



**Substitute Senate Bill No. 135**

**Public Act No. 16-19**

***AN ACT CONCERNING REVISIONS TO HUSKY PLUS.***

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

Section 1. Section 17b-294a of the 2016 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(a) The commissioner shall, within available appropriations, establish a supplemental health program to be known as HUSKY Plus for [members of the subsidized portions of] HUSKY B members whose medical needs cannot be accommodated within the basic benefit package offered to members. The HUSKY Plus program shall supplement coverage for those medically eligible members with intensive physical health needs.

(b) Within available appropriations, the commissioner shall contract with one or more entities to (1) administer and operate the HUSKY Plus program, [ . Such entities shall be the same entities that the Department of Public Health contracts with to administer and operate the program under Title V of the Social Security Act. The advisory committee established by the Department of Public Health for Title V of the Social Security Act shall be the steering committee for such program, except that such committee shall include representatives of

**Substitute Senate Bill No. 135**

the Departments of Social Services and Children and Families] and (2) conduct an external quality review of the HUSKY Plus program not later than July 1, 2017.

(c) [The acuity standards or diagnostic eligibility criteria, or both, the service benefits package and the provider network for the HUSKY Plus program shall be consistent with that of Title V of the Social Security Act. Such] The service benefit package shall be supplemental to HUSKY B services and shall include powered wheelchairs. If a provider is not enrolled in the medical assistance program, the provider shall accept the medical assistance program rates as payment in full and such other conditions as the commissioner may specify.

(d) [The] Not later than July 1, 2017, the commissioner shall adopt regulations, in accordance with chapter 54, to (1) establish criteria and specify services for the HUSKY Plus program, and (2) establish a procedure for the appeal of a denial of coverage under the HUSKY Plus program. [Such regulations shall provide that (1) an appeal of a denial of coverage for a medically eligible member shall be taken to the steering committee, and (2) a medically eligible member may appeal the decision of any such steering committee to the commissioner] Such regulations shall state that the HUSKY Plus program shall give priority in such program to members with household incomes at or below two hundred forty-nine per cent of the federal poverty level.

[(e) The commissioner shall contract for an external quality review of the HUSKY Plus program.]

[(f)] (e) On and after the date on which any medically eligible member begins receiving benefits under the HUSKY Plus program, such member shall not be eligible for services under Title V of the Social Security Act, with the exception of respite care services.

[(g) The commissioner shall adopt regulations, in accordance with

***Substitute Senate Bill No. 135***

the provisions of chapter 54, to establish criteria and specify services for the HUSKY Plus program. Such regulations shall state that the HUSKY Plus program shall give priority in such program to members with household incomes at or below two hundred forty-nine per cent of the federal poverty level.]

[(h)] (f) As used in this section, "medically eligible member" means any member with intensive physical health needs [who meets the acuity standards or diagnostic eligibility criteria adopted by the commissioner regarding the acuity, diagnosis, functional impairment and intensive service needs of the member] whose medical needs cannot be met within the HUSKY B benefits offered to members.

Approved May 6, 2016