



*Amendments to the Connecticut Home Care Program for Elders and  
Personal Care Assistance Program Waivers  
Testimony before the Appropriations and Human Services Committees*

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Good morning Senators Harp and Slossberg, Representatives Abercrombie and Walker and members of the Appropriations and Human Services Committees. My name is Kathy Bruni and I am the program manager in the Alternate Care Unit of the Department of Social Services (DSS). I am joined by Dorian Long, DSS Social Work Services Manager. We are here today to seek your approval of proposed amendments to the Connecticut Home Care Program for Elders (CHCPE) and the Personal Care Assistance (PCA) waiver programs.

The waiver amendments before you today seek to comply with subsection (c) of section 17b-605a of the Connecticut General Statutes to transition individuals who are age 65 or older from the Personal Care Assistance waiver to the Connecticut Home Care Program for Elders. In addition, pursuant to P.A. 12-104, Adult Family Living is being added as a service option in both waivers and the MedConnect Medicaid coverage group (formerly called Medicaid for the Employed Disabled) is being added to the CHCPE waiver.

The department seeks to make the following three changes to the programs to support participants.

**Additional Service Option**

The department proposes to add Adult Family Living as a service option for both waivers. This service provides personal care and supportive services (e.g., homemaker, chore, attendant services, and meal preparation) that are furnished to waiver participants who reside in a private home by a principal caregiver who lives in the home. Adult Family Living is furnished to adults who receive these services in conjunction with residing in the home. This service may include 24-hour response capability to meet scheduled or unpredictable resident needs to provide supervision, safety and security. Service allocation is based on an individual's need for assistance with activities of daily living (ADLs) and instrumental activities of daily living

(IADLs), as well as cognitive or behavioral needs. Services also include social and recreational activities and cueing or reminders to take medications.

This change will provide program participants on both waivers with a community service option that is cost effective and will support the state's rebalancing efforts.

### **Age Limit**

The department proposes to transition current PCA waiver participants age 65 and older to the CHCPE Medicaid waiver by adding a 65-year-old age limit for PCA waiver participation.

Currently, there are 106 PCA waiver participants who are age 65 or older. There is a waitlist of 120 clients on the PCA waiver. Once we transition clients ages 65 and over to the CHCPE program, the PCA waitlist will be greatly reduced.

The CHCPE program does not have a waitlist and can easily accommodate these transitions. In addition, the CHCPE waiver has a broader service array and options for the PCA service including per diem, overnight, and agency-based services.

### **Add Coverage Group**

To support PCA Waiver participants who are currently eligible due to their participation in MedConnect, the CHCPE Waiver seeks to add this Medicaid coverage group to the waiver. This will ensure that these participants who are age 65 or older are able to receive ongoing support without losing employment and also make Medicaid eligibility more consistent across these waivers.

Thank you for the opportunity to testify before you today. I welcome your questions and comments.