



General Assembly

Amendment

January Session, 2015

LCO No. 8594



Offered by:

REP. ABERCROMBIE, 83rd Dist.

SEN. MOORE, 22nd Dist.

REP. COOK, 65th Dist.

REP. WOOD, 141st Dist.

To: Subst. House Bill No. 5814

File No. 310

Cal. No. 192

"AN ACT CONCERNING A STUDY OF MEDICAID REIMBURSEMENT FOR HOME HEALTH CARE."

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. Subsection (a) of section 17b-242 of the general statutes is
4 repealed and the following is substituted in lieu thereof (*Effective July*
5 *1, 2015*):

6 (a) The Department of Social Services shall determine the rates to be
7 paid to home health care agencies and homemaker-home health aide
8 agencies by the state or any town in the state for persons aided or
9 cared for by the state or any such town. For the period from February
10 1, 1991, to January 31, 1992, inclusive, payment for each service to the
11 state shall be based upon the rate for such service as determined by the
12 Office of Health Care Access, except that for those providers whose

13 Medicaid rates for the year ending January 31, 1991, exceed the median
14 rate, no increase shall be allowed. For those providers whose rates for
15 the year ending January 31, 1991, are below the median rate, increases
16 shall not exceed the lower of the prior rate increased by the most
17 recent annual increase in the consumer price index for urban
18 consumers or the median rate. In no case shall any such rate exceed the
19 eightieth percentile of rates in effect January 31, 1991, nor shall any rate
20 exceed the charge to the general public for similar services. Rates
21 effective February 1, 1992, shall be based upon rates as determined by
22 the Office of Health Care Access, except that increases shall not exceed
23 the prior year's rate increased by the most recent annual increase in the
24 consumer price index for urban consumers and rates effective
25 February 1, 1992, shall remain in effect through June 30, 1993. Rates
26 effective July 1, 1993, shall be based upon rates as determined by the
27 Office of Health Care Access except if the Medicaid rates for any
28 service for the period ending June 30, 1993, exceed the median rate for
29 such service, the increase effective July 1, 1993, shall not exceed one
30 per cent. If the Medicaid rate for any service for the period ending June
31 30, 1993, is below the median rate, the increase effective July 1, 1993,
32 shall not exceed the lower of the prior rate increased by one and one-
33 half times the most recent annual increase in the consumer price index
34 for urban consumers or the median rate plus one per cent. The
35 Commissioner of Social Services shall establish a fee schedule for home
36 health services to be effective on and after July 1, 1994. The
37 commissioner may annually modify such fee schedule if such
38 modification is needed to ensure that the conversion to an
39 administrative services organization is cost neutral to home health care
40 agencies and homemaker-home health aide agencies in the aggregate
41 and ensures patient access. Utilization may be a factor in determining
42 cost neutrality. The commissioner shall increase the fee schedule for
43 home health services provided under the Connecticut home-care
44 program for the elderly established under section 17b-342, effective
45 July 1, 2000, by two per cent over the fee schedule for home health
46 services for the previous year. The commissioner may increase any fee
47 payable to a home health care agency or homemaker-home health aide

48 agency upon the application of such an agency evidencing
 49 extraordinary costs related to (1) serving persons with AIDS; (2) high-
 50 risk maternal and child health care; (3) escort services; or (4) extended
 51 hour services. The commissioner may increase any fee payable to a
 52 home health care agency or homemaker-home health aide agency
 53 upon the application of such agency evidencing financial hardship
 54 when such agency (A) has a patient census that is fifty per cent or more
 55 Medicaid patients, (B) is at risk of ceasing to provide services to the
 56 Medicaid population without such fee increase, (C) provides home
 57 care for pediatric patients, or (D) provides psychiatric home care
 58 services. In no case shall any rate or fee exceed the charge to the
 59 general public for similar services. A home health care agency or
 60 homemaker-home health aide agency which, due to any material
 61 change in circumstances, is aggrieved by a rate determined pursuant
 62 to this subsection may, within ten days of receipt of written notice of
 63 such rate from the Commissioner of Social Services, request in writing
 64 a hearing on all items of aggrievement. The commissioner shall, upon
 65 the receipt of all documentation necessary to evaluate the request,
 66 determine whether there has been such a change in circumstances and
 67 shall conduct a hearing if appropriate. The Commissioner of Social
 68 Services shall adopt regulations, in accordance with chapter 54, to
 69 implement the provisions of this subsection. The commissioner may
 70 implement policies and procedures to carry out the provisions of this
 71 subsection while in the process of adopting regulations, provided
 72 notice of intent to adopt the regulations is published in the Connecticut
 73 Law Journal not later than twenty days after the date of implementing
 74 the policies and procedures. Such policies and procedures shall be
 75 valid for not longer than nine months."

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2015	17b-242(a)