except that, if such person intentionally fails

534 to make such report within the prescribed time period, such person
535 shall be guilty of a class C misdemeanor for the first offense and a class
536 A misdemeanor for any subsequent offense.

537 (b) Such report shall contain the name and address of the long-term
538 care facility, the name of the involved resident, information regarding
539 the nature and extent of the abuse, neglect, exploitation or
540 abandonment and any other information which the reporter believes
541 might be helpful in an investigation of the case and for the protection
542 of the resident.

543 (c) Any other person having reasonable cause to believe that a
544 resident in a long-term care facility is being, or has been, abused,
545 neglected, exploited or abandoned, or any person who wishes to file
546 any other complaint regarding a long-term care facility, shall report
547 such information in accordance with subsection (b) of this section in
548 any reasonable manner to the Commissioner [of Social Services] on
549 Aging who shall inform the resident of the services of the Office of the
550 Long-Term Care Ombudsman.

551 (d) Such report or complaint shall not be deemed a public record,
552 and shall not be subject to the provisions of section 1-210. Information
553 derived from such reports or complaints for which reasonable grounds
554 are determined to exist after investigation as provided for in section
555 17b-408, including the identity of the long-term care facility, the
556 number of complaints received, the number of complaints
557 substantiated and the types of complaints, may be disclosed by the
558 Commissioner [of Social Services] on Aging, except that in no case
559 shall the name of the resident or the complainant be revealed, unless
560 such person specifically requests such disclosure or unless a judicial
561 proceeding results from such report or complaint.

562 (e) Any person who makes a report or complaint pursuant to this
563 section or who testifies in any administrative or judicial proceeding
564 arising from the report shall be immune from any civil or criminal
565 liability on account of such report or complaint or testimony, except

566 for liability for perjury, unless such person acted in bad faith or with
567 malicious purpose.

568 (f) Any person who is discharged or in any manner discriminated or
569 retaliated against for making, in good faith, a report or complaint
570 pursuant to this section shall be entitled to all remedies available
571 under law including, but not limited to, remedies available under
572 sections 19a-532 and 31-51m, as applicable.

573 (g) The person filing a report or complaint pursuant to the
574 provisions of this section shall be notified of the findings of any
575 investigation conducted by the Commissioner [of Social Services] on
576 Aging, upon request.

577 (h) The Commissioner [of Social Services] on Aging shall maintain a
578 registry of the reports received, the investigations made, the findings
579 and the actions recommended and taken.

580 Sec. 16. Section 17b-411 of the general statutes is repealed and the
581 following is substituted in lieu thereof (*Effective July 1, 2009*):

582 The Commissioner [of Social Services] on Aging, after consultation
583 with the State Ombudsman, shall adopt regulations in accordance with
584 the provisions of chapter 54, to carry out the provisions of sections
585 17b-400 to 17b-412, inclusive, as amended by this act, 19a-531 and
586 19a-532.

587 Sec. 17. Section 17b-412 of the general statutes is repealed and the
588 following is substituted in lieu thereof (*Effective July 1, 2009*):

589 The [director] commissioner shall require the State Ombudsman to:

590 (1) Prepare an annual report:

591 (A) Describing the activities carried out by the office in the year for
592 which the report is prepared;

593 (B) Containing and analyzing the data collected under section 17b-

594 413, as amended by this act:

595 (C) Evaluating the problems experienced by and the complaints
596 made by or on behalf of residents;

597 (D) Containing recommendations for (i) improving the quality of
598 the care and life of the residents, and (ii) protecting the health, safety,
599 welfare and rights of the residents;

600 (E) (i) Analyzing the success of the program including success in
601 providing services to residents of long-term care facilities; and (ii)
602 identifying barriers that prevent the optimal operation of the program;
603 and

604 (F) Providing policy, regulatory and legislative recommendations to
605 solve identified problems, to resolve the complaints, to improve the
606 quality of the care and life of residents, to protect the health, safety,
607 welfare and rights of residents and to remove the barriers that prevent
608 the optimal operation of the program.

