



House of Representatives

General Assembly

File No. 585

February Session, 2014

House Bill No. 5325

House of Representatives, April 16, 2014

The Committee on Appropriations reported through REP. WALKER of the 93rd Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

AN ACT ELIMINATING THE HOME-CARE COST CAP.

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

1 Section 1. Subsection (a) of section 17b-342 of the 2014 supplement
2 to the general statutes is repealed and the following is substituted in
3 lieu thereof (*Effective July 1, 2014*):

4 (a) The Commissioner of Social Services shall administer the
5 Connecticut home-care program for the elderly state-wide in order to
6 prevent the institutionalization of elderly persons (1) who are
7 recipients of medical assistance, (2) who are eligible for such
8 assistance, (3) who would be eligible for medical assistance if residing
9 in a nursing facility, or (4) who meet the criteria for the state-funded
10 portion of the program under subsection (i) of this section. For
11 purposes of this section, a long-term care facility is a facility that has
12 been federally certified as a skilled nursing facility or intermediate care
13 facility. The commissioner shall make any revisions in the state
14 Medicaid plan required by Title XIX of the Social Security Act prior to
15 implementing the program. [The annualized cost of the community-

16 based services provided to such persons under the program shall not
17 exceed sixty per cent of the weighted average cost of care in skilled
18 nursing facilities and intermediate care facilities.] The program shall be
19 structured so that the net cost to the state for long-term facility care in
20 combination with the [community-based] services under the program
21 shall not exceed the net cost the state would have incurred without the
22 program. The commissioner shall investigate the possibility of
23 receiving federal funds for the program and shall apply for any
24 necessary federal waivers. A recipient of services under the program,
25 and the estate and legally liable relatives of the recipient, shall be
26 responsible for reimbursement to the state for such services to the
27 same extent required of a recipient of assistance under the state
28 supplement program, medical assistance program, temporary family
29 assistance program or supplemental nutrition assistance program.
30 Only a United States citizen or a noncitizen who meets the citizenship
31 requirements for eligibility under the Medicaid program shall be
32 eligible for home-care services under this section, except a qualified
33 alien, as defined in Section 431 of Public Law 104-193, admitted into
34 the United States on or after August 22, 1996, or other lawfully
35 residing immigrant alien determined eligible for services under this
36 section prior to July 1, 1997, shall remain eligible for such services.
37 Qualified aliens or other lawfully residing immigrant aliens not
38 determined eligible prior to July 1, 1997, shall be eligible for services
39 under this section subsequent to six months from establishing
40 residency. Notwithstanding the provisions of this subsection, any
41 qualified alien or other lawfully residing immigrant alien or alien who
42 formerly held the status of permanently residing under color of law
43 who is a victim of domestic violence or who has intellectual disability
44 shall be eligible for assistance pursuant to this section. Qualified aliens,
45 as defined in Section 431 of Public Law 104-193, or other lawfully
46 residing immigrant aliens or aliens who formerly held the status of
47 permanently residing under color of law shall be eligible for services
48 under this section provided other conditions of eligibility are met.

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note***State Impact:*** None***Municipal Impact:*** None***Explanation***

The bill eliminates the 60% cost cap for community based services under the Connecticut Home Care Program (CHCP). As this does not change the overall requirement that the program be cost neutral to the state, there is no fiscal impact. The bill will provide greater administrative flexibility within the current overall cost cap.

The Out Years***State Impact:*** None***Municipal Impact:*** None

OLR Bill Analysis**HB 5325*****AN ACT ELIMINATING THE HOME-CARE COST CAP.*****SUMMARY:**

The Connecticut Home Care Program for Elders (CHCPE) provides home health and community-based services to frail elders as an alternative to nursing home care. The program has state- and Medicaid waiver-funded components. This bill eliminates the program's statutory cost cap on community-based, waiver-funded services, which is currently 60% of the weighted average cost of care in skilled nursing and intermediate care facilities.

The bill also specifies that the state's cost for long-term facility care and all CHCPE services, not just the program's community-based services, cannot exceed the cost the state would have incurred without the program.

EFFECTIVE DATE: July 1, 2014

COMMITTEE ACTION

Human Services Committee

Joint Favorable Change of Reference
Yea 18 Nay 0 (03/11/2014)

Appropriations Committee

Joint Favorable
Yea 49 Nay 0 (04/01/2014)