



A nonpartisan research and public policy office of the Connecticut General Assembly

Testimony of

Connecticut Commission on Aging

Aging Committee

March 13, 2012

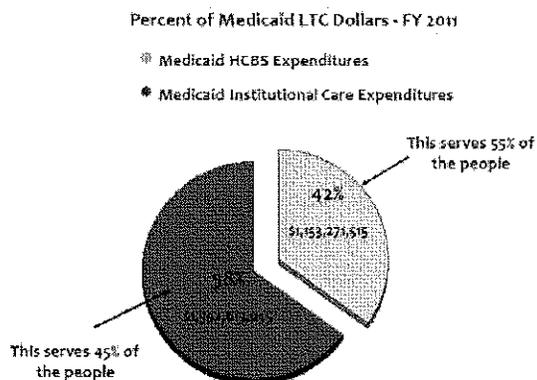
Thank you for this opportunity to comment on a number of bills before you today.

As you know, the Connecticut Commission on Aging is the nonpartisan state agency devoted to preparing Connecticut for a significantly changed demographic and enhancing the lives of the present and future generations of older adults. For almost twenty years, the Commission has served as an effective leader in statewide efforts to promote choice, independence and dignity for Connecticut’s older adults and persons with disabilities. I’d like to thank this committee for its ongoing leadership and collaboration in these efforts.

In these difficult budget times, research-based initiatives, statewide planning efforts, vision and creative thinking are all needed. The Connecticut Commission on Aging stands ready to assist our state in finding solutions to our fiscal problems, while keeping commitments to critical programs and services.

SB 374: An Act Increasing Funding and Support for Home and Community-Based Care for the Elderly and Alzheimer’s Patients
~ CoA Informs

This bill would mandate a study to determine funding available to elderly persons and persons with Alzheimer’s disease for care at home or in the community. The CoA is fully supportive of increased funding for home and community based supports for older adults, including those with Alzheimer’s disease, ~ actually for **people of all ages**. The most efficient and fair long-term care system is designed to meet the unique needs of individuals across the lifespan. To design a system based on need versus age or specific diagnosis is a guiding principle established in several state and national plans and widely held in regard. (In illustration, for people 65 years of age and older there is a CT Home Care Program for Elders without waiting lists but for people under age 65 there is merely a pilot program with significant waiting lists.)



Specific to the increased funding aspect, the CoA and others have long recommended that the state implement global budgeting. States that have the greatest success in rebalancing pool state and federal funds for both institutional and HCBS services into one budget with an overall spending cap. This practice, also known as “global budgeting,”

gives them flexibility to transfer long-term care funds between different programs to promote cost efficiency, provide care in the most appropriate setting, and establish a suitable balance between institutional and HCBS services.

Connecticut is indeed achieving cost savings with its “rebalancing” initiatives. In illustration recent data show that the costs of LTC for people transitioned from nursing homes under Money Follows the Person and into the community is less than 1/3 the cost of institutional care. At the same time Medicaid nursing home beds are being taken off line at a rapid pace, primarily due to nursing home closures. (Indications are that the Governor will soon announce a state initiative to reduce the number of Medicaid nursing home beds perhaps by 8,000.). Additionally, CT is receiving enhanced federal funds known as FMAP (close to \$200 million) through various rebalancing initiatives including MFP. So, instead of looking at it as an increase in funding – we’re suggesting that you consider it a necessary “reinvestment” of savings and enhanced federal dollars.

Regarding conducting an actual study, with respect, we assert that much of the information that would be featured in this study has already been published in various plans and research reports produced by the Department of Social Services, consultants, the CoA... However, if you would like the information in a condensed and specific format, the CoA has the expertise to do so. Truth be told, CoA’s limited resources would be far better spent on preparing such a study as it is consistent with our Results-based Accountability (RBA) mandate. Clearly, it is a much better use of our expertise than staffing a task force. (Two pieces of recently introduced legislation mandate the CoA to serve as administrative staff.) Though highly capable there are certain realities we face – CoA is an agency of three employees with a broadened mandate as of 2009 and a significantly reduced budget. We ask that to fully understand the scope of our work, kindly review our 2011 Results-Based Accountability report. Thank you.

HB 5440: An Act Concerning Visitation Rights for Grandparents and Other Persons ~ CoA Supports

As you know, the Commission on Aging was highly involved in this complex and emotionally charged issue from August 2011 through January 2012 as it served as the administrative staff for the Grandparents’ Visitation Rights Task Force (SA 11-12). The CoA worked closely with the esteemed co-chairs of the task force, Representative Serra and Attorney Linda Allard and 17 committed and fully engaged members of the task force, including Senator Prague, Senator Gerratana, Senator Kelly and Representative Wood, several attorneys and judges and grandparents.

Additionally, CoA staff listened to constituents and received countless pleas from those either in full support or strongly opposed, depending on their own experiences. Additionally, written testimony from dozens of people was submitted to the Task Force through the CoA office. As with any matters of the heart and related to families, it is fair to say that this issue brings out very strong emotions.

The Task Force was established pursuant to Special Act 11-12 and charged with examining:

1. legal and social issues related to grandparents access to visitation;
2. the impact of the loss of contact on families;
3. social supports which promote the continuation of these relationships; and
4. legislative proposals that are consistent with the state constitution.

The testimony, task force agendas, minutes, and recordings of the meetings, as well as the final report of the Task Force can all be found on the CoA website. www.cga.ct.gov/coa

Both the US Supreme Court decision *Troxel v. Granville* and the CT Supreme Court decision in *Roth v. Weston* have a significant affect on grandparents seeking visitation. There are also several other Supreme Court decisions that were reviewed and considered by the task force. The task force spent a majority of its time working on statute changes to CGS § 46b-59 so that the amended statute, if passed, would meet constitutional muster but also would make it less difficult for grandparents to access visitation with their grandchildren.

After much deliberation, debate and negotiations, the bill before you seeks to implement the recommendations of the Grandparent's Visitation Rights Task Force. We believe this bill will indeed help grandparents seeking visitation with their grandchildren while protecting the constitutional rights of parents and the best interest of the children.

This bill replaces the state's third-party child visitation statute (CGS § 46b-59), which the Connecticut Supreme Court ruled to be unconstitutional as applied (*Roth v. Weston*). Several of the bill's provisions codify the *Roth* holding by imposing heightened pleading and proof requirements on those seeking to maintain contact with a child whose fit parent or parents have cut off access. Others reenact provisions from the prior statute that did not raise constitutional concerns.

The bill lists factors courts can take into account when considering (1) whether an applicant has sufficiently alleged or proven that he or she has a parent-like relationship with the child, (2) what type of visitation is in a child's best interest, and (3) if an order allocating fees among some or all parties is appropriate.

We thank this committee and the legislature for tackling this difficult issue. We also would like to thank the co-chairs and members of the task force for their leadership and resolve.

Thank you for this opportunity to comment. We look forward to our continued work with you.

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