



Testimony to the Human Services Committee

Presented by Mag Morelli, President of LeadingAge Connecticut

February 10, 2015

Regarding

- Senate Bill 852, An Act Concerning Presumptive Medicaid Eligibility for Home Care
- Senate Bill 862, An Act Concerning State Payment to Certain Facilities for Reserved Beds
- House Bill 6149, An Act Concerning Medicaid Coverage for Telemonitoring Services
- HB 6674, An Act Providing Financial Relief to Nursing Homes for Uncompensated Care
- HB 6690, An Act Concerning Nursing Home Facility Minimum Staffing Levels

Good afternoon Senator Moore, Representative Abercrombie, and members of the Human Services Committee. My name is Mag Morelli and I am the President of LeadingAge Connecticut, a statewide membership organization representing not-for-profit provider organizations serving older adults across the continuum of aging services, including not-for-profit skilled nursing facilities, home health care agencies, hospice agencies, adult day centers, assisted living agencies, senior housing and continuing care retirement communities. On behalf of LeadingAge Connecticut, I would like to submit the following testimony regarding several bills that are before you today.

Senate Bill 852, An Act Concerning Presumptive Medicaid Eligibility for the Connecticut Home Care Program for the Elderly

LeadingAge Connecticut thanks the Committee for raising this bill which brings attention to the eligibility determination backlog in the Connecticut Home Care Program for Elders. The delay in processing the long term care Medicaid applications for this segment of our vulnerable elderly population is preventing individuals in the community from receiving needed services in a timely manner and placing them at risk. We strongly support a resolution to this situation and have been working with the Department of Social Services toward that goal. We are hopeful that recent restructuring within the application processing structure will help to achieve efficiencies in the system. We would also be interested in a system of presumptive eligibility for applicants to the program if the Committee determines this to be a possible solution to the excessive delays in the eligibility process.

Senate Bill 862, An Act Concerning State Payment to Certain Facilities for Reserved Beds

LeadingAge Connecticut represents several not-for-profit residential care homes and we do not object to this proposed legislation.

House Bill 6149, An Act Concerning Medicaid Coverage for Telemonitoring Services

LeadingAge Connecticut supports this proposal to extend Medicaid coverage to a broader menu of home telemonitoring services. The development of policy at the state level to advance the use of appropriate aging-services technologies can transform the aging experience and enhance care and services for older adults. Safety technologies, health and wellness technologies, social connectedness technologies and electronic documentation technologies are all important aspects of aging services technologies.

LeadingAge Connecticut believes that technology will transform the aging experience and that telemedicine will play a crucial role in the future of aging services. While this is promising, we do remain cautious regarding the reimbursement for telemedicine and believe that precautions must be in place to ensure a standard of care in telemedicine that is the same as that required of all providers by state statute and regulation.

For the Committee's information, the following is a link to the *LeadingAge Center for Aging Services Technologies (CAST)* website which includes information and resources regarding the development, evaluation and adoption of emerging technologies that can improve the aging experience: <http://www.leadingage.org/CAST.aspx>

HB 6674, An Act Providing Financial Relief to Nursing Homes for Uncompensated Care

LeadingAge Connecticut supports this bill which would provide some level of relief to nursing homes that are experiencing extended periods of non-payment as the result of excessive delays in the Medicaid eligibility process. The bill would permit a nursing home to postpone payment of the \$21 a day nursing home user fee (provider tax) on a resident bed until such time as the nursing home is receiving Medicaid payment for the services provided for that resident. We strongly encourage the Committee to support this bill.

While improving, the state's Medicaid eligibility system is still not able to qualify long term care applications in a timely manner. We know that the Department of Social Services (DSS) is working on the issue and in fact, we have been working closely with DSS, but nursing homes still are often providing months and sometimes years of uncompensated care during prolonged periods of pending Medicaid eligibility.

This bill would acknowledge the burden of providing this uncompensated care and provide a temporary reprieve to providers by allowing them to delay paying the \$21 per bed per day nursing home provider tax on pending Medicaid beds. While the nursing home would still endure the financial stress of receiving no Medicaid payment for the bed, they would be relieved from advancing the state the \$21 a day tax payment. And this proposal should not have a fiscal impact since the state is not making any Medicaid payments for these pending residents during this time period.

HB 6690, An Act Concerning Nursing Home Facility Minimum Staffing Levels

LeadingAge Connecticut is pleased to support this proposal as it is currently drafted. The bill would raise the minimum nursing home staffing requirements that are currently outlined in the Public Health Code. While we support this bill, we do want to be sure that the Committee

understands that both the Public Health Code and federal oversight regulations currently require nursing homes to staff at a level that meets the needs of residents and authorize the Department of Public Health to assess penalties in certain cases when facilities fall short of staffing requirements and fail to employ sufficient staff to meet resident needs.

The bill also updates the manner in which we measure the staffing level by proposing a daily minimum ratio which is the same calculation used by the Centers for Medicare and Medicaid Services (CMS) on the Nursing Home Compare website and which recognizes the requirement to staff to the varying needs of the residents over a full day of care.

A similar bill was raised last session and at that time we had some concerns regarding the drafting of the bill. Those concerns have been met and we thank the Committee for raising this bill as it is currently drafted. We are pleased to lend our support to this proposal.

Thank you for this opportunity to testify and I would be glad to answer any questions.

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LeadingAge Connecticut is a membership organization representing mission-driven and not-for-profit provider organizations serving older adults across the continuum of care including nursing homes, residential care homes, housing for the elderly, continuing care retirement communities, adult day centers, home care and assisted living agencies. By continuing a tradition of mission-driven, consumer-centered management and competent, hands-on care, not-for-profits set the standard in the continuum of housing, care and services for the most vulnerable aging adults.