609 (2) Analyze, comment on and monitor the development and
610 implementation of federal, state and local laws, regulations and other
611 government policies and actions that pertain to long-term care facilities
612 and services, and to the health, safety, welfare and rights of residents
613 in the state, and recommend any changes in such laws, regulations and
614 policies as the office determines to be appropriate.

615 (3) (A) Provide such information as the office determines to be
616 necessary to public and private agencies, legislators and other persons,
617 regarding (i) the problems and concerns of older individuals residing
618 in long-term care facilities; and (ii) recommendations related to the
619 problems and concerns; and (B) make available to the public and
620 submit to the federal assistant secretary for aging, the Governor, the
621 General Assembly, the Department of Public Health and other
622 appropriate governmental entities, each report prepared under
623 subdivision (1) of this section.

624 Sec. 18. Section 17b-427 of the general statutes is repealed and the
625 following is substituted in lieu thereof (*Effective July 1, 2009*):

626 (a) As used in this section:

627 (1) "CHOICES" means Connecticut's programs for health insurance
628 assistance, outreach, information and referral, counseling and
629 eligibility screening;

630 (2) "CHOICES health insurance assistance program" means the
631 federally recognized state health insurance assistance program funded
632 pursuant to P.L. 101-508 and administered by the State Department [of
633 Social Services] on Aging, in conjunction with the area agencies on
634 aging and the Center for Medicare Advocacy, that provides free
635 information and assistance related to health insurance issues and
636 concerns of older persons and other Medicare beneficiaries in
637 Connecticut; and

638 (3) "Medicare organization" means any corporate entity or other
639 organization or group that contracts with the federal Centers for
640 Medicare and Medicaid Services to provide health care services to
641 Medicare beneficiaries in this state as an alternative to the traditional
642 Medicare fee-for-service plan.

643 (b) The State Department [of Social Services] on Aging shall
644 administer the CHOICES health insurance assistance program, which
645 shall be a comprehensive Medicare advocacy program that provides
646 assistance to Connecticut residents who are Medicare beneficiaries.
647 The program shall: (1) Maintain a toll-free telephone number to
648 provide advice and information on Medicare benefits, including
649 prescription drug benefits available through the Medicare Part D
650 program, the Medicare appeals process, health insurance matters
651 applicable to Medicare beneficiaries and long-term care options
652 available in the state at least five days per week during normal
653 business hours; (2) provide information, advice and representation,
654 where appropriate, concerning the Medicare appeals process, by a
655 qualified attorney or paralegal at least five days per week during

656 normal business hours; (3) prepare and distribute written materials to
657 Medicare beneficiaries, their families, senior citizens and organizations
658 regarding Medicare benefits, including prescription drug benefits
659 available through the Medicare Part D program and long-term care
660 options available in the state; (4) develop and distribute a Connecticut
661 Medicare consumers guide, after consultation with the Insurance
662 Commissioner and other organizations involved in servicing,
663 representing or advocating for Medicare beneficiaries, which shall be
664 available to any individual, upon request, and shall include: (A)
665 Information permitting beneficiaries to compare their options for
666 delivery of Medicare services; (B) information concerning the Medicare
667 plans available to beneficiaries, including the traditional Medicare fee-
668 for-service plan, Medicare Part D plans and the benefits and services
669 available through each plan; (C) information concerning the procedure
670 to appeal a denial of care and the procedure to request an expedited
671 appeal of a denial of care; (D) information concerning private
672 insurance policies and federal and state-funded programs that are
673 available to supplement Medicare coverage for beneficiaries; (E) a
674 worksheet for beneficiaries to use to evaluate the various plans,
675 including Medicare Part D programs; and (F) any other information
676 the program deems relevant to beneficiaries; (5) collaborate with other
677 state agencies and entities in the development of consumer-oriented
678 websites that provide information on Medicare plans, including
679 Medicare Part D plans, and long-term care options that are available in
680 the state; and (6) include any functions the department deems
681 necessary to conform to federal grant requirements.

