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Written testimony of Anne Jasorkowski, Associate of Goldman, Gruder & Woods, LLC in support of H.B. No. 6543 (RAISED) AN ACT AMELIORATING THE DEBT OWED TO NURSING FACILITIES.

Good afternoon Senator Slossberg, Representative Abercrombie and to the members of the Human Services Committee. My name is Anne Jasorkowski, and I am a lifetime Milford resident and an attorney with Goldman, Gruder & Woods, LLC, and I represent multiple nursing homes across Connecticut, specifically in collections matters. I represented *Wilton Meadows in the Wilton Meadows v. Coratolo* case that came before the Supreme Court regarding the interpretation of C.G.S. §46b-37 and I testify here from that perspective in support of H.B. No. 6543 (RAISED) AN ACT AMELIORATING THE DEBT OWED TO NURSING FACILITIES.

My testimony will mainly address the legal and policy implications of Section 2, but I support HB 6543 in its entirety.

As to Section 2, together with Angelo Maragos from my firm, we commenced the action of *Wilton Meadows v. Coratolo*, 299 Conn. 819, 14 A.3d 982 (2011) against the wife of a resident who was denied Medicaid assistance because she had too many assets to qualify. In that case, the couple transferred all of their marital property and assets to the wife's name only, which were substantially in excess of the DSS allowable limits. The wife refused to spend down or use any of the funds standing in her name alone to pay for her husband's nursing home care. The husband's Medicaid application was eventually denied for being over assets, leaving Wilton Meadows with the bill. I have seen this far too often.

Many people do not realize that there are basically just three ways to pay for long term nursing home care: privately, Long-Term Care insurance, or Medicaid. Medicare pays for short term rehabilitation typically after a hospital stay. Given that most couples do not feel they can afford Long Term Care insurance, and therefore, do not purchase it, this leaves only private monies until the funds run out, then Medicaid for long term stays.

While most people do not plan on going into a nursing home, the reality is that today almost thirty thousand Connecticut residents rely on skilled nursing home care. Even with the State's focused attention on increasing the supply of home and community based options for our seniors, I fully expect we will continue to rely on nursing home care as a cost effective option given the aging of Connecticut's population. Prior to the Supreme Court decision in *Wilton Meadows v. Coratolo*, most of our society believed that spouses were jointly responsible for care, and it was not as much of an issue. After all, the provisions of food, medicine, and shelter

all are necessary for support and purpose of the spousal support statute was to require spouses to provide for their family support. In the aftermath of *Wilton Meadows v. Coratolo*, married spouses who willingly bring their spouses to a nursing home and ask them to care for them, have the ability to refuse to use marital assets to pay for the care, but moreover, disqualify the spouse who needs the care from qualifying for Medicaid. This leaves the cost of the care to befall the nursing homes.

The problem with C.G.S.46b-37 as written, is that DSS regulations require and count both spouses assets when determining Medicaid eligibility. The spouse who needs the nursing home care will not qualify until the marital assets are reduced within the allowable limits.

Contrary to the Supreme Court's concern, the application of joint spousal liability is not a violation of the patient's bill of rights, written to protect the rights of prospective nursing home residents and their access to nursing home facilities. See General Statutes § 19a-550, or General Statutes § 19a-533 (b), which prohibits discrimination against indigent applicants and requiring admission to nursing home on first come first serve basis. Our society cannot allow a married person with a spouse of substantial assets to be considered indigent. Under the proposed amendment, only spouses with assets in excess of the allowable DSS asset limits would be required to use their funds to pay for their spouses nursing home care. Any couple has the option of avoiding nursing home care by receiving homecare at home, but spouses are choosing to rely on nursing home care, leaving the cost of the care on the nursing home, and this burden is not sustainable.

There is no reasonable basis to exclude spouses from 46b-37. In the aftermath of the Connecticut Supreme Court's decision in *Wilton Meadows v. Coratolo*, I have personally experienced the situation where a wife with substantial assets, after having learned the outcome of *Wilton Meadows v. Coratolo*, stopped paying for her husband's nursing home care. Her husband was denied Medicaid because she refused to disclose her assets, and he had no way to pay since all of the assets were in the wife's name. The prospect of a spouse unfairly refusing to provide support for the care their spouses received in a skilled nursing home or rehabilitation center will be a common event unless the state legislature makes clear under Connecticut law, as proposed here, that spouses have a joint duty and liability to provide support for nursing home expenses.

I would be happy to answer any questions you may have.

Anne Jasorkowski, Esq.