

TESTIMONY

Delivered by Deborah R. Hoyt, President and CEO
The Connecticut Association for Healthcare at Home

Before the Connecticut General Assembly Aging Committee

February 26, 2013

H.B. No. 6461

**An Act Concerning Presumptive Medicaid Eligibility for
The CT Home Care Program for the Elderly**

Honorable members of the Aging Committee, my name is Deborah Hoyt, President and CEO of the Connecticut Association for Healthcare at Home.

The Association represents 60 licensed and certified home health and hospice agencies that perform 5-million home health and community-based visits in our inner cities and rural Connecticut towns each year.

With a growing Connecticut workforce of 11,000 employees and skilled nurses, *we* are the *only* health providers that walk through the front doors of 14,000 state residents each day and understand the value that technology and interactive data communication brings to person-centered care.

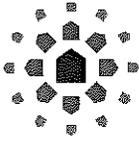
We SUPPORT Presumptive Eligibility to allow older adults who meet basic screening criteria and have completed an application for Medicaid to get immediate access to Community-based Long Term Care Services.

Presumptive Eligibility supports Governor Malloy's goal, and that of the Department of Social Services, for Connecticut to rebalance Medicaid expenditures from institutional to home and community-based care.

Clients would receive cost-effective services including nursing, home health care, adult day care, meals and medical transportation through the CT Home Care Program Medicaid Waiver without having to wait for their application to be fully processed.

Presumptive Eligibility would provide an incentive to expedite applications from individuals seeking long term care services by prioritizing community-based long term care. The current application process is so slow that clients are ending up in more costly institutionalized care while awaiting their eligibility approval.

The state of CT would save \$6,033 per month per client (x 2,157 clients = \$3,251,787 in savings per month total) if eligibility was presumed rather than delayed.



CONNECTICUT ASSOCIATION FOR
HEALTHCARE AT HOME

Long term care applications are filed when a person is in crisis or leaving a hospital. The time spent waiting for an eligibility decision is a dangerous time in terms of the client's health condition and the need for additional supports. If community-based services are not available to a client due to paperwork-related eligibility delays, the client has no other option than to re-enter critical care in a more costly healthcare setting – a nursing home or hospital.

We urge you to do the right thing for Connecticut residents who need care, the taxpayers who pay for that care, and save wasted healthcare dollars by passing H.B. 6461.

Thank you.