682 (c) The Insurance Commissioner, in cooperation with, or on behalf
683 of, the Commissioner [of Social Services] on Aging, may require each
684 Medicare organization to: (1) Annually submit to the commissioner
685 any data, reports or information relevant to plan beneficiaries; and (2)
686 at any other times at which changes occur, submit information to the
687 commissioner concerning current benefits, services or costs to
688 beneficiaries. Such information may include information required
689 under section 38a-478c.

690 (d) Each Medicare organization that fails to file the annual data,
691 reports or information requested pursuant to subsection (c) of this
692 section shall pay a late fee of one hundred dollars per day for each day
693 from the due date of such data, reports or information to the date of
694 filing. Each Medicare organization that files incomplete annual data,
695 reports or information shall be so informed by the Insurance
696 Commissioner, shall be given a date by which to remedy such
697 incomplete filing and shall pay said late fee commencing from the new
698 due date.

699 (e) Not later than June 1, 2001, and annually thereafter, the
700 Insurance Commissioner, in conjunction with the Healthcare
701 Advocate, shall submit to the Governor and to the joint standing
702 committees of the General Assembly having cognizance of matters
703 relating to human services and insurance and to the select committee
704 of the General Assembly having cognizance of matters relating to
705 aging, a list of those Medicare organizations that have failed to file any
706 data, reports or information requested pursuant to subsection (c) of
707 this section.

708 (f) All hospitals, as defined in section 19a-490, which treat persons
709 covered by Medicare Part A shall: (1) Notify incoming patients covered
710 by Medicare of the availability of the services established pursuant to
711 subsection (b) of this section, (2) post or cause to be posted in a
712 conspicuous place therein the toll-free number established pursuant to
713 subsection (b) of this section, and (3) provide each Medicare patient
714 with the toll-free number and information on how to access the
715 CHOICES program.

716 Sec. 19. Section 17b-429 of the general statutes is repealed and the
717 following is substituted in lieu thereof (*Effective July 1, 2009*):

718 The Commissioner of Social Services, in consultation with the
719 Commissioner on Aging, shall, within available appropriations, make
720 information available to senior citizens and disabled persons
721 concerning any pharmaceutical company's drug program for indigent

722 persons by utilizing the ConnPACE program, the CHOICES health
723 insurance assistance program, as defined in section 17b-427, and
724 Infoline of Connecticut to deliver such information.

725 Sec. 20. Section 17b-421 of the general statutes is repealed and the
726 following is substituted in lieu thereof (*Effective July 1, 2009*):

727 The state shall be divided into five elderly planning and service
728 areas, in accordance with federal law and regulations, each having an
729 area agency on aging to carry out the mandates of the federal Older
730 Americans Act of 1965, as amended. The area agencies shall (1)
731 represent elderly persons within their geographic areas, (2) develop an
732 area plan for approval by the State Department [of Social Services] on
733 Aging and upon such approval administer the plan, (3) coordinate and
734 assist local public and nonprofit, private agencies in the development
735 of programs, (4) receive and distribute federal and state funds for such
736 purposes, in accordance with applicable law, and (5) carry out any
737 additional duties and functions required by federal law and
738 regulations.

739 Sec. 21. Section 17b-422 of the general statutes is repealed and the
740 following is substituted in lieu thereof (*Effective July 1, 2009*):

741 (a) The State Department [of Social Services] on Aging shall
742 equitably allocate, in accordance with federal law, federal funds
743 received under Title IIIB and IIIC of the Older Americans Act to the
744 five area agencies on aging established pursuant to section 17b-421.
745 The department, before seeking federal approval to spend any amount
746 above that allotted for administrative expenses under said act, shall
747 inform the joint standing committee of the General Assembly having
748 cognizance of matters relating to human services that it is seeking such
749 approval.

