



Senate

General Assembly

File No. 87

February Session, 2018

Substitute Senate Bill No. 157

Senate, March 28, 2018

The Committee on Aging reported through SEN. MCCRORY of the 2nd Dist. and SEN. KELLY of the 21st Dist., Chairpersons of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT REDUCING PARTICIPANT COSTS AND EXPANDING ELIGIBILITY FOR THE CONNECTICUT HOME-CARE PROGRAM FOR THE ELDERLY.

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

1 Section 1. Subsection (i) of section 17b-342 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective July*
3 *1, 2018*):

4 (i) (1) On and after July 1, [2015] 2018, the Commissioner of Social
5 Services shall, within available appropriations, administer a state-
6 funded portion of the program for persons (A) who are sixty-five years
7 of age and older; (B) who are inappropriately institutionalized or at
8 risk of inappropriate institutionalization; (C) whose income is less than
9 or equal to the amount allowed under subdivision (3) of subsection (a)
10 of this section; and (D) whose assets, if single, do not exceed [one
11 hundred fifty per cent of the federal minimum community spouse
12 protected amount pursuant to 42 USC 1396r-5(f)(2) or, if married, the

13 couple's assets do not exceed two hundred per cent of said community
14 spouse protected amount] forty thousand dollars or, if married, sixty-
15 five thousand dollars. For program applications received by the
16 Department of Social Services for the fiscal years ending June 30, 2016,
17 and June 30, 2017, only persons who require the level of care provided
18 in a nursing home shall be eligible for the state-funded portion of the
19 program, except for persons residing in affordable housing under the
20 assisted living demonstration project established pursuant to section
21 17b-347e who are otherwise eligible in accordance with this section.

22 (2) Except for persons residing in affordable housing under the
23 assisted living demonstration project established pursuant to section
24 17b-347e, as provided in subdivision (3) of this subsection, any person
25 whose income is at or below two hundred per cent of the federal
26 poverty level and who is ineligible for Medicaid shall contribute [nine]
27 seven per cent of the cost of his or her care. Any person whose income
28 exceeds two hundred per cent of the federal poverty level shall
29 contribute [nine] seven per cent of the cost of his or her care in
30 addition to the amount of applied income determined in accordance
31 with the methodology established by the Department of Social Services
32 for recipients of medical assistance. Any person who does not
33 contribute to the cost of care in accordance with this subdivision shall
34 be ineligible to receive services under this subsection. Notwithstanding
35 any provision of sections 17b-60 and 17b-61, the department shall not
36 be required to provide an administrative hearing to a person found
37 ineligible for services under this [subsection] subdivision because of a
38 failure to contribute to the cost of care.

39 (3) Any person who resides in affordable housing under the assisted
40 living demonstration project established pursuant to section 17b-347e
41 and whose income is at or below two hundred per cent of the federal
42 poverty level, shall not be required to contribute to the cost of care.
43 Any person who resides in affordable housing under the assisted
44 living demonstration project established pursuant to section 17b-347e
45 and whose income exceeds two hundred per cent of the federal
46 poverty level, shall contribute to the applied income amount

47 determined in accordance with the methodology established by the
 48 Department of Social Services for recipients of medical assistance. Any
 49 person whose income exceeds two hundred per cent of the federal
 50 poverty level and who does not contribute to the cost of care in
 51 accordance with this subdivision shall be ineligible to receive services
 52 under this subsection. Notwithstanding any provision of sections 17b-
 53 60 and 17b-61, the department shall not be required to provide an
 54 administrative hearing to a person found ineligible for services under
 55 this [subsection] subdivision because of a failure to contribute to the
 56 cost of care.

57 (4) The annualized cost of services provided to an individual under
 58 the state-funded portion of the program shall not exceed fifty per cent
 59 of the weighted average cost of care in nursing homes in the state,
 60 except an individual who received services costing in excess of such
 61 amount under the Department of Social Services in the fiscal year
 62 ending June 30, 1992, may continue to receive such services, provided
 63 the annualized cost of such services does not exceed eighty per cent of
 64 the weighted average cost of such nursing home care. The
 65 commissioner may allow the cost of services provided to an individual
 66 to exceed the maximum cost established pursuant to this subdivision
 67 in a case of extreme hardship, as determined by the commissioner,
 68 provided in no case shall such cost exceed that of the weighted cost of
 69 such nursing home care.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2018	17b-342(i)

Statement of Legislative Commissioners:

In Section 1, the effective date was changed to July 1, 2018, for consistency with other provisions of the section.

AGE Joint Favorable Subst. -LCO

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:

Agency Affected	Fund-Effect	FY 19 \$	FY 20 \$
Social Services, Dept.	GF - Cost	3 million	3.6 million

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill results in a state cost of approximately \$3 million in FY 19 and \$3.6 million in FY 20 associated with increasing eligibility and reducing cost sharing for the Connecticut Home Care Program for Elders (CHCPE). Increasing the asset limit (from \$37,080 to \$40,000 for individuals and from \$49,440 to \$65,000 for couples) is anticipated to result in a cost of approximately \$2.1 million in FY 19 and \$2.7 million in FY 20. Decreasing participant cost sharing for the program, from 9% to 7%, results in increased state costs of approximately \$850,000 in FY 19 and FY 20.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to program enrollment and service utilization.

Sources: Department of Social Services Caseload Information

OLR Bill Analysis**SB 157*****AN ACT REDUCING PARTICIPANT COSTS AND EXPANDING ELIGIBILITY FOR THE CONNECTICUT HOME-CARE PROGRAM FOR THE ELDERLY.*****SUMMARY**

Starting July 1, 2018, this bill expands eligibility for the state-funded portion of the Connecticut Home Care Program for Elders (CHCPE) by increasing asset limits to \$40,000 if single and \$65,000 if married. Current law limits an eligible individual's assets to 150% of the minimum community spouse protected amount (CSPA) if single or 200% if married (currently \$37,080 and \$49,440, respectively). The bill also eliminates annual adjustments to these asset limits by removing the link to the CSPA, which is updated annually.

Additionally, the bill reduces the required co-payment from nine percent to seven percent of the cost of care for participants in the state-funded portion of CHCPE who do not live in affordable housing under certain subsidized housing programs. By law, participants with incomes greater than 200% of the federal poverty level (FPL) must also contribute an applied income amount determined by the Department of Social Services. Applied income is calculated by subtracting certain allowances (e.g., for personal needs and spousal support) from resident's gross income. In 2018, 200% of the FPL is \$24,280 for an individual and \$32,920 for a family of two.

The bill also makes technical changes.

EFFECTIVE DATE: July 1, 2018

BACKGROUND***Connecticut Home Care Program for Elders***

CHCPE provides a range of home and community-based services for individuals age 65 and older who are at risk for institutionalization. In comparison to the Medicaid waiver component, the state-funded portion of the program has no income limit and has higher asset limits. The state has authority to limit program enrollment or establish wait lists based on available resources.

COMMITTEE ACTION

Aging Committee

Joint Favorable

Yea 12 Nay 0 (03/15/2018)