750 (b) Sixty per cent of the state funds appropriated to the five area
751 agencies on aging for elderly nutrition and social services shall be
752 allocated in the same proportion as allocations made pursuant to
753 subsection (a) of this section. Forty per cent of all state funds

754 appropriated to the five area agencies on aging for elderly nutrition
755 and social services used for purposes other than the required
756 nonfederal matching funds shall be allocated at the discretion of the
757 Commissioner [of Social Services] on Aging, in consultation with the
758 five area agencies on aging, based on their need for such funds. Any
759 state funds appropriated to the five area agencies on aging for
760 administrative expenses shall be allocated equally.

761 (c) The State Department [of Social Services] on Aging, in
762 consultation with the five area agencies on aging, shall review the
763 method of allocation set forth in subsection (a) of this section and shall
764 report any findings or recommendations to the joint standing
765 committees of the General Assembly having cognizance of matters
766 relating to appropriations and the budgets of state agencies and
767 human services.

768 (d) An area agency may request a person participating in the elderly
769 nutrition program to pay a voluntary fee for meals furnished, except
770 that no eligible person shall be denied a meal due to an inability to pay
771 such fee.

772 Sec. 22. Section 17b-423 of the general statutes is repealed and the
773 following is substituted in lieu thereof (*Effective July 1, 2009*):

774 (a) The State Department [of Social Services] on Aging shall prepare
775 and routinely update a community services policy manual. The pages
776 of such manual shall be consecutively numbered and indexed,
777 containing all departmental policy regulations and substantive
778 procedure. Such manual shall be published by the department and
779 distributed so that it is available to all district, subdistrict and field
780 offices of the Department of Social Services. The Department of Social
781 Services shall adopt such policy manual in regulation form in
782 accordance with the provisions of chapter 54. The department may
783 operate under any new policy necessary to conform to a requirement
784 of a federal or joint state and federal program. The department may
785 operate under any new policy while it is in the process of adopting the

786 policy in regulation form, provided the Department of Social Services
787 prints notice of intent to adopt the regulations in the Connecticut Law
788 Journal within twenty days after adopting the policy. Such policy shall
789 be valid until the time final regulations are effective.

790 (b) The State Department [of Social Services] on Aging shall write
791 the community services policy manual using plain language as
792 described in section 42-152. The manual shall include an index for
793 frequent referencing and a separate section or manual which specifies
794 procedures to follow to clarify policy.

795 Sec. 23. Section 17b-424 of the general statutes is repealed and the
796 following is substituted in lieu thereof (*Effective July 1, 2009*):

797 The Commissioner [of Social Services] on Aging shall establish an
798 adult foster care program which shall provide room, board and
799 personal care services in a home or substantially equivalent
800 environment to elderly persons who volunteer and may otherwise be
801 placed in a nursing home or who are inappropriately institutionalized.
802 The commissioner shall adopt regulations, in accordance with the
803 provisions of chapter 54, to administer this program.

804 Sec. 24. Section 17b-425 of the general statutes is repealed and the
805 following is substituted in lieu thereof (*Effective July 1, 2009*):

806 The State Department [of Social Services] on Aging may make a
807 grant to any city, town or borough or public or private agency,
808 organization or institution for the following purposes: (a) For
809 community planning and coordination of programs carrying out the
810 purposes of the Older Americans Act of 1965, as amended; (b) for
811 demonstration programs or activities particularly valuable in carrying
812 out such purposes; (c) for training of special personnel needed to carry
813 out such programs and activities; (d) for establishment of new or
814 expansion of existing programs to carry out such purposes, including
815 establishment of new or expansion of existing centers of service for
816 elderly persons, providing recreational, cultural and other leisure time
817 activities, and informational, transportation, referral and preretirement

818 and postretirement counseling services for elderly persons and
819 assisting such persons in providing volunteer community or civic
820 services, except that no costs of construction, other than for minor
821 alterations and repairs, shall be included in such establishment or
822 expansion; (e) for programs to develop or demonstrate approaches,
823 methods and techniques for achieving or improving coordination of
824 community services for elderly or aging persons and such other
825 programs and services as may be allowed under Title III of the Older
826 Americans Act of 1965, as amended, or to evaluate these approaches,
827 techniques and methods, as well as others which may assist elderly or
828 aging persons to enjoy wholesome and meaningful living and to
829 continue to contribute to the strength and welfare of the state and
830 nation.

831 Sec. 25. Section 17b-426 of the general statutes is repealed and the
832 following is substituted in lieu thereof (*Effective July 1, 2009*):

833 The State Department [of Social Services] on Aging may use moneys
834 appropriated for the purposes of section 17b-425 for the expenses of
835 administering the grant program under said section, provided the total
836 of such moneys so used shall not exceed five per cent of the moneys so
837 appropriated.

838 Sec. 26. Subsection (a) of section 17b-792 of the general statutes is
839 repealed and the following is substituted in lieu thereof (*Effective July*
840 *1, 2009*):

841 (a) The State Department [of Social Services] on Aging shall be
842 responsible for the administration of programs which provide
843 nutritionally sound diets to needy elderly persons and for the
844 expansion of such programs when possible. Such programs shall be
845 continued in such a manner as to fully utilize congregate feeding and
846 nutrition education of elderly citizens who qualify for such program.

847 Sec. 27. Section 17b-413 of the general statutes is repealed and the
848 following is substituted in lieu thereof (*Effective July 1, 2009*):

849 The [state agency] Commissioner on Aging shall establish a state-
 850 wide uniform system to: (1) [Collect and] Document reports received,
 851 the investigations made, the findings and the actions recommended
 852 and taken; (2) analyze data relating to complaints and conditions in
 853 long-term care facilities and to residents for the purpose of identifying
 854 and resolving significant problems; and [(2)] (3) submit the data, on a
 855 regular basis to: (A) The Department of Public Health; (B) other state
 856 and federal entities that the State Ombudsman determines to be
 857 appropriate; [and] (C) the National Ombudsman Resource Center,
 858 established in Section 202(a)(21) of the federal Older Americans Act of
 859 1965, as amended from time to time; and (D) the Department of Social
 860 Services.

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>July 1, 2009</i>	4-5
Sec. 2	<i>July 1, 2009</i>	17a-317
Sec. 3	<i>July 1, 2009</i>	17b-1
Sec. 4	<i>July 1, 2009</i>	17b-4(b)
Sec. 5	<i>July 1, 2009</i>	17b-337(c)
Sec. 6	<i>July 1, 2009</i>	17b-338(a)
Sec. 7	<i>July 1, 2009</i>	17b-342(i)
Sec. 8	<i>July 1, 2009</i>	17b-342a
Sec. 9	<i>July 1, 2009</i>	17b-349e
Sec. 10	<i>July 1, 2009</i>	17b-365
Sec. 11	<i>July 1, 2009</i>	17b-366
Sec. 12	<i>July 1, 2009</i>	17b-400
Sec. 13	<i>July 1, 2009</i>	17b-405
Sec. 14	<i>July 1, 2009</i>	17b-406(c)
Sec. 15	<i>July 1, 2009</i>	17b-407
Sec. 16	<i>July 1, 2009</i>	17b-411
Sec. 17	<i>July 1, 2009</i>	17b-412
Sec. 18	<i>July 1, 2009</i>	17b-427
Sec. 19	<i>July 1, 2009</i>	17b-429
Sec. 20	<i>July 1, 2009</i>	17b-421
Sec. 21	<i>July 1, 2009</i>	17b-422
Sec. 22	<i>July 1, 2009</i>	17b-423
Sec. 23	<i>July 1, 2009</i>	17b-424

Sec. 24	<i>July 1, 2009</i>	17b-425
Sec. 25	<i>July 1, 2009</i>	17b-426
Sec. 26	<i>July 1, 2009</i>	17b-792(a)
Sec. 27	<i>July 1, 2009</i>	17b-413

AGE

Joint Favorable Subst. C/R

GAE